

Form **990-PF**

**Return of Private Foundation**

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

OMB No 1545-0047

**2019**

Department of the Treasury  
Internal Revenue Service

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▶ Go to [www.irs.gov/Form990PF](http://www.irs.gov/Form990PF) for instructions and the latest information.

Open to Public Inspection

For calendar year 2019 or tax year beginning \_\_\_\_\_, and ending \_\_\_\_\_

Name of foundation <b>THE URBAN CHARITABLE TRUST</b>		A Employer identification number <b>22-2861919</b>
Number and street (or P O box number if mail is not delivered to street address) <b>1106 WEBSTER STREET</b>	Room/suite	B Telephone number <b>(781) 784-8500</b>
City or town, state or province, country, and ZIP or foreign postal code <b>NEEDHAM, MA 02492</b>		C If exemption application is pending, check here <input type="checkbox"/> <b>6</b>
G Check all that apply: <input type="checkbox"/> Initial return <input type="checkbox"/> Initial return of a former public charity <input type="checkbox"/> Final return <input type="checkbox"/> Amended return <input type="checkbox"/> Address change <input type="checkbox"/> Name change		D 1. Foreign organizations, check here <input type="checkbox"/> 2. Foreign organizations meeting the 85% test, check here and attach computation <input type="checkbox"/>
H Check type of organization: <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <b>04</b> <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		E If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/>
I Fair market value of all assets at end of year (from Part II, col. (c), line 16) ▶ \$ <b>31,741.</b>	J Accounting method: <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____	F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/>
(Part I, column (d), must be on cash basis.)		

3/4

Part I Analysis of Revenue and Expenses <small>(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a))</small>	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
1 Contributions, gifts, grants, etc., received	35.		N/A	
2 Check <input checked="" type="checkbox"/> if the foundation is not required to attach Sch B				
3 Interest on savings and temporary cash investments	40.	40.		STATEMENT 1
4 Dividends and interest from securities				
5a Gross rents				
b Net rental income or (loss)				
6a Net gain or (loss) from sale of assets not on line 10				
b Gross sales price for all assets on line 6a				
7 Capital gain net income (from Part IV, line 2)		0.		
8 Net short-term capital gain				
9 Income modifications				
10a Gross sales less returns and allowances				
b Less Cost of goods sold				
c Gross profit or (loss)				
11 Other income				
12 Total Add lines 1 through 11	75.	40.		
13 Compensation of officers, directors, trustees, etc	0.	0.		0.
14 Other employee salaries and wages				
15 Pension plans, employee benefits				
16a Legal fees				
b Accounting fees				
c Other professional fees				
17 Interest				
18 Taxes <b>STMT 2</b>	35.	0.		0.
19 Depreciation and depletion				
20 Occupancy				
21 Travel, conferences, and meetings				
22 Printing and publications				
23 Other expenses <b>STMT 3</b>	127.	0.		0.
24 Total operating and administrative expenses. Add lines 13 through 23	162.	0.		0.
25 Contributions, gifts, grants paid	13,065.			13,065.
26 Total expenses and disbursements Add lines 24 and 25	13,227.	0.		13,065.
27 Subtract line 26 from line 12:				
a Excess of revenue over expenses and disbursements	-13,152.			
b Net investment income (if negative, enter -0-)		40.		
c Adjusted net income (if negative, enter -0-)			N/A	

