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2020

OMB No. 1545-0052

## **Return of Private Foundation**

Department of the Treasury Internal Revenue Service

Form 990-PF

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 <u>www.irs.gov/Form990PF</u> for instructions and the latest information.

Open to Public Inspection

		ndar year 2020, or tax year beginning 01-01-20	)20 , aı	nd er	nding 12-31-		
CA	MBRID	Indation GE TRUST CHARITABLE FOUNDATION				entification numbe	er
		LLESLEY BANK CHARITABLE FDN INC	In the		45-4182909		
		l street (or P.O. box number if mail is not delivered to street address) CHARD ROAD	Room/suite		<b>B</b> Telephone nu	mber (see instructio	ns)
City	or town	, state or province, country, and ZIP or foreign postal code			(617) 520-5543	3	
		n, state of province, country, and ZIP of foreign postal code N, MA 01803			<b>C</b> If exemption	application is pendir	ng, check here
G Ch	eck al	I that apply:   Initial return   Initial return of a	former public charity		<b>D 1.</b> Foreign or	ganizations, check h	ere
		☐ Final return ☐ Amended return				<sup>-</sup> ganizations meeting k here and attach co	
		✓ Address change Name change			E If private for	undation status was	terminated
		pe of organization: $\square$ Section 501(c)(3) exempt private in 4947(a)(1) nonexempt charitable trust $\square$ Other taxable	oundation e private foundation		under sectio	n 507(b)(1)(A), che	ck here 🕨 느
			Cash 🗹 Accru	اد	F If the found:	ation is in a 60-mont	h termination
of '	year (f	rom Part II, col. (c), ▶\$ 4,688,572		u i		n 507(b)(1)(B), chec	
Pa	rt I	Analysis of Revenue and Expenses (The total		Π			(d) Disbursements
		of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions).)	(a) Revenue and expenses per books	(b)	Net investment income	(c) Adjusted net income	for charitable purposes (cash basis only)
	1	Contributions, gifts, grants, etc., received (attach schedule)	100,155				
	2	Check ▶ ☐ if the foundation is <b>not</b> required to attach					
	3	Sch. B Interest on savings and temporary cash investments					
Reversie	4	Dividends and interest from securities	75,682		75,682		
	5а	Gross rents			,		
	ь	Net rental income or (loss)					
	6a	Net gain or (loss) from sale of assets not on line 10	93,794				
	b	Gross sales price for all assets on line 6a 123,364			123,364		
	7 8	Capital gain net income (from Part IV, line 2)			123,304		
	9	Income modifications					
	10a	Gross sales less returns and allowances					
	b	Less: Cost of goods sold					
	С	Gross profit or (loss) (attach schedule)					
	11	Other income (attach schedule)	4,962		45		
	12	Total. Add lines 1 through 11	274,593		199,091		
	13	Compensation of officers, directors, trustees, etc.	2,500		0		1
ıΛ	14 15	Other employee salaries and wages					
ıse	16a	Legal fees (attach schedule)	3,125		0		3,12
<u>pe</u>	b	Accounting fees (attach schedule)	1,550		0		1,55
Administrative Expenses	С	Other professional fees (attach schedule)					
tive	17	Interest					
stra	18	Taxes (attach schedule) (see instructions)	2,500		0		
Ξ	19	Depreciation (attach schedule) and depletion					
Ð	20	Occupancy					
ב ב	21	Travel, conferences, and meetings					
ਰ	22	Printing and publications	<b>06-1</b> 25		0		3
Operating and	23 24	Total operating and administrative expenses.	<b>%</b> 35		0		3
era	<b>-4</b>	Add lines 13 through 23	9,710		0		4,71
o	25	Contributions, gifts, grants paid	163,390				158,89
	26	Total expenses and disbursements. Add lines 24 and 25	173,100		0		163,60
	27	Subtract line 26 from line 12:	173,100				103,60
	а	Excess of revenue over expenses and					
	b	disbursements  Net investment income (if negative, enter -0-)	101,493		199,091		
	c	Adjusted net income (if negative, enter -0-)			133,031		
or		work Reduction Act Notice, see instructions.		Щ,	Cat No. 11280	<u> </u>	 rm <b>990-PF</b> (2020

For	m 990-	PF (2020)																						Pa	age <b>2</b>
Pa	rt II	<b>Balance Sheets</b>		ttached nould b														ning of s Book Va		(1	<b>b)</b> Book		End of	 air Market V	 /alue
	1	Cash—non-interest	st-be			_		_									. ,		8,309	<del></del>			,202		9,202
	2	Savings and tempo	orar	y cas	h ir	nves	stmer	ıts								. [			14,337			144	,504	14	14,504
	3	Accounts receivable	ole 🕨	·					_																
		Less: allowance for	or do	oubtfu	ul ac	ccol	ınts 🖡	<b>-</b> _																	
	4	Pledges receivable	e 🏲 ု																						
		Less: allowance for	or do	oubtfu	ul ac	ccol	unts 🖡	<b>-</b>																	
	5	Grants receivable .														. [									
	6	Receivables due fro	rom	office	ers,	dire	ectors	s, tr	uste	es, a	and	oth	er												
		disqualified persons	ns (a	attach	ı sc	hed	ule) (	see	ins	truct	ion	s) .				.									
	7	Other notes and loa	oans	rece	ival	ble (	(attac	:h s	chec	dule)	▶					_									
		Less: allowance for	or do	oubtfu	ul ac	ccol	ınts 🖡	<b>-</b> _																	
Assets	8	Inventories for sale	le or	use												. [									
	9	Prepaid expenses a	and	defe	rrec	d ch	arges									.									
As	10a	Investments—U.S.	. an	d stal	te g	jove	rnme	ent c	blig	atio	ns (	(atta	ach	sch	edul	le)									
	ь	Investments—corpo	pora	te sto	ock	(att	:ach s	che	dule	e)						.		5,2	206,883	9		4,534	,866	4,53	34,866
	c	Investments—corpo	pora	te bo	nds	s (at	tach	sch	edul	e)						.									
	11	Investments—land,	d, bı	uildine	gs,	and	equi	pme	ent:	basi	s 🕨	•													
		Less: accumulated																							
	12	Investments-mort	rtga	ge loa	ans											- T									
	13	Investments—other														- ⊢									
	14	Land, buildings, and	nd e	quipr	ner	nt: b	asis <b>l</b>	<b>•</b>																	
		Less: accumulated												_											
	15	Other assets (descr														_									
	16	Total assets (to be													•	F									
		instructions. Also, s	, see	page	e 1,	iter	m I)											5,2	229,529			4,688	,572	4,68	88,572
	17	Accounts payable a	and	accrı	ued	exr	 oense	s .	_	_				_	_	. +									
	18	Grants payable																							
es	19	Deferred revenue .														⊢									
Liabilities	20	Loans from officers																							
abi	21	Mortgages and othe														⊢							-		
	22	Other liabilities (de														L							-		
	23	Total liabilities(ad														- ⊢			0				0		
		<u>`</u>																					-		
Ses		Foundations that							, ch	eck	he	re l		Ш	l										
ä		and complete line		•	-																				
Bal	24	Net assets without											•	•	•	.  -									
뒫	25	Net assets with dor													•	그ㅏ									
<b>Fund Balances</b>		Foundations that						ВА	SC	958	, cł	neck	c he	ere		lee									
٥		and complete line	nes :	26 th	irot	ugh	30.																		
	26	Capital stock, trust	st pri	incipa	ıl, o	r cu	ırrent	: fur	nds	•	•		•	٠	٠	· [			0				0		
Assets	27	Paid-in or capital su	surp	lus, o	ır la	ınd,	bldg.	., ar	nd e	quip	me	nt fu	und						0				0		
	28	Retained earnings,	•													<b>⊢</b>		5,2	229,529			4,688	,572		
Net	29	Total net assets o					•					•				<u> </u>			229,529	-		4,688	,572		
_	30	Total liabilities ar	and	net a	1556	ets/	/func	l ba	lan	ces	(se	e in:	stru	ıctic	ns)			5,2	229,529			4,688	,572		
Pa	rt III	<del>-</del>																							
1		al net assets or fund lear figure reported o							f ye	ar—l	Part	t II,	col	umr	n (a)	), line	29 (mu	ıst agre	ee with	end-	1			5,229,529	
2	•	er amount from Part :			•			•	_		•	•	•		•			· • •		· •	2			101,493	
3		er increases not inclu																	. <b>.</b> .	•	3			0	
4		lines 1, 2, and 3 .																			4			5,331,022	
5		reases not included in																	_ <b>@</b> j		5		_	642,450	

Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 29

4,688,572

Page **3** 

		the kind(s) of property sold (e.g., house; or common stock, 200 shs		(b) How acquire P—Purchase D—Donation	e   Da	(c) te acquired o., day, yr.)	(d) Date sold (mo., day, yr.)		
1 a V	WELLESLEY BANCORP INC.			D	2	012-01-25	2020-02-26		
<b>b</b> V	WELLESLEY BANCORP INC.			D	2	012-01-25	2020-02-26		
d									
e									
	<b>(e)</b> Gross sales price	<b>(f)</b> Depreciation allowed (or allowable)	Cost or	(g) other basis ense of sale		(h) Gain or (loss) (e) plus (f) minus (g)			
а	68,	890					68,890		
b	54,	474					54,474		
С									
d									
е									
		•							
	Complete only for assets s	howing gain in column (h) and ow	ned by the foundation	on 12/31/69		(	(I)		
	(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	Excess	<b>(k)</b> of col. (i) l. (j), if any	co	Gains (Col. ( I. (k), but not	h) gain minus less than -0-) <b>or</b> om col.(h))		
a							68,890		
b							54,474		
С									
d									
e									
		r (net capital loss) { in or (loss) as defined in sections : I, line 8, column (c) (see instructi	. , . ,	Part İ, line 7	} 2		123,364		
Part	V Qualification Un	nder Section 4940(e) for Re	duced Tax on Net	Investment	Income	;	_		
SECTI	_	ED ON DECEMBER 20, 2019							
	Reserved	, <b>_</b>					_		
	(a)	(b)	(c)			(d)			
	Reserved	Reserved	Reserved			Reserved			
<b>3</b> D	locamied .			<u> </u>					
				Ի	2				
	Reserved			· · · L	3				
<b>4</b> R	Reserved				4				
<b>5</b> R	Reserved			[	5				
<b>6</b> R	Reserved			[	6				
<b>7</b> R	Reserved				7				
				-	$\neg \neg$				
0	COCIVED I I I I I			$ abla$	8				
							000 DE (000)		

							<u>'</u>	age v
Par		ling Activities for Which	Form 4720 May Be	Required (continued	1)			
ia	During the year did the foundation			Yes	No			
	(1) Carry on propaganda, or otherv	vise attempt to influence legisl	ation (section 4945(e))?	Yes	✓ No	,		
	(2) Influence the outcome of any s	pecific public election (see sec	tion 4955); or to carry					
	on, directly or indirectly, any vo	ter registration drive?		· · · Yes	✓ No	,		
	(3) Provide a grant to an individual	for travel, study, or other sim	ilar purposes?		▼ No			
	(4) Provide a grant to an organization	ion other than a charitable, etc	c., organization described					
	in section 4945(d)(4)(A)? See i	nstructions		· · 🗌 Yes	✓ No	,		
	(5) Provide for any purpose other t	han religious, charitable, scien	tific, literary, or					
	educational purposes, or for the	prevention of cruelty to child	ren or animals?	· ·	✓ N			
b	If any answer is "Yes" to $5a(1)-(5)$ ,	did <b>any</b> of the transactions fa	ail to qualify under the ex	ceptions described in		<b>´</b>		
	Regulations section 53.4945 or in a	current notice regarding disas	ter assistance? See instr	ructions		5b		
	Organizations relying on a current r	otice regarding disaster assist	ance check here					
C	If the answer is "Yes" to question 5	a(4), does the foundation clair	n exemption from the					
	tax because it maintained expenditu	ure responsibility for the grant	?	· · 🔲 Yes	□ No			
	If "Yes," attach the statement requi	red by Regulations section 53.	4945-5(d).	□ 1es		'		
a	Did the foundation, during the year,	, receive any funds, directly or	indirectly, to pay premi	ums on				
b	Did the foundation, during the year,	, pay premiums, directly or inc	lirectly, on a personal be		. <b>✓</b> No	6b		No
	If "Yes" to 6b, file Form 8870.	, , ,	,, 1					
'a	At any time during the tax year, wa	s the foundation a party to a r	prohibited tax shelter tra	nsaction?				
	If "Yes", did the foundation receive			∟ res	✓ No	7b		
	Is the foundation subject to the sec				•	1.5		
	excess parachute payment during the	, , , ,						
		<u> </u>			✓ No		<u> </u>	<u> </u>
Par	and Contractors	Officers, Directors, Trust	tees, Foundation Ma	anagers, Hignly Paid	Emp	ioyees,		
1	List all officers, directors, truste							
	(a) Name and address	(b) Title, and average hours per week	(c) Compensation (If not paid, enter	(d) Contributions to employee benefit plans		<b>e)</b> Expen		
	. ,	devoted to position	· -0-)	deferred compensatio		other al	llowand	ces
ee A	Additional Data Table							
		]						
		1						
		1						
		1						
2	Compensation of five highest-pa	id employees (other than t	hose included on line :	1—see instructions). If	none,	enter "	NONE	."
				(d) Contributions to				
a) [	Name and address of each employee	paid (b) Title, and average hours per week	(c) Compensation	employee benefit		) Expens		
	more than \$50,000	devoted to position	(c) compensation	plans and deferred compensation		other all	owanc	es
ONE	=			Compensation				
ONE	=							
ota	I number of other employees paid ov	er \$50,000 <b></b>	<del></del>					- (
						orm <b>99</b> 0	N-DE	(2020

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Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid and Contractors (continued)	Employees,
3 Five highest-paid independent contractors for professional services (see instructions). If none, enter "NO	ONE".
(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
NONE	
Total number of others receiving over \$50,000 for professional services	0
Part IX-A Summary of Direct Charitable Activities	
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1	
2	
3	
4	
Part IX-B Summary of Program-Related Investments (see instructions)	
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.	Amount
1	
2	
<b>-</b>	
All other program-related investments. See instructions.	
3	4
	$\dashv$
Total. Add lines 1 through 3	0
	5 000 PE (2020)

4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see		
	instructions)	4	61,942
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	4,067,532
6	Minimum investment return. Enter 5% of line 5	6	203,377
	<b>Distributable Amount</b> (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations at <b>XI</b>	nd cei	rtain foreign
Pair	organizations check here   and do not complete this part.)		
1	Minimum investment return from Part X, line 6	1	203,377

2a

2b

2,767

2c

3

4

5

6

7

1a

1b

2

За 3h

4

5

2,767

200,610

200.610

200.610

163,600

163,600

163,600

Form 990-PF (2020)

Tax on investment income for 2020 from Part VI, line 5. . . . . .

Income tax for 2020. (This does not include the tax from Part VI.). . .

Distributable amount before adjustments. Subtract line 2c from line 1. . . . . . . . . . . . . . . .

Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26. . . . . . . . . . . .

Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4

Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for

Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1. . .

Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:

Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,

Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment

Qualifying Distributions (see instructions)

Amounts set aside for specific charitable projects that satisfy the:

the section 4940(e) reduction of tax in those years.

2a

3

4 5

6

1

2

3

4

5

b

Part XII

a From 2015. . . . . **b** From 2016. . . . .

e From 2019. . . . .

f Total of lines 3a through e. . . . . . . .

**d** Applied to 2020 distributable amount. . . . e Remaining amount distributed out of corpus

same amount must be shown in column (a).)

