Form **990-PF** Department of the Treasury

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.

| · <u>-</u> | or c | aler | idar year 2019 or tax year beginning | | , and ei | laing | | <u></u> | | |
|------------|----------|----------|---|--|-------------------------------------|-------------------------|--|--|--|--|
| | Nan | ne of | foundation | | | | A Em | ıployer identification | number | |
| | | | ULF B. HEIDE AND ELIZA | | \mathbf{E} | | | | | • |
| _ | | _ | NDATION CHARITABLE TRUS | | | | 1 | <u> 14-6665830</u> | · | |
| | | | nd street (or P O box number if mail is not delivered to stree | • | | Room/suite | | ephone number | | : |
| _ | | | FRANK P. CONRAD, 8 CEI | | | | $\overline{}$ | <u> 181-899-64</u> | | |
| - 1 | | | own, state or province, country, and ZIP or foreign | postal code | | | Clfex | emption application is p | ending, check | chere - |
| - | | | TON, MA 02493 | | | _ | <u> </u> | <u>.</u> ' | | <u>, </u> |
| G | U | песк | all that apply: Initial return | Initial return of a f | ormer public c | narny | יוטן | Foreign organizations | s, cneck ner | e , 🏲 📖 |
| | | | Final return Address change | Amended return Name change | | | 2 | Foreign organizations me check here and attach co | eting the 85% | i test, |
| Н | | hack | | xempt private foundation . | . 8 | <u> </u> | 1 | | , | |
| ï | | ٦. | ction 4947(a)(1) nonexempt charitable trust | Other taxable private found | ation () | 4 | | rivate foundation sta der section 507(b)(1) | | |
| د ا | Fa | | | ting method: X Cash | Accr | ıal | 1 | | • | _ |
| · | | | · 1. — | Other (specify) | | | | he foundation is in a l der section 507(b)(1) | | |
| | ` | | 12,661,959. (Part I, colu | | sis.) | | " | • | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | |
| * | Pa | irt'l | | (a) Revenue and | (b) Net in | estment/ | . (| (c) Adjusted net | | sbursements |
| _ | | | Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a)) | expenses per books | inco | | l' | income | | table purposes basis only) |
| | ĺ | 1 | Contributions, gifts, grants, etc., received | 0. | 南流流流流 | | 点流 | N/A minding min | | |
| 5 | , | 2 | Check X if the foundation is not required to attach Sch. B | ARCHIER CONTRACTOR | EN MARKE | | 2.00 | PARTITION AND THE | 是從於這 | 在學家有說 |
| K | | 3 | Interest on savings and temporary cash investments | | | | | | 2000年 | |
| U | | 4 | Dividends and interest from securities | 214,192. | 21 | <u>4,192.</u> | ļ | | STATE | MENT 1 |
|) | ` | 5a | Gross rents | 2 t. ("n. a. # "). | 2757 V . 4 . 556434.4 | | C. Marine | Thompson and the Control | 25.00 | |
| • | | b | Net rental income or (loss) | | ชี้เมื่อรู้ของ ที่บัง กับสอบโกเกา ซ | On Land) And Spirite of | | | Contract of the | grant a married to the state of |
| | e e | 63 | Net gain or (loss) from sale of assets not on line 10 | 445,812. | | | 18 (A) | | Marin State | Probation (1997) |
| | Revenue | b | Gross sales price for all assets on line 6a 771,861. | ANT PROPERTY OF THE PROPERTY OF | PRODUCTION OF THE | | 经复数 | | 41.000 | |
| | ا۾ | 7 | Capital gain net income (from Part IV, line 2) | | 44 | 5,812. | 5, 4; 3° 9; | | \$ 30 50 E | The Market State of |
| | _ | 8 | Net short-term capital gain | | The state of | 100 PS 2745 | | | 7. | |
| | | 9 | Income modifications Gross sales tess returns | | | MOTAL MAN | 344 J #100 | CL. Not take at No. 140 of Carolina and Mario | Mark Control | |
| | | 10a | and allowances | | | ALCONOMIC CONTRACTOR | 33.3 | | | |
| | | | Less Cost of goods sold | LATER AREA LATER CONTEN | 44.7 | | ************************************** | 经对现代的 | SECTION AND ADDRESS OF THE PARTY OF THE PART | |
| | | | Gross profit or (loss) | | 分配的 20 | 种系统 | | | VI MARIE CO. | |
| | l | | Other income | 28. | | <u> 28.</u> | · | | STATE | MENT 22 |
| _ | | | Total. Add lines 1 through 11 | 660,032. | 66 | <u>0,032.</u> | - | | 11.37(1).000 | |
| | | 13 | Compensation of officers, directors, trustees, etc | | | 0. | | · | | · <u>0</u> . |
| | 1 | | Other employee salaries and wages | | | - | - | RECEIVI | = | 1 |
| | ses | | Pension plans, employee benefits Legal fees STMT 3 | 3,710. | | 0. | \vdash | RECEIVI | | 1 0 |
| | Sc | | | 3,/10. | | <u> </u> | 10 | | |) 0. |
| , | Expen | | Accounting fees Other professional fees | | | | 4009 | MAR 3 0 2 | 320 | <u> </u> |
| | 티 | | Interest | | | | 14 | WITH O C | | <u> </u> |
| | 돭 | | Taxes STMT 4 | 7,901. | | 0. | | OGDEN | 117 | 0. |
| | 탏 | | Depreciation and depletion | 7,301. | | | | UGUEIN, | N | در ۱۷۹۰ کرد ۱۸۹۸ تاکیزی است. |
| • | <u> </u> | 19 20 | Occupancy | | | | | | 38.84.36 | S. v. I.L. S. Sales Barelan con |
| • | ਰ: | | Travel, conferences, and meetings | | | | | | | |
| | اع | | Printing and publications | | | | | | | |
| | | | | 111,136. | | 0. | | | h | 0. |
| | - 1 | | Other expenses STMT 5 Total operating and administrative | 111,130. | | | | • . | <u> </u> | <u> </u> |
| | ē | 44 | expenses. Add lines 13 through 23 | 122,747. | | 0. | | • | ` | 0. |
| | ဝီ | 25 | Contributions, gifts, grants paid | 381,086. | 在基金数数 1960 | | £ 318 | MARTINE TO SERVICE | 3 | 81,086. |
| | - 1 | | Total expenses and disbursements. | 20T,000. | XMEDIAN WENT - LAN | ersoms this state is | at proving | V 422.562"' O 2 335.54[2.40.445] | | 01,000. |
| | | | Add lines 24 and 25 | 503,833. | | 0. | | | વ | 81,086. |
| _ | 寸 | | Subtract line 26 from line 12 | 303,033. | W. Presenta E. | | 46.714 10.84C | Property of the second | WALL STAR | |
| | | | Excess of revenue over expenses and disbursements | 4 156,199. | | | | | | |
| | | | Net investment income (if negative, enter -0-) | WANTED THE STATE OF THE STATE O | 660 | 0,032. | SEAN! | | | |
| _ | | | Adjusted net income (if negative, enter -0-) | 144.44.94.15X.33X.6 | | GENERAL PROPERTY. | | N/A | ELLANGE OF THE | SOFT XXXXX |
| | _ | | Maria | | | | | | | |

923501 12-17-19 LHA For Paperwork Reduction Act Notice, see instructions.



