

For calendar year 2019, or tax year beginning 01-01-2019, and ending 12-31-2019

Name of foundation THE ARONS FAMILY FOUNDATION		A Employer identification number 04-3273304	
Number and street (or P O box number if mail is not delivered to street address) 1010 MEMORIAL DRIVE NO 11E		Room/suite	
City or town, state or province, country, and ZIP or foreign postal code CAMBRIDGE, MA 021384856		B Telephone number (see instructions) (617) 491-2484	
G Check all that apply <div><input type="checkbox"/> Initial return</div> <div><input type="checkbox"/> Initial return of a former public charity</div> <div><input type="checkbox"/> Final return</div> <div><input type="checkbox"/> Amended return</div> <div><input type="checkbox"/> Address change</div> <div><input type="checkbox"/> Name change</div>		D 1. Foreign organizations, check here 2 Foreign organizations meeting the 85% test, check here and attach computation	
H Check type of organization <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		E If private foundation status was terminated under section 507(b)(1)(A), check here	
I Fair market value of all assets at end of year (from Part II, col (c), line 16) \$ 1,203,885		F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here	
J Accounting method <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) (Part I, column (d) must be on cash basis)			

Part I Analysis of Revenue and Expenses (The total 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	(d) Disbursements for charitable purposes (cash basis only)
Revenue	1 Contributions, gifts, grants, etc , received (attach schedule)				
	2 Check <input checked="" type="checkbox"/> if the foundation is not required to attach Sch B				
	3 Interest on savings and temporary cash investments	1,593	1,593		
	4 Dividends and interest from securities	13,676	13,676		
	5a Gross rents				
	b Net rental income or (loss)				
	6a Net gain or (loss) from sale of assets not on line 10	103,544			
	b Gross sales price for all assets on line 6a				
		197,103			
	7 Capital gain net income (from Part IV, line 2)		0		
	8 Net short-term capital gain				
	9 Income modifications				
Operating and Administrative Expenses	10a Gross sales less returns and allowances				
	b Less Cost of goods sold				
	c Gross profit or (loss) (attach schedule)				
	11 Other income (attach schedule)				
	12 Total. Add lines 1 through 11	118,813	15,269	0	
	13 Compensation of officers, directors, trustees, etc	0	0	0	0
	14 Other employee salaries and wages				
	15 Pension plans, employee benefits				
	16a Legal fees (attach schedule)				
	b Accounting fees (attach schedule)	5,230	2,615	0	2,615
	c Other professional fees (attach schedule)				
	17 Interest				
	18 Taxes (attach schedule) (see instructions)	136	136	0	0
	19 Depreciation (attach schedule) and depletion				
	20 Occupancy				
	21 Travel, conferences, and meetings				
	22 Printing and publications				
	23 Other expenses (attach schedule)	12,581	12,548	0	33
	24 Total operating and administrative expenses. Add lines 13 through 23	17,947	15,299	0	2,648
	25 Contributions, gifts, grants paid	39,137			39,137
	26 Total expenses and disbursements. Add lines 24 and 25	57,084	15,299	0	41,785
	27 Subtract line 26 from line 12				
	a Excess of revenue over expenses and disbursements	61,729			
	b Net investment income (if negative, enter -0-)		0		
				0	
				0	

Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)	Beginning of year	End of year	
			(a) Book Value	(b) Book Value	(c) Fair Market Value
Assets	1 Cash—non-interest-bearing				
	2 Savings and temporary cash investments		55,534	112,750	112,750
	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 disqualified persons (attach schedule) (see instructions)				
	7 Other notes and loans receivable (attach schedule) ▶ _____ Less allowance for doubtful accounts ▶ _____				
	8 Inventories for sale or use				
	9 Prepaid expenses and deferred charges				
	10a Investments—U S and state government obligations (attach schedule)				
	b Investments—corporate stock (attach schedule)		567,324	571,837	1,091,135
	c 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)				
	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)		622,858	684,587	1,203,885
Liabilities	17 Accounts payable and accrued expenses				
	18 Grants payable				
	19 Deferred revenue				
	20 Loans from officers, directors, trustees, and other disqualified persons				
	21 Mortgages and other notes payable (attach schedule).				
	22 Other liabilities (describe ▶ _____)				
	23 Total liabilities (add lines 17 through 22)		0	0	
Net Assets or Fund Balances	Foundations that follow FASB ASC 958, check here ▶ <input type="checkbox"/> and complete lines 24, 25, 29 and 30.				
	24 Net assets without donor restrictions				
	25 Net assets with donor restrictions				
	Foundations that do not follow FASB ASC 958, check here ▶ <input checked="" type="checkbox"/> and complete lines 26 through 30.				
	26 Capital stock, trust principal, or current funds		0	0	
	27 Paid-in or capital surplus, or land, bldg, and equipment fund		0	0	
	28 Retained earnings, accumulated income, endowment, or other funds		622,858	684,587	
	29 Total net assets or fund balances (see instructions)		622,858	684,587	
	30 Total liabilities and net assets/fund balances (see instructions) .		622,858	684,587	