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<b>Part II Balance Sheets</b> <small>Attached schedules and amounts in the description column should be for end-of-year amounts only</small>		Beginning of year	End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value
<b>Assets</b>	1 Cash - non-interest-bearing			
	2 Savings and temporary cash investments	45,077.	31,741.	31,741.
	3 Accounts receivable ▶			
	Less: allowance for doubtful accounts ▶			
	4 Pledges receivable ▶			
	Less: allowance for doubtful accounts ▶			
	5 Grants receivable			
	6 Receivables due from officers, directors, trustees, and other disqualified persons			
	7 Other notes and loans receivable ▶			
	Less: allowance for doubtful accounts ▶			
	8 Inventories for sale or use			
	9 Prepaid expenses and deferred charges			
	10a Investments - U.S. and state government obligations			
	b Investments - corporate stock			
	c Investments - corporate bonds			
	11 Investments - land, buildings, and equipment basis ▶			
Less accumulated depreciation ▶				
12 Investments - mortgage loans				
13 Investments - other				
14 Land, buildings, and equipment: basis ▶				
Less accumulated depreciation ▶				
15 Other assets (describe ▶)				
16 <b>Total assets</b> (to be completed by all filers - see the instructions. Also, see page 1, item I)	45,077.	31,741.	31,741.	
<b>Liabilities</b>	17 Accounts payable and accrued expenses			
	18 Grants payable			
	19 Deferred revenue			
	20 Loans from officers, directors, trustees, and other disqualified persons			
	21 Mortgages and other notes payable			
	22 Other liabilities (describe ▶ <b>OUTSTANDING CHECKS</b> )	13,017.	13,065.	
23 <b>Total liabilities</b> (add lines 17 through 22)	13,017.	13,065.		
<b>Net Assets or Fund Balances</b>	Foundations that follow FASB ASC 958, check here ▶ <input type="checkbox"/>			
	and complete lines 24, 25, 29, and 30			
	24 Net assets without donor restrictions			
	25 Net assets with donor restrictions			
	Foundations that do not follow FASB ASC 958, check here ▶ <input checked="" type="checkbox"/>			
	and complete lines 26 through 30			
	26 Capital stock, trust principal, or current funds	32,060.	18,676.	
27 Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.		
28 Retained earnings, accumulated income, endowment, or other funds	0.	0.		
29 <b>Total net assets or fund balances</b>	32,060.	18,676.		
30 <b>Total liabilities and net assets/fund balances</b>	45,077.	31,741.		

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

1 Total net assets or fund balances at beginning of year - Part II, column (a), line 29 (must agree with end-of-year figure reported on prior year's return)	1	32,060.
2 Enter amount from Part I, line 27a	2	-13,152.
3 Other increases not included in line 2 (itemize) ▶	3	0.
4 Add lines 1, 2, and 3	4	18,908.
5 Decreases not included in line 2 (itemize) ▶ <b>PRIOR YEAR ADJUSTMENT</b>	5	232.
6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 29	6	18,676.

**Part IV Capital Gains and Losses for Tax on Investment Income**

(a) List and describe the kind(s) of property sold (for example, real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.)		(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a				
b	<b>NONE</b>			
c				
d				
e				
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) ((e) plus (f) minus (g))	
a				
b				
c				
d				
e				
Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69.			(l) Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col. (h))	
(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any		
a				
b				
c				
d				
e				
2	Capital gain net income or (net capital loss)	{ If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7                 }	2	
3	Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 8, column (c). If (loss), enter -0- in Part I, line 8		3	

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

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

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

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period?

Yes  No

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

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

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col. (b) divided by col. (c))
2018	12,890.	50,351.	.256003
2017	12,119.	62,978.	.192432
2016	14,067.	74,591.	.188588
2015	12,375.	77,918.	.158821
2014	10,111.	86,978.	.116248
2	Total of line 1, column (d)		.912092
3	Average distribution ratio for the 5-year base period - divide the total on line 2 by 5.0, or by the number of years the foundation has been in existence if less than 5 years		.182418
4	Enter the net value of noncharitable-use assets for 2019 from Part X, line 5		37,833.
5	Multiply line 4 by line 3		6,901.
6	Enter 1% of net investment income (1% of Part I, line 27b)		0.
7	Add lines 5 and 6		6,901.
8	Enter qualifying distributions from Part XII, line 4		13,065.

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

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

Table with 11 rows for excise tax calculations. Includes sub-tables for Credits/Payments (6a-6d) and Refunded tax (11). Values are mostly 0.

Part VII-A Statements Regarding Activities

Table with 10 rows of activity questions and Yes/No columns. Includes 'N/A' and 'MA' entries. A handwritten '2' is next to row 9.

