Return of Private Foundation Form **990-PF**

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

Department of the Treasury Internal Revenue Service

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

▶ Go to www.irs.gov/Form990PF for instructions and the latest information. For calendar year 2019 or tax year beginning and ending Name of foundation A Employer identification number BRENNAN FAMILY CHARITABLE FOUNDATION 45-6400430 Number and street (or P O box number if mail is not delivered to street address) Room/suite B Telephone number 85 ESSEX ROAD 617-477-6851 City or town, state or province, country, and ZIP or foreign postal code C If exemption application is pending, check here CHESTNUT HILL, MA 02467 G Check all that apply: Initial return Initial return of a former public charity D 1. Foreign organizations, check here Final return Amended return 2. Foreign organizations meeting the 85% test check here and attach computation Address change Name change Check type of organization: Section 501(c)(3) exempt private foundation E If private foundation status was terminated J Section 4947(a)(1) nonexempt charitable trust
 ↓ Other taxable private foundation under section 507(b)(1)(A), check here 1 Fair market value of all assets at end of year | J Accounting method: X Cash Accrual If the foundation is in a 60-month termination Other (specify) (from Part II, col. (c), line 16) under section 507(b)(1)(B), check here 354, 465. (Part I, column (d), must be on cash basis.) ▶\$ Part | Analysis of Revenue and Expenses (d) Disbursements (b) Net investment (c) Adjusted net (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a)) for charitable purposes (cash basis only) expenses per books income ıncome 156,865 N/A Contributions, gifts, grants, etc., received Check if the foundation is not required to attach Sch 8 Interest on savings and temporary cash investments 3 4,260 4,260 STATEMENT Dividends and interest from securities 5a Gross rents b Net rental income or (loss) -11 6a Net gain or (loss) from sale of assets not on line 10 b Gross sales price for all assets on line 8a 72. 0 11/12/2 7 Capital gain net income (from Part IV, line 2) 8 Net short-term capital gain Income modifications 10a Gross sales less returns and allowances **b** Less Cost of goods sold c Gross profit or (loss) 11 Other income 161 114 260 Total Add lines 1 through 11 Compensation of officers, directors, trustees, etc. 14 Other employee salaries and wages 15 Pension plans, employee benefits 16a Legal fees **b** Accounting fees c Other professional fees 17 Interest 36 0. 0. STMT 2 18 19 Depreciation and depletion 20 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications 210. 210 0 23 Other expenses STMT 3 24 Total operating and administrative 246 0 expenses Add lines 13 through 23 210. 100,000 100,000. 25 Contributions, gifts, grants paid 26 Total expenses and disbursements 0 100,210. 100,246 Add lines 24 and 25 27 Subtract line 26 from line 12: 60,868 8 Excess of revenue over expenses and disbursements 4,260 b Net investment income (if negative, enter -0-)

c Adjusted net income (if negative, enter -0-)

N/A

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78,049.

8 Enter qualifying distributions from Part XII, line 4

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

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100,210.