Part III Analysis of Changes in Net Assets or Fund Balances

1 Total net assets or fund balances at beginning of year—Part II, column (a), line 29 (must agree with end-of-year figure reported on prior year's return)	1	622,858
2 Enter amount from Part I, line 27a	2	61,729
3 Other increases not included in line 2 (itemize) ▶ _____	3	0
4 Add lines 1, 2, and 3	4	684,587
5 Decreases not included in line 2 (itemize) ▶ _____	5	0
6 Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 29 .	6	684,587

Part IV Capital Gains and Losses for Tax on Investment Income

(a) List and describe the kind(s) of property sold (e g , real estate, 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)
1a			

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
a			
b			
c			
d			
e			

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	
a			
b			
c			
d			
e			

2 Capital gain net income or (net capital loss)	{ If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7	2	
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6) If gain, also enter in Part I, line 8, column (c) (see instructions) If (loss), enter -0- in Part I, line 8		3	

Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income)

If section 4940(d)(2) applies, leave this part blank

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? ☐ Yes ☒ No

If "Yes," the foundation does not qualify under section 4940(e) Do not complete this part

1 Enter the appropriate amount in each column for each year, see instructions before making any entries

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col (b) divided by col (c))
2018	49,580	1,113,568	0 044524
2017	56,457	1,064,391	0 053042
2016	52,817	1,086,962	0 048591
2015	57,800	1,119,470	0 051632
2014	60,863	1,091,725	0 055749

2 Total of line 1, column (d)	2	0 253538
3 Average distribution ratio for the 5-year base period—divide the total on line 2 by 5 0, or by the number of years the foundation has been in existence if less than 5 years	3	0 050708
4 Enter the net value of noncharitable-use assets for 2019 from Part X, line 5	4	1,163,753
5 Multiply line 4 by line 3	5	59,012
6 Enter 1% of net investment income (1% of Part I, line 27b)	6	0
7 Add lines 5 and 6	7	59,012
8 Enter qualifying distributions from Part XII, line 4	8	41,785

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate See the Part VI instructions

Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see instructions)

1a	Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter "N/A" on line 1 Date of ruling or determination letter _____ (attach copy of letter if necessary—see instructions)		
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here <input type="checkbox"/> and enter 1% of Part I, line 27b	1	0
c	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col (b)		
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2	0
3	Add lines 1 and 2.	3	0
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	0
6	Credits/Payments		
a	2019 estimated tax payments and 2018 overpayment credited to 2019	6a	1,240
b	Exempt foreign organizations—tax withheld at source	6b	
c	Tax paid with application for extension of time to file (Form 8868)	6c	0
d	Backup withholding erroneously withheld	6d	0
7	Total credits and payments. Add lines 6a through 6d.	7	1,240
8	Enter any penalty for underpayment of estimated tax. Check here <input type="checkbox"/> if Form 2220 is attached	8	0
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed ▶	9	
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid ▶	10	1,240
11	Enter the amount of line 10 to be Credited to 2020 estimated tax ▶ 1,240 Refunded ▶	11	0

Part VII-A Statements Regarding Activities

	Yes	No
1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?	1a	No
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? (see Instructions for definition). 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	1b	No
c Did the foundation file Form 1120-POL for this year?	1c	No
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year (1) On the foundation ▶ \$ 0 (2) On foundation managers ▶ \$ 0		
e 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? If "Yes," attach a detailed description of the activities	2	No
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?	4a	No
b If "Yes," has it filed a tax return on Form 990-T for this year?	4b	
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? If "Yes," attach the statement required by General Instruction T	5	No
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?	6	No
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	Yes
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 .	8b	Yes
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 2019 or the taxable year beginning in 2019? 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 names and addresses	10	No

Part 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? Website address ▶ <u>N/A</u>	13	Yes	
14	The books are in care of ▶ <u>ELISSA ARONS</u> Telephone no ▶ <u>(617) 491-2484</u>			

Located at ▶ 1010 MEMORIAL DRIVE UNIT 11E CAMBRIDGE MA ZIP+4 ▶ 021384856

15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 —check here ▶ <input type="checkbox"/>			
	and enter the amount of tax-exempt interest received or accrued during the year ▶ 15			
16	At any time during calendar year 2019, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country?	16	Yes	No
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes", enter the name of the foreign country ▶			

Part 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.