Page 2

| 1 - (1-1) - 3 | Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only | Beginning of year | End of year | | |
|-------------------------|--|--|--|--|--|
| Part | column should be for end-of-year amounts only | (a) Book Value | (b) Book Value | (c) Fair Market Value | |
| 1 | Cash - non-interest-bearing | 28,323. | 34,956. | 34,956. | |
| 2 | Savings and temporary cash investments | | | | |
| 3 | Accounts receivable | | | | |
| , | Less: allowance for doubtful accounts | | | | |
| 4 | Pledges receivable ► | | JAN 18 18 18 18 18 18 18 18 18 18 18 18 18 | | |
| | Less: allowance for doubtful accounts | | | | |
| 5 | Grants receivable | | | | |
| 6 | Receivables due from officers, directors, trustees, and other | ļ* | , | | |
| | disqualified persons . | | 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 | | |
| 7 | Other notes and loans receivable | 12 12 12 12 12 12 12 12 12 12 12 12 12 1 | | | |
| | Less: allowance for doubtful accounts | • | | | |
| र्घ 8 | Inventories for sale or use | | | • | |
| Assets | Prepaid expenses and deferred charges | | · | | |
| ▼ 10a | Investments - U.S. and state government obligations | | | | |
| b | Investments - corporate stock STMT 8 | 7,761,056. | 8,144,787. | | |
| _ c | Investments - corporate bonds STMT 9 | 1,103,971. | 872,345. | 895,692. | |
| 11 | Investments - land, buildings, and equipment basis | and the same and t | And the second s | AN ARTHUR AND AND AND THE STATE OF THE STATE | |
| 1 | Less accumulated depreciation | | | | |
| 12 | *Investments - mortgage loans | | • • | | |
| 13 | Investments - other | + 15 m + 886 S - S - 1 5 5 7 8 5 6 7 7 | * * * * * * * * * * * * * * * * * * * | Friday Land Victoria State Sta | |
| 141 | Land, buildings, and equipment: basis | | | | |
| | Less accumulated depreciation | • | . " | | |
| 15 | Other assets (describe) | | | | |
| 16 | Total assets (to be completed by all filers - see the | | | · | |
| | instructions. Also, see page 1, item 1) | 8,893,350. | 9,052,088. | 12,661,959. | |
| 17 | Accounts payable and accrued expenses · · | | | TO DEPOSIT THE PARTY OF THE | |
| 18 | Grants payable | | | CARTER CARD AND THE | |
| ຸ ຜູ 🛮 19 ີ | Deferred revenue , | | | | |
| Liabilities 50 21 20 21 | Loans from officers, directors, trustees, and other disqualified persons | | | | |
| .뎚 21 | Mortgages and other notes payable | 3 | | The second of th | |
| - 22 | Other liabilities (describe >) | | | | |
| | • | , | · | | |
| 23 | Total liabilities (add lines 17 through 22) | 0. | · 0. | CONTRACTOR OF THE CONTRACTOR O | |
| | Foundations that follow FASB ASC 958, check here | | | | |
| တ္မ မိ | and complete lines 24, 25, 29, and 30 | | , | | |
| | Net assets without donor restrictions . | | - | Control of the second of the s | |
| g 25 | Net assets with donor restrictions | | | 語語にも述法的主要なが可 | |
| Fund Balanc | Foundations that do not follow FASB ASC 958, check here | _ | - | | |
| 필 | and complete lines 26 through 30. | | | | |
| ් _ව 26 | Capital stock, trust principal, or current funds | 8,893,350. | 9,052,088. | *HAR-ROSS TAND OF FURTHER | |
| 왕 27 | Paid-in or capital surplus, or land, bldg., and equipment fund | 0. | 0. | | |
| Net Assets 28 29 29 | Retained earnings, accumulated income, endowment, or other funds | 0. | 0. | | |
| 등 29 | Total net assets or fund balances | 8,893,350. | 9,052,088. | | |
| 2 | • | | | | |
| 30 | Total liabilities and net assets/fund balances | 8,893,350. | 9,052,088. | | |
| *Part | Analysis of Changes in Net Assets or Fund E | Balances | • | , | |
| | | | · 1 | · | |
| | I net assets or fund balances at beginning of year - Part II, column (a), line | 29 . | ' , | 0 000 000 | |
| • | st agree with end-of-year figure reported on prior year's-return) | • | 1 | 8,893,350. | |
| | r amount from Part I, line 27a | | 2 | 156,199. | |
| | r increases not included in line 2 (itemize) | SEE ST | ATEMENT 6 3 | 3,202. | |
| | lines 1, 2, and 3 | | | 9,052,751. | |
| | eases not included in line 2 (itemize) | | ATEMENT 7 5 | 663. | |
| 6 Tota | I net assets or fund balances at end of year (line 4 minus line 5) - Part II, c | olumn (b), line 29 | . 6 | 9,052,088. | |

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| Part IV Capital Gains a | and Losses for Tax on I | nvestmen | t Income | | | | | |
|--|---|--|--------------------------------------|-------------------------------------|--|---------------|-------------------------------|---|
| | the kind(s) of property sold (for exa rehouse; or common stock, 200 sh | | ite, | (b) How P - Pu D - Do | acquired rchase nation | | acquired lay, yr.) | (d) Date sold (mo., day, yr.) |
| 1a | | | | | | | | |
| b SEE ATTACHED | STATEMENT | | | | | | | |
| <u>C</u> | | | | | | | | |
| <u>d</u> | | | | | | | | |
| <u>e</u> | (6) Depression allowed | (a) Co | at or other been | | | (b) G | ain or (loss | \ |
| (e) Gross sales price | (f) Depreciation allowed (or allowable) | | st or other basis expense of sale | | <u>. </u> | | s (f) minus | |
| <u>a</u> | | | <u></u> | | | | | |
| <u>b</u> | | | | | | | | |
| d d | | | | | | | | |
| e 771,861. | | | 326,04 | 9. | | | | 445,812. |
| | g gain in column (h) and owned by | the foundation | | | | I) Gains (C | ol. (h) gain | |
| (i) FMV as of 12/31/69 | (j) Adjusted basis as of 12/31/69 | (k) Ex | cess of col. (I) col. (J), If any | | | l. (k), but r | not less that (from col. (| n -0-) or |
| a | | | | | ** | | | |
| b | | | | | | | | |
| C | | | | | | | | |
| d | | | | | | | | |
| е | | | | | | | | 445,812. |
| 2 Capital gain net income or (net cap | orital loss) If gain, also enter-(| er in Part I, line 0- in Part I, line | 7 | } 2 | | | | 445,812. |
| 3 Net short-term capital gain or (loss | s) as defined in sections 1222(5) a | | | | | | | |
| If gain, also enter in Part I, line 8, of (loss), enter -0- in Part I, line 8 | column (c). | | | a | | | N/A | |
| Part V Qualification U | nder Section 4940(e) for | r Reduced | Tax on Net | Invest | ment Inc | come | N/A | |
| If section 4940(d)(2) applies, leave th Was the foundation liable for the secti If "Yes," the foundation doesn't qualify | on 4942 tax on the distributable ar | | • | 10 d? | | | | Yes X No |
| 1 Enter the appropriate amount in e | ach column for each year; see the | instructions bet | fore making any e | ntries. | | | | |
| (a) Base period years Calendar year (or tax year beginnin | (b) g in) Adjusted qualifying dis | stributions | Net value of no | (c) ncharitabl | e-use assets | | Distrib (col. (b) div | (d) ution ratio ided by col. (c)) |
| 2018 | 69 | 01,610. | | 11,3 | 35,739 | | | .061011 |
| 2017 | 76 | 7,657. | | 11,1 | 69,343 | | | .068729 |
| 2016 | 20 | 7,595. | | 10,2 | 37,400 |). | | .020278 |
| 2015 | 50 | 00,245. | | 10,4 | 42,044 | | | .047907 |
| 2014 | 34 | 17,990. | | 10,4 | <u>61,965</u> | 5. | | .033262 |
| 2 Total of line 1, column (d) | | | | | | 2 | | .231187 |
| 3 Average distribution ratio for the 5 the foundation has been in existen | | on line 2 by 5.0 |), or by the numbe | er of years | | 3 | | .046237 |
| 4 Enter the net value of noncharitable | • | lino F | | | | | 1 | 1,654,255. |
| | 5-U35 435515 IUI ZU 13 II UIII PAIL X, | inte o | | | | 4 | | |
| 5 Multiply line 4 by line 3 | | | | | | 5 | | 538,858. |
| 6 Enter 1% of net investment income | e (1% of Part I, line 27b) | | | | | 6 | | 6,600. |
| 7 Add lines 5 and 6 | | | | | | 7 | | 545,458. |
| 8 Enter qualifying distributions from | Part XII, line 4 | | | | | 8 | | 381,086. |
| | line 7, check the box in Part VI, line | e 1b, and comp | lete that part using | g a 1% tax | rate. | | | |
| See the Part VI instructions. | | | | | | | | orm 990-PF (2019) |
| 923521 12-17-19 | | | | | | | F | um <i>33</i> 0-F (2019 |

| Part IV Capital Gains and Lo | osses for Tax on Investment Income | | | | |
|--|--|---|--|---|-------------------------------|
| (a) List and 2-story b | d describe the kind(s) of property solorick warehouse; or common stock, 20 | d, e.g., real estate, 00 shs. MLC Co. | (b) How acquired P - Purchase D - Donation | (c) Date acquired (mo., day, yr.) | (d) Date sold (mo., day, yr.) |
| 1a ML - XXX091 - | AGGREGATE LONG T | ERM GAINS/LOSSES | P | | |
| | | TERM GAINS/LOSSES | P | | |
| | AGGREGATE LONG T | | P | | |
| | CASH IN LIEU | | P | | |
| e CAPITAL GAINS | DIVIDENDS | | | | |
| f | | | | | |
| 9 | | | | | |
| <u>h</u> | | | | | |
| 1 | | <u> </u> | | | |
| | | | | | **** |
| <u>,k</u> | | | | | |
| | | | | | |
| m n | | · · · · · · · · · · · · · · · · · · · | | | |
| 0 | - | | | - | |
| (e) Gross sales price | (f) Depreciation allowed (or allowable) | (g) Cost or other basis plus expense of sale | |) Gain or (loss) blus (f) minus (g) | - |
| a 238,920. | · | 215,926. | | | 22,994. |
| b 21,246. | | 21,263. | · - | | <17. |
| c 86,223. | | 88,860. | | | <2,637. |
| d 18. | | | | | 18. |
| e 425,454. | | | | | 425,454. |
| f | | | | | |
| g . | | | | | |
| ก | | | | | |
| <u> </u> | | | | | |
| J | | | | | |
| <u>k</u> | | | | | |
| <u> </u> | | | | | |
| <u>m</u> | | | | | |
| <u>n</u> | | - | | | |
| Complete only for assets show | ing gain in column (h) and owned by | the foundation on 12/31/69 | (1) L os | sses (from col. (h)) | |
| (i) F.M.V. as of 12/31/69 | (j) Adjusted basis as of 12/31/69 | (k) Excess of col. (i) over col. (j), if any | Gains (excess | of col. (h) gain over not less than "-0-") | col. (k), |
| a | | | | | 22,994. |
| b | | | | | <17. |
| C | | | | | <2,637. |
| d | | | | | 18. |
| е | | | | | 425,454. |
| f | | | | | |
| 9 | | | | | |
| <u>h</u> | | | | | |
| <u>' </u> | <u> </u> | | | | |
| <u>. </u> | | | | | |
| <u>k</u> | | | | | |
| | | | | | |
| m | | | | | |
| <u>n</u> | | | | | |
| 0 | <u>. </u> | | | | |
| 2 Capital gain net income or (net ca | 1 11 (1000), 611101 | . | 2 | | 445,812. |
| 3 Net short-term capital gain or (lo If gain, also enter in Part I, line 8, If (loss), enter "-0-" in Part I, line | | > | 3 | N/A | |
| וו (וייסס), בווובו ייטי ווו רמונו, וווופ | U | | <u> </u> | TA / TZ | |

