

Form **990-PF**

**Return of Private Foundation**

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

OMB No 1545-0052

**2017**

Open to Public Inspection

Department of the Treasury  
Internal Revenue Service

Do not enter social security numbers on this form as it may be made public.  
Go to [www.irs.gov/Form990PF](http://www.irs.gov/Form990PF) for instructions and the latest information.

For calendar year 2017 or tax year beginning

, and ending

Name of foundation <b>THE PONAGANSETT FOUNDATION, INC. C/O PATTERSON BELKNAP WEBB &amp; TYLER LLP</b>		A Employer identification number <b>23-7179101</b>
Number and street (or P O box number if mail is not delivered to street address) <b>1133 AVENUE OF THE AMERICAS</b>	Room/suite <b>2200</b>	B Telephone number <b>212-336-2000</b>
City or town, state or province, country, and ZIP or foreign postal code <b>NEW YORK, NY 10036-6710</b>		C If exemption application is pending, check here <input type="checkbox"/>
G Check all that apply: <input type="checkbox"/> Initial return <input type="checkbox"/> Initial return of a former public charity <input type="checkbox"/> Final return <input type="checkbox"/> Amended return <input type="checkbox"/> Address change <input type="checkbox"/> Name change		D 1. Foreign organizations, check here <input type="checkbox"/> 2. Foreign organizations meeting the 85% test, check here and attach computation <input type="checkbox"/>
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 <input type="checkbox"/>
I Fair market value of all assets at end of year (from Part II, col. (c), line 16) <b>\$ 192,405.</b>	J Accounting method: <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____	F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/>

Part I Analysis of Revenue and Expenses <small>(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a))</small>	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
1 Contributions, gifts, grants, etc., received	419,734.		N/A	
2 Check <input type="checkbox"/> if the foundation is not required to attach Sch B				
3 Interest on savings and temporary cash investments	3,932.	3,932.		STATEMENT 2
4 Dividends and interest from securities	138,221.	138,221.		STATEMENT 3
5a Gross rents				
b Net rental income or (loss)				
6a Net gain or (loss) from sale of assets not on line 10	1,764,055.			STATEMENT 1
b Gross sales price for all assets on line 6a	8,581,596.			
7 Capital gain net income (from Part IV, line 2)		3,666,594.		
8 Net short-term capital gain				
9 Income modifications				
10a Gross sales less returns and allowances				
b Less Cost of goods sold				
c Gross profit or (loss)				
11 Other income	100.	0.		STATEMENT 4
12 Total. Add lines 1 through 11	2,326,042.	3,808,747.		
13 Compensation of officers, directors, trustees, etc	0.	0.		0.
14 Other employee salaries and wages				
15 Pension plans, employee benefits				
16a Legal fees				
b Accounting fees	5,008.	0.		5,008.
c Other professional fees	29,736.	17,259.		12,477.
17 Interest				
18 Taxes	1,778.	1,778.		0.
19 Depreciation and depletion				
20 Occupancy				
21 Travel, conferences, and meetings				
22 Printing and publications				
23 Other expenses	1,501.	368.		1,133.
24 Total operating and administrative expenses. Add lines 13 through 23	38,023.	19,405.		18,618.
25 Contributions, gifts, grants paid	8,534,935.			8,534,935.
26 Total expenses and disbursements. Add lines 24 and 25	8,572,958.	19,405.		8,553,553.
27 Subtract line 26 from line 12:				
a Excess of revenue over expenses and disbursements	-6,246,916.			
b Net investment income (if negative, enter -0-)		3,789,342.		
c Adjusted net income (if negative, enter -0-)			N/A	

