Form 990-PF

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

▶ Do not enter social security numbers on this form as it may be made public ► Go to www irs gov/Form990PF for instructions and the latest information

OMB No 1545-0047

Fo	or c	ale	ndar year 2019 or tax year beginning		, and ending	· · · · · · · · · · · · · · · · · · ·	
_	Van	ne o	of foundation			A Employer identificatio	n number
	Н	ER	MANN FOUNDATION, INC.				
			MARYANN COPELAND	•	-	56-2385301	
_			and street (or P O box number if mail is not delivered to stre	et address)	Room/suite	B Telephone number	
	3	70	MAIN STREET		925	1	-4657
_			town, state or province, country, and ZIP or foreign	postal code	. 12.53	C if exemption application is	
			CESTER, MA 01608	,		o ii exemption application is p	bellaling, check here
_			k all that apply: Initial return	Initial return of a	former public charity	D 1 Foreign organization	s check here
			Final return	Amended return	or mor poone on any	B 1 / Ordigit organization	o, oncor nor o
			Address change	Name change		2 Foreign organizations mi check here and attach co	eeting the 85% test,
H	C	hec		exempt private foundation	~ A	E if private foundation sta	
] Se	ection 4947(a)(1) nonexempt charitable trust	Other taxable private found	fation 04	under section 507(b)(1	
ī	Fai	ır m	arket value of all assets at end of year J Accoun	ting method X Cash	Accrual	F If the foundation is in a	
_	(fro	om f	Part II, col (c), line 16)	Other (specify)		under section 507(b)(1	
	▶			mn (d), must be on cash ba	SIS.)		, , , , , , , , , , , , , , , , , , ,
	300	rt I	Analysis of Revenue and Expenses	(a) Revenue and	(b) Net investment	(c) Adjusted net	(d) Disbursements
<u>^</u>			(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a))	expenses per books	псоте	income	for charitable purposes (cash basis only)
2	Ī	1	Contributions, gifts, grants, etc , received			12.00	
	֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓	2	Check X if the foundation is not required to attach Sch. B				
		3	Interest on savings and temporary cash investments				
		4	Dividends and interest from securities	1,697,514.	1,697,514.		STRUCTURES
SCANNED	1	5a	Gross rents				
≶		b	Net rental income or (loss)				
Z,		6a	Net gain or (loss) from sale of assets not on line 10	4,784,977.			
	Hevenue	b	Gross sales price for all 25,197,564-(
	8	7	Capital gain net income (from Part IV, line 2)		4,784,977.		医神经病疾病
		8	Net short-term capital gain				
MAY		9	income modifications (C)				
~	1	10a	Gross sales less returns and allowances				
00		b	Less Cost of goods sold OG	EDAU SERVICE			
	ļ		Gross profit or (loss)				
202	- 1		Other income				
<u> </u>	_	12	Total Add lines 1 through 11	6,482,491.	6,482,491.		
		13	Compensation of officers, directors, trustees, etc	262,500.	131,250.		0.
		14	Other employee salaries and wages				
ý	n I		Pension plans, employee benefits				
2	2		Legal fees	20 540	14 275		
2	2		Accounting fees STMT 2 Other professional fees	28,549.	14,275.		0.
a TT	<u>ן</u> נ		Interest	-			-
, t	┋│.		Taxes STMT 3	118,598.	0.		0.
1	[]	19	Depreciation and depletion	110,390.	U•		
and Administrative Expens	[],		Occupancy				
4	١,		Travel, conferences, and meetings	-			
7	3 2		Printing and publications				
ā	י מוס		Other expenses STMT 4	241,834.	233,283.		0.
£	<u>ا</u> ا		Total operating and administrative	241,034.	233,203.		
Operating	֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓		expenses Add lines 13 through 23	651,481.	378,808.	ļ	0.
Č	5/2	25	Contributions, gifts, grants paid	3,179,333.			3,179,333.
	- 1		Total expenses and disbursements		THE STATE OF THE PROPERTY OF T	- PF ± 1 - TOTA GRAN (IPA No PARTIES PARTIE	312131333.
	ļ		Add lines 24 and 25	3,830,814.	378,808.		3,179,333.
	12		Subtract line 26 from line 12	5,000,011			
			Excess of revenue over expenses and disbursements	2,651,677.			
			Net investment income (if negative, enter -0-)		6,103,683.		
	1		Adjusted net income (if negative, enter -0-)	270 1280 200		N/A	

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

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	_	_					
56	- 2	3	R	5	3	ი	1