Add lines 5 and 6

	n 990-PF (2019) BRENNAN FAMILY CHARITABLE FOUNDATION art VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4		-640043 - see inst		Page 4
	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1.		T		
	Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)		ļ		
ь	Domestic foundations that meet the section 4940(e) requirements in Part V, check here	1			43.
	of Part I, line 27b	'	 		45.
c	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations, enter 4% of Part I, line 12, col. (b)				
	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	 		43.
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	 		43.
6	Credits/Payments:		Ţ		
а	2019 estimated tax payments and 2018 overpayment credited to 2019 6a 0.				
	Exempt foreign organizations - tax withheld at source 6b 0.				
	Tax paid with application for extension of time to file (Form 8868) 6c 0.		ļ		
	Backup withholding erroneously withheld 6d 0.				
	Total credits and payments. Add lines 6a through 6d	7	J		0.
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			43.
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	11			
	rt VII-A Statements Regarding Activities				
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene	n		Yes	No
	any political campaign?		1a		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the defini	ion	16		X
	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.			Ĭ	
C	Did the foundation file Form 1120-POL for this year?		<u>1c</u>		_X_
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:		į		i
	(1) On the foundation. ▶ \$ 0 . (2) On foundation managers. ▶ \$ 0 .				İ
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation				l
	managers. ► \$		l		
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?		2		X
	If "Yes," attach a detailed description of the activities.		1	1	1
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or			- [_
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes		3	—	X
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?		4a	+	X
	If "Yes," has it filed a tax return on Form 990-T for this year?	N,	/A 4b	+	<u> </u>
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?		5		X
	If "Yes," attach the statement required by General Instruction T				1
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:		1		
	By language in the governing instrument, or		1	1	
	By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state	aw			v
	remain in the governing instrument?		6	x	X
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV		7	 ^ -	
٠-	Fator the atotal to which the favorable property or with which it is a section of Consequence.				
ъа	Enter the states to which the foundation reports or with which it is registered. See instructions.				
	MA If the accuracy is "Ves" to line 7, here the foundation furnished a copy of Form 000 PE to the Atternay Congret (or designate)				
	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)		86	x	
	of each state as required by General Instruction G? If "No," attach explanation is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calen	dar	00	1	1
	year 2019 or the tax year beginning in 2019? See the instructions for Part XIV If "Yes," complete Part XIV	-ui	9		\times L
	Did any persons become substantial contributors during the tax year? It "Yes," attach a schedule listing their names and addresses		10	1	X
10	any persons become substantial contributors during the tax year. If "Yes," attach a schedule listing their names and addresses		Form QC	O DE	(2010)

L.	art 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	İ		
	section 512(b)(13)? If "Yes," attach schedule. See instructions	11		_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	12		_X_
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	
	Website address ► N/A			
14	The books are in care of ► <u>SETH W. BRENNAN</u> Telephone no. ► 617 - 47	7-6	851	
	Located at ▶ 85 ESSEX ROAD, CHESTNUT HILL, MA ZIP+4 ▶02	467		
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	N	/A_	
16	At any time during calendar year 2019, did the foundation have an interest in or a signature or other authority over a bank,		Yes	No
	securities, or other financial account in a foreign country?	16	_	X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the			
	foreign country	_		
Pa	art 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?			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)	1		
	a disqualified person?	i i		
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?		- 1	
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?]]		
	(5) Transfer any income or assets to a disqualified person (or make any of either available			
	for the benefit or use of a disqualified person)?	[[ĺ	
	(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)		ļ	
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 N/A	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		1	
Ī	before the first day of the tax year beginning in 2019?	10		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	1		
	6d and 6e) for tax year(s) beginning before 2019?	i l		
	If "Yes," list the years \blacktriangleright			
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		- 1	
	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.			
	>		1	
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			
	during the year?	Ì	1	
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		- 1	
	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.) N/A	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	\Box	X
	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		<u>X</u> _
	For	n 990	-PF (2	2019)

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Form 990-PF (2019) BRENNAN FAMILY CHARITABLE FOUNDA	ATION 45-6	5400430 Page 7
Part VIII Information About Officers, Directors, Trustees, Foundation Paid Employees, and Contractors (continued)		
3 Five highest-paid independent contractors for professional services. If none, ente	r "NONE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
MARC A. ELFMAN, LLC	TAX PREPARATION	
50 CONGRESS STREET, #925, BOSTON, MA 02109	SERVICES	0.
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 statis number of organizations and other beneficiaries served, conferences convened, research papers produced N/A	duced, etc.	Expenses
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		
All other program-related investments. See instructions.		
Total. Add lines 1 through 3	>	0. Form 990-PF (2019)