THE ULF B. HEIDE AND ELIZABETH C. HEIDE

| Form 990- | PF (2019) FOUNDATION CHARITABLE TRUST | | 04- | 66658 | <u>830</u> | | Page 4 |
|-----------------|--|--|-------------|--|--|---|--|
| Part V | | | 4948 | - see in | <u>ıstru</u> | ctio | าร) |
| 1a Exen | npt operating foundations described in section 4940(d)(2), check here 🕨 🔲 and er | nter "N/A" on line 1. | | - | | | 1 |
| Date | of ruling or determination letter: (attach copy of letter if nec | essary-see instructions) | | | | <u></u> | |
| b Dom | estic foundations that meet the section 4940(e) requirements in Part V, check here 🕒 | and enter 1% | 1 | <u> </u> | <u> </u> | <u>3,2</u> | <u>01.</u> |
| of Pa | irt I, line 27b | | | 1 -1 | • | ~ ' | i |
| | ther domestic foundations enter 2% of line 27b. Exempt foreign organizations, enter 4% | | / | | نسب | | لين |
| 2 Taxı | inder section 511 (domestic section 4947(a)(1) trusts and taxable foundations only; oth | hers, enter -0-) | 2 | ļ | | | 0. |
| | lines 1 and 2 | | 3 | | 1 | 3,2 | 01. |
| | itle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; of | thers, enter -0-) | 4 | <u> </u> | | | 0. |
| | based on investment income. Subtract line 4 from line 3. If zero or less, enter -0- | | 5 | | | <u>3,2</u> | 01. |
| | uts/Payments: | | . . | ٠, | | - | |
| | estimated tax payments and 2018 overpayment credited to 2019 | 6a 6,800 | ٠- ا | 2 | | , , | . · - |
| | npt foreign organizations - tax withheld at source | | | | | | ٠ |
| | paid with application for extension of time to file (Form 8868) | | <u>.</u> | · ¥ | • | į | ٠, ا |
| | up withholding erroneously withheld | 6d | <u> </u> | | <u> </u> | <i>-</i> 0 | |
| | credits and payments. Add lines 6a through 6d | -L - J | 7 | | | 0,0 | 00. |
| | r any penalty for underpayment of estimated tax. Check here if Form 2220 is attack | cned | 8 | _ | | <i>c</i> 1 | $\frac{0.}{01.}$ |
| | due. If the total of lines 5 and 8 is more than line 7, enter amount owed | | 9 | | | 0,4 | 01. |
| | payment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid | | 10 | | | | |
| | the amount of line 10 to be: Credited to 2020 estimated tax ► II-A Statements Regarding Activities | Refunded | <u> 11</u> | ــــــــــــــــــــــــــــــــــــــ | | | |
| | | lation or did it participate or interior | .no.in | | | Yes | No |
| | ng the tax year, did the foundation attempt to influence any national, state, or local legisl | ation of the it participate of interve | 116 111 | - | 1a | | X |
| | political campaign? It spend more than \$100 during the year (either directly or indirectly) for political purpos | coc? Soo the instructions for the de | finition | - | 1b | | X |
| | e answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies o | | illillion | - | , | · . | A |
| | buted by the foundation in connection with the activities. | n any materials published of | | | | -' | |
| | he foundation file Form 1120-POL for this year? | | | | 1c | | X |
| | r the amount (if any) of tax on political expenditures (section 4955) imposed during the | vear. | | | -10 | | <u> </u> |
| | On the foundation. > \$ (2) On foundation managers. | | ١. | | · ' | • | () |
| | r the reimbursement (if any) paid by the foundation during the year for political expendit | | | | | ` ' | - Tan |
| | agers. > \$ 0. | tare tax imposed on roundation | | | | | 2 . |
| | the foundation engaged in any activities that have not previously been reported to the IF | 252 | | ŀ | 2 | | X |
| | es," attach a detailed description of the activities. | | | ř | , | | |
| | the foundation made any changes, not previously reported to the IRS, in its governing in | nstrument, articles of incorporation | n. or | : | | | * |
| | vs, or other similar instruments? If "Yes," attach a conformed copy of the changes | , | ., | ľ | 3 | *************************************** | X |
| - | he foundation have unrelated business gross income of \$1,000 or more during the year | r۶ | | ľ | 4a | | X |
| | is," has it filed a tax return on Form 990-T for this year? | | N | I/A [| 4b | | |
| | there a liquidation, termination, dissolution, or substantial contraction during the year? | | | Ť | 5 | | X |
| | es," attach the statement required by General Instruction T. | | | | | -, | 1 |
| | he requirements of section 508(e) (relating to sections 4941 through 4945) satisfied en | ther: | | | _, | • | , · · · · · · · · · · · · · · · · · · · |
| | language in the governing instrument, or | | | | . | · | |
| • | state legislation that effectively amends the governing instrument so that no mandatory | y directions that conflict with the si | ate law | | _ | | ļ [†] |
| - | in in the governing instrument? | | | Ĺ | 6 | X | <u> </u> |
| | he foundation have at least \$5,000 in assets at any time during the year? If "Yes," comp | lete Part II, col. (c), and Part XV | | | 7 | X | |
| | | | | Γ | | , | |
| 8a Enter | the states to which the foundation reports or with which it is registered. See instruction | ns. > | | | _ | | ļ |
| MZ | · | | | | | ` . | 1 |
| | answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the At | ttorney General (or designate) | | _ | | | أسا |
| | ch state as required by General Instruction G? If "No," attach explanation | | | | 8b | X | <u>. </u> |
| | e foundation claiming status as a private operating foundation within the meaning of sec | ction 4942(j)(3) or 4942(j)(5) for a | alendar | | <u></u> | أخست | َ لِـــا |
| | 2019 or the tax year beginning in 2019? See the instructions for Part XIV. If "Yes," com | | | L | 9 | | <u>x</u> 0 |
| 10 Did a | iny persons become substantial contributors during the tax year? ir "Yes," attach a schedul | le listing their names and addresses | | | 10 | | X |
| | | | | Forn | n 99 0 | -PF | (2019) |

923531 12-17-19

04-6665830 Page 5 FOUNDATION CHARITABLE TRUST Part VII-A Statements Regarding Activities (continued) Yes No 11 At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of X 11 section 512(b)(13)? If "Yes," attach schedule. See instructions 12 Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? 12 If "Yes," attach statement. See instructions Did the foundation comply with the public inspection requirements for its annual returns and exemption application? 13 Website address ► N/A Telephone no. > 781 - 899 - 646014 The books are in care of ▶ FRANK P. CONRAD Located at ▶ 8 CEDAR ROAD, WESTON, MA ZIP+4 **▶**02493 15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here N/A and enter the amount of tax-exempt interest received or accrued during the year Yes No At any time during calendar year 2019, did the foundation have an interest in or a signature or other authority over a bank, 16 securities, or other financial account in a foreign country? See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the foreign country Part VII-B | Statements Regarding Activities for Which Form 4720 May Be Required Yes No 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): Yes X No (1) Engage in the sale or exchange, or leasing of property with a disqualified person? (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) Yes X No a disqualified person? Yes X No (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? (5) Transfer any income or assets to a disqualified person (or make any of either available 」Yes ◯X No for the benefit or use of a disqualified person)? (6) Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after 🗌 Yes 🗶 No termination of government service, if terminating within 90 days.) b If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations 1b section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions N/A 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 10 before the first day of the tax year beginning in 2019? . 41 2 Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)): a At the end of tax year 2019, did the foundation have any undistributed income (Part XIII, lines Yes X No 6d and 6e) for tax year(s) beginning before 2019? If "Yes," list the years 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 N/A 2b statement - see instructions.) c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here. 3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? b If "Yes," did it have excess business holdings in 2019 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Form 4720, N/A 3b Schedule C, to determine if the foundation had excess business holdings in 2019.)

Form **990-PF** (2019)

X

4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?

had not been removed from jeopardy before the first day of the tax year beginning in 2019?