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N.	257	Balance Sheets Attached schedules and amounts in the description	Beginning of year	End o	of year
Δ.	A	column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing			
	2	Savings and temporary cash investments	5,549,056.	2,516,505.	2,516,505.
	3	Accounts receivable			
	İ	Less. allowance for doubtful accounts			
	4	Pledges receivable ▶			
		Less. allowance for doubtful accounts >			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			` -
		disqualified persons			
	7	Other notes and loans receivable			
	1	Less: allowance for doubtful accounts			
şţs	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			
⋖	10a	Investments - U.S. and state government obligations STMT 5	951,290.	1,127,674.	1,114,371.
_	b	Investments - corporate stock STMT 6	39,977,665.	46,399,697.	70,345,375.
	C	Investments - corporate bonds STMT 7	2,887,059.	3,213,170.	3,259,320.
	11	Investments land, buildings, and equipment basis			
		Less accumulated depreciation			<u> </u>
	12	Investments - mortgage loans			
	13	Investments - other STMT 8	1,630,017.	389,860.	500,150.
	14	Land, buildings, and equipment basis			
		Less accumulated depreciation			
	15	Other assets (describe			
	16	Total assets (to be completed by all filers - see the			
_		instructions. Also, see page 1, item I)	50,995,087.	53,646,906.	77,735,721.
	1	Accounts payable and accrued expenses		142.	
	18	Grants payable			
es	19	Deferred revenue			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
ā		Mortgages and other notes payable			
_	22	Other liabilities (describe)	ſ		
_	23	Total liabilities (add lines 17 through 22)	0.	142.	
		Foundations that follow FASB ASC 958, check here			
ces		and complete lines 24, 25, 29, and 30			
lau	Į.	Net assets without donor restrictions			
Fund Balances	25	Net assets with donor restrictions			
pur		Foundations that do not follow FASB ASC 958, check here			
	1	and complete lines 26 through 30	E0 E01 E40	E2 242 22E	
S	I	Capital stock, trust principal, or current funds	50,591,548.	53,243,225.	
Net Assets or	I	Paid-in or capital surplus, or land, bldg., and equipment fund	403,539.	403,539.	
As	l	Retained earnings, accumulated income, endowment, or other funds	0.	0.E	
Ne.	29	Total net assets or fund balances	50,995,087.	53,646,764.	
	30	Total liabilities and net assets/fund balances	50,995,087.	53,646,906.	
				33,040,500.	
1	art.	Analysis of Changes in Net Assets or Fund B	alances		
1	Total	net assets or fund balances at beginning of year - Part II, column (a), line	29		
		agree with end-of-year figure reported on prior year's return)		1	50,995,087.
		amount from Part I, line 27a		2	2,651,677.
		increases not included in line 2 (itemize)		3	0.
		nes 1, 2, and 3		4	53,646,764.
5	Decre	ases not included in line 2 (itemize)		5	0.
6	Total	net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	olumn (b), line 29	6	53,646,764.
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H 79 4 _ 46	and Losses for Tax on the kind(s) of property sold (for ex			(b) How acquired	(c) Date	acquired	(d) Dat	
	arehouse, or common stock, 200 s			(b) How acquired P - Purchase D - Donation	(mo.,	day, yr)	(mo , da	
1a	STATEMENT						<u>. </u>	
b SEE ATTACHED	SIATEMENT				 .			
đ			-					
<u>e</u>	/O Decreasion allowed			L		2		
(e) Gross sales price	(f) Depreciation allowed (or allowable)		est or other basis expense of sale			Gain or (loss) is (f) minus (g		
a								
<u>b</u>					- 			
<u>c</u>								
e 25,197,564.			0,412,58	7.			1,784	,977.
Complete only for assets showing	ng gain in column (h) and owned b	1.				Col. (h) gain r not less than		
(ı) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69		cess of col. (i)			(from col (h		
a b	1	_						_
C								
d								
<u>e</u>	<u> </u>					4	1,784,	977.
2 Capital gain net income or (net ca	upital loss) $ \begin{cases} & \text{If gain, also ent} \\ & \text{If (loss), enter} \end{cases} $	er in Part I, line 0- in Part I, line	7 : 7	} 2			784,	977.
3 Net short-term capital gain or (los		and (6):		7				
If gain, also enter in Part I, line 8, If (loss), enter -0- in Part I, line 8	column (c).) 3		N/A		
Part V Qualification U					come			
(For optional use by domestic private	foundations subject to the section	4940(a) tax on	nct investment inc	comc.)				
If section 4940(d)(2) applies, leave the	ııs part blank.							
Was the foundation liable for the seci If "Yes," the foundation doesn't qualif				od?		[Yes [X No
	each column for each year; see the	instructions be	fore making any en	tries.				
Base period years	(b) Adjusted qualifying di	stributions	Net value of non	(c) charitable-use assets		Distribil	d) tion ratio	-11
Calendar year (or tax year beginnin 2018	19 1117	06,700.		66,146,348		(col. (b) divid		©)) 10920
2017	3,08	34,960.		67,082,087				5988
2016		24,537.		52,119,825				5128
2015 2014		15,060. 31,197.		54,990,277 54,882,689				1009 5947
20,,		<u>3171370</u>		3470027003	1		•04	<u> </u>
2 Total of line 1, column (d)					2		.23	8992
3 Average distribution ratio for the 5 the foundation has been in exister		on line 2 by 5.0), or by the number	r of years	3		0.4	7798
the restriction has seen in exister	ice ii iess tiali s years				3			
4 Enter the net value of noncharitab	le-use assets for 2019 from Part X,	, line 5			4	70	,190,	<u>353.</u>
5 Multiply line 4 by line 3					5	3	,354,	958.
6 Enter 1% of net investment incom	e (1% of Part I, line 27b)				6		61,	037.
7 Add lines 5 and 6					7	3	,415,	995.
B Enter qualifying distributions from					8	3	,179,	333.
If line 8 is equal to or greater than See the Part VI instructions.	line 7, check the box in Part VI, line	e 1b, and comp	lete that part using	a 1% tax rate				
· · · · · · · · · · · · · · · · · · ·	-						000 0	F (0040)

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X

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)

10 Did any persons become substantial contributors during the tax year? if "res," attach a schedule listing their names and addresses

year 2019 or the tax year beginning in 2019? See the instructions for Part XIV. If "Yes," complete Part XIV

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

of each state as required by General Instruction G? If "No," attach explanation

P	Continued)			
	v		Yes	No
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of		}	
	section 512(b)(13)? If "Yes," attach schedule. See instructions	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?		l	}
	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	L
	Website address N/A		1.5-	
14	The books are in care of ► THE FOUNDATION Telephone no ► (508)		<u>465</u>	7_
4-	Located at ► 370 MAIN STREET, SUITE 925, WORCESTER, MA ZIP+4 ►0	<u> 1608</u>		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here		, ▶	·
16	and enter the amount of tax-exempt interest received or accrued during the year At any time during solerator year 2010, did the foundation began as a section of the secti		/A	N1-
10	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? See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the	16	2012/2013	X
	foreign country			3
	Statements Regarding Activities for Which Form 4720 May Be Required	150000	MACK!	
1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1	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):	200		
	(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)		業連	
	a disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?			
	(5) Transfer any income or assets to a disqualified person (or make any of either available			
	for the benefit or use of a disqualified person)?		影	
	(6) Agree to pay money or property to a government official? (Exception Check "No"			
	ıf 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.)			
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	16		Х
	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		X
?	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))			
à	At the end of tax year 2019, did the foundation have any undistributed income (Part XIII, lines			
	6d and 6e) for tax year(s) beginning before 2019?			
	If "Yes," list the years \			
D	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4912(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) If the provinces of particle 4042(a)(a) are bound and the result the second to the state of the state o	2b	hinkini p	en il
U	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			
32	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			
Jd	during the year?			
h	If "Yes," did it have excess business holdings in 2019 as a result of (1) any purchase by the foundation or disqualified persons after			
•	May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose			
	of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Form 4720,			
	Schedule C, to determine if the foundation had excess business holdings in 2019.) N/A	3b	MAJZE 12	
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	1a		X
	Did the foundation make any investment in a prior year (but after December 31, 1909) 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	anders.	X
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Part VII B Statements Regarding Activities for Which	Form 4720 May Be	Required (contil	nued)	
5a During the year, did the foundation pay or incur any amount to.				Yes No
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	n 4945(e))?	Y	es 🗶 No 🎉	
(2) Influence the outcome of any specific public election (see section 4955); (or to carry on, directly or indi			
any voter registration drive?			es X No	
(3) Provide a grant to an individual for travel, study, or other similar purposes	37	Y	es 🗶 No 🥞	
(4) Provide a grant to an organization other than a charitable, etc., organization	in described in section			
4945(d)(4)(A)? See instructions		Y	es 🗶 No 🧏	
(5) Provide for any purpose other than religious, charitable, scientific, literary,	, or educational purposes, or			
the prevention of cruelty to children or animals?		Y	es 🗓 No 📳	
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify uni	der the exceptions described	ın Regulations		
section 53 4945 or in a current notice regarding disaster assistance? See instr	uctions		N/A 5	ib
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 f	rom the tax because it maint	ained		
expenditure responsibility for the grant?]	Y 🔲 A\N	es 🔲 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?		🗀 Y	es 🗶 No 🎏	
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal benefit contract?		6	b X
If "Yes" to 6b, file Form 8870				
7a At any time during the tax year, was the foundation a party to a prohibited tax s	helter transaction?	Y	es 🗶 No	
b If "Yes," did the foundation receive any proceeds or have any net income attribu			N/A 7	Ъ
8 Is the foundation subject to the section 4960 tax on payment(s) of more than \$		or	in.	
excess parachute payment(s) during the year?	,,		es 🗶 No 🧱	
Information About Officers, Directors, Trust	ees, Foundation Ma			
Paid Employees, and Contractors	,	J , J	_	
1 List all officers, directors, trustees, and foundation managers and t	heir compensation.			
A.M	(b) Title, and average	(c) Compensation	(d) Contributions to employee benefit plans and deferred	(e) Expense
(a) Name and address	hòurs per week devoted to position	(If not paid, enter -0-)	and deferred compensation	account, other allowances
	-	1		
			}	
SEE STATEMENT 9		262,500.	0.	0.
				