**5** Excess distributions carryover applied to 2020.

a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5

(If an amount appears in column (d), the

6 Enter the net total of each column as

**b** Prior years' undistributed income. Subtract line 4b from line 2b . . . . . . . . . . . . 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. . . . . . **d** Subtract line 6c from line 6b. Taxable amount —see instructions . . . . . . . . . . . . . . . . e Undistributed income for 2019. Subtract line 4a from line 2a. Taxable amount—see instructions . . . . . . . . f Undistributed income for 2021. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2020 . . . . . . 7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions) . . . . . . . . . 8 Excess distributions carryover from 2015 not applied on line 5 or line 7 (see instructions) . . .

9 Excess distributions carryover to 2021.

10 Analysis of line 9: a Excess from 2016. . . **b** Excess from 2017. . c Excess from 2018. . . .

d Excess from 2019. . . e Excess from 2020. . .

Subtract lines 7 and 8 from line 6a . . . .

indicated below:

4 Qualifying distributions for 2020 from Part XII, line 4: ▶ \$ a Applied to 2019, but not more than line 2a **b** Applied to undistributed income of prior years (Election required—see instructions). . . . . c Treated as distributions out of corpus (Election required—see instructions). . . . . . . . . .

c From 2017. . . . d From 2018. . . . . 200,610

163,600

37,010

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_	_	_	•	<u>.                                    </u>	١	_	_
1	ŀ	X	1	Ī	1	Ī	ĺ

Undistributed Income (see instructions)

				,		
						$\neg$
						- 1
						- 1
						- 1
				. N/T 1:	_	ı
9	amount	for 2020	from Par	t XI IIn	e /	- 1

Distributable amount for 2020 from Part XI, line 7

Undistributed income, if any, as of the end of 2020: a Enter amount for 2019 only. . . . . .

**b** Total for prior years: 20\_\_\_\_\_\_, 20\_\_\_\_\_\_ Excess distributions carryover, if any, to 2020:

7.720

26.769 66,160

63.639

(a)

Corpus

100.649

37,010

63,639

63,639

(b)

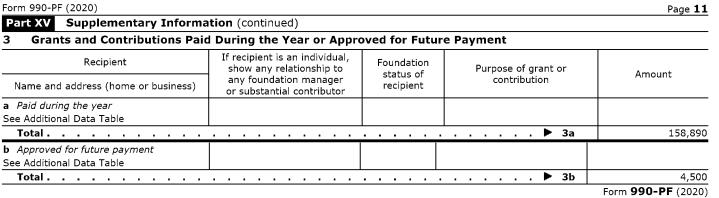
Years prior to 2019

(c)

2019

SEE ATTACHED STATEMENT

	Part XIV Private Operating Foun	idations (see instr	uctions and Part \	VII-A, question 9)								
1a	If the foundation has received a ruling or d foundation, and the ruling is effective for 2											
b	Check box to indicate whether the organiza	ation is a private oper	ating foundation des	scribed in section $\Box$	] 4942(j)(3) or $\Box$	4942(j)(5)						
2a	Enter the lesser of the adjusted net	Tax year		Prior 3 years		(e) Total						
	income from Part I or the minimum investment return from Part X for each	(a) 2020	<b>(b)</b> 2019	(c) 2018	(d) 2017	(e) Iotai						
	year listed											
b	85% of line 2a											
С	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											
е	Qualifying distributions made directly for active conduct of exempt activities.											
3	Subtract line 2d from line 2c Complete 3a, b, or c for the alternative test relied upon:											
а	"Assets" alternative test—enter:											
	(1) Value of all assets											
	(2) Value of assets qualifying under section 4942(j)(3)(B)(i)											
b	"Endowment" alternative test— enter 2/3											
	of minimum investment return shown in Part X, line 6 for each year listed.											
c	"Support" alternative test—enter:											
_	(1) Total support other than gross											
	investment income (interest,											
	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											
	Supplementary Information	n (Complete this	part only if the	foundation had	\$5.000 or more i	in						
Pa	assets at any time during t				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	··						
1	Information Regarding Foundation Ma List any managers of the foundation who ha	nagers:		al acutuibutiona vacci	and has the formulation	_						
а	before the close of any tax year (but only					1						
					,							
b	List any managers of the foundation who or ownership of a partnership or other entity				arge portion of the							
2	Information Regarding Contribution, G	Grant, Gift, Loan, Sc	holarship, etc., Pr	ograms:								
	Check here $ ightharpoonup$ if the foundation only ma	akes contributions to	oreselected charitab	ole organizations and	does not accept							
	unsolicited requests for funds. If the found	lation makes gifts, gr	ants, etc. to individu	uals or organizations	under							
	other conditions, complete items 2a, b, c,	and d. See instruction	ns									
a	The name, address, and telephone number	r or e-mail address of	the person to whon	n applications should	be addressed:							
	ADELLE GREENBERG											
	100 WORCESTER ST NO 300 WELLESLEY, MA 02181											
	(844) 251-0099											
_	ADELLE.GREENBERG@CAMBRIDGETRUST.											
b	<b>b</b> The form in which applications should be submitted and information and materials they should include:											
	CONTACT THE FOUNDATION											
C	: Any submission deadlines:											
	CONTACT THE FOUNDATION											
d	Any restrictions or limitations on awards, s factors:	such as by geographic	al areas, charitable	fields, kinds of instit	utions, or other							