b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that

Page 6

| FORM 990-PF (2019) FOUNDATION CHARTTABLE TR | .051 | | 04-0005 | 000 | | aye o |
|--|---|-----------------------------|--|-------|------------------------------|-----------------|
| Part VII-B Statements Regarding Activities for Which I | Form 4720 May Be F | Required (continu | ued) | , | | 1 |
| 5a During the year, did the foundation pay or incur any amount to: | | | | • | Yes | No |
| (1) Carry on propaganda, or otherwise attempt to influence legislation (section | | | s X No | | | |
| (2) Influence the outcome of any specific public election (see section 4955); of | or to carry on, directly or indire | ectly, | | | | |
| any voter registration drive? | | Ye | s X No | , | | } |
| (3) Provide a grant to an individual for travel, study, or other similar purposes | ? | Ye | s X No | | | |
| (4) Provide a grant to an organization other than a charitable, etc., organization | | | | ` | • | |
| 4945(d)(4)(A)? See instructions | | Ye | s X No | • 5 | , | ٠. |
| (5) Provide for any purpose other than religious, charitable, scientific, literary, | or educational purposes, or | for | | ٠. | |]_] |
| the prevention of cruelty to children or animals? | | Ye | s X No | | * . | ` - |
| b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify un- | der the exceptions described | in Regulations | | · | | |
| section 53.4945 or in a current notice regarding disaster assistance? See instr | | | N/A | 5b | | |
| Organizations relying on a current notice regarding disaster assistance, check | | | | , | | . ! |
| c If the answer is "Yes" to question 5a(4), does the foundation claim exemption f | rom the tax because it mainta | med | | | | |
| expenditure responsibility for the grant? | N | I/A 🔲 Ye | s No | _ | , . | ٠, |
| If "Yes," attach the statement required by Regulations section 53.4945-5(d). | | | ı | 1 | *- | [] |
| 6a Did the foundation, during the year, receive any funds, directly or indirectly, to | pay premiums on | | | ٠, | | 1, 7 |
| a personal benefit contract? | | Ye | s X No | | ٠,٠,٠ | |
| b Did the foundation, during the year, pay premiums, directly or indirectly, on a p | personal benefit contract? | | | 6b | | X |
| If "Yes" to 6b, file Form 8870. | | | | | | 1 |
| 7a At any time during the tax year, was the foundation a party to a prohibited tax s | shelter transaction? | Ye | es 🗓 No | `, | | (|
| b If "Yes," did the foundation receive any proceeds or have any net income attrib | | | N/A | 7b | | <u> </u> |
| 8 Is the foundation subject to the section 4960 tax on payment(s) of more than 5 | \$1,000,000 in remuneration o | r | | | | 7 |
| excess parachute payment(s) during the year? | | | s X No | ,- | | |
| Part VIII Information About Officers, Directors, Trust | ees, Foundation Ma | nagers, Highly | / | | - | |
| Paid Employees, and Contractors | | | | | | |
| 1 List all officers, directors, trustees, and foundation managers and t | heir compensation. | | | | | |
| | (b) Title, and average hours per week devoted | (c) Compensation | (d) Contributions to employee benefit plans and deferred | , (| (e) Exp | ense , other |
| (a) Name and address | to position | (If not paid, enter -0-) | and deferred compensation | l a | allowa | nces |
| ULF B. HEIDE | TRUSTEE | | | | | |
| 34 FOSTER STREET | | | | | | |
| MARBLEHEAD, MA 01945 | 1.00 | 0. | 0 | . | | 0. |
| ELIZABETH C. HEIDE | TRUSTEE | | | | | |
| 34 FOSTER STREET | | | | | | |
| MARBLEHEAD, MA 01945 | 1.00 | 0. | 0 | . | | 0. |
| FRANK P. CONRAD | TRUSTEE | | | | | |
| 8 CEDAR ROAD | | | | | | |
| WESTON, MA 02493 | 1.00 | 0. | 0 | | | 0. |
| ELIZABETH H. HEIDE | TRUSTEE | | | | | |
| 108 MT. VERNON STREET, APT. 7 | | | | | | |
| BOSTON, MA 02108 | 1.00 | 0. | 0 | | | 0. |
| 2 Compensation of five highest-paid employees (other than those inc | | 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 deterred compensation | a | (e) Exp ccount, allowa | , other |
| NONE | | | | | | |
| NON | 1 | | | | | |
| | | | | | | |
| | 1 | | | | | |
| | | | - | | | |
| t | 1 | | | | | |
| | | | | +- | | |
| | 1 | | | | | |
| <u> </u> | | | | + | | |
| | 1 | | | | | |
| The state of the sample of the | | | | | | 0 |
| Total number of other employees paid over \$50,000 | | | | - 000 |) DE | (2010) |

| 3 Five highest-paid independent contractors for professional services. If none, | enter "NONE." | | |
|--|---|--|------------------|
| (a) Name and address of each person paid more than \$50,000 | (b) Type of service | | (c) Compensation |
| NONE | | | <u> </u> |
| | | | |
| | | | |
| | | | |
| <u>; </u> | | | |
| <u> </u> | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| Total number of others receiving over \$50,000 for professional services | | ▶ | |
| Part IX-A Summary of Direct Charitable Activities | | | |
| List the foundation's four largest direct charitable activities during the tax year. Include relevant number of organizations and other beneficiaries served, conferences convened, research paper | statistical information such as the rs produced, etc. | | Expenses |
| 1 NOT APPLICABLE | | | |
| | | 1 | |
| | | 1 | 0. |
| 2 | | | |
| , | | 1 | |
| | | 1 | |
| 3 | | | |
| | | 1 | |
| | | 1 | |
| 4 | | | |
| | | 1 | |
| | | ┪ | |
| Part IX-B Summary of Program-Related Investments | | <u> </u> | |
| Describe the two largest program-related investments made by the foundation during the tax years. | ear on lines 1 and 2. | | Amount |
| NOT APPLICABLE | | | |
| 1 NOT ATTECADED | ···· | † | |
| | | 1 | 0. |
| 2 | | | |
| <u> </u> | | 1 | |
| | | ┪ | |
| All other program-related investments. See instructions. | | | |
| 3 NOT APPLICABLE | | } | |
| NOT AFFIICABLE | | 1 | |
| | | 1 | |
| | | 1 | |
| | | 1 | |
| | | - | ^ |
| | | 1 | 0. |
| Total, Add lines 1 through 3 | | - | 0. |

| P | art X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations | ndations, | see instructions) |
|----------|--|--------------|--------------------|
| <u> </u> | Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes: | | |
| • | Average monthly fair market value of securities | 1a | 11,758,424. |
| | Average of monthly cash balances | 1b | 73,307. |
| | Fair market value of all other assets | 1c | |
| - | Total (add lines 1a, b, and c) | 1d | 11,831,731. |
| | Reduction claimed for blockage or other factors reported on lines 1a and | | |
| ٠ | 1c (attach detailed explanation) 1e 0 • | | |
| 2 | Acquisition indebtedness applicable to line 1 assets | 2 | 0. |
| 3 | Subtract line 2 from line 1d | 3 | 11,831,731. |
| 4 | Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions) | 4 | 177,476. |
| 5 | Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4 | 5 | 11,654,255. |
| 6 | Minimum investment return. Enter 5% of line 5 | 6 | 582,713. |
| | art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations are | nd certain | |
| | foreign organizations, check here and do not complete this part.) | | |
| 1 | Minimum investment return from Part X, line 6 | 1 | 582,713. |
| 2a | Tax on investment income for 2019 from Part VI, line 5 | | |
| | Income tax for 2019. (This does not include the tax from Part VI.) |] | |
| | Add lines 2a and 2b | 2c | 13,201. |
| 3 | Distributable amount before adjustments. Subtract line 2c from line 1 | 3 | 569,512. |
| 4 | Recoveries of amounts treated as qualifying distributions | 4 | 0. |
| 5 | Add lines 3 and 4 | 5 | 569,512. |
| 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 | 569,512. |
| = | art XII Qualifying Distributions (see instructions) | | |
| ុ1 | Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes: | | 201 006 |
| | Expenses, contributions, gifts, etc total from Part I, column (d), line 26 | 1a | 381,086. |
| | 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: | | |
| а | Suitability test (prior IRS approval required) | 3a | |
| b | Cash distribution test (attach the required schedule) | 3b | 224 225 |
| 4 | Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8; and Part XIII, line 4 | 4 | 381,086. |
| 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 | 5 | 0. |
| 6 | Adjusted qualifying distributions Subtract line 5 from line 4 | 6 | 381,086. |
| | Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation (4940(e) reduction of tax in those years. | qualifies fo | or the section |

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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 | | | | 569,512. |
| 2 Undistributed income, if any, as of the end of 2019 | | | | |
| a Enter amount for 2018 only | | | 0. | |
| b Total for prior years: | | 0 | | |
| | 10. | 0. | | |
| 3 Excess distributions carryover, if any, to 20 | 19: | | an and then | |
| a From 2014 | | | | |
| b From 2015 | | | | |
| c From 2016 | | | | |
| d From 2017 220,34 | | | |] |
| e From 2018 138, 22 | | nyary symmetri menty y | · · · · · · · · · · · · · · · · · · · | |
| f Total of lines 3a through e | 358,571. | | | |
| 4 Qualifying distributions for 2019 from | | | | |
| Part XII, line 4: ► \$ 381,08 | | | 0. | |
| a Applied to 2018, but not more than line 2a | | | U• | |
| b Applied to undistributed income of prior | | 0. | | |
| years (Election required - see instructions) | | 0. | | |
| c Treated as distributions out of corpus | 0. | | | |
| (Election required - see instructions) | | | | 381,086. |
| d Applied to 2019 distributable amount | | | | 301,000. |
| e Remaining amount distributed out of corpu | s 0. | | | |
| 5 Excess distributions carryover applied to 2019 (If an amount appears in column (d), the same amounts be shown in column (a)) | 188,426. | | | 188,426. |
| 6 Enter the net total of each column as indicated below: | | | | |
| a Corpus Add lines 3f, 4c, and 4e Subtract line 5 | 170,145. | | • | |
| 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 | <u> </u> | 0. | | |
| d Subtract line 6c from line 6b. Taxable | | | | |
| amount - see instructions | | 0. | | |
| e Undistributed income for 2018. Subtract lin | e | | | |
| 4a from line 2a. Taxable amount - see instr. | | | 0. | |
| f Undistributed income for 2019. Subtract | | | | |
| lines 4d and 5 from line 1. This amount mu | st | | | |
| be distributed in 2020 | | | | 0. |
| 7 Amounts treated as distributions out of | | 1 t a 10 t | илин на приме полиненальна | country and to take to |
| corpus to satisfy requirements imposed by | | Thirty to a contract of the co | | |
| section 170(b)(1)(F) or 4942(q)(3) (Election | | , , , | | |
| may be required - see instructions) | 0. | | | |
| 8 Excess distributions carryover from 2014 | | | | |
| not applied on line 5 or line 7 | Ō. | , bit I | int deals of | 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 |
| 9 Excess distributions carryover to 2020 | | 4.1 | , , , | |
| Subtract lines 7 and 8 from line 6a | 170,145. | | 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 | 44, 1 |
| O Analysis of line 9: | | | | |
| a Excess from 2015 | | | , · | , |
| b Excess from 2016 | | | | |
| c Excess from 2017 31,92 | - | | | · . |
| d Excess from 2018 138, 22 | <u>5.</u> | | | |
| e Excess from 2019 | | | | 5 000 DE (0040) |

