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Form 990-PF

Department of the Treasury

Internal Revenue Service

As Filed Data -

# **Return of Private Foundation**

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

DLN: 93491188004080 OMB No. 1545-0052

2019

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

			► Go to <u>u</u>	/ww.irs.gov/Form990PF	for instructions an	d the	latest informa	ation.	pen to Public Inspection
or	caler	ndar year 20	19, or tax yea	r beginning 01-01-20	)19 , a	nd er	nding 12-31-	2019	
		ındation	_				A Employer id	entification numb	er
		S M & ESTHER PER DUNDATION	RLSTEIN				04-6351051		
		l street (or P.O. bo 306 MAIN ST STE		not delivered to street address)	Room/suite		, i	mber (see instruction	nns)
		, state or province R, MA 016150034		r foreign postal code			(508) 791-0901 C If exemption	application is pendii	ng, check here
		I klask samba			6				
s Cr	теск аг	I that apply:	☐ Final return	☐ Initial return of a☐ Amended return☐	former public charity		2. Foreign or	ganizations, check h ganizations meeting k here and attach co	the 85%
1 Ch	neck ty	pe of organizati	Address char on: Section	nge Name change  501(c)(3) exempt private	foundation			undation status was n 507(b)(1)(A), che	
	Section	1 4947(a)(1) noi	nexempt charitab	le trust 🔲 Other taxabl	e private foundation		1		
of	year (f	xet value of all a rom Part II, col. ▶\$ 660,995		J Accounting method:  Other (specify) (Part I, column (d) must	✓ Cash ☐ Accru	ıal		ation is in a 60-mont n 507(b)(1)(B), che	
Pa	rt I	of amounts in c		Expenses (The total (d) may not necessarily ee 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, schedule)	gifts, grants, etc.	, received (attach					(33311 24313 311117)
	2		the foundation is	<b>not</b> required to attach					
	3		vings and tempora	ary cash investments					
	4		interest from sec	•	20,847	,	20,847		
	5a	Gross rents							
	b	Net rental inco	me or (loss)						
ne	6a	Net gain or (lo	ss) from sale of a	ssets not on line 10	2,225	i .			
Revenue	b	Gross sales pri	ice for all assets o	on line 6a 2,329					
Re	7	Capital gain ne	et income (from P	art IV, line 2)			2,225		
	8	Net short-term	capital gain .						
	9	Income modifi	cations						
	10a	Gross sales les	s returns and allo	owances					
	b	Less: Cost of g							
	С	Gross profit or	(loss) (attach sch	nedule)					
	11	Other income	(attach schedule)		<b>9</b> 55	5	55		
	12	Total. Add line	es 1 through 11		23,127	,	23,127		
	13	Compensation	of officers, direct	ors, trustees, etc.	C	)	0		(
	14		e salaries and wa	-					
es	15		• •	ts					
ens	16a	• ,	ach schedule) .						
Expenses	b	-	es (attach schedul	,	2,464	<u> </u>	2,464		(
ō TI	C	Other profession	onal fees (attach	schedule)	6,340		6,340		(
ع 1	17	Interest							
35	18	•	schedule) (see ins	•					
Ξ	19	Depreciation (a	attach schedule) a	and depletion					
€	20	Occupancy .							
ב ב	21		•	igs					
ᡖ	22								
<u>5</u>	23		-	e)	274		274		'
Operating and Administrative	24		_	trative expenses.					
<u>g</u>			-		9,078	1	9,078		
_	25		gifts, grants paid		42,437				42,43
	26	Total expense 25	es and disburse	ments. Add lines 24 and	51,515	<u> </u>	9,078		42,437
	27	Subtract line 2	6 from line 12:		51,313		2,070		.2,137
	а	Excess of rev	enue over expe	nses and					
	ь	disbursement		gative, enter -0-)	-28,388		44.040		
			-	tive, enter -0-)			14,049		

Cat. No. 11289X

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Attached schedules and amounts in the description column

Beginning of year

576,426

1

2

3

4

5

6

604,814

-28,388

576,426

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0

0

604,814

Page 2

End of year

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Accounts receivable

3

30

Part III

2

3

4

5

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

Other increases not included in line 2 (itemize)

Enter amount from Part I, line 27a

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

Decreases not included in line 2 (itemize) ▶

Total liabilities and net assets/fund balances (see instructions) .

Total net assets or fund balances at beginning of year—Part II, column (a), line 29 (must agree with end-

Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 29

**Analysis of Changes in Net Assets or Fund Balances** 

		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 ▶			
S	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			
As	10a	Investments—U.S. and state government obligations (attach schedule)			
	b	Investments—corporate stock (attach schedule)	382,229	380,409	462,602
	С	Investments—corporate bonds (attach schedule)	179,780	178,544	180,920
	11	Investments—land, buildings, and equipment: basis ▶			
		Less: accumulated depreciation (attach schedule) ▶			
	12	Investments—mortgage loans			
	13	Investments—other (attach schedule)			
	14	Land, buildings, and equipment: basis ▶			
		Less: accumulated depreciation (attach schedule) ▶			
	15	Other assets (describe ▶)	<b>%</b> J 875	<b>9</b>	<b>9</b>
	16	Total assets (to be completed by all filers—see the			_
		instructions. Also, see page 1, item I)	604,814	576,426	660,995
	17	Accounts payable and accrued expenses			
	18	Grants payable			
ies	19	Deferred revenue			
oi lit	20	Loans from officers, directors, trustees, and other disqualified persons			
Liabilities	21	Mortgages and other notes payable (attach schedule)			
_	22	Other liabilities (describe)			
	23	Total liabilities(add lines 17 through 22)	0	0	
Š		Foundations that follow FASB ASC 958, check here ▶			
nce		and complete lines 24, 25, 29 and 30.			
ala	24	Net assets without donor restrictions			
Fund Balances	25	Net assets with donor restrictions			
unc		Foundations that do not follow FASB ASC 958, check here 🕨 🗹			
r Fi		and complete lines 26 through 30.			
s or	26	Capital stock, trust principal, or current funds	604,814	576,426	
Assets	27	Paid-in or capital surplus, or land, bldg., and equipment fund	0	0	
As	28	Retained earnings, accumulated income, endowment, or other funds	0	0	
Net	29	Total net assets or fund balances (see instructions)	604,814	576,426	
2					

