

Form 990-PF

Return of Private Foundation

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

OMB No 1545-0052

2018

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 for instructions and the latest information.

Open to Public Inspection

For calendar year 2018 or tax year beginning

, and ending

Name of foundation: PONAGANSETT FOUNDATION, INC. C/O PATTERSON BELKNAP WEBB & TYLER LLP. A Employer identification number: 23-7179101. B Telephone number: 212-336-2000. H Check type of organization: Section 501(c)(3) exempt private foundation. I Fair market value of all assets at end of year: \$102,807. J Accounting method: Cash.

Table with 4 columns: (a) Revenue and expenses per books, (b) Net investment income, (c) Adjusted net income, (d) Disbursements for charitable purposes. Rows include Revenue (1-12), Operating and Administrative Expenses (13-25), and Summary (26-27).

3/4

SCANNED MAY 10 2019

RECEIVED APR 26 2019 IRS-OSC

PONAGANSETT FOUNDATION, INC.

Form 990-PF (2018)

C/O PATTERSON BELKNAP WEBB & TYLER LLP

23-7179101

Page 2

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	39,047.		
	2 Savings and temporary cash investments	2,721.	2,433.	2,433.
	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			
	c Investments - corporate bonds			
	11 Investments - land, buildings, and equipment basis			
Less: accumulated depreciation				
12 Investments - mortgage loans				
13 Investments - other	STMT 8	150,857.	106,587.	100,374.
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 I)		192,625.	109,020.	102,807.
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) BANK OVERDRAFT		0.	68,362.
23 Total liabilities (add lines 17 through 22)		0.	68,362.	
Net Assets or Fund Balances	Foundations that follow SFAS 117, check here and complete lines 24 through 26, and lines 30 and 31. <input checked="" type="checkbox"/>			
	24 Unrestricted		192,625.	40,658.
	25 Temporarily restricted			
	26 Permanently restricted			
	Foundations that do not follow SFAS 117, check here and complete lines 27 through 31. <input type="checkbox"/>			
	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		192,625.	40,658.	
31 Total liabilities and net assets/fund balances		192,625.	109,020.	

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	192,625.
2 Enter amount from Part I, line 27a	2	-151,967.
3 Other increases not included in line 2 (itemize)	3	0.
4 Add lines 1, 2, and 3	4	40,658.
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	40,658.

Form 990-PF (2018)

PONAGANSETT FOUNDATION, INC.

Form 990-PF (2018)

C/O PATTERSON BELKNAP WEBB & TYLER LLP

23-7179101

Page 3

[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 SALES OF PUBLICLY TRADED SECURITIES	P	VARIOUS	VARIOUS
b CAPITAL GAINS DIVIDENDS			
c			
d			
e			

(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 64,573.		64,967.	-394.
b 339.			339.
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) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any	
a			-394.
b			339.
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	-55.
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). If (loss), enter -0- in Part I, line 8		3	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))
2017	8,515,660.	5,506,599.	1.546446
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

2 Total of line 1, column (d)	2	2.330804
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	.466161
4 Enter the net value of noncharitable-use assets for 2018 from Part X, line 5	4	191,014.
5 Multiply line 4 by line 3	5	89,043.
6 Enter 1% of net investment income (1% of Part I, line 27b)	6	22.
7 Add lines 5 and 6	7	89,065.
8 Enter qualifying distributions from Part XII, line 4 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.	8	930,490.

PONAGANSETT FOUNDATION, INC.

Form 990-PF (2018)

C/O PATTERSON BELKNAP WEBB & TYLER LLP

23-7179101

Page 4

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	22.
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	22.
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	22.
6	Credits/Payments:		
a	2018 estimated tax payments and 2017 overpayment credited to 2018	6a	20,000.
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	20,000.
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	19,978.
11	Enter the amount of line 10 to be: Credited to 2019 estimated tax 19,978. Refunded	11	0.

Part VII-A Statements Regarding Activities

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

N/A

Form 990-PF (2018)

PONAGANSETT FOUNDATION, INC.

Form 990-PF (2018)

C/O PATTERSON BELKNAP WEBB & TYLER LLP

23-7179101

Page 5

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 ▶ <u>N/A</u>	X	
14 The books are in care of ▶ <u>PATTERSON BELKNAP WEBB & TYLER LLP</u> Telephone no. ▶ <u>212-336-2000</u> Located at ▶ <u>1133 AVENUE OF THE AMERICAS, NEW YORK, NY</u> ZIP+4 ▶ <u>10036-6710</u>		
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	15	N/A
16 At any time during calendar year 2018, 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 ▶	16	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 2018?	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 2018, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2018? <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 2018 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 2018.) 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 2018?	4b	X

Form 990-PF (2018)

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 Organizations relying on a current notice regarding disaster assistance, check here	N/A	
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).	N/A	
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? If "Yes" to 6b, file Form 8870.		X
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	
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(s) 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, 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 9		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

PONAGANSETT FOUNDATION, INC.