			}	
		 		
		+		
				
		1		
2 Compensation of five highest-paid employees (other than those inc	luded on line 1). If none.	enter "NONE."	L	
	(b) Title, and average	1	(d) Contributions to employee benefit plans	(e) Expense
(a) Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	and deterred	account, other allowances
NONE	devoted to position	 	compensation	allowalices
NONE				
		 		
			1	
		 		
		 -		
			ĺ	
				
			1	
		L		
Total number of other employees paid over \$50,000			_	0
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Information About Officers, Directors, Trustees, Four Paid Employees, and Contractors (continued)	indation Managers, Highly	
3 Five highest-paid independent contractors for professional services. If none,	enter "NONE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
GRIMES & COMPANY, INC.	(5),,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	(0)
GRITIED & COMPANY THE.	INVESTMENT ADVISO	OR 118,893.
UBS INVESTMENTS		
	INVESTMENT ADVISO	OR 111,286.
		
T		
Total number of others receiving over \$50,000 for professional services Part X-A Summary of Direct Charitable Activities		▶ 0
List the foundation's four largest direct charitable activities during the tax year. Include relevant a number of organizations and other beneficiaries served, conferences convened, research papers		Ēxpenses
1 N/A	, , , , , , , , , , , , , , , , , , , ,	
		~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~
2		
3		
4		
Part X-B Summary of Program-Related Investments	····	
Describe the two largest program-related investments made by the foundation during the tax year	ar on lines 1 and 2	Amount
1 <u>N/A</u>		
2		
All other program-related investments. See instructions.		
3		
	4-,	
Total Add less 1 through 2		
Total. Add lines 1 through 3		0 . Form <b>990-PF</b> (2019)

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	Minimum Investment Return (All domestic foundations must complete this part. Foreign for	undations	, see instructions)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes.		<del> </del>
a	Average monthly fair market value of securities	1a	69,428,576
b	Average of monthly cash balances	1b	1,830,666
C	Fair market value of all other assets	1c	0
đ	Total (add lines 1a, b, and c)	1đ	71,259,242
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	71,259,242
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	1,068,889
5	Net value of noncharitable-use assets Subtract line 4 from line 3. Enter here and on Part V, line 4.	5	70,190,353
3_	Minimum investment return Enter 5% of line 5	6	3,509,518
J.	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations a	nd certain	
	foreign organizations, check here 🕨 🔛 and do not complete this part.)		
ı	Minimum investment return from Part X, line 6	1	3,509,518
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	122,074.
3	Distributable amount before adjustments Subtract line 2c from line 1	3	3,387,444.
ļ	Recoveries of amounts treated as qualifying distributions	4	0 .
5	Add lines 3 and 4	5	3,387,444.
ì	Deduction from distributable amount (see instructions)	6	0.
_	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	3,387,444.
P	Qualifying Distributions (see instructions)	0000000	
	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		2 4 5 2 2 2 2
a	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	3,179,333.
b	Program-related investments - total from Part IX-B	1b	0.
	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
Ì	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	0.450.000
	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8; and Part XIII, line 4	4	3,179,333.
•	Foundations that qualify under section 1940(e) for the reduced rate of tax on net investment		
	income. Enter 1% of Part I, line 27b	5	0.
i	Adjusted qualifying distributions Subtract line 5 from line 4	6	3,179,333.
	Note The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation of 4940(e) reduction of tax in those years.	qualifies foi	r the section

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## Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2018	(c) 2018	( <b>d)</b> 2019
Distributable amount for 2019 from Part XI,	The state of the s	rears prior to 2010	2010	2013
line 7				3,387,444
2 Undistributed income, if any, as of the end of 2019			THE RESERVE THE PROPERTY OF THE PERSON NAMED IN	
a Enter amount for 2018 only			2,997,806.	
b Total for prior years.		,		
, ,		0.		
3 Excess distributions carryover, if any, to 2019				
a From 2014				
<b>b</b> From 2015				
<b>c</b> From 2016				
<b>d</b> From 2017				
e From 2018				
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2019 from				
Part XII, line $4^{-} \triangleright \$ 3,179,333$ .				
a Applied to 2018, but not more than line 2a			2,997,806.	
<b>b</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				181,527.
e Remaining amount distributed out of corpus	0.			
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	0.			
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		0.5		
e Undistributed income for 2018. Subtract line			22.1	
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				0 005 045
be distributed in 2020				3,205,917.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3) (Election	<b>^</b>			
may be required - see instructions)	0.			
8 Excess distributions carryover from 2014 not applied on line 5 or line 7	0.			
	<u>∪ .</u>			
9 Excess distributions carryover to 2020 Subtract lines 7 and 8 from line 6a	0.			
O Analysis of line 9				
a Excess from 2015				
b Excess from 2016				
c Excess from 2017				
d Excess from 2018				
e Excess from 2019				

