**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.

De	partme	ent of the Treasury Revenue Service								this form as it may ructions and the lat				000	Open to Public	Inspection
		endar year 2019	or tax year		1		1,	2019		, and ending		MAR		2020	1 000	
_		of foundation										A Emplo	oyer id	entification	number	
		SOCIATIO	N FOR	THE	RELIE	F	OF	AGED	WOM:	EN		·	•			
-		NEW BED										04	-6 <u>0</u>	56367		
N	umber	and street (or PO b	oox number if	mail is not	delivered to str	eet ac	ddress)		_	Room/	/suite	<b>B</b> Telepi	hone n	umber		
	432 COUNTY STREET											(508)717-0400				
C	City or town, state or province, country, and ZIP or foreign postal code								C If exem	ption ap	oplication is p	ending, check here				
_	NEV	W BEDFOR	D, MA	. 02	740											
G	Chec	ck all that apply:		Initial ret	urn		Щ	Initial retu	rn of a fo	rmer public charity		D 1 For	eign oi	rganizations	s, check here	
				Final retu	-		Щ	Amended				2 Fore	eian ora	anizations me	eting the 85% test, mputation	. —
3_				Address			<u> </u>	Name cha				che	ck here	and attach co	mputation	
アド		ck type of organiz			ion 501(c)(3)	_				<i>[</i> ]	)2				tus was terminat	ed
<b>-</b> -		Section 4947(a)(1						xable priva	Cash	X Accrual				, , , ,	(A), check here	
		narket value of all Part II, col. (c), li		nu oi yea	r J Accou	-	er (spe		Joasii	Accidal					60-month termır (B), check here	nation
	(⊪0iii ►\$	1	5 374	801	Part I, co	lumn	i (d), m	nust be on a	cash bas	is.)		under	366110	11 307 (0)( 1)	(b), check here	
F	art	Analysis of R	evenue and	Expense	es			Revenue a		(b) Net investme	ent	(c)	Adjust	ed net	(d) Disburs	ements
		(The total of amo necessarily equa	ounts in colum	nns (b), (c),	and (d) may not			enses per l		income		(0)	incom		for charitable i	
_	1					$\neg$			42.				N/A			
	2			•	ed to attach Sch B									•		
	3	Interest on saving cash investments	s and tempor	rary		L										
	4	Dividends and	ınterest fro	m securit	ies	L		415,	388.	415,3	88.				STATEME	<u>NT 1</u>
	5	a Gross rents											<del></del>	-		
		Net rental income	or (loss)			4		450	10-							
	ღ∣6	A Net gain or (loss) Gross sales price				-		458,	485.			ı				
	enue 7	assets on line 6a			3,681.	-  -				150 1	0 =				コマニン	
(	호  7	Capital gain net in			2)	-				458,4	.00.	1	72			ੜ
_	-   8	Net short-term Income modifi		ı		$\vdash$			+			1	132	JUL 9		<del>}  -</del>
3	10	Gross sales less i and allowances	returns			┢			-			l l'				
3	- 1	b Less Cost of goo	ds sold									j	(	OGDE		-1
Received in		c Gross profit or	_									Ľ			7 4, 01	J
Į.	11	Other income														<del></del>
<u> </u>	12	Total. Add line	s 1 through	111				<u>873,</u>		873,8		_				
	13	Compensation of	officers, direc	ctors, truste	ees, etc	_		124,0			0.					<u>,636.</u>
3	14			-		_			059.		0.					,059.
∳ 	ທ   15	Pension plans,	employee t		m)/m 0	-			827.		0.					<u>,827.</u>
4	왕 16 [	a Legal fees	_		TMT 2	H			835.	13,3	0.					,835. ,759.
<b>1</b> 2226	<u> </u>	b Accounting fee			TMT 3	H			090. 066.	19,0						,053.
<b>2</b> ) (	ມີ  8   17	<ul> <li>Other profession</li> <li>Interest</li> </ul>	חומו וככצ	ى	TMT 4	$\vdash$		90,	200.	19,0	100		•		, , ,	, , , , , .
:	≧ ''   18			S	TMT 5			29.	205.		0.				12	,370.
	19		nd depletion						374.		0.					
<b>6</b> 0	E 20								702.		0.				18	,702.
<b>∑</b> :	21		nces, and n	neetings												
Ź	E 22	Printing and pu	blications													
Z	23				TMT 6	<u> </u>		49,0	081.	3,6	34.				45	<u>,447.</u>
SCANNED	E 24	Total operating						205	,,,	25.2					344	<b>COO</b>
<u> </u>	<u> </u>	expenses Add			3	-		397,8		35,9	/8.					<u>,688.</u>
AON.	25	Contributions,			•	-		541,	700.						341	<u>,986.</u>
	26	Add lines 24 ar		ırsement	5			939,	861	35,9	78				886	,674.
60	97	Subtract line 2		12·		$\dashv$		,,,,,	<u> </u>	33,3	, , , ,	L			- 300	<u>, v / च •</u>
		a Excess of revenue			bursemente			-65,	946.							
2020		b Net investmen								837,8	95.			-		
_		C Adjusted net in											N/A			
									_						- 000	DE

ARAW6361

orm	990-PF	(2019)
01111	00011	(2010)