Enter gros	s amounts unless otherwise indicated.	Unrelated bu	siness income	Excluded by section	512, 513, or 514	(e) Related or exempt
<b>1</b> Progra	m service revenue:	(a) Business code	<b>(b)</b> Amount	(c) Exclusion code	<b>(d)</b> Amount	function income (See instructions.)
е						
	and contracts from government agencies ership dues and assessments.					
3 Intere	st on savings and temporary cash ments					
4 Divide	nds and interest from securities			14	75,682	
	ntal income or (loss) from real estate:					
	:-financed property					
	ntal income or (loss) from personal property					
<b>7</b> Other	investment income					
	or (loss) from sales of assets other than					
invent	·			18	93,794	
	come or (loss) from special events: profit or (loss) from sales of inventory					
<b>11</b> Other						
	IN LIEU			01	45	
	ND OF PRIOR YEAR EXPENSES					4,917
с						
d						
e <b>12</b> Subto	tal. Add columns (b), (d), and (e).		0		169,521	4,917
e 12 Subto 13 Total	tal. Add columns (b), (d), and (e).  Add line 12, columns (b), (d), and (e).  vorksheet in line 13 instructions to verify calcu	ılations.)		13	169,521 <b>3</b>	4,917 174,438
e 12 Subto 13 Total. (See v Part XV Line No.	tal. Add columns (b), (d), and (e).  Add line 12, columns (b), (d), and (e).  vorksheet in line 13 instructions to verify calcu  I-B Relationship of Activities to the  Explain below how each activity for which the accomplishment of the foundation's explain to the instructions.)	ne Accomplish	ment of Exemp	ot Purposes	ted importantly to	
e 12 Subto 13 Total. (See v Part XV	tal. Add columns (b), (d), and (e).  Add line 12, columns (b), (d), and (e).  vorksheet in line 13 instructions to verify calcu  I-B Relationship of Activities to the  Explain below how each activity for which the accomplishment of the foundation's explain below how the foundation's explain below how each activity for which the accomplishment of the foundation's explain below how each activity for which the accomplishment of the foundation's explain below how each activity for which the accomplishment of the foundation's explain below how each activity for which the accomplishment of the foundation's explain below how each activity for which the accomplishment of the foundation's explain below how each activity for which the accomplishment of the foundation's explain below how each activity for which the accomplishment of the foundation's explain below how each activity for which the accomplishment of the foundation's explain below how each activity for which the accomplishment of the foundation's explain below how each activity for which the accomplishment of the foundation's explain below how each activity for which the accomplishment of the foundation's explain below how each activity for which the accomplishment of the foundation's explain below how each activity for which the accomplishment of the foundation's explain below how each activity for which the accomplishment of the foundation's explain below how each activity for which the accomplishment of the foundation below how each activity for which the accomplishment of the foundation below how each activity for which the foundation below how each activity for which the foundation below how each activity for the foundation below the foundation below how each activity for the foundation below how each	ne Accomplish	ment of Exemp	ot Purposes	ted importantly to	
e 12 Subto 13 Total. (See v Part XV	tal. Add columns (b), (d), and (e).  Add line 12, columns (b), (d), and (e).  vorksheet in line 13 instructions to verify calcu  I-B Relationship of Activities to the  Explain below how each activity for which the accomplishment of the foundation's explain to the instructions.)	ne Accomplish	ment of Exemp	ot Purposes	ted importantly to	
e 12 Subto 13 Total. (See v Part XV	tal. Add columns (b), (d), and (e).  Add line 12, columns (b), (d), and (e).  vorksheet in line 13 instructions to verify calcu  I-B Relationship of Activities to the  Explain below how each activity for which the accomplishment of the foundation's explain to the instructions.)	ne Accomplish	ment of Exemp	ot Purposes	ted importantly to	
e 12 Subto 13 Total. (See v Part XV	tal. Add columns (b), (d), and (e).  Add line 12, columns (b), (d), and (e).  vorksheet in line 13 instructions to verify calcu  I-B Relationship of Activities to the  Explain below how each activity for which the accomplishment of the foundation's explain to the instructions.)	ne Accomplish	ment of Exemp	ot Purposes	ted importantly to	
e 12 Subto 13 Total. (See v Part XV	tal. Add columns (b), (d), and (e).  Add line 12, columns (b), (d), and (e).  vorksheet in line 13 instructions to verify calcu  I-B Relationship of Activities to the  Explain below how each activity for which the accomplishment of the foundation's explain to the instructions.)	ne Accomplish	ment of Exemp	ot Purposes	ted importantly to	
e 12 Subto 13 Total. (See v Part XV	tal. Add columns (b), (d), and (e).  Add line 12, columns (b), (d), and (e).  vorksheet in line 13 instructions to verify calcu  I-B Relationship of Activities to the  Explain below how each activity for which the accomplishment of the foundation's explain to the instructions.)	ne Accomplish	ment of Exemp	ot Purposes	ted importantly to	
e 12 Subto 13 Total. (See v Part XV	tal. Add columns (b), (d), and (e).  Add line 12, columns (b), (d), and (e).  vorksheet in line 13 instructions to verify calcu  I-B Relationship of Activities to the  Explain below how each activity for which the accomplishment of the foundation's explain to the instructions.)	ne Accomplish	ment of Exemp	ot Purposes	ted importantly to	
e 12 Subto 13 Total. (See v Part XV	tal. Add columns (b), (d), and (e).  Add line 12, columns (b), (d), and (e).  vorksheet in line 13 instructions to verify calcu  I-B Relationship of Activities to the  Explain below how each activity for which the accomplishment of the foundation's explain to the instructions.)	ne Accomplish	ment of Exemp	ot Purposes	ted importantly to	
e 12 Subto 13 Total. (See v Part XV	tal. Add columns (b), (d), and (e).  Add line 12, columns (b), (d), and (e).  vorksheet in line 13 instructions to verify calcu  I-B Relationship of Activities to the  Explain below how each activity for which the accomplishment of the foundation's explain to the instructions.)	ne Accomplish	ment of Exemp	ot Purposes	ted importantly to	
e 12 Subto 13 Total. (See v Part XV	tal. Add columns (b), (d), and (e).  Add line 12, columns (b), (d), and (e).  vorksheet in line 13 instructions to verify calcu  I-B Relationship of Activities to the  Explain below how each activity for which the accomplishment of the foundation's explain to the instructions.)	ne Accomplish	ment of Exemp	ot Purposes	ted importantly to	
e 12 Subto 13 Total. (See v Part XV	tal. Add columns (b), (d), and (e).  Add line 12, columns (b), (d), and (e).  vorksheet in line 13 instructions to verify calcu  I-B Relationship of Activities to the  Explain below how each activity for which the accomplishment of the foundation's explain to the instructions.)	ne Accomplish	ment of Exemp	ot Purposes	ted importantly to	
e 12 Subto 13 Total. (See v Part XV	tal. Add columns (b), (d), and (e).  Add line 12, columns (b), (d), and (e).  vorksheet in line 13 instructions to verify calcu  I-B Relationship of Activities to the  Explain below how each activity for which the accomplishment of the foundation's explain to the instructions.)	ne Accomplish	ment of Exemp	ot Purposes	ted importantly to	
e 12 Subto 13 Total. (See v Part XV	tal. Add columns (b), (d), and (e).  Add line 12, columns (b), (d), and (e).  vorksheet in line 13 instructions to verify calcu  I-B Relationship of Activities to the  Explain below how each activity for which the accomplishment of the foundation's explain to the instructions.)	ne Accomplish	ment of Exemp	ot Purposes	ted importantly to	
e 12 Subto 13 Total. (See v Part XV	tal. Add columns (b), (d), and (e).  Add line 12, columns (b), (d), and (e).  vorksheet in line 13 instructions to verify calcu  I-B Relationship of Activities to the  Explain below how each activity for which the accomplishment of the foundation's explain to the instructions.)	ne Accomplish	ment of Exemp	ot Purposes	ted importantly to	
e 12 Subto 13 Total. (See v Part XV	tal. Add columns (b), (d), and (e).  Add line 12, columns (b), (d), and (e).  vorksheet in line 13 instructions to verify calcu  I-B Relationship of Activities to the  Explain below how each activity for which the accomplishment of the foundation's explain to the instructions.)	ne Accomplish	ment of Exemp	ot Purposes	ted importantly to	
e 12 Subto 13 Total. (See v Part XV	tal. Add columns (b), (d), and (e).  Add line 12, columns (b), (d), and (e).  vorksheet in line 13 instructions to verify calcu  I-B Relationship of Activities to the  Explain below how each activity for which the accomplishment of the foundation's explain to the instructions.)	ne Accomplish	ment of Exemp	ot Purposes	ted importantly to	
e 12 Subto 13 Total. (See v Part XV	tal. Add columns (b), (d), and (e).  Add line 12, columns (b), (d), and (e).  vorksheet in line 13 instructions to verify calcu  I-B Relationship of Activities to the  Explain below how each activity for which the accomplishment of the foundation's explain to the instructions.)	ne Accomplish	ment of Exemp	ot Purposes	ted importantly to	
e 12 Subto 13 Total. (See v Part XV Line No.	tal. Add columns (b), (d), and (e).  Add line 12, columns (b), (d), and (e).  vorksheet in line 13 instructions to verify calcu  I-B Relationship of Activities to the  Explain below how each activity for which the accomplishment of the foundation's explain to the instructions.)	ne Accomplish	ment of Exemp	ot Purposes	ted importantly to	
e 12 Subto 13 Total. (See w Part XV	tal. Add columns (b), (d), and (e).  Add line 12, columns (b), (d), and (e).  vorksheet in line 13 instructions to verify calcu  I-B Relationship of Activities to the  Explain below how each activity for which the accomplishment of the foundation's explain to the instructions.)	ne Accomplish	ment of Exemp	ot Purposes	ted importantly to	

Part XVII  Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations								
Did the organ	sization directly or indirectly engage in any of the following with any other organization described in section 501							