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Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of-year amounts only		Beginning of year	End of year		
		(a) Book Value	(b) Book Value	(c) Fair Market Value			
Assets	1	Cash - non-interest-bearing		136,538.	39,047.	39,047.	
	2	Savings and temporary cash investments		856,411.	2,721.	2,721.	
	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					
	7	Other notes and loans receivable					
		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					
	b	Investments - corporate stock	STMT 9		4,039,537.	106,007.	105,770.
	c	Investments - corporate bonds					
	11	Investments - land, buildings, and equipment basis					
	Less accumulated depreciation						
12	Investments - mortgage loans						
13	Investments - other	STMT 10		1,407,055.	44,850.	44,867.	
14	Land, buildings, and equipment: basis						
	Less accumulated depreciation						
15	Other assets (describe)						
16	Total assets (to be completed by all filers - see the instructions. Also, see page 1, item 1)			6,439,541.	192,625.	192,405.	
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					
	22	Other liabilities (describe)					
	23	Total liabilities (add lines 17 through 22)			0.	0.	
Net Assets or Fund Balances	Foundations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 24 through 26, and lines 30 and 31.						
	24	Unrestricted		6,439,541.	192,625.		
	25	Temporarily restricted					
	26	Permanently restricted					
	Foundations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 27 through 31.						
	27	Capital stock, trust principal, or current funds					
	28	Paid-in or capital surplus, or land, bldg., and equipment fund					
	29	Retained earnings, accumulated income, endowment, or other funds					
	30	Total net assets or fund balances			6,439,541.	192,625.	
31	Total liabilities and net assets/fund balances			6,439,541.	192,625.		

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 30 (must agree with end-of-year figure reported on prior year's return)	1	6,439,541.
2	Enter amount from Part I, line 27a	2	-6,246,916.
3	Other increases not included in line 2 (itemize)	3	0.
4	Add lines 1, 2, and 3	4	192,625.
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 30	6	192,625.

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**Part IV Capital Gains and Losses for Tax on Investment Income**

(a) List and describe the kind(s) of property sold (for example, 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	1,151 SH. PROCTOR AND GAMBLE CO.	D	11/02/16	12/20/17
b	4,400 SH. INTL BUSINESS MACHINES CORP.	D	04/15/16	09/19/17
c	6,600 SH. INTL BUSINESS MACHINES CORP.	D	04/15/15	04/04/17
d	SALES OF PUBLICLY TRADED SECURITIES	P	VARIOUS	VARIOUS
e	CAPITAL GAINS DIVIDENDS			

  

(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 105,666.		2,541.	103,125.
b 635,340.			635,340.
c 1,153,821.		84.	1,153,737.
d 6,686,485.		4,912,377.	1,774,108.
e 284.			284.

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69.

(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any	(l) Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col. (h))
a			103,125.
b			635,340.
c			1,153,737.
d			1,774,108.
e			284.

  

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             } { If gain, also enter in Part I, line 8, column (c). If (loss), enter -0- in Part I, line 8             } 3	2	3,666,594.
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6):		N/A	

**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 doesn't qualify under section 4940(e). Do not complete this part.

1 Enter the appropriate amount in each column for each year; see the 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))
2016	1,490,545.	8,194,148.	.181904
2015	1,132,052.	7,031,806.	.160990
2014	1,154,350.	3,220,683.	.358418
2013	272,646.	3,283,089.	.083046
2012	265,415.	3,103,854.	.085511

  

2 Total of line 1, column (d)	2	.869869
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	.173974
4 Enter the net value of noncharitable-use assets for 2017 from Part X, line 5	4	5,506,599.
5 Multiply line 4 by line 3	5	958,005.
6 Enter 1% of net investment income (1% of Part I, line 27b)	6	37,893.
7 Add lines 5 and 6	7	995,898.
8 Enter qualifying distributions from Part XII, line 4	8	8,553,553.

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.

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**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 checked="" type="checkbox"/> and enter 1% of Part I, line 27b	1	37,893.
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	37,893.
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	37,893.
6	Credits/Payments:		
a	2017 estimated tax payments and 2016 overpayment credited to 2017	6a	18,577.
b	Exempt foreign organizations - tax withheld at source	6b	0.
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	18,577.
8	Enter any penalty for underpayment of estimated tax. Check here <input checked="" type="checkbox"/> if Form 2220 is attached	8	349.
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9	19,665.
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 2018 estimated tax <input type="checkbox"/> Refunded <input checked="" type="checkbox"/>	11	

**Part VII-A Statements Regarding Activities**

	Yes	No
1a		X
1b		X
1c		X
d		
e		
2		X
3		X
4a		X
4b		
5	X	
6	X	
7	X	
8a		
8b	X	
9		X
10		X

N/A

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**Part VII-A Statements Regarding Activities** (continued)