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FOUNDATION CHARITABLE TRUST 04-6665830 Page 10 Form 990-PF (2019) Part XIV Private Operating Foundations (see instructions and Part VII-A, question 9) N/A 1 a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2019, enter the date of the ruling b Check box to indicate whether the foundation is a private operating foundation described in section 4942(j)(3) or 4942(1)(5) Prior 3 years √ax year 2 a Enter the lesser of the adjusted net (c) 2017 **(b)** 2018 (d) 2016 (e) Total (a) 2019 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 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 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.) 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).) ULF B. HEIDE b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest. NONE 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. a The name, address, and telephone number or email address of the person to whom applications should be addressed: **b** The form in which applications should be submitted and information and materials they should include: c Any submission deadlines: d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors: Form **990-PF** (2019) 923601 12-17-19

THE ULF B. HEIDE AND ELIZABETH C. HEIDE

15010318 793135 99980

FOUNDATION CHARITABLE TRUST

Supplementary Information (continued) Part XV Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, show any relationship to Foundation Purpose of grant or Amount status of contribution any foundation manager Name and address (home or business) or substantial contributor recipient a Paid during the year PUBLIC CHARITY GENERAL CHARITABLE NONE DANA FARBER CANCER INSTITUTE 450 BROOKLINE AVENUE 2.000. BOSTON MA 02115 PUBLIC CHARITY GENERAL CHARITABLE NONE SALVATION ARMY 1500 WASHINGTON STREET 850. BOSTON MA 02118 PUBLIC CHARITY GENERAL CHARITABLE WELLESLEY STUDENTS AID SOCIETY, INC. NONE 106 CENTRAL STREET <u>50.</u> WELLESLEY MA 02481 PUBLIC CHARITY GENERAL CHARITABLE 152 COMMONWEALTH FOUNDATION NONE 152 COMMONWEALTH AVENUE BOSTON, MA 02116 1,000. PUBLIC CHARITY GENERAL CHARITABLE ABBOTT PUBLIC LIBRARY FUND NONE 235 PLEASANT STREET 10 000. MARBLEHEAD MA 01945 SEE CONTINUATION SHEET(S) ▶ 3a 381,086, Total b Approved for future payment NONE Total

| Part XV Supplementary Information | | | · · · · · · · · · · · · · · · · · · · | |
|--|--|----------------------|---------------------------------------|----------|
| 3 Grants and Contributions Paid During the Y | | | T | |
| Recipient | If recipient is an individual, show any relationship to any foundation manager | Foundation status of | Purpose of grant or contribution | Amount |
| Name and address (home or business) | or substantial contributor | recipient | | |
| | | | | |
| BANCROFT SCHOOL | NONE | PUBLIC CHARITY | GENERAL CHARITABLE | |
| 110 SHORE DRIVE | | | | 400, |
| WORCESTER, MA 01605 | | | | 400, |
| BOSTON SYMPHONY ORCHESTRA, | NONE | PUBLIC CHARITY | GENERAL CHARITABLE | |
| 301 MASSACHUSETTS AVENUE | | | × | |
| BOSTON, MA 02116 | | | | 10,000, |
| | | | | |
| NEW ENGLAND CONSERVATORY | NONE | PUBLIC CHARITY | GENERAL CHARITABLE | |
| 290 HUNTINGTON AVENUE | | | | |
| BOSTON, MA 02115 | | | | 100. |
| | | | | |
| LAHEY HOSPITAL AND MEDICAL CENTER | NONE | PUBLIC CHARITY | GENERAL CHARITABLE | |
| 41 MALL ROAD BURLINGTON MA 01805 | | | | 500. |
| BORDINGTON, MA 01003 | | | | 300, |
| MAKING ENDS MEET | NONE | PUBLIC CHARTTY | GENERAL CHARITABLE | |
| P. O. BOX 901 | NONE | TOBBIC CIBACITI | | |
| MARBLEHEAD MA 01945 | | | | 350. |
| | | | | |
| MARBLEHEAD COUNSELING CENTER | NONE | PUBLIC CHARITY | GENERAL CHARITABLE | |
| 66 CLIFTON AVENUE | | | | |
| MARBLEHEAD MA 01945 | | | | 150. |
| | | | | • |
| MARBLEHEAD DOLLARS FOR SCHOLARS | NONE | PUBLIC CHARITY | GENERAL CHARITABLE | , |
| P. O. BOX 4 | | | | 75. |
| MARBLEHEAD, MA 01945 | | | | 75. |
| ! | NONE | DIIDI TO CUARITY | GENERAL CHARITABLE | |
| MARBLEHEAD FOOD PANTRY 80 ATLANTIC AVENUE | NONE | FOBLIC CHARITI | GENERAL CHARITABLE | |
| MARBLEHEAD MA 01945 | | | | 300. |
| | | | | |
| MASSACHUSETTS GENERAL HOSPITAL | NONE | PUBLIC CHARITY | GENERAL CHARITABLE | |
| 55 FRUIT STREET | | | | |
| BOSTON, MA 02114 | | | | 750. |
| | | | | |
| MASSACHUSETTS INSTITUTE OF TECHNOLOGY | NONE | PUBLIC CHARITY | GENERAL CHARITABLE | |
| CAMBRIDGE MA 02139 | | | | 80,000. |
| Total from continuation sheets | | | | 367,186, |

Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient Foundation Purpose of grant or show any relationship to Amount contribution status of any foundation manager Name and address (home or business) recipient or substantial contributor MUSEUM OF FINE ARTS NONE PUBLIC CHARITY GENERAL CHARITABLE 465 HUNTINGTON AVENUE 18,625. BOSTON, MA 02115 MY BROTHERS TABLE NONE PUBLIC CHARITY GENERAL CHARITABLE 98 WILLOW STREET LYNN MA 01901 350. PARTNERS HEALTH CARE NONE PUBLIC CHARITY GENERAL CHARITABLE 399 REVOLUTION DRIVE SOMERVILLE MA 02145 1,000. OLD NORTH CHURCH PUBLIC CHARITY GENERAL CHARITABLE NONE 8 STACEY STREET MARBLEHEAD, MA 01945 3,900. PEABODY ESSEX MUSEUM NONE PUBLIC CHARITY GENERAL CHARITABLE 150 ESSEX STREET SALEM, MA 01970 25,000. RADCLIFFE INSTITUTE FOR ADVANCED NONE PUBLIC CHARITY GENERAL CHARITABLE STUDY 10 GARDEN STREET CAMBRIDGE MA 02138 500. VISITING NURSE ASSOCIATION OF CAPE NONE PUBLIC CHARITY GENERAL CHARITABLE COD HOSPICE 434 MA-134 500. SOUTH DENNIS MA 02660 SPUR NONE PUBLIC CHARITY GENERAL CHARITABLE PO BOX 1274, 6 ANDERSON STREET MARBLEHEAD, MA 01945 136. STORM TRYSAIL FOUNDATION NONE PUBLIC CHARITY GENERAL CHARITABLE 1 WOODVINE AVENUE LARCHMONT NY 10538 50,000, THE LANDING SCHOOL NONE PUBLIC CHARITY GENERAL CHARITABLE 286 RIVER ROAD ARUNDEL ME 04046 27,500. Total from continuation sheets