For	m QC	ASSOCIATION FOR THE REL 10-PF (2019) OF NEW BEDFORD	TER OF AGED W	OMEN 04-	6056367 Page 2
	9.7		Beginning of year		of year
P	ärt	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
_	1	Cash - non-interest-bearing	(4) 20011 14.40	(4) 233	(0)
	2	Savings and temporary cash investments	952,324.	718,373.	718,373.
	3	Accounts receivable			
	١	Less; allowance for doubtful accounts	, <del>/[]]]]</del>	, <del>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</del>	
		Pledges receivable	anima samaniya ahina	HCH STATE	CARACTER SECTION AND A SECTION AND A SECTION ASSESSMENT OF THE SECTION
	7	Less: allowance for doubtful accounts	Santan, ishinanimi bilan	1/2101011111111111111111111111111111111	***************************************
	5	Grants receivable			-
	6	Receivables due from officers, directors, trustees, and other			
	"	disqualified persons			
	7	Other notes and loans receivable			
	′	Less: allowance for doubtful accounts	0.000.7-2 MIL 1-200-MA-15/16-3		
w	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			
As	I -	Investments - U.S. and state government obligations			,
	l .	Investments - corporate stock STMT 7	14,689,122.	12,361,211.	12,361,211.
	ı	Investments - corporate bonds STMT 8	2,243,253.	2,239,118.	2,239,118.
	11	Investments - land, buildings, and equipment basis			
	''	Less accumulated depreciation	WH. 3.1 137 110 W. 3011 1. 30 12 30 1. 30 11		1.0463602040000000000000000000000000000000
	12	Investments - mortgage loans	<del>-</del> -		
	13	Investments - other			
	14				
	'`	Less accumulated depreciation STMT 9  2,934.	0.	2,428.	2,428.
	15	Other assets (describe STATEMENT 10)	37,066.	53,671.	53,671.
	16	Total assets (to be completed by all filers - see the			
		instructions. Also, see page 1, item I)	17.921.765.	15,374,80ì.	15,374,801.
	17	Accounts payable and accrued expenses	13,970.		
	18	Grants payable			
s	19	Deferred revenue			
iţie	20	Loans from officers, directors, trustees, and other disqualified persons			
Liabilities	21	Mortgages and other notes payable			
ت	22	Other liabilities (describe			
		· · · · · · · · · · · · · · · · · · ·			
	23	Total liabilities (add lines 17 through 22)	13,970 <u>.</u>	14,385.	
		Foundations that follow FASB ASC 958, check here			
Ş		and complete lines 24, 25, 29, and 30.			
ž	24	Net assets without donor restrictions	17,641,750.	15,094,371.	
Fund Balances	25	Net assets with donor restrictions	266,045.	266,045.	
d B	ļ	Foundations that do not follow FASB ASC 958, check here ▶ □			
Ë		and complete lines 26 through 30.			
ģ	26	Capital stock, trust principal, or current funds			
ets	27	Paid-in or capital surplus, or land, bldg., and equipment fund			
Net Assets	28	Retained earnings, accumulated income, endowment, or other funds			
et A	29	Total net assets or fund balances	17,907,795.	15,360,416.	
Ž					
	30	Total liabilities and net assets/fund balances	17,921,765.	15,374,801.	
P	art	Analysis of Changes in Net Assets or Fund B	Balances		
_				<del></del>	T
		net assets or fund balances at beginning of year - Part II, column (a), line	29		48 005 505
	•	st agree with end-of-year figure reported on prior year's return)		1	17,907,795.
		r amount from Part I, line 27a		2	-65,946.
		r increases not included in line 2 (itemize)		3	0.
		lines 1, 2, and 3		4	17,841,849.
		eases not included in line 2 (itemize) <u>UNREALIZED GAI</u>		5	2,481,433.
<u>6</u>	Tota	net assets or fund balances at end of year (line 4 minus line 5) - Part II, c	olumn (b), line 29	6	15,360,416.
					Form <b>990-PF</b> (2019)

04-6056367 Page 3

Part IV Capital Gains	and Losses fo	r Tax on Inves	stment	Income						
(a) List and describe 2-story brick wa	the kind(s) of proper arehouse; or commor	ty sold (for example, 1 stock, 200 shs. ML	, real esta C Co.)	te,	1. b	low ac - Purch - Dona	nase ition	(mo., d		(d) Date sold (mo., day, yr.)
1a SALE OF INVEST	MENT						P 7	/ARI	OUS	12/31/19
b SALE OF INVEST	MENT			-	ļ		P 7	/ARI	OUS	12/31/19
c CAPITAL GAINS	<u>DIVIDENDS</u>				ļ					
<u>d</u>	<del>-</del>				—					
е	<del></del>	<del></del>			٠.,					
(e) Gross sales price	(f) Depreciation (or allowa		plus e	st or other basis expense of sale					ain or (loss s (f) minus	(g))
a 1,842,706.	<u> </u>			<u>1,450,48</u>	31.					392,225.
b 14,023.				14,71	L <b>5</b> .			_		-692.
c 66,952.						_				66,952
<u>d</u>										
Complete only for assets shown	a agus us colums (h)	and award by the fo	oundation	on 12/31/60				Carao (C	ol (b) gov	
Complete only for assets shown							col.	(k), but r	ol. (h) gair not less tha	in -0-) <b>or</b>
(i) FMV as of 12/31/69	(j) Adjusted as of 12/3			cess of col. (ı) col. (ı), ıf any				Losses	(from col.	(h)) ´
				(,,, )		-				392,225.
<u>a</u> b										-692
		-								66,952
<u>c</u> d		-								00/332
ė								_		
	( 16	ania alaa aatar in Di	ort L lina	7	7		_			
2 Capital gain net income or (net ca	noital loss)	gain, also enter in Pa (loss), enter -0- in P	arti, iire Parti line	<i>,</i> 7		2				458,485
, ,	•			•	ر ا (	Î				
3 Net short-term capital gain or (logifigain, also enter in Part I, line 8,		10115 1222(3) and (6)	).		٦					
If (loss), enter -0- in Part I, line 8  Part V Qualification U					<u> </u>	3			N/A	Δ
Was the foundation liable for the sec f "Yes," the foundation doesn't quali					rıod?					Yes X No
1 Enter the appropriate amount in					entries	5.				
(a) Base period years Calendar year (or tax year beginni	Advicto	(b) d qualifying distribut		Net value of no	(c)		use assets		Dıstrı (col. (b) dı	(d) bution ratio vided by col. (c))
2018	<u> </u>	1,034,	354.		17	, 05	6,487		· · ·	.060643
2017		973,					4,248			.056118
2016		934,					3,241			.057561
2015		942,	398.		16	,49	2,201			.057142
2014		1,015,	<u> 127.</u>		17	<u>, 43</u>	<u>7,968</u>	•		.058214
2 Total of line 1, column (d)								2		.289678
3 Average distribution ratio for the the foundation has been in existe			e 2 by 5.	0, or by the numb	er of	years		3		.057936
									1	7,346,947
4 Enter the net value of noncharital	DIE-USE ASSEIS FOR ZU	19 ITOTII PAIT X, IIITE 3	)					4		
5 Multiply line 4 by line 3	Multiply line 4 by line 3					5	_	1,005,013		
6 Enter 1% of net investment incor	Enter 1% of net investment income (1% of Part I, line 27b)					6		8,379.		
7 Add lines 5 and 6	Add lines 5 and 6				7		1,013,392.			
	Enter qualifying distributions from Part XII, line 4						8		886,674.	
If line 8 is equal to or greater that	n line 7, check the bo	x in Part VI, line 1b, a	and comp	lete that part usin	ng a 1	% tax r	ate.			
See the Part VI instructions	<u> </u>	<del></del>					·			Form <b>990-PF</b> (2019