Form 990-PF (2018)

C/O PATTERSON BELKNAP WEBB & TYLER LLP

23-7179101

Page 7

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

3 Five highest-paid independent contractors for professional services. 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 N/A	
2	
3	
4	

Part IX-B Summary of Program-Related Investments

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.	Amount
1 N/A	
2	
All other program-related investments. See instructions.	
3	
Total. Add lines 1 through 3 ▶	0.

Form 990-PF (2018)

PONAGANSETT FOUNDATION, INC.

Form 990-PF (2018)

C/O PATTERSON BELKNAP WEBB & TYLER LLP

23-7179101

Page 8

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	128,745.
b	Average of monthly cash balances	1b	65,178.
c	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	193,923.
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	193,923.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	2,909.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	191,014.
6	Minimum investment return. Enter 5% of line 5	6	9,551.

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	9,551.
2a	Tax on investment income for 2018 from Part VI, line 5	2a	22.
b	Income tax for 2018. (This does not include the tax from Part VI.)	2b	
c	Add lines 2a and 2b	2c	22.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	9,529.
4	Recoveries of amounts treated as qualifying distributions	4	1,000.
5	Add lines 3 and 4	5	10,529.
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	10,529.

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	930,490.
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	930,490.
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	22.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	930,468.

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.

Form 990-PF (2018)

PONAGANSETT FOUNDATION, INC.

Form 990-PF (2018)

C/O PATTERSON BELKNAP WEBB & TYLER LLP

23-7179101

Page 9

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2017	(c) 2017	(d) 2018
1 Distributable amount for 2018 from Part XI, line 7				10,529.
2 Undistributed income, if any, as of the end of 2018				
a Enter amount for 2017 only			0.	
b Total for prior years:		0.		
3 Excess distributions carryover, if any, to 2018:				
a From 2013	110,216.			
b From 2014	1,005,066.			
c From 2015	887,600.			
d From 2016	1,093,684.			
e From 2017	8,316,216.			
f Total of lines 3a through e	11,412,782.			
4 Qualifying distributions for 2018 from Part XII, line 4: ▶ \$ 930,490.				
a Applied to 2017, 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 2018 distributable amount				10,529.
e Remaining amount distributed out of corpus	919,961.			
5 Excess distributions carryover applied to 2018 (if an amount appears in column (d), the same amount must be shown in column (e))	0.			0.
6 Enter the net total of each column as indicated below:	12,332,743.			
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 2017. Subtract line 4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2018. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2019				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 2013 not applied on line 5 or line 7	110,216.			
9 Excess distributions carryover to 2019. Subtract lines 7 and 8 from line 6a	12,222,527.			
10 Analysis of line 9:				
a Excess from 2014	1,005,066.			
b Excess from 2015	887,600.			
c Excess from 2016	1,093,684.			
d Excess from 2017	8,316,216.			
e Excess from 2018	919,961.			

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 2018, 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) 2018	(b) 2017	(c) 2016	(d) 2015	
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

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

Form 990-PF (2018)

23-7179101 Page 11

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 Paid during the year				
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 FOUNDATION FOR THE BLIND P.O. BOX 96051 WASHINGTON, DC 20090	N/A	PC	GENERAL SUPPORT	100.
AMERICAN KIDNEY FUND P.O. BOX 1837 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.
Total	SEE CONTINUATION SHEET(S)			909,300.
b Approved for future payment				
NONE				
Total				0.

Form 990-PF (2018)