	Yes	No
11 At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule. See instructions		X
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		X
13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ▶ N/A	X	
14 The books are in care of ▶ PATTERSON BELKNAP WEBB & TYLER LLP Telephone no. ▶ 212-336-2000 Located at ▶ 1133 AVENUE OF THE AMERICAS, NEW YORK, NY ZIP+4 ▶ 10036-6710		
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 2017, 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? See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the foreign country ▶		X

**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.

	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? <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 checked="" type="checkbox"/> Yes <input 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. Organizations relying on a current notice regarding disaster assistance, check here ▶ <input type="checkbox"/>	1b	X
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 2017?	1c	X
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 2017, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2017? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "Yes," list the years ▶ _____		
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.) N/A	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. ▶ _____		
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 2017 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 2017.) N/A	3b	
4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	X
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 2017?	4b	X

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

		Yes	No
5a During the year, did the foundation pay or incur any amount to:			
(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	N/A	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?	N/A		
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		
b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		6b	X
If "Yes" to 6b, file Form 8870.			
7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
b If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction?	N/A	7b	

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

**1** List all officers, directors, trustees, and foundation managers and their compensation.

(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
SEE STATEMENT 12		0.	0.	0.

**2** Compensation of five highest-paid employees (other than those included on line 1). 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

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**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	4,980,165.
b	Average of monthly cash balances	1b	610,291.
c	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	5,590,456.
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	5,590,456.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	83,857.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	5,506,599.
6	Minimum investment return. Enter 5% of line 5	6	275,330.

**Part XI** Distributable Amount (see instructions) (Section 4942(i)(3) and (i)(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	275,330.
2a	Tax on investment income for 2017 from Part VI, line 5	2a	37,893.
b	Income tax for 2017. (This does not include the tax from Part VI.)	2b	
c	Add lines 2a and 2b	2c	37,893.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	237,437.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	237,437.
6	Deduction from distributable amount (see instructions)	6	100.
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	237,337.

**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	8,553,553.
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	8,553,553.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b	5	37,893.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	8,515,660.

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.

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**Part XIII** Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2016	(c) 2016	(d) 2017
1 Distributable amount for 2017 from Part XI, line 7				237,337.
2 Undistributed income, if any, as of the end of 2017				
a Enter amount for 2016 only			0.	
b Total for prior years:		0.		
3 Excess distributions carryover, if any, to 2017:				
a From 2012	111,698.			
b From 2013	110,216.			
c From 2014	1,005,066.			
d From 2015	887,600.			
e From 2016	1,093,684.			
f Total of lines 3a through e	3,208,264.			
4 Qualifying distributions for 2017 from Part XII, line 4: ▶ \$	8,553,553.			
a Applied to 2016, 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 2017 distributable amount				237,337.
e Remaining amount distributed out of corpus	8,316,216.			
5 Excess distributions carryover applied to 2017 (If an amount appears in column (d), the same amount must be shown in column (a))	0.			0.
6 Enter the net total of each column as indicated below:	11,524,480.			
a Corpus Add lines 3f, 4c, and 4e Subtract line 5				
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 2016. Subtract line 4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2017. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2018				0.
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 2012 not applied on line 5 or line 7	111,698.			
9 Excess distributions carryover to 2018. Subtract lines 7 and 8 from line 6a	11,412,782.			
10 Analysis of line 9:				
a Excess from 2013	110,216.			
b Excess from 2014	1,005,066.			
c Excess from 2015	887,600.			
d Excess from 2016	1,093,684.			
e Excess from 2017	8,316,216.			

**THE PONAGANSETT FOUNDATION, INC.**

Form 990-PF (2017)

**C/O PATTERSON BELKNAP WEBB & TYLER LLP**

**23-7179101**

Page 10

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

1 a. If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2017, enter the date of the ruling

b Check box to indicate whether the foundation is a private operating foundation described in section  4942(j)(3) or  4942(j)(5)

	Tax year				(e) Total
	(a) 2017	(b) 2016	Prior 3 years		
			(c) 2015	(d) 2014	
2 a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed					
b 85% of line 2a					
c Qualifying distributions from Part XII, line 4 for each year listed					
d Amounts included in line 2c not used directly for active conduct of exempt activities					
e Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c					
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).)

**MARY B. SHEA**

b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest.

