efi	le GR	APHIC print	- DO NOT PRO	DCESS As Filed Dat	:a -				491287006089
Form 990-PF Department of the Treasury Internal Revenue Service Department of the Treasury Do not enter social security nu b Go to <u>www.irs.gov/Form990P</u>					nbers on this form a	rivate as it n	Foundation	n public.	MB No 1545-0052 2018 Open to Public Inspection
For	caler	ndar year 20	18, or tax yea	r beginning 01-01-20)18 , aı	nd en	ding 12-31-	2018	
		Indation E BEAL CHARITABL	E FOUNDATION				A Employer Id	entification numb	er
Num	ber and	street (or P.O. bo	ix number if mail is r	not delivered to street address)	Room/suite				
		IN STREET 8					B Telephone nu (508) 655-6735	ımber (see ınstructı 5	ons)
		n, state or province MA 01778	e, country, and ZIP o	r foreign postal code			C If exemption	application is pendi	ng, check here
G Cł	neck al	l that apply	Initial return	Amended return	former public charity		2 Foreign or test, chec	ganizations, check ł rganizations meetin k here and attach c undation status was	g the 85% omputation
	'	pe of organizati	on 🗹 Section nexempt charitab	501(c)(3) exempt private				n 507(b)(1)(A), che	
I Fai of	ır mark year (f	xet value of all a rom Part II, col ►\$ <u>14,005,69</u> 0	ssets at end (c),		e private foundation Cash Accru be on cash basis)	al		ation is in a 60-mon n 507(b)(1)(B), che	
Pa	rt I	of amounts in c		Expenses (The total (d) may not necessarily ee instructions))	(a) Revenue and expenses per books	(Ь) Г	let investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
	1	Contributions, schedule)	gıfts, grants, etc	, received (attach	0				
	2	Check 🕨 🗹 ıf	the foundation is	not required to attach					
	3	Sch B Interest on sav	/ings and tempora	ary cash investments					
	4	Dividends and	interest from sec	unities	294,464		294,464		
	5a	Gross rents							
<i>a</i> .	b	Net rental inco	. ,	costo not on luno 10					
Revenue	6a b	2 (ce for all assets o	ssets not on line 10 on line 6a	322,413				
Rev	7	Capital gain ne	et income (from P	2,092,425 art IV, line 2)			322,413		
	8		capital gain .						
	9	Income modifi	cations						
	10a		s returns and allo						
	b	Less Cost of g	oods sold (loss) (attach sch		<u> </u>				
	с 11		(attach schedule)						
	11				616,877	,	616,877		0
	13			ors, trustees, etc	130,589		010,077		0 0
	14	•	e salaries and wa						
ŝ	15	Pension plans,	employee benefit	ts					
in se	16a	Legal fees (att	ach schedule) 🔒						
Expenses	Ь	Accounting fee	s (attach schedul	e)	* J 5,603		5,603		0 0
е Е	с		onal fees (attach :		52,416		52,416		0 0
ativ	17	Interest	• • • • •		10 1				
and Administrative	18	•	schedule) (see ins	*	3,189		1,922		0 0
un	19		attach schedule) a						
Ad	20 21		nces, and meetin						
pu	22		ublications						
	23			e)	* 50		50		0 0
Operating	24	•		trative expenses.	101.047		E0.001		0 0
đŎ	25		gifts, grants paid		191,847		59,991		550,000
	26	Total expens		ments. Add lines 24 and					
	27	25 Subtract line 2	6 from line 12		741,847		59,991		0 550,000
	27 a		enue over expe	nses and					
		disbursemen	ts		-124,970				
	b c		-	gatıve, enter -0-) tive, enter -0-)			556,886		
For			n Act Notice se				at No. 11280		0 200- PE (2018)

Form 990-PF (2018)

Form 990-	• •	Beginning of year	End o	Page 2
Part II	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
1	Cash—non-interest-bearing	45,971	930,826	930,826
2	Savings and temporary cash investments	564,124	808,409	808,409
3	Accounts receivable			
	Less allowance for doubtful accounts 🕨			
4	Pledges receivable 🕨			
	Less allowance for doubtful accounts 🕨			
5	Grants receivable			
6	Receivables due from officers, directors, trustees, and other			
	dısqualıfıed persons (attach schedule) (see ınstructions)			
7	Other notes and loans receivable (attach schedule) \blacktriangleright			
	Less allowance for doubtful accounts 🕨			
v 8	Inventories for sale or use			
ASSets 6 10a	Prepaid expenses and deferred charges			
Š 4 10a	Investments—U S and state government obligations (attach schedule)			
Ь	Investments—corporate stock (attach schedule)	4,755,702	4,460,517	5,896,295
с	Investments—corporate bonds (attach schedule)			
11	Investments—land, buildings, and equipment basis			
	Less accumulated depreciation (attach schedule)	-		
12	Investments—mortgage loans			
13	Investments—other (attach schedule)	7,109,192	5,879,632	6,370,160
14	Land, buildings, and equipment basis 🕨			
	Less accumulated depreciation (attach schedule)			
15	Other assets (describe ►)			
16	Total assets (to be completed by all filers—see the			
	instructions Also, see page 1, item I)	12,474,989	12,079,384	14,005,690
17	Accounts payable and accrued expenses			,,
18				
19 20 21 21	Loans from officers, directors, trustees, and other disqualified persons			
	Mortgages and other notes payable (attach schedule).			
	Other liabilities (describe)			
22	Total liabilities (add lines 17 through 22)	0	0	
23		0		
~	Foundations that follow SFAS 117, check here 🕨 🗌			
Balances 52 52	and complete lines 24 through 26 and lines 30 and 31.			
<u>E</u> 24	Unrestricted			
8 25	Temporarily restricted			
- 26 - 26	Permanently restricted			
pung 26	Foundations that do not follow SFAS 117, check here 🕨 🗹			
5	and complete lines 27 through 31.			
	Capital stock, trust principal, or current funds	1,117,034	1,117,034	
27 27 28 28	Paid-in or capital surplus, or land, bldg, and equipment fund	0	0	
	Retained earnings, accumulated income, endowment, or other funds	11,357,955	10,962,350	
Z 30	Total net assets or fund balances (see instructions)	12,474,989	12,079,384	
31	Total liabilities and net assets/fund balances (see instructions) .	12,474,989	12,079,384	
Part III	Analysis of Changes in Net Assets or Fund Balances			
	al net assets or fund balances at beginning of year—Part II, column (a), li	ne 30 (must agree with e	end-	
	year figure reported on prior year's return)		. 1	12,474,989
	er amount from Part I, line 27a		. 2	-124,970
	er increases not included in line 2 (itemize) ▶		3	0
_	l lines 1, 2, and 3	 احمد	. 4	12,350,019
	reases not included in line 2 (itemize)		5	270,635
6 Tota	al net assets or fund balances at end of year (line 4 minus line 5)—Part II	, column (b), line 30	. 6	12,079,384
			ŀ	orm 990-PF (2018)

