

Part II Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only. (See instructions.)		Beginning of year	End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value
Assets	1 Cash—non-interest-bearing			
	2 Savings and temporary cash investments			
	3 Accounts receivable ▶ _____ Less: allowance for doubtful accounts ▶ _____			
	4 Pledges receivable ▶ _____ Less: allowance for doubtful accounts ▶ _____			
	5 Grants receivable			
	6 Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions)			
	7 Other notes and loans receivable (attach schedule) ▶ _____ Less: allowance for doubtful accounts ▶ _____			
	8 Inventories for sale or use			
	9 Prepaid expenses and deferred charges			
	10a Investments—U.S. and state government obligations (attach schedule)			
	b Investments—corporate stock (attach schedule)			
	c Investments—corporate bonds (attach schedule)			
	11 Investments—land, buildings, and equipment: basis ▶ _____ Less: accumulated depreciation (attach schedule) ▶ _____			
	12 Investments—mortgage loans			
	13 Investments—other (attach schedule)	4,130,014	4,406,070	5,610,401
	14 Land, buildings, and equipment: basis ▶ _____ Less: accumulated depreciation (attach schedule) ▶ _____			
15 Other assets (describe ▶ _____)				
16 Total assets (to be completed by all filers—see the instructions. Also, see page 1, item I)	4,130,014	4,406,070	5,610,401	
Liabilities	17 Accounts payable and accrued expenses			
	18 Grants payable			
	19 Deferred revenue			
	20 Loans from officers, directors, trustees, and other disqualified persons			
	21 Mortgages and other notes payable (attach schedule)			
	22 Other liabilities (describe ▶ _____)			
	23 Total liabilities (add lines 17 through 22)	0	0	
Net Assets or Fund Balances	Foundations that follow FASB ASC 958, check here ▶ ☐ and complete lines 24, 25, 29 and 30.			
	24 Net assets without donor restrictions			
	25 Net assets with donor restrictions			
	Foundations that do not follow FASB ASC 958, check here ▶ ☒ and complete lines 26 through 30.			
	26 Capital stock, trust principal, or current funds	4,130,014	4,406,070	
	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 Total net assets or fund balances (see instructions)	4,130,014	4,406,070		
30 Total liabilities and net assets/fund balances (see instructions) .	4,130,014	4,406,070		

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	4,130,014
2 Enter amount from Part I, line 27a	2	529,373
3 Other increases not included in line 2 (itemize) ▶ _____	3	0
4 Add lines 1, 2, and 3	4	4,659,387
5 Decreases not included in line 2 (itemize) ▶ _____	5	253,317
6 Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 29 .	6	4,406,070

Part IV Capital Gains and Losses for Tax on Investment Income

(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.)		(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1 a PUBLICLY TRADED SECURITIES		P		
b CAPITAL GAINS DIVIDENDS		P		
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 1,779,481		1,292,412	487,069
b 102,372			102,372
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) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any	
a			487,069
b			102,372
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	589,441
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 8, column (c) (see instructions). If (loss), enter -0- in Part I, line 8		3	

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

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

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

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



Yes



No

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

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

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col. (b) divided by col. (c))
2018	830,982	5,237,940	0.158647
2017	1,176,521	5,226,654	0.225100
2016	508,719	5,069,535	0.100348
2015	590,128	5,483,824	0.107612
2014	432,026	5,535,176	0.078051

2 Total of line 1, column (d)	2	0.669758
3 Average distribution ratio for the 5-year base period—divide the total on line 2 by 5.0, or by the number of years the foundation has been in existence if less than 5 years	3	0.133952
4 Enter the net value of noncharitable-use assets for 2019 from Part X, line 5	4	5,043,208
5 Multiply line 4 by line 3	5	675,548
6 Enter 1% of net investment income (1% of Part I, line 27b)	6	6,796
7 Add lines 5 and 6	7	682,344
8 Enter qualifying distributions from Part XII, line 4	8	1,152,782

