

Return of Organization Exempt From Income Tax

2017

Open to Public Inspection

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

▶ Do not enter social security numbers on this form as it may be made public.

▶ Go to www.irs.gov/Form990 for instructions and the latest information.

Department of the Treasury
Internal Revenue Service

A For the 2017 calendar year, or tax year beginning January 1, 2017 , and ending December 31, 2017																										
B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td colspan="2">C Name of organization: GREATER WORCESTER COMMUNITY FOUNDATION</td> <td>D Employer identification number 04-2572276</td> </tr> <tr> <td colspan="2">Doing business as</td> <td rowspan="2">E Telephone number 508-755-0980</td> </tr> <tr> <td>Number and street (or P.O. box if mail is not delivered to street address)</td> <td>Room/suite</td> </tr> <tr> <td colspan="2">370 MAIN STREET</td> <td rowspan="2">G Gross receipts \$ 10,866,112</td> </tr> <tr> <td colspan="2">City or town, state or province, country, and ZIP or foreign postal code WORCESTER, MA 01608</td> </tr> <tr> <td colspan="2">F Name and address of principal officer: ANN T. LISI 370 MAIN STREET WORCESTER, MA 01608</td> <td>H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. (see instructions)</td> </tr> <tr> <td colspan="2">I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () ◀ (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527</td> <td>H(c) Group exemption number ▶</td> </tr> <tr> <td colspan="2">J Website: ▶ GREATERWORCESTER.ORG</td> <td></td> </tr> <tr> <td colspan="2">K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶</td> <td>L Year of formation: 1975 M State of legal domicile: MA</td> </tr> </table>	C Name of organization: GREATER WORCESTER COMMUNITY FOUNDATION		D Employer identification number 04-2572276	Doing business as		E Telephone number 508-755-0980	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	370 MAIN STREET		G Gross receipts \$ 10,866,112	City or town, state or province, country, and ZIP or foreign postal code WORCESTER, MA 01608		F Name and address of principal officer: ANN T. LISI 370 MAIN STREET WORCESTER, MA 01608		H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. (see instructions)	I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () ◀ (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		H(c) Group exemption number ▶	J Website: ▶ GREATERWORCESTER.ORG			K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶		L Year of formation: 1975 M State of legal domicile: MA
C Name of organization: GREATER WORCESTER COMMUNITY FOUNDATION		D Employer identification number 04-2572276																								
Doing business as		E Telephone number 508-755-0980																								
Number and street (or P.O. box if mail is not delivered to street address)	Room/suite																									
370 MAIN STREET		G Gross receipts \$ 10,866,112																								
City or town, state or province, country, and ZIP or foreign postal code WORCESTER, MA 01608																										
F Name and address of principal officer: ANN T. LISI 370 MAIN STREET WORCESTER, MA 01608		H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. (see instructions)																								
I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () ◀ (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		H(c) Group exemption number ▶																								
J Website: ▶ GREATERWORCESTER.ORG																										
K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶		L Year of formation: 1975 M State of legal domicile: MA																								

Part I Summary

Activities & Governance	1	Briefly describe the organization's mission or most significant activities: <u>THE FOUNDATION'S MISSION IS TO BUILD HEALTHY AND VIBRANT COMMUNITIES IN CENTRAL MASSACHUSETTS.</u>		
	2	Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	3	Number of voting members of the governing body (Part VI, line 1a) 3 21		
	4	Number of independent voting members of the governing body (Part VI, line 1b) 4 21		
	5	Total number of individuals employed in calendar year 2017 (Part V, line 2a) 5 11		
	6	Total number of volunteers (estimate if necessary) 6 435		
	7a	Total unrelated business revenue from Part VIII, column (C), line 12 7a		
b	Net unrelated business taxable income from Form 990-T, line 34 7b 0			
Revenue	8	Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
	9	Program service revenue (Part VIII, line 2g)	5,741,810	5,893,535.00
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	8,310	112,958.00
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	(1,659,403)	2,095,929.00
	12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	201,052	15,296.00
Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1–3)	4,291,769.00	8,117,718.00
	14	Benefits paid to or for members (Part IX, column (A), line 4)	6,614,110	8,400,355.00
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	0.00	0.00
	16a	Professional fundraising fees (Part IX, column (A), line 11e)	1,045,883	1,039,629.00
	b	Total fundraising expenses (Part IX, column (D), line 25) ▶ 409,303.00	0.00	0.00
	17	Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	1,889,411	2,016,865.00
	18	Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)	9,549,404.00	11,456,849.00
19	Revenue less expenses. Subtract line 18 from line 12	(5,257,635.00)	(3,339,131.00)	
Net Assets or Fund Balances	20	Total assets (Part X, line 16)	Beginning of Current Year	End of Year
	21	Total liabilities (Part X, line 26)	140,150,346.00	157,015,405.00
	22	Net assets or fund balances. Subtract line 21 from line 20	18,755,930.00	23,529,378.00
			121,394,416.00	133,486,027.00

Part II Signature Block

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 officer) is based on all information of which preparer has any knowledge.

Sign Here	Signature of officer	Date			
	ANN T. LISI, PRESIDENT & CEO Type or print name and title				
Paid Preparer Use Only	Print/Type preparer's name CARLA MCCALL, CPA	Preparer's signature <i>Carla McCall CPA</i>	Date	Check <input type="checkbox"/> if self-employed	PTIN P00535908
	Firm's name ▶ ALEXANDER, ARONSON, FINNING & CO., PC	Firm's EIN ▶ 04-2571780			
	Firm's address ▶ 50 WASHINGTON STREET WESTBOROUGH, MA 01581	Phone no. 508-366-9100			

May the IRS discuss this return with the preparer shown above? (see instructions) Yes No

For Paperwork Reduction Act Notice, see the separate instructions.

Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response or note to any line in this Part III

1 Briefly describe the organization's mission:

GREATER WORCESTER COMMUNITY FOUNDATION'S MISSION IS TO BUILD HEALTHY AND VIBRANT COMMUNITIES IN CENTRAL MASSACHUSETTS. THE FOUNDATION WORKS WITH DONORS, BUILDS CHARITABLE ENDOWMENTS, AND PROVIDES SUPPORT TO NONPROFITS IN THE AREA.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? Yes No

If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes No

If "Yes," describe these changes on Schedule O.

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code:) (Expenses \$ 5,613,765 including grants of \$ 5,000,765) (Revenue \$ 106,633)

DONOR ADVISED AND DESIGNATED GRANTMAKING: FORMALLY STRUCTURED TO ENABLE THE DONOR TO SUGGEST SPECIFIC GRANTS FROM FUNDS. INCLUDES FUNDS ESTABLISHED AS ENDOWMENTS FOR SPECIFIC AGENCIES. ALSO INCLUDES GRANTING FROM FUNDS ESTABLISHED BY NON-PROFIT ORGANIZATIONS FOR THEIR OWN BENEFIT (AGENCY FUNDS)

4b (Code:) (Expenses \$ 3,416,621 including grants of \$ 2,762,020) (Revenue \$)

DISCRETIONARY AND FIELD OF INTEREST GRANTMAKING: DISCRETIONARY FUNDS HAVE NO EXTERNAL RESTRICTIONS ON THEIR GRANT PURPOSE. FIELD OF INTEREST FUNDS SUPPORT A CLASS OF CHARITABLE BENEFICIARIES. SUCH GRANTS ARE AWARDED THROUGH COMPETITIVE PROCESSES, REQUIRING APPLICATIONS AND PROGRESS REPORTS TO BE SUBMITTED.

4c (Code:) (Expenses \$ 775,415 including grants of \$ 637,570) (Revenue \$)

GRANT TO INDIVIDUALS INCLUDING SCHOLARSHIP AWARDS MADE TO QUALIFIED STUDENTS TO OFFSET COLLEGE TUITION. OTHER GRANTS TO INDIVIDUALS ARE AWARDED BASED ON MERIT.

4d Other program services (Describe in Schedule O.)

(Expenses \$ 865,213 including grants of \$) (Revenue \$ 14,671)

4e Total program service expenses ▶

10,671,014.00

Part IV Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A</i>	X	
2 Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> (see instructions)?	X	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>		X
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i>		X
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? <i>If "Yes," complete Schedule C, Part III</i>		X
6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I</i>	X	
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>		X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>		X
9 Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV</i>		X
10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>	X	
11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI</i>	X	
b Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VII</i>	X	
c Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII</i>		X
d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part IX</i>		X
e Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i>	X	
f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If "Yes," complete Schedule D, Part X</i>	X	
12 a Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII</i>	X	
b Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional</i>		X
13 Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>		X
14 a Did the organization maintain an office, employees, or agents outside of the United States?		X
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? <i>If "Yes," complete Schedule F, Parts I and IV.</i>	X	
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? <i>If "Yes," complete Schedule F, Parts II and IV</i>		X
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If "Yes," complete Schedule F, Parts III and IV.</i>		X
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I (see instructions)</i>		X
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>	X	
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>		X

Part IV Checklist of Required Schedules *(continued)*

		Yes	No
20 a	Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>	X	
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i>	X	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	X	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i>		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		X
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		X
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		X
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i>		X
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? <i>If "Yes," complete Schedule L, Part II</i>		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):		
a	A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>		X
b	A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>		X
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i>		X
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	X	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>		X
34	Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i>	X	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O.	X	

Part V **Statements Regarding Other IRS Filings and Tax Compliance**

Check if Schedule O contains a response or note to any line in this Part V

		Yes	No
1a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a 18		
b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b		
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	X	
2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	2a 11		
b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> (see instructions)	2b	X	
3a Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X
b If "Yes," has it filed a Form 990-T for this year? <i>If "No" to line 3b, provide an explanation in Schedule O</i>	3b		
4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X
b If "Yes," enter the name of the foreign country: ► _____ See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).	4b		
5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
c If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a		X
b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7 Organizations that may receive deductible contributions under section 170(c).			
a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		X
b If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		X
d If "Yes," indicate the number of Forms 8282 filed during the year	7d		
e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8		X
9 Sponsoring organizations maintaining donor advised funds.			
a Did the sponsoring organization make any taxable distributions under section 4966?	9a		X
b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		X
10 Section 501(c)(7) organizations. Enter:			
a Initiation fees and capital contributions included on Part VIII, line 12	10a		
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b		
11 Section 501(c)(12) organizations. Enter:			
a Gross income from members or shareholders	11a		
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	11b		
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b		
13 Section 501(c)(29) qualified nonprofit health insurance issuers.			
a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O.	13a		
b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b		
c Enter the amount of reserves on hand	13c		
14a Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
b If "Yes," has it filed a Form 720 to report these payments? <i>If "No," provide an explanation in Schedule O</i>	14b		

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI

Section A. Governing Body and Management

		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year		
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.		
1b	Enter the number of voting members included in line 1a, above, who are independent		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	X	
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person?		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	X	
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		X
6	Did the organization have members or stockholders?	X	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	X	
7b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	X	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
8a	The governing body?	X	
8b	Each committee with authority to act on behalf of the governing body?	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O		X

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?		X
10b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	X	
11b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.		
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	X	
12b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	X	
12c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	X	
13	Did the organization have a written whistleblower policy?	X	
14	Did the organization have a written document retention and destruction policy?	X	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		
15a	The organization's CEO, Executive Director, or top management official	X	
15b	Other officers or key employees of the organization	X	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).		
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?		X
16b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?		

Section C. Disclosure

- 17** List the states with which a copy of this Form 990 is required to be filed ► MASSACHUSETTS
- 18** Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
 Own website Another's website Upon request Other (explain in Schedule O)
- 19** Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
- 20** State the name, address, and telephone number of the person who possesses the organization's books and records: ►
 ANN T. LISI, PRESIDENT AND CEO 508.755.0980 370 MAIN STREET WORCESTER, MA 01608

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Check if Schedule O contains a response or note to any line in this Part VII

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List all of the organization's **current** key employees, if any. See instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) GERALD M. GATES CHAIR	2	X		X						
(2) WARNER S. FLETCHER VICE-CHAIR	2	X		X						
(3) TIMOTHY M. JARRY TREASURER	2	X		X						
(4) CAROLYN STEMLER CLERK	2	X		X						
(5) JOCELYN AUGUSTUS DIRECTOR	1	X								
(6) JENNIFER D. CAREY DIRECTOR	1	X								
(7) MATILDE CASTIEL DIRECTOR	1	X								
(8) BRIAN M. CHANDLEY DIRECTOR	1	X								
(9) J. CHRISTOPHER COLLINS DIRECTOR	1	X								
(10) TRACY A. CRAIG DIRECTOR	1	X								
(11) JACK FOLEY DIRECTOR	1	X								
(12) ALISON C. KENARY DIRECTOR	1	X								
(13) PATSY LEWIS DIRECTOR	1	X								
(14) LINDA C. LOOFT DIRECTOR	1	X								

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(15) NADIA MCGOURTHY DIRECTOR	1	X								
(16) SATYA MITRA DIRECTOR	1	X								
(17) ANN K. MOLLOY DIRECTOR	1	X								
(18) HILDA RAMIREZ DIRECTOR	1	X								
(19) KIMBERLY SALMON DIRECTOR	1	X								
(20) MATTHEW WALLY DIRECTOR	1	X								
(21) CHARLES S. "CHICK" WEISS DIRECTOR	1	X								
(22) ANN T LISI PRESIDENT & CEO	50				X		166,706		14,461	
(23) CHRISTOPHER O'KEEFFE VP OF PROGRAMS	40					X	87,647		21,217	
(24) KELLY STIMSON VP OF DONOR SERVICES	40					X	92,591		12,980	
(25)										
1b Sub-total							346,944.00	0.00	48,658.00	
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)							346,944.00	0.00	48,658.00	

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization **3**

	Yes	No
3 Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>		X
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i>	X	
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>		X

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation
VARDE INVESTMENT PARTNERS 94 SOLARIS AVE GRAND CAYMAN, CAYMAN ISLANDS	INVESTMENT MANAGER FEES	144,525
(WELLINGTON MANAGEMENT	INVESTMENT MANAGER FEES	113,443
WEATHERLOW OFFSHORE FUND LTD	INVESTMENT MANAGER FEES	112,944
DAVIDSON KEMPNER INST. PARTNERS, LP 101 BARCLAY ST NY, NY 10286	INVESTMENT MANAGER FEES	110,862
PRIME BUCHHOLZ 273 CORPORATE DR. STE 250 PORTSMOUTH, NH 03801	INVESTMENT CONSULTING	109,843

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization **4**

Part VIII Statement of Revenue

Check if Schedule O contains a response or note to any line in this Part VIII

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514	
Contributions, Gifts, Grants and Other Similar Amounts	1a Federated campaigns	1a					
	b Membership dues	1b					
	c Fundraising events	1c					
	d Related organizations	1d					
	e Government grants (contributions)	1e					
	f All other contributions, gifts, grants, and similar amounts not included above	1f	5,893,535				
	g Noncash contributions included in lines 1a-1f: \$		414,723				
	h Total. Add lines 1a-1f		5,893,535.00				
Program Service Revenue		Business Code					
	2a NONPROFIT SUPPORT CENTER	90000099	6,325	6,325			
	b AGENCY FUND FEES	90000099	106,633	106,633			
	c _____						
	d _____						
	e _____						
	f All other program service revenue .						
g Total. Add lines 2a-2f		112,958.00					
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)		835,849			835,849	
	4 Income from investment of tax-exempt bond proceeds						
	5 Royalties						
	6a Gross rents	(i) Real	(ii) Personal				
		b Less: rental expenses					
		c Rental income or (loss)	0.00	0.00			
		d Net rental income or (loss)		0.00			
	7a Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other				
		b Less: cost or other basis and sales expenses					
		c Gain or (loss)	1,260,080.00	0.00			
		d Net gain or (loss)		1,260,080.00			1,260,080
	8a Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18	a	16,095				
		b Less: direct expenses	b	9,145			
		c Net income or (loss) from fundraising events		6,950.00			6,950
	9a Gross income from gaming activities. See Part IV, line 19	a					
		b Less: direct expenses	b				
		c Net income or (loss) from gaming activities		0.00			
10a Gross sales of inventory, less returns and allowances	a						
	b Less: cost of goods sold	b					
	c Net income or (loss) from sales of inventory		0.00				
Miscellaneous Revenue		Business Code					
11a OTHER			8,346	8,346			
b _____							
c _____							
d All other revenue							
e Total. Add lines 11a-11d			8,346.00				
12 Total revenue. See instructions.			8,117,718.00	121,304.00		2,102,879.00	

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

Check if Schedule O contains a response or note to any line in this Part IX

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.

	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	7,757,924	7,757,924		
2 Grants and other assistance to domestic individuals. See Part IV, line 22	642,431	642,431		
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	181,167	63,408	36,233	81,526
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	652,304	395,468	116,168	140,668
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	30,671	18,709	5,521	6,441
9 Other employee benefits	103,925	61,423	18,814	23,688
10 Payroll taxes	71,562	39,845	13,065	18,652
11 Fees for services (non-employees):				
a Management	35,247	21,469	6,088	7,690
b Legal	382		382	
c Accounting	43,568		43,568	
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees	1,406,820	1,406,820		
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)	61,016	61,016		
12 Advertising and promotion	111,023	45,620	12,744	52,659
13 Office expenses	85,353	32,050	32,523	20,780
14 Information technology	64,290	30,259	27,225	6,806
15 Royalties				
16 Occupancy	120,018	73,102	20,730	26,186
17 Travel				
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	59,077	21,470	13,400	24,207
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	20,033		20,033	
23 Insurance	10,038		10,038	
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a -----				
b -----				
c -----				
d -----				
e All other expenses -----				
25 Total functional expenses. Add lines 1 through 24e	11,456,849.00	10,671,014.00	376,532.00	409,303.00
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

Check if Schedule O contains a response or note to any line in this Part X

		(A) Beginning of year		(B) End of year
Assets	1 Cash—non-interest-bearing	167,094	1	759,624
	2 Savings and temporary cash investments	3,468,746	2	1,359,196
	3 Pledges and grants receivable, net		3	435,000
	4 Accounts receivable, net		4	
	5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges	130,327	9	176,871
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 272,370		
	b Less: accumulated depreciation	10b 243,320	49,083	10c 29,050.00
	11 Investments—publicly traded securities	45,247,588	11	49,624,022
	12 Investments—other securities. See Part IV, line 11	91,087,508	12	104,631,642
	13 Investments—program-related. See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets. See Part IV, line 11		15	
16 Total assets. Add lines 1 through 15 (must equal line 34)	140,150,346.00	16	157,015,405.00	
Liabilities	17 Accounts payable and accrued expenses	101,375	17	59,056
	18 Grants payable	14,150	18	352,117
	19 Deferred revenue		19	
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
	23 Secured mortgages and notes payable to unrelated third parties		23	
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D	18,640,405	25	23,118,205
	26 Total liabilities. Add lines 17 through 25	18,755,930.00	26	23,529,378.00
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets	1,170,002	27	1,358,435
	28 Temporarily restricted net assets	29,856,488	28	41,521,682
	29 Permanently restricted net assets	90,367,926	29	90,605,910
	Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.			
	30 Capital stock or trust principal, or current funds		30	
	31 Paid-in or capital surplus, or land, building, or equipment fund		31	
	32 Retained earnings, endowment, accumulated income, or other funds		32	
	33 Total net assets or fund balances	121,394,416.00	33	133,486,027.00
34 Total liabilities and net assets/fund balances	140,150,346.00	34	157,015,405.00	

Part XI Reconciliation of Net Assets

Check if Schedule O contains a response or note to any line in this Part XI

1	Total revenue (must equal Part VIII, column (A), line 12)	1	8,117,718.00
2	Total expenses (must equal Part IX, column (A), line 25)	2	11,456,849.00
3	Revenue less expenses. Subtract line 2 from line 1	3	(3,339,131.00)
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	121,394,416.00
5	Net unrealized gains (losses) on investments	5	19,840,612
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	(4,409,870)
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	133,486,027.00

Part XII Financial Statements and Reporting

Check if Schedule O contains a response or note to any line in this Part XII

	Yes	No
1 Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.		
2a Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		X
b Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: <input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	X	
c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.	X	
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		X
b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.		

SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

▶ Attach to Form 990 or Form 990-EZ.

▶ Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2017

Open to Public Inspection

Name of the organization GREATER WORCESTER COMMUNITY FOUNDATION	Employer identification number 04-2572276
--	--

Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.)