Page **3** 

	the kind(s) of property sold (e.g., ehouse; or common stock, 200 shs		(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1 a FIRST FINANCIAL TRUST			Р		
<b>b</b> CAPITAL GAINS DIVIDEND	)S		Р		
С					
d					
<u>е</u>					
	(f)		(g)		h)
<b>(e)</b> Gross sales price	Depreciation allowed (or allowable)	Cost or	other basis ense of sale	Gain d	or (loss) i) minus (g)
a	57		104	1	-47
<b>b</b> 2	,272				2,272
С					
d					
e					_
	showing gain in column (h) and ow	ned by the foundation	on 12/31/69		71)
Complete only for assets s	(i)		(k)		( <b>I)</b> h) gain minus
(i) F.M.V. as of 12/31/69	Adjusted basis as of 12/31/69	Excess	of col. (i) . (j), if any	col. (k), but not	less than -0-) <b>or</b> om col.(h))
a			, , , , , , , , , , , , , , , , , , ,		-47
b					2,272
С					
d					_
e					_
	ain or (loss) as defined in sections 1 I, line 8, column (c) (see instruction	. , . ,	· }	3	2,225
	nder Section 4940(e) for Re				
(For optional use by domestic pri	vate foundations subject to the sec	ction 4940(a) tax on ne	et investment incor	ne.)	
If section 4940(d)(2) applies, lea	eve this part blank.				
	section 4942 tax on the distributal qualify under section 4940(e). Do			!?	es 🗹 No
	ount in each column for each year;	see instructions before	making any entrie		
(a) Base period years Calendar year (or tax year beginning in)	<b>(b)</b> Adjusted qualifying distributions	<b>(c)</b> Net value of noncharitab	le-use assets	<b>(d)</b> Distribution rat (col. (b) divided by o	
2018	42,641		636,138		0.067031
2017	42,000		702,944		0.059749
2016	42,000		681,922		0.061591
2015	41,732		680,851		0.061294
2014	41,807		701,383		0.059607
2 Total of line 1, column (d)	)		2		0.309272
number of years the found	for the 5-year base period—divide I lation has been in existence if less charitable-use assets for 2019 from	than 5 years	.0, or by the 3		0.061854
		•	5	1	620,329
. , , ,			6	1	38,370
	nt income (1% of Part I, line 27b)			+	140
	on Comp Book VIII Pro 4			1	38,510
	ns from Part XII, line 4 , ater than line 7, check the box in Pa			 ng a 1% tax rate. Se	42,437 se the Part VI
				_	000 PE (2010)

Form	990-PF (20	19)								Pag	e <b>6</b>
Pai	rt VII-B	Statements Reg	garding	Activities for Which	Form 4720 May Be	Required (continue	d)				_
5a	During the	year did the foundat	ion pay o	r incur any amount to:					Ye	es N	lo
	(1) Carry	on propaganda, or ot	or otherwise attempt to influence legislation (section 4945(e))?					ا ملا			
	(2) Influe	nce the outcome of a	ny specific	public election (see sec	tion 4955); or to carry	1es	ш.	`			
	on, dir	ectly or indirectly, an	ny voter re	gistration drive?		Yes	<b>✓</b> 1	No O			
	(3) Provid	le a grant to an indivi	dual for tr	avel, study, or other sim	ilar purposes?	☐ Yes	<b>✓</b> 1	No			
		-		her than a charitable, etc	· -						
				tions		· · Yes	<b>✓</b> 1	No			
				eligious, charitable, scien	* **	_	_				
<b>b</b>			•	ention of cruelty to child		⊔ Yes	<b>✓</b> 1	oV			
<b>b</b> If any answer is "Yes" to 5a(1)–(5), did <b>any</b> of the Regulations section 53.4945 or in a current notice r									ь		
Organizations relying on a current notice regarding disaster assistance check						_	· 	F	-		—
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the											
ŭ		·		sponsibility for the grant	•		П.	_			
		· ·		y Regulations section 53.		⊔ Yes	Ш	No			
6a				ive any funds, directly or		ums on					
								.			
b				premiums, directly or inc		I I Yes	. <b>'</b> '		ь	N	lo
	If "Yes" to	6b, file Form 8870.									
7a	At any tim	e during the tax year	, was the	foundation a party to a p	prohibited tax shelter tra	nsaction?	<b>V</b>	ا ملا			
b	If "Yes", d	id the foundation rece	eive any p	roceeds or have any net	income attributable to the	ne transaction?		" _ 7	b		
8		_		960 tax on payment(s) o							
	excess par	achute payment duri	ng the ye	ar?		· · 🔲 Yes	<b>✓</b> 1	vo └			
Pai			ut Offic	ers, Directors, Trus	tees, Foundation Ma	anagers, Highly Pai	d Em	ploye	es,		
		and Contractors									
_1_	List all of	ficers, directors, tru		undation managers a	•		<del>- 1</del>				
	(a) Na	me and address	(	<ul><li>b) Title, and average hours per week</li></ul>	(c) Compensation (If not paid, enter	(d) Contributions to employee benefit plans		<b>(e)</b> Ex			
	(,			devoted to position	-0-)	deferred compensation		othe	r allow	ances	
	JANE SHAPI		TRUS	TEE	0	)	0				0
	ORENCE STRE TNUT HILL, M		1.00								
	EL BODKINS		TRUS	TEE	0		0				0
709 C	ADIZ ROAD		1.00								_
	E, FL 34286				_						_
	MORROCCO .IDLE PATH CI	IDCLE	TRUS 1.00	IEE	0		이				0
	INGHAM, MA										
2	Compensa	ation of five highes	t-paid en	ployees (other than t	hose included on line			e, ente	r "NO	NE."	
(a)	Name and a	ddress of each emplo	wee naid	(b) Title, and average		(d) Contributions to employee benefit		(e) Exp	ence a	ccoun	+
(4)		ore than \$50,000	yee para	hours per week devoted to position	(c) Compensation	plans and deferred			allowa		٠,
				devoted to position		compensation					
NON											
							_				—
											—
							+				—
							$\dashv$				—
Tota	I number of	other employees pai	d over \$5	0,000	<del></del>	<del> •</del>	$\dashv$				0
		. ,						Form 5	990-P	F (20	

Form 990-PF (2019)		Page <b>7</b>
Part VIII Information About Officers, Directors, Trustees, Fou and Contractors (continued)	indation Managers, Highly P	Paid Employees,
3 Five highest-paid independent contractors for professional services (	see instructions). If none, ente	r "NONE".
(a) Name and address of each person paid more than \$50,000	<b>(b)</b> Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services		<b>&gt;</b> 0
Part IX-A Summary of Direct Charitable Activities		0
List the foundation's four largest direct charitable activities during the tax year. Include relevant organizations and other beneficiaries served, conferences convened, research papers produced,	statistical information such as the number	er of Expenses
1 N/A - NONE		0
2		
3		
4		
Part IX-B Summary of Program-Related Investments (see instr	ructions)	
Describe the two largest program-related investments made by the foundation during the tax	x year on lines 1 and 2.	Amount
1 N/A - NONE		0
2		
All other program-related investments. See instructions.		
3 📆		0
Total. Add lines 1 through 3		• 0
		Form <b>990-PF</b> (2019)

2a |

2b

organizations check here 

and do not complete this part.)