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Part IV Capital Gains	and Losses for Tax on Invest	tment Income				
(a) List and describ 2-story brick wa	(b) How acquire P—Purchas D—Donatio	e Da	(c) te acquired o , day, yr)	(d) Date sold (mo , day, yr)		
1a See Addıtıonal Data Tabl	e					
b						
c						
d						
e						
(e) Gross sales price	(f) Depreciation allowed (or allowable)		(g) other basis pense of sale		Gain o	h) r (loss)) mınus (g)
a See Additional Data Tabl	e					
b						
c						
d						
e						
Complete only for assets	s showing gain in column (h) and ow	ned by the foundation	n on 12/31/69			I)
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69		(k) s of col (ı) ol (j), ıf any	со	I (k), but not	h) gain minus less than -0-) or om col (h))
a See Addıtıonal Data Tabl	e					
b						
C						
d						
e						
	gaın or (loss) as defined ın sections rt I, line 8, column (c) (see instructi	ons) If (loss), enter -	0-	2		322,413
Part V Qualification	Under Section 4940(e) for Re	educed Tax on Ne	t Investment	Income	:	
(For optional use by domestic p	private foundations subject to the se	ction 4940(a) tax on n	iet investment ir	ncome)		
If section 4940(d)(2) applies, le	eave this part blank					
Was the foundation liable for th	ne section 4942 tax on the distributa bt qualify under section 4940(e) Do			rıod?	<u> </u>	es 🗹 No
1 Enter the appropriate an	nount in each column for each year,	see instructions befor	e making any er	ntries		
(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharıta	ble-use assets	(col	(d) Distribution rati (b) divided by c	
2017	573,111		13,339,707			0 042963
2016	249,167		6,881,513			0 036208
2015	3,350		220,056			0 015223
2014						
2013						
2 Total of line 1, column (2		0 094394
number of years the four	o for the 5-year base period—divide ndation has been in existence if less incharitable-use assets for 2018 fron	than 5 years	· · · ·	3 4		0 031465 14,921,631
5 Multiply line 4 by line 3		·		5		469,509
	ent income (1% of Part I, line 27b)			6		5,569
	· · · · · · · · · · · · ·			7		475,078
	ions from Part XII, line 4 ,			8		550,000
	eater than line 7, check the box in Pa			using a 1º	√ tax rate Se	e the Part VI

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Pa	t VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948-see in	nstructi	ions)		
1a	Exempt operating foundations described in section 4940(d)(2), check here \blacktriangleright and enter "N/A" on line 1				
	Date of ruling or determination letter (attach copy of letter if necessary-see instructions)				
h	Domestic foundations that meet the section 4940(e) requirements in Part V, check	1			5,569
D	here \blacktriangleright \blacksquare and enter 1% of Part I, line 27b	-			
с	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12,				
2	col (b) Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)	2			Ο
3		3			5,569
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)	4			0
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0	5			5,569
6	Credits/Payments				
а	2018 estimated tax payments and 2017 overpayment credited to 2018 6a 0	<u>'</u> [
b	Exempt foreign organizations—tax withheld at source 6b	4			
С	Tax paid with application for extension of time to file (Form 8868) 6c 5,625	-			
d	Backup withholding erroneously withheld	4_1			
7	Total credits and payments Add lines 6a through 6d	7			5,625
8	Enter any penalty for underpayment of estimated tax. Check here 🛛 If Form 2220 is attached. 🛸	8			78
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9			22
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid.	10			
11	Enter the amount of line 10 to be Credited to 2019 estimated tax	11			
	rt VII-A Statements Regarding Activities				
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did			Ye	_
b	it participate or intervene in any political campaign? Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? (see Instruction		· -	.a	<u>No</u>
U	for definition).		1	ь	No
	If the answer is "Yes" to 1a or 1b , attach a detailed description of the activities and copies of any materials				+
	published or distributed by the foundation in connection with the activities				
с	Did the foundation file Form 1120-POL for this year?		1	.c	No
d	Enter the amount (If any) of tax on political expenditures (section 4955) imposed during the year				
	(1) On the foundation \triangleright \$0 (2) On foundation managers \triangleright \$0				
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers > \$ 0				
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?			2	No
2	If "Yes," attach a detailed description of the activities	•••	· –	-	
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles				
	of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes			3	No
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?			a	No
b	If "Yes," has it filed a tax return on Form 990-T for this year?			b	
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?		•	5	No
~	If "Yes," attach the statement required by General Instruction T				
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either By language in the governing instrument, or 				
	 By state legislation that effectively amends the governing instrument so that no mandatory directions 				
	that conflict with the state law remain in the governing instrument?			5 Ye	5
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c)	,			
_	and Part XV		· _	7 Ye	<u>s</u>
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)				
	► MA				
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney				
	General (or designate) of each state as required by General Instruction G? If "No," attach explanation .		8	b Ye	5
9	Is the foundation claiming status as a private operating foundation within the meaning of section $4942(j)(3)$				
	or 4942(j)(5) for calendar year 2018 or the taxable year beginning in 2018? See the instructions for Part XIV				
	If "Yes," complete Part XIV	•••	· 🖵	9	No
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their na				
	and addresses	<u>· · ·</u>	. 🗆	0	No