	G // U	Exempt Organi	zations										
		rganization directly or in than section 501(c)(3)								on 501		Yes	No
a Tr	ansfers	from the reporting foun	dation to a n	oncha	ritable exe	empt organizatio	n of	÷:					
(1	) Cash	1								. <u>1</u> a	(1)		No
(2	) Othe	er assets								. <u>1</u> a	(2)		No
<b>b</b> Ot	her tra	nsactions:											
-	-	s of assets to a nonchar	•	_							(1)		No
(2	) Purc	hases of assets from a r	oncharitable	exem	ıpt organiz	zation					(2)		No
(3	) Rent	al of facilities, equipmer	nt, or other a	ssets.						1b	(3)		No
(4	) Rein	nbursement arrangemen	ts				٠			_	(4)		No
(5	) Loar	s or loan guarantees.								. 1b	(5)		No
•	•	rmance of services or m			_						(6)		No
		f facilities, equipment, n									.c		No
of in	the god any tra	wer to any of the above ods, other assets, or ser insaction or sharing arra	vices given b ngement, sho	y the ow in	reporting column (d	foundation. If the	e fo	undation receive oods, other asse	d less than fair mar ts, or services recei	ket value ved.			
(a) Lir	ne No.	(b) Amount involved	(c) Name of	noncha	aritable exe	mpt organization		(d) Description of	transfers, transactions	, and sharing	arra	ngemen	ts
											—		
	-												
<b>2a</b> Is	the fou	indation directly or indire	ectly affiliated	d with	, or relate	d to, one or more	e ta	x-exempt organi	zations	_			
de	scribed	in section 501(c) (other	r than sectior	า 501(	c)(3)) or i	in section 527? .			UY	es 🔽 N	Э		
b If	"Yes," d	complete the following s	chedule.										
		(a) Name of organization	n		(t	) Type of organiza	tion		(c) Description	n of relationsh	ip		
	of r	der penalties of perjury, ny knowledge and belief	, it is true, co										
Sigr		ch preparer has any kno	wieuge.			2021 04 22		*****		May the I	≀S di	scuss th	iis
Her	e 👠	and the streets of the				2021-04-20		*****		return with the p	renai	er show	vn
								— P <u> </u>		below	epai	ei silow	V11
	'	Signature of officer or t	rustee			Date		' Title		(see instr	) <b></b>	] <sub>Yes</sub> □	] No
		T											
		Print/Type preparer's	name	Prepa	arer's Sigr	nature	[	Date	Check if self-	PTIN			
									employed ▶ □	PO	)464	296	
Daic	4	HARRY A KALAJIAN	N JR					2021-04-20	cilipio, cu r				
Paid	_	CPA											
_	pare	i ii ii i i i i i i i i i i i i i i i	F & COMPAN	Y PC						Firm's EIN I	<b>▶</b> 04·	-26898	83
use	Only		Simple address N. CO. HIGH CIDEET 24CT FLOOR								—		
		ininis audiess P 99	Firm's address ▶ 99 HIGH STREET 21ST FLOOR								c 1 –	120	2700
		ВС	OSTON, MA	02110						Phone no. (	<b>01</b> /	439-9	9/00

Form 990PF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation (a) Name and address Title, and average (c) Compensation (If Expense account, (d) hours per week not paid, enter Contributions to (e) other allowances (b) devoted to position -0-) employee benefit plans and deferred compensation MICHAEL CAROTENUTO TREASURER/DRIECTOR 0 0 78 BLANCHARD ROAD BURLINGTON, MA 01803 THOMAS J FONTAINE 0 0 0 PRESIDENT/DIRECTOR 1.00 78 BLANCHARD ROAD BURLINGTON, MA 01803 ADELLE GREENBERG **SECRETARY** 0 1.00 78 BLANCHARD ROAD BURLINGTON, MA 01803 SHEILA ESTES DIRECTOR 0 0 1.00 78 BLANCHARD ROAD BURLINGTON, MA 01803 ADAM JOHNSTON DIRECTOR 0 n 1.00 78 BLANCHARD ROAD BURLINGTON, MA 01803 RALPH LETNER DIRECTOR 0 1.00 78 BLANCHARD ROAD BURLINGTON, MA 01803 DANIEL MORRISON DIRECTOR 0 0 0 1.00 78 BLANCHARD ROAD BURLINGTON, MA 01803 JENNIFER PLINE O 0 O DIRECTOR 1.00 78 BLANCHARD ROAD BURLINGTON, MA 01803 DINA SCIANNA DIRECTOR 0 0 1.00 78 BLANCHARD ROAD BURLINGTON, MA 01803 KATHERINE LAFEVERS CLERK 0 0 ٥ 1.00 78 BLANCHARD ROAD BURLINGTON, MA 01803 ROMA MAYUR 0 DIRECTOR 0 0 1.00 78 BLANCHARD ROAD BURLINGTON, MA 01803 MAUREEN SULLIVAN PRESIDENT (THRU 2,500 0 6/30/2020)

78 BLANCHARD ROAD

BURLINGTON, MA 01803

6.00

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager recipient

Name and address (nome or business)	or substantial contributor	·		
a Paid during the year				
826 BOSTON	NOT RELATED	PC	EXEMPT PURPOSE	5,000

BOSTON, MA 02119				
ALRAY SCHOLARS PROGRAM PO BOX 960400 BOSTON, MA 02196	NOT RELATED	PC	EXEMPT PURPOSE	1,000

ALRAY SCHOLARS PROGRAM PO BOX 960400 BOSTON, MA 02196	NOT RELATED	PC	EXEMPT PURPOSE	1,000
AUTISM SERVICES ASSOCIATION 47 WALNUT STREET	NOT RELATED	PC	EXEMPT PURPOSE	1,000

	BOSTON, MA 02196				
	AUTISM SERVICES ASSOCIATION 47 WALNUT STREET WELLESLEY, MA 02481	NOT RELATED	PC	EXEMPT PURPOSE	1,000
1		,		•	

AUTISM SERVICES ASSOCIATION 47 WALNUT STREET WELLESLEY, MA 02481	NOT RELATED	PC	EXEMPT PURPOSE	1,000
Total			▶ 3a	158,890

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year

BIGELOW MIDDLE SCHOOL 42 VERNON ST NEWTON, MA 02458	NOT RELATED	PC	EXEMPT PURPOSE	500	
BOSTON CHARITABLE TRUST FUND	NOT RELATED	PC	EXEMPT PURPOSE	10,000	

BOSTON CHARITABLE TRUST FUND 1 CITY HALL SQUARE NO 500 BOSTON, MA 02201	NOT RELATED	PC	EXEMPT PURPOSE	10,000
BOSTON SIGHT464 HILLSIDE AVE 205	NOT RELATED	PC	EXEMPT PURPOSE	1,000

158,890

■ 3a

BOSTON, MA 02201				
BOSTON SIGHT464 HILLSIDE AVE 205 NEEDHAM HEIGHTS, MA 02494	NOT RELATED	PC	EXEMPT PURPOSE	1,000

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business)

(	or substantial contributor			
a Paid during the year				
BOYS AND GIRLS CLUBS METROWEST 169 PLEASANT ST MARLBOROUGH, MA 01752	NOT RELATED	PC	EXEMPT PURPOSE	1,000

			-V-148- 8118-86-	
CARROLL CENTER FOR THE BLIND THE 770 CENTRE ST NEWTON, MA 02458	NOT RELATED	PC	EXEMPT PURPOSE	2,500
MARLBOROUGH, MA 01752				

770 CENTRE ST NEWTON, MA 02458	NOT RELATED	PC	EXEMPT PURPOSE	2,500
CENTRE STREET FOOD PANTRY 11 HOMER ST	NOT RELATED	PC	EXEMPT PURPOSE	1,000

770 CENTRE ST NEWTON, MA 02458				
CENTRE STREET FOOD PANTRY 11 HOMER ST NEWTON CENTRE, MA 02459	NOT RELATED	PC	EXEMPT PURPOSE	1,000
·			·	

·				1
CENTRE STREET FOOD PANTRY 11 HOMER ST NEWTON CENTRE, MA 02459	NOT RELATED	PC	EXEMPT PURPOSE	1,000
Total			<b>&gt;</b> 3a	158,890

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business)

	or substantial contributor			
a Paid during the year				
CHARLES RIVER CENTER 59 E MILITIA HEIGHTS DR	NOT RELATED	PC	EXEMPT PURPOSE	5,000

NEEDHAM, MA 02492				
COMMUNITY INVESTORS 25 EARLE ROAD WELLESLEY, MA 02481	NOT RELATED	PC	EXEMPT PURPOSE	1,000

COMMUNITY INVESTORS 25 EARLE ROAD WELLESLEY, MA 02481	NOT RELATED	PC	EXEMPT PURPOSE	1,000
ELIZABETH SETON RESIDENCE 125 OAKLAND STREET	NOT RELATED	PC	EXEMPT PURPOSE	1,000