Part XV Supplementary Information

| Recipient If recipient is an individual show any relationship to any foundation manager or substantial contributor or substantial contributor status of recipient is any foundation manager or substantial contributor or substantial contr | Part XV Supplementary Informat 3 Grants and Contributions Paid During the | | | | I |
|--|--|--------------------------------|-----------------|----------------------------------|---------|
| Name and address (home or business) any foundation manager or substantial contributor or substantial | | If recipient is an individual, | Foundation | Durages of great or | |
| OWN OF MARBLEHEAD OWN OF MARBLEHEAD A SEMALL STREET ORDON, MA 02135 OWN OF MARBLEHEAD A SEMALL STREET ARBLEHEAD, MA 01945 OLDERNESS SCHOOL 3 CRAPEL LANE OLDERNESS, NH 03245 HE ROTARY FOUNDATION HE ROTARY FOUNDATION HE ROTARY FOUNDATION A2280 COLLECTIONS CENTER DRIVE HICAGO, IL 60693 LZHEIMERS ASSOCIATION SONE PUBLIC CHARITY SENERAL CHARITABLE LZHEIMERS ASSOCIATION NONE PUBLIC CHARITY SENERAL CHARITABLE LZHEIMERS ASSOCIATION SONE PUBLIC CHARITY SENERAL CHARITABLE LZHEIMERS ASSOCIATION SONE A1CHIGAN AVENUE HICAGO, IL 60601 SONE SANTON, MA 02021 SONE ANTON, MA 02021 SONE SONE PUBLIC CHARITY SENERAL CHARITABLE SONE S | Name and address (home or business) | any foundation manager | status of | Purpose of grant or contribution | Amount |
| NOTE PUBLIC CHARITY GENERAL CHARITABLE LZHEIMERS ASSOCIATION NONE LZHEIMERS ASSOCIATION STREET NONE LZHEIMERS ASSOCIATION ST. M. MICHIGAN AVENUE HICAGO, IL 60601' LUSEUM OF AMERICAN BIRD ART ANTON, MA 02021 ALLING FOUNDATION OF NEW YORK A. O. BOX 124 YE, NY 10580 DENERAL CHARITABLE DENERAL CHARITABLE DENERAL CHARITABLE LARITABLE DENERAL CHARITABLE DENERAL CHARITABLE LARITABLE LOCALITY GENERAL CHARITABLE SENERAL CHARITABLE LOCALITY GENERAL CHARITABLE SENERAL CHARITABLE | | or substantial contributor | Toopion | , | |
| NOTE PUBLIC CHARITY GENERAL CHARITABLE LZHEIMERS ASSOCIATION NONE LZHEIMERS ASSOCIATION STREET NONE LZHEIMERS ASSOCIATION ST. M. MICHIGAN AVENUE HICAGO, IL 60601' LUSEUM OF AMERICAN BIRD ART ANTON, MA 02021 ALLING FOUNDATION OF NEW YORK A. O. BOX 124 YE, NY 10580 DENERAL CHARITABLE DENERAL CHARITABLE DENERAL CHARITABLE LARITABLE DENERAL CHARITABLE DENERAL CHARITABLE LARITABLE LOCALITY GENERAL CHARITABLE SENERAL CHARITABLE LOCALITY GENERAL CHARITABLE SENERAL CHARITABLE | мсвн | NONE | PUBLIC CHARTTY | GENERAL CHARITABLE | |
| OWN OF MARBLEHEAD OWN OF MARBLEHEAD ASSAUL STREET ARBELHEAD, MA 01945 OLDERNESS SCHOOL OLDERNESS SCHOOL OLDERNESS SCHOOL OLDERNESS NH 03245 HE ROTARY FOUNDATION HE ROTARY FOUNDATION HE ROTARY FOUNDATION NONE PUBLIC CHARITY SENERAL CHARITABLE 100 LZHEIMERS ASSOCIATION NONE PUBLIC CHARITY SENERAL CHARITABLE LZHEIMERS ASSOCIATION NONE PUBLIC CHARITY SENERAL CHARITABLE SENERAL CHARITABLE 101 LZHEIMERS ASSOCIATION NONE PUBLIC CHARITY SENERAL CHARITABLE SENERAL CHARITABLE 102 LZHEIMERS ASSOCIATION NONE PUBLIC CHARITY SENERAL CHARITABLE | | HONE | TOBBIC CIBICITI | CHARTINEES CHARTINEES | , |
| 4 SEWALL STREET ARBLEHEAD, MA 01945 COLDERNESS SCHOOL 3 CHAPEL LANE 3 CHAPEL LANE COLDERNESS, NH 03245 HE ROTARY FOUNDATION HICAGO, IL 60693 LZHEIMERS ASSOCIATION HICAGO, IL 60601 LZHEIMERS ASSOCIATION HICAGO, IL 60601 SEMERAL CHARITABLE USEUM OF AMERICAN BIRD ART HONE HICAGO, IL 60601 SOURTH SHORE MEDICAL CENTER NONE PUBLIC CHARITY HOLD CHARITABLE HOLD CHARITY | BOSTON, MA 02135 | | <u> </u> | | 400 |
| 4 SEWALL STREET ARBLEHEAD, MA 01945 COLDERNESS SCHOOL 3 CHAPEL LANE 3 CHAPEL LANE COLDERNESS, NH 03245 HE ROTARY FOUNDATION HICAGO, IL 60693 LZHEIMERS ASSOCIATION HICAGO, IL 60601 LZHEIMERS ASSOCIATION HICAGO, IL 60601 SEMERAL CHARITABLE USEUM OF AMERICAN BIRD ART HONE HICAGO, IL 60601 SOURTH SHORE MEDICAL CENTER NONE PUBLIC CHARITY HOLD CHARITABLE HOLD CHARITY | | | | | |
| ARBLEHEAD, MA 01945 CLORENESS SCHOOL 3 CHAPEL LANE CLORENESS, NH 03245 HE ROTARY FOUNDATION 4280 COLLECTIONS CENTER DRIVE HICAGO, IL 60693 LZHRIMERS ASSOCIATION NONE PUBLIC CHARITY SENERAL CHARITABLE LZHRIMERS ASSOCIATION NONE PUBLIC CHARITY SENERAL CHARITABLE LZHRIMERS ASSOCIATION NONE PUBLIC CHARITY SENERAL CHARITABLE SSC USEUM OF AMERICAN BIRD ART ANTON, MA 02021 ALLING FOUNDATION OF NEW YORK O. BOX 124 VE, NY 10580 CORTA SHORE MEDICAL CENTER NONE PUBLIC CHARITY SENERAL CHARITABLE 5,000 STREST ANTON, MA 02021 SENERAL CHARITABLE PUBLIC CHARITY SENERAL CHARITABLE 5,000 STREST ANTON, MA 02021 SENERAL CHARITABLE 1 HIGHLAND AVENUE | TOWN OF MARBLEHEAD | NONE | | GENERAL CHARITABLE | |
| OLDERNESS SCHOOL 3 CHAPEL LANE OLDERNESS, NH 03245 HE ROTARY FOUNDATION HE ROTARY FOUNDATION HE ROTARY FOUNDATION HONE PUBLIC CHARITY SEMERAL CHARITABLE 125,000 LZHEIMERS ASSOCIATION LZHEIMERS ASSOCIATION HICAGO, IL 60693 NONE PUBLIC CHARITY SEMERAL CHARITABLE LZHEIMERS ASSOCIATION FINANCHIGAN AVENUE HICAGO, IL 60601 USEUM OF AMERICAN BIRD ART HICAGO, IL 60601 S50 WASHINGTON STREET ANTON, MA 02021 ALLING FOUNDATION OF NEW YORK LO. BOX 124 VE, NY 10580 DRTH SHORE MEDICAL CENTER NONE PUBLIC CHARITY SEMERAL CHARITABLE 5,000 5,000 STRT SHORE MEDICAL CENTER NONE PUBLIC CHARITY SEMERAL CHARITABLE | 44 SEWALL STREET | | | | |
| 3 CRAFEL LANE OLDERNESS, NH 03245 HE ROTARY FOUNDATION HE ROTARY FOUNDATION HE ROTARY FOUNDATION AUGUST CENTER DRIVE HICAGO, IL 60693 LZHEIMERS ASSOCIATION LZHEIMERS ASSOCIATION NONE PUBLIC CHARITY GENERAL CHARITABLE LZHEIMERS ASSOCIATION NONE PUBLIC CHARITY GENERAL CHARITABLE LZHEIMERS ASSOCIATION NONE PUBLIC CHARITY GENERAL CHARITABLE S50 USEUM OF AMERICAN BIRD ART NONE FUBLIC CHARITY GENERAL CHARITABLE ANTON, MA 02021 AILING FOUNDATION OF NEW YORK NONE PUBLIC CHARITY GENERAL CHARITABLE 5,000 AILING FOUNDATION OF NEW YORK NONE PUBLIC CHARITY GENERAL CHARITABLE 5,000 TOTAL SHORE MEDICAL CENTER NONE PUBLIC CHARITY GENERAL CHARITABLE | MARBLEHEAD, MA 01945 | | | | 1,000 |
| 3 CRAFEL LANE OLDERNESS, NH 03245 HE ROTARY FOUNDATION HE ROTARY FOUNDATION HE ROTARY FOUNDATION AUGUST CENTER DRIVE HICAGO, IL 60693 LZHEIMERS ASSOCIATION LZHEIMERS ASSOCIATION NONE PUBLIC CHARITY GENERAL CHARITABLE LZHEIMERS ASSOCIATION NONE PUBLIC CHARITY GENERAL CHARITABLE LZHEIMERS ASSOCIATION NONE PUBLIC CHARITY GENERAL CHARITABLE S50 USEUM OF AMERICAN BIRD ART NONE FUBLIC CHARITY GENERAL CHARITABLE ANTON, MA 02021 AILING FOUNDATION OF NEW YORK NONE PUBLIC CHARITY GENERAL CHARITABLE 5,000 AILING FOUNDATION OF NEW YORK NONE PUBLIC CHARITY GENERAL CHARITABLE 5,000 TOTAL SHORE MEDICAL CENTER NONE PUBLIC CHARITY GENERAL CHARITABLE | | | | | |
| OLDERNESS NH 03245 HE ROTARY FOUNDATION HE ROTARY FOUNDATION A280 COLLECTIONS CENTER DRIVE HICAGO, IL 60693 LZHEIMERS ASSOCIATION NONE PUBLIC CHARITY SENERAL CHARITABLE LZHEIMERS ASSOCIATION NONE PUBLIC CHARITY SENERAL CHARITABLE SENERAL CHARITABLE LUSEUM OF AMERICAN BIRD ART HONE ANTON, MA 02021 ANTON, MA 02021 ATLING FOUNDATION OF NEW YORK O. BOX 124 YE, NY 10580 ORTH SHORE MEDICAL CENTER NONE PUBLIC CHARITY SENERAL CHARITABLE 5,000 5,000 SENERAL CHARITABLE FUBLIC CHARITY SENERAL CHARITABLE FUBLIC CHARITY SENERAL CHARITABLE FUBLIC CHARITY SENERAL CHARITABLE | | NONE | PUBLIC CHARITY | GENERAL CHARITABLE | |
| HE ROTARY FOUNDATION 4280 COLLECTIONS CENTER DRIVE HICAGO, IL 60693 LZHEIMERS ASSOCIATION LZHEIMERS ASSOCIATION NONE PUBLIC CHARITY GENERAL CHARITABLE 25 N. MICHIGAN AVENUE HICAGO, IL 60601' USEUM OF AMERICAN BIRD ART 63 WASHINGTON STREET ANTON, MA 02021 ALLING FOUNDATION OF NEW YORK O. BOX 124 YE, NY 10580 PUBLIC CHARITY GENERAL CHARITABLE 5,000 FUBLIC CHARITY GENERAL CHARITABLE 5,000 FUBLIC CHARITY GENERAL CHARITABLE FUBLIC CHARITY GENERAL CHARITABLE 5,000 FUBLIC CHARITY GENERAL CHARITABLE FUBLIC CHARITY GENERAL CHARITABLE | | | | | 125,000 |
| A280 COLLECTIONS CENTER DRIVE HICAGO, IL 60693 LZHEIMERS ASSOCIATION LZHEIMERS ASSOCIATION PUBLIC CHARITY SENERAL CHARITABLE 550 USEUM OF AMERICAN BIRD ART ANTON, MA 02021 AILING FOUNDATION OF NEW YORK O. BOX 124 YE, NY 10580 ORTH SHORE MEDICAL CENTER I HIGHLAND AVENUE NONE PUBLIC CHARITY SENERAL CHARITABLE 5,000 5,000 PUBLIC CHARITY SENERAL CHARITABLE PUBLIC CHARITY SENERAL CHARITABLE | | | | | |
| A280 COLLECTIONS CENTER DRIVE HICAGO, IL 60693 LZHEIMERS ASSOCIATION LZHEIMERS ASSOCIATION PUBLIC CHARITY SENERAL CHARITABLE 550 USEUM OF AMERICAN BIRD ART ANTON, MA 02021 AILING FOUNDATION OF NEW YORK O. BOX 124 YE, NY 10580 ORTH SHORE MEDICAL CENTER I HIGHLAND AVENUE NONE PUBLIC CHARITY SENERAL CHARITABLE 5,000 5,000 PUBLIC CHARITY SENERAL CHARITABLE PUBLIC CHARITY SENERAL CHARITABLE | THE ROTARY FOUNDATION | NONE | PUBLIC CHARITY | GENERAL CHARITABLE | |
| LZHEIMERS ASSOCIATION 25 N. MICHIGAN AVENUE HICAGO, IL 60601' USEUM OF AMERICAN BIRD ART 63 WASHINGTON STREET ANTON, MA 02021 ALLING FOUNDATION OF NEW YORK 0. BOX 124 YE, NY 10580 DRTH SHORE MEDICAL CENTER 1 HIGHLAND AVENUE PUBLIC CHARITY GENERAL CHARITABLE PUBLIC CHARITY GENERAL CHARITABLE PUBLIC CHARITY GENERAL CHARITABLE PUBLIC CHARITY GENERAL CHARITABLE | 14280 COLLECTIONS CENTER DRIVE | | | } | |
| 25 N. MICHIGAN AVENUE HICAGO, IL 60601' USEUM OF AMERICAN BIRD ART 63 WASHINGTON STREET ANTON, MA 02021 AILING FOUNDATION OF NEW YORK O. BOX 124 YE, NY 10580 PUBLIC CHARITY GENERAL CHARITABLE PUBLIC CHARITY GENERAL CHARITABLE 5,000 TOTH SHORE MEDICAL CENTER NONE PUBLIC CHARITY GENERAL CHARITABLE PUBLIC CHARITY GENERAL CHARITABLE | CHICAGO, IL 60693 | | | | 100 |
| 25 N. MICHIGAN AVENUE HICAGO, IL 60601' USEUM OF AMERICAN BIRD ART 63 WASHINGTON STREET ANTON, MA 02021 AILING FOUNDATION OF NEW YORK O. BOX 124 YE, NY 10580 PUBLIC CHARITY GENERAL CHARITABLE PUBLIC CHARITY GENERAL CHARITABLE 5,000 TOTH SHORE MEDICAL CENTER NONE PUBLIC CHARITY GENERAL CHARITABLE PUBLIC CHARITY GENERAL CHARITABLE | | | | | |
| USEUM OF AMERICAN BIRD ART HICAGO, IL 60601' USEUM OF AMERICAN BIRD ART HONE PUBLIC CHARITY GENERAL CHARITABLE 5,000 AILING FOUNDATION OF NEW YORK HONE PUBLIC CHARITY GENERAL CHARITABLE PUBLIC CHARITY GENERAL CHARITABLE FURTH SHORE MEDICAL CENTER HONE PUBLIC CHARITY GENERAL CHARITABLE PUBLIC CHARITY GENERAL CHARITABLE | ALZHEIMERS ASSOCIATION | NONE | PUBLIC CHARITY | GENERAL CHARITABLE | |
| USEUM OF AMERICAN BIRD ART 63 WASHINGTON STREET ANTON, MA 02021 ALLING FOUNDATION OF NEW YORK O. BOX 124 YE, NY 10580 DRTH SHORE MEDICAL CENTER NONE PUBLIC CHARITY GENERAL CHARITABLE PUBLIC CHARITY GENERAL CHARITABLE 5,000 5,000 | 225 N. MICHIGAN AVENUE | | | | |
| ANTON, MA 02021 AILING FOUNDATION OF NEW YORK O. BOX 124 YE, NY 10580 DRTH SHORE MEDICAL CENTER NONE PUBLIC CHARITY GENERAL CHARITABLE PUBLIC CHARITY GENERAL CHARITABLE 1 HIGHLAND AVENUE | CHICAGO, IL 60601' | | | | 550, |
| ANTON, MA 02021 AILING FOUNDATION OF NEW YORK O. BOX 124 YE, NY 10580 DRTH SHORE MEDICAL CENTER NONE PUBLIC CHARITY GENERAL CHARITABLE PUBLIC CHARITY GENERAL CHARITABLE 1 HIGHLAND AVENUE | | | | | |
| ANTON, MA 02021 AILING FOUNDATION OF NEW YORK O. BOX 124 YE, NY 10580 DRTH SHORE MEDICAL CENTER NONE PUBLIC CHARITY GENERAL CHARITABLE PUBLIC CHARITY GENERAL CHARITABLE 1 HIGHLAND AVENUE | MUSEUM OF AMERICAN BIRD ART | NONE | PUBLIC CHARITY | GENERAL CHARITABLE | |
| AILING FOUNDATION OF NEW YORK O. BOX 124 YE, NY 10580 DRTH SHORE MEDICAL CENTER NONE PUBLIC CHARITY GENERAL CHARITABLE 1 HIGHLAND AVENUE | | | | | 5 000 |
| ORTH SHORE MEDICAL CENTER NONE PUBLIC CHARITY GENERAL CHARITABLE HIGHLAND AVENUE | | | | | |
| ORTH SHORE MEDICAL CENTER NONE PUBLIC CHARITY GENERAL CHARITABLE HIGHLAND AVENUE | SATITING FOUNDATION OF NEW YORK | NONE | DIBLIC CHARITY | CENEDAL CHARTMARIE | |
| ORTH SHORE MEDICAL CENTER NONE PUBLIC CHARITY GENERAL CHARITABLE 1 HIGHLAND AVENUE | P. 0. BOX 124 | NONE | FOBLIC CHARITI | GENERAL CHARITABLE | |
| 1 HIGHLAND AVENUE | RYE, NY 10580 | | | | 5,000, |
| 1 HIGHLAND AVENUE | | | | | |
| | NORTH SHORE MEDICAL CENTER | NONE | PUBLIC CHARITY | GENERAL CHARITABLE | |
| ALEM, MA 01970 | 81 HIGHLAND AVENUE | | | | 10 000 |
| | SALER, MA 01970 | | | | 10,000, |
| | | | | | |
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| | | | | | |
| | | | | | |
| Total from continuation sheets | Total from continuation sheets | | | | |