HERMANN FOUNDATION, INC. Form 990-PF (2019) C/O MARYANN COPELAND 56-2385301 Page 10 Private Operating Foundations (see instructions and Part VII-A, question 9) N/A 1 a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2019, enter the date of the ruling b Check box to indicate whether the foundation is a private operating foundation described in section 4942(j)(3) or 4042(1)(5) Tax year Prior 3 years 2 a Enter the lesser of the adjusted net (c) 2017 (a) 2019 (b) 2018 (d) 2016, (e) Total income from Part I or the minimum investment return from Part X for each year listed **b** 85% of line 2a c Qualifying distributions from Part XII, line 4, for each year listed d Amounts included in line 2c not used directly for active conduct of exempt activities e Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c Complete 3a, b, or c for the alternative test relied upon: a "Assets" alternative test - enter (1) Value of all assets (2) Value of assets qualifying under section 4942(j)(3)(B)(i) b "Endowment" alternative test - enter 2/3 of minimum investment return shown in Part X, line 6, for each year c "Support" alternative test - enter (1) Total support other than gross investment income (interest dividends, rents, payments on securities loans (section 512(a)(5)), or royalties) (2) Support from general public and 5 or more exempt organizations as provided in section_4942(j)(3)(B)(iii) (3) Largest amount of support from an exempt organization (4) Gross investment income Part XV. Supplementary Information (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year-see instructions.) Information Regarding Foundation Managers: a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000) (See section 507(d)(2).) NONE b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest NONE Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs: 🔟 if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc., to individuals or organizations under other conditions, complete items 2a, b, c, and d. a The name, address, and telephone number or email address of the person to whom applications should be addressed. MARYANN COPELAND, TREASURER, HERMANN FOUNDATION, (508)756-4657

MARYANN COPELAND, TREASURER, HERMANN FOUNDATION, (508)756-4657

370 MAIN STREET, SUITE 925, WORCESTER, MA 01608

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

BY LETTER

c Any submission deadlines;

NONE

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

MUST BE A SECTION 501(C)(3) PUBLIC CHARITY

Form **990-PF** (2019)

Form 990-PF (2019) C/O MARYANN COPELAND

Supplementary Information (continued)

Supplementary information					
3 Grants and Contributions Paid During the		Payment	T		·
- Recipient	If recipient is an individual, show any relationship to	Foundation	Purpose of grant	or	Amount
Name and address (home or business)	any foundation manager or substantial contributor	status of recipient	contribution		Amount
a Paid during the year					
365Z FOUNDATION, INC.	NONE	PUBLIC CHARITY	ENABLE DONEE TO		
			CONTINUE EXEMPT		
	-	<u>.</u>	FUNCTION		25,000.
APPV'S HOUSE ING	NONE	DIELIC CHARIEV	ENABLE DONEE MO		
ABBY'S HOUSE, INC.	NONE	PUBLIC CHARITY	ENABLE DONEE TO		
			FUNCTION		25,000.
				İ	
AMERICAN ANTEQUARIAN SOCIETY	NONE	PUBLIC CHARITY	ENABLE DONEE TO		
			CONTINUE EXEMPT FUNCTION		25,000.
- *************************************			FUNCTION		25,000.
ASSOCIATION TO PRESERVE CAPE COD	NONE	PUBLIC CHARITY	ENABLE DONEE TO		
			CONTINUE EXEMPT		
p-			FUNCTION		35,000.
BOYS & GIRLS CLUB OF CAPE COD	NONE	PUBLIC CHARITY	ENABLE DONEE TO		
			CONTINUE EXEMPT		
			FUNCTION		45,000.
•	NTINUATION SHEE	T(S)	1	▶ 3a	3 179 333.
b Approved for future payment					
NONE					
		<u> </u>			
	*				
Total		<u>-</u>		<b>≥</b> 3b	0.
				For	m <b>990-PF</b> (2019)

Form 990-PF (2019)

Enter gross amounts unless otherwise indicated.	Unreia	ted business income		ded by section 512, 513, or 514	(e)
Program service revenue	(a) Business code	(b) Amount	(C) Exclu- sion code	( <b>d)</b> Amount	Related or exempt function income
a	0000		1 3333		
b		<del>                                     </del>	1 1		
C					
d			-	·	
e			1		
f					
g Fees and contracts from government agencies					
2 Membership dues and assessments					_
Interest on savings and temporary cash				_	
investments					
Dividends and interest from securities			14	1,697,514.	
Net rental income or (loss) from real estate:	3.400	THE SHALL SHEET			
a Debt-financed property					
b Not debt-financed property					
Net rental income or (loss) from personal				·	·
property					
7 Other investment income		, and the second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second			-
Gain or (loss) from sales of assets other					
than inventory			18	4,784,977.	
Net income or (loss) from special events					<u>.</u>
Gross profit or (loss) from sales of inventory					
Other revenue:					
a					
b			$\perp$		
			1 1		
С	_				
c d					
d e Subtotal. Add columns (b), (d), and (e)		0	. Pest	6,482,491.	0
c d e Subtotal. Add columns (b), (d), and (e) Total Add line 12, columns (b), (d), and (e)		0		6,482,491.	0 6,482,491
c d e Subtotal. Add columns (b), (d), and (e) Total Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculations.  Relationship of Activities  ine No  Explain below how each activity for which in	s to the Acco	omplishment of E	xempt	Purposes	6,482,491
c d e Subtotal. Add columns (b), (d), and (e) Total Add line 12, columns (b), (d), and (e) see worksheet in line 13 instructions to verify calculations.  Relationship of Activities	s to the Acco	omplishment of E	xempt	Purposes	6,482,491
c d e Subtotal. Add columns (b), (d), and (e) Total Add line 12, columns (b), (d), and (e) Gee worksheet in line 13 instructions to verify calculations.  Relationship of Activities  Ine No Explain below how each activity for which in	s to the Acco	omplishment of E	xempt	Purposes	6,482,491
c d e Subtotal. Add columns (b), (d), and (e) Total Add line 12, columns (b), (d), and (e) Gee worksheet in line 13 instructions to verify calculations.  Relationship of Activities  Ine No Explain below how each activity for which in	s to the Acco	omplishment of E	xempt	Purposes	6,482,491
c d e Subtotal. Add columns (b), (d), and (e) Total Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculations.  Relationship of Activities  ine No  Explain below how each activity for which in	s to the Acco	omplishment of E	xempt	Purposes	6,482,491
c d e Subtotal. Add columns (b), (d), and (e) Total Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculations.  Relationship of Activities  ine No  Explain below how each activity for which in	s to the Acco	omplishment of E	xempt	Purposes	6,482,491
c d e Subtotal. Add columns (b), (d), and (e) Total Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculations.  Relationship of Activities  ine No  Explain below how each activity for which in	s to the Acco	omplishment of E	xempt	Purposes	6,482,491
c d e Subtotal. Add columns (b), (d), and (e) Total Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculations.  Relationship of Activities  ine No  Explain below how each activity for which in	s to the Acco	omplishment of E	xempt	Purposes	6,482,491
c d e Subtotal. Add columns (b), (d), and (e) Total Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculations.  Relationship of Activities  ine No  Explain below how each activity for which in	s to the Acco	omplishment of E	xempt	Purposes	6,482,491
c d e Subtotal. Add columns (b), (d), and (e) Total Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculations.  Relationship of Activities  ine No  Explain below how each activity for which in	s to the Acco	omplishment of E	xempt	Purposes	6,482,491
c d e Subtotal. Add columns (b), (d), and (e) Total Add line 12, columns (b), (d), and (e) liee worksheet in line 13 instructions to verify calculations.  Relationship of Activities  Ine No Explain below how each activity for which in	s to the Acco	omplishment of E	xempt	Purposes	6,482,491
c d e Subtotal. Add columns (b), (d), and (e) Total Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculations.  Relationship of Activities  ine No  Explain below how each activity for which in	s to the Acco	omplishment of E	xempt	Purposes	6,482,491
c d e Subtotal. Add columns (b), (d), and (e) Total Add line 12, columns (b), (d), and (e) liee worksheet in line 13 instructions to verify calculations.  Relationship of Activities  Ine No Explain below how each activity for which in	s to the Acco	omplishment of E	xempt	Purposes	6,482,491
c d e Subtotal. Add columns (b), (d), and (e) Total Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculations.  Relationship of Activities  ine No  Explain below how each activity for which in	s to the Acco	omplishment of E	xempt	Purposes	6,482,491
c d e Subtotal. Add columns (b), (d), and (e) Total Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculations.  Relationship of Activities  ine No  Explain below how each activity for which in	s to the Acco	omplishment of E	xempt	Purposes	6,482,491
c d e Subtotal. Add columns (b), (d), and (e) Total Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculations.  Relationship of Activities  ine No  Explain below how each activity for which in	s to the Acco	omplishment of E	xempt	Purposes	6,482,491
c d e Subtotal. Add columns (b), (d), and (e) Total Add line 12, columns (b), (d), and (e) liee worksheet in line 13 instructions to verify calculations.  Relationship of Activities  Ine No Explain below how each activity for which in	s to the Acco	omplishment of E	xempt	Purposes	6,482,491
c d e Subtotal. Add columns (b), (d), and (e) Total Add line 12, columns (b), (d), and (e) liee worksheet in line 13 instructions to verify calculations.  Relationship of Activities  Ine No Explain below how each activity for which in	s to the Acco	omplishment of E	xempt	Purposes	6,482,491