Form	990-PF (2018)		F	Page 5
Par	t VII-A Statements Regarding Activities (continued)			
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the			
	meaning of section 512(b)(13)? If "Yes," attach schedule See instructions	11		No
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had			
	advisory privileges? If "Yes," attach statement See instructions	12		No
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Yes	
	Website address N/A			
14	The books are in care of D BRIAN POTTS Telephone no (508) 6	55-673	35	
	Located at ▶25 N MAIN STREET 8 WAYLAND MA ZIP+4 ▶017	78		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 —check here	• •		
	and enter the amount of tax-exempt interest received or accrued during the year			
16	At any time during calendar year 2018, did the foundation have an interest in or a signature or other authority over		Yes	No
	a bank, securities, or other financial account in a foreign country?	16		No
	See the instructions for exceptions and filing requirements for FinCEN Form 114 If "Yes", enter the name of the foreign			
Des	country >			
Par	t VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
_	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1a	During the year did the foundation (either directly or indirectly)			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
	a disqualified person? Yes V No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available			
	for the benefit or use of a disqualified person)?			
	(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			
ь	after termination of government service, if terminating within 90 days)			
Ь	If any answer is "Yes" to $1a(1)-(6)$, did any of the acts fail to qualify under the exceptions described in Regulations	4.		N-
	section 53 4941(d)-3 or in a current notice regarding disaster assistance? See instructions	1b		No
_	Organizations relying on a current notice regarding disaster assistance check here			
с	that were not corrected before the first day of the tax year beginning in 2018?	1.		No
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private	1c		
2	operating foundation defined in section 4942(j)(3) or $4942(j)(5)$)			
а	At the end of tax year 2018, did the foundation have any undistributed income (lines 6d			
a				
	and 6e, Part XIII) for tax year(s) beginning before 2018 ⁷			
ь	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)			
U	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2)			
	to all years listed, answer "No" and attach statement—see instructions)	2b		
~	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here	20		
C	$\blacktriangleright 20 $, 20 , 20 , 20 , 20			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at			
34				
b	any time during the year?			
0	or disgualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved			
	by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3)			
	the lapse of the 10-, 15-, or 20-year first phase holding period?(Use Schedule C, Form 4720, to determine			
	If the foundation had excess business holdings in 2018).	Зb		
4-	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	30 4a		No
4a b	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its	- 44		
U	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2018?	4b		No
		4D		

Form **990-PF** (2018)