Tax on investment income for 2019 from Part VI, line 5. . . . . .

Income tax for 2019. (This does not include the tax from Part VI.). . .

Qualifying Distributions (see instructions)

Amounts set aside for specific charitable projects that satisfy the:

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

Distributable amount before adjustments. Subtract line 2c from line 1. . . . . . . . . . . . . . . .

Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1. . .

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

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

income. Enter 1% of Part I, line 27b. See instructions.

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

Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:

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

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

Page 8

31.016

140

30,876

30.876

30.876

42,437

42,437

42,297

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140

2c

3

4

5

6

7

1a

1b

2

3a 3b

4

5

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Part XI

1

2a

3

4 5

6

1

2

3

4

5

b

Part XII

a From 2014. . . . .

**b** From 2015. . . . . c From 2016. . .

d From 2017. . . . .

e From 2018. . . . .

indicated below:

1 Distributable amount for 2019 from Part XI, line 7 2 Undistributed income, if any, as of the end of 2019: a Enter amount for 2018 only. . . . . . Excess distributions carryover, if any, to 2019:

f Total of lines 3a through e. . . . . . . .

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

same amount must be shown in column (a).)

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

a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5 **b** Prior years' undistributed income. Subtract 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 . . . . . . . . . . . . . . . . e Undistributed income for 2018. Subtract line 4a from line 2a. Taxable amount—see instructions . . . . . . . f Undistributed income for 2019. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2020 . . . . . . 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) . . .

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

9 Excess distributions carryover to 2020.

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. . .

4 Qualifying distributions for 2019 from Part XII, line 4: ▶ \$ a Applied to 2018, but not more than line 2a **b** Applied to undistributed income of prior years (Election required—see instructions). . . . . Page 9

30,876

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_	_	_	•	•	ν-	_	_	
ľ	3	v	П	ī	7	Г		
L	1	Λ		-		ı		

Par

0-PF	(20	1	9)	

= (20	019)	
	Undistributed Income (see instructions)	

F (20	019)	
11	Undistributed Income	(see instructions)

uted Income (see instructions)					
	(a)				

7.124 8,045

9.392

7.155 11,252

> 8.045 9,392

> 7.155

11,252

11.561

Corpus

42.968

11.561

54,529

7.124

47,405

(b)

Years prior to 2018

(c)

2018

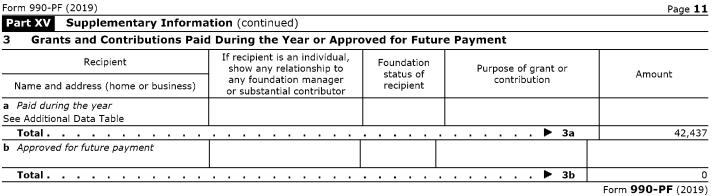
2019	
	30,8

2019	
	30,876

30,876

c Treated as distributions out of corpus (Election **d** Applied to 2019 distributable amount. . . . . e Remaining amount distributed out of corpus **5** Excess distributions carryover applied to 2019. 6 Enter the net total of each column as

- - **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:



iter gross	amounts unless otherwise indicated.	Unrelated b	usiness income	Excluded by section	n 512, 513, or 514	(e) Related or exempt
L Program	service revenue:	(a) Business code	<b>(b)</b> Amount	(c) Exclusion code	( <b>d)</b> Amount	function income (See instructions.)
d						
	nd contracts from government agencies					
	ship dues and assessments					
	on savings and temporary cash					
investme	ents			14	20,847	
	al income or (loss) from real estate:			14	20,847	
	nanced property					
	bt-financed property					
	al income or (loss) from personal property vestment income.			14	55	
	(loss) from sales of assets other than			17		
inventor				18	2,225	
	me or (loss) from special events:					
	rofit or (loss) from sales of inventory evenue: a					
	vende. d					
с						
d						
е			0		22.127	,
e ! Subtotal	l. Add columns (b), (d), and (e).		0		23,127 <b>3</b>	
e Subtotal Total. A (See wor	l. Add columns (b), (d), and (e)	lations.)		1	23,127 <b>3</b>	
e Subtotal Total. A (See wor Part XVI	Add columns (b), (d), and (e)  I. Add columns (b), (d), and (e)  I. Add line 12, columns (b), (d), and (e)  I. Add line 13 instructions to verify calculated the columns of activities to the columns of activities of activities to the columns of activities to the columns of activities a	lations.) le Accomplisi	nment of Exemp	ot Purposes	3	23,127
e Subtotal Total. A (See wor art XVI	I. Add columns (b), (d), and (e)	lations.)  e Accomplisi income is report	nment of Exempled in column (e) of	1  pt Purposes  Part XVI-A contribu	3	23,127
e Subtotal Total. A (See wor art XVI- ine No.	Add columns (b), (d), and (e)  dd line 12, columns (b), (d), and (e)  ksheet in line 13 instructions to verify calcul  Relationship of Activities to th  Explain below how each activity for which	lations.)  e Accomplisi income is report	nment of Exempled in column (e) of	1  pt Purposes  Part XVI-A contribu	3	23,127
e Subtotal Total. A (See wor art XVI- ine No.	I. Add columns (b), (d), and (e)	lations.)  e Accomplisi income is report	nment of Exempled in column (e) of	1  pt Purposes  Part XVI-A contribu	3	23,127
e Subtotal Total. A (See wor art XVI- ine No.	I. Add columns (b), (d), and (e)	lations.)  e Accomplisi income is report	nment of Exempled in column (e) of	1  pt Purposes  Part XVI-A contribu	3	23,127
eSubtotal Total. A (See wor art XVI-	I. Add columns (b), (d), and (e)	lations.)  e Accomplisi income is report	nment of Exempled in column (e) of	1  pt Purposes  Part XVI-A contribu	3	23,127
e Subtotal Total. A (See wor art XVI-	I. Add columns (b), (d), and (e)	lations.)  e Accomplisi income is report	nment of Exempled in column (e) of	1  pt Purposes  Part XVI-A contribu	3	23,127
eSubtotal Total. A (See wor art XVI-	I. Add columns (b), (d), and (e)	lations.)  e Accomplisi income is report	nment of Exempled in column (e) of	1  pt Purposes  Part XVI-A contribu	3	23,127
eSubtotal Total. A (See wor art XVI- ne No.	I. Add columns (b), (d), and (e)	lations.)  e Accomplisi income is report	nment of Exempled in column (e) of	1  pt Purposes  Part XVI-A contribu	3	23,127
e Subtotal Total. A (See wor art XVI-	I. Add columns (b), (d), and (e)	lations.)  e Accomplisi income is report	nment of Exempled in column (e) of	1  pt Purposes  Part XVI-A contribu	3	23,127
eSubtotal Total. A (See wor art XVI- ne No.	I. Add columns (b), (d), and (e)	lations.)  e Accomplisi income is report	nment of Exempled in column (e) of	1  pt Purposes  Part XVI-A contribu	3	23,127
eSubtotal Total. A (See wor art XVI-	I. Add columns (b), (d), and (e)	lations.)  e Accomplisi income is report	nment of Exempled in column (e) of	1  pt Purposes  Part XVI-A contribu	3	23,127
eSubtotal Total. A (See wor art XVI-	I. Add columns (b), (d), and (e)	lations.)  e Accomplisi income is report	nment of Exempled in column (e) of	1  pt Purposes  Part XVI-A contribu	3	23,127
eSubtotal Total. A (See wor art XVI-	I. Add columns (b), (d), and (e)	lations.)  e Accomplisi income is report	nment of Exempled in column (e) of	1  pt Purposes  Part XVI-A contribu	3	23,127
eSubtotal Total. A (See wor art XVI-	I. Add columns (b), (d), and (e)	lations.)  e Accomplisi income is report	nment of Exempled in column (e) of	1  pt Purposes  Part XVI-A contribu	3	23,127
eSubtotal Total. A (See wor art XVI-	I. Add columns (b), (d), and (e)	lations.)  e Accomplisi income is report	nment of Exempled in column (e) of	1  pt Purposes  Part XVI-A contribu	3	23,127
e Subtotal Total. A (See wor art XVI-	I. Add columns (b), (d), and (e)	lations.)  e Accomplisi income is report	nment of Exempled in column (e) of	1  pt Purposes  Part XVI-A contribu	3	23,127
eSubtotal Total. A (See wor art XVI-	I. Add columns (b), (d), and (e)	lations.)  e Accomplisi income is report	nment of Exempled in column (e) of	1  pt Purposes  Part XVI-A contribu	3	23,127
e Subtotal Total. A (See wor art XVI-	I. Add columns (b), (d), and (e)	lations.)  e Accomplisi income is report	nment of Exempled in column (e) of	1  pt Purposes  Part XVI-A contribu	3	23,127
e Subtotal Total. A (See wor art XVI- ine No.	I. Add columns (b), (d), and (e)	lations.)  e Accomplisi income is report	nment of Exempled in column (e) of	1  pt Purposes  Part XVI-A contribu	3	23,127
e Subtotal Total. A (See wor art XVI-	I. Add columns (b), (d), and (e)	lations.)  e Accomplisi income is report	nment of Exempled in column (e) of	1  pt Purposes  Part XVI-A contribu	3	23,127

orm 9	90-PF (2												Pa	ge <b>13</b>
Part	XVII	Information Re Exempt Organia		ansfe	ers To a	nd Tran	nsactio	ns and	Relatio	nships With No	ncharit	able		
		anization directly or in- han section 501(c)(3)									ion 501		Yes	No
a Tra	nsfers fi	rom the reporting foun	dation to a no	onchar	itable exe	empt orga	nization	of:	-					
(1)	Cash.											1a(1)		No
(2)	Other	assets										1a(2)		No
<b>b</b> Oth	ner trans	actions:												
(1)	Sales	of assets to a nonchari	table exempt	organ	nization.							1b(1)		No
(2)	) Purcha	ases of assets from a n	oncharitable	exemp	ot organiz	ation						1b(2)		No
(3)	) Rental	of facilities, equipmer	nt, or other as	sets.								1b(3)		No
(4)	) Reimb	ursement arrangemen	ts									1b(4)		No
(5)	Loans	or loan guarantees.										1b(5)		No
(6)	) Perforr	nance of services or m	embership or	fundra	aising soli	icitations.						1b(6)		No
c Sha	aring of	facilities, equipment, n	nailing lists, o	ther a	ssets, or	paid emp	loyees.					1c		No
of t	the good any trans	er to any of the above ls, other assets, or services saction or sharing arra (b) Amount involved	vices given by	the row in c	eporting f column <b>(d</b>	foundation ) the valu	n. If the f ue of the	foundati goods, o	on receive other asse	d less than fair ma	irket valu eived.	e	ngemen	ts
<u> </u>		(-,	(-)			,		(,			,		<u> </u>	
	_													
des	cribed i	dation directly or indirent section 501(c) (other mplete the following so	than section		c)(3)) or ii	n section	527?.				_	☑ No		
		(a) Name of organization	n		(b	) Type of o	organizatio	'n		(c) Descriptio	n of relation	nsnip		
	_													
Sign	of my which	r penalties of perjury, / knowledge and belief n preparer has any kno	, it is true, co								pased on	all infor	mation	n of
Here		****				2020-04	-08		*****		return			
	-	ignature of officer or to	rustee			Date		— <b>)</b>	Title		below	ne prepai nstr.) 🔽	_	
		Print/Type preparer's	name	Prepa	rer's Sign	ature		Date		Check if self-	PTIN	P00162	2301	
Paid		MICHAEL J HAYES	СРА							employed ► □				
	arer Only		ENBERG ROSE			& BITSOL	IPC				Firm's E	IN ▶04	-26870	94
		Firm's address ► 30	6 MAIN STRE	⊏1 SU.	11= 400						Db	- /500	. 701	0001
		W	ORCESTER, M	A 016	508						Phone n	o. (508	) /91-0	0901

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year

AMERICAN HEART ASSOCIATION 4301 NORTH FAIRFAX STREET SUITE 530 ARLINGTON, VA 22203	NONE	OTHER PUBLIC CHARITY	GENERAL	500
ANTI-DEFAMATION LEAGUE 1100 CONNECTICUT AVE NW	NONE	OTHER PUBLIC	GENERAL	500

'				
ANTI-DEFAMATION LEAGUE 1100 CONNECTICUT AVE NW WASHINGTON, DC 20036	NONE	OTHER PUBLIC CHARITY	GENERAL	500
ASPCA424 E 92ND STREET NEW YORK, NY 10128	NONE	OTHER PUBLIC	GENERAL	700