**NONE**

**2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:**

Check here  if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc., to individuals or organizations under other conditions, complete items 2a, b, c, and d.

a The name, address, and telephone number or email address of the person to whom applications should be addressed:  
**N/A**

b The form in which applications should be submitted and information and materials they should include:  
**N/A**

c Any submission deadlines:  
**N/A**

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

THE PONAGANSETT FOUNDATION, INC.

Form 990-PF (2017)

C/O PATTERSON BELKNAP WEBB & TYLER LLP

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**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)				
<b>a Paid during the year</b>				
ALZHEIMER'S ASSOCIATION 225 N. MICHIGAN AVE. CHICAGO, IL 60601	N/A	PC	GENERAL SUPPORT	100.
AMERICAN DIABETES ASSOCIATION P.O. BOX 1834 MERRIFIELD, VA 22116	N/A	PC	GENERAL SUPPORT	100.
AMERICAN LUNG ASSOCIATION P.O. BOX 7000 ALBERT LEA, MN 56007-8000	N/A	PC	GENERAL SUPPORT	100.
AMERICAN TRANSPARENCY 225 N. WASHINGTON ST. HINSDALE, IL 60521	N/A	PC	GENERAL SUPPORT	3,000.
AMERICAN UNIVERSITY OF BEIRUT 3 DAG HAMMARSKJOLD PLAZA NEW YORK, NY 10017	N/A	PC	GENERAL SUPPORT	1,000.
<b>Total</b>			<b>SEE CONTINUATION SHEET(S)</b>	<b>8,534,935.</b>
<b>b Approved for future payment</b>				
<b>NONE</b>				
<b>Total</b>				<b>0.</b>

Form 990-PF (2017)





THE PONAGANSETT FOUNDATION, INC.

C/O PATTERSON BELKNAP WEBB & TYLER LLP

23-7179101

**Part XV** Supplementary Information

**3 Grants and Contributions Paid During the Year (Continuation)**

Recipient Name and address (home or business)	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
AMOGERONE VOLUNTEER FIRE CO. NO. 1, INC. P.O. BOX 121 GREENWICH, CT 06836	N/A	PC	GENERAL SUPPORT	5,000.
ARKANSAS CHILDREN'S HOSPITAL 1 CHILDREN'S WAY LITTLE ROCK, AR 72202	N/A	PC	GENERAL SUPPORT	1,500.
BETHESDA HOSPITAL FOUNDATION 2815 SOUTH SEACREST BOULEVARD BOYNTON BEACH, FL 33435	N/A	PC	GENERAL SUPPORT	50,000.
CARMELITE MONASTERY 25 WATSON AVENUE BARRINGTON, RI 02806	N/A	PC	GENERAL SUPPORT	35,000.
CHAPIN SCHOOL, LTD. 100 EAST END AVE NEW YORK, NY 10028	N/A	PC	GENERAL SUPPORT	200,000.
CHRISTIAN BROTHERS CENTER 635 OCEAN ROAD NARRAGANSETT, RI 02882	N/A	PC	GENERAL SUPPORT	100,000.
CYSTIC FIBROSIS FOUNDATION P.O. BOX 52074 PHOENIX, AZ 85072	N/A	PC	GENERAL SUPPORT	100.
DISABLED AMERICAN VETERANS 3725 ALEXANDRIA PIKE COLD SPRING, KY 41076	N/A	PC	GENERAL SUPPORT	500.
DOCTORS WITHOUT BORDERS 333 7TH AVENUE, 2ND FL. NEW YORK, NY 10021	N/A	PC	GENERAL SUPPORT	3,000.
EASTER SEALS P.O. BOX 768 ALBANY, NY 12201	N/A	PC	GENERAL SUPPORT	100.
<b>Total from continuation sheets</b>				<b>8,530,635.</b>

THE PONAGANSETT FOUNDATION, INC.