Form	990-	DF .	(2018)	
LOUIU	330-	יוחי		

5a	t VII-B		ing Addition of Miller	1101111 47 20 May De	e Required (continued)	,			
	During the	e year did the foundation p	ay or incur any amount to					Yes	No
	(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?					✓ No			
	(2) Influe	nce the outcome of any sp	ecific public election (see sec	tion 4955), or to carry					
	on, dı	rectly or indirectly, any vot	ter registration drive?		· · 🗌 Yes 🗄				
	(3) Provid	le a grant to an individual	for travel, study, or other sim	ular purposes?					
	(4) Provid	de a grant to an organizatio	on other than a charitable, etc	c , organization described					
	in sec	tion 4945(d)(4)(A)? See in	structions		· · 🗌 Yes 🗄				
	(5) Provid	le for any purpose other th	han religious, charitable, scier	itific, literary, or					
	educa	tional purposes, or for the	prevention of cruelty to child	ren or anımals?	· · 🗌 Yes 🖟				
b	,		did any of the transactions fa	. ,	ceptions described in				
	Regulation	ns section 53 4945 or in a	current notice regarding disas	ter assistance? See instr	uctions		5b		
	2	, ,	otice regarding disaster assist		· · · · · • •				
С		•	(4), does the foundation clair	•					
			re responsibility for the grant		••• 🗌 Yes [
	If "Yes," a	ttach the statement requir	ed by Regulations section 53	4945-5(d)					
6 a			receive any funds, directly or						
	•				L Yes D	✓ No			
Ь			pay premiums, directly or inc	lirectly, on a personal be	nefit contract?		6b		No
_		6b, file Form 8870							
7a			s the foundation a party to a p			🗸 No			
			y proceeds or have any net ir				7b		
8		•	ion 4960 tax on payment(s) o						
			e year?						
Par	t VIII		officers, Directors, Trus	tees, Foundation Ma	anagers, Highly Paid	Emplo	yees,		
		and Contractors							
	List all of								
1	LISC ALL OF	ficers, directors, trustee	es, foundation managers a			- 1			
<u> </u>		me and address	(b) Title, and average hours per week	(c) Compensation (If not paid, enter	(d) Contributions to employee benefit plans a	nali		ise acco llowanc	
	(a) Na	me and address	(b) Title, and average	(c) Compensation (If	(d) Contributions to	nali			
		me and address	(b) Title, and average hours per week	(c) Compensation (If not paid, enter	(d) Contributions to employee benefit plans a	nali			
	(a) Na	me and address	(b) Title, and average hours per week	(c) Compensation (If not paid, enter	(d) Contributions to employee benefit plans a	nali			
	(a) Na	me and address	(b) Title, and average hours per week	(c) Compensation (If not paid, enter	(d) Contributions to employee benefit plans a	nali			
	(a) Na	me and address	(b) Title, and average hours per week	(c) Compensation (If not paid, enter	(d) Contributions to employee benefit plans a	nali			
	(a) Na	me and address	(b) Title, and average hours per week	(c) Compensation (If not paid, enter	(d) Contributions to employee benefit plans a	nali			
	(a) Na	me and address	(b) Title, and average hours per week	(c) Compensation (If not paid, enter	(d) Contributions to employee benefit plans a	nali			
	(a) Na	me and address	(b) Title, and average hours per week	(c) Compensation (If not paid, enter	(d) Contributions to employee benefit plans a	nali			
	(a) Na	ame and address Data Table	(b) Title, and average hours per week	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans a deferred compensation		ther al	lowanc	
See /	(a) Na Additional D	ame and address Data Table ation of five highest-pai	(b) Title, and average hours per week devoted to position devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans a deferred compensation	na čo	nter "I	NONE.	:es
See /	(a) Na Additional D Compensa Name and a	ame and address pata Table ation of five highest-pai	 (b) Title, and average hours per week devoted to position d employees (other than t paid hours per week 	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans a deferred compensation L—see instructions). If f (d) Contributions to employee benefit	none, ei	nter "I	NONE.	"
See /	(a) Na Additional D Compensa Name and a	ame and address Data Table ation of five highest-pai	(b) Title, and average hours per week devoted to position demployees (other than t (b) Title, and average	(c) Compensation (If not paid, enter -0-) hose included on line :	(d) Contributions to employee benefit plans a deferred compensation	none, ei	nter "I	NONE.	"
2 (a)	(a) Na Additional D Compense Name and a mo	ame and address pata Table ation of five highest-pai	 (b) Title, and average hours per week devoted to position d employees (other than t paid hours per week 	(c) Compensation (If not paid, enter -0-) hose included on line :	(d) Contributions to employee benefit plans a deferred compensation L—see instructions). If i (d) Contributions to employee benefit plans and deferred	none, ei	nter "I	NONE.	"
2 (a)	(a) Na Additional D Compense Name and a mo	ame and address pata Table ation of five highest-pai	 (b) Title, and average hours per week devoted to position d employees (other than t paid hours per week 	(c) Compensation (If not paid, enter -0-) hose included on line :	(d) Contributions to employee benefit plans a deferred compensation L—see instructions). If i (d) Contributions to employee benefit plans and deferred	none, ei	nter "I	NONE.	"
See /	(a) Na Additional D Compense Name and a mo	ame and address pata Table ation of five highest-pai	 (b) Title, and average hours per week devoted to position d employees (other than t paid hours per week 	(c) Compensation (If not paid, enter -0-) hose included on line :	(d) Contributions to employee benefit plans a deferred compensation L—see instructions). If i (d) Contributions to employee benefit plans and deferred	none, ei	nter "I	NONE.	"
2 (a)	(a) Na Additional D Compense Name and a mo	ame and address pata Table ation of five highest-pai	 (b) Title, and average hours per week devoted to position d employees (other than t paid hours per week 	(c) Compensation (If not paid, enter -0-) hose included on line :	(d) Contributions to employee benefit plans a deferred compensation L—see instructions). If i (d) Contributions to employee benefit plans and deferred	none, ei	nter "I	NONE.	"
2 (a)	(a) Na Additional D Compense Name and a mo	ame and address pata Table ation of five highest-pai	 (b) Title, and average hours per week devoted to position d employees (other than t paid hours per week 	(c) Compensation (If not paid, enter -0-) hose included on line :	(d) Contributions to employee benefit plans a deferred compensation L—see instructions). If i (d) Contributions to employee benefit plans and deferred	none, ei	nter "I	NONE.	"
2 (a)	(a) Na Additional D Compense Name and a mo	ame and address pata Table ation of five highest-pai	 (b) Title, and average hours per week devoted to position d employees (other than t paid hours per week 	(c) Compensation (If not paid, enter -0-) hose included on line :	(d) Contributions to employee benefit plans a deferred compensation L—see instructions). If i (d) Contributions to employee benefit plans and deferred	none, ei	nter "I	NONE.	"
2 (a)	(a) Na Additional D Compense Name and a mo	ame and address pata Table ation of five highest-pai	 (b) Title, and average hours per week devoted to position d employees (other than t paid hours per week 	(c) Compensation (If not paid, enter -0-) hose included on line :	(d) Contributions to employee benefit plans a deferred compensation L—see instructions). If i (d) Contributions to employee benefit plans and deferred	none, ei	nter "I	NONE.	"
2 (a)	(a) Na Additional D Compense Name and a mo	ame and address pata Table ation of five highest-pai	 (b) Title, and average hours per week devoted to position d employees (other than t paid hours per week 	(c) Compensation (If not paid, enter -0-) hose included on line :	(d) Contributions to employee benefit plans a deferred compensation L—see instructions). If i (d) Contributions to employee benefit plans and deferred	none, ei	nter "I	NONE.	"
2 (a)	(a) Na Additional D Compense Name and a mo	ame and address pata Table ation of five highest-pai	 (b) Title, and average hours per week devoted to position d employees (other than t paid hours per week 	(c) Compensation (If not paid, enter -0-) hose included on line :	(d) Contributions to employee benefit plans a deferred compensation L—see instructions). If i (d) Contributions to employee benefit plans and deferred	none, ei	nter "I	NONE.	"
2 (a)	(a) Na Additional D Compense Name and a mo	ame and address pata Table ation of five highest-pai	 (b) Title, and average hours per week devoted to position d employees (other than t paid hours per week 	(c) Compensation (If not paid, enter -0-) hose included on line :	(d) Contributions to employee benefit plans a deferred compensation L—see instructions). If i (d) Contributions to employee benefit plans and deferred	none, ei	nter "I	NONE.	"