- 1 A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i)**.
- 2 A school described in **section 170(b)(1)(A)(ii)**. (Attach Schedule E (Form 990 or 990-EZ).)
- 3 A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii)**.
- 4 A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii)**. Enter the hospital's name, city, and state:
- 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv)**. (Complete Part II.)
- 6 A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v)**.
- 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 8 A community trust described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 9 An agricultural research organization described in **section 170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university:
- 10 An organization that normally receives: (1) more than 33¹/₃% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33¹/₃% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2)**. (Complete Part III.)
- 11 An organization organized and operated exclusively to test for public safety. See **section 509(a)(4)**.
- 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2)**. See **section 509(a)(3)**. Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.
 - a **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**
 - b **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**
 - c **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**
 - d **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**
 - e Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.
 - f Enter the number of supported organizations
 - g Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1–10 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
(A)						
(B)						
(C)						
(D)						
(E)						
Total						

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	3,714,212	6,011,416	6,004,353	5,741,810	5,893,535	27,365,326.00
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3	3,714,212.00	6,011,416.00	6,004,353.00	5,741,810.00	5,893,535.00	27,365,326.00
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						3,211,857
6 Public support. Subtract line 5 from line 4						24,153,469.00

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
7 Amounts from line 4	3,714,212.00	6,011,416.00	6,004,353.00	5,741,810.00	5,893,535.00	27,365,326.00
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	2,326,643	2,602,381	1,855,218	1,325,074	835,849	8,945,165.00
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
11 Total support. Add lines 7 through 10						36,310,491.00
12 Gross receipts from related activities, etc. (see instructions)					12	222,487
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here						<input type="checkbox"/>

Section C. Computation of Public Support Percentage

14 Public support percentage for 2017 (line 6, column (f) divided by line 11, column (f))	14	66.52 %
15 Public support percentage from 2016 Schedule A, Part II, line 14	15	59.19 %
16a 33 1/3% support test—2017. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization		<input checked="" type="checkbox"/>
b 33 1/3% support test—2016. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
17a 10%-facts-and-circumstances test—2017. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
b 10%-facts-and-circumstances test—2016. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions		<input type="checkbox"/>

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						
14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

15 Public support percentage for 2017 (line 8, column (f) divided by line 13, column (f))	15	%
16 Public support percentage from 2016 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2017 (line 10c, column (f) divided by line 13, column (f))	17	%
18 Investment income percentage from 2016 Schedule A, Part III, line 17	18	%

- 19a 33 1/3% support tests—2017.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization
- b 33 1/3% support tests—2016.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization
- 20 Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

Part IV Supporting Organizations

(Complete only if you checked a box in line 12 on Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

		Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.		
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).		
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.		
3b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.		
3c	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.		
4b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.		
4c	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI , including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).		
5b	Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?		
5c	Substitutions only. Was the substitution the result of an event beyond the organization's control?		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI .		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI .		
9b	Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI .		
9c	Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI .		
10a	Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below.		
10b	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)		

Part IV Supporting Organizations *(continued)*

		Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?		
a	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?		
b	A family member of a person described in (a) above?		
c	A 35% controlled entity of a person described in (a) or (b) above? <i>If "Yes" to a, b, or c, provide detail in Part VI.</i>		

Section B. Type I Supporting Organizations

		Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? <i>If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.</i>		
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? <i>If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.</i>		

Section C. Type II Supporting Organizations

		Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? <i>If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).</i>		

Section D. All Type III Supporting Organizations

		Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? <i>If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).</i>		
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? <i>If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.</i>		

Section E. Type III Functionally Integrated Supporting Organizations

1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).		
a	<input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.		
b	<input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.		
c	<input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions).		
2	Activities Test. Answer (a) and (b) below.		
a	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? <i>If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.</i>		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? <i>If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.</i>		
3	Parent of Supported Organizations. Answer (a) and (b) below.		
a	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>Provide details in Part VI.</i>		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? <i>If "Yes," describe in Part VI the role played by the organization in this regard.</i>		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

- 1** Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI). **See instructions.** All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1 Net short-term capital gain	1		
2 Recoveries of prior-year distributions	2		
3 Other gross income (see instructions)	3		
4 Add lines 1 through 3.	4		
5 Depreciation and depletion	5		
6 Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7 Other expenses (see instructions)	7		
8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4).	8		
Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1 Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):			
a Average monthly value of securities	1a		
b Average monthly cash balances	1b		
c Fair market value of other non-exempt-use assets	1c		
d Total (add lines 1a, 1b, and 1c)	1d		
e Discount claimed for blockage or other factors (explain in detail in Part VI):			
2 Acquisition indebtedness applicable to non-exempt-use assets	2		
3 Subtract line 2 from line 1d.	3		
4 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).	4		
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6 Multiply line 5 by .035.	6		
7 Recoveries of prior-year distributions	7		
8 Minimum Asset Amount (add line 7 to line 6)	8		
Section C - Distributable Amount			Current Year
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2 Enter 85% of line 1.	2		
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4 Enter greater of line 2 or line 3.	4		
5 Income tax imposed in prior year	5		
6 Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6		
7 <input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).			

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations *(continued)*

Section D - Distributions	Current Year
1 Amounts paid to supported organizations to accomplish exempt purposes	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	
4 Amounts paid to acquire exempt-use assets	
5 Qualified set-aside amounts (prior IRS approval required)	
6 Other distributions (describe in Part VI). See instructions.	
7 Total annual distributions. Add lines 1 through 6.	
8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions.	
9 Distributable amount for 2017 from Section C, line 6	
10 Line 8 amount divided by line 9 amount	

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2017	(iii) Distributable Amount for 2017
1 Distributable amount for 2017 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2017 (reasonable cause required—explain in Part VI). See instructions.			
3 Excess distributions carryover, if any, to 2017			
a			
b From 2013			
c From 2014			
d From 2015			
e From 2016			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2017 distributable amount			
i Carryover from 2012 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4 Distributions for 2017 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2017 distributable amount			
c Remainder. Subtract lines 4a and 4b from 4.			
5 Remaining underdistributions for years prior to 2017, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI . See instructions.		0.00	
6 Remaining underdistributions for 2017. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI . See instructions.			0.00
7 Excess distributions carryover to 2018. Add lines 3j and 4c.	0.00		
8 Breakdown of line 7:			
a Excess from 2013			
b Excess from 2014			
c Excess from 2015			
d Excess from 2016			
e Excess from 2017			

Part VI

Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

Dotted lines for supplemental information.

Schedule of Contributors

2017

▶ **Attach to Form 990, Form 990-EZ, or Form 990-PF.**
 ▶ **Go to www.irs.gov/Form990 for the latest information.**

Name of the organization GREATER WORCESTER COMMUNITY FOUNDATION	Employer identification number 04-2572276
---	---

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

501(c)(3) (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 33¹/₃% 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).

Name of organization GREATER WORCESTER COMMUNITY FOUNDATION	Employer identification number 04-2572276
---	---

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	Barr Foundation 2 Atlantic Avenue Boston, MA 02110	\$ 534,300	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
2	The Kirby Foundation 20355 Tumalo Road Bend, OR 97701-8483	\$ 200,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
3	The Ruth and Peter Metz Family Foundation 27 Westwood Drive Worcester, MA 01609	\$ 185,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
4	Vets of Foreign Wars Post 6055 219 Everett Street Southbridge, MA 01550	\$ 120,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
5	Quinsigamond Community College Foundation 670 West Boylston Street Worcester, MA 01606	\$ 1,979,233	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
6	Joy of Music Program, Inc. 1 Gorham Street Worcester, MA 01605	\$ 192,867	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization GREATER WORCESTER COMMUNITY FOUNDATION	Employer identification number 04-2572276
---	---

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 GREATER WORCESTER COMMUNITY FOUNDATION	Employer identification number 04-2572276
---	---

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 information once. See instructions.) ▶ \$ _____
 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
----- ----- -----	----- ----- -----

(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
----- ----- -----	----- ----- -----

(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
----- ----- -----	----- ----- -----

(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
----- ----- -----	----- ----- -----

Name of organization	Employer identification number
-----------------------------	---------------------------------------

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
7	Abby's House ----- 52 High Street ----- Worcester, MA 01609 -----	\$----- 355,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
8	Friends of Hope Cemetery ----- 119 Webster Street ----- Worcester, MA 01603 -----	\$----- 200,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
9	Latin American Health Alliance of Central MA ----- 27 Vernon Street ----- Worcester, MA 01604 -----	\$----- 200,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
10	Straight Ahead Ministries, Inc. ----- 791 Main Street ----- Worcester, MA 01610 -----	\$----- 173,000	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.)

**SCHEDULE D
(Form 990)**

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.
▶ Attach to Form 990.

▶ Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2017

Open to Public Inspection

Name of the organization GREATER WORCESTER COMMUNITY FOUNDATION	Employer identification number 04-2572276
--	--

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.

Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year	127	
2 Aggregate value of contributions to (during year)	1,401,559	
3 Aggregate value of grants from (during year)	2,016,310	
4 Aggregate value at end of year	23,203,064	
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

Part II Conservation Easements.

Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply).
 Preservation of land for public use (e.g., recreation or education) Preservation of a historically important land area
 Protection of natural habitat Preservation of a certified historic structure
 Preservation of open space

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.

	Held at the End of the Tax Year
a Total number of conservation easements	2a
b Total acreage restricted by conservation easements	2b
c Number of conservation easements on a certified historic structure included in (a)	2c
d Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register	2d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶

4 Number of states where property subject to conservation easement is located ▶

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Yes No

6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶

7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ \$

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? Yes No

9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items.

b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:

(i) Revenue included on Form 990, Part VIII, line 1 ▶ \$

(ii) Assets included in Form 990, Part X ▶ \$

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:

a Revenue included on Form 990, Part VIII, line 1 ▶ \$

b Assets included in Form 990, Part X ▶ \$

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets *(continued)*

3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):

- a** Public exhibition
- b** Scholarly research
- c** Preservation for future generations
- d** Loan or exchange programs
- e** Other

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? **Yes** **No**

Part IV Escrow and Custodial Arrangements.

Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? **Yes** **No**

b If "Yes," explain the arrangement in Part XIII and complete the following table:

	Amount
1c Beginning balance	
1d Additions during the year	
1e Distributions during the year	
1f Ending balance	

2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? **Yes** **No**

b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII

Part V Endowment Funds.

Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	103,628,987	100,926,677	104,204,967	105,079,566	95,690,552
b Contributions	682,503	2,471,124	3,258,746	1,457,470	1,700,726
c Net investment earnings, gains, and losses	15,384,672	5,442,121	(1,632,702)	2,726,114	12,426,386
d Grants or scholarships	4,441,734	3,932,449	3,772,326	3,842,756	3,392,630
e Other expenditures for facilities and programs		158,213			
f Administrative expenses	1,200,192	1,120,273	1,132,008	1,215,427	1,345,468
g End of year balance	114,054,236.00	103,628,987.00	100,926,677.00	104,204,967.00	105,079,566.00

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:

- a** Board designated or quasi-endowment %
- b** Permanent endowment 79%
- c** Temporarily restricted endowment 21%

The percentages on lines 2a, 2b, and 2c should equal 100%.

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

- (i)** unrelated organizations
- (ii)** related organizations

	Yes	No
3a(i)	X	
3a(ii)		X
3b		

b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?

4 Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements		55,684	55,684	0.00
d Equipment		182,793	159,393	23,400.00
e Other		33,893	28,243	5,650.00
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)				29,050.00

Part VII Investments—Other Securities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other SEMI-LIQUID SECURITIES		
(A) DOMESTIC EQUITIES	18,980,195	END OF YEAR MARKET VALUE
(B) INTERNATIONAL EQUITIES	19,884,243	END OF YEAR MARKET VALUE
(C) HEDGED EQUITY	59,886,739	END OF YEAR MARKET VALUE
(D) REAL ASSET FUNDS	5,880,465	END OF YEAR MARKET VALUE
(E)		
(F)		
(G)		
(H)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.) ►	104,631,642.00	

Part VIII Investments—Program Related.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 13.) ►		

Part IX Other Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.) ►	

Part X Other Liabilities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value	
(1) Federal income taxes		
(2) AGENCY FUNDS	22,126,274	
(3) SPLIT INTEREST AGREEMENTS	991,931	
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ►	23,118,205.00	

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements		1	20,351,103
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
a	Net unrealized gains (losses) on investments	2a 19,840,612		
b	Donated services and use of facilities	2b		
c	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIII.)	2d 9,145		
e	Add lines 2a through 2d		2e	19,849,757.00
3	Subtract line 2e from line 1		3	501,346.00
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a 1,406,820		
b	Other (Describe in Part XIII.)	4b 6,209,552		
c	Add lines 4a and 4b		4c	7,616,372.00
5	Total revenue. Add lines 3 and 4c . (This must equal Form 990, Part I, line 12.)		5	8,117,718.00

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements		1	8,259,492
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
a	Donated services and use of facilities	2a		
b	Prior year adjustments	2b		
c	Other losses	2c 9,145		
d	Other (Describe in Part XIII.)	2d		
e	Add lines 2a through 2d		2e	9,145.00
3	Subtract line 2e from line 1		3	8,250,347.00
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a 1,406,820		
b	Other (Describe in Part XIII.)	4b 1,799,682		
c	Add lines 4a and 4b		4c	3,206,502.00
5	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line 18.)		5	11,456,849.00

Part XIII Supplemental Information.

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

Part X, Line 2: The Foundation accounts for uncertainty in income taxes in accordance with ASC Topic, Income Taxes. The Foundation has determined that there are no uncertain tax positions which qualify for recognition or disclosure in the financial statements for the year 2017.

Part XI, Line 2d: Expenses associated with a fundraising event

Part XI, Line 4b: Agency Fund Contributions \$3,367,913 and Agency Fund Investment Returns \$2,841,639

Part XII, Line 4b: Total grant expenses paid from agency funds

**SCHEDULE F
(Form 990)**

Statement of Activities Outside the United States

OMB No. 1545-0047

2017

Open to Public Inspection

▶ **Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16.**
▶ **Attach to Form 990.**

▶ **Go to www.irs.gov/Form990 for instructions and the latest information.**

Department of the Treasury
Internal Revenue Service

Name of the organization

GREATER WORCESTER COMMUNITY FOUNDATION

Employer identification number

04-2572276

Part I General Information on Activities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 14b.

1 For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? **Yes** **No**

2 For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States.

3 Activities per Region. (The following Part I, line 3 table can be duplicated if additional space is needed.)

(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in the region	(d) Activities conducted in the region (by type) (such as, fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in the region	(f) Total expenditures for and investments in the region
(1) CENTRAL AMERICA & CARRIBEAN	NONE	NONE	INVESTMENTS		42,145,479
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
(10)					
(11)					
(12)					
(13)					
(14)					
(15)					
(16)					
(17)					
3a Sub-total	0	0			42,145,479.00
b Total from continuation sheets to Part I					
c Totals (add lines 3a and 3b)	0	0			42,145,479.00

Part II **Grants and Other Assistance to Organizations or Entities Outside the United States.** Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)									
(2)									
(3)									
(4)									
(5)									
(6)									
(7)									
(8)									
(9)									
(10)									
(11)									
(12)									
(13)									
(14)									
(15)									
(16)									

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter **▶** _____

3 Enter total number of other organizations or entities **▶** _____

Part III **Grants and Other Assistance to Individuals Outside the United States.** Complete if the organization answered "Yes" on Form 990, Part IV, line 16.
 Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of noncash assistance	(g) Description of noncash assistance	(h) Method of valuation (book, FMV, appraisal, other)
(1)							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							
(13)							
(14)							
(15)							
(16)							
(17)							
(18)							

Part IV Foreign Forms

- 1 Was the organization a U.S. transferor of property to a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926).* Yes No

- 2 Did the organization have an interest in a foreign trust during the tax year? *If "Yes," the organization may be required to separately file Form 3520, Annual Return To Report Transactions With Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; don't file with Form 990)* Yes No

- 3 Did the organization have an ownership interest in a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect To Certain Foreign Corporations (see Instructions for Form 5471)* Yes No

- 4 Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? *If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621).* Yes No

- 5 Did the organization have an ownership interest in a foreign partnership during the tax year? *If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships (see Instructions for Form 8865)* Yes No

- 6 Did the organization have any operations in or related to any boycotting countries during the tax year? *If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713; don't file with Form 990).* Yes No

Part V **Supplemental Information**

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information. See instructions.

Schedule F, Part IV, Line 3

Not required to file Form 5471 as its holdings did not meet the 10% threshold

**SCHEDULE G
(Form 990 or 990-EZ)**

Department of the Treasury
Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered "Yes" on Form 990, Part IV, line 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

▶ Attach to Form 990 or Form 990-EZ.

▶ Go to www.irs.gov/Form990 for the latest instructions.

OMB No. 1545-0047

2017

Open to Public Inspection

Name of the organization

GREATER WORCESTER COMMUNITY FOUNDATION

Employer identification number

04-2572276

Part I Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part.

- 1** Indicate whether the organization raised funds through any of the following activities. Check all that apply.
- a** Mail solicitations
 - b** Internet and email solicitations
 - c** Phone solicitations
 - d** In-person solicitations
 - e** Solicitation of non-government grants
 - f** Solicitation of government grants
 - g** Special fundraising events
- 2a** Did the organization have a written or oral agreement with any individual (including officers, directors, trustees, or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? **Yes** **No**
- b** If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
Total						

- 3** List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

Part II Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

		(a) Event #1 LYONS ROAD RACE (event type)	(b) Event #2 _____ (event type)	(c) Other events _____ (total number)	(d) Total events (add col. (a) through col. (c))
Revenue	1 Gross receipts	16,095.46			16,095
	2 Less: Contributions				0
	3 Gross income (line 1 minus line 2)	16,095			16,095
Direct Expenses	4 Cash prizes				0
	5 Noncash prizes	1,511.13			1,511
	6 Rent/facility costs				0
	7 Food and beverages	1,071.90			1,072
	8 Entertainment				0
	9 Other direct expenses	6,562.50			6,563
	10 Direct expense summary. Add lines 4 through 9 in column (d) ▶				9,146
11 Net income summary. Subtract line 10 from line 3, column (d) ▶				6,949	

Part III Gaming. Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

		(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
Revenue	1 Gross revenue				
Direct Expenses	2 Cash prizes				
	3 Noncash prizes				
	4 Rent/facility costs				
	5 Other direct expenses				
6 Volunteer labor	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No		
7 Direct expense summary. Add lines 2 through 5 in column (d) ▶					
8 Net gaming income summary. Subtract line 7 from line 1, column (d) ▶					

9 Enter the state(s) in which the organization conducts gaming activities: _____

a Is the organization licensed to conduct gaming activities in each of these states? Yes No

b If "No," explain: _____

10a Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year? Yes No

b If "Yes," explain: _____

**SCHEDULE I
(Form 990)**

Department of the Treasury
Internal Revenue Service

Name of the organization

**Grants and Other Assistance to Organizations,
Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

▶ Attach to Form 990.

▶ Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2017

**Open to Public
Inspection**

GREATER WORCESTER COMMUNITY FOUNDATION

Employer identification number

04-2572276

Part I General Information on Grants and Assistance

- 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes No
- 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) SEE ATTACHED							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table ▶ 313

3 Enter total number of other organizations listed in the line 1 table ▶ 0

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule I (Form 990) (2017)

Part III **Grants and Other Assistance to Domestic Individuals.** Complete if the organization answered "Yes" on Form 990, Part IV, line 22.
Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
1 See Attached					
2					
3					
4					
5					
6					
7					

Part IV **Supplemental Information.** Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

Procedures for monitoring use of grant funds: Grantee organizations are required to acknowledge the use of funds for restricted purposes and to provide reports on progress.

Site visits and grantee interviews are conducted throughout the year. Audited financial statements are also reviewed.

4:38 PM

Grantee 990 - Part 2 Organizations
 Grantees receiving \$5000 or more.
 Tax Year 2017
 Region: All Regions

Name, address, and zip	EIN	IRC Code	Cash Grant	Non-Cash Grant	Valuation Method	Descr Assistance	Purpose of Grant or Assistance	Fiscal Sponsor	Sponsor's EIN
15-40 Connection 53 Otis Street PO Box 1153 Westborough, MA 01581	26-2873903	501(C)(3)	5,000				General operations		
15-40 Connection 53 Otis Street PO Box 1153 Westborough, MA 01581	26-2873903	501(C)(3)	500				Program Support		
15-40 Connection 53 Otis Street PO Box 1153 Westborough, MA 01581	26-2873903	501(C)(3)	100				Unrestricted		
Abby's House 52 High Street Worcester, MA 01609-2409	04-2648411	501(C)(3)	1,000				Unrestricted		
Abby's House 52 High Street Worcester, MA 01609-2409	04-2648411	501(C)(3)	100				Unrestricted		
Abby's House 52 High Street Worcester, MA 01609-2409	04-2648411	501(C)(3)	300				Capital Campaign		
Abby's House 52 High Street Worcester, MA 01609-2409	04-2648411	501(C)(3)	500				Unrestricted		

4:38 PM

Grantee 990 - Part 2 Organizations
 Grantees receiving \$5000 or more.
 Tax Year 2017
 Region: All Regions

Name, address, and zip	EIN	IRC Code	Cash Grant	Non-Cash Grant	Valuation Method	Descr Assistance	Purpose of Grant or Assistance	Fiscal Sponsor	Sponsor's EIN
Abby's House 52 High Street Worcester, MA 01609-2409	04-2648411	501(C)(3)	500				Unrestricted		
Abby's House 52 High Street Worcester, MA 01609-2409	04-2648411	501(C)(3)	2,500				Unrestricted		
Abby's House 52 High Street Worcester, MA 01609-2409	04-2648411	501(C)(3)	18,000				Shelter, Housing & Advocacy Operations		
Abby's House 52 High Street Worcester, MA 01609-2409	04-2648411	501(C)(3)	300				Unrestricted		
Abby's House 52 High Street Worcester, MA 01609-2409	04-2648411	501(C)(3)	6,000				Annette Rafferty Survive to Thrive Fund		
Abby's House 52 High Street Worcester, MA 01609-2409	04-2648411	501(C)(3)	2,000				Unrestricted		
Abby's House 52 High Street Worcester, MA 01609-2409	04-2648411	501(C)(3)	3,900				Unrestricted		

4:38 PM

Grantee 990 - Part 2 Organizations
 Grantees receiving \$5000 or more.
 Tax Year 2017
 Region: All Regions

Name, address, and zip	EIN	IRC Code	Cash Grant	Non-Cash Grant	Valuation Method	Descr Assistance	Purpose of Grant or Assistance	Fiscal Sponsor	Sponsor's EIN
Advocates, Inc. 1881 Worcester Rd Framingham, MA 01701			5,000				Worcester Initiative for Supported Reentry (WISR)		
African Community Education Program 484 Main Street, Suite 355 Worcester, MA 01608	14-1970474	501(C)(3)	3,000				Youth Leadership Council		
African Community Education Program 484 Main Street, Suite 355 Worcester, MA 01608	14-1970474	501(C)(3)	1,300				Unrestricted		
African Community Education Program 484 Main Street, Suite 355 Worcester, MA 01608	14-1970474	501(C)(3)	21,000				Family Outreach & Education Programming		
African Community Education Program 484 Main Street, Suite 355 Worcester, MA 01608	14-1970474	501(C)(3)	24,000				Youth Academic & Social-Emotional Programming		
All Saints Episcopal Church 10 Irving Street Worcester, MA 01608	31-1629166	501(C)(3)	6,750				Unrestricted		
All Saints Episcopal Church 10 Irving Street Worcester, MA 01608	31-1629166	501(C)(3)	12,104				Unrestricted		