FOI	m 990-PF (2019) BRENNAN FAMILY CHARITABLE FOUNDATION	45-640	00430	Page 8
P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign fou	ndations, see in	structions)	
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	182.	723.
b	Average of monthly cash balances	1b	110,	078.
C	Fair market value of all other assets	1c		
d	Total (add lines 1a, b, and c)	1d	292,	801.
е	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	292,	801.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	4,	392.
5	Net value of noncharitable-use assets Subtract line 4 from line 3. Enter here and on Part V, line 4	5	288,	409.
6	Minimum investment return Enter 5% of line 5	6	14,	420.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations ar	id certain		
	foreign organizations, check here 🕨 🔛 and do not complete this part.)	. 		
1	Minimum investment return from Part X, line 6	1	14,	<u>420.</u>
2a	Tax on investment income for 2019 from Part VI, line 5			
b	Income tax for 2019. (This does not include the tax from Part VI.)			
C	Add lines 2a and 2b	2c		<u>43.</u>
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	14,	<u>377.</u>
4	Recoveries of amounts treated as qualifying distributions	4		0.
5	Add lines 3 and 4	5	<u> </u>	<u>377.</u>
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	14,	377.
P	art XII Qualifying Distributions (see instructions)			
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		100	
а		1a	100,	
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:	_		
а	Suitability test (prior IRS approval required)	_3a		
b	Cash distribution test (attach the required schedule)	3b	100	210
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8; and Part XIII, line 4	4	100,	<u> </u>
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment	_		42
	income. Enter 1% of Part I, line 27b	5	100	43.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	100,	T 0 / •
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation of	ualities for the se-	CUON	

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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				14,377.
2 Undistributed income, if any, as of the end of 2019				
a Enter amount for 2018 only			0.	
b Total for prior years:				
,,		0.	L	
3 Excess distributions carryover, if any, to 2019:				
a From 2014 3, 708.				
b From 2015 68, 154.				
c From 2016 67,660.				
d From 2017				
e From 2018 238, 545.				
f Total of lines 3a through e	378,067.			
4 Qualifying distributions for 2019 from				_
Part XII, line 4: ► \$ 100, 210.		1		
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.			<u> </u>
d Applied to 2019 distributable amount				14,377.
e Remaining amount distributed out of corpus	85,833.			
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	463,900.			
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		0.		
assessed				
d Subtract line 6c from line 6b. Taxable		0.		
amount - see instructions				
e Undistributed income for 2018. Subtract line 4a from line 2a. Taxable amount - see instr			0.	
f Undistributed income for 2019. Subtract				
lines 4d and 5 from line 1. This amount must	l			
be distributed in 2020	1			0.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by	İ			
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	3,708.			
9 Excess distributions carryover to 2020.	3,700.			
Subtract lines 7 and 8 from line 6a	460,192.			
10 Analysis of line 9:	±00,102.			
a Excess from 2015 68,154.	1	1		
b Excess from 2016 67,660.		,		
c Excess from 2017				
d Excess from 2018 238, 545.				
e Excess from 2019 85,833.		1	}	
				222 55