1a	During the year did the foundation (either directly or indirectly)		Yes	No
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days). <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
b	If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions.	1b		
	Organizations relying on a current notice regarding disaster assistance check here. ▶ <input type="checkbox"/>			
c	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2019?	1c		No
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5))			
a	At the end of tax year 2019, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2019? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	If "Yes," list the years ▶ 20____, 20____, 20____, 20____			
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement—see instructions).	2b		
c	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here ▶ 20____, 20____, 20____, 20____			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
b	If "Yes," did it have excess business holdings in 2019 as a result of (1) any purchase by the foundation or disqualified persons after 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 2019).	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		No
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2019?	4b		No

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required (continued)

5a	During the year did the foundation pay or incur any amount to		Yes	No
(1)	Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(2)	Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(3)	Provide a grant to an individual for travel, study, or other similar purposes?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(4)	Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? See instructions.	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(5)	Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
b	If any answer is "Yes" to 5a(1)–(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance? See instructions.		5b	
	Organizations relying on a current notice regarding disaster assistance check here.	<input type="checkbox"/>		
c	If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? If "Yes," attach the statement required by Regulations section 53.4945–5(d)	<input type="checkbox"/> Yes <input type="checkbox"/> No		
6a	Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	6b	No
b	Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? If "Yes" to 6b, file Form 8870			
7a	At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	7b	
b	If "Yes", did the foundation receive any proceeds or have any net income attributable to the transaction?			
8	Is the foundation subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment during the year?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors

1 List all officers, directors, trustees, foundation managers and their compensation. See instructions				
(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
ELISSA LYNN BERON ARONS 1010 MEMORIAL DRIVE CAMBRIDGE, MA 02138	TRUSTEE 0 00	0	0	0
DARA ARONS 216 UPLAND ROAD CAMBRIDGE, MA 02140	TRUSTEE 0 00	0	0	0
REBECCA ARONS 126 DIVISADERO STREET SAN FRANCISCO, CA 94117	TRUSTEE 0 00	0	0	0
ABIGAIL ARONS 99 JERSEY STREET 11 SAN FRANCISCO, CA 94114	TRUSTEE 0 00	0	0	0
2 Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, enter "NONE."				
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE				
Total number of other employees paid over \$50,000.				0

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)
3 Five highest-paid independent contractors for professional services (see instructions). If none, enter "NONE".

(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	
All other program-related investments. See instructions.	
3	
Total. Add lines 1 through 3 ►	0

Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.)

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes		
a	Average monthly fair market value of securities.	1a	1,077,253
b	Average of monthly cash balances.	1b	104,222
c	Fair market value of all other assets (see instructions).	1c	0
d	Total (add lines 1a, b, and c).	1d	1,181,475
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation).	1e	0
2	Acquisition indebtedness applicable to line 1 assets.	2	0
3	Subtract line 2 from line 1d.	3	1,181,475
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions).	4	17,722
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4.	5	1,163,753
6	Minimum investment return. Enter 5% of line 5.	6	58,188

Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here ☐ and do not complete this part.)

1	Minimum investment return from Part X, line 6.	1	58,188
2a	Tax on investment income for 2019 from Part VI, line 5.	2a	
b	Income tax for 2019 (This does not include the tax from Part VI).	2b	
c	Add lines 2a and 2b.	2c	0
3	Distributable amount before adjustments. Subtract line 2c from line 1.	3	58,188
4	Recoveries of amounts treated as qualifying distributions.	4	0
5	Add lines 3 and 4.	5	58,188
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	58,188

Part XII Qualifying Distributions (see instructions)

1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
a	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26.	1a	41,785
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		
a	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	41,785
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	0
6	Adjusted qualifying distributions. Subtract line 5 from line 4.	6	41,785

Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years.

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2018	(c) 2018	(d) 2019
1 Distributable amount for 2019 from Part XI, line 7				58,188
2 Undistributed income, if any, as of the end of 2019				
a Enter amount for 2018 only.			0	
b Total for prior years 20____, 20____, 20____		0		
3 Excess distributions carryover, if any, to 2019				
a From 2014.				
b From 2015.				
c From 2016.				
d From 2017.				1,214
e From 2018.				
f Total of lines 3a through e.	1,214			
4 Qualifying distributions for 2019 from Part XII, line 4 ▶ \$ 41,785				
a Applied to 2018, but not more than line 2a			0	
b Applied to undistributed income of prior years (Election required—see instructions).		0		
c Treated as distributions out of corpus (Election required—see instructions).	0			
d Applied to 2019 distributable amount.				41,785
e Remaining amount distributed out of corpus	0			
5 Excess distributions carryover applied to 2019 (If an amount appears in column (d), the same amount must be shown in column (a))	1,214			1,214
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	0			
b Prior years' undistributed income Subtract line 4b from line 2b		0		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed.		0		
d Subtract line 6c from line 6b Taxable amount—see instructions		0		
e Undistributed income for 2018 Subtract line 4a from line 2a Taxable amount—see instructions			0	
f Undistributed income for 2019 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2020				15,189
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 2014 not applied on line 5 or line 7 (see instructions).	0			
9 Excess distributions carryover to 2020. Subtract lines 7 and 8 from line 6a	0			
10 Analysis of line 9				
a Excess from 2015.				
b Excess from 2016.				
c Excess from 2017.				
d Excess from 2018.				
e Excess from 2019.				