4:38 PM

Grantee 990 - Part 2 Organizations
 Grantees receiving \$5000 or more.
 Tax Year 2017
 Region: All Regions

Name, address, and zip	EIN	IRC Code	Cash Grant	Non-Cash Grant	Valuation Method	Descr Assistance	Purpose of Grant or Assistance	Fiscal Sponsor	Sponsor's EIN
All Saints Episcopal Church 10 Irving Street Worcester, MA 01608	31-1629166	501(C)(3)	3,420				Unrestricted		
Alzheimer's Association Massachusetts/New Hampshire Chapter 100 North Parkway, Suite 105 Worcester, MA 01605	04-2731194	501(C)(3)	5,000				Expansion of Alzheimer's Care and Support		
American Antiquarian Society 185 Salisbury Street Worcester, MA 01609-1636	04-2103652	501(C)(3)	3,000				Unrestricted		
American Antiquarian Society 185 Salisbury Street Worcester, MA 01609-1636	04-2103652	501(C)(3)	350,000				Renovations / 7 year pledge		
American Antiquarian Society 185 Salisbury Street Worcester, MA 01609-1636	04-2103652	501(C)(3)	17,108				Unrestricted		
American Antiquarian Society 185 Salisbury Street Worcester, MA 01609-1636	04-2103652	501(C)(3)	3,000				Unrestricted		

4:38 PM

Grantee 990 - Part 2 Organizations
 Grantees receiving \$5000 or more.
 Tax Year 2017
 Region: All Regions

Name, address, and zip	EIN	IRC Code	Cash Grant	Non-Cash Grant	Valuation Method	Descr Assistance	Purpose of Grant or Assistance	Fiscal Sponsor	Sponsor's EIN
American Antiquarian Society 185 Salisbury Street Worcester, MA 01609-1636	04-2103652	501(C)(3)	1,500				Annual Fund		
American Antiquarian Society 185 Salisbury Street Worcester, MA 01609-1636	04-2103652	501(C)(3)	5,874				Unrestricted		
American Antiquarian Society 185 Salisbury Street Worcester, MA 01609-1636	04-2103652	501(C)(3)	100				Unrestricted		
American Red Cross of Central and Western Massachusetts 2000 Century Drive Worcester, MA 01606	53-0196605	501(C)(3)	1,000				Hurricane Harvey Relief		
American Red Cross of Central and Western Massachusetts 2000 Century Drive Worcester, MA 01606	53-0196605	501(C)(3)	12,000				Unrestricted		
American Red Cross of Central and Western Massachusetts 2000 Century Drive Worcester, MA 01606	53-0196605	501(C)(3)	9,000				Disaster Relief & Recovery Program		

4:38 PM

Grantee 990 - Part 2 Organizations
 Grantees receiving \$5000 or more.
 Tax Year 2017
 Region: All Regions

Name, address, and zip	EIN	IRC Code	Cash Grant	Non-Cash Grant	Valuation Method	Descr Assistance	Purpose of Grant or Assistance	Fiscal Sponsor	Sponsor's EIN
American Red Cross of Central and Western Massachusetts 2000 Century Drive Worcester, MA 01606	53-0196605	501(C)(3)	1,000				Hurricane Harvey Relief		
American Red Cross of Central and Western Massachusetts 2000 Century Drive Worcester, MA 01606	53-0196605	501(C)(3)	500				Hurricane Harvey Relief Effort		
American Red Cross of Central and Western Massachusetts 2000 Century Drive Worcester, MA 01606	53-0196605	501(C)(3)	500				Hurricane Maria Relief Effort		
American Red Cross of Central and Western Massachusetts 2000 Century Drive Worcester, MA 01606	53-0196605	501(C)(3)	1,250				Unrestricted		
Angels-Net Foundation, Inc. 44 Front Street, Ste 550 Worcester, MA 01608-1766	45-0576321	501(C)(3)	5,000				Educational and Social Programs for Immigrant and Refugee Youth		
Angels-Net Foundation, Inc. 44 Front Street, Ste 550 Worcester, MA 01608-1766	45-0576321	501(C)(3)	2,000				Youth Leadership Development		

4:38 PM

Grantee 990 - Part 2 Organizations
 Grantees receiving \$5000 or more.
 Tax Year 2017
 Region: All Regions

Name, address, and zip	EIN	IRC Code	Cash Grant	Non-Cash Grant	Valuation Method	Descr Assistance	Purpose of Grant or Assistance	Fiscal Sponsor	Sponsor's EIN
Anna Maria College 50 Sunset Lane;Box P Paxton, MA 01612-1198	04-2002060	501(C)(3)	12,000				Unrestricted		
Anna Maria College 50 Sunset Lane;Box P Paxton, MA 01612-1198	04-2002060	501(C)(3)	25,000				Unrestricted		
Appalachian Mountain Club 10 City Square Boston, MA 02129	04-6001677	501(C)(3)	5,000				Youth Opportunities Program - Worcester Summit Site		
Apple Tree Arts 1 Grafton Common 2nd and 3rd Floors Grafton, MA 01519-1532	04-3267088	501(C)(3)	15,000				Head Start Preschool Music Outreach Program		
Apple Tree Arts 1 Grafton Common 2nd and 3rd Floors Grafton, MA 01519-1532	04-3267088	501(C)(3)	3,000				Succession Planning		
ArtsWorcester 660 Main Street Worcester, MA 01610-3100	04-2768202	501(C)(3)	2,000				General operations		
ArtsWorcester 660 Main Street Worcester, MA 01610-3100	04-2768202	501(C)(3)	1,500				Unrestricted		

4:38 PM

Grantee 990 - Part 2 Organizations
 Grantees receiving \$5000 or more.
 Tax Year 2017
 Region: All Regions

Name, address, and zip	EIN	IRC Code	Cash Grant	Non-Cash Grant	Valuation Method	Descr Assistance	Purpose of Grant or Assistance	Fiscal Sponsor	Sponsor's EIN
ArtsWorcester 660 Main Street Worcester, MA 01610-3100	04-2768202	501(C)(3)	400				Unrestricted		
ArtsWorcester 660 Main Street Worcester, MA 01610-3100	04-2768202	501(C)(3)	10,000				Operating Support		
Ascentria Care Alliance 14 E. Worcester Street, Suite 300 Worcester, MA 01604	04-3566243	501(C)(3)	25,000				Immigration & Legal Assistance Program		
Asian Task Force Against Domestic Violence P.O. Box 120108 Boston, MA 02112	04-3103354	501(C)(3)	5,000				Worcester Intervention Program		
Auburn Youth & Family Services 21 Pheasant Ct. Auburn, MA 01501-2457	04-2658899	501(C)(3)	2,100				AYFS Clinical Consultation		
Auburn Youth & Family Services 21 Pheasant Ct. Auburn, MA 01501-2457	04-2658899	501(C)(3)	10,000				Operating Support		
Audio Journal Inc 799 West Boylston Street, Suite 5 Worcester, MA 01606-3071	04-3519488	501(C)(3)	1,140				Unrestricted		

4:38 PM

Grantee 990 - Part 2 Organizations
 Grantees receiving \$5000 or more.
 Tax Year 2017
 Region: All Regions

Name, address, and zip	EIN	IRC Code	Cash Grant	Non-Cash Grant	Valuation Method	Descr Assistance	Purpose of Grant or Assistance	Fiscal Sponsor	Sponsor's EIN
Audio Journal Inc 799 West Boylston Street, Suite 5 Worcester, MA 01606-3071	04-3519488	501(C)(3)	5,000				General Operating Support		
Audio Journal Inc 799 West Boylston Street, Suite 5 Worcester, MA 01606-3071	04-3519488	501(C)(3)	600				Unrestricted		
Bancroft School 110 Shore Drive Worcester, MA 01605-3198	04-2103861	501(C)(3)	100				Unrestricted		
Bancroft School 110 Shore Drive Worcester, MA 01605-3198	04-2103861	501(C)(3)	20,000				Worcester Partnership		
Bancroft School 110 Shore Drive Worcester, MA 01605-3198	04-2103861	501(C)(3)	3,000				Unrestricted		
Bancroft School 110 Shore Drive Worcester, MA 01605-3198	04-2103861	501(C)(3)	25,547				Unrestricted		
Bancroft School 110 Shore Drive Worcester, MA 01605-3198	04-2103861	501(C)(3)	2,000				Unrestricted		

4:38 PM

Grantee 990 - Part 2 Organizations
 Grantees receiving \$5000 or more.
 Tax Year 2017
 Region: All Regions

Name, address, and zip	EIN	IRC Code	Cash Grant	Non-Cash Grant	Valuation Method	Descr Assistance	Purpose of Grant or Assistance	Fiscal Sponsor	Sponsor's EIN
Barton Center for Diabetes Education 30 Ennis Road PO Box 356 North Oxford, MA 01537	22-2701822	501(C)(3)	5,000				Campership Program		
Baystate Health Foundation, Inc. 280 Chestnut Street, 6th Floor Springfield, MA 01199	04-3549011	501(C)(3)	100,000				Wing Hospital Emergency Department Expansion Project		
Big Brothers/Big Sisters of Central Mass/Metrowest 484 Main Street, Suite 360 Worcester, MA 01608	04-2317926	501(C)(3)	20,000				Worcester County Mentoring Program		
Big Brothers/Big Sisters of Central Mass/Metrowest 484 Main Street, Suite 360 Worcester, MA 01608	04-2317926	501(C)(3)	100				Unrestricted		
Big Brothers/Big Sisters of Central Mass/Metrowest 484 Main Street, Suite 360 Worcester, MA 01608	04-2317926	501(C)(3)	100				Atchinson Match Challenge		
Blackstone Valley Boys & Girls Club 115 Canal Street PO Box 283 Blackstone, MA 01504	04-3200499	501(C)(3)	7,500				2018 Summer Program Camperships		

4:38 PM

Grantee 990 - Part 2 Organizations
 Grantees receiving \$5000 or more.
 Tax Year 2017
 Region: All Regions

Name, address, and zip	EIN	IRC Code	Cash Grant	Non-Cash Grant	Valuation Method	Descr Assistance	Purpose of Grant or Assistance	Fiscal Sponsor	Sponsor's EIN
Boston Chinatown Neighborhood Center, Inc. 885 Washington Street Boston, MA 02111-1415	23-7209691	501(C)(3)	24,000				Agency Fund Distribution		
Boston Chinatown Neighborhood Center, Inc. 885 Washington Street Boston, MA 02111-1415	23-7209691	501(C)(3)	118,000				Agency Fund Distribution		
Boston Chinatown Neighborhood Center, Inc. 885 Washington Street Boston, MA 02111-1415	23-7209691	501(C)(3)	1,061				Agency Fund Closing / Final		
Boston Chinatown Neighborhood Center, Inc. 885 Washington Street Boston, MA 02111-1415	23-7209691	501(C)(3)	2,198				Agency Fund Closing / Final		
Bottom Line 40 Southbridge Street, Fl 5 Ste 500 Worcester, MA 01608-2037	04-3351427	501(C)(3)	1,000				Worcester Campus Program		
Bottom Line 40 Southbridge Street, Fl 5 Ste 500 Worcester, MA 01608-2037	04-3351427	501(C)(3)	10,000				Worcester Access and Success Programs		
Boys & Girls Club of Webster-Dudley 55 Oxford Avenue Dudley, MA 01571	04-2238069	501(C)(3)	7,000				Boys & Girls Club Junior Staff		

04/09/2018

Greater Worcester Community Foundation

Page 12

4:38 PM

Grantee 990 - Part 2 Organizations
 Grantees receiving \$5000 or more.
 Tax Year 2017
 Region: All Regions

Name, address, and zip	EIN	IRC Code	Cash Grant	Non-Cash Grant	Valuation Method	Descr Assistance	Purpose of Grant or Assistance	Fiscal Sponsor	Sponsor's EIN
Boys & Girls Club of Webster-Dudley 55 Oxford Avenue Dudley, MA 01571	04-2238069	501(C)(3)	800				Pilot Project		
Boys & Girls Club of Worcester 65 Tainter Street Worcester, MA 01610-2520	04-2105851	501(C)(3)	1,350				Unrestricted		
Boys & Girls Club of Worcester 65 Tainter Street Worcester, MA 01610-2520	04-2105851	501(C)(3)	25,000				General Program Support		
Boys & Girls Club of Worcester 65 Tainter Street Worcester, MA 01610-2520	04-2105851	501(C)(3)	900				Programs		
Boys & Girls Club of Worcester 65 Tainter Street Worcester, MA 01610-2520	04-2105851	501(C)(3)	10,000				Unrestricted		
Boys & Girls Club of Worcester 65 Tainter Street Worcester, MA 01610-2520	04-2105851	501(C)(3)	600				Operating Support		

4:38 PM

Grantee 990 - Part 2 Organizations
 Grantees receiving \$5000 or more.
 Tax Year 2017
 Region: All Regions

Name, address, and zip	EIN	IRC Code	Cash Grant	Non-Cash Grant	Valuation Method	Descr Assistance	Purpose of Grant or Assistance	Fiscal Sponsor	Sponsor's EIN
Boys & Girls Club of Worcester 65 Tainter Street Worcester, MA 01610-2520	04-2105851	501(C)(3)	1,500				Unrestricted		
Boys & Girls Club of Worcester 65 Tainter Street Worcester, MA 01610-2520	04-2105851	501(C)(3)	300				Agency Fund Distribution		
Boys & Girls Club of Worcester 65 Tainter Street Worcester, MA 01610-2520	04-2105851	501(C)(3)	2,000				Operations		
Boys & Girls Club of Worcester 65 Tainter Street Worcester, MA 01610-2520	04-2105851	501(C)(3)	1,000				Unrestricted		
Boys & Girls Club of Worcester 65 Tainter Street Worcester, MA 01610-2520	04-2105851	501(C)(3)	2,500				Unrestricted		
Boys & Girls Club of Worcester 65 Tainter Street Worcester, MA 01610-2520	04-2105851	501(C)(3)	700				2017 Summer Camp Scholarships		
Boys & Girls Club of Worcester 65 Tainter Street Worcester, MA 01610-2520	04-2105851	501(C)(3)	500				Unrestricted		

4:38 PM

Grantee 990 - Part 2 Organizations
 Grantees receiving \$5000 or more.
 Tax Year 2017
 Region: All Regions

Name, address, and zip	EIN	IRC Code	Cash Grant	Non-Cash Grant	Valuation Method	Descr Assistance	Purpose of Grant or Assistance	Fiscal Sponsor	Sponsor's EIN
Boys & Girls Club of Worcester 65 Tainter Street Worcester, MA 01610-2520	04-2105851	501(C)(3)	2,000				Unrestricted		
Boys & Girls Club of Worcester 65 Tainter Street Worcester, MA 01610-2520	04-2105851	501(C)(3)	10,000				Kids Cafe		
Boys & Girls Club of Worcester 65 Tainter Street Worcester, MA 01610-2520	04-2105851	501(C)(3)	2,500				Kids Cafe Program Support		
Bridge of Central Massachusetts 4 Mann Street Worcester, MA 01602-0243	04-2701581	501(C)(3)	12,500				The South County Housing Assistance Program		
Bridge of Central Massachusetts 4 Mann Street Worcester, MA 01602-0243	04-2701581	501(C)(3)	18,000				Safe Homes Operating Support		
Camp Putnam, Inc 141 Rutherford Road New Braintree, MA 01531-1829	04-6004880	501(C)(3)	10,000				Camp Scholarships		

4:38 PM

Grantee 990 - Part 2 Organizations
 Grantees receiving \$5000 or more.
 Tax Year 2017
 Region: All Regions

Name, address, and zip	EIN	IRC Code	Cash Grant	Non-Cash Grant	Valuation Method	Descr Assistance	Purpose of Grant or Assistance	Fiscal Sponsor	Sponsor's EIN
Cape Cod Healthcare Foundation 4 Bayview Street PO Box 370 Hyannis, MA 02601-9978	04-3475950	501(C)(3)	5,000				Unrestricted		
Catholic Charities Worcester County 10 Hammond Street Worcester, MA 01610-1513	04-2103979	501(C)(3)	12,000				Citizenship Services and Education for Families		
Catholic Charities Worcester County 10 Hammond Street Worcester, MA 01610-1513	04-2103979	501(C)(3)	300				Children's Programs		
Catholic Charities Worcester County 10 Hammond Street Worcester, MA 01610-1513	04-2103979	501(C)(3)	3,000				Homeless Prevention Program - SNAP		
Catholic Charities Worcester County 10 Hammond Street Worcester, MA 01610-1513	04-2103979	501(C)(3)	12,500				Emergency Pantry Program		
Center for Health Impact 35 Harvard Street, Suite 300 Worcester, MA 01609-2828	04-2775264	501(C)(3)	15,000				Intercultural Communication for the Wellbeing of Young Children		

4:38 PM

Grantee 990 - Part 2 Organizations
 Grantees receiving \$5000 or more.
 Tax Year 2017
 Region: All Regions

Name, address, and zip	EIN	IRC Code	Cash Grant	Non-Cash Grant	Valuation Method	Descr Assistance	Purpose of Grant or Assistance	Fiscal Sponsor	Sponsor's EIN
Center for Nonviolent Solutions 901 Pleasant Street Worcester, MA 01602	90-0581384	501(C)(3)	600				Unrestricted		
Center for Nonviolent Solutions 901 Pleasant Street Worcester, MA 01602	90-0581384	501(C)(3)	5,000				Peer Mediation and Peacebuilding Program		
Center for Nonviolent Solutions 901 Pleasant Street Worcester, MA 01602	90-0581384	501(C)(3)	5,000				Unrestricted		
Center of Hope Foundation, Inc. PO Box 66 100 Foster Street Southbridge, MA 01550	04-2311571	501(C)(3)	7,500				Employment Services Marketing Technical Assistance		
Central Massachusetts Housing Alliance 6 Institute Road P.O. Box 3 Worcester, MA 01609	04-2791448	501(C)(3)	500				Unrestricted		
Central Massachusetts Housing Alliance 6 Institute Road P.O. Box 3 Worcester, MA 01609	04-2791448	501(C)(3)	12,000				Public Education & Advocacy		

4:38 PM

Grantee 990 - Part 2 Organizations
 Grantees receiving \$5000 or more.
 Tax Year 2017
 Region: All Regions

Name, address, and zip	EIN	IRC Code	Cash Grant	Non-Cash Grant	Valuation Method	Descr Assistance	Purpose of Grant or Assistance	Fiscal Sponsor	Sponsor's EIN
Centro, Inc. 11 Sycamore Street Worcester, MA 01608-2213	04-2714991	501(C)(3)	5,000				Community Based Services		
Centro, Inc. 11 Sycamore Street Worcester, MA 01608-2213	04-2714991	501(C)(3)	2,200				Community Support Program for Food Assistance		
Children's Friend, Inc. 21 Cedar Street Worcester, MA 01609	04-2105856	501(C)(3)	5,000				Community Outreach Project for The Carriage House		
Children's Friend, Inc. 21 Cedar Street Worcester, MA 01609	04-2105856	501(C)(3)	10,000				Mental Health Services for LGBT Youth/Families.		
Children's Friend, Inc. 21 Cedar Street Worcester, MA 01609	04-2105856	501(C)(3)	2,050				Adoption Services		
Children's Friend, Inc. 21 Cedar Street Worcester, MA 01609	04-2105856	501(C)(3)	2,280				Unrestricted		
Children's Friend, Inc. 21 Cedar Street Worcester, MA 01609	04-2105856	501(C)(3)	1,600				Technology Purchase		

4:38 PM

Grantee 990 - Part 2 Organizations
 Grantees receiving \$5000 or more.
 Tax Year 2017
 Region: All Regions

Name, address, and zip	EIN	IRC Code	Cash Grant	Non-Cash Grant	Valuation Method	Descr Assistance	Purpose of Grant or Assistance	Fiscal Sponsor	Sponsor's EIN
Children's Friend, Inc. 21 Cedar Street Worcester, MA 01609	04-2105856	501(C)(3)	433				Unrestricted		
Children's Friend, Inc. 21 Cedar Street Worcester, MA 01609	04-2105856	501(C)(3)	50,000				Outreach and Support Services		
Children's Friend, Inc. 21 Cedar Street Worcester, MA 01609	04-2105856	501(C)(3)	500				Unrestricted		
Clark University 950 Main Street Worcester, MA 01610-1477	04-2111203	501(C)(3)	5,600				Clark University Community Achievement Award		
Clark University 950 Main Street Worcester, MA 01610-1477	04-2111203	501(C)(3)	10,000				Adam Achiever Program/Main South College Success Program		
Clark University 950 Main Street Worcester, MA 01610-1477	04-2111203	501(C)(3)	300				Friends of the Goddard Library		
Clark University 950 Main Street Worcester, MA 01610-1477	04-2111203	501(C)(3)	600				Lois B. & Robert F. Green Endowed Undergraduate Internship Fund		

4:38 PM

Grantee 990 - Part 2 Organizations
 Grantees receiving \$5000 or more.
 Tax Year 2017
 Region: All Regions

Name, address, and zip	EIN	IRC Code	Cash Grant	Non-Cash Grant	Valuation Method	Descr Assistance	Purpose of Grant or Assistance	Fiscal Sponsor	Sponsor's EIN
Clark University 950 Main Street Worcester, MA 01610-1477	04-2111203	501(C)(3)	1,500				Main South Education Collaborative		
Clark University 950 Main Street Worcester, MA 01610-1477	04-2111203	501(C)(3)	2,600				Unrestricted		
Clark University 950 Main Street Worcester, MA 01610-1477	04-2111203	501(C)(3)	100				Friends of the R.H. Goddard Library (This is a re-issued check)		
Coastside Land Trust 788 Main Street Half Moon Bay, CA 94019	94-3290067	501(C)(3)	10,000				Operating Support		
College of the Holy Cross One College Street Worcester, MA 01610	04-2103558	501(C)(3)	1,000				Annual Fund		
College of the Holy Cross One College Street Worcester, MA 01610	04-2103558	501(C)(3)	2,500				Contemplative Center		
Community Builders 185 Dartmouth Street Boston, MA 02116	04-2324773	501(C)(3)	25,000				Catch the Reading Bug I at Plumley Village		