ASSOCIATION FOR THE RELIEF OF AGED WOMEN

orm	n 990-PF (2019) OF NEW BEDFORD							<u>6056</u>			Page 4
Pа	art VI Excise Tax Based on Investment Income (Section 4940(	(a), <sup>,</sup>	4940(	b), 49	40(e),	or 49	948	- see	instru	ıctio	ns)
1a	Exempt operating foundations described in section 4940(d)(2), check here   and enter	er "N/	A" on lin	e 1.	)						
	Date of ruling or determination letter: (attach copy of letter if necess				ıs)						
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here				· }		1		1	6,7	58.
	of Part I, line 27b				1					71.7	
С	All other domestic foundations enter 2% of line 27b Exempt foreign organizations, enter 4% o	of Pa	rt I, line	12, col.	(b)						
	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only, other						2				0.
3	Add lines 1 and 2						3		1	6,7	58.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; other	ers, e	nter -0-	)			4				0.
5	Tax based on investment income Subtract line 4 from line 3. If zero or less, enter -0-					Γ	5		1	6,7	58.
6	Credits/Payments:							***************************************		. 11.4	
a		6a		2	26,2	50.					
		6b				0.	艦				
		6c				0.					
		6d				0.					
	Total credits and payments. Add lines 6a through 6d						7		2	6,2	50.
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	ned					8				0.
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed					▶ [	9				
10	Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid						10			9,4	92.
-	Enter the amount of line 10 to be: Credited to 2020 estimated tax		9,4	92.	Refunde	ı▶	11				0.
	art VII-AT Statements Regarding Activities				-						
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislati	tion o	or did it p	participa	te or inte	rvene	ın		調理	Yes	No
	any political campaign?								1a		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes	s? Se	e the in:	structio	ns for the	defini	tion		1b		Х
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of a								1111	Film	
	distributed by the foundation in connection with the activities.								쮎	(無)	
c	Did the foundation file Form 1120-POL for this year?								1c		X
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the ye	ear:							舞猫	1111	
	(1) On the foundation. ▶ \$ 0. (2) On foundation managers. ▶					0.			趣品		
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure			ed on fo	undation					無無	
	managers ▶\$ 0.		•								
2	Has the foundation engaged in any activities that have not previously been reported to the IRS3	37							2		X
	If "Yes," attach a detailed description of the activities.								灌溉		
3	Has the foundation made any changes, not previously reported to the IRS, in its governing inst	strum	ent, artı	cles of n	ncorpora	tion, or					
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes								3		X
4a	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_		
	Was there a liquidation, termination, dissolution, or substantial contraction during the year?								5		Х
	If "Yes," attach the statement required by General Instruction T								<b>神</b>	出土	
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied eithe	er:							鱧	此	
	By language in the governing instrument, or										
	By state legislation that effectively amends the governing instrument so that no mandatory d	direct	tions tha	t conflic	t with the	e state	law				
	remain in the governing instrument?								6	Х	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete	te Pa	rt II, col.	(c), and	Part XV	,			7	X	
									4		HIN
8a	Enter the states to which the foundation reports or with which it is registered. See instructions.	s. <b>&gt;</b>									
	MA										
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attor	orney	General	(or des	ignate)					壨	
•	of each state as required by General Instruction G? If "No," attach explanation	•			•				8b	X	
9	Is the foundation claiming status as a private operating foundation within the meaning of section	ion 4	942(j)(3	) or 494	2(j)(5) fo	or caler	ıdar				
	year 2019 or the tax year beginning in 2019? See the instructions for Part XIV. If "Yes," comple								9		X
4.0	Did any persons become substantial contributors during the tay year? It was a separate a								10		x

Form **990-PF** (2019)

Pa	rt.VII-A¹ Statements Regarding Activities (continued)			
		<b>1188</b>	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?			ĺ
	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 ► WWW.ARAWOFNB.ORG			
14	The books are in care of ▶ CLARE HEALY FOLEY  Telephone no. ▶ 508-7			
	Located at ► 432 COUNTY STREET, NEW BEDFORD, MA ZIP+4 ►0.	2740		<del></del>
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here	3.7	/ <b>3</b> P	•
	and enter the amount of tax-exempt interest received or accrued during the year		/A Yes	No
16	At any time during calendar year 2019, did the foundation have an interest in or a signature or other authority over a bank,	16	162	X
	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	####	1.9hr#	
	foreign country			
Pa	rt,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.	771	Yes	No
1a	During the year, did the foundation (either directly or indirectly):		#4	
	(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)			
	a disqualified person? Yes X No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?  Yes X No			
	(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)?			
	(6) Agree to pay money or property to a government official? (Exception Check "No"			
	if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.)  Yes X No			
	termination of government service, if terminating within 90 days.)  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	the par	PROPERTY.
	Organizations relying on a current notice regarding disaster assistance, check here	細巣	PILLE .	200
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	I		
	before the first day of the tax year beginning in 2019?	1c		X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation	<b>##</b>	##	難謎
	defined in section 4942(j)(3) or 4942(j)(5)):	羅		
а	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 $\blacktriangleright$			
b	Are there any years listed in 2a for which the foundation is <b>not</b> 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		<b>#</b>	Di. 21.3
	statement - see instructions.)  N/A	2b	hder da	i Name i
C	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			
20	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time		灦	
Ja	during the year?  Yes X No		躙	豐
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		<b>16</b> 19	
J	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		X
	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that	選盟	SAME.	
	had not been removed from jeopardy before the first day of the tax year beginning in 2019?	4b		_X
	Fo	rm <b>990</b>	)-PF	(2019)

Page 6

Fartiviles for which is	form 4/20 May be	<b>Requirea</b> (contin	lued)	
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	1 4945(e))?	Y	es 🗶 No 🔓	
(2) Influence the outcome of any specific public election (see section 4955); o	r to carry on, directly or indir			
any voter registration drive?	_		es X No	
(3) Provide a grant to an individual for travel, study, or other similar purposes		Y	es X No	
(4) Provide a grant to an organization other than a charitable, etc., organization	n described in section		<b>.</b>	
4945(d)(4)(A)? See instructions			es 🗶 No 🔋	
(5) Provide for any purpose other than religious, charitable, scientific, literary, the prevention of cruelty to children or animals?	or educational purposes, or		es X No	
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify unc	for the eventions described		ן מאובבו ציי	
section 53.4945 or in a current notice regarding disaster assistance? See instru	·	iii negulalions	N/A	Samu Gaeda - Sancis 56
Organizations relying on a current notice regarding disaster assistance, check h				THE SECTOR WITHOUT
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fr		uned		
expenditure responsibility for the grant?		. —	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 j	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?			6b X
If "Yes" to 6b, file Form 8870.			ì	
7a At any time during the tax year, was the foundation a party to a prohibited tax s	helter transaction?	Y	es 🗶 No 💄	
<b>b</b> If "Yes," did the foundation receive any proceeds or have any net income attribu	table to the transaction?		N/A	7b
8 Is the foundation subject to the section 4960 tax on payment(s) of more than \$	1,000,000 in remuneration o			
excess parachute payment(s) during the year?			es X No	
Part VIII  Information About Officers, Directors, Trustoral Paid Employees, and Contractors	es, Foundation Ma	anagers, Highly	У	
List all officers, directors, trustees, and foundation managers and the	neir compensation			
List an officers, an estars, a ustees, and roundation managers and t	•	(c) Compensation	(d) Contributions to employee benefit plans	(e) Expense
(a) Name and address	(b) Title, and average hours per week devoted to position	(If not paid,	and deterred	(e) Expense account, other allowances
	to position	enter -0-)	compensation	allowalices
SEE STATEMENT 11		124,636.	598.	0.
			3,30,	
		L		
Compensation of five highest-paid employees (other than those inc		enter "NONE."	(d) Contributions to	(a) Evange
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week	(c) Compensation	(d) Contributions to employee benefit plans and deferred	(e) Expense account, other
	devoted to position		compensation	allowances
NONE				
-	<del></del>			
			-	
-				
otal number of other employees paid over \$50,000			<b>—</b>	0
			Form	<b>990-PF</b> (2019)