Part XIV Private Operating Foundations (see instructions and Part VII-A, question 9)

1a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2019, enter the date of the ruling. ▶					
b Check box to indicate whether the organization is a private operating foundation described in section <input type="checkbox"/> 4942(j)(3) or <input type="checkbox"/> 4942(j)(5)					
2a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed	Tax year	Prior 3 years			(e) Total
	(a) 2019	(b) 2018	(c) 2017	(d) 2016	
b 85% of line 2a					
c Qualifying distributions from Part XII, line 4 for each year listed					
d Amounts included in line 2c not used directly for active conduct of exempt activities					
e Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the alternative test relied upon					
a "Assets" alternative test—enter					
(1) 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					

Part XV Supplementary Information (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year—see instructions.)

1 Information Regarding Foundation Managers:	
a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000) (See section 507(d)(2)) ELISSA LYNNE BERON ARONS	
b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest	
2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:	
Check here <input checked="" type="checkbox"/> if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. to individuals or organizations under other conditions, complete items 2a, b, c, and d. See instructions.	
a The name, address, and telephone number or email address of the person to whom applications should be addressed	
b The form in which applications should be submitted and information and materials they should include	
c Any submission 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 any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i> See Additional Data Table				
Total			3a	39,137
b <i>Approved for future payment</i>				
Total			3b	0

Enter gross amounts unless otherwise indicated	Unrelated business income		Excluded by section 512, 513, or 514		(e) Related or exempt function income (See instructions)
	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	
1 Program service revenue					
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			14	1,593	
4 Dividends and interest from securities. . . .			14	13,676	
5 Net rental income or (loss) from real estate					
a Debt-financed property.					
b Not debt-financed property.					
6 Net rental income or (loss) from personal property					
7 Other investment income.					
8 Gain or (loss) from sales of assets other than inventory			18	103,544	
9 Net income or (loss) from special events					
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		118,813	0
13 Total. Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify calculations)			13	118,813	118,813

[illegible]

Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

1 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?		Yes	No
a 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 foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) (other than section 501(c)(3)) or in section 527? ☐ Yes ☒ No

b If "Yes," complete the following schedule

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

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Sign Here ▶ ***** 2020-06-17 *****

Signature of officer or trustee Date Title

May the IRS discuss this return with the preparer shown below (see instr.) ☒ Yes ☐ No

Paid Preparer Use Only	Print/Type preparer's name	Preparer's Signature	Date	Check if self-employed <input type="checkbox"/>	PTIN
	RICHARD J ECKSTEIN CPA		2020-06-15		P00301540
	Firm's name ▶ WALTER & SHUFFAIN PC				Firm's EIN ▶ 04-3236498
Firm's address ▶ 101 STATION DRIVE SUITE 250 WESTWOOD, MA 02090					Phone no (617) 447-2700

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 any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
ACADIA CENTER 31 MILK STREET SUITE 501 BOSTON, MA 02109	NONE	PUBLIC CHARITY	SUPPORT ORGANIZATION'S EXEMPT PURPOSE	500
AMERICAN JEWISH WORLD SERVICE 45 WEST 36TH STREET NEW YORK, NY 10018	NONE	PUBLIC CHARITY	SUPPORT ORGANIZATION'S EXEMPT PURPOSE	1,000
AMERICAN REPERTORY THEATER 64 BRATTLE STREET CAMBRIDGE, MA 02138	NONE	PUBLIC CHARITY	SUPPORT ORGANIZATION'S EXEMPT PURPOSE	500
Total ► 3a				39,137

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 any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year				
AMERICANS FOR PEACE NOW 2100 M STREET NW SUITE 619 WASHINGTON, DC 20037	NONE	PUBLIC CHARITY	SUPPORT ORGANIZATION'S EXEMPT PURPOSE	200
ASSOCIATION TO PRESERVE CAPE COD 484 MAIN STREET DENNIS, MA 02638	NONE	PUBLIC CHARITY	SUPPORT ORGANIZATION'S EXEMPT PURPOSE	100
BERON JEWISH OLDER ADULT SERVICES 1102 ATLANTIC AVENUE ATLANTIC CITY, NJ 08401	NONE	PUBLIC CHARITY	SUPPORT ORGANIZATION'S EXEMPT PURPOSE	1,000
Total ▶ 3a				39,137