C/O PATTERSON BELKNAP WEBB & TYLER LLP

23-7179101

**Part XV** Supplementary Information

**3 Grants and Contributions Paid During the Year (Continuation)**

Recipient Name and address (home or business)	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
FIRST CHRISTIAN CHURCH P.O. BOX 245 NEW LONDON, MO 63459	N/A	PC	GENERAL SUPPORT	5,000.
FRESH AIR FUND 633 THIRD AVENUE NEW YORK, NY 10017	N/A	PC	GENERAL SUPPORT	1,000.
FRIENDS OF NATHANIEL WITHERELL, INC. 70 PARSONAGE ROAD GREENWICH, CT 06830	N/A	PC	GENERAL SUPPORT	3,000.
GEORGE C. MARSHALL FOUNDATION P.O. BOX 1600 LEXINGTON, VA 24450	N/A	PC	GENERAL SUPPORT	5,000.
GREENWICH EMERGENCY MEDICAL SERVICES, INC. 1111 E PUTNAM AVE. RIVERSIDE, CT 06878	N/A	PC	GENERAL SUPPORT	25,000.
GREENWICH HOSPITAL FOUNDATION 35 RIVER ROAD COS COB, CT 06807	N/A	PC	GENERAL SUPPORT	25,000.
GREENWICH LIBRARY 101 WEST PUTNAM AVE. GREENWICH, CT 06830	N/A	PC	GENERAL SUPPORT	5,000.
GUNN MEMORIAL LIBRARY & MUSEUM 5 WYKHAM ROAD WASHINGTON, CT 06793	N/A	PC	GENERAL SUPPORT	26,000.
HABITAT FOR HUMANITY P.O. BOX 1729 AMERICUS, GA 31709	N/A	PC	GENERAL SUPPORT	100.
INNER-CITY SCHOLARSHIP FUND 1011 FIRST AVENUE NEW YORK, NY 10022	N/A	PC	GENERAL SUPPORT	10,000.
Total from continuation sheets				

THE PONAGANSETT FOUNDATION, INC.

C/O PATTERSON BELKNAP WEBB & TYLER LLP

23-7179101

**Part XV** Supplementary Information

**3 Grants and Contributions Paid During the Year (Continuation)**

Recipient Name and address (home or business)	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
JOHN CARTER BROWN LIBRARY BROWN UNIVERSITY PROVIDENCE, RI 02906	N/A	PC	GENERAL SUPPORT	500.
LAKE WARAMAUG TASK FORCE 19 SACKETT RD. WARREN, CT 06754	N/A	PC	GENERAL SUPPORT	5,000.
LASALLE ACADEMY 612 ACADEMY AVENUE PROVIDENCE, RI 02908	N/A	PC	GENERAL SUPPORT	10,000.
LEUKEMIA & LYMPHOMA SOCIETY P.O. BOX 9031 PUTTSFIELD, MA 01202	N/A	PC	GENERAL SUPPORT	100.
LITTLE FERRY FREE PUBLIC LIBRARY 239 LIBERTY ST. LITTLE FERRY, NJ 07643	N/A	GOV	GENERAL SUPPORT	5,000.
MARCH OF DIMES P.O. BOX 5041 WHITE PLAINS, NY 10602	N/A	PC	GENERAL SUPPORT	100.
MARINE CORPS ASSOCIATION FOUNDATION P.O. BOX 1775 QUANTICO, VA 22134	N/A	PC	GENERAL SUPPORT	135.
MARINE CORPS HERITAGE FOUNDATION 3800 FETTLER PARK DR STE 104 DUMFRIES, VA 22025	N/A	PC	GENERAL SUPPORT	100.
MARINE CORPS TOYS FOR TOTS 18251 QUANTICO GATEWAY DRIVE TRIANGLE, VA 22172	N/A	PC	GENERAL SUPPORT	500.
MATIGNON HIGH SCHOOL 1 MATIGNON RD. CAMBRIDGE, MA 02140	N/A	GOV	GENERAL SUPPORT	25,000.
<b>Total from continuation sheets</b>				