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Part XIV Private Operating Fo				N/A	
1 a If the foundation has received a ruling or					
foundation, and the ruling is effective for		-	· · · ▶ └──		
b Check box to indicate whether the founda		ing foundation described		4942(j)(3) or 494	42(j)(5)
2 a Enter the lesser of the adjusted net	Tax year	(1) 2019	Prior 3 years	(1) 0040	
income from Part I or the minimum	(a) 2019	(b) 2018	(c) 2017	(d) 2016	(e) Total
investment return from Part X for					
each year listed		ļ	 		
b 85% of line 2a			 	/	
c Qualifying distributions from Part XII, line 4, for each year listed					
d Amounts included in line 2c not					
used directly for active conduct of					
exempt activities			 / 		
e Qualifying distributions made directly					
for active conduct of exempt activities.					
Subtract line 2d from line 2c 3 Complete 3a, b, or c for the			 	<u> -</u>	
alternative test relied upon:					
a "Assets" alternative test - enter:					
(1) Value of all assets		/			
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test - enter		}			
2/3 of minimum investment return shown in Part X, line 6, for each year listed					
c "Support" alternative test - enter:					
(1) Total support other than gross]			
investment income (interest,		ļ			
dividends, rents, payments on securities loans (section				[
512(a)(5)), or royalties)					
(2) Support from general public					
and 5 or more exempt organizations as provided in				1	
section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from					
an exempt organization					
(4) Gross investment income					
Part XV Supplementary Inform			if the foundation	had \$5,000 or mor	re in assets
at any time during the	e year-see instr	ructions.)			
1 Information Regarding Foundation	Managers:				
a List any managers of the foundation who h			ributions received by the	foundation before the close	of any tax
year (but only if they have contributed moi	re than \$5,000). (See s	ection 507(d)(2).)			
SEE STATEMENT 7					
b List any managers of the foundation who cother entity) of which the foundation has a			(or an equally large portio	on of the ownership of a part	inership or
NONE					
2 Information Regarding Contribution	n, Grant, Gift, Loan,	Scholarship, etc., Pr	ograms:		
Check here ► X if the foundation only				ot accept unsolicited reques	sts for funds. If
the foundation makes gifts, grants, etc., to	individuals or organiza	tions under other condit	ions, complete items 2a, t	b, c, and d	
a The name, address, and telephone number	or email address of th	e person to whom applic	ations should be address	ed.	
b The form in which applications should be s	submitted and informat	ion and materials they st	nould include.		
c Any submission deadlines:					
d Any restrictions or limitations on awards, s	uch as by geographica	l areas, charitable fields,	kinds of institutions, or o	ther factors:	
-	·	· •			
			 		
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▶ 3b

Total

Part XVI-A Analysis of Income-Producing Activities

		usiness income(b)	(C) Exclu-	d by section 512, 513, or 514	(e)
1 Program service revenue	Business code	Amount	sion code	(d) Amount	Related or exempt function income
a			† - 		
b	_				
c			 -		
d			 -		_
e	-		++-		
g Fees and contracts from government agencies			+ -		
2 Membership dues and assessments			 -		
3 Interest on savings and temporary cash			1-1-		-
investments	1		} }		
4 Dividends and interest from securities			14	4,260.	
5 Net rental income or (loss) from real estate:					· · · · · · · · · · · · · · · · · · ·
a Debt-financed property			<u> </u>		· · · · · · · · · · · · · · · · · · ·
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	j		14	-11.	
than inventory Net income or (loss) from special events	 -		14		
10 Gross profit or (loss) from sales of inventory					
11 Other revenue:					· · · · · · · · · · · · · · · · · · ·
a					
b	The state of the s				
c					
d	1				
e	_				
12 Subtotal. Add columns (b), (d), and (e)		0.			0
13 Total Add line 12, columns (b), (d), and (e)				13	4,249
(See worksheet in line 13 instructions to verify calculations					
Part XVI-B Relationship of Activities	s to the Accom	plishment of Ex	empt F	'urposes	
Line No. Explain below how each activity for which in	ncome is reported in co	lumn (e) of Part XVI-A	contribute	d importantly to the accomp	lishment of
	an by providing funds	for such purposes).		 	
the foundation's exempt purposes (other th					
the foundation's exempt purposes (other th					
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rait XVII	Exempt Organ		isters to a	and Transactions	and Relation	nsnips With Non	charitable	•	
1 Did the o	rganization directly or indir		of the follows	no with any other organiza	ation described in	section 501(c)		Yes	No
	an section 501(c)(3) organ					555,151, 55 1(5)			
	from the reporting founda							ĺ	l
(1) Cash	=			9			1a(1)	1 1	X
(2) Othe							1a(2)		X
b Other train							10/5/		
(1) Sale	s of assets to a noncharital	ble exempt organiza	ation				16(1)		X
	hases of assets from a nor	-					16(2)		X
	al of facilities, equipment, o	•	3.				1b(3)		X
	bursement arrangements						1b(4)		X
	is or loan guarantees						1b(5)		X
	ormance of services or mei	mbership or fundra	ısına solicitati	ons			1b(6)		X
	of facilities, equipment, mai	•	-				10		X
	wer to any of the above is '				always show the fa	air market value of the oc		ets.	
	es given by the reporting fo							•	
column (d) the value of the goods, o	other assets, or serv	vices received.		-		·		
a) Line no	(b) Amount involved	(c) Name o	f noncharitabl	e exempt organization	(d) Descrip	ption of transfers, transaction	s, and sharing arr	angeme	nts
			N/A				,		
						· 			
				 					