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

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

1a	Exempt operating foundations described in section 4940(d)(2), check here ☐ and enter "N/A" on line 1. Date of ruling or determination letter: _____ (attach copy of letter if necessary—see instructions)		
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here ☒ and enter 1% of Part I, line 27b	1	6,796
c	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b)		
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2	0
3	Add lines 1 and 2.	3	6,796
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4	0
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5	6,796
6	Credits/Payments:		
a	2019 estimated tax payments and 2018 overpayment credited to 2019	6a	5,500
b	Exempt foreign organizations—tax withheld at source	6b	
c	Tax paid with application for extension of time to file (Form 8868)	6c	0
d	Backup withholding erroneously withheld	6d	0
7	Total credits and payments. Add lines 6a through 6d.	7	5,500
8	Enter any penalty for underpayment of estimated tax. Check here ☐ if Form 2220 is attached.	8	0
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed ▶	9	1,296
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid ▶	10	
11	Enter the amount of line 10 to be: Credited to 2020 estimated tax ▶ Refunded ▶	11	

Part VII-A Statements Regarding Activities

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

Part VII-A Statements Regarding Activities (continued)

11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule. See instructions.	11		No
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement. See instructions	12		No
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ► <u>N/A</u>	13		No
14	The books are in care of ► <u>GW WADE LLC</u> Telephone no. ► <u>(781) 239-1188</u>			

Located at ► 93 WORCESTER STREET WELLESLEY MA ZIP+4 ► 02481

15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 —check here	☐		
	and enter the amount of tax-exempt interest received or accrued during the year	► 15		
16	At any time during calendar year 2019, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country?	16	Yes	No
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes", enter the name of the foreign country ►			

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

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

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

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

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

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors**1 List all officers, directors, trustees, foundation managers and their compensation. See instructions**

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
DONALD BULENS 18 IRON GATE RD ANDOVER, MA 01810	TRUSTEE 1.00	0	0	0
LYNNE BULENS 18 IRON GATE RD ANDOVER, MA 01810	TRUSTEE 1.00	0	0	0

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

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

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

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

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

Part IX-A Summary of Direct Charitable Activities

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

	Expenses
1	
2	
3	
4	

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

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

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

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
a	Average monthly fair market value of securities.	1a	5,120,008
b	Average of monthly cash balances.	1b	0
c	Fair market value of all other assets (see instructions).	1c	0
d	Total (add lines 1a, b, and c).	1d	5,120,008
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation).	1e	0
2	Acquisition indebtedness applicable to line 1 assets.	2	0
3	Subtract line 2 from line 1d.	3	5,120,008
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions).	4	76,800
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	5,043,208
6	Minimum investment return. Enter 5% of line 5.	6	252,160

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

1	Minimum investment return from Part X, line 6.	1	252,160
2a	Tax on investment income for 2019 from Part VI, line 5.	2a	6,796
b	Income tax for 2019. (This does not include the tax from Part VI.).	2b	
c	Add lines 2a and 2b.	2c	6,796
3	Distributable amount before adjustments. Subtract line 2c from line 1.	3	245,364
4	Recoveries of amounts treated as qualifying distributions.	4	0
5	Add lines 3 and 4.	5	245,364
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	245,364

Part XII Qualifying Distributions (see instructions)

1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
a	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26.	1a	1,152,782
b	Program-related investments—total from Part IX-B.	1b	0
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes.	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
a	Suitability test (prior IRS approval required).	3a	
b	Cash distribution test (attach the required schedule).	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	1,152,782
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b. See instructions.	5	6,796
6	Adjusted qualifying distributions. Subtract line 5 from line 4.	6	1,145,986