THE PONAGANSETT FOUNDATION, INC.  
C/O PATTERSON BELKNAP WEBB & TYLER LLP

23-7179101

Part XV Supplementary Information				
3 Grants and Contributions Paid During the Year (Continuation)				
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)				
MEMORIAL SLOAN KETTERING CANCER CENTER 1275 YORK AVE. NEW YORK, NY 10065	N/A	PC	GENERAL SUPPORT	10,000.
NARRAGANSETT COUNCIL BSA P.O. BOX 14777 EAST PROVIDENCE, RI 02914	N/A	PC	GENERAL SUPPORT	7,775,000.
NATIONAL FEDERATION OF THE BLIND P.O. BOX 17252 BALTIMORE, MD 21297-1252	N/A	PC	GENERAL SUPPORT	100.
NATIONAL GLAUCOMA FOUNDATION 80 MAIDEN LANE NEW YORK, NY 10273	N/A	PC	GENERAL SUPPORT	100.
NATIONAL WILDLIFE FEDERATION P.O. BOX 1691 MERRIFIELD, VA 22116	N/A	PC	GENERAL SUPPORT	100.
NEW MILFORD HOSPITAL FOUNDATION 28 ELM ST. NEW MILFORD, CT 06776	N/A	PC	GENERAL SUPPORT	10,000.
NYU LANGONE MEDICAL CENTER ONE PARK AVENUE NEW YORK, NY 10016	N/A	PC	GENERAL SUPPORT	100,000.
ONE WEST 54TH STREET FOUNDATION 1 WEST 54TH STREET NEW YORK, NY 10019	N/A	PC	GENERAL SUPPORT	1,000.
OUR LADY OF PERPETUAL HELP CHURCH ROUTE 47 P.O. BOX #303 WASHINGTON DEPOT, CT 06794	N/A	PC	GENERAL SUPPORT	5,000.
PALM BEACH COUNTY FOOD BANK INC. P.O. BOX 3762 LANTANA, FL 33465	N/A	PC	GENERAL SUPPORT	500.
Total from continuation sheets				

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04-01-17

THE PONAGANSETT FOUNDATION, INC.  
C/O PATTERSON BELKNAP WEBB & TYLER LLP

23-7179101

**Part XV** Supplementary Information

**3 Grants and Contributions Paid During the Year (Continuation)**

Recipient Name and address (home or business)	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
SALVATION ARMY OF PALM BEACH COUNTY 2100 PALM BEACH LAKES BLVD. WEST PALM BEACH , FL 33409	N/A	PC	GENERAL SUPPORT	1,000.
SAMARITAN'S PURSE PO BOX 3000 BOONE, NC 28607	N/A	PC	GENERAL SUPPORT	26,500.
ST. JUDES CHILDREN'S RESEARCH HOSPITAL 262 DANNY THOMAS PLACE MEMPHIS, TN 38105	N/A	PC	GENERAL SUPPORT	11,000.
ST. MARGARET'S CHURCH 1098 PAWTUCKET AVENUE RUMFORD, RI 02916	N/A	PC	GENERAL SUPPORT	1,500.
ST. RAPHAEL ACADEMY 123 WALCOTT STREET PAWTUCKET, RI 02860	N/A	PC	GENERAL SUPPORT	25,000.
STEEP ROCK ASSOCIATION, INC. P.O. BOX 279 WASHINGTON DEPOT, CT 06794	N/A	PC	GENERAL SUPPORT	5,000.
SUMMIT JEWISH COMMUNITY CENTER 67 KENT PLACE BOULEVARD SUMMIT, NJ 07901	N/A	PC	GENERAL SUPPORT	3,000.
USO P.O. BOX 96860 WASHINGTON, DC 20090	N/A	PC	GENERAL SUPPORT	100.
VETERANS OF FOREIGN WARS OF THE U.S. 200 MARYLAND AVE. NE WASHINGTON, DC 20002	N/A	PC	GENERAL SUPPORT	1,000.
WASHINGTON AMBULANCE ASSOCIATION P.O. BOX 294 WASHINGTON DEPOT, CT 06794	N/A	PC	GENERAL SUPPORT	5,000.
<b>Total from continuation sheets</b>				



**Schedule B**  
(Form 990, 990-EZ,  
or 990-PF)

Department of the Treasury  
Internal Revenue Service

**Schedule of Contributors**

▶ Attach to Form 990, Form 990-EZ, or Form 990-PF.  
▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

OMB No 1545-0047

**2017**

Name of the organization

THE PONAGANSETT FOUNDATION, INC.  
C/O PATTERSON BELKNAP WEBB & TYLER LLP

Employer identification number

23-7179101

Organization type (check one)

Filers of:

Section:

Form 990 or 990-EZ

501(c)( ) (enter number) organization

4947(a)(1) nonexempt charitable trust **not** treated as a private foundation

527 political organization

Form 990-PF

501(c)(3) exempt private foundation

4947(a)(1) nonexempt charitable trust treated as a private foundation

501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.