	ndation directly or indirectl	•		or more tax-exempt orga	nizations described	đ	<u> </u>		1.
	501(c) (other than section		ection 527?				Yes	X	l No
b If "Yes," co	omplete the following sche			1 (1) T ((a) Danish a of sale			
	(a) Name of orga	anization		(b) Type of organization	1	(c) Description of rela	itionsnip		
	N/A			<u></u>					
					 				
					}		·		
					 				
Under	penalties of perjup, I Beclare th	hat I have examined thi	e return includin	a accompanying schedules an	nd statements, and to	the best of my knowledge			
Sign and be	elief, it is true, correct, and comp	plete. Declaration of pro-	eparer (other than	taxpayer) is based on all info	rmation of which prep	arer has any knowledge	May the IRS di return with the		
Here	1			*/ 11/U/2	D TRUS	जयत	shown below? X Yes	See inst	
 	nature of officer or trustee				Title	155	Tes Tes		No
Jorgi	Print/Type preparer's nam	me .	Preparer's si	nnature /	Date	Check I If P	TIN		
	, Tille Type property o new		Troparor o o	9.10.0.0	54.5	self- employed			
Paid			Man	6 991	11/04/20	1	P000443	328	
Preparer	Firm's name ► MARC	A FI.FM	AN T.T.	C	<u> / U=/ U</u>	Firm's EIN ► 20	-400456	53	
Use Only	THE STATE PARTY	, A. BUTM	للد , 144	.		11111132111 - 20	20020		
	Firm's address ▶ 50	CONGRESS	ਤੁਸ਼ੁਸ਼ੁਸ਼ੁਤ	T, #925					
		STON, MA		-, ", ", ", ", ", ", ", ", ", ", ", ", ",		Phone no.			
			<u></u>			1	Form 990	-PF (2	2019)

Schedule B

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Schedule of Contributors

➤ Attach to Form 990, Form 990-EZ, or Form 990-PF.
➤ Go to www.irs.gov/Form990 for the latest information.

OMB No 1545-0047

2019

Name of the organization

Employer identification number

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

	BRENNAN FAMILY CHARITABLE FOUNDATION	45-6400430
Organization type (chec	ck 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	X 501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a private foundation	
	501(c)(3) taxable private foundation	
• •	on is covered by the General Rule or a Special Rule . I (c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special R	ule. See instructions
General Rule	•	
	tion filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totalin any one contributor. Complete Parts I and II. See instructions for determining a contributo	
Special Rules		
sections 509(a) any one contrib	tion described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% suppor (1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a outor, during the year, total contributions of the greater of (1) \$5,000, or (2) 2% of the amount EZ, line 1 Complete Parts I and II.	, or 16b, and that received from
year, total contr	tion described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from ributions of more than \$1,000 <i>exclusively</i> for religious, charitable, scientific, literary, or educately to children or animals. Complete Parts I, II, and III.	
year, contribution is checked, enter purpose Don't o	tion described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from ons exclusively for religious, charitable, etc., purposes, but no such contributions totaled mer here the total contributions that were received during the year for an exclusively religious complete any of the parts unless the General Rule applies to this organization because it able, etc., contributions totaling \$5,000 or more during the year	nore than \$1,000 If this box s, charitable, etc ,
out it must answer "No"	that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (for Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Fet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)	

LHA For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF.