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 any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year				
BOSTON HEALTH CARE FOR THE HOMELESS PROGRAM 780 ALBANY STREET BOSTON, MA 02118	NONE	PUBLIC CHARITY	SUPPORT ORGANIZATION'S EXEMPT PURPOSE	200
BOSTON PSYCHOANALYTIC INSTITUTE 141 HERRICK ROAD NEWTON CENTRE, MA 02459	NONE	PUBLIC CHARITY	SUPPORT ORGANIZATION'S EXEMPT PURPOSE	1,000
BOSTON SYMPHONY 301 MASSACHUSETTS AVENUE BOSTON, MA 02115	NONE	PUBLIC CHARITY	SUPPORT ORGANIZATION'S EXEMPT PURPOSE	1,000
Total ▶ 3a				39,137

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 any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year				
BOSTON WOMEN'S FUND 14 BEACON STREET BOSTON, MA 02108	NONE	PUBLIC CHARITY	SUPPORT ORGANIZATION'S EXEMPT PURPOSE	200
BREAST CANCER ACTION 657 MISSION STREET SUITE 302 SAN FRANCISCO, CA 94105	NONE	PUBLIC CHARITY	SUPPORT ORGANIZATION'S EXEMPT PURPOSE	2,100
BROAD INSTITUTE415 MAIN ST CAMBRIDGE, MA 02142	NONE	PUBLIC CHARITY	SUPPORT ORGANIZATION'S EXEMPT PURPOSE	300
Total ▶ 3a				39,137

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 any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
BROWN PEMBROKE CENTER 172 MEETING STREET PROVIDENCE, RI 02906	NONE	PUBLIC CHARITY	SUPPORT ORGANIZATION'S EXEMPT PURPOSE	1,000
BROWN SPORTS FOUNDATION BOX 1893 PROVIDENCE, RI 02912	NONE	PUBLIC CHARITY	SUPPORT ORGANIZATION'S EXEMPT PURPOSE	300
CAMBRIDGE PUBLIC LIBRARY FOUNDATION 449 BROADWAY CAMBRIDGE, MA 02138	NONE	PUBLIC CHARITY	SUPPORT ORGANIZATION'S EXEMPT PURPOSE	200
Total ► 3a				39,137

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 any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
CAMBRIDGE SCHOLARSHIP FUND 795 MASSACHUSETTS AVE CAMBRIDGE, MA 02139	NONE	PUBLIC CHARITY	SUPPORT ORGANIZATION'S EXEMPT PURPOSE	300
CAPE COD MODERN HOUSE TRUST PO BOX 1191 SOUTH WELLFLEET, MA 02663	NONE	PUBLIC CHARITY	SUPPORT ORGANIZATION'S EXEMPT PURPOSE	300
CELEBRITY SERIES 20 PARK PLAZA SUITE 1032 BOSTON, MA 02116	NONE	PUBLIC CHARITY	SUPPORT ORGANIZATION'S EXEMPT PURPOSE	1,000
Total ► 3a				39,137

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 any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year				
CENTER FOR COASTAL STUDIES 5 HOLWAY AVE PROVINCETOWN, MA 02657	NONE	PUBLIC CHARITY	SUPPORT ORGANIZATION'S EXEMPT PURPOSE	250
CHARLES RIVER CONSERVANCY 43 THORNDIKE STREET S3-3 CAMBRIDGE, MA 02141	NONE	PUBLIC CHARITY	SUPPORT ORGANIZATION'S EXEMPT PURPOSE	300
CHILDREN'S DAY SCHOOL 333 DOLORES STREET SAN FRANCISCO, CA 94110	NONE	PUBLIC CHARITY	SUPPORT ORGANIZATION'S EXEMPT PURPOSE	1,000
Total ► 3a				39,137

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 any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
CORNELL ORNITHOLOGY 159 SAPSUCKER WOODS ROAD ITHACA, NY 14850	NONE	PUBLIC CHARITY	SUPPORT ORGANIZATION'S EXEMPT PURPOSE	200
FACING HISTORY16 HURD ROAD BROOKLINE, MA 02445	NONE	PUBLIC CHARITY	SUPPORT ORGANIZATION'S EXEMPT PURPOSE	500
FRIENDS OF MT AUBURN CEMETERY 580 MT AUBURN STREET CAMBRIDGE, MA 02138	NONE	PUBLIC CHARITY	SUPPORT ORGANIZATION'S EXEMPT PURPOSE	200
Total ▶ 3a				39,137

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 any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
FRIENDS OF TOBIN197 VASSAL LANE CAMBRIDGE, MA 02138	NONE	PUBLIC CHARITY	SUPPORT ORGANIZATION'S EXEMPT PURPOSE	1,000
FULLER CRAFT MUSEUM 455 OAK STREET BROCKTON, MA 02301	NONE	PUBLIC CHARITY	SUPPORT ORGANIZATION'S EXEMPT PURPOSE	300
GREATER BOSTON FOOD BANK 70 S BAY AVENUE BOSTON, MA 02118	NONE	PUBLIC CHARITY	SUPPORT ORGANIZATION'S EXEMPT PURPOSE	200
Total ► 3a				39,137