**Part VII-A Statements Regarding Activities** (continued)

	Yes	No
11 At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule. See instructions		X
12 Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement. See instructions		X
13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ► <u>N/A</u>	X	
14 The books are in care of ► <u>THE FOUNDATION</u> Telephone no. ► <u>(781) 784-8500</u> Located at ► <u>1106 WEBSTER STREET, NEEDHAM, MA</u> ZIP+4 ► <u>02492</u>		
15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here and enter the amount of tax-exempt interest received or accrued during the year ► 15   <u>N/A</u>		
16 At any time during calendar year 2019, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the foreign country ►		X

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

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

	Yes	No
1a During the year, did the foundation (either directly or indirectly): (1) Engage in the sale or exchange, or leasing of property with a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (6) Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
b If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions Organizations relying on a current notice regarding disaster assistance, check here ► <u>N/A</u>		
c Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2019?		X
2 Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)): a At the end of tax year 2019, did the foundation have any undistributed income (Part XIII, lines 6d and 6e) for tax year(s) beginning before 2019? If "Yes," list the years ► _____, _____, _____ <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement - see instructions.) <u>N/A</u> 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? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No b If "Yes," did it have excess business holdings in 2019 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Form 4720, Schedule C, to determine if the foundation had excess business holdings in 2019.) <u>N/A</u>		
4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?		X
b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2019?		X

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

		Yes	No
<b>5a</b> During the year, did the foundation pay or incur any amount to:			
(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, any voter registration drive?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(3) Provide a grant to an individual for travel, study, or other similar purposes?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(4) Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? See instructions	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
<b>b</b> If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance? See instructions Organizations relying on a current notice regarding disaster assistance, check here	N/A ▶ <input type="checkbox"/>	5b	
<b>c</b> If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? If "Yes," attach the statement required by Regulations section 53.4945-5(d).	N/A <input type="checkbox"/> Yes <input type="checkbox"/> No		
<b>6a</b> Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
<b>b</b> Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? If "Yes" to 6b, file Form 8870.		6b	X
<b>7a</b> At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
<b>b</b> If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction?	N/A	7b	
<b>8</b> Is the foundation subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		

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

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

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
CHRISTINE D. URBAN 1106 WEBSTER STREET NEEDHAM, MA 02492	TRUSTEE 0.00	0.	0.	0.
LYNN R. HOWARD 1106 WEBSTER STREET NEEDHAM, MA 02492	TRUSTEE 0.00	0.	0.	0.

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

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

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

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

**3** Five highest-paid independent contractors for professional services. If none, enter "NONE."

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

Total number of others receiving over \$50,000 for professional services ▶ 0

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

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

**Part IX-B** Summary of Program-Related Investments

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.	Amount
1 N/A	
2	
3 All other program-related investments. See instructions.	

Total. Add lines 1 through 3 ▶ 0.

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

<b>1</b>	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
<b>a</b>	Average monthly fair market value of securities	<b>1a</b>	0.
<b>b</b>	Average of monthly cash balances	<b>1b</b>	38,409.
<b>c</b>	Fair market value of all other assets	<b>1c</b>	
<b>d</b>	<b>Total</b> (add lines 1a, b, and c)	<b>1d</b>	38,409.
<b>e</b>	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation)	<b>1e</b>	0.
<b>2</b>	Acquisition indebtedness applicable to line 1 assets	<b>2</b>	0.
<b>3</b>	Subtract line 2 from line 1d	<b>3</b>	38,409.
<b>4</b>	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	<b>4</b>	576.
<b>5</b>	<b>Net value of noncharitable-use assets.</b> Subtract line 4 from line 3. Enter here and on Part V, line 4	<b>5</b>	37,833.
<b>6</b>	<b>Minimum investment return.</b> Enter 5% of line 5	<b>6</b>	1,892.

**Part XI Distributable Amount** (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations, check here  and do not complete this part.)

<b>1</b>	Minimum investment return from Part X, line 6	<b>1</b>	1,892.
<b>2a</b>	Tax on investment income for 2019 from Part VI, line 5	<b>2a</b>	
<b>b</b>	Income tax for 2019. (This does not include the tax from Part VI.)	<b>2b</b>	
<b>c</b>	Add lines 2a and 2b	<b>2c</b>	0.
<b>3</b>	Distributable amount before adjustments. Subtract line 2c from line 1	<b>3</b>	1,892.
<b>4</b>	Recoveries of amounts treated as qualifying distributions	<b>4</b>	0.
<b>5</b>	Add lines 3 and 4	<b>5</b>	1,892.
<b>6</b>	Deduction from distributable amount (see instructions)	<b>6</b>	0.
<b>7</b>	<b>Distributable amount as adjusted.</b> Subtract line 6 from line 5. Enter here and on Part XIII, line 1	<b>7</b>	1,892.