4:38 PM

Grantee 990 - Part 2 Organizations
 Grantees receiving \$5000 or more.
 Tax Year 2017
 Region: All Regions

Name, address, and zip	EIN	IRC Code	Cash Grant	Non-Cash Grant	Valuation Method	Descr Assistance	Purpose of Grant or Assistance	Fiscal Sponsor	Sponsor's EIN
Community Harvest Project, Inc. 37 Wheeler Road North Grafton, MA 01536-1104	04-3424018	501(C)(3)	3,000				Farming Equipment		
Community Harvest Project, Inc. 37 Wheeler Road North Grafton, MA 01536-1104	04-3424018	501(C)(3)	250				Unrestricted		
Community Harvest Project, Inc. 37 Wheeler Road North Grafton, MA 01536-1104	04-3424018	501(C)(3)	10,000				Operating Support		
Community Harvest Project, Inc. 37 Wheeler Road North Grafton, MA 01536-1104	04-3424018	501(C)(3)	25,000				Unrestricted		
Community Harvest Project, Inc. 37 Wheeler Road North Grafton, MA 01536-1104	04-3424018	501(C)(3)	15,000				Volunteer Farming Program		
Community Healthlink 72 Jaques Avenue, Third Floor Worcester, MA 01610-2480	04-2626179	501(C)(3)	50,000				Integrating Wellness into Behavioral Health Services		

4:38 PM

Grantee 990 - Part 2 Organizations
 Grantees receiving \$5000 or more.
 Tax Year 2017
 Region: All Regions

Name, address, and zip	EIN	IRC Code	Cash Grant	Non-Cash Grant	Valuation Method	Descr Assistance	Purpose of Grant or Assistance	Fiscal Sponsor	Sponsor's EIN
Community Healthlink 72 Jaques Avenue, Third Floor Worcester, MA 01610-2480	04-2626179	501(C)(3)	25,000				Youth and Family Services		
Community Healthlink 72 Jaques Avenue, Third Floor Worcester, MA 01610-2480	04-2626179	501(C)(3)	935				Unrestricted		
Community Healthlink 72 Jaques Avenue, Third Floor Worcester, MA 01610-2480	04-2626179	501(C)(3)	12,000				Together For Kids		
Community Legal Aid 405 Main Street, 4th Floor Worcester, MA 01608	04-2446242	501(C)(3)	5,000				Support for children and families		
Community Legal Aid 405 Main Street, 4th Floor Worcester, MA 01608	04-2446242	501(C)(3)	7,500				Unrestricted		
Community Legal Aid 405 Main Street, 4th Floor Worcester, MA 01608	04-2446242	501(C)(3)	1,400				To support legal services in Central Massachusetts.		
Community Legal Aid 405 Main Street, 4th Floor Worcester, MA 01608	04-2446242	501(C)(3)	15,000				Immigrant Victims Legal Advocacy Project		

4:38 PM

Grantee 990 - Part 2 Organizations
 Grantees receiving \$5000 or more.
 Tax Year 2017
 Region: All Regions

Name, address, and zip	EIN	IRC Code	Cash Grant	Non-Cash Grant	Valuation Method	Descr Assistance	Purpose of Grant or Assistance	Fiscal Sponsor	Sponsor's EIN
Community Legal Aid 405 Main Street, 4th Floor Worcester, MA 01608	04-2446242	501(C)(3)	10,000				Education Project		
Community Legal Aid 405 Main Street, 4th Floor Worcester, MA 01608	04-2446242	501(C)(3)	3,000				Special Fundraising Project		
Community Servings, Inc. 18 Marbury Terrace Jamaica Plain, MA 02130	22-3154028	501(C)(3)	9,000				Nutrition Program for Worcester Area		
Crawford Memorial Library 40 Schofield Avenue Dudley, MA 01571-3264	04-6001134	501(C)(3)	10,980				Program Support		
DCF Kids Fund, Inc. 600 Washington Street, Lbby 1 Boston, MA 02111-1744	04-3443890	501(C)(3)	25,000				Holiday Gifts for Worcester Area		
Diocese of Worcester 49 Elm Street Worcester, MA 01609	04-2106686	501(C)(3)	20,000				Partners in Charity Campaign 2017		
Diocese of Worcester 49 Elm Street Worcester, MA 01609	04-2106686	501(C)(3)	500				Adopt-A-Student Program		

4:38 PM

Grantee 990 - Part 2 Organizations
 Grantees receiving \$5000 or more.
 Tax Year 2017
 Region: All Regions

Name, address, and zip	EIN	IRC Code	Cash Grant	Non-Cash Grant	Valuation Method	Descr Assistance	Purpose of Grant or Assistance	Fiscal Sponsor	Sponsor's EIN
Diocese of Worcester 49 Elm Street Worcester, MA 01609	04-2106686	501(C)(3)	1,000				Partners in Charity		
Diocese of Worcester 49 Elm Street Worcester, MA 01609	04-2106686	501(C)(3)	2,000				Holy name of Jesus, House of Studies		
Diocese of Worcester 49 Elm Street Worcester, MA 01609	04-2106686	501(C)(3)	500				Partners in Charity		
Diocese of Worcester 49 Elm Street Worcester, MA 01609	04-2106686	501(C)(3)	10,000				Partners in Charity		
Diocese of Worcester 49 Elm Street Worcester, MA 01609	04-2106686	501(C)(3)	5,000				Adopt-A-Student Program		
Discovery Museum 177 Main Street Acton, MA 01720	04-2741645	501(C)(3)	5,000				Discovery Science Worcester		
Dismas House of Central Massachusetts PO Box 30125 Worcester, MA 01603	54-2075825	501(C)(3)	3,000				Recovery Grows Worcester		

4:38 PM

Grantee 990 - Part 2 Organizations
 Grantees receiving \$5000 or more.
 Tax Year 2017
 Region: All Regions

Name, address, and zip	EIN	IRC Code	Cash Grant	Non-Cash Grant	Valuation Method	Descr Assistance	Purpose of Grant or Assistance	Fiscal Sponsor	Sponsor's EIN
Dismas House of Central Massachusetts PO Box 30125 Worcester, MA 01603	54-2075825	501(C)(3)	600				Unrestricted		
Dismas House of Central Massachusetts PO Box 30125 Worcester, MA 01603	54-2075825	501(C)(3)	5,000				Clinical Support Services		
Dismas House of Central Massachusetts PO Box 30125 Worcester, MA 01603	54-2075825	501(C)(3)	500				Unrestricted		
Dismas House of Central Massachusetts PO Box 30125 Worcester, MA 01603	54-2075825	501(C)(3)	1,000				Unrestricted		
Dismas House of Central Massachusetts PO Box 30125 Worcester, MA 01603	54-2075825	501(C)(3)	15,000				Prisoner Reentry Program		
Dynamy, Inc. 27 Sever Street Worcester, MA 01609-2129	23-7112665	501(C)(3)	10,000				Youth Academy	Kristine Bostek	23-7112665
Dynamy, Inc. 27 Sever Street Worcester, MA 01609-2129	23-7112665	501(C)(3)	1,300				Youth Academy	Kristine Bostek	23-7112665

4:38 PM

Grantee 990 - Part 2 Organizations
 Grantees receiving \$5000 or more.
 Tax Year 2017
 Region: All Regions

Name, address, and zip	EIN	IRC Code	Cash Grant	Non-Cash Grant	Valuation Method	Descr Assistance	Purpose of Grant or Assistance	Fiscal Sponsor	Sponsor's EIN
East Douglas Evergreen Cemetery Company 15 Prentice Court Douglas, MA 01516-2019	04-6002475	501(C)(13)	3,360				Unrestricted		
East Douglas Evergreen Cemetery Company 15 Prentice Court Douglas, MA 01516-2019	04-6002475	501(C)(13)	3,400				agency fund distribution		
EcoTarium 222 Harrington Way Worcester, MA 01604	04-2105868	501(C)(3)	1,000				Unrestricted		
EcoTarium 222 Harrington Way Worcester, MA 01604	04-2105868	501(C)(3)	500				Unrestricted		
EcoTarium 222 Harrington Way Worcester, MA 01604	04-2105868	501(C)(3)	20,000				EcoTarium 2017 Career Program		
EcoTarium 222 Harrington Way Worcester, MA 01604	04-2105868	501(C)(3)	2,000				Unrestricted		
EcoTarium 222 Harrington Way Worcester, MA 01604	04-2105868	501(C)(3)	14,400				School Field Trips		

4:38 PM

Grantee 990 - Part 2 Organizations
 Grantees receiving \$5000 or more.
 Tax Year 2017
 Region: All Regions

Name, address, and zip	EIN	IRC Code	Cash Grant	Non-Cash Grant	Valuation Method	Descr Assistance	Purpose of Grant or Assistance	Fiscal Sponsor	Sponsor's EIN
EcoTarium 222 Harrington Way Worcester, MA 01604	04-2105868	501(C)(3)	7,500				2017 Countdown to Kindergarten (C2K)		
EcoTarium 222 Harrington Way Worcester, MA 01604	04-2105868	501(C)(3)	10,000				EBT Access Program		
EcoTarium 222 Harrington Way Worcester, MA 01604	04-2105868	501(C)(3)	5,000				Capital Campaign contribution		
Edward M. Kennedy Community Health Center 650 Lincoln Street, Suite 1 Worcester, MA 01605-2060	04-2513817	501(C)(3)	17,500				Substance Abuse Assessment and Intervention		
Edward M. Kennedy Community Health Center 650 Lincoln Street, Suite 1 Worcester, MA 01605-2060	04-2513817	501(C)(3)	1,800				Unrestricted		
Edward M. Kennedy Community Health Center 650 Lincoln Street, Suite 1 Worcester, MA 01605-2060	04-2513817	501(C)(3)	1,800				Program Support		
Edward M. Kennedy Community Health Center 650 Lincoln Street, Suite 1 Worcester, MA 01605-2060	04-2513817	501(C)(3)	4,300				Staff Training Fund		

4:38 PM

Grantee 990 - Part 2 Organizations
 Grantees receiving \$5000 or more.
 Tax Year 2017
 Region: All Regions

Name, address, and zip	EIN	IRC Code	Cash Grant	Non-Cash Grant	Valuation Method	Descr Assistance	Purpose of Grant or Assistance	Fiscal Sponsor	Sponsor's EIN
Edward M. Kennedy Community Health Center 650 Lincoln Street, Suite 1 Worcester, MA 01605-2060	04-2513817	501(C)(3)		600			Board development		
Edward M. Kennedy Community Health Center 650 Lincoln Street, Suite 1 Worcester, MA 01605-2060	04-2513817	501(C)(3)		1,700			Project support		
Edward Street Child Services Inc 50 Portland Street Worcester, MA 01608	04-2133874	501(C)(3)		55,000			Master Teacher Consultation Program		
Edward Street Child Services Inc 50 Portland Street Worcester, MA 01608	04-2133874	501(C)(3)		20,000			Early Childhood Matters		
Elder Services of Worcester Area, Inc. 67 Millbrook Street, Suite 100 Worcester, MA 01606	04-2545221	501(C)(3)		850			Operating Support		
Elder Services of Worcester Area, Inc. 67 Millbrook Street, Suite 100 Worcester, MA 01606	04-2545221	501(C)(3)		1,140			Unrestricted		

4:38 PM

Grantee 990 - Part 2 Organizations
 Grantees receiving \$5000 or more.
 Tax Year 2017
 Region: All Regions

Name, address, and zip	EIN	IRC Code	Cash Grant	Non-Cash Grant	Valuation Method	Descr Assistance	Purpose of Grant or Assistance	Fiscal Sponsor	Sponsor's EIN
Elder Services of Worcester Area, Inc. 67 Millbrook Street, Suite 100 Worcester, MA 01606	04-2545221	501(C)(3)	2,960				Congregate Meal program		
Elder Services of Worcester Area, Inc. 67 Millbrook Street, Suite 100 Worcester, MA 01606	04-2545221	501(C)(3)	21,000				Unrestricted		
Elder Services of Worcester Area, Inc. 67 Millbrook Street, Suite 100 Worcester, MA 01606	04-2545221	501(C)(3)	7,500				Nutrition Program		
Elm Park Center for Early Childhood Education 284 Highland Street Worcester, MA 01602-2130	04-2500932	501(C)(3)	2,125				Agency Fund CLOSING		
Elm Park Center for Early Childhood Education 284 Highland Street Worcester, MA 01602-2130	04-2500932	501(C)(3)	122,000				Agency Fund CLOSING		
Ex-Prisoners and Prisoners Organizing for Community Advancement (EPOCA) 4 King Street Worcester, MA 01610	30-0327015	501(C)(3)	5,000				Putting UNITY Back into COMMUNITY		

4:38 PM

Grantee 990 - Part 2 Organizations
 Grantees receiving \$5000 or more.
 Tax Year 2017
 Region: All Regions

Name, address, and zip	EIN	IRC Code	Cash Grant	Non-Cash Grant	Valuation Method	Descr Assistance	Purpose of Grant or Assistance	Fiscal Sponsor	Sponsor's EIN
Eye of the Storm Equine Rescue, Inc. 65 White Pond Rd. PO Box 218 Stow, MA 01775	04-3483627	501(C)(3)	6,689				Operating Support		
Family Health Center of Worcester 26 Queen Street Worcester, MA 01610-2473	04-2485308	501(C)(3)	7,500				Positive Directions Summer Jump Start		
Family Health Center of Worcester 26 Queen Street Worcester, MA 01610-2473	04-2485308	501(C)(3)	800				Unrestricted		
Family Health Center of Worcester 26 Queen Street Worcester, MA 01610-2473	04-2485308	501(C)(3)	1,800				Unrestricted		
Family Health Center of Worcester 26 Queen Street Worcester, MA 01610-2473	04-2485308	501(C)(3)	25,000				Dental Care		
Family Health Center of Worcester 26 Queen Street Worcester, MA 01610-2473	04-2485308	501(C)(3)	16,200				Vision Care and Prescription Eye Wear		

4:38 PM

Grantee 990 - Part 2 Organizations
 Grantees receiving \$5000 or more.
 Tax Year 2017
 Region: All Regions

Name, address, and zip	EIN	IRC Code	Cash Grant	Non-Cash Grant	Valuation Method	Descr Assistance	Purpose of Grant or Assistance	Fiscal Sponsor	Sponsor's EIN
Family Health Center of Worcester 26 Queen Street Worcester, MA 01610-2473	04-2485308	501(C)(3)	10,000				Healthcare for Homeless Families Program		
Family Health Center of Worcester 26 Queen Street Worcester, MA 01610-2473	04-2485308	501(C)(3)	500				Unrestricted		
Family Health Center of Worcester 26 Queen Street Worcester, MA 01610-2473	04-2485308	501(C)(3)	2,500				Unrestricted		
Family Health Center of Worcester 26 Queen Street Worcester, MA 01610-2473	04-2485308	501(C)(3)	500				Unrestricted		
Family Health Center of Worcester 26 Queen Street Worcester, MA 01610-2473	04-2485308	501(C)(3)	10,000				Centering Pregnancy		
Family Health Center of Worcester 26 Queen Street Worcester, MA 01610-2473	04-2485308	501(C)(3)	15,000				Baby Cafe		
Family Health Center of Worcester 26 Queen Street Worcester, MA 01610-2473	04-2485308	501(C)(3)	20,000				Healthcare for Homeless		

04/09/2018

Greater Worcester Community Foundation

Page 31

4:38 PM

Grantee 990 - Part 2 Organizations
 Grantees receiving \$5000 or more.
 Tax Year 2017
 Region: All Regions

Name, address, and zip	EIN	IRC Code	Cash Grant	Non-Cash Grant	Valuation Method	Descr Assistance	Purpose of Grant or Assistance	Fiscal Sponsor	Sponsor's EIN
First Baptist Church of Worcester 111 Park Avenue Worcester, MA 01609	04-2104079	501(C)(3)	25,000				Annual Support		
First Unitarian Church 90 Main Street Worcester, MA 01608-1173	04-2125013	501(C)(3)	1,600				Unrestricted		
First Unitarian Church 90 Main Street Worcester, MA 01608-1173	04-2125013	501(C)(3)	4,000				Unrestricted		
First Unitarian Church 90 Main Street Worcester, MA 01608-1173	04-2125013	501(C)(3)	2,200				Unrestricted		
First Unitarian Church 90 Main Street Worcester, MA 01608-1173	04-2125013	501(C)(3)	5,200				Operating Support		
First Unitarian Church 90 Main Street Worcester, MA 01608-1173	04-2125013	501(C)(3)	766				Unrestricted		
First Unitarian Church 90 Main Street Worcester, MA 01608-1173	04-2125013	501(C)(3)	1,500				Encore Fund		

4:38 PM

Grantee 990 - Part 2 Organizations
 Grantees receiving \$5000 or more.
 Tax Year 2017
 Region: All Regions

Name, address, and zip	EIN	IRC Code	Cash Grant	Non-Cash Grant	Valuation Method	Descr Assistance	Purpose of Grant or Assistance	Fiscal Sponsor	Sponsor's EIN
First Unitarian Church 90 Main Street Worcester, MA 01608-1173	04-2125013	501(C)(3)	10,500				Operating support		
First Unitarian Church 90 Main Street Worcester, MA 01608-1173	04-2125013	501(C)(3)	1,500				Annual giving		
Fresh Start Furniture Bank 34 Tower Street, Unit E Hudson, MA 01749	46-2512827		5,000				Furniture Distribution Center		
Friendly House 36 Wall Street Worcester, MA 01604	04-2104239	501(C)(3)	21,000				Frances Perkins Transitional Program		
Friendly House 36 Wall Street Worcester, MA 01604	04-2104239	501(C)(3)	1,000				Unrestricted		
Friendly House 36 Wall Street Worcester, MA 01604	04-2104239	501(C)(3)	3,000				Food Pantry Operations		
Friends of Northbridge Elders c/o Northbridge Senior Center 20 Highland Street Whitinsville, MA 01588-2102	04-2657980		5,000				Agency Fund Distribution - Senior Center Capital Projects		

4:38 PM

Grantee 990 - Part 2 Organizations
 Grantees receiving \$5000 or more.
 Tax Year 2017
 Region: All Regions

Name, address, and zip	EIN	IRC Code	Cash Grant	Non-Cash Grant	Valuation Method	Descr Assistance	Purpose of Grant or Assistance	Fiscal Sponsor	Sponsor's EIN
Friends of St. Luke's 141 Main Street Southbridge, MA 01550	81-5437066		7,500				St. Luke's Guesthouse		
Friends of the Shrewsbury Public Library 609 Main Street Shrewsbury, MA 01545	45-2060364	501(C)(3)	5,000				English Conversation Circle		
Genesis Club 274 Lincoln Street Worcester, MA 01605-2106	04-2983234	501(C)(3)	3,000				Purchase of Heating and Cooling Equipment		
Genesis Club 274 Lincoln Street Worcester, MA 01605-2106	04-2983234	501(C)(3)	500				Operations		
Genesis Club 274 Lincoln Street Worcester, MA 01605-2106	04-2983234	501(C)(3)	1,000				Unrestricted		
Genesis Club 274 Lincoln Street Worcester, MA 01605-2106	04-2983234	501(C)(3)	5,000				Health and Wellness Program		
Genesis Club 274 Lincoln Street Worcester, MA 01605-2106	04-2983234	501(C)(3)	20,000				Educational Supports and Young Adults Initiative		

4:38 PM

Grantee 990 - Part 2 Organizations
 Grantees receiving \$5000 or more.
 Tax Year 2017
 Region: All Regions

Name, address, and zip	EIN	IRC Code	Cash Grant	Non-Cash Grant	Valuation Method	Descr Assistance	Purpose of Grant or Assistance	Fiscal Sponsor	Sponsor's EIN
Genesis Club 274 Lincoln Street Worcester, MA 01605-2106	04-2983234	501(C)(3)	2,000				Building Dreams		
Genesis Club 274 Lincoln Street Worcester, MA 01605-2106	04-2983234	501(C)(3)	57,000				Young Adults Transitions Project		
Girl Scouts of Central and Western Massachusetts 81 Gold Star Boulevard Worcester, MA 01606	04-2103856	501(C)(3)	900				For prevention and education programs		
Girl Scouts of Central and Western Massachusetts 81 Gold Star Boulevard Worcester, MA 01606	04-2103856	501(C)(3)	7,500				It's A Girl's World		
Girls Inc., of Worcester 125 Providence Street Worcester, MA 01604-5411	04-2123666	501(C)(3)	900				Programs		
Girls Inc., of Worcester 125 Providence Street Worcester, MA 01604-5411	04-2123666	501(C)(3)	1,300				Unrestricted		
Girls Inc., of Worcester 125 Providence Street Worcester, MA 01604-5411	04-2123666	501(C)(3)	17,500				Operating Support		

4:38 PM

Grantee 990 - Part 2 Organizations
 Grantees receiving \$5000 or more.
 Tax Year 2017
 Region: All Regions

Name, address, and zip	EIN	IRC Code	Cash Grant	Non-Cash Grant	Valuation Method	Descr Assistance	Purpose of Grant or Assistance	Fiscal Sponsor	Sponsor's EIN
Girls Inc., of Worcester 125 Providence Street Worcester, MA 01604-5411	04-2123666	501(C)(3)	6,500				Eureka!		
Girls Inc., of Worcester 125 Providence Street Worcester, MA 01604-5411	04-2123666	501(C)(3)	1,000				After-School Program		
Girls Inc., of Worcester 125 Providence Street Worcester, MA 01604-5411	04-2123666	501(C)(3)	100				Unrestricted		
Girls Inc., of Worcester 125 Providence Street Worcester, MA 01604-5411	04-2123666	501(C)(3)	6,500				Promoting Healthy Lifestyles		
Girls Inc., of Worcester 125 Providence Street Worcester, MA 01604-5411	04-2123666	501(C)(3)	2,000				Human Resource Consulting Services		
Girls Inc., of Worcester 125 Providence Street Worcester, MA 01604-5411	04-2123666	501(C)(3)	1,000				Unrestricted		
Greater Worcester Land Trust 4 Ash Street, Apt. 1 Worcester, MA 01608	22-2857318	501(C)(3)	250				Preservation		