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
AMERICAN PARKINSON DISEASE ASSOCIATION PARKINSON PLAZA 135 PARKINSON AVE STATEN ISLAND, NY 10305	N/A	PC	GENERAL SUPPORT	100.
AMERICAN UNIVERSITY OF BEIRUT 3 DAG HAMMARSKJOLD PLAZA NEW YORK, NY 10017	N/A	PC	GENERAL SUPPORT	1,000.
ARKANSAS CHILDREN'S HOSPITAL 1 CHILDREN'S WAY LITTLE ROCK, AR 72202	N/A	PC	GENERAL SUPPORT	1,000.
BETHESDA HOSPITAL FOUNDATION 2815 SOUTH SEACREST BOULEVARD BOYNTON BEACH, FL 33435	N/A	PC	GENERAL SUPPORT	10,000.
CALVARY CHRISTIAN ACADEMY 2401 WEST CYPRESS CREEK ROAD FORT LAUDERDALE, FL 33309	N/A	PC	GENERAL SUPPORT	10,000.
CALVARY HOSPITAL P.O. BOX 235 HARTSDALE, NY 10530	N/A	PC	GENERAL SUPPORT	11,000.
CANCER CARE P.O. BOX 1837 NEW YORK, NY 10113-1837	N/A	PC	GENERAL SUPPORT	100.
CARMELITE MONASTERY 25 WATSON AVENUE BARRINGTON, RI 02806	N/A	PC	GENERAL SUPPORT	20,000.
CENTRAL PARK CONSERVANCY 14 EAST 60TH ST NEW YORK, NY 10022	N/A	PC	GENERAL SUPPORT	100.
CHAPIN SCHOOL, LTD. 100 EAST END AVE NEW YORK, NY 10028	N/A	PC	GENERAL SUPPORT	100,000.
Total from continuation sheets				908,800.

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
CHRISTIAN BROTHERS CENTER ENDOWMENT FUND 635 OCEAN ROAD NARRAGANSETT, RI 02882	N/A	PC	GENERAL SUPPORT	10,000.
CITYMEALS-ON-WHEELS P.O. BOX 4005 CHURCH ST. STATION NEW YORK, NY 10277	N/A	PC	GENERAL SUPPORT	100.
CYSTIC FIBROSIS FOUNDATION P.O. BOX 52074 PHOENIX, AZ 85072	N/A	PC	GENERAL SUPPORT	100.
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.
FEEDING WESTCHESTER 200 CLEARBROOK ROAD ELMSFORD, NY 10523	N/A	PC	GENERAL SUPPORT	500.
FIRST CHRISTIAN CHURCH P.O. BOX 245 NEW LONDON, MO 63459	N/A	PC	GENERAL SUPPORT	5,000.
FOLDS OF HONOR 5800 NORTH PATRIOT DRIVE OWASSO, OK 74055	N/A	PC	GENERAL SUPPORT	1,000.
FRIENDS OF NATHANIEL WITHERELL 70 PARSONAGE ROAD GREENWICH, CT 06830	N/A	PC	GENERAL SUPPORT	3,000.
GATESTONE INSTITUTE 750 THIRD AVENUE NEW YORK, NY 10017-0300	N/A	PC	GENERAL SUPPORT	3,000.
Total from continuation sheets				

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
GEORGE C. MARSHALL FOUNDATION P.O. BOX 1600 LEXINGTON, VA 24450	N/A	PC	GENERAL SUPPORT	5,000.
GREENWICH EMERGENCY MEDICAL SERVICE, INC. 1111 E PUTNAM AVE. RIVERSIDE, CT 06878	N/A	PC	GENERAL SUPPORT	10,000.
GREENWICH LIBRARY 101 WEST PUTNAM AVE. GREENWICH, CT 06830	N/A	PC	GENERAL SUPPORT	5,000.
GREENWISH HOSPITAL FOUNDATION 35 RIVER ROAD COS COB, CT 06807	N/A	PC	GENERAL SUPPORT	45,000.
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.
LA SALLE ACADEMY 612 ACADEMY AVENUE PROVIDENCE, RI 02908	N/A	PC	GENERAL SUPPORT	500,000.
LEUKEMIA & LYMPHOMA SOCIETY P.O. BOX 9031 PUTTSFIELD, MA 01202	N/A	PC	GENERAL SUPPORT	100.
MAKE A WISH FOUNDATION 4742 N. 24TH STREET, STE. 400 PHOENIX, AZ 85016	N/A	PC	GENERAL SUPPORT	100.
MARCH OF DIMES P.O. BOX 5041 WHITE PLAINS, NY 10602	N/A	PC	GENERAL SUPPORT	100.
Total from continuation sheets				

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)				
MARINE CORPS ASSOCIATION & FOUNDATION P.O. BOX 1775 QUANTICO, VA 22134	N/A	PC	GENERAL SUPPORT	100.
MATIGNON HIGH SCHOOL 1 MATIGNON RD. CAMBRIDGE, MA 02140	N/A	GOV	GENERAL SUPPORT	25,000.
MEMORIAL SLOAN-KETTERING CANCER CENTER 1275 YORK AVE. NEW YORK, NY 10065	N/A	PC	GENERAL SUPPORT	10,000.
MULTIPLE SCLEROSIS ASSOCIATION OF AMERICA P.O. BOX 4527 NEW YORK, NY 10163	N/A	PC	GENERAL SUPPORT	100.
MUSCULAR DYSTROPHY ASSOCIATION P.O. BOX 78960 PHOENIX, AZ 85062	N/A	PC	GENERAL SUPPORT	100.
NATIONAL FEDERATION OF THE BLIND P.O. BOX 17252 BALTIMORE, MD 21297-1252	N/A	PC	GENERAL SUPPORT	100.
NATIONAL GLAUCOMA RESEARCH 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	5,000.
NYU LANGONE MEDICAL CENTER ONE PARK AVENUE NEW YORK, NY 10016	N/A	PC	GENERAL SUPPORT	25,000.
Total from continuation sheets				