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

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2018	(c) 2018	(d) 2019
1 Distributable amount for 2019 from Part XI, line 7				245,364
2 Undistributed income, if any, as of the end of 2019:				
a Enter amount for 2018 only.			0	
b Total for prior years: 20____, 20____, 20____		0		
3 Excess distributions carryover, if any, to 2019:				
a From 2014.	164,527			
b From 2015.	321,845			
c From 2016.	259,308			
d From 2017.	919,794			
e From 2018.	579,951			
f Total of lines 3a through e.	2,245,425			
4 Qualifying distributions for 2019 from Part XII, line 4: ► \$ <u>1,152,782</u>				
a Applied to 2018, but not more than line 2a			0	
b Applied to undistributed income of prior years (Election required—see instructions).		0		
c Treated as distributions out of corpus (Election required—see instructions).	0			
d Applied to 2019 distributable amount.				245,364
e Remaining amount distributed out of corpus	907,418			
5 Excess distributions carryover applied to 2019. (If an amount appears in column (d), the same amount must be shown in column (a).)	0			0
6 Enter the net total of each column as indicated below:				
a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	3,152,843			
b Prior years' undistributed income. Subtract line 4b from line 2b.		0		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed.		0		
d Subtract line 6c from line 6b. Taxable amount—see instructions.		0		
e Undistributed income for 2018. Subtract line 4a from line 2a. Taxable amount—see instructions.			0	
f Undistributed income for 2019. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2020.				0
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions).	0			
8 Excess distributions carryover from 2014 not applied on line 5 or line 7 (see instructions).	164,527			
9 Excess distributions carryover to 2020. Subtract lines 7 and 8 from line 6a.	2,988,316			
10 Analysis of line 9:				
a Excess from 2015.	321,845			
b Excess from 2016.	259,308			
c Excess from 2017.	919,794			
d Excess from 2018.	579,951			
e Excess from 2019.	907,418			

Part XIV

[illegible]

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).)

See Additional Data Table

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

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

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

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

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

c Any submission deadlines:

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

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

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a <i>Paid during the year</i> See Additional Data Table				
Total			▶ 3a	1,152,782
b <i>Approved for future payment</i>				
Total			▶ 3b	0

Enter gross amounts unless otherwise indicated.

Enter gross amounts unless otherwise indicated.	Unrelated business income		Excluded by section 512, 513, or 514		(e) Related or exempt function income (See instructions.)
	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	
1 Program service revenue:					
a _____					
b _____					
c _____					
d _____					
e _____					
f _____					
g Fees and contracts from government agencies					
2 Membership dues and assessments.					
3 Interest on savings and temporary cash investments					
4 Dividends and interest from securities.			14	123,264	
5 Net rental income or (loss) from real estate:					
a Debt-financed property.					
b Not debt-financed property.					
6 Net rental income or (loss) from personal property					
7 Other investment income.					
8 Gain or (loss) from sales of assets other than inventory			18	589,441	
9 Net income or (loss) from special events:					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue: a _____					
b _____					
c _____					
d _____					
e _____					
12 Subtotal. Add columns (b), (d), and (e).		0		712,705	0
13 Total. Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify calculations.)			13		712,705

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

[illegible]

Part XVII

- | | | | | |
|---|--|----|--|----|
| c | Sharing of facilities, equipment, mailing lists, other assets, or paid employees. | 1c | | No |
| d | If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received. | | | |

[illegible]

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

b If "Yes," complete the following schedule.		
(a) Name of organization	(b) Type of organization	(c) Description of relationship

Sign Here	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.		
	*****	2020-06-18	*****
	_____ Signature of officer or trustee	_____ Date	_____ Title

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

Paid Preparer Use Only	Print/Type preparer's name	Preparer's Signature	Date	Check if self-employed ☐	PTIN P00090184
	ROBERT F BODIO JR				
	Firm's name ▶ GW & WADE LLC				
	Firm's address ▶ 93 WORCESTER STREET WELLESLEY, MA 024813609				Firm's EIN ▶ 26-1101800 Phone no. (781) 239-1188

Form 990PF Part XV Line 1a - 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).