125 OAKLAND STREET	25 EARLE ROAD WELLESLEY, MA 02481				
WELLESELI, TWO SELISE		NOT RELATED	PC	EXEMPT PURPOSE	1,000

158,890

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager recipient

Name and address (nome or business)	or substantial contributor			
a Paid during the year				
ELLIE FUND THE	NOT RELATED	PC	EXEMPT PURPOSE	5,000

200 RESERVOIR ST SUITE 300 NEEDHAM, MA 02494	NOT RELATED	FC	EXEMPT FORFOSE	3,000
ENGLISH FOR NEW BOSTONIANS INC 105 CHAUNCY ST	NOT RELATED	PC	EXEMPT PURPOSE	1,000

ENGLISH FOR NEW BOSTONIANS INC 105 CHAUNCY ST BOSTON, MA 02111	NOT RELATED	PC	EXEMPT PURPOSE	1,000
ESPLANADE ASSOCATION	NOT RELATED	PC	EXEMPT PURPOSE	500

BOSTON, MA 02111				
ESPLANADE ASSOCATION 575 BOYLSTON ST SUITE 4R BOSTON, MA 02116	NOT RELATED	PC	EXEMPT PURPOSE	500

158,890

	I .			
ESPLANADE ASSOCATION 575 BOYLSTON ST SUITE 4R BOSTON, MA 02116	NOT RELATED	PC	EXEMPT PURPOSE	

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year

a raid daring the year				
FACING CANCER TOGETHER 63 LINCOLN ST NEWTON HIGHLANDS, MA 02461	NOT RELATED	PC	EXEMPT PURPOSE	500

NEWTON HIGHLANDS, MA 02461				
FAMILIES FIRST9 GALEN ST SUITE 400 WATERTOWN, MA 02472	NOT RELATED	PC	EXEMPT PURPOSE	1,000
FOUNDATION FOR METROWEST	NOT RELATED	PC	EXEMPT PURPOSE	25,000

WATERTOWN, MA 02472	THO I KEEKLES		EXEMPTON GOL	1,000
FOUNDATION FOR METROWEST 3 ELIOT STREET NATICK, MA 01760	NOT RELATED	PC	EXEMPT PURPOSE	25,000

158,890

■ 3a

·····				
FOUNDATION FOR METROWEST 3 ELIOT STREET NATICK, MA 01760	NOT RELATED	PC	EXEMPT PURPOSE	25,0

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager recipient

Name and address (home or business)	or substantial contributor			
a Paid during the year				
FRIENDS OF BOSTON HOMELESS	NOT RELATED	PC	EXEMPT PURPOSE	1,000

12 WISE STREET BOSTON, MA 02130	NOT RELATED	۲	EXEMPT PURPOSE	•
FRIENDS OF WELLESLEY METCO PO BOX 81163	NOT RELATED	PC	EXEMPT PURPOSE	

	B051011,1111 02130				
	FRIENDS OF WELLESLEY METCO PO BOX 81163 WELLESLEY, MA 02481	NOT RELATED	PC	EXEMPT PURPOSE	1,000
1	GATEWAY TO JEWISH EDUCATION	NOT RELATED	PC	EXEMPT PURPOSE	1,000

PO BOX 81163 WELLESLEY, MA 02481				
GATEWAY TO JEWISH EDUCATION 333 NAHANTON ST NEWTON, MA 02459	NOT RELATED	PC	EXEMPT PURPOSE	1,000

GATEWAY TO JEWISH EDUCATION 333 NAHANTON ST NEWTON, MA 02459	NOT RELATED	PC	EXEMPT PURPOSE	1,000
Total			▶ 3a	158,890

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor

a Paid during the year				
GREEN NEWTONPO BOX 590242 NEWTON CENTRE, MA 02459	NOT RELATED	PC	EXEMPT PURPOSE	1,000

IEWTON CENTRE, MA 02459				
EALTHCARE WITHOUT WALLS 48 LINDEN ST 208 OSTON, MA 02482	NOT RELATED	PC	EXEMPT PURPOSE	

Total .

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

HODE & COMPORTDO BOY 244	NOT BELATED	20	EVENDE BURBOGE	
HEALTHCARE WITHOUT WALLS 148 LINDEN ST 208 BOSTON, MA 02482	NOT RELATED	PC	EXEMPT PURPOSE	2,500

BOSTON, MA 02482				
HOPE & COMFORTPO BOX 241	NOT RELATED	PC	EXEMPT PURPOSE	5,000

BUSTON, MA 02462				
HOPE & COMFORTPO BOX 241 NEWTON, MA 02464	NOT RELATED	PC	EXEMPT PURPOSE	5,000

158.890

HOPE & COMFORTPO BOX 241	NOT RELATED	PC	EXEMPT PURPOSE	5,
NEWTON, MA 02464				

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution

recipient

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

any foundation manager

or substantial contributor

Name and address (home or business)

	or substantial continuator			
a Paid during the year				
HUMAN RELATIONS SERVICE LINDEMANN HOUSE 11 CHAPEL PL	NOT RELATED	PC	EXEMPT PURPOSE	500

WELLESLEY HILLS, MA 02481				
HUNNEWELL ELEMENTARY SCHOOL 28 CAMERON ST	NOT RELATED	PC	EXEMPT PURPOSE	1
WELLESLEY, MA 02482				

HUNNEWELL ELEMENTARY SCHOOL 28 CAMERON ST WELLESLEY, MA 02482	NOT RELATED	PC	EXEMPT PURPOSE	1,000
LAWYERS CLEARINGHOUSE	NOT RELATED	PC	EXEMPT PURPOSE	1,500

WELLESLEY, MA 02482				
LAWYERS CLEARINGHOUSE 7 WINTHROP SQUARE BOSTON, MA 02110	NOT RELATED	PC	EXEMPT PURPOSE	1,500

WEELESEET, MA 02402				
LAWYERS CLEARINGHOUSE 7 WINTHROP SQUARE BOSTON, MA 02110	NOT RELATED	PC	EXEMPT PURPOSE	1,500
Total			▶ 3a	158,890

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor

	or substantial contributor			
a Paid during the year				
MARE19 NEEDHAM ST SUITE 206 NEWTON, MA 02461	NOT RELATED	PC	EXEMPT PURPOSE	310

NEWTON, MA 02461	NOT REBITED		EXELLIT LOUG COL	310
MASS INSIGHT69 CANAL ST 3RD FL BOSTON, MA 02114	NOT RELATED	PC	EXEMPT PURPOSE	10,000
METRO HOUSING BOSTON	NOT RELATED	PC	EXEMPT PURPOSE	2.000

MASS INSIGHT69 CANAL ST 3RD FL BOSTON, MA 02114	NOT RELATED	PC	EXEMPT PURPOSE	10,000
METRO HOUSING BOSTON 1411 TREMONT ST	NOT RELATED	PC	EXEMPT PURPOSE	2,000

BOSTON, MA 02114				
METRO HOUSING BOSTON 1411 TREMONT ST BOSTON, MA 02120	NOT RELATED	PC	EXEMPT PURPOSE	2,000

158.890

1411 TREMONT ST BOSTON, MA 02120	2,00
BOSTON MA 02120	
5651611,1111 62226	

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year NATICK SERVICE COUNCIL NOT RELATED PC EXEMPT PURPOSE 500

2 WEBSTER ST NATICK, MA 01760				
NEW ENGLAND CENTER FOR HOMELESS VETERANS 17 COURT STREET	NOT RELATED	PC	EXEMPT PURPOSE	2,500

VETERANS 17 COURT STREET BOSTON, MA 02108				ŕ
NEW ERA FUND 500 WASHINGTON STREET	NOT RELATED	PC	EXEMPT PURPOSE	5,000

BOSTON, MA 02108				
NEW ERA FUND 500 WASHINGTON STREET WELLESLEY, MA 02482	NOT RELATED	PC	EXEMPT PURPOSE	5,000

Total .