3	Five highest-paid independent contractors for professional	services (see instructions). If none, enter "NO	NE".
	(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
FIDU	JCIARY TRUST COMPANY	INVESTMENT AND ASSET MANAGEMENT	52,416
	FEDERAL STREET TON, MA 02110		
		_	
	I number of others receiving over \$50,000 for professional service.	s	
Lıst t	he foundation's four largest direct charitable activities during the tax year Inc nizations and other beneficiaries served, conferences convened, research pape		Expenses
1			
2			
3			
4			
Pa	rt IX-B Summary of Program-Related Investments	s (see instructions)	
D 1	escribe the two largest program-related investments made by the foundation	during the tax year on lines 1 and 2	Amount
-			
2			
A 3	ll other program-related investments See instructions		
•	II. Add lines 1 through 3		

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Par	Minimum Investment Return (All domestic foundations must complete this part Foreign foundation	ns,see	instructions)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc ,		
	purposes		
а	Average monthly fair market value of securities	1a	13,732,136
b	Average of monthly cash balances	1b	1,416,728
с	Fair market value of all other assets (see instructions)	1c	0
d	Total (add lines 1a, b, and c)	1d	15,148,864
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	0
3	Subtract line 2 from line 1d	3	15,148,864
4	Cash deemed held for charitable activities Enter 1 $1/2\%$ of line 3 (for greater amount, see		
	Instructions)	4	227,233
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	14,921,631
6	Minimum investment return. Enter 5% of line 5	6	746,082
Da	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations a	and cer	taın foreign
ГЧ	organizations check here 🕨 📙 and do not complete this part)	-	
1	Mınımum ınvestment return from Part X, lıne 6	1	746,082
2a	Tax on investment income for 2018 from Part VI, line 5. 2a 5,569		
b	Income tax for 2018 (This does not include the tax from Part VI) 2b		
с	Add lines 2a and 2b	2c	5,569
3	Distributable amount before adjustments Subtract line 2c from line 1	3	740,513
4	Recoveries of amounts treated as qualifying distributions	4	0
5	Add lines 3 and 4	5	740,513
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	740,513
Dar	XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc , purposes		
а	Expenses, contributions, gifts, etc —total from Part I, column (d), line 26	1a	550,000
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	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	550,000
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		
	Income Enter 1% of Part I, line 27b See Instructions	5	5,569
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	544,431
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the section 4940(e) reduction of tax in those years	he four	ndation qualifies for

Form 990-PF (2018) Part XIII Undistributed Income (see instructions)

I P	art XIIII Undistributed Income (see instruc	ctions)			
		(a) Corpus	(b) Years prior to 2017	(c) 2017	(d) 2018
1	Distributable amount for 2018 from Part XI, line 7				740,513
2	Undistributed income, if any, as of the end of 2018				
а	Enter amount for 2017 only.			184,600	
b	Total for prior years 20, 20, 20		0		
3	Excess distributions carryover, if any, to 2018				
а	From 2013				
b	From 2014				
с	From 2015				
d	From 2016				
е		-			
f	Total of lines 3a through e	0			
4	Qualifying distributions for 2018 from Part				
	XII, line 4 🕨 \$550,000				
а	Applied to 2017, but not more than line 2a			184,600	
b	Applied to undistributed income of prior years		0		
с	(Election required—see instructions)	0			
	required—see instructions)				365,400
	Applied to 2018 distributable amount.	0			363,400
	Remaining amount distributed out of corpus Excess distributions carryover applied to 2018	0			0
5	,	0			0
	(If an amount appears in column (d), the same amount must be shown in column (a))				
6	Enter the net total of each column as indicated below:				
а	Corpus Add lines 3f, 4c, and 4e Subtract line 5	0			
b	Prior years' undistributed income Subtract				
	line 4b from line 2b		0		
С	Enter the amount of prior years' undistributed				
	income for which a notice of deficiency has been issued, or on which the section 4942(a)				
	tax has been previously assessed.		0		
d	Subtract line 6c from line 6b Taxable amount				
			0		
е	Undistributed income for 2017 Subtract line				
	4a from line 2a Taxable amount—see			0	
f	Undistributed income for 2018 Subtract				
	lines 4d and 5 from line 1 This amount must				
	be distributed in 2019				375,113
7	Amounts treated as distributions out of				
	corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may				
	be required - see instructions).	0			
8	Excess distributions carryover from 2013 not				
	applied on line 5 or line 7 (see instructions)	0			
9	Excess distributions carryover to 2019. Subtract lines 7 and 8 from line 6a	0			
10	Analysis of line 9				
а	Excess from 2014				
b		1			
С	Excess from 2016	4			
d	Excess from 2017	4			
e	Excess from 2018				