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
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	15,000.
PARALYZED VETERANS OF AMERICA 801 18TH ST. NW WASHINGTON, DC 20006	N/A	PC	GENERAL SUPPORT	100.
RONALD MCDONALD HOUSE CHARITIES, INC. 26345 NETWORK PLAZA CHICAGO, IL 60673-1263	N/A	PC	GENERAL SUPPORT	1,000.
SALVATION ARMY OF PALM BEACH COUNTY 2100 PALM BEACH LAKED BLVD. WEST PALM BEACH, FL 33409	N/A	PC	GENERAL SUPPORT	2,000.
SAMARITAN'S PURSE PO BOX 3000 BOONE, NC 28607	N/A	PC	GENERAL SUPPORT	25,000.
ST. JUDE CHILDREN'S RESEARCH HOSPITAL 262 DANNY THOMAS PLACE MEMPHIS, TN 38105	N/A	PC	GENERAL SUPPORT	1,000.
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 P.O. BOX 279 WASHINGTON DEPOT, CT 06794	N/A	PC	GENERAL SUPPORT	5,000.
Total from continuation sheets				

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
STONY BROOK FOUNDATION, INC. 230 ADMINISTRATION BUILDING STONY BROOK UNIVERSITY STONY BROOK , NY 11790	N/A	PC	GENERAL SUPPORT	5,000.
SUMMIT JEWISH COMMUNITY CENTER, SUMMIT, NJ PO BOX 268 SUMMIT, NJ 07902	N/A	PC	GENERAL SUPPORT	3,000.
USO P.O. BOX 96860 WASHINGTON, DC 20090	N/A	PC	GENERAL SUPPORT	100.
WASHINGTON AMBULANCE ASSOCIATION P.O. BOX 294 WASHINGTON DEPOT, CT 06794	N/A	PC	GENERAL SUPPORT	1,000.
WASHINGTON CITIZEN'S SCHOLARSHIP FOUNDATION, INC. P.O. BOX 243 WASHINGTON DEPOT, CT 06794	N/A	PC	GENERAL SUPPORT	1,000.
WASHINGTON COMMUNITY FUND, INC. P.O. BOX 1213 WASHINGTON DEPOT, CT 06793	N/A	PC	GENERAL SUPPORT	1,000.
WASHINGTON VOLUNTEER FIRE DEPARTMENT P.O. BOX 244 WASHINGTON DEPOT, CT 06794	N/A	PC	GENERAL SUPPORT	1,000.
Total from continuation sheets				

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated.

	Unrelated business income		Excluded by section 512, 513, or 514		(e) Related or exempt function income
	(a) Business code	(b) Amount	(c) Exclu- sion 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	38.	
4 Dividends and interest from securities			14	2,822.	
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	-55.	
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue:					
a GRANT REFUND			01	1,000.	
b _____					
c _____					
d _____					
e _____					
12 Subtotal. Add columns (b), (d), and (e)		0.		3,805.	0.
13 Total. Add line 12, columns (b), (d), and (e)				13 3,805.	

(See worksheet in line 13 instructions to verify calculations.)

Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes

Line No. ▼	Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes).

PONAGANSETT FOUNDATION, INC.

Form 990-PF (2018)

C/O PATTERSON BELKNAP WEBB & TYLER LLP

23-7179101

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		X
(2) Other assets		X
b Other transactions:		
(1) Sales of assets to a noncharitable exempt organization		X
(2) Purchases of assets from a noncharitable exempt organization		X
(3) Rental of facilities, equipment, or other assets		X
(4) Reimbursement arrangements		X
(5) Loans or loan guarantees		X
(6) Performance of services or membership or fundraising solicitations		X
c Sharing of facilities, equipment, mailing lists, other assets, or paid employees		X
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.		

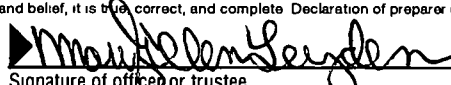
(a) Line no	(b) Amount involved	(c) Name of noncharitable exempt organization	(d) Description of transfers, transactions, and sharing arrangements
		N/A	

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.