DONALD BULENS
LYNNE BULENS

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
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)				
a <i>Paid during the year</i>				
ADELANTE EDUCATION CENTER 101 AMESBURY STREET 4TH FLOOR LAWRENCE, MA 01840		PUBLIC	GENERAL	10,000
ALS ASSOCIATION MASSACHUSETTS CHAPTER 685 CANTON STREET 103 NORWOOD, MA 02062		PUBLIC	GENERAL	500
ALZHEIMERS ASSOCIATION 225 N MICHIGAN AVE FLOOR 17 CHICAGO, IL 60601		PUBLIC	GENERAL	2,500
Total ▶ 3a				1,152,782

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
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)				
a <i>Paid during the year</i>				
ALZHEIMER'S DISEASE RESEARCH FOUNDATION 34 WASHINGTON STREET SUITE 200 WELLESLEY, MA 02481		PUBLIC	GENERAL	200
AMVETS NATIONAL SERVICE FOUNDATION 4647 FORBES BLVD LANHAM, MD 20706		PUBLIC	GENERAL	40
ANDOVER HISTORICAL SOCIETY 97 MAIN STREET ANDOVER, MA 01810		PUBLIC	GENERAL	5,000
Total ▶ 3a				1,152,782

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
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)				
a <i>Paid during the year</i>				
ANGEL FLIGHT492 SUTTON STREET NORTH ANDOVER, MA 01845		PUBLIC	GENERAL	3,000
AVIS FOUNDATIONPO BOX 218 UPLAND, IN 46989		PUBLIC	GENERAL	100
AVIS FOUNDATIONPO BOX 218 UPLAND, IN 46989		PUBLIC	GENERAL	2,500
Total ▶ 3a				1,152,782

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
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)				
a <i>Paid during the year</i>				
BELLESINI ACADEMY94 BRADFORD ST LAWRENCE, MA 01840		PUBLIC	GENERAL	40,000
BELLESINI ACADEMY94 BRADFORD ST LAWRENCE, MA 01840		PUBLIC	GENERAL	1,250
BELLESINI ACADEMY94 BRADFORD ST LAWRENCE, MA 01840		PUBLIC	GENERAL	1,250
Total ▶ 3a				1,152,782

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
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)				
a <i>Paid during the year</i>				
BELLESINI ACADEMY94 BRADFORD ST LAWRENCE, MA 01840		PUBLIC	GENERAL	5,000
BELLESINI ACADEMY94 BRADFORD ST LAWRENCE, MA 01840		PUBLIC	GENERAL	2,300
BOSTON CHILDRENS HOSPITAL 300 LONGWOOD AVENUE BOSTON, MA 02115		PUBLIC	GENERAL	157,714
Total ▶ 3a				1,152,782

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
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)				
a <i>Paid during the year</i>				
BOSTON CHILDRENS HOSPITAL 300 LONGWOOD AVENUE BOSTON, MA 02115		PUBLIC	GENERAL	15,000
BOSTON CHILDREN'S HOSPITAL TRUST 401 PARK DRIVE SUITE 602 BOSTON, MA 02115		PUBLIC	GENERAL	500
BOSTON CHILDREN'S HOSPITAL TRUST 401 PARK DRIVE SUITE 602 BOSTON, MA 02115		PUBLIC	GENERAL	1,000
Total ▶ 3a				1,152,782

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
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)				
a <i>Paid during the year</i>				
BOSTON CHILDREN'S HOSPITAL TRUST 401 PARK DRIVE SUITE 602 BOSTON, MA 02115		PUBLIC	GENERAL	300,000
BOSTON CHILDREN'S HOSPITAL TRUST 401 PARK DRIVE SUITE 602 BOSTON, MA 02115		PUBLIC	GENERAL	500
BOSTON CHILDREN'S HOSPITAL TRUST 401 PARK DRIVE SUITE 602 BOSTON, MA 02115		PUBLIC	GENERAL	500
Total ▶ 3a				1,152,782

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
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)				
a <i>Paid during the year</i>				
BOSTON CHILDREN'S HOSPITAL TRUST 401 PARK DRIVE SUITE 602 BOSTON, MA 02115		PUBLIC	GENERAL	2,500
BOSTON CHILDREN'S HOSPITAL TRUST 401 PARK DRIVE SUITE 602 BOSTON, MA 02115		PUBLIC	GENERAL	2,500
BOSTON CHILDREN'S HOSPITAL TRUST 401 PARK DRIVE SUITE 602 BOSTON, MA 02115		PUBLIC	GENERAL	500
Total ▶ 3a				1,152,782