Form **990-PF** (2019)

0.

Total. Add lines 1 through 3

Form 990-PF (2019)

OF NEW BEDFORD

04-6056367 Page 8

P	art X:5 Minimum Investment Return (All domestic foundations must complete this part. Foreign fou	ndatior	ns, see instructions)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:	- H	
a	Average monthly fair market value of securities	1a	17,546,304.
b		1b	17,546,304. 765,218.
C		1c	
d	Total (add lines 1a, b, and c)	1d	18,311,522.
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	18,311,522.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions) STMT 12	4	964,575.
5	Net value of noncharitable-use assets Subtract line 4 from line 3 Enter here and on Part V, line 4	5	<u> 17,346,947.</u>
6	Minimum investment return Enter 5% of line 5	6	867,347.
P	art XI F Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations are	nd certa	n
_	foreign organizations, check here and do not complete this part.)		
1	Minimum investment return from Part X, line 6	1	<u>867,347.</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.)	St. 14	
C	Add lines 2a and 2b	2c	16,758.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	<u>850,589.</u>
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	850,589.
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	850,589.
P	art XIIi Qualifying Distributions (see instructions)		•
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:	J	
а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	886,674.
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	006 654
4	Qualifying distributions Add lines 1a through 3b. Enter here and on Part V, line 8; and Part XIII, line 4	4	886,674.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		^
	income. Enter 1% of Part I, line 27b	5	0.
6	Adjusted qualifying distributions Subtract line 5 from line 4	6	886,674.
	Note: The amount on line 6 will be used in Part V. column (h), in subsequent years when calculating whether the foundation is	aualities	for the section

Form **990-PF** (2019)

4940(e) reduction of tax in those years.

04-6056367

Part XIII Undistribut	ted Income (see ins	structions)			
		(a) Corpus	(b) Years prior to 2018	(c) 2018	( <b>d)</b> 2019
1 Distributable amount for 201	9 from Part XI,	OSIPES	100.0 p.10. to 20.0		
line 7					850,589.
2 Undistributed income, if any, as of	f the end of 2019			0.	
a Enter amount for 2018 only		<del></del>	<u></u>	U •	
<b>b</b> Total for prior years:		\	0.		
3 Excess distributions carryove	ar if any to 2019:		\ <del>.</del>		
a From 2014	159,501.		\		
<b>b</b> From 2015	136,990.		\		
c From 2016	145,468.		\		
d From 2017	129,295.		\		
e From 2018	210,298.				
f Total of lines 3a through e		781,552.			
4 Qualifying distributions for 20	019 from			/	
	886,674.		\ /		
a Applied to 2018, but not mor			\ /	0.	
<b>b</b> Applied to undistributed inco			X		
years (Election required - see	· · · · · · · · · · · · · · · · · · ·		/\ 0.		
c Treated as distributions out of					
(Election required - see instru	uctions)	0.			
d Applied to 2019 distributable	amount				<u>850,589.</u>
e Remaining amount distribute	d out of corpus	36,085.	/		
5 Excess distributions carryover app (If an amount appears in column (or must be shown in column (a))		o⁄.			0.
6 Enter the net total of each coindicated below:	olumn as				
a Corpus Add lines 3f, 4c, and 4e 5	Subtract line 5	817,637.		\	
b Prior years' undistributed inc					
line 4b from line 2b			0.	\	
c Enter the amount of prior year	ars'			\	
undistributed income for whi deficiency has been issued, of the section 4942(a) tax has be assessed	or on which		0.		
d Subtract line 6c from line 6b	Taxable				
amount - see instructions			0.	\	
e Undistributed income for 201	18 Subtract line			\	
4a from line 2a. Taxable amo	unt - see instr.			<u></u>	
f Undistributed income for 201	19. Subtract			\	
lines 4d and 5 from line 1. Th	nis amount must			\	
be distributed in 2020	/				0.
7 Amounts treated as distribut					\
corpus to satisfy requiremen					
section 170(b)(1)(F) or 4942		•			\
may be required - see instruc		0.			
8 Excess distributions carryove		150 501			\
not applied on line 5 or line 7		159,501.			<del></del>
9 Excess distributions carryov		CEO 136			\
Subtract lines 7 and 8 from li	пе ба	658,136.			<del></del>
10 Analysis of line 9:	136 000				\
a Excess from 2015	136,990.				\
b Excess from 2016	145,468.				\
c Excess from 2017	129,295.				\
d Excess from 2018	210,298. 36,085.			-	\
e Excess from 2019	30,003.				<del></del>

Part XIV Private Operating F	oundations (see in	structions and Part V	I-A, question 9)		
1 a If the foundation has received a ruling o	r determination letter tha	t it is a private operating			
foundation, and the ruling is effective for	r 2019, enter the date of	the ruling	<b>▶</b> <u>0</u>	2/14/86	
<b>b</b> Check box to indicate whether the found	ation is a private operatii	ng foundation described		4942(j)(3) or 49	942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years		ļ ,, <b>_</b> , ,
income from Part I or the minimum	(a) 2019	(b) 2018	(c) 2017	(d) 2016	(e) Total
investment return from Part X for	À				
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					_
3 Complete 3a, b, or c for the alternative test relied upon:					
a "Assets" alternative test - enter:	1				
(1) Value of all assets	1				<b>I</b>
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test - enter			· <u> </u>		
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, 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 Info			if the foundat	ion had \$5,000 or mo	ore in assets
at any time during t	he year-see inst	ructions.)		<u></u>	
1 Information Regarding Foundation	n Managers:				
a List any managers of the foundation wh year (but only if they have contributed in			tributions received by	the foundation before the clo	se of any tax
NONE					
b List any managers of the foundation who ther entity) of which the foundation has			(or an equally large p	portion of the ownership of a p	artnership or
NONE					
2 Information Regarding Contributi					
Check here ► X if the foundation of the foundation makes gifts, grants, etc.,					uests for funds. If
a The name, address, and telephone num	ber or email address of the	ne person to whom appli	cations should be ad	dressed:	
<b>b</b> The form in which applications should b	e submitted and informa	tion and materials they s	hould include:		
c Any submission deadlines:					
d Any restrictions or limitations on awards	s, such as by geographic	al areas, charitable fields	, kınds of institutions	, or other factors:	