| Part XVI-A Analysis of Income-Produ | | | 1 = : : | | |
|---|----------------------|-----------------------|--|------------------------------------|--------------------------|
| Enter gross amounts unless otherwise indicated. | (a) Business | (b) | (C) Exclu- | by section 512, 513, or 514 (d) | (e) Related or exempt |
| 1 Program service revenue: | code | Amount | sion | Amount | function income |
| a | - | | _ - | | |
| b | | | - | | |
| c | - | | | | <u></u> |
| | - | | | | |
| e | - - | | | | |
| g Fees and contracts from government agencies | | | | | |
| 2 Membership dues and assessments | | | | | |
| 3 Interest on savings and temporary cash | | | | | |
| investments | | | | | |
| 4 Dividends and interest from securities | | <u></u> | _ | | 214,192 |
| 5 Net rental income or (loss) from real estate: | , | ·, | | | <u> </u> |
| a Debt-financed property | | | <u> </u> | | |
| b Not debt-financed property | | | - | | |
| 6 Net rental income or (loss) from personal | | | | | |
| property 7 Other investment income | | | | | 28 |
| 8 Gain or (loss) from sales of assets other | | | | | |
| than inventory | | | | | 445,812 |
| 9 Net income or (loss) from special events | | | | | |
| O Gross profit or (loss) from sales of inventory | | | | | |
| 1 Other revenue: | | | | | |
| a | _ | | | | |
| b | _ | | | | |
| C | 1 1 | ··· | | | |
| d | - | | | | |
| e | - | <u> </u> | | 0. | 660,032 |
| 13 Total. Add line 12, columns (b), (d), and (e) | L | | • • • • | 13 | 660,032 |
| (See worksheet in line 13 instructions to verify calculations.) | | | | | 0007002 |
| Part XVI-B Relationship of Activities | | anlichment of F | Evemnt E | Purnosos | |
| rait XVI-B Relationship of Activities | | | -xempt i | | |
| Line No. Explain below how each activity for which in | | | -A contribute | ed importantly to the accomp | olishment of |
| the foundation's exempt purposes (other that | an by providing fund | s for such purposes). | | | |
| NOT APPLICABLE | | | | | |
| | | | | | |
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923621 12-17-19