923621 12-17-19

## Part XVI Information Regarding Transfers to and Transactions and Relationships With Noncharitable **Exempt Organizations**

		• • • • • • • • • • • • • • • • • • • •							
1	Did the o	organization directly or indi	rectly engage in any	of the follows	ng with any other organizat	tion described in se	ction 501(c)		es No
	(other th	nan section 501(c)(3) organ	nizations) or in secti	on 527, relatin	ng to political organizations	າ	, ,		
a	Transfer	s from the reporting found	ation to a noncharit	able exempt or	rganization of				<b>30</b> 7.5
	(1) Cas			•	•			1a(1)	X
	(2) Othe	er assets						1a(2)	Х
Ь		insactions:							<b>33</b> 53 4
_	(1) Sale	es of assets to a noncharita	ble exempt organiza	ation				1b(1)	X
		chases of assets from a no	_					1b(2)	X
	` '	tal of facilities, equipment,	·	or gameation.				1b(3)	X
		nbursement arrangements						1b(4)	X
	` '	ns or loan guarantees						<del></del>	X
	• •	formance of services or me	mbarabia ar fundra	iora colicitati	200			1b(5)	
_			•	-				1b(6)	X
	_	of facilities, equipment, ma			•			<u>  1c  </u>	<u> </u>
Œ		swer to any of the above is					_		S,
		es given by the reporting fo				lue in any transaction	on or snaring arrange	ment, show iii	
-1.		(d) the value of the goods,			<del>_</del>	(4)			
2) L	ine no	(b) Amount involved	(c) Name o		e exempt organization	(0) Description	on of transfers, transactio	ns, and sharing arrar	ngements
				N/A		<del></del>		<del></del>	-
					*		<del></del>		
				<del></del>			· · · · · · · · · · · · · · · · ·		
						<u> </u>			
							<del></del>		
2a	Is the fou	indation directly or indirect	ly affiliated with, or i	elated to, one	or more tax exempt organ	izations described			
	in section	n 501(c) (other than section	n 501(c)(3)) or in se	ction 527?				Yes	X No
		complete the following sche							
	•	(a) Name of orga			(b) Type of organization		(c) Description of rel	ationship	
		N/A		***	( ) 21		· · · · · · · · · · · · · · · · · · ·	<del></del>	
				~~		-	·· <u></u> -		
		· · · · · · · · · · · · · · · · · · ·	<del></del>				<u>-</u>		
				···-					
	Mode	r penalties of perjury, I declare the	hat I have overmost the	n enture metudi-	a accompanying askedules as d	Letatemente and to the	hant of my leasured:		
e: ~		reflet, it is true, correct, and com-						May the IRS disc return with the pi	
Sig Hei		Llaras A.	. ^		/alala			shown below? S	ee instr
iei		v-mespelo	ing		1113 202	O TREAS	URER	_ X Yes	U No
	Sigi	nature of officer of trustee			Date	Title			
		Print/Type preparer's nar	me	Preparer's si	gnature	Date	Check if	PTIN	
				u	1,	~/ - f -	self- employed		
Pai	id	GARY SKAGE	RLIND	Dame	& Kayerlind	'7] 3 20		P009596	84
?re	parer	Firm's name ► SINC		ARDI	Y	<del>- / - / -  </del>	Firm's EIN ► 04		
	e Only			0	<u>-</u>				_
	_	Firm's address ► 370	MATH CT	CIIT	TE 925		<del>·   · · · · · · · · · · · · · · · · · ·</del>		
							Dhone se /Er	191756 4	657
		1. WO	RCESTER,	MA UTO	UO-1//4		Phone no. (50	08)756-4	
								Form <b>990-l</b>	<b>-⊢</b> (2019)