Forr	n 990-PF (2	018)					Page 10
ŀ	art XIV	Private Operating Found	ations (see instru	uctions and Part \	/II-A, question 9)		
1a		dation has received a ruling or de n, and the ruling is effective for 20			erating		
b	Check box	to indicate whether the organizat	ion is a private opera	ating foundation des	scribed in section \square] 4942(j)(3) or 🗌] 4942(J)(5)
2a		esser of the adjusted net	Tax year		Prior 3 years		(e) Total
		om Part I or the minimum t return from Part X for each	(a) 2018	(b) 2017	(c) 2016	(d) 2015	
b	85% of lın	e2a					
с		distributions from Part XII, ach year listed					
d		ncluded in line 2c not used active conduct of exempt					
e	for active of	distributions made directly conduct of exempt activities ne 2d from line 2c					
3		a, b, or c for the test relied upon					
а		ternative test—enter					
	• •	of all assets					
	· ·	of assets qualifying section 4942(j)(3)(B)(i)					
b		nt" alternative test— enter 2/3					
		m investment return shown in					
с		e 6 for each year listed alternative test—enter					
C	••	support other than gross					
		ment income (interest,					
		ends, rents, payments curities loans (section					
)(5)), or royalties)					
		ort from general public					
		or more exempt nizations as provided in					
		n 4942(j)(3)(B)(III).					
		st amount of support an exempt organization					
	<u> </u>	investment income					
Pa		upplementary Information			foundation had	\$5,000 or more i	in
1	a	ssets at any time during th on Regarding Foundation Man		ructions.)			
_		anagers of the foundation who have		than 2% of the tota	l contributions recei	ved by the foundation	n
		close of any tax year (but only if					
D		anagers of the foundation who ow of a partnership or other entity)				arge portion of the	
2		on Regarding Contribution, Gr					
	Check here	e ► 🗹 ıf the foundation only mak	es contributions to p	preselected charitabl	le organizations and	does not accept	
	unsolicited	l requests for funds If the founda	tion makes gifts, gra	ants, etc. to individu			
	other cond	ditions, complete items 2a, b, c, a	nd d See instructior	IS			
а	The name,	address, and telephone number	or email address of t	he person to whom	applications should	be addressed	
b	The form I	n which applications should be su	bmitted and informa	tion and materials ti	hey should include		
	Any submi	ssion deadlines					

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

Part XV Supplementary Information (continued)

3 Grants and Contributions Paid During the Year or Approved for Future Payment

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

Form **990-PF** (2018)

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F

Part XVI-A Analysis of Income-Producing	Activities				
Enter gross amounts unless otherwise indicated		usiness income	Excluded by section		(e) Related or exempt function income
1 Program service revenue	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	(See instructions)
a					
b					
c d					
e					
f					
g Fees and contracts from government agencies					
 2 Membership dues and assessments. 3 Interest on savings and temporary cash investments 					
4 Dividends and interest from securities			14	294,464	
5 Net rental income or (loss) from real estate					
a Debt-financed property					
6 Net rental income or (loss) from personal property					
7 Other investment income.					
8 Gain or (loss) from sales of assets other than inventory			18	212 412	
9 Net income or (loss) from special events			18	322,413	
10 Gross profit or (loss) from sales of inventory					
11 Other revenue a					
b c					
d					
e [
12 Subtotal Add columns (b), (d), and (e).		0		616,877	
13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculated and the set of t			1	3	616,877
Part XVI-B Relationship of Activities to the		hment of Exem	pt Purposes		
Line No. Explain below how each activity for which in the accomplishment of the foundation's exercise instructions)					

Doub VV/TT	Information Regarding Transfers To and Transaction	s and Relationships With Noncharit	able	
Part XVII	Exempt Organizations	-		

_					
1	L Did the organization directly or indirectly engage in any of the following with any other organization described in section 501 (c) (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?				
а	Transfers from the reporting foundation to a noncharitable exempt organization of				
	(1) Cash	1a(1)		No	
	(2) Other assets	1a(2)		No	
b	Other transactions				
	(1) Sales of assets to a noncharitable exempt organization	1b(1)		No	
	(2) Purchases of assets from a noncharitable exempt organization.	1b(2)		No	
	(3) Rental of facilities, equipment, or other assets	1b(3)		No	
	(4) Reimbursement arrangements	1b(4)		No	
	(5) Loans or loan guarantees	1b(5)		No	
	(6) Performance of services or membership or fundraising solicitations.	1b(6)		No	
c	Sharing of facilities, equipment, mailing lists, other assets, or paid employees	1c		No	

d If the answer to any of the above is "Yes," complete the following schedule Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received

(a) Line No	(b) Amount involved	(c) Name of noncharitable exempt organization	(d) Description of transfers, transactions, and sharing arrangements
2a Is the fo	undation directly or indi	rectly affiliated with, or related to, one or mor	e tax-exempt organizations

described in section 501(c) (other than section 501(c)(3)) or in section 527? 🗌 Yes 🛛 No
--