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
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)				
a <i>Paid during the year</i>				
BOSTON CHILDREN'S HOSPITAL TRUST 401 PARK DRIVE SUITE 602 BOSTON, MA 02115		PUBLIC	GENERAL	1,000
BOSTON CHILDREN'S HOSPITAL TRUST 401 PARK DRIVE SUITE 602 BOSTON, MA 02115		PUBLIC	GENERAL	500
BOYS & GIRLS CLUB OF LAWRENCE 136 WATER ST LAWRENCE, MA 01841		PUBLIC	GENERAL	20,000
Total ▶ 3a				1,152,782

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

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)				
a <i>Paid during the year</i>				
BOYS & GIRLS CLUB OF LAWRENCE 136 WATER ST LAWRENCE, MA 01841		PUBLIC	GENERAL	3,500
BOYS & GIRLS CLUB OF LAWRENCE 136 WATER ST LAWRENCE, MA 01841		PUBLIC	GENERAL	800
BOYS & GIRLS CLUB OF LAWRENCE 136 WATER ST LAWRENCE, MA 01841		PUBLIC	GENERAL	1,150
Total ▶ 3a				1,152,782

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
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)				
a <i>Paid during the year</i>				
CREATIVE LIVING INC 368 S MAIN STREET ANDOVER, MA 01810		PUBLIC	GENERAL	7,500
CRESCENT LAKE WATERSHED ASSOCIATION PO BOX 1298 RAYMOND, ME 04071		PUBLIC	GENERAL	200
CYSTIC FIBROSIS FOUNDATION 4550 MONTGOMERY AVE SUITE 1100 N BETHESDA, MD 20814		PUBLIC	GENERAL	500
Total ▶ 3a				1,152,782

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
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)				
a <i>Paid during the year</i>				
CYSTIC FIBROSIS FOUNDATION 4550 MONTGOMERY AVE SUITE 1100 N BETHESDA, MD 20814		PUBLIC	GENERAL	1,500
ESSEX COUNTY COMMUNITY FOUNDATION 175 ANDOVER STREET DANVERS, MA 01923		PUBLIC	GENERAL	750
FAMILY SERVICES OF THE MERRIMACK VALLEY 430 N CANAL STREET LAWRENCE, MA 01840		PUBLIC	GENERAL	15,000
Total ▶ 3a				1,152,782

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

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)				
a <i>Paid during the year</i>				
FAMILY SERVICES OF THE MERRIMACK VALLEY 430 N CANAL STREET LAWRENCE, MA 01840		PUBLIC	GENERAL	10,000
FIRST200 BEDFORD ST MANCHESTER, NH 03101		PUBLIC	GENERAL	5,000
GIRLS INC120 WALL STREET NEW YORK, NY 10005		PUBLIC	GENERAL	1,000
Total ▶ 3a				1,152,782

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
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)				
a <i>Paid during the year</i>				
HABITAT FOR HUMANITY 60 ISLAND STREET 2ND FL EAS LAWRENCE, MA 01840		PUBLIC	GENERAL	200
HAWC27 CONGRESS STREET SALEM, MA 01970		PUBLIC	GENERAL	3,000
IMATHLETE 6701 CENTER DRIVE SUITE 700 LOS ANGELES, CA 90045		PUBLIC	GENERAL	1,092
Total ▶ 3a				1,152,782

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

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)				
a <i>Paid during the year</i>				
LAWRENCE ACADEMY 26 POWDERHOUSE RD GROTON, MA 01450		PUBLIC	GENERAL	10,000
LAWRENCE ACADEMY 26 POWDERHOUSE RD GROTON, MA 01450		PUBLIC	GENERAL	25,000
LAWRENCE ACADEMY 26 POWDERHOUSE RD GROTON, MA 01450		PUBLIC	GENERAL	3,000
Total ► 3a				1,152,782

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

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)				
a <i>Paid during the year</i>				
LAZARUS HOUSE MINISTRIES 412 HAMPSHIRE STREET LAWRENCE, MA 01841		PUBLIC	GENERAL	15,000
LEWIS AND CLARK COLLEGE 0615 SW PALATINE HILL RD PORTLAND, OR 97219		PUBLIC	GENERAL	3,650
LUCY'S LOVE BUS 89 SOUTH STREET SUITE LL02 BOSTON, MA 02111		PUBLIC	GENERAL	350
Total ▶ 3a				1,152,782