923622 12-17-19

Capital Gains and Li	osses for Tax on Investment Income			
(a) List an 2-story b	id describe the kind(s) of property sol prick warehouse; or common stock, 2	ld, e.g., real estate, 100 shs. MLC Co.	(b) How acquired P - Purchase D - Donation (c) Date acquired (d) (mo , day, yr )	) Date sold o., day, yr )
1a GRIMES INVESTM	MENTS - DETAILS O	N FILE		/31/19
b GRIMES INVESTM	MENTS - DETAILS O	N FILE	P VARIOUS 12	/31/19
c UBS FINANCIAL	SERVICES - DETAI	LS ON FILE	P VARIOUS 12	/31/19
d UBS FINANCIAL	SERVICES - DETAI	LS ON FILE	P VARIOUS 12	/31/19
e UBS FINANCIAL	SERVICES - DETAI	LS ON FILE	P VARIOUS 12	/31/19
f UBS FINANCIAL	SERVICES - DETAI	LS ON FILE		/31/19
g UBS FINANCIAL	SERVICES - DETAI	LS ON FILE	P VARIOUS 12	/31/19
h CAPITAL GAINS	DIVIDENDS			
1				
.1.				
k				
_1				
m				
<u>n</u>				
_0				
(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 5,719,364.		5,157,103.	562	2,261.
b 10,434,650.		6,867,009.		7,641.
c 1,800,000.		1,797,554.		2,446.
d 1,325,000.		1,355,427.		,427.
e 1,680,000.		1,680,000.		0.
f 1,124,454.		1,111,249.	13	3,205.
g 3,099,853.		2,444,245.	655	608.
h 14,243.			14	,243.
1				
1				
<u>k</u>				
<u> </u>				
m				
n				
0				
Complete only for assets shown	ig gain in column (h) and owned by t	he foundation on 12/31/69	(I) Lösses (from col. (h))	
(ı) F M.V as of 12/31/69	(ı) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any	Gains (excess of col. (h) gain over col. ( but not less than "-0-")	k),
a				,261.
b				,641.
С				,446.
d				,427.
e			<u></u>	0.
f				<u>,205.</u>
g				,608.
h			14	,243.
l				***************************************
k				
I				
<u>m</u>				
n				
0				
2 Capital gain net income or (net ca	pital loss) {   If gain, also enter if (loss), enter "-0-	in Part I, line 7 " in Part I, line 7 }	4,784	<u>,977.</u>
	s) as defined in sections 1222(5) and	1 (6)		
If gain, also enter in Part I, line 8,		<b>}</b>		
If (loss), enter "-0-" in Part I, line 8	· · · · · · · · · · · · · · · · · · ·		N/A	

	ARYANN COPELAND		56-23	885301
Supplementary Informat				<del>                                     </del>
3 Grants and Contributions Paid During th				
Recipient	If recipient is an individual, show any relationship to	Foundation	Purpose of grant or	
Name and address (home or business)	any foundation manager	status of	contribution	Amount
<u>`</u>	or substantial contributor	recipient		<del> </del>
BOYS & GIRLS CLUB OF SOUTH COAST	NONE	PUBLIC CHARITY	ENABLE DONEE TO	}
	1		CONTINUE EXEMPT	
		-	FUNCTION	35,000
BRAILLE INSTITUTE	NONE	PUBLIC CHARITY	ENABLE DONEE TO	
			CONTINUE EXEMPT	
		<del> </del>	FUNCTION	30,000
CALIFORNIA BALLET COMPANY	NONE	PUBLIC CHARITY	ENABLE DONEE TO	
			CONTINUE EXEMPT	
		-	FUNCTION	50,000.
CAPE CARES	NONE	PUBLIC CHARITY	ENABLE DONEE TO	
			CONTINUE EXEMPT	
			FUNCTION	30,000.
CAPE COD COMMUNITY ARTS & MUSIC	NONE	PUBLIC CHARITY	ENABLE DONEE TO	
			CONTINUE EXEMPT	
			FUNCTION	100,000.
CAPE COD HEALTHCARE FOUNDATION	NONE	PUBLIC CHARITY	ENABLE DONEE TO	
			CONTINUE EXEMPT	
			FUNCTION	83,333.
ENTER FOR COASTAL STUDIES	NONE	PUBLIC CHARITY	ENABLE DONEE TO	
			CONTINUE EXEMPT	
440,000			FUNCTION	75,000.
HURCH OF THE MESSIAH	NONE	PUBLIC CHARITY	ENABLE DONEE TO	
			CONTINUE EXEMPT	
			FUNCTION	50,000.
ITY OF HOPE	NONE	PUBLIC CHARITY	ENABLE DONEE TO	
			CONTINUE EXEMPT	
			FUNCTION	50,000.
ITY SPROUTS INC	NONE	PUBLIC CHARITY	ENABLE DONEE TO	
,			CONTINUE EXEMPT	_
Total from continuation sheets	<u> </u>	L	FUNCTION	25,000.
Tarat tront continuation succis				3 024 333

## HERMANN FOUNDATION, INC. C/O MARYANN COPELAND

56-2385301

Supplementary Informations Grants and Contributions Paid During the				1
· Recipient	if recipient is an individual.			
Name and address (home or business)	show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
ivalite and address (notice of dusiness)	or substantial contributor	recipient		
COMMUNITY MUSIC CENTER OF BOSTON	NONE	PUBLIC CHARITY	ENABLE DONEE TO	
			CONTINUE EXEMPT	
			FUNCTION	40,000
COMPASSIONATE CARE ALS	NONE	PUBLIC CHARITY	ENABLE DONEE TO	
			CONTINUE EXEMPT	
			FUNCTION	100,000
CRADLES TO CRAYONS	NONE	PUBLIC CHARITY	ENABLE DONEE TO	
			CONTINUE EXEMPT	25.000
			FUNCTION	25,000
ELTZADEMU CMONE HOUGE	NONE	DIRECTO CHARLEN	ENABLE DONEE GO	
ELIZABETH STONE HOUSE	NONE	PUBLIC CHARITY	ENABLE DONEE TO	
			CONTINUE EXEMPT FUNCTION	150,000
			FUNCTION	130,000
EPISCOPAL COMMUNITY SERVICES	NONE	PITRI.TC CHARTTY	ENABLE DONEE TO	
HIDOTAL COMMONITI BENVICES	HOME	TOBBIC CIMICIT	CONTINUE EXEMPT	
			FUNCTION	50,000
FALMOUTH HOUSING TRUST	NONE	PUBLIC CHARITY	ENABLE DONEE TO	
•			CONTINUE EXEMPT	
			FUNCTION	65,000,
FAMILY SERVICES OF CENTRAL MA	NONE	PUBLIC CHARITY	ENABLE DONEE TO	
			CONTINUE EXEMPT	
			FUNCTION	25,000.
FRIENDS OF NASHOBA LIGHT	NONE	PUBLIC CHARITY	ENABLE DONEE TO	
			CONTINUE EXEMPT	100 000
			FUNCTION	100,000.
HIGHFIELD HALL AND GARDENS FALMOUTH	NONE	DITRITC CHARTEN	ENABLE DONEE TO	
TIOMINA CHIMAD ON LUM CULL THE	HORE	CODDIC CHARTEI	CONTINUE EXEMPT	
			FUNCTION EXEMPT	100,000.
HOLE IN THE WALL GANG CAMP	NONE	PUBLIC CHARITY	ENABLE DONEE TO	
			CONTINUE EXEMPT	
		L	FUNCTION	50,000.