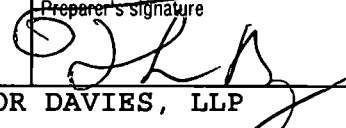
(a) Name of organization	(b) Type of organization	(c) Description of relationship
N/A		

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  **Signature of officer or trustee** **14/5/19** **Date** **ASSISTANT TREASURER** **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 THOMAS F. BLANEY	Preparer's signature 	Date 3/18/19	Check <input type="checkbox"/> if self-employed	PTIN P00234022
Firm's name PKF O'CONNOR DAVIES, LLP	Firm's EIN 27-1728945			
Firm's address 665 FIFTH AVENUE NEW YORK, NY 10022			Phone no. 212-286-2600	

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 for the latest information.

OMB No 1545-0047

2018

Name of the organization

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 foundationCheck 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 (entering "N/A" in column (b) instead of the contributor name and address), 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) (2018)

Name of organization PONAGANSETT FOUNDATION, INC. C/O PATTERSON BELKNAP WEBB & TYLER LLP	Employer identification number 23-7179101
--	---

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	\$ 815,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
_____	_____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
_____	_____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
_____	_____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
_____	_____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
_____	_____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization PONAGANSETT FOUNDATION, INC. C/O PATTERSON BELKNAP WEBB & TYLER LLP	Employer identification number 23-7179101
--	---

Part II **Noncash Property** (see instructions) Use duplicate copies of Part II if additional space is needed

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$ _____	
		\$ _____	
		\$ _____	
		\$ _____	
		\$ _____	
		\$ _____	
		\$ _____	

Name of organization 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	
_____		_____	
_____		_____	
_____		_____	
_____	(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	
_____		_____	
_____		_____	
_____		_____	
_____	(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	
_____		_____	
_____		_____	
_____		_____	
_____	(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	
_____		_____	
_____		_____	
_____		_____	

FORM 990-PF INTEREST ON SAVINGS AND TEMPORARY CASH INVESTMENTS STATEMENT 1

SOURCE	(A) REVENUE PER BOOKS	(B) NET INVESTMENT INCOME	(C) ADJUSTED NET INCOME
INTEREST ON CASH BALANCES - THROUGH JP MORGAN	38.	38.	
TOTAL TO PART I, LINE 3	38.	38.	

FORM 990-PF DIVIDENDS AND INTEREST FROM SECURITIES STATEMENT 2

SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDENDS	(A) REVENUE PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME
DIVIDENDS	3,161.	339.	2,822.	2,822.	
TO PART I, LINE 4	3,161.	339.	2,822.	2,822.	

FORM 990-PF OTHER INCOME STATEMENT 3

DESCRIPTION	(A) REVENUE PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME
GRANT REFUND	1,000.	0.	
TOTAL TO FORM 990-PF, PART I, LINE 11	1,000.	0.	

FORM 990-PF ACCOUNTING FEES STATEMENT 4

DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
ACCOUNTING FEES	5,062.	0.		5,062.
TO FORM 990-PF, PG 1, LN 16B	5,062.	0.		5,062.

FORM 990-PF	OTHER PROFESSIONAL FEES			STATEMENT 5
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
FOUNDATION ADMINISTRATION	15,216.	0.		15,216.
INVESTMENT MANAGEMENT	363.	363.		0.
TO FORM 990-PF, PG 1, LN 16C	15,579.	363.		15,216.

FORM 990-PF	TAXES			STATEMENT 6
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
FEDERAL EXCISE TAX	39,665.	0.		0.
TO FORM 990-PF, PG 1, LN 18	39,665.	0.		0.

FORM 990-PF	OTHER EXPENSES			STATEMENT 7
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
FILING FEES	50.	0.		50.
POSTAGE	99.	0.		99.
INSURANCE	272.	0.		272.
DUES AND SUBSCRIPTIONS	745.	254.		491.
TO FORM 990-PF, PG 1, LN 23	1,166.	254.		912.

FORM 990-PF	OTHER INVESTMENTS		STATEMENT 8
DESCRIPTION	VALUATION METHOD	BOOK VALUE	FAIR MARKET VALUE
SEE ATTACHMENT A PAGE 1 OF 2	COST	85,890.	79,774.
SEE ATTACHMENT A PAGE 2 OF 2	COST	20,697.	20,600.
TOTAL TO FORM 990-PF, PART II, LINE 13		106,587.	100,374.

FORM 990-PF

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

STATEMENT 9

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	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.	