**Note:** Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

**General Rule**

For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

**Special Rules**

For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000, or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1 Complete Parts I and II

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year ▶ \$ \_\_\_\_\_

**Caution:** An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

LHA For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2017)

Name of organization <b>THE PONAGANSETT FOUNDATION, INC.</b> <b>C/O PATTERSON BELKNAP WEBB &amp; TYLER LLP</b>	Employer identification number <b>23-7179101</b>
--	---

**Part I Contributors** (see instructions) Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	MARY SHEA 1991 REVOCABLE TRUST C/O PBWT, LLP, 1133 AVENUE OF THE AMERICAS  NEW YORK, NY 10036	\$ 99,734.	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions)
2	MARY SHEA 1991 REVOCABLE TRUST C/O PBWT, LLP, 1133 AVENUE OF THE AMERICAS  NEW YORK, NY 10036	\$ 320,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)



Name of organization **THE PONAGANSETT FOUNDATION, INC.**  
**C/O PATTERSON BELKNAP WEBB & TYLER LLP**

Employer identification number **23-7179101**

**Part III** Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year (Enter this info once) ▶ \$

Use duplicate copies of Part III if additional space is needed.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	

FORM 990-PF GAIN OR (LOSS) FROM SALE OF ASSETS STATEMENT 1

(A) DESCRIPTION OF PROPERTY	(B) GROSS SALES PRICE	(C) VALUE AT TIME OF ACQ.	(D) EXPENSE OF SALE	(E) MANNER ACQUIRED DEPREC.	(F) DATE ACQUIRED GAIN OR LOSS	DATE SOLD
1,151 SH. PROCTOR AND GAMBLE CO.	105,666.	99,734.	0.	DONATED	11/02/16	12/20/17

(A) DESCRIPTION OF PROPERTY	(B) GROSS SALES PRICE	(C) VALUE AT TIME OF ACQ.	(D) EXPENSE OF SALE	(E) MANNER ACQUIRED DEPREC.	(F) DATE ACQUIRED GAIN OR LOSS	DATE SOLD
4,400 SH. INTL BUSINESS MACHINES CORP.	635,340.	722,172.	0.	DONATED	04/15/16	09/19/17

(A) DESCRIPTION OF PROPERTY	(B) GROSS SALES PRICE	(C) VALUE AT TIME OF ACQ.	(D) EXPENSE OF SALE	(E) MANNER ACQUIRED DEPREC.	(F) DATE ACQUIRED GAIN OR LOSS	DATE SOLD
6,600 SH. INTL BUSINESS MACHINES CORP.	1,153,821.	1,083,258.	0.	DONATED	04/15/15	04/04/17

(A) DESCRIPTION OF PROPERTY	(B) GROSS SALES PRICE	(C) COST OR OTHER BASIS	(D) EXPENSE OF SALE	(E) MANNER ACQUIRED DEPREC.	(F) DATE ACQUIRED GAIN OR LOSS	DATE SOLD
SALES OF PUBLICLY TRADED SECURITIES	6,686,485.	4,912,377.	0.	PURCHASED	VARIOUS	VARIOUS

CAPITAL GAINS DIVIDENDS FROM PART IV 284.

TOTAL TO FORM 990-PF, PART I, LINE 6A 1,764,055.



FORM 990-PF INTEREST ON SAVINGS AND TEMPORARY CASH INVESTMENTS STATEMENT 2

SOURCE	(A) REVENUE PER BOOKS	(B) NET INVESTMENT INCOME	(C) ADJUSTED NET INCOME
INTEREST ON CASH BALANCES - THROUGH JP MORGAN	3,932.	3,932.	
TOTAL TO PART I, LINE 3	3,932.	3,932.	

FORM 990-PF DIVIDENDS AND INTEREST FROM SECURITIES STATEMENT 3

SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDENDS	(A) REVENUE PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME
DIVIDENDS	138,505.	284.	138,221.	138,221.	
TO PART I, LINE 4	138,505.	284.	138,221.	138,221.	

FORM 990-PF OTHER INCOME STATEMENT 4

DESCRIPTION	(A) REVENUE PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME
GRANT REFUND	100.	0.	
TOTAL TO FORM 990-PF, PART I, LINE 11	100.	0.	