56-2385301

Supplementary Informatio  Grants and Contributions Paid During the				
· Recipient	If recipient is an individual,		<del></del>	-
Name and address (home or business)	show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
	or substantial contributor	recipient		
HOUSING ASSISTANCE CORP OF CAPE COD	NONE	PUBLIC CHARITY	ENABLE DONEE TO	
			CONTINUE EXEMPT FUNCTION	50,000
JEWISH HEALTHCARE CENTER	NONE	PUBLIC CHARITY	ENABLE DONEE TO CONTINUE EXEMPT	
			FUNCTION	50,000
JOSH THIBODEAU HELPING HEARTS	NONE	PUBLIC CHARITY	ENABLE DONEE TO	
FOUNDATION			CONTINUE EXEMPT	
			FUNCTION	25,000
LAURA'S HOUSE	NONE	PUBLIC CHARITY	ENABLE DONEE TO	
			CONTINUE EXEMPT	
		<del> </del>	FUNCTION	25,000
LEICESTER CHRISTMAS DISPLAY	NONE	PUBLIC CHARITY	ENABLE DONEE TO	
			CONTINUE EXEMPT	5 000
			FUNCTION	5,000
LOVELANE SPECIAL NEEDS HORSEBACK	NONE	PUBLIC CHARITY	ENABLE DONEE TO	
RIDING PROGRAM			CONTINUE EXEMPT FUNCTION	10,000
MANOMET CENTER FOR CONSERVATION SCIENCES	NONE	j .	ENABLE DONEE TO CONTINUE EXEMPT	
			FUNCTION	50,000.
MARTHA'S VINEYARD YOUTH LEADERSHIP	NONE	PUBLIC CHARITY	ENABLE DONES TO	
INITIATIVE	TONE	1	CONTINUE EXEMPT	
······································			FUNCTION	96,500,
MASSACHUSETTS GENERAL HOSPITAL	NONE	PUBLIC CHARITY	ENABLE DONEE TO	
		1	CONTINUE EXEMPT	
	<del> </del>		FUNCTION	25,000.
MERCY CENTER OF WORCESTER	NONE	PUBLIC CHARITY	ENABLE DONEE TO	
			CONTINUE EXEMPT	
	<u> </u>		FUNCTION	25,000.

Supplementary Information				
3 Grants and Contributions Paid During the			<del></del>	
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		
MUSEUM OF SCIENCE	NONE	PUBLIC CHARITY	ENABLE DONEE TO	
_			CONTINUE EXEMPT FUNCTION	50,000
NEW ENGLAND CENTER AND HOME FOR	NONE	PUBLIC CHARITY	ENABLE DONEE TO	
VETERANS		•	CONTINUE EXEMPT	
			FUNCTION	100,000.
NORTHEASTERN UNIVERSITY	NONE	PUBLIC CHARITY	ENABLE DONEE TO CONTINUE EXEMPT	
			FUNCTION	100,000.
ORANGE COUNTY RESCUE MISSION	NONE	PUBLIC CHARITY	ENABLE DONEE TO	
			CONTINUE EXEMPT	
			FUNCTION	40,000.
PET PLACE INTERNATIONAL INC	NONE	PUBLIC CHARITY	ENABLE DONEE TO CONTINUE EXEMPT	
			FUNCTION	112,000.
PROFESSIONAL FIREFIGHTERS OF MA	NONE	PUBLIC CHARITY	ENABLE DONEE TO	
CHARITABLE TRUST			CONTINUE EXEMPT FUNCTION	25,000.
			90001100	
PROJECT ANGEL FOOD	NONE	PUBLIC CHARITY	ENABLE DONEE TO	
			CONTINUE EXEMPT	
			FUNCTION	60,000.
REACH BEYOND DOMESTIC VIOLENCE	NONE	PUBLIC CHARITY	ENABLE DONEE TO CONTINUE EXEMPT	
			FUNCTION	100,000.
		}		
RECOVERY WITHOUT WALLS	NONE	PUBLIC CHARITY	ENABLE DONEE TO	
			CONTINUE EXEMPT	
			FUNCTION	40,000.
REGIONAL ENVIRONMENTAL COUNCIL INC.	NONE		ENABLE DONEE TO CONTINUE EXEMPT	
			FUNCTION	20,000,
Total from continuation sheets		******		

Part XV Supplementary Information	n			
3 Grants and Contributions Paid During the		·		
• Recipient	If recipient is an individual, show any relationship to	Foundation	Purpose of grant or	Amount
Name and address (home or business)	any foundation manager or substantial contributor	status of recipient	contribution	7,11100111
STARLIGHT CHILDRENS FOUNDATION	NONE	PUBLIC CHARITY	ENABLE DONEE TO CONTINUE EXEMPT FUNCTION	75,000
STONE SOUP LEADERSHIP INSTITUTE	NONE	PUBLIC CHARITY	ENABLE DONEE TO CONTINUE EXEMPT FUNCTION	105,000
SUSTAINABLE HOLYOKE YOUTH LEADERSHIP	NONE	PUBLIC CHARITY	ENABLE DONEE TO CONTINUE EXEMPT FUNCTION	47,500
THE 300 COMMITTEE LAND TRUST	NONE	PUBLIC CHARITY	ENABLE DONEE TO CONTINUE EXEMPT FUNCTION	100,000
THE COMMUNITY FAMILY	NONE	PUBLIC CHARITY	ENABLE DONEE TO CONTINUE EXEMPT FUNCTION	50,000
THE HOLY UNION SISTERS	NONE	PUBLIC CHARITY	ENABLE DONEE TO CONTINUE EXEMPT FUNCTION	25,000
THE JEWEL BOX PROVIDERS THEATER	NONE	ļ	ENABLE DONEE TO CONTINUE EXEMPT FUNCTION	20,000
VANESSA MARCOTTE FOUNDATION	NONE		ENABLE DONEE TO CONTINUE EXEMPT FUNCTION	25,000,
WADE INSTITUTE FOR SCIENCE EDUCATION	NONE		ENABLE DONEE TO CONTINUE EXEMPT FUNCTION	30,000.
WHY ME	NONE		ENABLE DONEE TO CONTINUE EXEMPT FUNCTION	25,000 <u>.</u>
Total from continuation sheets				25,00

Supplementary Information				
3 Grants' and Contributions Paid During the		<del>_</del>	<del>,</del>	
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient	Contribution	<u> </u>
		İ		1
WOODS HOLE OCEANOGRAPHIC INSTITUTE	NONE	PUBLIC CHARITY	ENABLE DONEE TO	
			CONTINUE EXEMPT FUNCTION	100,000
			, swarton	100,000.
WOODS HOLE RESEARCH CENTER	NONE	PUBLIC CHARITY	ENABLE DONEE TO	
			CONTINUE EXEMPT	ļ
		<del> </del>	FUNCTION	50,000.
WORCESTER CENTER FOR PERFORMING ARTS,	NONE	PUBLIC CHARITY	ENABLE DONEE TO	
INC.	}		CONTINUE EXEMPT FUNCTION	25,000.
			FUNCTION	23.000.
WORCESTER CULTURAL COALITION	NONE	PUBLIC CHARITY	ENABLE DONEE TO	
			CONTINUE EXEMPT	
		<u> </u>	FUNCTION	25,000.
WORCESTER JEWISH COMMUNITY CENTER	NONE	PUBLIC CHARITY	ENABLE DONEE TO	
			CONTINUE EXEMPT	
	<del> </del>		FUNCTION	25,000.
WORCESTER YOUTH CENTER	NONE	DIDITO CUADITO	ENABLE DONEE MO	
WORCESTER TOUTH CENTER	NONE	PUBLIC CHARITI	ENABLE DONEE TO CONTINUE EXEMPT	
	<del> </del>		FUNCTION	25,000.
YES YOUTH EMERGING STRONGER	NONE	PUBLIC CHARITY	ENABLE DONEE TO	1
			CONTINUE EXEMPT	
	<del> </del>		FUNCTION	30,000.
				}
	<del> </del>			
		ļ		
	1			
Total from continuation sheets				