За

158,890

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of

recipient

158,890

a Paid during the year				
NEWTON COVID CARES CO UNITED WAY 9 CHANNEL CENTER ST SUITE 500	NOT RELATED	PC	EXEMPT PURPOSE	10,000

BOSTON, MA 02210				
ONE FOR HEALTH290 SOUTH ST WALPOLE, MA 02081	NOT RELATED	PC	EXEMPT PURPOSE	

any foundation manager

or substantial contributor

Name and address (home or business)

ONE FOR HEALTH290 SOUTH ST WALPOLE, MA 02081	NOT RELATED	PC	EXEMPT PURPOSE	1,000
PROJECT CITIZENSHIP 4 S MARKET ST BUILDING 3RD FLOOR	NOT RELATED	PC	EXEMPT PURPOSE	3,000

WALPOLE, MA 02081				
PROJECT CITIZENSHIP 4 S MARKET ST BUILDING 3RD FLOOR BOSTON, MA 02109	NOT RELATED	PC	EXEMPT PURPOSE	3,000

*				1
PROJECT CITIZENSHIP 4 S MARKET ST BUILDING 3RD FLOOR BOSTON, MA 02109	NOT RELATED	PC	EXEMPT PURPOSE	3,000

Recipient If recipient is an individual, show any relationship to any foundation manager or substantial contributor

Recipient If recipient is an individual, show any relationship to any foundation manager or substantial contributor

a Paid during the year				
REACH BEYOND DOMESTIC VIOLENCE PO BOX 540024 WALTHAM, MA 02454	NOT RELATED	PC	EXEMPT PURPOSE	1,500

WALTHAM, MA 02454				
RIVERBEND SCHOOL33 ELIOT ST NATICK, MA 01760	NOT RELATED	PC	EXEMPT PURPOSE	3,500

NATICK, MA 01760	NOT RELATED	2	EXEMPT PURPOSE	3,500
SAMARITANS41 WEST ST BOSTON, MA 02111	NOT RELATED	PC	EXEMPT PURPOSE	1,000

Total .

158.890

Recipient If recipient is an individual, show any relationship to status of contribution Amount

recipient

▶ 3a

158,890

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

any foundation manager

or substantial contributor

Name and address (home or business)

337 SOMERVILLE AVE SOMERVILLE, MA 02143

	or substantial contributor			
a Paid during the year				
SCHOFIELD ELEMENTARY SCHOOL PTO 27 CEDAR ST WELLESLEY, MA 02481	NOT RELATED	PC	EXEMPT PURPOSE	1,000
SECOND STEP THEPO BOX 600213 NEWTONVILLE, MA 02460	NOT RELATED	PC	EXEMPT PURPOSE	3,330
SOMERVILLE COMMUNITY CORPORATION	NOT RELATED	PC	EXEMPT PURPOSE	2,500

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year

SOUTH SUDANESE ENRICHMENT FOR FAMILIES 10 MEADOWDAM RD LINCOLN, MA 01773	NOT RELATED	PC	EXEMPT PURPOSE	250
SPRAGUE ELEMENTARY SCHOOL	NOT RELATED	PC	EXEMPT PURPOSE	1,000

LINCOLN, MA 01773				
SPRAGUE ELEMENTARY SCHOOL 401 SCHOOL ST WELLESLEY, MA 02482	NOT RELATED	PC	EXEMPT PURPOSE	1,000
SPRINGWELL	NOT RELATED	PC	EXEMPT PURPOSE	5,000

401 SCHOOL ST WELLESLEY, MA 02482				
SPRINGWELL 307 WAVERLY OAKS RD NO 205 WALTHAM, MA 02452	NOT RELATED	PC	EXEMPT PURPOSE	5,000

Total .

158,890

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business)

or substantial contributor

Total .

	or substantial contributor			
a Paid during the year				
ST JOHN SCHOOL9 LEDYARD ST WELLESLEY, MA 02481	NOT RELATED	PC	EXEMPT PURPOSE	1,000

WEEEEBEE1,118				
TENACITY38 EVERETT STREET BOSTON, MA 02134	NOT RELATED	PC	EXEMPT PURPOSE	1,000
THE CENTER FOR ARTS IN NATICK	NOT RELATED	PC	EXEMPT PURPOSE	500

BOSTON, MA 02134				
THE CENTER FOR ARTS IN NATICK 14 SUMMER ST NATICK, MA 01760	NOT RELATED	PC	EXEMPT PURPOSE	500

DOSTON, MA 02134				
THE CENTER FOR ARTS IN NATICK 14 SUMMER ST NATICK, MA 01760	NOT RELATED	PC	EXEMPT PURPOSE	500

158.890

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution

Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
THE TRAVIS ROY FOUNDATION	NOT RELATED	PC	EXEMPT PURPOSE	500

101 HUNTINGTON AVE SUITE 520 BOSTON, MA 02199	NOT RELATED	PC	EXEMPT PURPOSE	500
WAYPOINT ADVENTURE 453 CONCORD AVE	NOT RELATED	PC	EXEMPT PURPOSE	2,500

BOSTON, MA 02199				
WAYPOINT ADVENTURE 453 CONCORD AVE LEXINGTON, MA 02421	NOT RELATED	PC	EXEMPT PURPOSE	2,500
WELLESLEY COMMUNITY CENTER	NOT RELATED	PC	EXEMPT PURPOSE	500

WAYPOINT ADVENTURE 453 CONCORD AVE LEXINGTON, MA 02421	NOT RELATED	PC	EXEMPT PURPOSE	2,500
WELLESLEY COMMUNITY CENTER 106 CENTRAL STREET WELLESLEY, MA 02481	NOT RELATED	PC	EXEMPT PURPOSE	500

LEXINGTON, MA 02421				
WELLESLEY COMMUNITY CENTER 106 CENTRAL STREET WELLESLEY, MA 02481	NOT RELATED	PC	EXEMPT PURPOSE	500
Total			▶ За	158,890

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year WELLESLEY COMMUNITY CHILDRENS NOT RELATED PC **EXEMPT PURPOSE** 500 CENTER 106 CENTRAL STREET

WELLESLEY, MA 02481				
WELLESLEY EDUCATION FOUNDATION PO BOX 812321 WELLESLEY, MA 02482	NOT RELATED	PC	EXEMPT PURPOSE	5,000
WELLESLEY FOUNDATION ROTARY CLUB	NOT RELATED	PC	EXEMPT PURPOSE	2,500

WELLESLEY EDUCATION FOUNDATION PO BOX 812321 WELLESLEY, MA 02482	NOT RELATED	PC	EXEMPT PURPOSE	5,00
WELLESLEY FOUNDATION ROTARY CLUB PO BOX 81206	NOT RELATED	PC	EXEMPT PURPOSE	2,50

WELLESLEY, MA 02482				
WELLESLEY FOUNDATION ROTARY CLUB PO BOX 81206 WELLESLEY HILLS, MA 02481	NOT RELATED	PC	EXEMPT PURPOSE	2,5

Total .