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
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)				
a <i>Paid during the year</i>				
MERRIMACK VALLEY YMCA 360 MERRIMACK ST LAWRENCE, MA 01843		PUBLIC	GENERAL	25,000
MILITARY FRIENDS FOUNDATION 6 BEACON STREET 200 BOSTON, MA 02108		PUBLIC	GENERAL	527
MSPCA 350 SOUTH HUNTINGTON AVENUE BOSTON, MA 02130		PUBLIC	GENERAL	500
Total ▶ 3a				1,152,782

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
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)				
a <i>Paid during the year</i>				
NATIONAL KIDNEY FOUNDATION 30 E 33RD STREET NEW YORK, NY 10016		PUBLIC	GENERAL	500
NATIONAL MULTIPLE SCLEROSIS SOCIETY 733 THIRD AVENUE 3RD FLOOR NEW YORK, NY 10017		PUBLIC	GENERAL	500
NEIGHBORS IN NEED 18 DUNDEE PARK DR 18-8 ANDOVER, MA 01810		PUBLIC	GENERAL	1,000
Total ▶ 3a				1,152,782

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
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)				
a <i>Paid during the year</i>				
NEIGHBORS IN NEED 18 DUNDEE PARK DR 18-8 ANDOVER, MA 01810		PUBLIC	GENERAL	3,085
NEIGHBORS IN NEED 18 DUNDEE PARK DR 18-8 ANDOVER, MA 01810		PUBLIC	GENERAL	1,000
NOTRE DAME CRISTO REY HIGH SCHOOL 303 HAVERHILL STREET LAWRENCE, MA 01841		PUBLIC	GENERAL	15,000
Total ▶ 3a				1,152,782

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
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)				
a <i>Paid during the year</i>				
PAN MASS CHALLENGE77 4TH AVENUE NEEDHAM, MA 02494		PUBLIC	GENERAL	3,500
PAN MASS CHALLENGE77 4TH AVENUE NEEDHAM, MA 02494		PUBLIC	GENERAL	256
PAN MASS CHALLENGE77 4TH AVENUE NEEDHAM, MA 02494		PUBLIC	GENERAL	511
Total ▶ 3a				1,152,782

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
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)				
a <i>Paid during the year</i>				
PROCTOR ACADEMY204 MAIN ST ANDOVER, MA 03216		PUBLIC	GENERAL	2,500
RAYMOND FOOD PANTRY LAKE REGION BAPTIST CHURCH 1273 ROOSEVELT TRAIL RAYMOND, ME 04071		PUBLIC	GENERAL	1,000
RAYMOND VILLAGE LIBRARY 3 MEADOW RD RAYMOND, ME 04071		PUBLIC	GENERAL	100
Total ▶ 3a				1,152,782

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
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)				
a <i>Paid during the year</i>				
REED HENDERSON MEMORIAL TRUST 16 MARIE DRIVE ANDOVER, MA 01810		PUBLIC	GENERAL	2,000
ROSIE'S PLACE889 HARRISON AVE BOSTON, MA 02118		PUBLIC	GENERAL	1,000
SAMANTHA'S HARVEST9 PRISCILLA RD READING, MA 01867		PUBLIC	GENERAL	1,000
Total ▶ 3a				1,152,782

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
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)				
a Paid during the year				
SERVICE CLUB OF ANDOVER PO BOX 334 ANDOVER, MA 01810		PUBLIC	GENERAL	1,000
SPECIAL OLYMPICS MASSACHUSETTS 512 FOREST STREET MARLBOROUGH, MA 01752		PUBLIC	GENERAL	175
SPIRIT OF ADVENTURE COUNCIL 600 W CUMMINGS PARK SUITE 2750 WOBURN, MA 01801		PUBLIC	GENERAL	5,000
Total ▶ 3a				1,152,782