4:38 PM

Grantee 990 - Part 2 Organizations
 Grantees receiving \$5000 or more.
 Tax Year 2017
 Region: All Regions

Name, address, and zip	EIN	IRC Code	Cash Grant	Non-Cash Grant	Valuation Method	Descr Assistance	Purpose of Grant or Assistance	Fiscal Sponsor	Sponsor's EIN
Greater Worcester Land Trust 4 Ash Street, Apt. 1 Worcester, MA 01608	22-2857318	501(C)(3)	400				Operations		
Greater Worcester Land Trust 4 Ash Street, Apt. 1 Worcester, MA 01608	22-2857318	501(C)(3)	7,000				Increasing Public Engagement / Operating Support		
Growing Places Garden Project, Inc. 325 Lindell Avenue Leominster, MA 01453	10-0004885	501(C)(3)	4,000				Operating Support		
Growing Places Garden Project, Inc. 325 Lindell Avenue Leominster, MA 01453	10-0004885	501(C)(3)	2,800				Healthy Food Access at Farmers Markets		
Growing Places Garden Project, Inc. 325 Lindell Avenue Leominster, MA 01453	10-0004885	501(C)(3)	3,000				Strategic Reframing		
Guild of St. Agnes 405 Grove Street, Suite 201 Worcester, MA 01605-1270	04-2104267	501(C)(3)	15,000				Teacher Education		
Guild of St. Agnes 405 Grove Street, Suite 201 Worcester, MA 01605-1270	04-2104267	501(C)(3)	1,500				Unrestricted		

4:38 PM

Grantee 990 - Part 2 Organizations
 Grantees receiving \$5000 or more.
 Tax Year 2017
 Region: All Regions

Name, address, and zip	EIN	IRC Code	Cash Grant	Non-Cash Grant	Valuation Method	Descr Assistance	Purpose of Grant or Assistance	Fiscal Sponsor	Sponsor's EIN
Habitat for Humanity-MetroWest/Greater Worcester 640 Lincoln Street Worcester, MA 01605	22-2583590	501(C)(3)	7,500				General Program Support		
Hadwen Park Congregational Church 6 Clover Street Worcester, MA 01603	04-6074571	501(C)(3)	5,000				LGBT Asylum Support Task Force		
Hearts for Heat, Leicester Chapter PO Box 69 Rochdale, MA 01542	26-4796836	501(C)(3)	5,000				Leicester Hearts for Heat		
Hillside School 404 Robin Hill Road Marlborough, MA 01752	04-2111216	501(C)(3)	5,920				Unrestricted		
Holy Name Central Catholic Junior/Senior High School 144 Granite Street Worcester, MA 01604	04-2106686	501(C)(3)	500				Scholarship Aid for Blackstone Valley Students		
Holy Name Central Catholic Junior/Senior High School 144 Granite Street Worcester, MA 01604	04-2106686	501(C)(3)	25,000				Construction of the "Life/Sciences/Biotech Learning Center"		

4:38 PM

Grantee 990 - Part 2 Organizations
 Grantees receiving \$5000 or more.
 Tax Year 2017
 Region: All Regions

Name, address, and zip	EIN	IRC Code	Cash Grant	Non-Cash Grant	Valuation Method	Descr Assistance	Purpose of Grant or Assistance	Fiscal Sponsor	Sponsor's EIN
HOPE Coalition 16 Shaffner Street c/o UMass Memorial Healthcare-Community Relations Dept Worcester, MA 01605	04-3108190	501(C)(3)	3,000				Youth Leadership Training Summer 2017	John Hayes	04-3108190
HOPE Coalition 16 Shaffner Street c/o UMass Memorial Healthcare-Community Relations Dept Worcester, MA 01605	04-3108190	501(C)(3)	85,000				Worcester ACTs	John Hayes	04-3108190
HOPE Coalition 16 Shaffner Street c/o UMass Memorial Healthcare-Community Relations Dept Worcester, MA 01605	04-3108190	501(C)(3)	15,000				Mental Health Model	John Hayes	04-3108190
HOPE Coalition 16 Shaffner Street c/o UMass Memorial Healthcare-Community Relations Dept Worcester, MA 01605	04-3108190	501(C)(3)	20,000				Implementation of Worcester ACTs	John Hayes	04-3108190
HOPE Coalition 16 Shaffner Street c/o UMass Memorial Healthcare-Community Relations Dept Worcester, MA 01605	04-3108190	501(C)(3)	2,000				HOPE School Chapters	John Hayes	04-3108190

4:38 PM

Grantee 990 - Part 2 Organizations
 Grantees receiving \$5000 or more.
 Tax Year 2017
 Region: All Regions

Name, address, and zip	EIN	IRC Code	Cash Grant	Non-Cash Grant	Valuation Method	Descr Assistance	Purpose of Grant or Assistance	Fiscal Sponsor	Sponsor's EIN
HOPE Coalition 16 Shaffner Street c/o UMass Memorial Healthcare-Community Relations Dept Worcester, MA 01605	04-3108190	501(C)(3)	12,500				HOPE Coalition Peer Leadership Program	John Hayes	04-3108190
Horizons for Homeless Children 1705 Columbus Avenue Roxbury, MA 02119	22-2915188	501(C)(3)	8,000				Central Region Playspace Program		
House of Peace and Education 29 Pleasant Street Gardner, MA 01440-2608	04-3300490	501(C)(3)	10,000				HOPE for Kids, Pals Program		
Interfaith Hospitality Network of Greater Worcester 91 June Street Worcester, MA 01602	04-2104239	501(C)(3)	10,000				Program Support	Gordon Hargrove	04-2104239
Interfund Transfer Agency Designated Gifts to Agency Fund			28,010				Transfer Designated fund balance to Agency		
Interfund Transfer Agency Designated Gifts to Agency Fund			104,054				Transfer H fund balances to Y		

4:38 PM

Grantee 990 - Part 2 Organizations
 Grantees receiving \$5000 or more.
 Tax Year 2017
 Region: All Regions

Name, address, and zip	EIN	IRC Code	Cash Grant	Non-Cash Grant	Valuation Method	Descr Assistance	Purpose of Grant or Assistance	Fiscal Sponsor	Sponsor's EIN
Jeremiah's Inn 1059 Main Street PO Box 30035 Worcester, MA 01603	22-2567080	501(C)(3)	1,000				Operations		
Jeremiah's Inn 1059 Main Street PO Box 30035 Worcester, MA 01603	22-2567080	501(C)(3)	7,500				Nutrition Programs		
Jeremiah's Inn 1059 Main Street PO Box 30035 Worcester, MA 01603	22-2567080	501(C)(3)	3,000				Nutrition Center and Community Garden		
Jewish Family & Children's Service, Inc. 646 Salisbury Street Worcester, MA 01609	04-2104356	501(C)(3)	10,000				School Consultation Program-Worcester		
Joy of Music Program, Inc. 1 Gorham Street Worcester, MA 01605-3626	04-3055099	501(C)(3)	5,000				Scholarships and Instruments		
Joy of Music Program, Inc. 1 Gorham Street Worcester, MA 01605-3626	04-3055099	501(C)(3)	1,300				Operating Support		
Joy of Music Program, Inc. 1 Gorham Street Worcester, MA 01605-3626	04-3055099	501(C)(3)	3,000				Capital Campaign		

4:38 PM

Grantee 990 - Part 2 Organizations
 Grantees receiving \$5000 or more.
 Tax Year 2017
 Region: All Regions

Name, address, and zip	EIN	IRC Code	Cash Grant	Non-Cash Grant	Valuation Method	Descr Assistance	Purpose of Grant or Assistance	Fiscal Sponsor	Sponsor's EIN
Joy of Music Program, Inc. 1 Gorham Street Worcester, MA 01605-3626	04-3055099	501(C)(3)	1,000				Unrestricted		
Joy of Music Program, Inc. 1 Gorham Street Worcester, MA 01605-3626	04-3055099	501(C)(3)	1,500				Annual Fund		
Joy of Music Program, Inc. 1 Gorham Street Worcester, MA 01605-3626	04-3055099	501(C)(3)	1,000				For Children		
Joy of Music Program, Inc. 1 Gorham Street Worcester, MA 01605-3626	04-3055099	501(C)(3)	300				Donor Advised Grant		
Joy of Music Program, Inc. 1 Gorham Street Worcester, MA 01605-3626	04-3055099	501(C)(3)	600				Unrestricted		
Joy of Music Program, Inc. 1 Gorham Street Worcester, MA 01605-3626	04-3055099	501(C)(3)	200				Agency Fund Distribution		
Joy of Music Program, Inc. 1 Gorham Street Worcester, MA 01605-3626	04-3055099	501(C)(3)	10,000				Financial Aid Program		

4:38 PM

Grantee 990 - Part 2 Organizations
 Grantees receiving \$5000 or more.
 Tax Year 2017
 Region: All Regions

Name, address, and zip	EIN	IRC Code	Cash Grant	Non-Cash Grant	Valuation Method	Descr Assistance	Purpose of Grant or Assistance	Fiscal Sponsor	Sponsor's EIN
Joy of Music Program, Inc. 1 Gorham Street Worcester, MA 01605-3626	04-3055099	501(C)(3)	600				Agency Fund Distribution		
Kennedy Donovan Center 1 Commercial Street Foxboro, MA 02035-2530	04-2519028	501(C)(3)	12,000				Fostering Early Connections - Building Parenting Confidence and Competence		
Latino Education Institute of Worcester State University 486 Chandler Street Worcester, MA 01602	22-3248067	501(C)(3)	12,000				ENLACE - Encouraging Latinos to Achieve Excellence	Thomas McNamara	22-3248067
Latino Education Institute of Worcester State University 486 Chandler Street Worcester, MA 01602	22-3248067	501(C)(3)	25,000				LEI Family Engagement Initiative	Thomas McNamara	22-3248067
Leicester Council on Aging Leicester Senior Center 40 Winslow Avenue Leicester, MA 01524-1113	04-6001197	501(C)(3)	650				Equipment Purchase		
Leicester Council on Aging Leicester Senior Center 40 Winslow Avenue Leicester, MA 01524-1113	04-6001197	501(C)(3)	5,000				Outreach Coordinator		

4:38 PM

Grantee 990 - Part 2 Organizations
 Grantees receiving \$5000 or more.
 Tax Year 2017
 Region: All Regions

Name, address, and zip	EIN	IRC Code	Cash Grant	Non-Cash Grant	Valuation Method	Descr Assistance	Purpose of Grant or Assistance	Fiscal Sponsor	Sponsor's EIN
Leicester Police Department 90 South Main St. Leicester, MA 01524	04-6001197	501(C)(3)	1,000				Ronald Tarentino Jr. Memorial Monument.		
Leicester Police Department 90 South Main St. Leicester, MA 01524	04-6001197	501(C)(3)	4,500				Police Memorial		
Leicester Police Department 90 South Main St. Leicester, MA 01524	04-6001197	501(C)(3)	4,000				D.A.R.E. DRUG ABUSE RESISTANCE EDUCATION		
Let's Get Ready 50 Broadway, 25th Floor New York, NY 10004	31-1698832	501(C)(3)	10,000				Worcester College Access Program		
Literacy Volunteers of Greater Worcester Worcester Public Library 3 Salem Square, Room 332 Worcester, MA 01608	04-2914294	501(C)(3)	5,000				English Language Literacy for Immigrant and Refugee Parents Helping Schoolchildren		
Literacy Volunteers of Greater Worcester Worcester Public Library 3 Salem Square, Room 332 Worcester, MA 01608	04-2914294	501(C)(3)	20,000				English Language Proficiency for Job Seekers & Other Adult Immigrants & Refugees		
Literacy Volunteers of the Tri-Community dba Literacy Volunteers of South Central Massachusetts c/o Jacob Edwards Library	02-0725620	501(C)(3)							

7,500

ESOL Tutoring Programs

04/09/2018

Greater Worcester Community Foundation

4:38 PM

Grantee 990 - Part 2 Organizations
 Grantees receiving \$5000 or more.
 Tax Year 2017
 Region: All Regions

Name, address, and zip	EIN	IRC Code	Cash Grant	Non-Cash Grant	Valuation Method	Descr Assistance	Purpose of Grant or Assistance	Fiscal Sponsor	Sponsor's EIN
LUK Inc. 545 Westminster Street Fitchburg, MA 01420	04-2483679	501(C)(3)	5,000				Mentoring Program		
LUK Inc. 545 Westminster Street Fitchburg, MA 01420	04-2483679	501(C)(3)	1,000				Giving Tree Project		
MAB Community Services - Central MA 799 West Boylston Street, Suite 7 Worcester, MA 01606-3071	04-2109859	501(C)(3)	8,200				Vision Rehabilitation Program for Elders		
MAB Community Services - Central MA 799 West Boylston Street, Suite 7 Worcester, MA 01606-3071	04-2109859	501(C)(3)	1,000				Agency Fund Distribution		
Massachusetts Audubon Society 208 South Great Road Lincoln, MA 01773	04-2104702	501(C)(3)	250				Unrestricted		
Massachusetts Audubon Society 208 South Great Road Lincoln, MA 01773	04-2104702	501(C)(3)	1,500				Broad Meadow Brook Wildlife Sanctuary		

4:38 PM

Grantee 990 - Part 2 Organizations
 Grantees receiving \$5000 or more.
 Tax Year 2017
 Region: All Regions

Name, address, and zip	EIN	IRC Code	Cash Grant	Non-Cash Grant	Valuation Method	Descr Assistance	Purpose of Grant or Assistance	Fiscal Sponsor	Sponsor's EIN
Massachusetts Audubon Society 208 South Great Road Lincoln, MA 01773	04-2104702	501(C)(3)	1,000				Let's GO! at Worcester East Middle School		
Massachusetts Audubon Society 208 South Great Road Lincoln, MA 01773	04-2104702	501(C)(3)	10,000				Petersham Land Conservation Project		
Massachusetts Audubon Society 208 South Great Road Lincoln, MA 01773	04-2104702	501(C)(3)	3,000				Central Massachusetts Sanctuaries		
Massachusetts Audubon Society 208 South Great Road Lincoln, MA 01773	04-2104702	501(C)(3)	3,000				Supporting Science Learning at Leicester Memorial Elementary School		
Massachusetts Audubon Society 208 South Great Road Lincoln, MA 01773	04-2104702	501(C)(3)	18,000				Broad Meadow Brook Program Support		
Massachusetts Audubon Society 208 South Great Road Lincoln, MA 01773	04-2104702	501(C)(3)	800				Unrestricted		

4:38 PM

Grantee 990 - Part 2 Organizations
 Grantees receiving \$5000 or more.
 Tax Year 2017
 Region: All Regions

Name, address, and zip	EIN	IRC Code	Cash Grant	Non-Cash Grant	Valuation Method	Descr Assistance	Purpose of Grant or Assistance	Fiscal Sponsor	Sponsor's EIN
Massachusetts Audubon Society 208 South Great Road Lincoln, MA 01773	04-2104702	501(C)(3)	18,000				Nature Education and Recreation Programs for Worcester Youth		
Massachusetts Audubon Society 208 South Great Road Lincoln, MA 01773	04-2104702	501(C)(3)	5,000				Unrestricted		
Massachusetts Education and Career Opportunities, Inc. 484 Main Street, Suite 500 Worcester, MA 01608-1874	23-7055676	501(C)(3)	2,500				Student Success Programs		
Massachusetts Education and Career Opportunities, Inc. 484 Main Street, Suite 500 Worcester, MA 01608-1874	23-7055676	501(C)(3)	10,000				Collegiate Success Institute		
Massachusetts Education and Career Opportunities, Inc. 484 Main Street, Suite 500 Worcester, MA 01608-1874	23-7055676	501(C)(3)	12,500				On Our Way		
Massachusetts Institute of Technology Office of the Recording Secretary 600 Memorial Drive, W98-300 Cambridge, MA 02139	04-2103594		500,000				MOSTEC Endowment		

4:38 PM

Grantee 990 - Part 2 Organizations
 Grantees receiving \$5000 or more.
 Tax Year 2017
 Region: All Regions

Name, address, and zip	EIN	IRC Code	Cash Grant	Non-Cash Grant	Valuation Method	Descr Assistance	Purpose of Grant or Assistance	Fiscal Sponsor	Sponsor's EIN
Massachusetts Institute of Technology Office of the Recording Secretary 600 Memorial Drive, W98-300 Cambridge, MA 02139	04-2103594		10,000				Office of Engineering Outreach Programs Fund		
Massachusetts Institute of Technology Office of the Recording Secretary 600 Memorial Drive, W98-300 Cambridge, MA 02139	04-2103594		10,000				Middle East Education of Tomorrow		
Matthew 25, Inc. 52 Queen Street Worcester, MA 01610-1437	22-2967513	501(C)(3)	7,500				General Operating Support		
Matthew 25, Inc. 52 Queen Street Worcester, MA 01610-1437	22-2967513	501(C)(3)	100				Unrestricted		
Matthew 25, Inc. 52 Queen Street Worcester, MA 01610-1437	22-2967513	501(C)(3)	1,400				Unrestricted		
MCPHS University 179 Longwood Avenue Boston, MA 02115	04-2104700	501(C)(3)	500				Worcester Campus		
MCPHS University 179 Longwood Avenue Boston, MA 02115	04-2104700	501(C)(3)	7,500				Worcester Campus: Dental Hygiene Community Ambassador		

Grantee 990 - Part 2 Organizations
 Grantees receiving \$5000 or more.
 Tax Year 2017
 Region: All Regions

Name, address, and zip	EIN	IRC Code	Cash Grant	Non-Cash Grant	Valuation Method	Descr Assistance	Purpose of Grant or Assistance	Fiscal Sponsor	Sponsor's EIN
Montachusett Opportunity Council 601 River Street Fitchburg, MA 01420	04-2401111	501(C)(3)	8,000				Homework Help Center at Green Acres		
Montachusett Opportunity Council 601 River Street Fitchburg, MA 01420	04-2401111	501(C)(3)	2,000				Education Program		
Music Worcester 319 Main Street Worcester, MA 01608-1511	04-2171207	501(C)(3)	8,555				Unrestricted		
Music Worcester 319 Main Street Worcester, MA 01608-1511	04-2171207	501(C)(3)	5,000				Unrestricted		
Music Worcester 319 Main Street Worcester, MA 01608-1511	04-2171207	501(C)(3)	2,000				Agency Fund Distribution		
Music Worcester 319 Main Street Worcester, MA 01608-1511	04-2171207	501(C)(3)	100				General Fund		
Music Worcester 319 Main Street Worcester, MA 01608-1511	04-2171207	501(C)(3)	10,000				General Fund		

Grantee 990 - Part 2 Organizations
 Grantees receiving \$5000 or more.
 Tax Year 2017
 Region: All Regions

Name, address, and zip	EIN	IRC Code	Cash Grant	Non-Cash Grant	Valuation Method	Descr Assistance	Purpose of Grant or Assistance	Fiscal Sponsor	Sponsor's EIN
Music Worcester 319 Main Street Worcester, MA 01608-1511	04-2171207	501(C)(3)	1,000				Unrestricted		
Music Worcester 319 Main Street Worcester, MA 01608-1511	04-2171207	501(C)(3)	10,000				In Harmony: Outreach Programs in Worcester		
Music Worcester 319 Main Street Worcester, MA 01608-1511	04-2171207	501(C)(3)	1,800				Young Artists Competition		
Music Worcester 319 Main Street Worcester, MA 01608-1511	04-2171207	501(C)(3)	2,000				Donor Advised Grant		
Music Worcester 319 Main Street Worcester, MA 01608-1511	04-2171207	501(C)(3)	10,000				General operations		
Music Worcester 319 Main Street Worcester, MA 01608-1511	04-2171207	501(C)(3)	3,000				Unrestricted		
Music Worcester 319 Main Street Worcester, MA 01608-1511	04-2171207	501(C)(3)	5,000				Unrestricted		

4:38 PM

Grantee 990 - Part 2 Organizations
 Grantees receiving \$5000 or more.
 Tax Year 2017
 Region: All Regions

Name, address, and zip	EIN	IRC Code	Cash Grant	Non-Cash Grant	Valuation Method	Descr Assistance	Purpose of Grant or Assistance	Fiscal Sponsor	Sponsor's EIN
Nativity School of Worcester 67 Lincoln Street Worcester, MA 01605	03-0385377	501(C)(3)	5,000				Unrestricted		
Nativity School of Worcester 67 Lincoln Street Worcester, MA 01605	03-0385377	501(C)(3)	500				Arts Program		
Nativity School of Worcester 67 Lincoln Street Worcester, MA 01605	03-0385377	501(C)(3)	7,500				Graduate Support Program		
NEADS/Dogs for Deaf and Disabled Americans PO Box 1100 Princeton, MA 01541	23-7281887	501(C)(3)	1,000				Unrestricted		
NEADS/Dogs for Deaf and Disabled Americans PO Box 1100 Princeton, MA 01541	23-7281887	501(C)(3)	9,898				Operating Support		
NEADS/Dogs for Deaf and Disabled Americans PO Box 1100 Princeton, MA 01541	23-7281887	501(C)(3)	9,500				Service Dog Training		
NEADY Cats PO Box 213 West Boylston, MA 01583	04-3509327	501(C)(3)	6,000				Program Support		

4:38 PM

Grantee 990 - Part 2 Organizations
 Grantees receiving \$5000 or more.
 Tax Year 2017
 Region: All Regions