WASHINGTON, DC 20036		CHARITY		
ASPCA424 E 92ND STREET NEW YORK, NY 10128	NONE	OTHER PUBLIC CHARITY	GENERAL	700
Total	42,437			

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount contribution show any relationship to status of any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year

BAYPATH HUMANE SOCIETY OF HOPKINTON 5 RAFFERTY ROAD HOPKINTON, MA 01748	NONE	OTHER PUBLIC CHARITY	GENERAL	225
BETH EL HEBREW CONGREGATION	NONE	OTHER	GENERAL	1,200

HOPKINTON, MA 01748				
BETH EL HEBREW CONGREGATION 3830 SEMINARY RD ALEXANDRIA, VA 22304	NONE	OTHER PUBLIC CHARITY	GENERAL	1,200
BRIGHAM AND WOMEN'S HOSPITAL	NONE	OTHER	GENERAL	400

3830 SEMINARY RD ALEXANDRIA, VA 22304		PUBLIC CHARITY		,
BRIGHAM AND WOMEN'S HOSPITAL 75 FRANCIS STREET BOSTON, MA 02215	NONE	OTHER PUBLIC CHARITY	GENERAL	400

BRIGHAM AND WOMEN'S HOSPITAL NONE OTHER GENERAL	
75 FRANCIS STREET BOSTON, MA 02215  NONE  PUBLIC CHARITY	400

Total .

42,437

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

a Paid during the year				
CARROLL SCHOOL 25 BAKER BRIDGE ROAD LINCOLN, MA 01773	NONE	OTHER PUBLIC CHARITY	GENERAL	3,000

LINCOLN, MA 01773		CHARITY		
CONGREGATION OF AGUDAT ACHIM 901 N MAIN ST ATTLEBORO, MA 02703	NONE	OTHER PUBLIC CHARITY	GENERAL	2,200
CONNECTICUT CHILDREN'S MEDICAL	NONE	OTHER	GENERAL	250

901 N MAIN ST ATTLEBORO, MA 02703		PUBLIC CHARITY		_,
CONNECTICUT CHILDREN'S MEDICAL CENTER 282 WASHINGTON ST HARTFORD, CT. 06106	NONE	OTHER PUBLIC CHARITY	GENERAL	250

ATTLEBORO, MA 02703		CHARITY		
CONNECTICUT CHILDREN'S MEDICAL CENTER 282 WASHINGTON ST HARTFORD, CT 06106	NONE	OTHER PUBLIC CHARITY	GENERAL	250
Total			▶ 3a	42,437

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

or substantial contributor

a Paid during the year				
CUSHING ACADEMY39 SCHOOL ST ASHBURNHAM, MA 01430	NONE	OTHER PUBLIC CHARITY	GENERAL	200

ı					
	DANA FARBER CANCER INSTITUTE 450 BROOKLINE AVENUE BOSTON, MA 02215	NONE	OTHER PUBLIC CHARITY	GENERAL	400
	DEXTER KEEZER COMMUNITY FUND	NONE	OTHER	GENERAL	200

450 BROOKLINE AVENUE BOSTON, MA 02215		PUBLIC CHARITY		
DEXTER KEEZER COMMUNITY FUND PO BOX 572 TRURO, MA 02666	NONE	OTHER PUBLIC CHARITY	GENERAL	200

Total			▶ 3a	42,437
DEXTER KEEZER COMMUNITY FUND PO BOX 572 TRURO, MA 02666	NONE	OTHER PUBLIC CHARITY	GENERAL	200
BOSTON, MA 02215		CHARITY		

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year DIRECT RELIEF27 S LA PATERA LANE NONE OTHER GENERAL 500 GOLFTA, CA 93117 PUBLIC:

		CHARITY		
EVERYTOWN FOR GUN SAFETY SUPPORT FUND INC PO BOX 4184 NEW YORK, NY 10163	NONE	OTHER PUBLIC CHARITY	GENERAL	987

SUPPORT FUND INC PO BOX 4184 NEW YORK, NY 10163		PUBLIC CHARITY		
FOODSHARE450 WOODLAND AVENUE BLOOMFIELD, CT 06002	NONE	OTHER PUBLIC CHARITY	GENERAL	500

Total .

42,437

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

Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
INOVA CATS PROGRAM	NONE	OTHER	GENERAL	800

INOVA CATS PROGRAM 3300 GALLOWS ROAD FALLS CHURCH, VA 22042	NONE	OTHER PUBLIC CHARITY	GENERAL	800
JACKSON PUBLIC LIBRARY 52 MAIN STREET	NONE	OTHER PUBLIC	GENERAL	500

FALLS CHURCH, VA 22042		CHARITY		
JACKSON PUBLIC LIBRARY 52 MAIN STREET JACKSON, NH 03846	NONE	OTHER PUBLIC CHARITY	GENERAL	500
JAFFA INSTITUTE171-06 76TH AVE	NONE	OTHER	GENERAL	500

JACKSON, NH 03846		CHARITY		
JAFFA INSTITUTE171-06 76TH AVE FLUSHING, NY 11366	NONE	OTHER PUBLIC CHARITY	GENERAL	500

JACKSON, NH 03846		CHARITY		
JAFFA INSTITUTE171-06 76TH AVE FLUSHING, NY 11366	NONE	OTHER PUBLIC CHARITY	GENERAL	500

Total .

42,437

▶ 3a

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of

any foundation manager

Marra and address (home or business)

Name and address (nome or business)	or substantial contributor			
a Paid during the year				
LASELL COLLEGE 1844 COMMONWEALTH AVE NEWTON, MA 02465	NONE	OTHER PUBLIC CHARITY	GENERAL	200

recipient

	NEWTON, MA 02465		CHARITT		
	MUSEUM OF FINE ARTS 465 HUNTINGTON AVE BOSTON, MA 02115	NONE	OTHER PUBLIC CHARITY	GENERAL	115
-1					

MUSEUM OF FINE ARTS 465 HUNTINGTON AVE BOSTON, MA 02115	NONE	OTHER PUBLIC CHARITY	GENERAL	115
NEWTON POLICE1321 WASHINGTON ST NEWTON, MA 02465	NONE	OTHER PUBLIC	GENERAL	200

465 HUNTINGTON AVE BOSTON, MA 02115		PUBLIC CHARITY		
NEWTON POLICE1321 WASHINGTON ST NEWTON, MA 02465	NONE	OTHER PUBLIC CHARITY	GENERAL	200