**Part XII Qualifying Distributions** (see instructions)

<b>1</b>	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
<b>a</b>	Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26	<b>1a</b>	13,065.
<b>b</b>	Program-related investments - total from Part IX-B	<b>1b</b>	0.
<b>2</b>	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	<b>2</b>	
<b>3</b>	Amounts set aside for specific charitable projects that satisfy the:		
<b>a</b>	Suitability test (prior IRS approval required)	<b>3a</b>	
<b>b</b>	Cash distribution test (attach the required schedule)	<b>3b</b>	
<b>4</b>	<b>Qualifying distributions.</b> Add lines 1a through 3b. Enter here and on Part V, line 8; and Part XIII, line 4	<b>4</b>	13,065.
<b>5</b>	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b	<b>5</b>	0.
<b>6</b>	<b>Adjusted qualifying distributions.</b> Subtract line 5 from line 4	<b>6</b>	13,065.

**Note:** The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years.

**Part XIII** Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2018	(c) 2018	(d) 2019
<b>1</b> Distributable amount for 2019 from Part XI, line 7				1,892.
<b>2</b> Undistributed income, if any, as of the end of 2019				
<b>a</b> Enter amount for 2018 only			0.	
<b>b</b> Total for prior years:		0.		
<b>3</b> Excess distributions carryover, if any, to 2019:				
<b>a</b> From 2014	5,764.			
<b>b</b> From 2015	8,479.			
<b>c</b> From 2016	10,337.			
<b>d</b> From 2017	8,970.			
<b>e</b> From 2018	10,372.			
<b>f</b> Total of lines 3a through e	43,922.			
<b>4</b> Qualifying distributions for 2019 from Part XII, line 4: ▶ \$ 13,065.				
<b>a</b> Applied to 2018, but not more than line 2a			0.	
<b>b</b> Applied to undistributed income of prior years (Election required - see instructions)		0.		
<b>c</b> Treated as distributions out of corpus (Election required - see instructions)	0.			
<b>d</b> Applied to 2019 distributable amount				1,892.
<b>e</b> Remaining amount distributed out of corpus	11,173.			
<b>5</b> Excess distributions carryover applied to 2019 (If an amount appears in column (d), the same amount must be shown in column (a))		0.		0.
<b>6</b> Enter the net total of each column as indicated below:				
<b>a</b> Corpus Add lines 3f, 4c, and 4e Subtract line 5	55,095.			
<b>b</b> Prior years' undistributed income. Subtract line 4b from line 2b		0.		
<b>c</b> Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0.		
<b>d</b> Subtract line 6c from line 6b. Taxable amount - see instructions		0.		
<b>e</b> Undistributed income for 2018. Subtract line 4a from line 2a. Taxable amount - see instr.			0.	
<b>f</b> Undistributed income for 2019. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2020				0.
<b>7</b> Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions)	0.			
<b>8</b> Excess distributions carryover from 2014 not applied on line 5 or line 7	5,764.			
<b>9</b> Excess distributions carryover to 2020. Subtract lines 7 and 8 from line 6a	49,331.			
<b>10</b> Analysis of line 9:				
<b>a</b> Excess from 2015	8,479.			
<b>b</b> Excess from 2016	10,337.			
<b>c</b> Excess from 2017	8,970.			
<b>d</b> Excess from 2018	10,372.			
<b>e</b> Excess from 2019	11,173.			