Name of organization

Employer identification number

BRENNAN FAMILY CHARITABLE FOUNDATION

45-6400430

Part I	Contributors (see instructions) Use duplicate copies of Part I if additional	Il space is needed	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	SETH AND ELIZABETH BRENNAN 85 ESSEX ROAD CHESTNUT HILL, MA 02467	\$ 30,875.	Person Payroll Noncash X (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	SETH AND ELIZABETH BRENNAN 85 ESSEX ROAD CHESTNUT HILL, MA 02467	\$\$	Person Payroll Noncash X (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3	SETH AND ELIZABETH BRENNAN 85 ESSEX ROAD CHESTNUT HILL, MA 02467	\$ 24,262.	Person Payroll Noncash X (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4	SETH AND ELIZABETH BRENNAN 85 ESSEX ROAD CHESTNUT HILL, MA 02467	\$\$	Person Payroll Noncash X (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5	SETH AND ELIZABETH BRENNAN 85 ESSEX ROAD CHESTNUT HILL, MA 02467	\$ 21,569.	Person Payroll Noncash X (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
6	SETH AND ELIZABETH BRENNAN 85 ESSEX ROAD CHESTNUT HILL, MA 02467	s25,424.	Person Payroll Noncash (Complete Part II for noncash contributions)

Schedule B (Form 990, 990·EZ, or 990·PF) (2019) Name of organization **Employer identification number** BRENNAN FAMILY CHARITABLE FOUNDATION 45-6400430

Part I	Contributors (see instructions) Use duplicate copies of Part I if additional	Il space is needed	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7	SETH AND ELIZABETH BRENNAN 85 ESSEX ROAD CHESTNUT HILL, MA 02467	\$8,167.	Person Payroll Noncash X (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroli Oncash Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash Occash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)

Name of organization

Employer identification number

BRENNAN FAMILY CHARITABLE FOUNDATION

45-6400430

Part II	Noncash Property (see instructions) Use duplicate copies of F		-6400430
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
	270 SHS CINN FINANCIAL CORP		
_		\$ 30,875.	09/24/19
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
2	462 SHS CISCO SYSTEMS INC		
		\$\$.	09/24/19
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
2	487 SHS INTEL CORP		
3		\$\$	09/24/19
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
4	217 SHS LOWES COMPANIES INC		
4		\$23,874.	09/24/19
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
5	157 SHS MICROSOFT CORP INC		
		\$ 21,569.	09/24/19
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
6	139 SHS NORFOLK STHN CORP		
	-19	\$ <u>25,424.</u>	09/24/19 90, 990-EZ, or 990-PF) (2019)

Name of organization

Employer identification number

BRENNAN FAMILY CHARITABLE FOUNDATION

45-6400430

Part II	Noncash Property (see instructions) Use duplicate copies of P	Part II if additional space is needed.	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
_7	100 SHS PAYCHEX INC		
		\$8,167.	09/24/19
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		 \$	
(a) No. rom art I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
(a) No. rom art I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
a) lo. om art l	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
_		\$	
a) lo. om art l	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	0, 990-EZ, or 990-PF) (2

Name of or	rganization			Employer identification number			
BRENN	AN FAMILY CHARITABLE FO	UNDATION		45-6400430			
Part III	Exclusively religious, charitable, etc., contribution any one contributor. Complete columns (a completing Part III, enter the total of exclusively religious, Use duplicate copies of Part III if additional	tions to organizations described in i) through (e) and the following line of charitable, etc., contributions of \$1,000 of	entry For organizations	or (10) that total more than \$1,000 for the year			
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Desc	ription of how gift is held			
	(e) Transfer of gift						
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee				
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Desc	ription of how gift is held			
-	(e) Transfer of gift						
	Transferee's name, address, a	nd ZIP + 4	Relationship of trar	nsferor to transferee			
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Descr	iption of how gift is held			
		(e) Transfer of gi	ft				
	Transferee's name, address, an	nd ZIP + 4	Relationship of tran	sferor to transferee			
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Descr	iption of how gift is held			
	(e) Transfer of gift						
	Transferee's name, address, and ZIP + 4		Relationship of tran	sferor to transferee			