FORM 990-PF	DIVIDEND	S AND INTER	EST	FROM SECUR	ITIES S'	TATEMENT	1
SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDEND		(A) REVENUE PER BOOKS	(B) NET INVEST- MENT INCOME		
GRIMES & COMPANY, INC. U.B.S. FINANCIAL	715,703	•	0.	715,703.	715,703.		
SERVICES, INC.	248,366	•	0.	248,366.	248,366.		
U.B.S. FINANCIAL SERVICES, INC.	747,688	. 14,24	3.	733,445.	733,445.		
TO PART I, LINE 4	1,711,757	14,24	3.	1,697,514.	1,697,514.		
FORM 990-PF		ACCOUNTI	NG	FEES	S	TATEMENT .	2
DESCRIPTION		(A) EXPENSES PER BOOKS		(B) T INVEST- NT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITA PURPOS	
ACCOUNTING	_	28,549.		14,275.			0.
TO FORM 990-PF, PG	1, LN 16B	28,549.		14,275.			0.
FORM 990-PF		TAX	ES		នា	TATEMENT	3
DESCRIPTION		(A) EXPENSES PER BOOKS		(B) T INVEST- NT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITA PURPOS	
FOREIGN TAX EXPENSE FEDERAL EXCISE TAX	_	32,608. 85,990.		0.			0.
TO FORM 990-PF, PG	1, LN 18	118,598.		0.			0.

FORM 990-PF	OTHER E	XPENSES			STATEMENT	4
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVE MENT INC		(C) ADJUSTEI NET INCON		
INVESTMENT MANAGEMENT FEES MASSACHUSETTS FORM PC INSURANCE BANK FEES FILING FEES-ANNUAL REPORT MISCELLANEOUS EXPENSES	230,179. 500. 7,720. 125. 19. 3,291.		179. 0. 0. 125. 0. 979.			0.0.0.0.
TO FORM 990-PF, PG 1, LN 23	241,834.	233,	283.			0.
FORM 990-PF U.S. AND	STATE/CITY GO	OVERNMENT	OBLI	GATIONS	STATEMENT	<u></u>
DESCRIPTION	U.S GOV'		вос	K VALUE	FAIR MARKE VALUE	т
UBS - GOV. OBLIGATIONS GRIMES - GOVT OBLIGATIONS	X	<del>-</del>		612,941. 514,733.	599,6 514,7	
TOTAL U.S. GOVERNMENT OBLIGA	TIONS	•	1	,127,674.	1,114,3	71.
TOTAL STATE AND MUNICIPAL GO TOTAL TO FORM 990-PF, PART I		IGATIONS - -	1	,127,674.	1,114,3	71.
FORM 990-PF	CORPORATE	STOCK			STATEMENT	6
DESCRIPTION			воо	K VALUE	FAIR MARKE' VALUE	r
UBS - COMMON STOCK GRIMES - COMMON STOCK UBS - PREFERRED SECURITIES UBS - MUTUAL FUNDS UBS - FIXED BOND EQUITIES		-	25 4	,944,677. ,036,789. 391,531. ,899,518. ,127,182.	25,584,6 33,244,9 490,2 9,832,8 1,192,5	77. 97. 82.
TOTAL TO FORM 990-PF, PART I	I, LINE 10B	-	46	,399,697.	70,345,3	75.

FORM 990-PF	CORPORATE BONDS		STAT	EMENT '
DESCRIPTION		BOOK VALU		MARKET ALUE
UBS - CORPORATE BONDS	•	3,213,1	70. 3	,259,320
TOTAL TO FORM 990-PF, PART II,	LINE 10C	3,213,1	70. 3	,259,320.
FORM 990-PF	OTHER INVESTMENTS		STAT	EMENT 8
DESCRIPTION	VALUATION METHOD	BOOK VALU		MARKET ALUE
UBS - COMMODITIES	COST	389,8	60.	500,150.
TOTAL TO FORM 990-PF, PART II, I	LINE 13	389,8	60.	500,150.
	IST OF OFFICERS, DO NO FOUNDATION MANAGE TITLE AND AVRG HRS/WK		EMPLOYEE BEN PLAN	
TRUSTEES AI	ND FOUNDATION MANAGE	COMPEN- SATION	EMPLOYEE BEN PLAN	EXPENSE
NAME AND ADDRESS  MARYANN COPELAND 370 MAIN STREET SUITE 925	TITLE AND AVRG HRS/WK TREAS/SEC/DIREC	COMPEN- SATION CTOR 37,500.	EMPLOYEE BEN PLAN CONTRIB	EXPENSE ACCOUNT
NAME AND ADDRESS  MARYANN COPELAND 370 MAIN STREET SUITE 925 WORCESTER, MA 01608  MARIA STARZYK 25642 EL OESTE	TITLE AND AVRG HRS/WK TREAS/SEC/DIRECTORS	CTOR  CTOR  CTOR	EMPLOYEE BEN PLAN CONTRIB	EXPENSE ACCOUNT
NAME AND ADDRESS  MARYANN COPELAND 370 MAIN STREET SUITE 925 WORCESTER, MA 01608  MARIA STARZYK 25642 EL OESTE LAGUNA NIGUEL, CA 92677  KERRY QUINNIN 25941 PASOFINO	TITLE AND AVRG HRS/WK TREAS/SEC/DIRECTOR	CTOR 37,500.	EMPLOYEE BEN PLAN CONTRIB 0.	EXPENSE ACCOUNT  0.
NAME AND ADDRESS  MARYANN COPELAND 370 MAIN STREET SUITE 925 WORCESTER, MA 01608  MARIA STARZYK 25642 EL OESTE LAGUNA NIGUEL, CA 92677  KERRY QUINNIN 25941 PASOFINO LAGUNA NIGUEL, CA 92677  EDWARD STARZYK 25642 EL OESTE	TITLE AND AVRG HRS/WK  TREAS/SEC/DIRECTOR 12.00  DIRECTOR DIRECTOR	CTOR 37,500. CTOR 200,000.	EMPLOYEE BEN PLAN CONTRIB  0.	EXPENSE ACCOUNT  0.