**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(j)(5)

**2 a** Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed

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

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

**1 Information Regarding Foundation Managers:**

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

**CHRISTINE D. URBAN**

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

**NONE**

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

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

**a** The name, address, and telephone number or email address of the person to whom applications should be addressed:

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

**c** Any submission deadlines:

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

**Part XV** Supplementary Information (continued)

**3 Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
<b>a Paid during the year</b>				
ALS ASSOCIATION		PC	UNRESTRICTED SUPPORT OF ORGANIZATION'S CHARITABLE OBJECTIVES/RESEARCH/BE THOSE IN NEED	100.
ALZHEIMER'S ASSOCIATION		PC	UNRESTRICTED SUPPORT OF ORGANIZATION'S CHARITABLE OBJECTIVES/RESEARCH/BE THOSE IN NEED	100.
AMERICAN CANCER SOCIETY		PC	UNRESTRICTED SUPPORT OF ORGANIZATION'S CHARITABLE OBJECTIVES/RESEARCH/BE THOSE IN NEED	300.
AMERICAN DIABETES ASSOCIATION		PC	UNRESTRICTED SUPPORT OF ORGANIZATION'S CHARITABLE OBJECTIVES/RESEARCH/BE THOSE IN NEED	100.
AMERICAN HEART ASSOCIATION		PC	UNRESTRICTED SUPPORT OF ORGANIZATION'S CHARITABLE OBJECTIVES/RESEARCH/BE THOSE IN NEED	100.
<b>Total</b>	<b>SEE CONTINUATION SHEET(S)</b>			<b>▶ 3a</b> 13,065.
<b>b Approved for future payment</b>				
<b>NONE</b>				
<b>Total</b>	<b>▶ 3b</b>			0.





**Part XV Supplementary Information**

3 Grants and Contributions Paid During the Year (Continuation)				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
AMERICAN LUNG ASSOCIATION		PC	UNRESTRICTED SUPPORT OF ORGANIZATION'S CHARITABLE OBJECTIVES/RESEARCH/BETHOSE IN NEED	100.
AMERICAN RED CROSS		PC	UNRESTRICTED SUPPORT OF ORGANIZATION'S CHARITABLE OBJECTIVES/RESEARCH/BETHOSE IN NEED	100.
AMNESTY INTERNATIONAL			UNRESTRICTED SUPPORT OF ORGANIZATION'S CHARITABLE OBJECTIVES/RESEARCH/BETHOSE IN NEED	50.
ANIMAL RESCUE LEAGUE		PC	UNRESTRICTED SUPPORT OF ORGANIZATION'S CHARITABLE OBJECTIVES/RESEARCH/BETHOSE IN NEED	500.
ARTHRITIS FOUNDATION		PC	UNRESTRICTED SUPPORT OF ORGANIZATION'S CHARITABLE OBJECTIVES/RESEARCH/BETHOSE IN NEED	100.
ASPCA		PC	UNRESTRICTED SUPPORT OF ORGANIZATION'S CHARITABLE OBJECTIVES/RESEARCH/BETHOSE IN NEED	100.
BOSTON RESCUE MISSION		PC	UNRESTRICTED SUPPORT OF ORGANIZATION'S CHARITABLE OBJECTIVES/RESEARCH/BETHOSE IN NEED	300.
BOY'S TOWN		PC	UNRESTRICTED SUPPORT OF ORGANIZATION'S CHARITABLE OBJECTIVES/RESEARCH/BETHOSE IN NEED	200.
BREAD FOR THE WORLD		PC	UNRESTRICTED SUPPORT OF ORGANIZATION'S CHARITABLE OBJECTIVES/RESEARCH/BETHOSE IN NEED	500.
CARE		PC	UNRESTRICTED SUPPORT OF ORGANIZATION'S CHARITABLE OBJECTIVES/RESEARCH/BETHOSE IN NEED	100.
<b>Total from continuation sheets</b>				<b>12,365.</b>