FORM 990-PF DIVI	DENDS	AND INTER	EST	FROM SECUR	ITIES	STATEMENT	1
SOURCE AMC	SS UNT	CAPITAL GAINS DIVIDEND		(A) REVENUE PER BOOKS	(B) NET INVEST MENT INCOM		
UBS - DIVIDENDS 3 UBS - INTEREST	,971. 289.		0.	3,971. 289.	3,971 289		
TO PART I, LINE 4	,260.		0.	4,260.	4,260	·	
FORM 990-PF		TAX	ES			STATEMENT	2
DESCRIPTION		(A) EXPENSES PER BOOKS		(B) INVEST- I INCOME	(C) ADJUSTED NET INCOME	(D) CHARITA PURPOS	
UNITED STATES TREASURY		36.		0.			0.
TO FORM 990-PF, PG 1, LN	18	36.		0.			0.
FORM 990-PF		OTHER E	XPENS	SES		TATEMENT	3
DESCRIPTION		(A) EXPENSES PER BOOKS		(B) INVEST- INCOME	(C) ADJUSTED NET INCOME	(D) CHARITAI PURPOSI	
MASACHUSETTS FILING FEE UBS ANNUAL FEE		35. 175.		0.			35. 75.
TO FORM 990-PF, PG 1, LN	23	210.		0.		2:	10.
FORM 990-PF OTHER DECR	EASES	IN NET AS	SETS	OR FUND BA	ALANCES S	TATEMENT	4
DESCRIPTION			<u>-</u>			AMOUNT	
	a ao ar	י מאכדכ				1	15.
DECREASE IN MARKET VECTOR DIFFERENCE BETWEEN BOOK A			VALUE	STOCKS DO	ONATED	102,35	52.

FORM 990-PF	CORPORATE STOCK		STATEMENT 5
DESCRIPTION		BOOK VALUE	FAIR MARKET VALUE
VANGUARD FTSE EMERGING MARK	ETS - 190 SHS	8,142.	8,449.
VANGUARD RUSSELL 1000 ETF -	385 SHS	30,788.	56,780.
VANGUARD RUSSELL 2000 ETF -	220 SHS	19,664.	29,295.
VANGUARD FTSE DEVELOPED MKT	' - 925 SHS	36,078.	40,756.
MARKET VECTORS		1,064.	748.
270 SHARES CINN FINANCIAL C	ORP	9,147.	28,391.
462 SHS CISCO SYSTEMS INC		8,235.	22,158.
487 SHS INTEL CORP		8,585.	29,147.
217 SHS LOWES COMPANIES		9,387.	25,988.
157 SHS MICROSOFT CORP		5,096.	24,759.
139 SHS NORFOLK STHN CORP		10,966.	26,984.
100 SHS PAYCHEX INC		3,181.	8,506.
TOTAL TO FORM 990-PF, PART	II, LINE 10B	150,333.	301,961.
FORM 990-PF	CORPORATE BONDS		STATEMENT 6
DESCRIPTION		BOOK VALUE	FAIR MARKET VALUE
ISHARES 3-7 YEAR TREAS BOND		3,810.	3,773.
SPDR BARCLAYS INT TREAS BOND		4,193.	4,033.
SPDR BARCLAYS CAPITAL HIGH	•	3,256.	2,848.
TOTAL TO FORM 990-PF, PART	II, LINE 10C	11,259.	10,654.
FORM 990-PF	PART XV - LINE 1A		STATEMENT 7

NAME OF MANAGER

SETH W. BRENNAN ELIZABETH DEWINTER BRENNAN

LIST OF FOUNDATION MANAGERS