04-6056367 Page 11

Part XV Supplementary Information (continued) Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, show any relationship to Recipient Foundation Purpose of grant or Amount status of contribution any foundation manager Name and address (home or business) recipient or substantial contributor a Paid during the year ACUSHNET COUNCIL ON AGING TOWN AGENCY ELDER SERVICES 59 1/2 S MAIN ST ACUSHNET, MA 02743 29,510. DARTMOUTH COUNCIL ON AGING TOWN AGENCY ELDER SERVICES 628 DARTMOUTH STREET 22,615. S DARTMOUTH, MA 02748 FAIRHAVEN COUNCIL ON AGING TOWN AGENCY ELDER SERVICES 229 HUTTLESTON AVENUE 48,978. FAIRHAVEN, MA 027191956 GREATER NEW BEDFORD COMMUNITY HEALTH PUBLIC CHARITY ELDER SERVICES CENTER, INC. 874 PURCHASE STREET -20,740. NEW BEDFORD, MA 027406232 PUBLIC CHARITY ELDER SERVICES IMMIGRANT'S ASSISTANCE CENTER, INC. 58 CRAPO STREET NEW BEDFORD, MA 02740 4.438. SEE CONTINUATION SHEET(S) ➤ 3a 541,986, Total b Approved for future payment NONE Total

OF NEW BEDFORD

<u>04-6056367</u>

Part XV Supplementary Information 3 Grants and Contributions Paid During the Y			<u> </u>	
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient	oonanoanon	
NTER-CHURCH COUNCIL		PUBLIC CHARITY	ELDER SERVICES	
412 COUNTY STREET	ĺ			25.1
NEW BEDFORD, MA 02740				
NEW BEDFORD COUNCIL ON AGING		TOWN AGENCY	ELDER SERVICES	
181 HILLMAN ST, BLDG 9				
NEW BEDFORD MA 02740				5,25
OTHER INDIVIDUALS		INDIVIDUALS		
SEE ATTACHED LIST				388,33
WESTPORT COUNCIL ON AGING		TOWN AGENCY	ELDER SERVICES	
75 REED ROAD		TOWN MODING!	DESCRIPTION OF THE PROPERTY OF	
WESTPORT, MA 02790				39,86
COMMUNITY NURSE HOME CARE		PUBLIC CHARITY	ELDER SERVICES	
52 CENTER ST				
FAIRHAVEN, MA 02719				-1,39
Total from continuation sheets				457.18

#### Part XVI-A Analysis of Income-Producing Activities

Enter gross	amounts unless otherwise indicated.	Unrelated	business income		ded by section 512, 513, or 514	(e)
	n service revenue:	(a) Business code	( <b>b)</b> Amount	(C) Exclu- sion code	(d) Amount	Related or exempt function income
		1			· · <del>- · · ·</del>	
		<del>                                     </del>	<u> </u>	-		
_		1 1				<del></del>
a		<del>  -  </del>				
е						
f						
g Fees	and contracts from government agencies		<del> </del>			
2 Membe	rship dues and assessments					
3 Interest	on savings and temporary cash	1				
ınvestm	ents					
4 Dividen	ds and interest from securities			14		415,388.
5 Net rent	al income or (loss) from real estate:					
	t-financed property					
	debt-financed property		<u> </u>			
	al income or (loss) from personal				<u> </u>	
		1				
property						
	vestment income					
	(loss) from sales of assets other	,		10		450 405
than inv	•			18		458,485.
	ome or (loss) from special events					
10 Gross p	rofit or (loss) from sales of inventory				<del></del>	
11 Other re	venue:	1				
a						
		j i				
_		1 1				
·						
12 Subtota	I. Add columns (b), (d), and (e)		0.		0.	873,873.
	add line 12, columns (b), (d), and (e)	<u> </u>	•	L	13 _	
					10_	0/3/0/36
	heet in line 13 instructions to verify calculations.)					
Part X	VI-B Relationship of Activities t	to the Acco	mplishment of Ex	emp	t Purposes	
Line No. ▼	Explain below how each activity for which inco the foundation's exempt purposes (other than			contrit	outed importantly to the accor	nplishment of
	PROCEEDS FROM SALE OF			SH	FINANCIAL ASS	TSTANCE
4	DIVEDENDS AND INTEREST	FPOM CE	CITETTER TO	FII	PNICH FINANCI	AL ASSISTANCE
4	DIVEDENDS AND INTEREST	FROM SE	CORTITES TO	<u> F U</u>	VATOR LINUACI	WI WOSIDIUMCE
					· ·	
			<del> </del>			
			<del></del>			
					<del></del>	
					<del></del>	<del></del>
					<del></del>	
			<del></del>		<del> </del>	<del></del>
		<del>_</del> -				