**Part XV Supplementary Information**

<b>3 Grants and Contributions Paid During the Year (Continuation)</b>				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
CATHOLIC RELIEF SERVICES		PC	UNRESTRICTED SUPPORT OF ORGANIZATION'S CHARITABLE OBJECTIVES/RESEARCH/BETHOSE IN NEED	100.
COVENANT HOUSE		PC	UNRESTRICTED SUPPORT OF ORGANIZATION'S CHARITABLE OBJECTIVES/RESEARCH/BETHOSE IN NEED	1,000.
DOCTORS WITHOUT BORDERS		PC	UNRESTRICTED SUPPORT OF ORGANIZATION'S CHARITABLE OBJECTIVES/RESEARCH/BETHOSE IN NEED	500.
FINCA INTERNATIONAL		PC	UNRESTRICTED SUPPORT OF ORGANIZATION'S CHARITABLE OBJECTIVES/RESEARCH/BETHOSE IN NEED	300.
FRIENDS OF THE SMITHSONIAN		PC	UNRESTRICTED SUPPORT OF ORGANIZATION'S CHARITABLE OBJECTIVES/RESEARCH/BETHOSE IN NEED	75.
GREATER BOSTON FOOD BANK		PC	UNRESTRICTED SUPPORT OF ORGANIZATION'S CHARITABLE OBJECTIVES/RESEARCH/BETHOSE IN NEED	300.
HOME FOR LITTLE WANDERERS		PC	UNRESTRICTED SUPPORT OF ORGANIZATION'S CHARITABLE OBJECTIVES/RESEARCH/BETHOSE IN NEED	300.
INTERNATIONAL FUND FOR ANIMAL WELFARE		PC	UNRESTRICTED SUPPORT OF ORGANIZATION'S CHARITABLE OBJECTIVES/RESEARCH/BETHOSE IN NEED	50.
INTERNATIONAL RESCUE COMMISSION		PC	UNRESTRICTED SUPPORT OF ORGANIZATION'S CHARITABLE OBJECTIVES/RESEARCH/BETHOSE IN NEED	100.
LITTLE BROTHERS - FRIENDS OF THE ELDERLY		PC	UNRESTRICTED SUPPORT OF ORGANIZATION'S CHARITABLE OBJECTIVES/RESEARCH/BETHOSE IN NEED	300.
<b>Total from continuation sheets</b>				

**Part XV Supplementary Information**

**3 Grants and Contributions Paid During the Year (Continuation)**

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
MERCY SHIPS		PC	UNRESTRICTED SUPPORT OF ORGANIZATION'S CHARITABLE OBJECTIVES/RESEARCH/BE THOSE IN NEED	200.
MORGAN MEMORIAL GOODWILL		PC	UNRESTRICTED SUPPORT OF ORGANIZATION'S CHARITABLE OBJECTIVES/RESEARCH/BE THOSE IN NEED	300.
MSPCA		PC	UNRESTRICTED SUPPORT OF ORGANIZATION'S CHARITABLE OBJECTIVES/RESEARCH/BE THOSE IN NEED	100.
MUSCULAR DYSTROPHY ASSOCIATION		PC	UNRESTRICTED SUPPORT OF ORGANIZATION'S CHARITABLE OBJECTIVES/RESEARCH/BE THOSE IN NEED	100.
NATIONAL MULTIPLE SCLEROSIS SOCIETY		PC	UNRESTRICTED SUPPORT OF ORGANIZATION'S CHARITABLE OBJECTIVES/RESEARCH/BE THOSE IN NEED	100.
NATIONAL TRUST FOR HISTORIC PRESERVATION		PC	UNRESTRICTED SUPPORT OF ORGANIZATION'S CHARITABLE OBJECTIVES/RESEARCH/BE THOSE IN NEED	100.
NATIONAL WILDLIFE FEDERATION		PC	UNRESTRICTED SUPPORT OF ORGANIZATION'S CHARITABLE OBJECTIVES/RESEARCH/BE THOSE IN NEED	75.
NH PBS		PC	UNRESTRICTED SUPPORT OF ORGANIZATION'S CHARITABLE OBJECTIVES/RESEARCH/BE THOSE IN NEED	300.
NORTHEAST ANIMAL SHELTER		PC	UNRESTRICTED SUPPORT OF ORGANIZATION'S CHARITABLE OBJECTIVES/RESEARCH/BE THOSE IN NEED	100.
OPERATION SMILE		PC	UNRESTRICTED SUPPORT OF ORGANIZATION'S CHARITABLE OBJECTIVES/RESEARCH/BE THOSE IN NEED	100.
<b>Total from continuation sheets</b>				