BOSTON, MA 02115		CHARITY		
NEWTON POLICE1321 WASHINGTON ST NEWTON, MA 02465	NONE	OTHER PUBLIC CHARITY	GENERAL	200
Total			▶ 3a	42,437

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

Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
NORTH CONWAY PUBLIC LIBRARY	NONE	OTHER	GENERAL	6 000

,				
NORTH CONWAY PUBLIC LIBRARY 2719 MAIN ST NORTH CONWAY, NH 03860	NONE	OTHER PUBLIC CHARITY	GENERAL	6,000
OUR FATHERS HOUSE	NONE	OTHER	GENERAL	200

NORTH CONWAY, NH 03860		CHARITY		
OUR FATHERS HOUSE 23 LUNENBURG ST FITCHBURG, MA 01453	NONE	OTHER PUBLIC CHARITY	GENERAL	200

OUR FATHERS HOUSE 23 LUNENBURG ST FITCHBURG, MA 01453	NONE	OTHER PUBLIC CHARITY	GENERAL	200
PLANNED PARENTHOODPO BOX 96735 WASHINGTON, DC 20077	NONE	OTHER PUBLIC	GENERAL	500

23 LUNENBURG ST FITCHBURG, MA 01453		PUBLIC CHARITY		
PLANNED PARENTHOODPO BOX 96735 WASHINGTON, DC 20077	NONE	OTHER PUBLIC CHARITY	GENERAL	500

Total			▶ 3a	42,437
PLANNED PARENTHOODPO BOX 96735 WASHINGTON, DC 20077	NONE	OTHER PUBLIC CHARITY	GENERAL	500
FITCHBURG, MA 01453		CHARITY		

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount contribution show any relationship to status of any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year

				-
PROVINCETOWN ART ASSOCIATION AND MUSUEM 460 COMMERICIAL ST PROVINCETOWN, MA 02657	NONE	OTHER PUBLIC CHARITY	GENERAL	150
PROVINCETOWN SOUP KITCHEN	NONE	OTHER	GENERAL	200

PROVINCETOWN, MA 02037				
PROVINCETOWN SOUP KITCHEN 10 SHANK PAINTER ROAD PROVINCETOWN, MA 02657	NONE	OTHER PUBLIC CHARITY	GENERAL	200
RAICES5121 CRESTWAY DRIVE 105 SAN ANTONIO, TX 78239	NONE	OTHER PUBLIC	GENERAL	500

10 SHANK PAINTER ROAD PROVINCETOWN, MA 02657		PUBLIC CHARITY		
RAICES5121 CRESTWAY DRIVE 105 SAN ANTONIO, TX 78239	NONE	OTHER PUBLIC CHARITY	GENERAL	500

42,437

Total .

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient

Name and address (home or business)

	or substantial contributor			
a Paid during the year				
RED CROSS2000 CENTURY DR WORCESTER MA 01610	NONE	OTHER PUBLIC	GENERAL	50

Workers Transfer of the Control of t		CHARITY		
SHRINERS HOSPITALS FOR CHILDREN 2900 N ROCKY POINT DRIVE TAMPA, FL 33607	NONE	OTHER PUBLIC CHARITY	GENERAL	200

SHRINERS HOSPITALS FOR CHILDREN 2900 N ROCKY POINT DRIVE TAMPA, FL 33607	NONE	OTHER PUBLIC CHARITY	GENERAL	200
TEMPLE EMUNAHPIPER ROAD LEXINGTON, MA 02421	NONE	OTHER PUBLIC	GENERAL	3,000

2900 N ROCKY POINT DRIVE TAMPA, FL 33607	NONE	PUBLIC CHARITY	CENTENNE	255
TEMPLE EMUNAHPIPER ROAD LEXINGTON, MA 02421	NONE	OTHER PUBLIC CHARITY	GENERAL	3,000

TAMPA, FL 33607		CHARITY		
TEMPLE EMUNAHPIPER ROAD LEXINGTON, MA 02421	NONE	OTHER PUBLIC CHARITY	GENERAL	3,000
Total			▶ 3a	42,437

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

TOURS COUNCY ON ACTUS	NONE	OTUED.	OENED AL	200
TIN MOUNTAIN CONSERVATION CENTER 1245 BALD HILL ROAD ALBANY, NH 03818	NONE	OTHER PUBLIC CHARITY	GENERAL	1,000
a Paid during the year				

ALBANY, NH 03818				
TRURO COUNCIL ON AGING 7 STANDISH WAY NORTH TRURO, MA 02652	NONE	OTHER PUBLIC CHARITY	GENERAL	200
TRURO POLICE ASSOC INC344 US G	NONE	OTHER	GENERAL	200

TRURO COUNCIL ON AGING 7 STANDISH WAY NORTH TRURO, MA 02652	NONE	OTHER PUBLIC CHARITY	GENERAL	200
TRURO POLICE ASSOC INC344 US G TRURO, MA 02666	NONE	OTHER PUBLIC CHARITY	GENERAL	200

Total			▶ 3a	42,437
TRURO POLICE ASSOC INC344 US G TRURO, MA 02666	NONE	OTHER PUBLIC CHARITY	GENERAL	200
NORTH TRURO, MA 02652		CHARITY		

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of

Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
TRUSTEES OF RESERVATIONS	NONE	OTHER	GENERAL	250

TRUSTEES OF RESERVATIONS 200 HIGH STREET BOSTON, MA 02110	NONE	OTHER PUBLIC CHARITY	GENERAL	250
WATERORG920 MAIN ST KANSAS CITY, MO 64105	NONE	OTHER PUBLIC	GENERAL	250

WATERORG920 MAIN ST KANSAS CITY, MO 64105	NONE	OTHER PUBLIC CHARITY	GENERAL	250
WOMRWFMRPO BOX 975	NONE	OTHER	GENERAL	200

KANSAS CITY, MO 64105	THO NE	PUBLIC CHARITY	OLNE IVIL	233
WOMRWFMRPO BOX 975 PROVINCETOWN, MA 02657	NONE	OTHER PUBLIC CHARITY	GENERAL	200

		CHARITY		
WOMRWFMRPO BOX 975 PROVINCETOWN, MA 02657	NONE	OTHER PUBLIC CHARITY	GENERAL	200
Total			▶ 3a	42,437

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

Name and address (home or business)	or substantial contributor	recipient		
a Paid during the year				
WORLD CENTRAL KITCHEN	NONE	OTHER	GENERAL	625