DEDHAM, MA 02026

b If "Yes," complete the following schedule

(a) Name of organization	(b) Type of organization	(c) Description of relationship				

	of m	er penalties of perjury, I declare than ny knowledge and belief, it is true, c ch preparer has any knowledge						
Sign Here		*****		2019-10-14		****		May the IRS discuss this return with the preparer shown
	/	Signature of officer or trustee		Date		Title		below (see instr)? 🗹 Yes 🗆 No
		Print/Type preparer's name	Preparer's Sıgr	ature	Date		Check if self-	PTIN
Paid		BRIAN DLUGASCH					employed >	P01394490
Prepa Use (-1			Fırm's EIN ▶04-2759781
	-	Firm's address ► 850 WASHING	ITE 200				Phone no (781) 449-5825	

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d

List and describe the kind(s) of property sold (e g , real estate, (a) 2-story brick warehouse, or common stock, 200 shs MLC Co)	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
1 BRANDES INTERNATIONAL SMALL CAP EQUITY	Р	2018-01-01	2018-06-25
1 WCM FOCUSED INTL GROWTH INSTL	Р	2017-12-08	2018-09-17
ALPHABET INC CL A	Р	2016-08-11	2018-09-17
ALPHABET INC CL C	Р	2016-08-11	2018-09-17
AMAZON INC CM COM	Р	2016-10-31	2018-09-17
APPLE COMPUTER INC COM	Р	2015-08-18	2018-09-17
AT&T INC	Р	2016-06-14	2018-01-17
AT&T INC	Р	2016-06-14	2018-09-17
BRANDES INTERNATIONAL SMALL CAP EQUITY	Р	2017-06-02	2018-06-25
BRANDES INTERNATIONAL SMALL CAP EQUITY	Р	2017-06-02	2018-06-25

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h

(e) Gross sales price	Depreciation allowed (f) (or allowable)	Cost or other basis (g) plus expense of sale	Gaın or (loss) (h) (e) plus (f) mınus (g)
1,513		1,644	-131
27		25	2
11,686		8,137	3,549
11,623		7,895	3,728
48,261		19,736	28,525
22,036		11,693	10,343
18,280		20,235	-1,955
33,510		40,181	-6,671
43,534		50,000	-6,466
43,534		50,000	-6,466

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - I

Complete only for assets show	Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69				
(i) F M V as of 12/31/69	Adjusted basis (j) as of 12/31/69	Excess of col(ı) (k) over col(յ), ıf any	col (k), but not less than -0-) or (I) Losses (from col (h))		
			-131		
			2		
			3,549		
			3,728		
			28,525		
			10,343		
			-1,955		
			-6,671		
			-6,466		
			-6,466		

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d

List and describe the kind(s) of property sold (e g , real estate, (a) 2-story brick warehouse, or common stock, 200 shs MLC Co)	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
CHURCH & DWIGHT CO INC	Р	2017-06-02	2018-06-22
1 COCA-COLA CO COM	Р	2015-08-05	2018-06-22
FRANKLIN INT'L SMALL CAP GROWTH ADV	Р	2015-08-05	2018-09-17
ISHARES S&P 500 INDEX FUND	Р	2015-08-05	2018-01-17
ISHARES S&P 500 INDEX FUND	Р	2017-08-05	2018-09-17
JOHCM INTERNATIONAL SELECT I	Р	2017-06-02	2018-09-17
NIKE INC CL B COM	Р	2017-01-01	2018-01-17
PFIZER INC COM	Р	2015-08-05	2018-01-17
ROCHE HOLDING LTD SPONSORED ADR	Р	2016-06-14	2018-06-22
SIMON PROPERTY GROUP INC	Р	2016-06-14	2018-01-17

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h

(e) Gross sales price	Depreciation allowed (f) (or allowable)	Cost or other basis (g) plus expense of sale	Gaın or (loss) (h) (e) plus (f) mınus (g)
50,742		48,888	1,854
86,595		89,060	-2,465
49,000		50,354	-1,354
525,566		400,435	125,131
384,915		274,674	110,241
48,000		43,446	4,554
31,789		28,135	3,654
51,645		46,445	5,200
69,412		78,200	-8,788
66,110		77,338	-11,228

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - I

Complete only for assets show	Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69		Gains (Col (h) gain minus
(i) F M V as of 12/31/69	Adjusted basis (j) as of 12/31/69	Excess of col(ı) (k) over col(յ), ıf any	col (k), but not less than -0-) or (I) Losses (from col (h))
			1,854
			-2,465
			-1,354
			125,131
			110,241
			4,554
			3,654
			5,200
			-8,788
			-11,228

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d

List and describe the kind(s) of property sold (e g , real estate, (a) 2-story brick warehouse, or common stock, 200 shs MLC Co)	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
TORTOISE MLP FUND INC-RTS WI RTS	Р	2017-01-01	2018-07-13
1 TORTOISE MLP FUND INC-RTS WI RTS	Р	2017-01-01	2018-07-13
VANGUARD 500 INDEX FUND ADMIRAL SHARES	Р	2016-04-14	2018-09-17
WCM FOCUSED INTL GROWTH INSTL	Р	2017-01-01	2018-09-17
EXXON MOBIL CORP	Р	2015-08-01	2018-01-17
INTEL CORP	Р	2015-08-01	2018-09-17
PROCTER & GAMBLE COM	Р	2015-08-01	2018-06-22
PROCTER & GAMBLE COM	Р	2015-08-01	2018-09-17
CAPITAL GAINS DIVIDENDS	Р		