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
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)				
a <i>Paid during the year</i>				
ST ANN'S EPISCOPAL CHURCH 40 WINDHAM CENTER ROAD WINDHAM, ME 04062		PUBLIC	GENERAL	1,000
STARK MOUNTAIN FOUNDATION PO BOX 1221 WAITSFIELD, VT 05673		PUBLIC	GENERAL	2,500
SUFFOLK UNIVERSITY8 ASHBURTON PL BOSTON, MA 02108		PUBLIC	GENERAL	10,000
Total ▶ 3a				1,152,782

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
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)				
a <i>Paid during the year</i>				
THE BRIGHAM & WOMENS HOSPITAL 75 FRANCIS STREET BOSTON, MA 02115		PUBLIC	GENERAL	200,000
THE BRIGHAM & WOMENS HOSPITAL 75 FRANCIS STREET BOSTON, MA 02115		PUBLIC	GENERAL	1,250
THE BRIGHAM & WOMENS HOSPITAL 75 FRANCIS STREET BOSTON, MA 02115		PUBLIC	GENERAL	100,000
Total ▶ 3a				1,152,782

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
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)				
a Paid during the year				
THE CHRISTINA CAPOZZI FOUNDATION 300 LONGWOOD AVENUE BOSTON, MA 02115		PUBLIC	GENERAL	1,000
THE SPORTS MUSEUM 100 LEGENDS WAY BOSTON, MA 02114		PUBLIC	GENERAL	3,800
THE SPORTS MUSEUM 100 LEGENDS WAY BOSTON, MA 02114		PUBLIC	GENERAL	9,200
Total ▶ 3a				1,152,782

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
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)				
a <i>Paid during the year</i>				
TRUSTEES OF RESERVATIONS 200 HIGH STREET BOSTON, MA 02110		PUBLIC	GENERAL	1,000
UMASS AMHERST ANNUAL FUND MEMORIAL HALL 134 HICKS WAY AMHERST, MA 01003		PUBLIC	GENERAL	10,000
UMASS MEMORIAL FOUNDATION 333 SOUTH STREET SHREWSBURY, MA 01545		PUBLIC	GENERAL	107
Total ▶ 3a				1,152,782

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

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)				
a <i>Paid during the year</i>				
VOTER CHOICE EDUCATION FUND 44 TEMPLE PLACE FLOOR 5 BOSTON, MA 02111		PUBLIC	GENERAL	25,000
VOTER CHOICE EDUCATION FUND 44 TEMPLE PLACE FLOOR 5 BOSTON, MA 02111		PUBLIC	GENERAL	25
WOMENS FUND OF ESSEX COUNTY 176 ANDOVER STREET SUITE 101 DANVERS, MA 01923		PUBLIC	GENERAL	10,000
Total ▶ 3a				1,152,782

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
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)				
a <i>Paid during the year</i>				
WOUNDED WARRIOR PROJECT 4899 BELFORT ROAD SUITE 300 JACKSONVILLE, FL 32256		PUBLIC	GENERAL	200
YEAR UP45 MILK STREET 9TH FLOOR BOSTON, MA 02109		PUBLIC	GENERAL	20,000
YWCA OF LAWRENCE38 LAWRENCE ST LAWRENCE, MA 01840		PUBLIC	GENERAL	1,000
Total ▶ 3a				1,152,782

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
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)				
a <i>Paid during the year</i>				
YWCA OF LAWRENCE38 LAWRENCE ST LAWRENCE, MA 01840		PUBLIC	GENERAL	7,500
Total ▶ 3a				1,152,782

TY 2019 Accounting Fees Schedule**Name:** THE BULENS FAMILY FOUNDATION**EIN:** 26-3548021

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
GW WADE TAX PREP FEE	1,635	1,635		0

TY 2019 Investments - Other Schedule

Name: THE BULENS FAMILY FOUNDATION

EIN: 26-3548021

Investments Other Schedule 2

Category/ Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value
MUTUAL FUNDS	FMV	4,335,058	5,539,386
MONEY MARKET	FMV	71,012	71,015