Form 991		EW BEDFORD	TUE L	CELLER OF	AGE	ED WOMEN	0.4 -	6056367	' Pa	ige 13
Part		egarding Transfe	ers to an	d Transaction	ons an	d Relations				igo 10
	Exempt Organ		cro to un	ia manoaoti	Jiio aii		inpo ilitar ito	·······································		
1 Did	the organization directly or ind		the following	with any other or	anization	described in sect	ion 501(c)		Yes	No
	her than section 501(c)(3) orga					. 400011004 111 0001				
	nsfers from the reporting found	•			allons					
		Jalion to a monunamane	exempt orga	amzanom or.				1a(1)		Х
	Cash								_	X
	Other assets							1a(2)		
	er transactions:	-hi						45/43		v
. ,	Sales of assets to a noncharita							1b(1)		X
٠,	Purchases of assets from a no	, -	anization					1b(2)	-	
	Rental of facilities, equipment,							1b(3)		X
٠,	Reimbursement arrangements	3						1b(4)	-	X
٠.	Loans or loan guarantees							1b(5)		X
٠,	Performance of services or m	•	_					1b( <u>6</u> )		X
	aring of facilities, equipment, ma	-						<u>1c</u>	<u> </u>	X
	ne answer to any of the above is								sets,	
	services given by the reporting t			less than fair mai	ket value	in any transaction	n or snaring arrange	ement, snow in		
	umn (d) the value of the goods,				-	1 (4)				
(a) Line n	o (b) Amount involved	(c) Name of no		exempt organization		(0) Description	n of transfers, transacti	ons, and sharing a	rangeme	ents
		-	N/A							
		ļ								
		-								
				<del></del>						
2a Ist	he foundation directly or indirec	ctly affiliated with, or relat	ted to, one o	r more tax-exemp	t organiza	tions described				
ın s	ection 501(c) (other than section	on 501(c)(3)) or in sectio	on 527?					Yes	X	] No
<b>b</b> If "\	es," complete the following sch	nedule.								
	(a) Name of or	ganization		(b) Type of organ	zation		(c) Description of r	elationship		
	N/A									
								_		
						-				
	Under penalties of perjury, I declare							May the IRS	discuss t	his
Sign	and belief, it is true, correct, and co	mplete Declaration of prepar	rer (other than t	taxpayer) is based on / /	all informat	tion of which prepare	r has any knowledge	return with the	e prepar	er
Here	Krstnary	probled		17/17/2	020	Presid	Cist	X Yes		No
	Signature of officer or truster	e		Date /		Title				
	Print/Type preparer's n	ame Pr	reparer's sig	nature	10	Date	Check if	PTIN		
			/· \		JUL	1 6 2020	self- employed			
Paid	PETER C. I	Lamb	elw	C.Cel	JUL	. 1 ~ 2020		P00365	719	
Prepa		RKE & LAMB,					Firm's EIN ▶ 0			
Use (		<i></i> /	• .							

Form **990-PF** (2019)

Phone no. 508-984-4800

Firm's address ► 300 UNION ST

NEW BEDFORD, MA 02740

FORM 990-PF	DIVIDENDS	AND INTER	EST I	FROM SECUR	ITIES S1	ATEMENT	1
SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDEND		(A) REVENUE PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTI NET INCO	
US TRUST	482,340.	66,95	2.	415,388.	415,388.		
TO PART I, LINE 4	482,340.	66,95	2.	415,388.	415,388.		
FORM 990-PF		LEGAL	FEE	5	នា	CATEMENT	2
DESCRIPTION		(A) EXPENSES PER BOOKS		(B) INVEST- I INCOME	(C) ADJUSTED NET INCOME	(D) CHARITAI PURPOSI	
LEGAL FEES		1,835.		0.		1,83	35.
TO FM 990-PF, PG 1, L	N 16A	1,835.		0.		1,83	35.
FORM 990-PF		ACCOUNTI	NG FI	EES	SI	ATEMENT	3
DESCRIPTION		(A) EXPENSES PER BOOKS		(B) INVEST- INCOME	(C) ADJUSTED NET INCOME	(D) CHARITAI PURPOSI	
ACCOUNTANTS		38,090.		13,331.		24,75	59.
TO FORM 990-PF, PG 1,	LN 16B	38,090.		13,331.		24,75	59.
FORM 990-PF	ОТ	HER PROFES	SION	AL FEES	SI	ATEMENT	4
DESCRIPTION		(A) EXPENSES PER BOOKS	NET MENT	(B) INVEST- I INCOME	(C) ADJUSTED NET INCOME	(D) CHARITAI PURPOSI	
US TRUST		95,066.		19,013.		76,05	53.
TO FORM 990-PF, PG 1,	LN 16C	95,066.	·	19,013.	· · · · · · · · · · · · · · · · · · ·	76,05	53.

FORM 990-PF	TAX	ES			STATEMENT	5
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVES MENT INCO		(C) ADJUSTED NET INCOM		
FEDERAL EXCISE TAX PAYROLL TAXES	16,835. 12,370.		0.		12,3	0. 70.
TO FORM 990-PF, PG 1, LN 18	29,205.		0.		12,3	70.
FORM 990-PF	OTHER E	XPENSES		11.00	STATEMENT	6
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVES MENT INCO		(C) ADJUSTED NET INCOM		
MISC ADMINISTRATIVE EXPENSE INSURANCE OUTREACH COST STRATEGIC PLANNING OFFICE SETUP	21,294. 3,975. 1,291. 18,170. 4,351.	3,6	0. 0. 0. 34.		21,2 3,9 1,2 14,5 4,3	75. 91. 36.
TO FORM 990-PF, PG 1, LN 23	49,081.	3,6	34.		45,4	47.
FORM 990-PF	CORPORAT	E STOCK			STATEMENT	7
DESCRIPTION			вос	OK VALUE	FAIR MARKE' VALUE	r
CORPORATE STOCK			12	2,361,211.	12,361,2	11.
TOTAL TO FORM 990-PF, PART I	I, LINE 10B	_	12	2,361,211.	12,361,2	11.

FORM 990-PF C	ORPORATE BONDS		STATEMENT 8
DESCRIPTION		BOOK VALUE	FAIR MARKET VALUE
CORPORATE BONDS		2,239,118.	2,239,118.
TOTAL TO FORM 990-PF, PART II, LI	NE 10C	2,239,118.	2,239,118.
FORM 990-PF DEPRECIATION OF ASS	ETS NOT HELD FOR	INVESTMENT	STATEMENT 9
DESCRIPTION	COST OR OTHER BASIS	ACCUMULATED DEPRECIATION	BOOK VALUE
COMPUTER COMPUTER EQUIPMENT TELEPHONE SYSTEM	1,470. 1,090. 2,802.	1,470. 1,090. 374.	0. 0. 2,428.
TOTAL TO FM 990-PF, PART II, LN 1	5,362.	2,934.	2,428.
FORM 990-PF	OTHER ASSETS		STATEMENT 10
DESCRIPTION	BEGINNING OF YR BOOK VALUE	END OF YEAR BOOK VALUE	FAIR MARKET VALUE
ACCRUED INVESTMENT INCOME PREPAID EXPENSES	27,373. 9,693.	22,373. 31,298.	22,373. 31,298.
TO FORM 990-PF, PART II, LINE 15	37,066.	53,671.	53,671.