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 any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
GUTHY JACKSON FOUNDATION 10525 VISTA SORRENTO PARKWAY SAN DIEGO, CA 92121	NONE	PUBLIC CHARITY	SUPPORT ORGANIZATION'S EXEMPT PURPOSE	200
HARVARD ART MUSEUM 32 QUINCY STREET CAMBRIDGE, MA 02138	NONE	PUBLIC CHARITY	SUPPORT ORGANIZATION'S EXEMPT PURPOSE	475
HARVARD MEDICAL SCHOOL PO BOX 419720 BOSTON, MA 02241	NONE	PUBLIC CHARITY	SUPPORT ORGANIZATION'S EXEMPT PURPOSE	1,000
Total ► 3a				39,137

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 any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
HUMAN RIGHTS CAMPAIGN 1640 RHODE ISLAND AVENUE NW WASHINGTON, DC 200363278	NONE	PUBLIC CHARITY	SUPPORT ORGANIZATION'S EXEMPT PURPOSE	200
INSTITUTE OF CONTEMPORARY ARTBOSTON 25 HARBOR SHORE DRIVE BOSTON, MA 02210	NONE	PUBLIC CHARITY	SUPPORT ORGANIZATION'S EXEMPT PURPOSE	300
ISABELLA GARDNER MUSEUM 25 EVANS WAY BOSTON, MA 02115	NONE	PUBLIC CHARITY	SUPPORT ORGANIZATION'S EXEMPT PURPOSE	300
Total ► 3a				39,137

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 any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year				
JEWISH FEDERATION OF CAPE COD 396 MAIN STREET HYANNIS, MA 02601	NONE	PUBLIC CHARITY	SUPPORT ORGANIZATION'S EXEMPT PURPOSE	200
JEWISH NATIONAL FUND 42 EAST 69TH STREET NEW YORK, NY 10021	NONE	PUBLIC CHARITY	SUPPORT ORGANIZATION'S EXEMPT PURPOSE	300
KENNETH SCHWARTZ CENTER 100 CAMBRIDGE STREET2100 BOSTON, MA 02114	NONE	PUBLIC CHARITY	SUPPORT ORGANIZATION'S EXEMPT PURPOSE	200
Total ▶ 3a				39,137

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 any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
MASS GENERAL CANCER CENTER 55 FRUIT STREET BOSTON, MA 02114	NONE	PUBLIC CHARITY	SUPPORT ORGANIZATION'S EXEMPT PURPOSE	500
MAYYIM HAYYIM 1838 WASHINGTON STREET NEWTON, MA 02466	NONE	PUBLIC CHARITY	SUPPORT ORGANIZATION'S EXEMPT PURPOSE	200
METROPOLITAN MUSEUM 1000 5TH AVENUE NEW YORK, NY 10028	NONE	PUBLIC CHARITY	SUPPORT ORGANIZATION'S EXEMPT PURPOSE	500
Total ► 3a				39,137

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 any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
MILTON ACADEMY170 CENTRE STREET MILTON, MA 02186	NONE	PUBLIC CHARITY	SUPPORT ORGANIZATION'S EXEMPT PURPOSE	500
MUSEUM OF FINE ARTS 465 HUNTINGTON AVENUE BOSTON, MA 02115	NONE	PUBLIC CHARITY	SUPPORT ORGANIZATION'S EXEMPT PURPOSE	2,000
MUSEUM OF MODERN ART 11 WEST 53RD STREET NEW YORK, NY 10019	NONE	PUBLIC CHARITY	SUPPORT ORGANIZATION'S EXEMPT PURPOSE	200
Total ▶ 3a				39,137

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 any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year				
NATIONAL ALLIANCE OF MENTAL ILLNESS 529 MAIN STREET SUITE 1M17 BOSTON, MA 02129	NONE	PUBLIC CHARITY	SUPPORT ORGANIZATION'S EXEMPT PURPOSE	200
NATIONAL AUDUBON SOCIETY 225 VARICK STREET NEW YORK, NY 10014	NONE	PUBLIC CHARITY	SUPPORT ORGANIZATION'S EXEMPT PURPOSE	200
NATIONAL PARKS AND CONSERVATION 777 6TH STREET NW SUITE 700 WASHINGTON, DC 20001	NONE	PUBLIC CHARITY	SUPPORT ORGANIZATION'S EXEMPT PURPOSE	200
Total ▶ 3a				39,137