PO BOX 81206 WELLESLEY HILLS, MA 02481	WELLESLEY FOUNDATION ROTARY CLUB	NOT RELATED	PC	EXEMPT PURPOSE	2,500
	PO BOX 81206 WELLESLEY HILLS, MA 02481				

158,890

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution

recipient

158,890

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

any foundation manager

or substantial contributor

Name and address (home or business)

a Paid during the year				
WELLESLEY HISTORICAL SOCIETY 229 WASHINGTON ST WELLESLEY, MA 02481	NOT RELATED	PC	EXEMPT PURPOSE	5,000
WELLESLEY POPSPO BOX 812136	NOT RELATED	PC	EXEMPT PURPOSE	500

	229 WASHINGTON ST WELLESLEY, MA 02481				
	WELLESLEY POPSPO BOX 812136 WELLESLEY, MA 02481	NOT RELATED	PC	EXEMPT PURPOSE	5
1	WELLESLEY SCHOLARSHIP	NOT RELATED	PC	EXEMPT PURPOSE	5.0

•				
WELLESLEY POPSPO BOX 812136 WELLESLEY, MA 02481	NOT RELATED	PC	EXEMPT PURPOSE	500
WELLESLEY SCHOLARSHIP FOUNDATION PO BOX 81207	NOT RELATED	PC	EXEMPT PURPOSE	5,000

WELLESLEY, MA 02481	NOT KELATED		EXEMIT FOR OSE	300
WELLESLEY SCHOLARSHIP FOUNDATION PO BOX 81207 WELLESLEY, MA 02481	NOT RELATED	PC	EXEMPT PURPOSE	5,000

WELLESLEY SCHOLARSHIP FOUNDATION	NOT RELATED	PC	EXEMPT PURPOSE	5,000
PO BOX 81207 WELLESLEY, MA 02481				
	•		•	

Recipient If recipient is an individual, Foundation Purpose of grant or Amount contribution show any relationship to status of any foundation manager recipient Name and address (home or business)

	or substantial contributor			
a Paid during the year				
WELLESLEY SERVICE LEAGUE	NOT RELATED	PC	EXEMPT PURPOSE	1,000

219 WASHINGTON ST WELLESLEY, MA 02481				,
WOMEN'S LUNCH PLACE	NOT RELATED	PC	EXEMPT PURPOSE	2,500

***************************************				
WOMEN'S LUNCH PLACE	NOT RELATED	PC	EXEMPT PURPOSE	2,500
67 NEWBURY STREET				·
BOSTON, MA 02116				

158,890

WOMEN'S LUNCH PLACE 67 NEWBURY STREET BOSTON, MA 02116  NOT RELATED PC EXEMPT PURPOSE 2,500

efile GRAPHIC print - DO NOT P	ROCESS As	As Filed Data - DLN: 93491110003161				
TY 2020 Accounting Fe	ees Schedu	ıle				
Name: CAMBRIDGE TRUST CHARITABLE FOUNDATION						
	F/I	K/A WELLES	SLEY BANK CH	ARITABLE FDN INC		
	<b>EIN:</b> 45-4182909					
Category	Amoun	t Net	Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes	
<u> </u>						

1,550

WOLF & COMPANY, P.C.

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491110003161				
TV 2020 Investments Cornerat	o Stock School					
TY 2020 Investments Corporate Stock Schedule						
Name: (	AMBRIDGE TRUS	T CHARITABLE FOUNDATION				

4,534,866

4,534,866

			·	_		
Investments Corporation Stock Schedule						
EIN:	45-4182909					
	F/K/A WELLESLEY BANK C	HARLLA	ARLF F	DN I	NC	

WELLESLEY BANCORP, INC.

Investments Corporation Stock Schedule		
Name of Stock	End of Year Book Value	End of Year Fair Market Value

efile GRAPHIC print - DO NOT PROCE	SS As Filed Data	-	DLN	N: 93491110003161		
TY 2020 Legal Fees Schedu	ule			_		
Nar	ne: CAMBRIDGE	TRUST CHARITAE	BLE FOUNDATION			
	F/K/A WELLI	F/K/A WELLESLEY BANK CHARITABLE FDN INC				
E	<b>IN:</b> 45-4182909					
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes		
HURWIT & ASSOCIATES	3,125	0		3,125		

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	ta - DLN: 93491110003161				
TY 2020 Other Decreases School	edule					
			!			
Name:	CAMBRIDGE T	RUST CHARITABLE FOUNDATI	ION			
	F/K/A WELLESLEY BANK CHARITABLE FDN INC					
EIN:	45-4182909					
De	escription		Amount			
UNREALIZED INVESTMENT GAINS/LOSS	ES		642,450			

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN	: 93491110003161	
TY 2020 Other Expenses Sche	edule				
Name: CAMBRIDGE TRUST CHARITABLE FOUNDATION					
F/K/A WELLESLEY BANK CHARITABLE FDN INC					
EIN:	45-4182909				
Other Expenses Schedule					
Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes	

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
STATE FILING FEES	35	0		35

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491110003161
TY 2020 Other Income Schedul	e	

Name: CAMBRIDGE TRUST CHARITABLE FOUNDATION

4,917

F/K/A WELLESLEY BANK CHARITABLE FDN INC

4,917

**EIN:** 45-4182909

REFUND OF PRIOR YEAR EXPENSES

Other Income Schedule						
Description	Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income			
CASH IN LIEU	45	45	45			

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	-	DLN	N: 93491110003161		
TY 2020 Taxes Schedule						
Name: CAMBRIDGE TRUST CHARITABLE FOUNDATION  F/K/A WELLESLEY BANK CHARITABLE FDN INC						
EIN:	N: 45-4182909					
Taxes Schedule				1		
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes		
2020 ESTIMATED FEDERAL TAX	2,500	0		0		

efile GRAPHIC print - D	O NOT PROCESS	As Filed Data -				DLN: 93491110003161
Schedule B		Schedu	ule of Contributo	rs		OMB No. 1545-0047
(Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service	ı		o Form 990, 990-EZ, or 990- o <u>v/Form990</u> for the latest in			2020
Name of the organization CAMBRIDGE TRUST CHAR						entification number
F/K/A WELLESLEY BANK C Organization type (chec					45-4182909	
Filers of:	Section:					
	oconon.					
Form 990 or 990-EZ	☐ 501(c)(	) (enter number) o	organization			
	☐ 4947(a)(1	l) nonexempt char	ritable trust <b>not</b> treated as	s a private foundat	tion	
	☐ 527 politic	cal organization				
Form 990-PF	<b>✓</b> 501(c)(3)	exempt private fo	undation			
	☐ 4947(a)(1	l) nonexempt char	ritable trust treated as a p	private foundation		
	☐ 501(c)(3)	taxable private fo	undation			
			PF that received, during t omplete Parts I and II. So			
Special Rules						
under sections 50 received from an	09(a)(1) and 170(b)	(1)(A)(vi), that che uring the year, tota	g Form 990 or 990-EZ the cked Schedule A (Form s al contributions of the gre plete Parts I and II.	990 or 990-EZ), Pa	art II, line 13, 1	16a, or 16b, and that
during the year, t	otal contributions of	more than \$1,000	or (10) filing Form 990 c Dexclusively for religious animals. Complete Parts	, charitable, scient		
during the year, of If this box is chec purpose. Don't co	contributions <i>exclus</i> cked, enter here the omplete any of the p	ively for religious, total contributions parts unless the <b>G</b> o	or (10) filing Form 990 c charitable, etc., purposes that were received durin eneral Rule applies to th or more during the year	s, but no such con ng the year for an e is organization be	tributions total e <i>xclusively</i> reli cause it receiv	led more than \$1,000. igious, charitable, etc., ved nonexclusively
990-EZ, or 990-PF), but	it <b>must</b> answer "No	" on Part IV, line 2	ale and/or the Special Rul , of its Form 990; or chec eet the filing requirements	ck the box on line I	H of its Form 9	
For Paperwork Reduction A for Form 990, 990-EZ, or 990		ructions	Cat. No. 30613X	Schedu	le B (Form 990,	990-EZ, or 990-PF) (2020)

(Complete Part II for noncash

Schedule I	B (Form 990, 990-EZ, or 990-PF) (2020)			Page 4	
	ganization E TRUST CHARITABLE FOUNDATION LESLEY BANK CHARITABLE FDN INC		mployer identification number 5-4182909		
Part III	than \$1,000 for the year from any one contri	n section 501(c)(7), (8), or (10) that total more in (e) and the following line entry. For le, etc., contributions of <b>\$1,000 or less</b> for			
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held	
	(e) Transfer of g Transferee's name, address, and ZIP 4		•	ft Relationship of transferor to transferee	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held	
	(e) Transfer of gift  Transferee's name, address, and ZIP 4  Relationsh			nship of transferor to transferee	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held	
	(e) Transfer of gift Transferee's name, address, and ZIP 4 Relations			nship of transferor to transferee	
	Transièree's fiame, audress, and Zi		rtelatio	nship of transferor to transferee	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held	
	(e) Transfer of gift Transferee's name, address, and ZIP 4 Relationsh			nship of transferor to transferee	
			Sch	edule B (Form 990, 990-EZ, or 990-PF) (2020)	