FORM 990-PF PART VIII - LIST OF OFFICERS, DIRECTORS TRUSTEES AND FOUNDATION MANAGERS			STATI	EMENT 11	
NAME AND ADDRESS		TITLE AND AVRG HRS/WK		EMPLOYEE BEN PLAN CONTRIB	
CLARE HEALY FOLEY		EXECUTIVE DIREC	TOR 104,769.	0.	0.
GAIL BEATON		CLERK 4.00	0.	0.	0.
ROSEMARY SABER		VICE PRESIDENT 4.00	0.	0.	0.
JO-ANN BEAULIEU		DIRECTOR 4.00	0.	0.	0.
ROSEANNE O'CONNELI		DIRECTOR 2.00	0.	0.	0.
SHANNON BACHMAN		DIRECTOR 2.00	0.	0.	0.
DIANE LAFLAMME		DIRECTOR 4.00	0.	0.	0.
OLIVIA MELO		DIRECTOR 1.00	0.	0.	0.
ANN FOX		ASST CLERK 2.00	0.	0.	0.
MARY ELLIS		DIRECTOR 4.00	0.	0.	0.
SUSAN ROTHSCHILD		PRESIDENT 1.00	0.	0.	0.

ASSOCIATION FOR THE RELIE	F OF AGED WOMEN		04-6	056367
GRETCHEN WHIPPLE	DIRECTOR 1.00	0.	0.	0.
DEBORAH BROOKE	DIRECTOR 4.00	0.	0.	0.
MARIA PINARRETA	DIRECTOR 1.00	0.	0.	0.
JEANNETTE DOYLE	TREASURER 2.00	0.	0.	0.
JANE STANKIEWICZ	DIRECTOR 2.00	0.	0.	0.
ANGELA NATHO	DIRECTOR 1.00	0.	0.	0.
CHERYL RANDALL MACH	EXECUTIVE DIR 40.00	ECTOR 19,867.	598.	0.
PAMELA MCKNIGHT	DIRECTOR 4.00	0.	0.	0.
TOTALS INCLUDED ON 990-PF,	PAGE 6, PART VIII	124,636.		0.

FORM 990-PF CASH DEEMED CHARITABLE EXPLANATION STATEMENT 12 PART X, LINE 4

\$964,575 IS DEEMED NECESSARY TO PAY BUDGETED EXPENSES AND DISBURSEMENTS.

20

Cost Of Bass Fw. Expense Basis Depreciation Accumulated Sect 19 Deduction Expense 0.  1,470.  2,802. 2,802. 2,560. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0	FORM 990-PF PAGE 1			3		Line	Unadjusted	Ы			· -	Beginning		Current Year	Ending
1,470.  1,470.  1,470.  2,802.  2,802.  2,802.  2,802.  2,802.  2,802.  2,802.  2,803.	Description Acquired Method Life o	Method Life o	Life .	0 = >	1			EXCI	Expense	Basis	Depreciation	Accumulated Depreciation	Sec 179 Expense	$\dashv$	Accumulated Depreciation
2,802. 2,802. 2,802. 2,500. 2,500. 2,500. 2,500. 2,500. 2,500. 374. 374. 377. 377. 377. 377. 377. 377	COMPUTER,	01/06/07 SL 5	വ 🍇	പ ഉള്ളുള്ളവ		16	1,			60000000000000000000000000000000000000	1,470.	1,470.		0.	1,470.
2,560.  2,560.  0,	07/17/19 SL 5	07/17/19 SL 5	χ <u>χ</u> υ	)∄ LΩ	*	16	2,				8			374.	374.
550.  0	**TOTALY \$900 PERPORTINE TOTALY \$900 PERPORTINE TOTAL \$900 PERPORTINE TOTALY \$900 PERPORTIN						5,362				5,362.	2,550,3		374	2,934
550.  9.02.  9.02.  9.02.  9.03.  9.0															
5.50. 0. 0. 2,560. 2,560. 0. 2,560. 0. 2,560. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0	CURRENT YEAR ACTIVITY									3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3					
	BEGINNING BALANCE						- 785			0	~ 0366	- 75%			2,560.
	ACOUTSITIONS THE RESERVED TO T						2,802			G (0)	2,802	0 # 4			3745
2 934.  2 934.  2 934.  2 934.  2 934.  2 934.  2 934.  2 934.  2 934.  3 94.	* DISPOSITIONS/RETIRED	`		,			0		,	. 0	0	0	?		0.
	ENDING BALANCE						5,362			10	5,362.	2,5608			2,934
	ENDING ACCUM DEPR					v			,			2,934.	,		_
	ENDING BOOK VALUE		1336886655880	1336886655880	1336886655880							2,428.			
	ONE CONTROL CO					š -	- Control of the cont	DE DESCRIPTION OF THE PROPERTY	,					1	
						28838888									
							-			1					
THE CHARLEST PARTY AND DESCRIPTION OF THE PAR															

\* ITC, Salvage, Bonus, Commercial Revitalization Deduction, GO Zone

#### **PAYMENTS FOR BENEFICIARIES**

PATIVIEN	115 FUR BENEFICIARIES	
A, D	New Bedford, MA	3,582 00
A, J	Westport, MA	3,914 00
A, C	Westport, MA	1,300 64
A, M	Acushnet, MA	2,420 68
A, I	Fairhaven, MA	5,680 32
A, C	Acushnet, MA	666 50
A, H	New Bedford, MA	306 00
A, J	Acushnet, MA	2,259 98
A, J	New Bedford, MA	28 00
A, S	New Bedford, MA	1,666 00
B, A	New Bedford, MA	597 50
B, J	New Bedford, MA	2,952 51
B, C	Fairhaven, MA	801 35
B, E	Acushnet, MA	737 61
B, P	New Bedford, MA	95 57
B, J	Fairhaven, MA	2,674 78
B, A	Fairhaven, MA	3,510 75
B. L	New Bedford, MA	6,050 50
B. L	Acushnet, MA	2,313 73
B, J	New Bedford, MA	150 00
B, D	Fairhaven, MA	2,415 23
B, J	New Bedford, MA	2,522 53
B, S	New Bedford, MA	1,194 60
B,P	Fairhaven, MA	685 84
C, M	New Bedford, MA	4,258 41
C, L	Acushnet, MA	1,780 74
C, D	Westport, MA	3,244 11
C.M	Westport, MA	2,050 32
C, J	New Bedford, MA	1,546 48
C, S	New Bedford, MA	4,925 56
C, L	New Bedford, MA	3,224 34
C, P	Fairhaven, MA	3,565 73
C, R	Westport, MA	593 22
C, L	New Bedford, MA	25 00
C, C	Acushnet, MA	50 00
C, C	Dartmouth, MA	1,110 36
C, J	New Bedford, MA	109 00
C, M	New Bedford, MA	3,150 00
C, F	Acushnet, MA	2,795 05
C, B	New Bedford, MA	472 88