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 any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year				
NE QUILT MUSEUM 18 SHATTUCK STREET LOWELL, MA 01852	NONE	PUBLIC CHARITY	SUPPORT ORGANIZATION'S EXEMPT PURPOSE	300
NEW ISRAEL FUND 437 NEWTONVILLE AVE 4 NEWTONVILLE, MA 02460	NONE	PUBLIC CHARITY	SUPPORT ORGANIZATION'S EXEMPT PURPOSE	200
NORTHEAST CLEAN ENERGY COUNCIL 250 SUMMER STREET 5 BOSTON, MA 02110	NONE	PUBLIC CHARITY	SUPPORT ORGANIZATION'S EXEMPT PURPOSE	500
Total ▶ 3a				39,137

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 any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year				
PAN MASS CHALLENGE 77 FOURTH AVENEUE NEEDHAM, MA 02494	NONE	PUBLIC CHARITY	SUPPORT ORGANIZATION'S EXEMPT PURPOSE	100
PHI BETTA KAPPA 1606 NEW HAMPSHIRE AVENUE NW WASHINGTON, DC 20009	NONE	PUBLIC CHARITY	SUPPORT ORGANIZATION'S EXEMPT PURPOSE	100
PHILLIPS BROOKS HOUSE 1 HARVARD YARD CAMBRIDGE, MA 02138	NONE	PUBLIC CHARITY	SUPPORT ORGANIZATION'S EXEMPT PURPOSE	200
Total ► 3a				39,137

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 any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
PINE PSYCHOANALYTIC CENTER PO BOX 920762 NEEDHAM, MA 02492	NONE	PUBLIC CHARITY	SUPPORT ORGANIZATION'S EXEMPT PURPOSE	1,000
PINE STREET INN 444 HARRISON AVENUE BOSTON, MA 02118	NONE	PUBLIC CHARITY	SUPPORT ORGANIZATION'S EXEMPT PURPOSE	500
PLANNED PARENTHOOD 1055 COMMONWEALTH AVENUE BOSTON, MA 02215	NONE	PUBLIC CHARITY	SUPPORT ORGANIZATION'S EXEMPT PURPOSE	500
Total ► 3a				39,137

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 any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
PROJECT BREAD145 BORDER STREET BOSTON, MA 02128	NONE	PUBLIC CHARITY	SUPPORT ORGANIZATION'S EXEMPT PURPOSE	200
RAILS TO TRAILS 2121 WARD COURT NW 5TH FLOOR WASHINGTON, DC 20037	NONE	PUBLIC CHARITY	SUPPORT ORGANIZATION'S EXEMPT PURPOSE	100
SILENT SPRING INSTITUE 320 NEVADA STREET 302 NEWTON, MA 02460	NONE	PUBLIC CHARITY	SUPPORT ORGANIZATION'S EXEMPT PURPOSE	200
Total ▶ 3a				39,137

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 any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
TEMPLE EMANUEL385 WARD STREET NEWTON, MA 02459	NONE	PUBLIC CHARITY	SUPPORT ORGANIZATION'S EXEMPT PURPOSE	2,012
TEREZIN MUSIC FOUNDATION ASTOR STATION BOX 206 BOSTON, MA 02123	NONE	PUBLIC CHARITY	SUPPORT ORGANIZATION'S EXEMPT PURPOSE	500
WELLFLEET AUDUBON291 US-6 SOUTH WELLFLEET, MA 02663	NONE	PUBLIC CHARITY	SUPPORT ORGANIZATION'S EXEMPT PURPOSE	1,500
Total ▶ 3a				39,137

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 any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
WELLFLEET CONSERVATION TRUST PO BOX 84 WELLFLEET, MA 02667	NONE	PUBLIC CHARITY	SUPPORT ORGANIZATION'S EXEMPT PURPOSE	200
WELLFLEET FIREFIGHTERS 10 LAWRENCE ROAD WELLFLEET, MA 02667	NONE	PUBLIC CHARITY	SUPPORT ORGANIZATION'S EXEMPT PURPOSE	200
WELLFLEET HARBOR ACTORS THEATER PO BOX 797 WELLFLEET, MA 02667	NONE	PUBLIC CHARITY	SUPPORT ORGANIZATION'S EXEMPT PURPOSE	1,000
Total ► 3a				39,137

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 any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
WELLFLEET HISTORICAL SOCIETY AND MUSEUM PO BOX 58 WELLFLEET, MA 02667	NONE	PUBLIC CHARITY	SUPPORT ORGANIZATION'S EXEMPT PURPOSE	200
WELLFLEET POLICE RELIEF ASSOCIATION INC 36 GROSS HILL RD WELLFLEET, MA 02667	NONE	PUBLIC CHARITY	SUPPORT ORGANIZATION'S EXEMPT PURPOSE	200
WELLFLEET PRESERVATION HALL 335 MAIN STREET PO BOX 3024 WELLFLEET, MA 02667	NONE	PUBLIC CHARITY	SUPPORT ORGANIZATION'S EXEMPT PURPOSE	2,000
Total ▶ 3a				39,137