FORM 990-PF ACCOUNTING FEES STATEMENT 5

DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
ACCOUNTING FEES	5,008.	0.		5,008.
TO FORM 990-PF, PG 1, LN 16B	5,008.	0.		5,008.

FORM 990-PF OTHER PROFESSIONAL FEES STATEMENT 6

DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
FOUNDATION ADMINISTRATION	12,477.	0.		12,477.
INVESTMENT MANAGEMENT	17,259.	17,259.		0.
TO FORM 990-PF, PG 1, LN 16C	29,736.	17,259.		12,477.

FORM 990-PF TAXES STATEMENT 7

DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
FOREIGN TAXES	1,778.	1,778.		0.
TO FORM 990-PF, PG 1, LN 18	1,778.	1,778.		0.

FORM 990-PF OTHER EXPENSES STATEMENT 8

DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
POSTAGE	145.	0.		145.
DUES AND SUBSCRIPTIONS	811.	345.		466.
INSURANCE	272.	0.		272.
FILING FEES	250.	0.		250.
OTHER INVESTMENT EXPENSES	23.	23.		0.
TO FORM 990-PF, PG 1, LN 23	1,501.	368.		1,133.

FORM 990-PF CORPORATE STOCK STATEMENT 9

DESCRIPTION	BOOK VALUE	FAIR MARKET VALUE
SEE ATTACHMENT A PAGE 1 OF 2	106,007.	105,770.
TOTAL TO FORM 990-PF, PART II, LINE 10B	106,007.	105,770.

FORM 990-PF OTHER INVESTMENTS STATEMENT 10

DESCRIPTION	VALUATION METHOD	BOOK VALUE	FAIR MARKET VALUE
SEE ATTACHMENT A PAGE 2 OF 2	COST	44,850.	44,867.
TOTAL TO FORM 990-PF, PART II, LINE 13		44,850.	44,867.

FORM 990-PF STATEMENT CONCERNING LIQUIDATION, TERMINATION, ETC. - PART VII-A, LINE 5 STATEMENT 11

EXPLANATION

ON SEPTEMBER 25, 2017, THE PONAGANSETT FOUNDATION, INC. MADE A CASH GRANT TO NARRAGANSETT COUNCIL BSA FOR \$6,950,000 FOR GENERAL OPERATING PURPOSES. THE PONAGANSETT FOUNDATION, INC. IS NOT PLANNING ON LIQUIDATING OR TERMINATING.

FORM 990-PF

PART VIII - LIST OF OFFICERS, DIRECTORS  
TRUSTEES AND FOUNDATION MANAGERS

STATEMENT 12

NAME AND ADDRESS	TITLE AND AVRG HRS/WK	COMPEN- SATION	EMPLOYEE BEN PLAN CONTRIB	EXPENSE ACCOUNT
MARY B. SHEA 1133 AVENUE OF THE AMERICAS, FLOOR 22 NEW YORK, NY 10036	PRESIDENT & TRUSTEE 0.50	0.	0.	0.
ROBERT B. SHEA 1133 AVENUE OF THE AMERICAS, FLOOR 22 NEW YORK, NY 10036	VICE PRESIDENT & TRUSTEE 0.50	0.	0.	0.
BRIAN K. GREEN 1133 AVENUE OF THE AMERICAS, FLOOR 22 NEW YORK, NY 10036	TRUSTEE 0.50	0.	0.	0.
MICHAEL S. ARLEIN 1133 AVENUE OF THE AMERICAS, FLOOR 22 NEW YORK, NY 10036	VICE PRESIDENT & TRUSTEE 0.50	0.	0.	0.
MIMI J. KAPLANSKY 1133 AVENUE OF THE AMERICAS, FLOOR 22 NEW YORK, NY 10036	TREASURER, ASST. SECRETARY, TRUSTEE 0.50	0.	0.	0.
MARY ELLEN LEYDEN 1133 AVENUE OF THE AMERICAS, FLOOR 22 NEW YORK, NY 10036	SECRETARY & ASST TREASURER 0.50	0.	0.	0.
STEPHEN J. SCHREIBER 1133 AVENUE OF THE AMERICAS, FLOOR 22 NEW YORK, NY 10036	TRUSTEE 0.50	0.	0.	0.
TOTALS INCLUDED ON 990-PF, PAGE 6, PART VIII		0.	0.	0.