Name, address, and zip	EIN	IRC Code	Cash Grant	Non-Cash Grant	Valuation Method	Descr Assistance	Purpose of Grant or Assistance	Fiscal Sponsor	Sponsor's EIN
New Hope 140 Park Street, Suite 1 Attleboro, MA 02703-8048	04-2681340	501(C)(3)	10,000				MJ Ledenham Center		
NewVue Communities 470 Main Street Fitchburg, MA 01420-4292	04-2690210	501(C)(3)	20,000				North of Main (NoM) Neighborhood Initiative		
Nichols College 129 Center Road Dudley, MA 01571-5000	04-2104778	501(C)(3)	2,200				Nichols Academy Scholarships		
Norman Rockwell Museum PO Box 308 Rte 183 Stockbridge, MA 01262	04-2450813	501(C)(3)	12,200				Capital Purchase		
North Brookfield Youth Center P.O. Box 86 133 Main Street North Brookfield, MA 01535-0086	04-3497157	501(C)(3)	10,000				Youth Programs		
North Quabbin Citizen Advocacy PO Box 362 135 East Main Street Orange, MA 01364	04-3218759	501(C)(3)	7,000				Operating Support		
Notre Dame Health Care Center, Inc 555-559 Plantation St. Worcester, MA 01605	04-3108782	501(C)(3)	5,000				Educational Bridge Center		

4:38 PM

Grantee 990 - Part 2 Organizations
 Grantees receiving \$5000 or more.
 Tax Year 2017
 Region: All Regions

Name, address, and zip	EIN	IRC Code	Cash Grant	Non-Cash Grant	Valuation Method	Descr Assistance	Purpose of Grant or Assistance	Fiscal Sponsor	Sponsor's EIN
Oak Hill Community Development Corporation 74 Providence Street Worcester, MA 01604	22-2599363	501(C)(3)	10,000				Operating Support for Neighborhood Development		
Old Sturbridge Village 1 Old Sturbridge Village Road Sturbridge, MA 01566	04-2104809	501(C)(3)	10,000				Annual Fund		
Operation Outreach-USA 360 Woodland St. Holliston, MA 01746	04-3368610	501(C)(3)	6,000				Worcester Public Schools Literacy Program		
Our Father's House, Inc. 199 Summer Street P.O. Box 7251 Fitchburg, MA 01420	22-2515061	501(C)(3)	15,000				Ensuring Health & Wellness in Homeless Children		
Our Father's House, Inc. 199 Summer Street P.O. Box 7251 Fitchburg, MA 01420	22-2515061	501(C)(3)	2,000				Fitchburg Community Food Pantry		
Pakachoag Music School of Greater Worcester 10 Irving Street Worcester, MA 01609	04-3029253	501(C)(3)	4,000				Financial Aid Program		

4:38 PM

Grantee 990 - Part 2 Organizations
 Grantees receiving \$5000 or more.
 Tax Year 2017
 Region: All Regions

Name, address, and zip	EIN	IRC Code	Cash Grant	Non-Cash Grant	Valuation Method	Descr Assistance	Purpose of Grant or Assistance	Fiscal Sponsor	Sponsor's EIN
Pakachoag Music School of Greater Worcester 10 Irving Street Worcester, MA 01609	04-3029253	501(C)(3)	2,000				Campaign Feasibility Study		
Parent/Professional Advocacy League (PPAL) 15 Court Square, Suite 660 Boston, MA 02108		501(C)(3)	5,000				PPAL Worcester Chapter		
Parent/Professional Advocacy League (PPAL) 15 Court Square, Suite 660 Boston, MA 02108		501(C)(3)	5,000				Strengthening Family Voice		
Partners in Health PO Box 996 Frederick, MD 21705	04-3567502	501(C)(3)	10,000				Unrestricted		
Pathways for Change 588 Main Street Worcester, MA 01608	04-2734584	501(C)(3)	10,000				Sexual Assault Prevention & Survivor Services		
Pathways for Change 588 Main Street Worcester, MA 01608	04-2734584	501(C)(3)	7,000				Medical Accompaniment		
Pathways for Change 588 Main Street Worcester, MA 01608	04-2734584	501(C)(3)	400				Unrestricted		

4:38 PM

Grantee 990 - Part 2 Organizations
 Grantees receiving \$5000 or more.
 Tax Year 2017
 Region: All Regions

Name, address, and zip	EIN	IRC Code	Cash Grant	Non-Cash Grant	Valuation Method	Descr Assistance	Purpose of Grant or Assistance	Fiscal Sponsor	Sponsor's EIN
Pernet Family Health Service 237 Millbury Street Worcester, MA 01610	04-2453851	501(C)(3)	1,000				Unrestricted		
Pernet Family Health Service 237 Millbury Street Worcester, MA 01610	04-2453851	501(C)(3)	20,000				Home Visits for Young Mothers		
Pernet Family Health Service 237 Millbury Street Worcester, MA 01610	04-2453851	501(C)(3)	500				Unrestricted		
Pernet Family Health Service 237 Millbury Street Worcester, MA 01610	04-2453851	501(C)(3)	10,000				Program Expansion for Early Intervention		
Pernet Family Health Service 237 Millbury Street Worcester, MA 01610	04-2453851	501(C)(3)	20,000				Early Childhood Development Program		
Pernet Family Health Service 237 Millbury Street Worcester, MA 01610	04-2453851	501(C)(3)	300				Holiday Services		
Planned Parenthood League of Massachusetts 1055 Commonwealth Avenue Boston, MA 02215-1001	04-2698497	501(C)(3)	1,000				Central Mass. Operating		

04/09/2018

Greater Worcester Community Foundation

Page 55

4:38 PM

Grantee 990 - Part 2 Organizations
 Grantees receiving \$5000 or more.
 Tax Year 2017
 Region: All Regions

Name, address, and zip	EIN	IRC Code	Cash Grant	Non-Cash Grant	Valuation Method	Descr Assistance	Purpose of Grant or Assistance	Fiscal Sponsor	Sponsor's EIN
Planned Parenthood League of Massachusetts 1055 Commonwealth Avenue Boston, MA 02215-1001	04-2698497	501(C)(3)	2,000				Unrestricted		
Planned Parenthood League of Massachusetts 1055 Commonwealth Avenue Boston, MA 02215-1001	04-2698497	501(C)(3)	12,500				Central Mass. Health Education Programs		
Planned Parenthood League of Massachusetts 1055 Commonwealth Avenue Boston, MA 02215-1001	04-2698497	501(C)(3)	100				Unrestricted		
Postal Employees' Relief Fund PO Box 7630 Woodbridge, VA 22195	52-1666010		10,000				To Help Needy Families		
Preservation Worcester 10 Cedar Street Worcester, MA 01609-2520	23-7073959	501(C)(3)	5,000				Unrestricted		
Preservation Worcester 10 Cedar Street Worcester, MA 01609-2520	23-7073959	501(C)(3)	100				Unrestricted		
Preservation Worcester 10 Cedar Street Worcester, MA 01609-2520	23-7073959	501(C)(3)	2,000				Unrestricted		

Grantee 990 - Part 2 Organizations
 Grantees receiving \$5000 or more.
 Tax Year 2017
 Region: All Regions

Name, address, and zip	EIN	IRC Code	Cash Grant	Non-Cash Grant	Valuation Method	Descr Assistance	Purpose of Grant or Assistance	Fiscal Sponsor	Sponsor's EIN
Preservation Worcester 10 Cedar Street Worcester, MA 01609-2520	23-7073959	501(C)(3)	9,000				Operating Support		
Preservation Worcester 10 Cedar Street Worcester, MA 01609-2520	23-7073959	501(C)(3)	250				Operating Support		
Preservation Worcester 10 Cedar Street Worcester, MA 01609-2520	23-7073959	501(C)(3)	1,140				Unrestricted		
Preservation Worcester 10 Cedar Street Worcester, MA 01609-2520	23-7073959	501(C)(3)	1,000				John and Frannie Herron Park Maintenance Fund		
Preservation Worcester 10 Cedar Street Worcester, MA 01609-2520	23-7073959	501(C)(3)	1,750				Jane Jacobs in the Woo		
Quinsigamond Community College Foundation 670 West Boylston Street Worcester, MA 01606	04-2897624	501(C)(3)	5,000				Brothers & Keepers Summer Bridge Academy		
Quinsigamond Community College Foundation 670 West Boylston Street Worcester, MA 01606	04-2897624	501(C)(3)	3,000				WeTEACH - Summer 2017 Pilot Program		

4:38 PM

Grantee 990 - Part 2 Organizations
 Grantees receiving \$5000 or more.
 Tax Year 2017
 Region: All Regions

Name, address, and zip	EIN	IRC Code	Cash Grant	Non-Cash Grant	Valuation Method	Descr Assistance	Purpose of Grant or Assistance	Fiscal Sponsor	Sponsor's EIN
Quinsigamond Community College Foundation 670 West Boylston Street Worcester, MA 01606	04-2897624	501(C)(3)	1,900				For Nursing Scholarships		
Quinsigamond Community College Foundation 670 West Boylston Street Worcester, MA 01606	04-2897624	501(C)(3)	15,000				Women in Technology Program		
Rachel's Table of the Jewish Federation of Central Mass Inc. 633 Salisbury Street Worcester, MA 01609	04-2104363	501(C)(3)	12,000				Program Support	Steven Schimmel	04-2104363
Rachel's Table of the Jewish Federation of Central Mass Inc. 633 Salisbury Street Worcester, MA 01609	04-2104363	501(C)(3)	1,500				Rachels Table Food Rescue Program	Steven Schimmel	04-2104363
Rainbow Child Development Center 10 Edward Street Worcester, MA 01605	04-2507815	501(C)(3)	18,000				Early Education Program		
Rainbow Child Development Center 10 Edward Street Worcester, MA 01605	04-2507815	501(C)(3)	2,840				Nutrition education program		

4:38 PM

Grantee 990 - Part 2 Organizations
 Grantees receiving \$5000 or more.
 Tax Year 2017
 Region: All Regions

Name, address, and zip	EIN	IRC Code	Cash Grant	Non-Cash Grant	Valuation Method	Descr Assistance	Purpose of Grant or Assistance	Fiscal Sponsor	Sponsor's EIN
Rainbow Child Development Center 10 Edward Street Worcester, MA 01605	04-2507815	501(C)(3)	1,300				Unrestricted		
Reach Out and Read 89 South Street, Suite 201 Boston, MA 02111	04-3481253	501(C)(3)	5,000				Worcester Rx for Success!		
Refugee and Immigrant Assistance Center 340 Main Street, Ste 800 Worcester, MA 01608-1606	04-3430294	501(C)(3)	10,000				Comprehensive Case Management		
Refugee and Immigrant Assistance Center 340 Main Street, Ste 800 Worcester, MA 01608-1606	04-3430294	501(C)(3)	10,000				ESOL System Navigator - Collaborative Project		
Regatta Point Community Sailing 10 Lake Avenue North Worcester, MA 01605	04-2309329	501(C)(3)	5,000				Boating Scholarships for Youth		
Regional Environmental Council PO Box 255 Worcester, MA 01613	04-6364350	501(C)(3)	500				Unrestricted		
Regional Environmental Council PO Box 255 Worcester, MA 01613	04-6364350	501(C)(3)	20,000				General Operations		

Grantee 990 - Part 2 Organizations
 Grantees receiving \$5000 or more.
 Tax Year 2017
 Region: All Regions

Name, address, and zip	EIN	IRC Code	Cash Grant	Non-Cash Grant	Valuation Method	Descr Assistance	Purpose of Grant or Assistance	Fiscal Sponsor	Sponsor's EIN
Regional Environmental Council PO Box 255 Worcester, MA 01613	04-6364350	501(C)(3)	3,000				Incentive Program at Farmers Markets		
Rise Above Foundation P.O. Box #174 Northbridge, MA 01534	27-1409946	501(C)(3)	5,000				Activities for Foster Youth		
Rural Cemetery & Crematory 180 Grove Street Worcester, MA 01605-1711	04-1795920	501(C)(13)	12,800				Unrestricted		
Rural Cemetery & Crematory 180 Grove Street Worcester, MA 01605-1711	04-1795920	501(C)(13)	75,000				Agency Fund Distribution		
Rural Cemetery & Crematory 180 Grove Street Worcester, MA 01605-1711	04-1795920	501(C)(13)	250,000				Agency Fund Distribution / Special		
Salvation Army Worcester Citadel Corp 640 Main Street Worcester, MA 01608-2021	13-2923701	501(C)(3)	3,000				Unrestricted		
Salvation Army Worcester Citadel Corp 640 Main Street Worcester, MA 01608-2021	13-2923701	501(C)(3)	1,500				Unrestricted		

4:38 PM

Grantee 990 - Part 2 Organizations
 Grantees receiving \$5000 or more.
 Tax Year 2017
 Region: All Regions

Name, address, and zip	EIN	IRC Code	Cash Grant	Non-Cash Grant	Valuation Method	Descr Assistance	Purpose of Grant or Assistance	Fiscal Sponsor	Sponsor's EIN
Salvation Army Worcester Citadel Corp 640 Main Street Worcester, MA 01608-2021	13-2923701	501(C)(3)	1,000				Hurricane Harvey Relief		
Salvation Army Worcester Citadel Corp 640 Main Street Worcester, MA 01608-2021	13-2923701	501(C)(3)	7,500				Sally's Place		
Saving Baby Equine Charity 10801 Last Drive Plymouth, MI 48170	45-3712661	501(C)(3)	5,000				Unrestricted		
Second Chance Animal Services PO Box 136 111 Young Road East Brookfield, MA 01515	04-3490671	501(C)(3)	20,000				Worcester Community Veterinary Clinic		
Senior Coastsiders, Inc. 925 Main Street Half Moon Bay, CA	94-3119310	501(C)(3)	20,000				Special Campaign		
South Middlesex Opportunity Council 7 Bishop Street Framingham, MA 01702	04-2389659	501(C)(3)	15,000				Greater Worcester Housing Connection		
Southeast Asian Coalition of Central Massachusetts 484 Main Street Suite 400 Worcester, MA 01608	04-3393955	501(C)(3)	3,000				Cultural Food for Body and		

04/09/2018

Greater Worcester Community Foundation

Page 61

4:38 PM

Grantee 990 - Part 2 Organizations
 Grantees receiving \$5000 or more.
 Tax Year 2017
 Region: All Regions

Name, address, and zip	EIN	IRC Code	Cash Grant	Non-Cash Grant	Valuation Method	Descr Assistance	Purpose of Grant or Assistance	Fiscal Sponsor	Sponsor's EIN
Southeast Asian Coalition of Central Massachusetts 484 Main Street Suite 400 Worcester, MA 01608	04-3393955	501(C)(3)	25,000				Building Healthy Asian and Arabic Speaking Communities		
Southeast Asian Coalition of Central Massachusetts 484 Main Street Suite 400 Worcester, MA 01608	04-3393955	501(C)(3)	15,000				Healthcare Access Program		
Spanish American Center 112 Spruce Street Leominster, MA 01453	04-2761759	501(C)(3)	1,500				Leominster Youth for Change		
Spanish American Center 112 Spruce Street Leominster, MA 01453	04-2761759	501(C)(3)	6,000				Nos Estamos Ayudando (Helping Ourselves)		
Spanish American Center 112 Spruce Street Leominster, MA 01453	04-2761759	501(C)(3)	2,500				Food Pantry Operations		
SPC Matthew Pollini Memorial Fund, Inc. 63 Cart Path Road Dracut, MA 01826	81-5315181		9,523				Final Distribution - Fund Closure		

4:38 PM

Grantee 990 - Part 2 Organizations
 Grantees receiving \$5000 or more.
 Tax Year 2017
 Region: All Regions

Name, address, and zip	EIN	IRC Code	Cash Grant	Non-Cash Grant	Valuation Method	Descr Assistance	Purpose of Grant or Assistance	Fiscal Sponsor	Sponsor's EIN
St. Joseph and St. Pius X Parishes 759 Main Street Leicester, MA 01524	53-0196617	501(C)(3)	5,000				Leicester Food Pantry		
St. Mary's Assumption Albanian Orthodox Church 535 Salisbury St. Worcester, MA 01609-1307	04-2691050	501(C)(3)	45,000				Agency Fund Distribution		
StandUp for Kids Worcester 4 King Street Worcester, MA 01610	33-0414855	501(C)(3)	5,000				Operating Support		
Straight Ahead Ministries, Inc. 791 Main Street Worcester, MA 01610	04-3103694	501(C)(3)	15,000				Youth Re-entry and Straight2Work Program		
Straight Ahead Ministries, Inc. 791 Main Street Worcester, MA 01610	04-3103694	501(C)(3)	3,000				Special Ministries		
Straight Ahead Ministries, Inc. 791 Main Street Worcester, MA 01610	04-3103694	501(C)(3)	25,000				Board Challenge Grant		
Straight Ahead Ministries, Inc. 791 Main Street Worcester, MA 01610	04-3103694	501(C)(3)	3,000				Education		

Grantee 990 - Part 2 Organizations
 Grantees receiving \$5000 or more.
 Tax Year 2017
 Region: All Regions

Name, address, and zip	EIN	IRC Code	Cash Grant	Non-Cash Grant	Valuation Method	Descr Assistance	Purpose of Grant or Assistance	Fiscal Sponsor	Sponsor's EIN
Temple Emanuel Sinai 661 Salisbury Street Worcester, MA 01609-1120	04-2200149	501(C)(3)	600,000				Agency Fund Distribution / Closing		
Temple Emanuel Sinai 661 Salisbury Street Worcester, MA 01609-1120	04-2200149	501(C)(3)	400				Unrestricted		
Temple Emanuel Sinai 661 Salisbury Street Worcester, MA 01609-1120	04-2200149	501(C)(3)	100,090				Agency Fund Distribution-Final		
Temple Emanuel Sinai 661 Salisbury Street Worcester, MA 01609-1120	04-2200149	501(C)(3)	400,000				Agency Fund Distribution / Closing		
Tenacity, Inc. 38 Everett Street, Suite 50 Boston, MA 02134	04-3452763	501(C)(3)	7,500				Summer Tennis & Reading Program		
Tennessee Justice Center 211 7th Avenue N #100 Nashville, TN 37219	62-1630417	501(C)(3)	5,000				Unrestricted		
Thayer Memorial Library 717 Main Street Lancaster, MA 01523	04-3367852	501(C)(3)	7,350				Rosemary Davis Nature Series 2017-18		

4:38 PM

Grantee 990 - Part 2 Organizations
 Grantees receiving \$5000 or more.
 Tax Year 2017
 Region: All Regions

Name, address, and zip	EIN	IRC Code	Cash Grant	Non-Cash Grant	Valuation Method	Descr Assistance	Purpose of Grant or Assistance	Fiscal Sponsor	Sponsor's EIN
The Canal District Alliance 138 Green Street Ste 3 Worcester, MA 01604-4103	26-0315290	501(C)(3)	7,000				Canal District Tours		
The CASA Project 100 Grove Street, Suite 403 Worcester, MA 01605-2630	04-2711865	501(C)(3)	25,000				Operating Support		
The CASA Project 100 Grove Street, Suite 403 Worcester, MA 01605-2630	04-2711865	501(C)(3)	5,000				Unrestricted		
The CASA Project 100 Grove Street, Suite 403 Worcester, MA 01605-2630	04-2711865	501(C)(3)	7,500				Transitional Age Youth Bridge Program		
The CASA Project 100 Grove Street, Suite 403 Worcester, MA 01605-2630	04-2711865	501(C)(3)	100,000				Mental Health Services		
The CASA Project 100 Grove Street, Suite 403 Worcester, MA 01605-2630	04-2711865	501(C)(3)	100				Unrestricted		
The Shine Initiative 9 Leominster Connector Leominster, MA 01453	04-3537449	501(C)(3)	5,000				Unrestricted	Philip Grzewinski	04-3537449

4:38 PM

Grantee 990 - Part 2 Organizations
 Grantees receiving \$5000 or more.
 Tax Year 2017
 Region: All Regions

Name, address, and zip	EIN	IRC Code	Cash Grant	Non-Cash Grant	Valuation Method	Descr Assistance	Purpose of Grant or Assistance	Fiscal Sponsor	Sponsor's EIN
Tower Hill Botanic Garden 11 French Drive PO Box 598 Boylston, MA 01505	04-1988945	501(C)(3)	5,000				Unrestricted		
Tower Hill Botanic Garden 11 French Drive PO Box 598 Boylston, MA 01505	04-1988945	501(C)(3)	1,350				Unrestricted		
Tower Hill Botanic Garden 11 French Drive PO Box 598 Boylston, MA 01505	04-1988945	501(C)(3)	1,250				John Green Society		
Tower Hill Botanic Garden 11 French Drive PO Box 598 Boylston, MA 01505	04-1988945	501(C)(3)	150				Unrestricted		
Tower Hill Botanic Garden 11 French Drive PO Box 598 Boylston, MA 01505	04-1988945	501(C)(3)	5,000				Worcester Refugee Assistance Project (WRAP) Partnership Program		
Tower Hill Botanic Garden 11 French Drive PO Box 598 Boylston, MA 01505	04-1988945	501(C)(3)	5,874				Unrestricted		

4:38 PM

Grantee 990 - Part 2 Organizations
 Grantees receiving \$5000 or more.
 Tax Year 2017
 Region: All Regions

Name, address, and zip	EIN	IRC Code	Cash Grant	Non-Cash Grant	Valuation Method	Descr Assistance	Purpose of Grant or Assistance	Fiscal Sponsor	Sponsor's EIN
Tower Hill Botanic Garden 11 French Drive PO Box 598 Boylston, MA 01505	04-1988945	501(C)(3)	2,000				Unrestricted		
Tower Hill Botanic Garden 11 French Drive PO Box 598 Boylston, MA 01505	04-1988945	501(C)(3)	1,264				Worcester Tree Initiative Urban Street Tree Planting		
Tower Hill Botanic Garden 11 French Drive PO Box 598 Boylston, MA 01505	04-1988945	501(C)(3)	1,140				Unrestricted		
Tri-Community YMCA 43 Everett St. Southbridge, MA 01550	04-2105872	501(C)(3)	10,000				Strengthening Families		
Tri-Valley, Inc. 10 Mill Street Dudley, MA 01571	04-2594201	501(C)(3)	10,000				Nutrition Programs for Seniors		
Trinity Lutheran Church 73 Lancaster Street Worcester, MA 01609	41-1568278	501(C)(3)	4,393				Lillian H. Person Fund		
Trinity Lutheran Church 73 Lancaster Street Worcester, MA 01609	41-1568278	501(C)(3)	25,663				Unrestricted		