C, M	New Bedford, MA	773 35
C, P	N Dartmouth, MA	867 30
C, A	New Bedford, MA	1,121 42
C, D	Westport, MA	717 23
D, M	N Dartmouth, MA	3,397 36
D,P	Fairhaven, MA	8,837 67
D, M	New Bedford, MA	2,793 00
D, L	New Bedford, MA	275 00
D, V	Fairhaven, MA	3,583 87
D, J	Westport, MA	2,599 87
D, C	Fairhaven, MA	3,500 <sup>(</sup> 55
D, S	New Bedford, MA	546 30
D, M	Fairhaven, MA	3,612 00
D, C	Fairhaven, MA	625 68
D, G	Fairhaven, MA	3,764 94
D, J	New Bedford, MA	691 63
D, L	N Dartmouth, MA	2,573 27
D, L	New Bedford, MA	2,596 04
E, S	Westport, MA	2,395 23
E, L	Acushnet, MA	3,022 70
F, D	New Bedford, MA	131 60
F, M	New Bedford, MA	769 67
F, R	New Bedford, MA	3,248 62
F, B	New Bedford, MA	2,359 56
F, E	Westport, MA	889 10
F, S	New Bedford, MA	103 90
F, L	Westport, MA	799 00
F, M	Fairhaven, MA	3,768 52
F, R	New Bedford, MA	600 00
F, L	New Bedford, MA	2,578 54
F, L	New Bedford, MA	3,772 75
F, M	N Dartmouth, MA	1,852 83
G, A	Westport, MA	2,695 76
G, B	Fairhaven, MA	3,244 62
G, M	Fairhaven, MA	3,123 62
G, V	Westport, MA	3,442 74
G, A	New Bedford, MA	348 78
G, R	New Bedford, MA	147 67
G, V	New Bedford, MA	564 72
G, D	Fairhaven, MA	3,305 74
G, P	Westport, MA	3,851 22

G, E	S Dartmouth, MA	825 35
H, I	New Bedford, MA	619 63
H, D	New Bedford, MA	4,152 48
H, L	Acushnet, MA	328 99
H, E	Fairhaven, MA	1,063 73
H, E	Fairhaven, MA	2,499 57
H, S	New Bedford, MA	300 00
H, M	Fairhaven, MA	5,659 75
I, L	New Bedford, MA	2,313 44
J, K	New Bedford, MA	4,500 00
J, S	Fairhaven, MA	118 30
L, R	New Bedford, MA	1,245 78
L, H	S Dartmouth, MA	590 00
L, R	Westport, MA	1,593 15
L, R	New Bedford, MA	749 00
L, E	Westport, MA	3,039 75
L, M	S Dartmouth, MA	2,489 17
L, V	Fairhaven, MA	5,326 06
L, O	New Bedford, MA	479 99
L, C	New Bedford, MA	959 74
L, M	New Bedford, MA	3,171 18
L, A	Westport, MA	2,568 76
L, J	New Bedford, MA	1,628 15
L, C	New Bedford, MA	3,702 10
M, M	New Bedford, MA	324 60
M, C	Dartmouth, MA	7,070 19
M, C	New Bedford, MA	2,304 00
M, T	New Bedford, MA	425 00
M, E	Acushnet, MA	1,709 35
M, J	Acushnet, MA	1,637 41
M, S	Dartmouth, MA	5,638 35
M, J	Fairhaven, MA	591 63
M, M	Fairhaven, MA	4,196 97
M, I	Westport, MA	1,999 76
M, J	N Dartmouth, MA	2,651 99
M, C	Acushnet, MA	2,568 76
M, S	New Bedford, MA	150 00
M, J	Acushnet, MA	7,813 92
м, н	S Dartmouth, MA	2,800 00
M, L	New Bedford, MA	281 98
N, P	New Bedford, MA	2,270 96

O, S	Westport, MA	752.20
O, P	New Bedford, MA	753 32
О, Р	New Bedford, MA	2,091 03
O, A	New Bedford, MA	56 00 4,795 16
O, M	New Bedford, MA	
P, L	Fairhaven, MA	611 35 2,984 62
Р, М	S Dartmouth, MA	471 16
P, B	S Dartmouth, MA	789 35
P, S	Acushnet, MA	155 00
P, J	New Bedford, MA	1,240 01
P, V	Fairhaven, MA	2,584 62
P, Z	New Bedford, MA	34 28
P, í	Fairhaven, MA	825 35
P, H	Fairhaven, MA	5,135 32
P, R	New Bedford, MA	5,243 10
P, D	N Dartmouth, MA	900 35
P, A	S Dartmouth, MA	1,764 53
Q, J	New Bedford, MA	819 47
R, H	S Dartmouth, MA	1,198 35
R, E	New Bedford, MA	756 52
R, M	Westport, MA	1,665 92
R, A	S Dartmouth, MA	380 00
R, D	Westport, MA	3,244 11
R, L	Westport, MA	7,063 66
R, K	N Dartmouth, MA	108 60
R, R	S Dartmouth, MA	2,713 72
R, M	New Bedford, MA	649 55
R, A	New Bedford, MA	591 63
R, A	New Bedford, MA	2,803 12
R, B	New Bedford, MA	1,040 63
R, C	New Bedford, MA	1,828 00
R, A	S Dartmouth, MA	1,142 00
R, Z	New Bedford, MA	1,226 20
R, B	N Dartmouth, MA	103 90
R, M	Westport, MA	461 47
S, J	New Bedford, MA	2,722 37
S, J	Fairhaven, MA	150 00
S, M	Fairhaven, MA	7,759 10
S, J	Fairhaven, MA	8,757 30
S, M	New Bedford, MA	187 00
S, M	New Bedford, MA	1,830 43

S, A	New Bedford, MA	3,321 59
s, c	Acushnet, MA	1,435 38
S, L	Fairhaven, MA	3,259 97
S, D	Acushnet, MA	830 69
S, I	Acushnet, MA	185 94
S, R	New Bedford, MA	2,111 86
S, A	Westport, MA	825 35
S, E	New Bedford, MA	280 00
S, S	S Dartmouth, MA	1,450 00
S, B	Westport, MA	3,728 16
S, L	New Bedford, MA	395 48
S, R	New Bedford, MA	625 68
S, D	Fairhaven, MA	348 91
T, M	Acushnet, MA	470 00
T, P	Fairhaven, MA	1,637 25
T, J	New Bedford, MA	3,356 52
V, R	Fairhaven, MA	6,178 54
V, N	Dartmouth, MA	4,093 56
V, G	Acushnet, MA	2,526 86
V, K	Westport, MA	2,568 76
V, P	New Bedford, MA	2,453 41
W, T	Westport, MA	825 35
Y, T	Westport, MA	106 95
Total PA	YMENTS FOR BENEFICIARI	388,333 94