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h

(e) Gross sales price	Depreciation allowed (f) (or allowable)	Cost or other basis (g) plus expense of sale	Gaın or (loss) (h) (e) plus (f) mınus (g)
594			594
716			716
163,000		117,029	45,971
46,973		41,945	5,028
87,063		89,325	-2,262
22,877		15,008	7,869
77,348		80,092	-2,744
84,019		80,092	3,927
12,057			12,057

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - I

Complete only for assets show	Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69		Gains (Col (h) gain minus
(i) F M V as of 12/31/69	Adjusted basis (j) as of 12/31/69	Excess of col(ı) (k) over col(յ), ıf any	col (k), but not less than -0-) or (I) Losses (from col (h))
			594
			716
			45,971
			5,028
			-2,262
			7,869
			-2,744
			3,927
			12,057

Form 990PF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation

.

(a) Name and address	Title, and average hours per week (b) devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	Expense account, (e) other allowances
J BRIAN POTTS	TRUSTEE	18,589	0	0
25 N MAIN STREET 8 WAYLAND, MA 01778	2 00			
NOLLY E CORLEY	TRUSTEE	28,000	0	0
25 N MAIN STREET 8 WAYLAND, MA 01778	2 00			
JOSEPH ERDMAN	TRUSTEE	28,000	0	0
25 N MAIN STREET 8 WAYLAND, MA 01778	2 00			
KATHLEEN M MCCARTHY	TRUSTEE	28,000	0	0
25 N MAIN STREET 8 WAYLAND, MA 01778	2 00			
DAVID VAUGHN	TRUSTEE	28,000	0	0
25 N MAIN STREET 8 WAYLAND, MA 01778	2 00			

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

Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
ELLIE FUND FOR BREAST CANCER 200 RESERVOIR STREET NEEDHAM, MA 02494		PC	SUPPORT FOR CANCER PATIENTS AND THEIR FAMILIES	125,000
METRO WEST LEGAL SERVICES 63 FOUNTAIN ST STE 304 FRAMINGHAM, MA 01702		PC	FOR ITS LEGAL MEDICAL PARTNERSHIP	50,000
NEWTON WELLESLEY HOSPITAL 2014 WASHINGTON ST NEWTON, MA 02462		PC	FOR ADDITION TO THE ILENE BEAL ENDOWED CHIEF OF HEMATOLOGY/ONCOLOGY	200,000
Total			Þ 3a	550,000

Recipient Foundation Purpose of grant or If recipient is an individual, 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 SHELTER MUSIC BOSTON PC. PURPOSE DESIGNATED BY THE 50,000 1337 MASSACHUSETTS AVE 116 RECIPIENT ARLINGTON, MA 02476 THE BASE11 WALNUT PARK PC PURPOSE DESIGNATED BY THE 50,000 ROXBURY, MA 02199 RECIPIENT THE COURAGEOUS PARENTS NETWORK PC PURPOSE DESIGNATED BY THE 50,000 21 ROCHESTER ROAD RECIPIENT NEWTON, MA 02458 🕨 3a 550,000

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

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

Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
NEWTON WELLESLEY HOSPITAL 2014 WASHINGTON ST NEWTON, MA 02462		PC	FOR THE EMPLOYEE SOS FUND	25,000
Total				550,000

DLN: 93491287006089

TY 2018 Accounting Fees Schedule

Name: THE ILENE BEAL CHARITABLE FOUNDATION

EIN: 47-7387821

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
TAX PREPARATION FEES	5,603	5,603	0	0

TY 2018 Investments Corporate Stock Schedule

Name: THE ILENE BEAL CHARITABLE FOUNDATION EIN: 47-7387821

Investments Corporation Stock Schedule

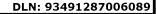
Name of Stock	End of Year Book Value	End of Year Fair Market Value
CORPORATE STOCK	4,460,517	5,896,295

TY 2018 Investments - Other Schedule

Name: THE ILENE BEAL CHARITABLE FOUNDATION EIN: 47-7387821

Investments Other Schedule 2

Category/ Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value
FIDUCIARY TRUST - FIXED INCOME INVESTMENTS	AT COST	1,862,629	1,780,196
FIDUCIARY TRUST - EQUITY INVESTMENTS	AT COST	3,811,479	4,415,391
FIDUCIARY TRUST - ALTERNATIVE INVESTMENTS	AT COST	180,524	149,573
CONVERTIBLE PROMISSORY NOTE	AT COST	25,000	25,000



TY 2018 Other Decreases Schedule

Name: THE ILENE BEAL CHARITABLE FOUNDATION

EIN: 47-7387821

Description	Amount
PRIOR PERIOD ADJUSTMENT TO COST	270,635

DLN: 93491287006089

TY 2018 Other Expenses Schedule

Name: THE ILENE BEAL CHARITABLE FOUNDATION EIN: 47-7387821

Other Expenses Schedule

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
ADR FEES	50	50	0	0

DLN: 93491287006089

TY 2018 Other Professional Fees Schedule

Name: THE ILENE BEAL CHARITABLE FOUNDATION

EIN: 47-7387821

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
INVESTMENT AND ASSET MANAGEMENT FEES	52,416	52,416	0	0

TY 2018 Taxes Schedule

Name: THE ILENE BEAL CHARITABLE FOUNDATION

EIN: 47-7387821

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
MA FILING FEES	500	0	0	0
FEDERAL TAXES	767	0	0	0
FOREIGN TAXES PAID	1,922	1,922	0	0