PO BOX 392289 PITTSBURGH, PA 152519289	NONE	PUBLIC CHARITY	GENERAL	023
WOUNDED WARRIOR PROJECT	NONE	OTHER	GENERAL	500

PITTSBURGH, PA 152519289		CHARITY		
WOUNDED WARRIOR PROJECT 4899 BELFORT RD JACKSONVILLE, FL 32256	NONE	OTHER PUBLIC CHARITY	GENERAL	500
BOSTON CHILDREN'S HOSPITAL	NONE	OTHER	GENERAL	185

4899 BELFORT RD JACKSONVILLE, FL 32256		PUBLIC CHARITY	<u> </u>	
BOSTON CHILDREN'S HOSPITAL 300 LONGWOOD AVE BOSTON. MA 02115	NONE	OTHER PUBLIC CHARITY	GENERAL	185

JACKSONVILLE, FL 32256		CHARITY		
BOSTON CHILDREN'S HOSPITAL 300 LONGWOOD AVE BOSTON, MA 02115	NONE	OTHER PUBLIC CHARITY	GENERAL	185

Total	CHARITY	▶ 3a	42.427
300 LONGWOOD AVE BOSTON, MA 02115	PUBLIC CHARITY		

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

Name and address (home or business)	or substantial contributor	recipient		
a Paid during the year				
CHABAD OF BROOKLINE	NONE	OTHER PUBLIC	GENERAL	250

496 HARVARD ST BROOKLINE, MA 02446		PUBLIC CHARITY		
CHARCOT-MARIE-TOOTH ASSOCIATION POBOX 105	NONE	OTHER PUBLIC	GENERAL	800

· ·				
CHARCOT-MARIE-TOOTH ASSOCIATION POBOX 105 GLENOLDEN, PA 19036	NONE	OTHER PUBLIC CHARITY	GENERAL	800
CHILDHELP	NONE	OTHER	GENERAL	1,000

POBOX 105 GLENOLDEN, PA 19036		PUBLIC CHARITY		
CHILDHELP 6730 N SCOTTSDALE RD SUITE 150 SCOTTSDALE AZ 85253	NONE	OTHER PUBLIC CHARITY	GENERAL	1,000

GLENOLDEN, PA 19036		CHARITY		
CHILDHELP 6730 N SCOTTSDALE RD SUITE 150 SCOTTSDALE, AZ 85253	NONE	OTHER PUBLIC CHARITY	GENERAL	1,000
			•	

Total			▶ 3a	42,437
6730 N SCOTTSDALE RD SUITE 150 SCOTTSDALE, AZ 85253		PUBLIC CHARITY		
CHILDHELP	NONE	LOIHEK	GENERAL	1,000

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

a Palu during the year				
CICATRICIAL ALOPECIA RESEARCH FOUNATION 1586 SUMNEYTOWN PIKE KULPSVILLE, PA 19443	NONE	OTHER PUBLIC CHARITY	GENERAL	800
DOVER LAND CONSERVATION TRUST	NONE	OTHER	GENERAL	250

KULPSVILLE, PA 19443		CHARTT		
DOVER LAND CONSERVATION TRUST POBOX 562 DOVER, MA 02030	NONE	OTHER PUBLIC CHARITY	GENERAL	250
FLORIDA RESCUE FARM	NONE	OTHER	GENERAL	500

DOVER LAND CONSERVATION TRUST POBOX 562 DOVER, MA 02030	NONE	OTHER PUBLIC CHARITY	GENERAL	250
FLORIDA RESCUE FARM 39610 CARLTON RD DUETTE, FL 34219	NONE	OTHER PUBLIC CHARITY	GENERAL	500

39610 CARLTON RD PUBLIC	DOVER, MA 02030		CHARITY		
DUETTE, FL 34219 CHARITY		NONE		GENERAL	500

Total .

42,437

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year FOLJMS - FRIENDS OF LEO J MARTIN NONE OTHER **GENERAL** 250

SKIING C/O TOM SIMON 16 STERLING ROAD WELLESLEY, MA 02482		PUBLIC CHARITY		
FRIENDS OF BORDERLAND 259 MASSAPOAG AVE NORTH EASTON, MA 02356	NONE	OTHER PUBLIC CHARITY	GENERAL	1,000
l				

WELLESELT, MA 02402				i
FRIENDS OF BORDERLAND 259 MASSAPOAG AVE NORTH EASTON, MA 02356	NONE	OTHER PUBLIC CHARITY	GENERAL	1,00
JEWISH COMMUNITY CENTER OF NORTH VIRGINIA	NONE	OTHER PUBLIC	GENERAL	1,60

259 MASSAPOAG AVE NORTH EASTON, MA 02356		PUBLIC CHARITY		2,71
JEWISH COMMUNITY CENTER OF NORTH VIRGINIA 8900 LITTLE RIVER TPKE	NONE	OTHER PUBLIC CHARITY	GENERAL	1,60

NORTH EASTON, MA 02356		CHARITY		
JEWISH COMMUNITY CENTER OF NORTH VIRGINIA 8900 LITTLE RIVER TPKE FAIRFAX, VA 22031	NONE	OTHER PUBLIC CHARITY	GENERAL	1,600

JEWISH COMMUNITY CENTER OF NORTH VIRGINIA 3900 LITTLE RIVER TPKE FAIRFAX, VA 22031	NONE	OTHER PUBLIC CHARITY	GENERAL	1,600
	1			

Total .

42,437

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

JEWISH SOCIAL SERVICES OF DC	NONE	OTHER	CENERAL	1 1
a Paid during the year				
(	or substantial contributor			

JEWISH SOCIAL SERVICES OF DC 6123 MONTROSE RD ROCKVILLE, MD 20852	NONE	OTHER PUBLIC CHARITY	GENERAL	1,600
LEUKEMIA AND LYMPHOMA SOCIETY	NONE	OTHER	GENERAL	800

ROCKVILLE, MD 20852		CHARITY		
LEUKEMIA AND LYMPHOMA SOCIETY 3 INTERNATIONAL DRIVE SUITE 200 RYE BROOK, NY 10573	NONE	OTHER PUBLIC CHARITY	GENERAL	800

LEUKEMIA AND LYMPHOMA SOCIETY 3 INTERNATIONAL DRIVE SUITE 200 RYE BROOK, NY 10573	NONE	OTHER PUBLIC CHARITY	GENERAL	800
NATIONAL BRAIN TUMOR SOCIETY 55 CHAPEL STREET STE 200	NONE	OTHER PUBLIC	GENERAL	500

RYE BROOK, NY 10573		CHARITY		
NATIONAL BRAIN TUMOR SOCIETY 55 CHAPEL STREET STE 200 NEWTON, MA 02458	NONE	OTHER PUBLIC CHARITY	GENERAL	500