4:38 PM

Grantee 990 - Part 2 Organizations
 Grantees receiving \$5000 or more.
 Tax Year 2017
 Region: All Regions

Name, address, and zip	EIN	IRC Code	Cash Grant	Non-Cash Grant	Valuation Method	Descr Assistance	Purpose of Grant or Assistance	Fiscal Sponsor	Sponsor's EIN
Trinity Lutheran Church 73 Lancaster Street Worcester, MA 01609	41-1568278	501(C)(3)	4,393				Gustav Stellan Peterson Fund		
UMass Memorial Foundation Office of Advancement 333 South Street, 4th Floor Shrewsbury, MA 01545-7807	04-3108190	501(C)(3)	9,000				Unrestricted		
UMass Memorial Foundation Office of Advancement 333 South Street, 4th Floor Shrewsbury, MA 01545-7807	04-3108190	501(C)(3)	4,200				Peter H. Levine Infusion Center		
UMass Memorial Foundation Office of Advancement 333 South Street, 4th Floor Shrewsbury, MA 01545-7807	04-3108190	501(C)(3)	1,000				UMass Medical School		
UMass Memorial Foundation Office of Advancement 333 South Street, 4th Floor Shrewsbury, MA 01545-7807	04-3108190	501(C)(3)	300				UMass Memorial Hospice		
UMass Memorial Foundation Office of Advancement 333 South Street, 4th Floor Shrewsbury, MA 01545-7807	04-3108190	501(C)(3)	1,350				UMass Memorial Health Care Neonatal Infant Care Unit		
UMass Memorial Foundation Office of Advancement 333 South Street, 4th Floor Shrewsbury, MA 01545-7807	04-3108190	501(C)(3)	1,200				Edward R. Budnitz, MD Cardiovascular Research Fund		

Grantee 990 - Part 2 Organizations
 Grantees receiving \$5000 or more.
 Tax Year 2017
 Region: All Regions

Name, address, and zip	EIN	IRC Code	Cash Grant	Non-Cash Grant	Valuation Method	Descr Assistance	Purpose of Grant or Assistance	Fiscal Sponsor	Sponsor's EIN
UMass Memorial Foundation Office of Advancement 333 South Street, 4th Floor Shrewsbury, MA 01545-7807	04-3108190	501(C)(3)	12,000				Barre Health Center		
UMass Memorial Foundation Office of Advancement 333 South Street, 4th Floor Shrewsbury, MA 01545-7807	04-3108190	501(C)(3)	600				Edward Budnitz Cardiovascular Research Fund		
UMass Memorial Foundation Office of Advancement 333 South Street, 4th Floor Shrewsbury, MA 01545-7807	04-3108190	501(C)(3)	1,534				UMass Memorial Health Care		
UMass Memorial Foundation Office of Advancement 333 South Street, 4th Floor Shrewsbury, MA 01545-7807	04-3108190	501(C)(3)	5,920				UMass Medical School Research Fellowship Fund		
UMass Memorial Foundation Office of Advancement 333 South Street, 4th Floor Shrewsbury, MA 01545-7807	04-3108190	501(C)(3)	432				UMass Memorial Health Care		
UMass Memorial Foundation Office of Advancement 333 South Street, 4th Floor Shrewsbury, MA 01545-7807	04-3108190	501(C)(3)	600				UMass Medical Blood Bank Research Fund		

4:38 PM

Grantee 990 - Part 2 Organizations
 Grantees receiving \$5000 or more.
 Tax Year 2017
 Region: All Regions

Name, address, and zip	EIN	IRC Code	Cash Grant	Non-Cash Grant	Valuation Method	Descr Assistance	Purpose of Grant or Assistance	Fiscal Sponsor	Sponsor's EIN
UMass Memorial Foundation Office of Advancement 333 South Street, 4th Floor Shrewsbury, MA 01545-7807	04-3108190	501(C)(3)	20,000				CANDO Clinic		
UMass Memorial Foundation Office of Advancement 333 South Street, 4th Floor Shrewsbury, MA 01545-7807	04-3108190	501(C)(3)	850				UMass Memorial Health Care		
UMass Memorial Foundation Office of Advancement 333 South Street, 4th Floor Shrewsbury, MA 01545-7807	04-3108190	501(C)(3)	500				UMASS ALS Fund		
United Way Lee, Hendry & Glades 7273 Concourse Drive Fort Myers, FL 33908	59-1005169	501(C)(3)	10,000				Unrestricted		
United Way of Central Massachusetts 484 Main Street, Ste. 300 Worcester, MA 01608-1880	04-2104017	501(C)(3)	10,000				Unrestricted		
United Way of Central Massachusetts 484 Main Street, Ste. 300 Worcester, MA 01608-1880	04-2104017	501(C)(3)	64,100				for the 2016 Annual Campaign		
United Way of Central Massachusetts 484 Main Street, Ste. 300 Worcester, MA 01608-1880	04-2104017	501(C)(3)	5,000				Women's Initiative		

4:38 PM

Grantee 990 - Part 2 Organizations
 Grantees receiving \$5000 or more.
 Tax Year 2017
 Region: All Regions

Name, address, and zip	EIN	IRC Code	Cash Grant	Non-Cash Grant	Valuation Method	Descr Assistance	Purpose of Grant or Assistance	Fiscal Sponsor	Sponsor's EIN
United Way of Central Massachusetts 484 Main Street, Ste. 300 Worcester, MA 01608-1880	04-2104017	501(C)(3)	10,000				for the 2016 Annual Campaign		
United Way of Central Massachusetts 484 Main Street, Ste. 300 Worcester, MA 01608-1880	04-2104017	501(C)(3)	1,500				Annual Appeal		
United Way of Central Massachusetts 484 Main Street, Ste. 300 Worcester, MA 01608-1880	04-2104017	501(C)(3)	34,300				for the 2016 Annual Campaign		
United Way of Central Massachusetts 484 Main Street, Ste. 300 Worcester, MA 01608-1880	04-2104017	501(C)(3)	5,000				Women's Initiative		
United Way of Central Massachusetts 484 Main Street, Ste. 300 Worcester, MA 01608-1880	04-2104017	501(C)(3)	25,300				for the 2016 Annual Campaign		
United Way of Central Massachusetts 484 Main Street, Ste. 300 Worcester, MA 01608-1880	04-2104017	501(C)(3)	22,100				Annual Campaign		

4:38 PM

Grantee 990 - Part 2 Organizations
 Grantees receiving \$5000 or more.
 Tax Year 2017
 Region: All Regions

Name, address, and zip	EIN	IRC Code	Cash Grant	Non-Cash Grant	Valuation Method	Descr Assistance	Purpose of Grant or Assistance	Fiscal Sponsor	Sponsor's EIN
United Way of Central Massachusetts 484 Main Street, Ste. 300 Worcester, MA 01608-1880	04-2104017	501(C)(3)	60,000				Summer Learning Collaborative		
United Way of Central Massachusetts 484 Main Street, Ste. 300 Worcester, MA 01608-1880	04-2104017	501(C)(3)	1,500				Annual Campaign		
United Way of Central Massachusetts 484 Main Street, Ste. 300 Worcester, MA 01608-1880	04-2104017	501(C)(3)	2,000				Unrestricted		
United Way of Central Massachusetts 484 Main Street, Ste. 300 Worcester, MA 01608-1880	04-2104017	501(C)(3)	8,000				Agency Fund distribution		
Valley Residents for Improvement 40 Belmont Street Worcester, MA 01605	04-2702167	501(C)(3)	18,000				Lakeside Summer Camp		
Veterans, Inc. 69 Grove Street Worcester, MA 01605	04-3098024	501(C)(3)	100				Unrestricted		
Veterans, Inc. 69 Grove Street Worcester, MA 01605	04-3098024	501(C)(3)	12,500				Supportive Services for Veterans and Families		

4:38 PM

Grantee 990 - Part 2 Organizations
 Grantees receiving \$5000 or more.
 Tax Year 2017
 Region: All Regions

Name, address, and zip	EIN	IRC Code	Cash Grant	Non-Cash Grant	Valuation Method	Descr Assistance	Purpose of Grant or Assistance	Fiscal Sponsor	Sponsor's EIN
Visitation House, Inc. 119 Endicott Street Worcester, MA 01606	01-0595450	501(C)(3)	5,000				Outreach Coordinator		
Visitation House, Inc. 119 Endicott Street Worcester, MA 01606	01-0595450	501(C)(3)	2,000				Unrestricted		
Visitation House, Inc. 119 Endicott Street Worcester, MA 01606	01-0595450	501(C)(3)	1,000				Unrestricted		
VNA Care Network and Hospice 120 Thomas Street Worcester, MA 01608	04-2103825	501(C)(3)	5,874				Worcester area programs		
VNA Care Network and Hospice 120 Thomas Street Worcester, MA 01608	04-2103825	501(C)(3)	200				Hospice		
VSA Massachusetts 89 South Street, Suite 101 Boston, MA 02111	04-2699540	501(C)(3)	5,000				Open Door Gallery at Worcester Art Museum		
Wayne County Community Foundation 517 North Market Street Wooster, OH 44691	34-1281026	501(C)(3)	20,000				The Oscar Fund		

4:38 PM

Grantee 990 - Part 2 Organizations
 Grantees receiving \$5000 or more.
 Tax Year 2017
 Region: All Regions

Name, address, and zip	EIN	IRC Code	Cash Grant	Non-Cash Grant	Valuation Method	Descr Assistance	Purpose of Grant or Assistance	Fiscal Sponsor	Sponsor's EIN
Wayne County Community Foundation 517 North Market Street Wooster, OH 44691	34-1281026	501(C)(3)	15,000				The Oscar Fund		
WCUW, Inc. 910 Main Street Worcester, MA 01610	23-7247980	501(C)(3)	10,000				The Voices of Worcester		
West Boylston Historical Society 65 Worcester Street PO Box 201 West Boylston, MA 01583-1412	23-7400581	501(C)(3)	5,000				Agency Fund Distribution		
Whitin Community Center 60 Main Street PO Box 244 Whitinsville, MA 01588	04-6087769	501(C)(3)	10,000				Youth Outreach Programs		
Whitin Community Center 60 Main Street PO Box 244 Whitinsville, MA 01588	04-6087769	501(C)(3)	459				Unrestricted		
Whitin Community Center 60 Main Street PO Box 244 Whitinsville, MA 01588	04-6087769	501(C)(3)	33,700				Agency Fund distribution		

4:38 PM

Grantee 990 - Part 2 Organizations
 Grantees receiving \$5000 or more.
 Tax Year 2017
 Region: All Regions

Name, address, and zip	EIN	IRC Code	Cash Grant	Non-Cash Grant	Valuation Method	Descr Assistance	Purpose of Grant or Assistance	Fiscal Sponsor	Sponsor's EIN
Whitin Community Center 60 Main Street PO Box 244 Whitinsville, MA 01588	04-6087769	501(C)(3)		500			Operating Support		
Whitin Community Center 60 Main Street PO Box 244 Whitinsville, MA 01588	04-6087769	501(C)(3)		10,000			Outreach Program		
Whitin Community Center 60 Main Street PO Box 244 Whitinsville, MA 01588	04-6087769	501(C)(3)		10,000			Outreach Program		
Worcester Academy 81 Providence Street Worcester, MA 01604	04-2105855	501(C)(3)		34,500			Chapin Riley Scholarship		
Worcester Academy 81 Providence Street Worcester, MA 01604	04-2105855	501(C)(3)		1,000			Annual Appeal		
Worcester Academy 81 Providence Street Worcester, MA 01604	04-2105855	501(C)(3)		1,000			Barbara Gould Varsity Swim Coach Fund		
Worcester Academy 81 Providence Street Worcester, MA 01604	04-2105855	501(C)(3)		500			Annual Fund		

4:38 PM

Grantee 990 - Part 2 Organizations
 Grantees receiving \$5000 or more.
 Tax Year 2017
 Region: All Regions

Name, address, and zip	EIN	IRC Code	Cash Grant	Non-Cash Grant	Valuation Method	Descr Assistance	Purpose of Grant or Assistance	Fiscal Sponsor	Sponsor's EIN
Worcester Academy 81 Providence Street Worcester, MA 01604	04-2105855	501(C)(3)	3,000				OnWard Campaign		
Worcester Academy 81 Providence Street Worcester, MA 01604	04-2105855	501(C)(3)	500				Annual Fund		
Worcester Academy 81 Providence Street Worcester, MA 01604	04-2105855	501(C)(3)	5,000				Summer Scholars Program		
Worcester Anti-Foreclosure Team 70 James Street, Suite 129-B Worcester, MA 01603	22-2976657	501(C)(3)	7,500				Program Support for WAFT	Yvette Dyson	22-2976657
Worcester Art Museum 55 Salisbury Street Worcester, MA 01609-3196	04-1988530	501(C)(3)	74,700				Annual Grant for Youth and Family Outreach Programs		
Worcester Art Museum 55 Salisbury Street Worcester, MA 01609-3196	04-1988530	501(C)(3)	100				Unrestricted		
Worcester Art Museum 55 Salisbury Street Worcester, MA 01609-3196	04-1988530	501(C)(3)	100,000				Operating support		

4:38 PM

Grantee 990 - Part 2 Organizations
 Grantees receiving \$5000 or more.
 Tax Year 2017
 Region: All Regions

Name, address, and zip	EIN	IRC Code	Cash Grant	Non-Cash Grant	Valuation Method	Descr Assistance	Purpose of Grant or Assistance	Fiscal Sponsor	Sponsor's EIN
Worcester Art Museum 55 Salisbury Street Worcester, MA 01609-3196	04-1988530	501(C)(3)	500				Star Wars Day		
Worcester Art Museum 55 Salisbury Street Worcester, MA 01609-3196	04-1988530	501(C)(3)	5,250				Operating Funds		
Worcester Art Museum 55 Salisbury Street Worcester, MA 01609-3196	04-1988530	501(C)(3)	34,500				Contemporary art acquisition		
Worcester Art Museum 55 Salisbury Street Worcester, MA 01609-3196	04-1988530	501(C)(3)	3,400				Education Programs		
Worcester Art Museum 55 Salisbury Street Worcester, MA 01609-3196	04-1988530	501(C)(3)	1,500				Unrestricted		
Worcester Art Museum 55 Salisbury Street Worcester, MA 01609-3196	04-1988530	501(C)(3)	1,900				Unrestricted		
Worcester Art Museum 55 Salisbury Street Worcester, MA 01609-3196	04-1988530	501(C)(3)	5,000				Exhibition Catalog		

4:38 PM

Grantee 990 - Part 2 Organizations
 Grantees receiving \$5000 or more.
 Tax Year 2017
 Region: All Regions

Name, address, and zip	EIN	IRC Code	Cash Grant	Non-Cash Grant	Valuation Method	Descr Assistance	Purpose of Grant or Assistance	Fiscal Sponsor	Sponsor's EIN
Worcester Art Museum 55 Salisbury Street Worcester, MA 01609-3196	04-1988530	501(C)(3)	1,600				Support for the Museum Library		
Worcester Art Museum 55 Salisbury Street Worcester, MA 01609-3196	04-1988530	501(C)(3)	200				Unrestricted		
Worcester Art Museum 55 Salisbury Street Worcester, MA 01609-3196	04-1988530	501(C)(3)	150				Unrestricted		
Worcester Art Museum 55 Salisbury Street Worcester, MA 01609-3196	04-1988530	501(C)(3)	433				Unrestricted		
Worcester Art Museum 55 Salisbury Street Worcester, MA 01609-3196	04-1988530	501(C)(3)	3,900				Higgins Armory Collection		
Worcester Art Museum 55 Salisbury Street Worcester, MA 01609-3196	04-1988530	501(C)(3)	2,000				For the Study of Photography through studio programs		
Worcester Art Museum 55 Salisbury Street Worcester, MA 01609-3196	04-1988530	501(C)(3)	2,000				Salisbury Society		

4:38 PM

Grantee 990 - Part 2 Organizations
 Grantees receiving \$5000 or more.
 Tax Year 2017
 Region: All Regions

Name, address, and zip	EIN	IRC Code	Cash Grant	Non-Cash Grant	Valuation Method	Descr Assistance	Purpose of Grant or Assistance	Fiscal Sponsor	Sponsor's EIN
Worcester Art Museum 55 Salisbury Street Worcester, MA 01609-3196	04-1988530	501(C)(3)	25,548				Unrestricted		
Worcester Art Museum 55 Salisbury Street Worcester, MA 01609-3196	04-1988530	501(C)(3)	1,500				Annual Fund		
Worcester Art Museum 55 Salisbury Street Worcester, MA 01609-3196	04-1988530	501(C)(3)	6,750				Conservation		
Worcester Center for Crafts 25 Sagamore Road Worcester, MA 01605	04-2105859	501(C)(3)	10,000				Gallery and Youth Programs		
Worcester Center for Crafts 25 Sagamore Road Worcester, MA 01605	04-2105859	501(C)(3)	434				Craft Center Operations		
Worcester Center for Crafts 25 Sagamore Road Worcester, MA 01605	04-2105859	501(C)(3)	500				Unrestricted		
Worcester Center for Crafts 25 Sagamore Road Worcester, MA 01605	04-2105859	501(C)(3)	100				Unrestricted		

4:38 PM

Grantee 990 - Part 2 Organizations
 Grantees receiving \$5000 or more.
 Tax Year 2017
 Region: All Regions

Name, address, and zip	EIN	IRC Code	Cash Grant	Non-Cash Grant	Valuation Method	Descr Assistance	Purpose of Grant or Assistance	Fiscal Sponsor	Sponsor's EIN
Worcester Center for Crafts 25 Sagamore Road Worcester, MA 01605	04-2105859	501(C)(3)	100				Youth Craft & Creative Program		
Worcester Center for Crafts 25 Sagamore Road Worcester, MA 01605	04-2105859	501(C)(3)	500				African Artist Residency		
Worcester Center for Crafts 25 Sagamore Road Worcester, MA 01605	04-2105859	501(C)(3)	5,000				Youth Craft & Creativity		
Worcester Center for the Performing Arts 2 Southbridge Street Worcester, MA 01608	05-0521735	501(C)(3)	3,000				General operations		
Worcester Center for the Performing Arts 2 Southbridge Street Worcester, MA 01608	05-0521735	501(C)(3)	5,000				Adopt-a-School - WPS Partnership		
Worcester Chamber Music Society 323 Main Street Worcester, MA 01608-1511	20-8538873	501(C)(3)	2,630				Agency Fund Distribution		
Worcester Chamber Music Society 323 Main Street Worcester, MA 01608-1511	20-8538873	501(C)(3)	500				Neighborhood Strings		

4:38 PM

Grantee 990 - Part 2 Organizations
 Grantees receiving \$5000 or more.
 Tax Year 2017
 Region: All Regions

Name, address, and zip	EIN	IRC Code	Cash Grant	Non-Cash Grant	Valuation Method	Descr Assistance	Purpose of Grant or Assistance	Fiscal Sponsor	Sponsor's EIN
Worcester Chamber Music Society 323 Main Street Worcester, MA 01608-1511	20-8538873	501(C)(3)	1,300				Agency Fund Distribution		
Worcester Chamber Music Society 323 Main Street Worcester, MA 01608-1511	20-8538873	501(C)(3)	5,000				Education Programs		
Worcester Chamber Music Society 323 Main Street Worcester, MA 01608-1511	20-8538873	501(C)(3)	5,000				General operations		
Worcester Chamber Music Society 323 Main Street Worcester, MA 01608-1511	20-8538873	501(C)(3)	1,000				Unrestricted		
Worcester Chamber Music Society 323 Main Street Worcester, MA 01608-1511	20-8538873	501(C)(3)	10,000				Community Outreach Programs		
Worcester Common Ground 5 Piedmont Street Worcester, MA 01610	22-2976657	501(C)(3)	10,000				Community Building and Affordable Housing		
Worcester Community Action Council 484 Main Street, Suite 200 Worcester, MA 01608-1810	04-2382160	501(C)(3)	100				Unrestricted		

Grantee 990 - Part 2 Organizations
 Grantees receiving \$5000 or more.
 Tax Year 2017
 Region: All Regions

Name, address, and zip	EIN	IRC Code	Cash Grant	Non-Cash Grant	Valuation Method	Descr Assistance	Purpose of Grant or Assistance	Fiscal Sponsor	Sponsor's EIN
Worcester Community Action Council 484 Main Street, Suite 200 Worcester, MA 01608-1810	04-2382160	501(C)(3)	1,000				Youth Jobs Training		
Worcester Community Action Council 484 Main Street, Suite 200 Worcester, MA 01608-1810	04-2382160	501(C)(3)	1,000				Fuel Assistance		
Worcester Community Action Council 484 Main Street, Suite 200 Worcester, MA 01608-1810	04-2382160	501(C)(3)	10,000				YouthWorks - Year-Round Program		
Worcester Community Housing Resources 11 Pleasant Street, Suite 300 Worcester, MA 01609	22-2719744	501(C)(3)	10,000				Quality Housing in Liveable Neighborhoods		
Worcester Comprehensive Education & Care, Inc. 160 Tacoma Street Worcester, MA 01605	04-2484586	501(C)(3)	1,300				Unrestricted		
Worcester Comprehensive Education & Care, Inc. 160 Tacoma Street Worcester, MA 01605	04-2484586	501(C)(3)	7,500				Teen Parent Support Program		