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 any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
WGBH RADIO STATION1 GUEST STREET BOSTON, MA 02135	NONE	PUBLIC CHARITY	SUPPORT ORGANIZATION'S EXEMPT PURPOSE	1,000
WOMEN'S LUNCH PLATE 67 NEWBURY STREET BOSTON, MA 02116	NONE	PUBLIC CHARITY	SUPPORT ORGANIZATION'S EXEMPT PURPOSE	200
WOMEN'S RESEARCH AT YALE 135 COLLEGE STREET SUITE 220 NEW HAVEN, CT 06510	NONE	PUBLIC CHARITY	SUPPORT ORGANIZATION'S EXEMPT PURPOSE	200
Total ▶ 3a				39,137

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 any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year				
WOMR - OUTERMOST COMMUNITY RADIO PO BOX 975 PROVINCETOWN, MA 02657	NONE	PUBLIC CHARITY	SUPPORT ORGANIZATION'S EXEMPT PURPOSE	200
YALE ALUMNI FUND 157 CHURCH STREET NEW HAVEN, CT 065102100	NONE	PUBLIC CHARITY	SUPPORT ORGANIZATION'S EXEMPT PURPOSE	2,000
YALE MEDICAL SCHOOL 333 CEDAR STREET NEW HAVEN, CT 06510	NONE	PUBLIC CHARITY	SUPPORT ORGANIZATION'S EXEMPT PURPOSE	1,000
Total ▶ 3a				39,137

TY 2019 Accounting Fees Schedule**Name:** THE ARONS FAMILY FOUNDATION**EIN:** 04-3273304

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
ACCOUNTING FEES	5,230	2,615	0	2,615

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

TY 2019 Gain/Loss from Sale of Other Assets Schedule

Name: THE ARONS FAMILY FOUNDATION

EIN: 04-3273304

Gain Loss Sale Other Assets Schedule

Name	Date Acquired	How Acquired	Date Sold	Purchaser Name	Gross Sales Price	Basis	Basis Method	Sales Expenses	Total (net)	Accumulated Depreciation
ACCENTURE PLC IRELAN	2007-12	PURCHASED	2019-12		5,061	911		0	4,150	
RECKITT BENCKISER GR	1997-12	PURCHASED	2019-02		41,770	8,862		0	32,908	
ARAMARK COM	2017-05	PURCHASED	2019-12		10,921	10,285		0	636	
BERKSHIRE HATHAWAY	1997-09	PURCHASED	2019-07		31,013	4,369		0	26,644	
FEDEX CORP COM	2016-06	PURCHASED	2019-06		35,242	37,146		0	-1,904	
HONEYWELL INTL INC	2010-05	PURCHASED	2019-12		17,561	4,464		0	13,097	
MICROSOFT CORP COM	2017-05	PURCHASED	2019-12		3,851	1,712		0	2,139	
ONEX CORP SUB VTG IS	2007-10	PURCHASED	2019-12		37,216	18,925		0	18,291	
THERMO FISHER SCIENT	2015-11	PURCHASED	2019-12		14,468	6,885		0	7,583	

TY 2019 Investments Corporate Stock Schedule**Name:** THE ARONS FAMILY FOUNDATION**EIN:** 04-3273304**Investments Corporation Stock Schedule**

Name of Stock	End of Year Book Value	End of Year Fair Market Value
ACCENTURE PLC CLASS A	13,672	78,964
ALPHABET INC CAP STK CL C	36,082	40,111
ARAMARK COMMON	31,789	36,890
BERKSHIRE HATHAWAY CLASS B	13,384	73,613
BROOKFIELD ASSET MGT CLASS A	7,431	66,470
CME GROUP INC COM	35,731	35,126
COCA COLA COMPANY	37,880	42,896
DANAHER CORP COMMON	29,745	84,414
DUNKIN BRANDS GROUP INC	37,045	50,990
FORTIVE CORPORATION COMMON STOCK	28,921	38,195
HONEYWELL INTL INC COMMON	15,272	61,950
IAA INC COM	33,921	47,060
KAR AUCTION SVCS INC COM	31,975	31,051
MICROSOFT CORP	37,655	86,735
MONDELEZ INTL INC	42,461	52,326
ORACLE CORP COMMON	41,177	45,033
SERVICE CORP INTL COMMON	41,987	73,648
THERMO FISHER SCI COMMON	37,869	89,339
US BANCORP DEL COMMON	17,840	56,324

TY 2019 Other Expenses Schedule**Name:** THE ARONS FAMILY FOUNDATION**EIN:** 04-3273304**Other Expenses Schedule**

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
INVESTMENT FEES	12,548	12,548	0	0
OFFICE EXPENSES	33	0	0	33

TY 2019 Taxes Schedule**Name:** THE ARONS FAMILY FOUNDATION**EIN:** 04-3273304

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
FOREIGN TAXES PAID	136	136	0	0