NATIONAL BRAIN TUMOR SOCIETY 55 CHAPEL STREET STE 200 NEWTON, MA 02458	NONE	OTHER PUBLIC CHARITY	GENERAL	500
Total			▶ 3a	42,437

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

Name and address (nome or business)	or substantial contributor	·		
a Paid during the year				
NATIONAL STROKE ASSOCIATION	NONE	OTHER	GENERAL	500

9707 E EASTER LANE CENTENNIAL, CO 80112		PUBLIC CHARITY		
ROCKY MOUNTAIN BIOLOGICAL LAB 8000 CO RD 317	NONE	OTHER PUBLIC	GENERAL	250

ROCKY MOUNTAIN BIOLOGICAL LAB 8000 CO RD 317 CRESTED BUTTE, CO 81224	NONE	OTHER PUBLIC CHARITY	GENERAL	250
TEMPLE SHALOM175 TEMPLE STREET WEST NEWTON, MA 02465	NONE	OTHER PUBLIC	GENERAL	500

CRESTED BUTTE, CO 81224		CHARITY		
TEMPLE SHALOM175 TEMPLE STREET WEST NEWTON, MA 02465	NONE	OTHER PUBLIC CHARITY	GENERAL	500

5.1.25.1.25 55.1.2 <sub>j</sub> 55 5122.1				
TEMPLE SHALOM175 TEMPLE STREET WEST NEWTON, MA 02465	NONE	OTHER PUBLIC CHARITY	GENERAL	500

42,437

Total .

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

a Paid during the year				
VENICE SYMPHONY ORCHESTRA 1515 S TAMIAMI TRAIL STE 7 SOUTHBRIDGE PARK VENICE, FL 34285	NONE	OTHER PUBLIC CHARITY	GENERAL	500
WHITE MOUNTAIN COMMUNITY HEALTH	NONE	OTHER	CENEDAL	2 000

VENICE, FL 34285				
WHITE MOUNTAIN COMMUNITY HEALTH CENTER 298 WHITE MOUNTAIN HIGHWAY CONWAY, NH 03818	NONE	OTHER PUBLIC CHARITY	GENERAL	2,000

CENTER 298 WHITE MOUNTAIN HIGHWAY CONWAY, NH 03818	NONE	PUBLIC CHARITY	GENERAL	2,000
WILDLIFE CENTER OF VENICE INC	NONE	OTHER	GENERAL	500

298 WHITE MOUNTAIN HIGHWAY CONWAY, NH 03818		CHARITY		
WILDLIFE CENTER OF VENICE INC 3252 BORDER RD	NONE	OTHER PUBLIC	GENERAL	500

За

42,437

201111111111111111111111111111111111111				
WILDLIFE CENTER OF VENICE INC 3252 BORDER RD VENICE, FL 34292	NONE	OTHER PUBLIC CHARITY	GENERAL	500

Total .

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager

recipient

Name and address (nome or business)	or substantial contributor			
a Paid during the year	1			
ST JUDE'S RESEARCH HOSPITAL	NONE	OTHER	GENERAL	100

ST JUDE'S RESEARCH HOSPITAL 220 E 42ND ST NEW YORK, NY 10017	NONE	OTHER PUBLIC CHARITY	GENERAL	
--	------	----------------------------	---------	--

Total	]		42 427
220 E 42ND ST NEW YORK, NY 10017		UBLIC HARITY	

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TY 2019 Accounting Fe	es Sch	edule	<u> </u>	<u> </u>	
	Name:	THE LEW	IS M & ESTHER	PERLSTEIN	
FAMILY FOUNDATION					
	EIN:	04-63510	051		
Category	Amo	ount	Net Investmer Income	t Adjusted Ne Income	t Disbursements for Charitable Purposes
ACCOUNTING FEES		2,464	2,	164	0

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN: 93491188004	1080
TY 2019 All Other Program Re	lated Invest	ments Schedule		
Name:	THE LEWIS M	& ESTHER PERLSTEIN		
	FAMILY FOUNI	DATION		
EIN:	04-6351051			
	Category		Amount	
N/A NONE				0

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491188004080
TY 2019 Investments Corpora	te Bonds Schedule	
Name:	THE LEWIS M & ESTHER PERLSTEIN	
	FAMILY FOUNDATION	
PTM	04 6054054	

<b>EIN:</b> 04-6351051					
Investments Corporate Bonds Schedule					
Name of Bond	End of Year Book	End of Year Fair			
l l	Value	Market Value			

178,544

180,920

CORPORATE BONDS

effie GRAPHIC print - DO NOT PROCES	AS FIIED Data -	DLN: 93491188004080
TY 2019 Investments Corpor	ate Stock Schedule	
Name:	THE LEWIS M & ESTHER PERLS	STEIN
	FAMILY FOUNDATION	

DIN. 02404400004000

380,409

462,602

<b>EIN:</b> 04-6351051		
Investments Corporation Stock Schedule		
Name of Stock	End of Year Book Value	End of Year Fair Market Value

CORPORATE STOCK

## Name: THE LEWIS M & ESTHER PERLSTEIN

Description

Other Assets Schedule

OTHER RECEIVABLE

**EIN:** 04-6351051

Beginning of Year -

Book Value

FAMILY FOUNDATION

875

End of Year - Fair Market Value

End of Year - Book

Value

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TY 2019 Other Expenses Schedule				
Name: THE LEWIS M & ESTHER PERLSTEIN				
FAMILY FOUNDATION				
<b>EIN:</b> 04-6351051				
Other Expenses Schedule				
Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
STATE FILING FEE	35	35		0
BANK CHARGES	27	27		0

INVESTMENT EXPENSES

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TY 2019 Other Income Schedule						
11 2019 Other Income Schedule						

Name: THE LEWIS M & ESTHER PERLSTEIN

FIRST FINANCIAL TRUST

Other Income Schedule					
Description	Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income		

**EIN:** 04-6351051

FAMILY FOUNDATION

55

55

55

efile GRAPHIC print - DO NOT PROCE	SS As Filed Data	-	DLI	N: 93491188004080		
TY 2019 Other Professiona	TY 2019 Other Professional Fees Schedule					
Name: THE LEWIS M & ESTHER PERLSTEIN						
FAMILY FOUNDATION						
<b>EIN:</b> 04-6351051						
Category	Amount	Net Investment	Adjusted Net	Disbursements		
		Income	Income	for Charitable Purposes		

6,340

6,340

MANAGEMENT FEES