| Exempt Organizations 1 Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) (other than section 501(c)(3) organizations) or in section 527, relating to political organizations? 1 Transfers from the reporting foundation to a noncharitable exempt organization of: (1) Cash (2) Other assets 1a(2) (1) Sales of assets to a noncharitable exempt organization (1) Sales of assets to a noncharitable exempt organization (2) Purchases of assets from a noncharitable exempt organization (3) Rental of facilities, equipment, or other assets (4) Reimbursement arrangements (5) Loans or loan guarantees (6) Performance of services or membership or fundraising solicitations 1b(6) | Yes No | |
|---|--|-------------|
| (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 (2) Other assets b Other transactions: (1) Sales of assets to a noncharitable exempt organization (2) Purchases of assets from a noncharitable exempt organization (3) Rental of facilities, equipment, or other assets (4) Reimbursement arrangements (5) Loans or loan guarantees | - X X X X X | _) |
| a Transfers from the reporting foundation to a noncharitable exempt organization of: (1) Cash (2) Other assets (1) Cash Ia(1) (2) Other transactions: (1) Sales of assets to a noncharitable exempt organization (2) Purchases of assets from a noncharitable exempt organization (3) Rental of facilities, equipment, or other assets (4) Reimbursement arrangements (5) Loans or loan guarantees | x x x x | _, |
| (1) Cash1a(1)(2) Other assets1a(2)b Other transactions:(1) Sales of assets to a noncharitable exempt organization1b(1)(2) Purchases of assets from a noncharitable exempt organization1b(2)(3) Rental of facilities, equipment, or other assets1b(3)(4) Reimbursement arrangements1b(4)(5) Loans or loan guarantees1b(5) | x x x x | , |
| (2) Other assets b Other transactions: (1) Sales of assets to a noncharitable exempt organization (2) Purchases of assets from a noncharitable exempt organization (3) Rental of facilities, equipment, or other assets (4) Reimbursement arrangements (5) Loans or loan guarantees | x x x x | - • |
| b Other transactions: (1) Sales of assets to a noncharitable exempt organization (2) Purchases of assets from a noncharitable exempt organization (3) Rental of facilities, equipment, or other assets (4) Reimbursement arrangements (5) Loans or loan guarantees 10(1) 11(1) 12(1) 13(1) 14(1) 15(2) 15(3) | х х х | |
| (1) Sales of assets to a noncharitable exempt organization1b(1)(2) Purchases of assets from a noncharitable exempt organization1b(2)(3) Rental of facilities, equipment, or other assets1b(3)(4) Reimbursement arrangements1b(4)(5) Loans or loan guarantees1b(5) | Х Х Х | _ |
| (2) Purchases of assets from a noncharitable exempt organization (3) Rental of facilities, equipment, or other assets (4) Reimbursement arrangements (5) Loans or loan guarantees 1b(2) 1b(3) 1b(4) 1b(5) | X X | |
| (3) Rental of facilities, equipment, or other assets (4) Reimbursement arrangements (5) Loans or loan guarantees 1b(3) 1b(4) 1b(5) | Х | |
| (4) Reimbursement arrangements (5) Loans or loan guarantees 1b(4) 1b(5) | | |
| (5) Loans or loan guarantees | | _ |
| (e) zame or real grant meet | X | |
| | X | _ |
| c Sharing of facilities, equipment, mailing lists, other assets, or paid employees | X | |
| d If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other asset | | _ |
| 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 arrays | angements | |
| N/A | | _ |
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| | - | - |
| 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? b If "Yes," complete the following schedule. (a) Name of organization (b) Type of organization (c) Description of relationship | X No | — , — |
| N/A | | _ |
| N/A | | _ |
| | | _ |
| | | _ |
| | | _ |
| 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 fue, correct, and correct, and correct perfect than taxpayer) is based on all information of which preparer has any knowledge return with the shown below? Intel Tritle | scuss this preparer See instr | , |
| Frint/Type preparer's name Preparer's signature Date Check X if PTIN | | _ |
| (A) A (I) A colf employed | | |
| Paid FRANK P. CONRAD FRANK P. CONRAD P014608 | 388 | |
| Preparer Firm's name ► FRANK P. CONRAD, ESQ. Firm's EIN ► | <u>- </u> | - |
| Use Only | | |
| Firm's address ▶ 8 CEDAR ROAD | | _ |
| WESTON, MA 02493 Phone no. 781-899-64 | 460 | |
| Form 990 | | _ 9) |

| | DIVIDENDS | AND INTE | REST | FROM SECU | RITIES | S | TATEMENT | 1 |
|---|--------------|--------------------|---------|---------------------|---------|-------------------|----------------------|-------|
| , | GROSS | CAPITAI GAINS | | (A) REVENUE | NET : | (B) INVEST- | | |
| SOURCE | AMOUNT | DIVIDEN | os | PER BOOKS | MENT | INCOME | NET INC | COME |
| MERRILL LYNCH XXXX091 MERRILL LYNCH | 54,258. | | 0. | 54,258 | • . | 54,258. | | |
| KXXX604 MERRILL LYNCH | 37,103. | | 0. | 37,103 | . 3 | 37,103. | | |
| KXXX604 - ACCRUED INTEREST PAID MERRILL LYNCH | <3,710. | | 0. | <3,710 | | <3,710. | | |
| XXXX897 | 551,995. | 425,4 | 54. | 126,541 | . 12 | 26,541. | | • |
| TO PART I, LINE 4 | 639,646. | 425,4 | 54. | 214,192 | . 23 | L4,192. | | |
| FORM 990-PF | | OTHER : | (| A) | (B) |) | TATEMENT (C) | |
| DESCRIPTION | | | | | MENT IN | | ADJUSTI NET INCO | |
| DESCRIPTION MERRILL LYNCH XXXX8: GAIN | 97 - SEC 125 | 50 | | | | | | |
| MERRILL LYNCH XXXX8 | | | | BOOKS | | NCOME | | |
| MERRILL LYNCH XXXX8 GAIN TOTAL TO FORM 990-P | | | PER | 28. 28. | | 28. 28. | | |
| MERRILL LYNCH XXXX8 | F, PART I, I | LEGAI (A) EXPENSES | PER FEE | 28. 28. 28. INVEST- | MENT II | 28. 28. SO STED | TATEMENT (D) CHARITA | OME 3 |
| MERRILL LYNCH XXXX8 | F, PART I, I | LEGAI | PER FEE | 28. 28. | MENT II | 28. 28. 28. | NET INCO | OME 3 |

| PRM 990-PF TAXES | | | | STATEMENT | |
|---|------------------------------|-----------------------------------|-------------------------------|----------------------------|---------|
| DESCRIPTION | (A) EXPENSES PER BOOKS | (B) NET INVEST- MENT INCOME | (C) ADJUSTED NET INCOME | (D) CHARITA E PURPOS | |
| 2018 TAXES PAID 2019 ESTIMATED TAXES PAID | 1,101. 6,800. | 0. | | | 0. |
| TO FORM 990-PF, PG 1, LN 18 | 7,901. | 0. | | | 0. |
| FORM 990-PF | OTHER E | XPENSES | | STATEMENT | 5 |
| DESCRIPTION | (A) EXPENSES PER BOOKS | (B) NET INVEST- MENT INCOME | (C) ADJUSTED NET INCOME | (D) CHARITAI PURPOSI | |
| FIGURE FEES - COMM OF MASS INVESTMENT ADVISORY FEES ADR DEPOSITORY BANK CERTIFICATE FEES PAID | 70. 111,026. | 0. | | | 0. |
| | 40. | 0. | | | 0. |
| TO FORM 990-PF, PG 1, LN 23 | 111,136. | 0. | | | 0. |
| FORM 990-PF OTHER INCREASES | IN NET ASS | ETS OR FUND BA | LANCES | STATEMENT | 6 |
| DESCRIPTION | | | | AMOUNT | |
| NON DIVIDEND DISTRIBUTIONS RE | CEIVED | | | 3,20 | 02. |
| TOTAL TO FORM 990-PF, PART II | I, LINE 3 | | = | 3,20 | 02. |
| FORM 990-PF OTHER DECREASE | S IN NET AS | SETS OR FUND E | BALANCES | STATEMENT | ? 7 |
| DESCRIPTION | | | | AMOUNT | <u></u> |
| | ON ADJUSTME | NT | _ | 66 | 53. |
| <u>;</u> | _ | | | | |

| FORM 990-PF | CORPORATE STOCK | | STATEMENT 8 |
|--|-----------------|--------------------------|--------------------------|
| DESCRIPTION | | BOOK VALUE | FAIR MARKET VALUE |
| ML, - BAHL GAYN ACCT ML - FNDN MLPA | | 1,708,156. 6,436,631. | 2,145,519. 9,585,792. |
| TOTAL TO FORM 990-PF, PART II, | LINE 10B | 8,144,787. | 11,731,311. |
| FORM 990-PF | CORPORATE BONDS | | STATEMENT 9 |
| DESCRIPTION | | BOOK VALUE | FAIR MARKET : |
| ML - FNDN BOND ACCT | | 872,345. | 895,692. |
| TOTAL TO FORM 990-PF, PART II, | LINE 10C | 872,345. | 895,692. |