**Part XV** Supplementary Information

**3 Grants and Contributions Paid During the Year (Continuation)**

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
OXFAM		PC	UNRESTRICTED SUPPORT OF ORGANIZATION'S CHARITABLE OBJECTIVES/RESEARCH/BETHOSE IN NEED	100.
PHYSICIANS FOR RESPONSIBLE MEDICINE		PC	UNRESTRICTED SUPPORT OF ORGANIZATION'S CHARITABLE OBJECTIVES/RESEARCH/BETHOSE IN NEED	200.
PROJECT BREAD		PC	UNRESTRICTED SUPPORT OF ORGANIZATION'S CHARITABLE OBJECTIVES/RESEARCH/BETHOSE IN NEED	500.
SALVATION ARMY		PC	UNRESTRICTED SUPPORT OF ORGANIZATION'S CHARITABLE OBJECTIVES/RESEARCH/BETHOSE IN NEED	500.
SIERRA CLUB		PC	UNRESTRICTED SUPPORT OF ORGANIZATION'S CHARITABLE OBJECTIVES/RESEARCH/BETHOSE IN NEED	60.
SOCIETY FOR PROTECTION OF NH FORESTS		PC	UNRESTRICTED SUPPORT OF ORGANIZATION'S CHARITABLE OBJECTIVES/RESEARCH/BETHOSE IN NEED	150.
SOCIETY OF ST. VINCENT DE PAUL		PC	UNRESTRICTED SUPPORT OF ORGANIZATION'S CHARITABLE OBJECTIVES/RESEARCH/BETHOSE IN NEED	300.
ST. FRANCIS HOUSE		PC	UNRESTRICTED SUPPORT OF ORGANIZATION'S CHARITABLE OBJECTIVES/RESEARCH/BETHOSE IN NEED	500.
THE NATURE CONSERVANCY		PC	UNRESTRICTED SUPPORT OF ORGANIZATION'S CHARITABLE OBJECTIVES/RESEARCH/BETHOSE IN NEED	50.
THE TRUST FOR PUBLIC LAND		PC	UNRESTRICTED SUPPORT OF ORGANIZATION'S CHARITABLE OBJECTIVES/RESEARCH/BETHOSE IN NEED	100.
<b>Total from continuation sheets</b>				

**Part XV Supplementary Information**

3 Grants and Contributions Paid During the Year (Continuation)				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
TRUSTEES OF RESERVATIONS		PC	UNRESTRICTED SUPPORT OF ORGANIZATION'S CHARITABLE OBJECTIVES/RESEARCH/BETHOSE IN NEED	60.
WBUR RADIO		PC	UNRESTRICTED SUPPORT OF ORGANIZATION'S CHARITABLE OBJECTIVES/RESEARCH/BETHOSE IN NEED	400.
WILDERNESS SOCIETY		PC	UNRESTRICTED SUPPORT OF ORGANIZATION'S CHARITABLE OBJECTIVES/RESEARCH/BETHOSE IN NEED	50.
WORLD WILDLIFE FUND		PC	UNRESTRICTED SUPPORT OF ORGANIZATION'S CHARITABLE OBJECTIVES/RESEARCH/BETHOSE IN NEED	150.
RALPH LOWELL SOCIETY		PC	UNRESTRICTED SUPPORT OF ORGANIZATION'S CHARITABLE OBJECTIVES/RESEARCH/BETHOSE IN NEED	2,500.
NATIONAL ALLIANCE ON MENTAL HEALTH		PC	UNRESTRICTED SUPPORT OF ORGANIZATION'S CHARITABLE OBJECTIVES/RESEARCH/BETHOSE IN NEED	100.
DEFENDERS OF WILDLIFE		PC	UNRESTRICTED SUPPORT OF ORGANIZATION'S CHARITABLE OBJECTIVES/RESEARCH/BETHOSE IN NEED	95.
<b>Total from continuation sheets</b>				

FORM 990-PF INTEREST ON SAVINGS AND TEMPORARY CASH INVESTMENTS STATEMENT 1

SOURCE	(A) REVENUE PER BOOKS	(B) NET INVESTMENT INCOME	(C) ADJUSTED NET INCOME
BANK OF AMERICA	40.	40.	
TOTAL TO PART I, LINE 3	40.	40.	

FORM 990-PF TAXES STATEMENT 2

DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
COMMONWEALTH OF MA 2018 FILING FEE	35.	0.		0.
TO FORM 990-PF, PG 1, LN 18	35.	0.		0.

FORM 990-PF OTHER EXPENSES STATEMENT 3

DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
BANK CHECKS	127.	0.		0.
TO FORM 990-PF, PG 1, LN 23	127.	0.		0.