TY 2019 Other Decreases Schedule

Name: THE BULENS FAMILY FOUNDATION

EIN: 26-3548021

Description	Amount
CHANGE IN MARKET VALUE	253,317

TY 2019 Other Expenses Schedule**Name:** THE BULENS FAMILY FOUNDATION**EIN:** 26-3548021**Other Expenses Schedule**

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
MA FILING FEE	250	250		0
BR PORT GOLD FEE	100	100		0
MARGIN INTEREST	725	725		0

TY 2019 Other Professional Fees Schedule**Name:** THE BULENS FAMILY FOUNDATION**EIN:** 26-3548021

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
GW WADE AM FEE	28,525	28,525		0

TY 2019 Taxes Schedule**Name:** THE BULENS FAMILY FOUNDATION**EIN:** 26-3548021

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
FOREIGN TAX PAID	1,856	1,856		0

Schedule B (Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service	Schedule of Contributors ▶ Attach to Form 990, 990-EZ, or 990-PF. ▶ Go to www.irs.gov/Form990 for the latest information.	OMB No. 1545-0047
		2019
Name of the organization THE BULENS FAMILY FOUNDATION		Employer identification number 26-3548021

Organization type (check one):

Filers of:	Section:
Form 990 or 990-EZ	☐ 501(c)() (enter number) organization
	☐ 4947(a)(1) nonexempt charitable trust not treated as a private foundation
	☐ 527 political organization
Form 990-PF	☒ 501(c)(3) exempt private foundation
	☐ 4947(a)(1) nonexempt charitable trust treated as a private foundation
	☐ 501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.
Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

- ☒ For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or other property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

- ☐ For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33¹/₃% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of **(1)** \$5,000 or **(2)** 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.
- ☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.
- ☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year ▶ \$ _____

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization
THE BULENS FAMILY FOUNDATION

Employer identification number
26-3548021

Part I

Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	DONALD BULENS 18 IRON GATE DRIVE ANDOVER, MA 01810	\$ 501,271	☐ Person ☐ Payroll ☒ Noncash (Complete Part II for noncash contributions.)
2	LYNNE BULENS 18 IRON GATE DRIVE ANDOVER, MA 01810	\$ 501,271	☐ Person ☐ Payroll ☒ Noncash (Complete Part II for noncash contributions.)
.		\$	☐ Person ☐ Payroll ☐ Noncash (Complete Part II for noncash contributions.)
.		\$	☐ Person ☐ Payroll ☐ Noncash (Complete Part II for noncash contributions.)
.		\$	☐ Person ☐ Payroll ☐ Noncash (Complete Part II for noncash contributions.)
.		\$	☐ Person ☐ Payroll ☐ Noncash (Complete Part II for noncash contributions.)
.		\$	☐ Person ☐ Payroll ☐ Noncash (Complete Part II for noncash contributions.)

Employer identification number

26-3548021

Part II

(see instructions). Use duplicate copies of Part II if additional space is needed.

Description of noncash property given

(c)
FMV (or estimate)
(See instructions)

(d)
Date received

1	10,369.1415 UNITS COLUMBIA DIVIDEND INCOME CL A,9,509.319 UNITS PIONEER FUNDAMENTAL GROWTH CL Y
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\$ 501,271

2019-12-11

(b)
Description of noncash property given

(c)
FMV (or estimate)
(See instructions)

(d)
Date received

2	10,369.1415 UNITS COLUMBIA DIVIDEND INCOME CL A,9,509.319 UNITS PIONEER FUNDAMENTAL GROWTH CL Y
---	--

\$ 501,271

2019-12-11

(b)
Description of noncash property given

(c)
FMV (or estimate)
(See instructions)

(d)
Date received

§

(b)
Description of noncash property given

(c)
FMV (or estimate)
(See instructions)

(d)
Date received

\$

(b)
Description of noncash property given

(c)
FMV (or estimate)
(See instructions)

(d)
Date received

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§

(b)
Description of noncash property given

(c)
FMV (or estimate)
(See instructions)

(d)
Date received

\$

26-3548021

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

Schedule B (Form 990, 990-EZ, or 990-PF) (2019)