4:38 PM

Grantee 990 - Part 2 Organizations
 Grantees receiving \$5000 or more.
 Tax Year 2017
 Region: All Regions

Name, address, and zip	EIN	IRC Code	Cash Grant	Non-Cash Grant	Valuation Method	Descr Assistance	Purpose of Grant or Assistance	Fiscal Sponsor	Sponsor's EIN
Worcester County Food Bank, Inc. 474 Boston Turnpike Shrewsbury, MA 01545	04-3071457	501(C)(3)	1,000				Operating Support		
Worcester County Food Bank, Inc. 474 Boston Turnpike Shrewsbury, MA 01545	04-3071457	501(C)(3)	1,500				Unrestricted		
Worcester County Food Bank, Inc. 474 Boston Turnpike Shrewsbury, MA 01545	04-3071457	501(C)(3)	5,000				Food Sourcing and Distribution		
Worcester County Food Bank, Inc. 474 Boston Turnpike Shrewsbury, MA 01545	04-3071457	501(C)(3)	5,000				Unrestricted		
Worcester County Food Bank, Inc. 474 Boston Turnpike Shrewsbury, MA 01545	04-3071457	501(C)(3)	10,000				Unrestricted		
Worcester County Food Bank, Inc. 474 Boston Turnpike Shrewsbury, MA 01545	04-3071457	501(C)(3)	1,400				Unrestricted		
Worcester County Mechanics Association/Mechanics Hall 321 Main Street Worcester, MA 01608-1532	04-1988955	501(C)(3)	1,000				Unrestricted		

4:38 PM

Grantee 990 - Part 2 Organizations
 Grantees receiving \$5000 or more.
 Tax Year 2017
 Region: All Regions

Name, address, and zip	EIN	IRC Code	Cash Grant	Non-Cash Grant	Valuation Method	Descr Assistance	Purpose of Grant or Assistance	Fiscal Sponsor	Sponsor's EIN
Worcester County Mechanics Association/Mechanics Hall 321 Main Street Worcester, MA 01608-1532	04-1988955	501(C)(3)	500				Unrestricted		
Worcester County Mechanics Association/Mechanics Hall 321 Main Street Worcester, MA 01608-1532	04-1988955	501(C)(3)	24,000				Agency Fund Distribution		
Worcester County Mechanics Association/Mechanics Hall 321 Main Street Worcester, MA 01608-1532	04-1988955	501(C)(3)	250				Unrestricted		
Worcester County Poetry Association PO Box 804 Worcester, MA 01613-0804	23-7157372	501(C)(3)	450				Designated Fund Distribution		
Worcester County Poetry Association PO Box 804 Worcester, MA 01613-0804	23-7157372	501(C)(3)	400				Agency Fund Distribution		
Worcester County Poetry Association PO Box 804 Worcester, MA 01613-0804	23-7157372	501(C)(3)	450				Agency Fund Distribution		

4:38 PM

Grantee 990 - Part 2 Organizations
 Grantees receiving \$5000 or more.
 Tax Year 2017
 Region: All Regions

Name, address, and zip	EIN	IRC Code	Cash Grant	Non-Cash Grant	Valuation Method	Descr Assistance	Purpose of Grant or Assistance	Fiscal Sponsor	Sponsor's EIN
Worcester County Poetry Association PO Box 804 Worcester, MA 01613-0804	23-7157372	501(C)(3)					Designated Fund Distribution		
			1,550						
Worcester County Poetry Association PO Box 804 Worcester, MA 01613-0804	23-7157372	501(C)(3)					Agency Fund Distribution		
			800						
Worcester County Poetry Association PO Box 804 Worcester, MA 01613-0804	23-7157372	501(C)(3)					Agency Fund Distribution		
			1,550						
Worcester Cultural Coalition 455 Main Street, 4th Floor Worcester, MA 01608	81-5010462	501(C)(3)					Creativity Sparks Community		
			15,000						
Worcester Education Collaborative 484 Main Street Suite 300 Worcester, MA 01608	04-2104017	501(C)(3)					Worcester Public Schools Strategic Plan		
			3,000						
Worcester Education Collaborative 484 Main Street Suite 300 Worcester, MA 01608	04-2104017	501(C)(3)					Operating Support		
			12,500						

4:38 PM

Grantee 990 - Part 2 Organizations
 Grantees receiving \$5000 or more.
 Tax Year 2017
 Region: All Regions

Name, address, and zip	EIN	IRC Code	Cash Grant	Non-Cash Grant	Valuation Method	Descr Assistance	Purpose of Grant or Assistance	Fiscal Sponsor	Sponsor's EIN
Worcester Historical Museum 30 Elm Street Worcester, MA 01609-2570	04-2105858	501(C)(3)	400				Norma Feingold Worcester History Prize		
Worcester Historical Museum 30 Elm Street Worcester, MA 01609-2570	04-2105858	501(C)(3)	15,400				Salisbury Mansion programs and curator		
Worcester Historical Museum 30 Elm Street Worcester, MA 01609-2570	04-2105858	501(C)(3)	3,000				Unrestricted		
Worcester Historical Museum 30 Elm Street Worcester, MA 01609-2570	04-2105858	501(C)(3)	36,900				Agency Fund Distribution		
Worcester Historical Museum 30 Elm Street Worcester, MA 01609-2570	04-2105858	501(C)(3)	50,700				Operating Support		
Worcester Historical Museum 30 Elm Street Worcester, MA 01609-2570	04-2105858	501(C)(3)	39,500				Curatorial Operations and Exhibitions		
Worcester Historical Museum 30 Elm Street Worcester, MA 01609-2570	04-2105858	501(C)(3)	36,900				Agency Fund Distribution		

4:38 PM

Grantee 990 - Part 2 Organizations
 Grantees receiving \$5000 or more.
 Tax Year 2017
 Region: All Regions

Name, address, and zip	EIN	IRC Code	Cash Grant	Non-Cash Grant	Valuation Method	Descr Assistance	Purpose of Grant or Assistance	Fiscal Sponsor	Sponsor's EIN
Worcester Historical Museum 30 Elm Street Worcester, MA 01609-2570	04-2105858	501(C)(3)	3,000				Unrestricted		
Worcester Historical Museum 30 Elm Street Worcester, MA 01609-2570	04-2105858	501(C)(3)	54,600				Operating Support		
Worcester Historical Museum 30 Elm Street Worcester, MA 01609-2570	04-2105858	501(C)(3)	4,500				Professional Development		
Worcester Historical Museum 30 Elm Street Worcester, MA 01609-2570	04-2105858	501(C)(3)	100				Unrestricted		
Worcester Interfaith All Saints Church 10 Irving Street Worcester, MA 01609	04-3158699	501(C)(3)	3,000				Strategic Planning		
Worcester Interfaith All Saints Church 10 Irving Street Worcester, MA 01609	04-3158699	501(C)(3)	10,000				Summer Jobs for Youth/Youth Jobs Pipeline Initiative		
Worcester Interfaith All Saints Church 10 Irving Street Worcester, MA 01609	04-3158699	501(C)(3)	4,216				Restricted : The Clemente Course in the Humanities Worcester		

4:38 PM

Grantee 990 - Part 2 Organizations
 Grantees receiving \$5000 or more.
 Tax Year 2017
 Region: All Regions

Name, address, and zip	EIN	IRC Code	Cash Grant	Non-Cash Grant	Valuation Method	Descr Assistance	Purpose of Grant or Assistance	Fiscal Sponsor	Sponsor's EIN
Worcester Jewish Community Center 633 Salisbury Street Worcester, MA 01609-1120	04-2104353	501(C)(3)	16,342				Agency Fund Distribution		
Worcester Jewish Community Center 633 Salisbury Street Worcester, MA 01609-1120	04-2104353	501(C)(3)	10,000				Scholarships for Afterschool and Summer Childcare Programs		
Worcester Jewish Community Center 633 Salisbury Street Worcester, MA 01609-1120	04-2104353	501(C)(3)	10,000				Capital campaign		
Worcester Polytechnic Institute 100 Institute Road Worcester, MA 01609	04-2121659	501(C)(3)	10,000				Edwin B. Coghlin Jr. Scholarship Fund		
Worcester Public Library Foundation 3 Salem Square Worcester, MA 01608-2074	20-0066770	501(C)(3)	5,000				Event Support		
Worcester Public Library Foundation 3 Salem Square Worcester, MA 01608-2074	20-0066770	501(C)(3)	5,000				2017 Summer Reading Program		
Worcester Public Schools 20 Irving Street Worcester, MA 01609	04-6001418	501(C)(3)	12,000				South HS Youth Leadership through Philanthropy		

Grantee 990 - Part 2 Organizations
 Grantees receiving \$5000 or more.
 Tax Year 2017
 Region: All Regions

Name, address, and zip	EIN	IRC Code	Cash Grant	Non-Cash Grant	Valuation Method	Descr Assistance	Purpose of Grant or Assistance	Fiscal Sponsor	Sponsor's EIN
Worcester Public Schools 20 Irving Street Worcester, MA 01609	04-6001418	501(C)(3)	2,800				Preschool programs		
Worcester Refugee Assistance Project 484 Main Street, Suite 400 Worcester, MA 01608	32-0309547	501(C)(3)	2,000				Unrestricted		
Worcester Refugee Assistance Project 484 Main Street, Suite 400 Worcester, MA 01608	32-0309547	501(C)(3)	3,000				Unrestricted		
Worcester Regional Research Bureau 500 Salisbury Street Worcester, MA 01609-1265	04-2901298	501(C)(3)	6,000				Operating Support		
Worcester Regional Research Bureau 500 Salisbury Street Worcester, MA 01609-1265	04-2901298	501(C)(3)	100				Unrestricted		
Worcester Regional Research Bureau 500 Salisbury Street Worcester, MA 01609-1265	04-2901298	501(C)(3)	2,600				Harrington Public Forums on Municipal Government		
Worcester State Foundation 486 Chandler Street Worcester, MA 01602-2597	22-3248067	501(C)(3)	1,100				For scholarships for adult nursing students		

4:38 PM

Grantee 990 - Part 2 Organizations
 Grantees receiving \$5000 or more.
 Tax Year 2017
 Region: All Regions

Name, address, and zip	EIN	IRC Code	Cash Grant	Non-Cash Grant	Valuation Method	Descr Assistance	Purpose of Grant or Assistance	Fiscal Sponsor	Sponsor's EIN
Worcester State Foundation 486 Chandler Street Worcester, MA 01602-2597	22-3248067	501(C)(3)	1,000				Nursing Scholarship		
Worcester State Foundation 486 Chandler Street Worcester, MA 01602-2597	22-3248067	501(C)(3)	500				John Coughlin Locker Room		
Worcester State Foundation 486 Chandler Street Worcester, MA 01602-2597	22-3248067	501(C)(3)	2,600				Nursing Scholarships		
Worcester Technical High School 1 Skyline Drive Worcester, MA 01605	04-6001418	501(C)(3)	5,874				Unrestricted		
Worcester Technical High School 1 Skyline Drive Worcester, MA 01605	04-6001418	501(C)(3)	600				For participation in Skills USA		
Worcester Youth Center Inc 326 Chandler Street Worcester, MA 01602-3440	04-3245867	501(C)(3)	20,000				Safe and Successful Youth		
Worcester Youth Center Inc 326 Chandler Street Worcester, MA 01602-3440	04-3245867	501(C)(3)	3,000				Education support		

4:38 PM

Grantee 990 - Part 2 Organizations
 Grantees receiving \$5000 or more.
 Tax Year 2017
 Region: All Regions

Name, address, and zip	EIN	IRC Code	Cash Grant	Non-Cash Grant	Valuation Method	Descr Assistance	Purpose of Grant or Assistance	Fiscal Sponsor	Sponsor's EIN
Worcester Youth Center Inc 326 Chandler Street Worcester, MA 01602-3440	04-3245867	501(C)(3)	15,000				Support for Core Programs		
Worcester Youth Center Inc 326 Chandler Street Worcester, MA 01602-3440	04-3245867	501(C)(3)	1,500				Annual Fund		
Worcester Youth Center Inc 326 Chandler Street Worcester, MA 01602-3440	04-3245867	501(C)(3)	200				Unrestricted		
Worcester Youth Orchestras PO Box 991 Worcester, MA 01613	04-2470999	501(C)(3)	5,000				Financial Aid & Scholarship Program		
Worcester Youth Orchestras PO Box 991 Worcester, MA 01613	04-2470999	501(C)(3)	4,393				Unrestricted		
Y.O.U., Inc. 81 Plantation Street Worcester, MA 01604-3069	23-7112665	501(C)(3)	4,400				Unrestricted		
Y.O.U., Inc. 81 Plantation Street Worcester, MA 01604-3069	23-7112665	501(C)(3)	500				Unrestricted		

4:38 PM

Grantee 990 - Part 2 Organizations
 Grantees receiving \$5000 or more.
 Tax Year 2017
 Region: All Regions

Name, address, and zip	EIN	IRC Code	Cash Grant	Non-Cash Grant	Valuation Method	Descr Assistance	Purpose of Grant or Assistance	Fiscal Sponsor	Sponsor's EIN
Y.O.U., Inc. 81 Plantation Street Worcester, MA 01604-3069	23-7112665	501(C)(3)	18,000				Pregnant and Parenting Teen/Voices with Choices Program		
YMCA of Central Massachusetts 766 Main Street Worcester, MA 01610	04-2105885	501(C)(3)	11,000				Summer PLAY 2018		
YMCA of Central Massachusetts 766 Main Street Worcester, MA 01610	04-2105885	501(C)(3)	2,500				Pilot Project for Youth		
YMCA of Central Massachusetts 766 Main Street Worcester, MA 01610	04-2105885	501(C)(3)	10,000				Minority Achievers Program		
YMCA of Central Massachusetts 766 Main Street Worcester, MA 01610	04-2105885	501(C)(3)	3,000				Garden Program at Central Community Branch		
YMCA of Central Massachusetts 766 Main Street Worcester, MA 01610	04-2105885	501(C)(3)	1,350				Unrestricted		
YMCA of Central Massachusetts 766 Main Street Worcester, MA 01610	04-2105885	501(C)(3)	1,000				Unrestricted		

4:38 PM

Grantee 990 - Part 2 Organizations
 Grantees receiving \$5000 or more.
 Tax Year 2017
 Region: All Regions

Name, address, and zip	EIN	IRC Code	Cash Grant	Non-Cash Grant	Valuation Method	Descr Assistance	Purpose of Grant or Assistance	Fiscal Sponsor	Sponsor's EIN
YMCA of Greater Hartford 50 State House Square 2nd floor Hartford, CT 06103	06-0881325	501(C)(3)	66,300				Hale YMCA Youth & Family Center in Putnam		
Youth Connect 484 Main Street, Suite 300 Worcester, MA 01608	23-7112665	501(C)(3)	18,000				YouthConnect - Summer 2018	Timothy Garvin	04-2104017
YWCA of Central Massachusetts One Salem Square Worcester, MA 01608-2015	04-2105873	501(C)(3)	10,000				Girls CHOICE Program		
YWCA of Central Massachusetts One Salem Square Worcester, MA 01608-2015	04-2105873	501(C)(3)	15,000				Daybreak Services		
YWCA of Central Massachusetts One Salem Square Worcester, MA 01608-2015	04-2105873	501(C)(3)	768				Daybreak Program		
YWCA of Central Massachusetts One Salem Square Worcester, MA 01608-2015	04-2105873	501(C)(3)	20,000				Domestic Violence Services		

4:38 PM

Grantee 990 - Part 2 Organizations
 Grantees receiving \$5000 or more.
 Tax Year 2017
 Region: All Regions

Name, address, and zip	EIN	IRC Code	Cash Grant	Non-Cash Grant	Valuation Method	Descr Assistance	Purpose of Grant or Assistance	Fiscal Sponsor	Sponsor's EIN
YWCA of Central Massachusetts One Salem Square Worcester, MA 01608-2015	04-2105873	501(C)(3)	10,000				Girls CHOICE		
YWCA of Central Massachusetts One Salem Square Worcester, MA 01608-2015	04-2105873	501(C)(3)	7,500				Racial Equity Program		
Totals			7,474,035	000					

4:38 PM

Grantee 990 - Part 3 Individuals
 Tax Year 2017
 Region: All Regions

Type of Grant	# Recipients	Amount of Cash Grants	Amount of non-cash Assistance	Method of Valuation	Descr Non-cash Assistance
-----	-----	-----	-----	-----	-----
*COMMUNITY DEVELOPMENT	1	500			
*EDUCATION	127	632,631			
*NONPROFIT CAPACITY	2	9,300			
Totals		642,431	000		

**SCHEDULE J
(Form 990)**

Department of the Treasury
Internal Revenue Service

Name of the organization

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 23.

▶ Attach to Form 990.

▶ Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2017

Open to Public Inspection

GREATER WORCESTER COMMUNITY FOUNDATION

Employer identification number

04-2572276

Part I Questions Regarding Compensation

1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.

- | | |
|--|---|
| <input type="checkbox"/> First-class or charter travel | <input type="checkbox"/> Housing allowance or residence for personal use |
| <input type="checkbox"/> Travel for companions | <input type="checkbox"/> Payments for business use of personal residence |
| <input type="checkbox"/> Tax indemnification and gross-up payments | <input type="checkbox"/> Health or social club dues or initiation fees |
| <input type="checkbox"/> Discretionary spending account | <input type="checkbox"/> Personal services (such as, maid, chauffeur, chef) |

b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain

2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?

3 Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.

- | | |
|---|---|
| <input checked="" type="checkbox"/> Compensation committee | <input type="checkbox"/> Written employment contract |
| <input type="checkbox"/> Independent compensation consultant | <input checked="" type="checkbox"/> Compensation survey or study |
| <input checked="" type="checkbox"/> Form 990 of other organizations | <input checked="" type="checkbox"/> Approval by the board or compensation committee |

4 During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:

- | | | |
|--|-----------|---|
| a Receive a severance payment or change-of-control payment? | 4a | X |
| b Participate in, or receive payment from, a supplemental nonqualified retirement plan? | 4b | X |
| c Participate in, or receive payment from, an equity-based compensation arrangement? | 4c | X |

Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5–9.

5 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:

- | | | |
|--|-----------|---|
| a The organization? | 5a | X |
| b Any related organization? | 5b | X |

If "Yes" on line 5a or 5b, describe in Part III.

6 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:

- | | | |
|--|-----------|---|
| a The organization? | 6a | X |
| b Any related organization? | 6b | X |

If "Yes" on line 6a or 6b, describe in Part III.

7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III

8 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III

9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

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

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that aren't listed on Form 990, Part VII.

Note: The sum of columns (B)(i)–(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)–(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
1	ANN T. LISI	(i) 155,906	(ii) 10,800	(iii)	8,440	6,021	181,167.00	
2		(i)	(ii)	(iii)				
3		(i)	(ii)	(iii)				
4		(i)	(ii)	(iii)				
5		(i)	(ii)	(iii)				
6		(i)	(ii)	(iii)				
7		(i)	(ii)	(iii)				
8		(i)	(ii)	(iii)				
9		(i)	(ii)	(iii)				
10		(i)	(ii)	(iii)				
11		(i)	(ii)	(iii)				
12		(i)	(ii)	(iii)				
13		(i)	(ii)	(iii)				
14		(i)	(ii)	(iii)				
15		(i)	(ii)	(iii)				
16		(i)	(ii)	(iii)				

**SCHEDULE M
(Form 990)**

Noncash Contributions

OMB No. 1545-0047

2017

**Open to Public
Inspection**

Department of the Treasury
Internal Revenue Service

- ▶ **Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.**
- ▶ **Attach to Form 990.**
- ▶ **Go to www.irs.gov/Form990 for the latest information.**

Name of the organization

GREATER WORCESTER COMMUNITY FOUNDATION

Employer identification number

04-2572276

Part I Types of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art—Works of art				
2 Art—Historical treasures				
3 Art—Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities—Publicly traded	X	13	414,723	Mean Value Date of Gift
10 Securities—Closely held stock				
11 Securities—Partnership, LLC, or trust interests				
12 Securities—Miscellaneous				
13 Qualified conservation contribution—Historic structures				
14 Qualified conservation contribution—Other				
15 Real estate—Residential				
16 Real estate—Commercial				
17 Real estate—Other				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ▶ (.)				
26 Other ▶ (.)				
27 Other ▶ (.)				
28 Other ▶ (.)				

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement

29

	Yes	No
30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period?		X
b If "Yes," describe the arrangement in Part II.		
31 Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions?	X	
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?	X	
b If "Yes," describe in Part II.		
33 If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.		

Part II **Supplemental Information.** Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

Part I Line 9:

We are reporting the number of contributions of publicly traded securities received (13) during 2017.

Part I Line 32b:

The Foundation typically uses one brokerage firm for publicly traded security transactions, and also holds accounts at a small number of other firms to facilitate efficient transfers for donors. When securities are received the shares are sold same day or as soon as possible.

**SCHEDULE O
(Form 990 or 990-EZ)**

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ
Complete to provide information for responses to specific questions on
Form 990 or 990-EZ or to provide any additional information.

▶ Attach to Form 990 or 990-EZ.
▶ Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2017

**Open to Public
Inspection**

Name of the organization

GREATER WORCESTER COMMUNITY FOUNDATION, INC.

Employer identification number

04-2572276

Part III, Line 4d: Other Program Services include: community leadership services, non-profit management trainings, donor education, and other.

PART VI, SECTION A, LINE 2: GOVERNING BODY/BUSINESS RELATIONSHIPS: TWO DIRECTORS ARE PARTNERS IN A LAW FIRM

PART VI, SECTION A LINE 4: AMENDED BYLAWS TO EXEMPT OFFICERS FROM TERM LIMITS

PART VI, SECTION A, LINE 7: THE FOUNDATION'S CORPORATORS ARE RESPONSIBLE FOR ELECTING DIRECTORS AND CORPORATORS,
APPROVING AMENDMENTS TO THE BY-LAWS/CHARTER, AND APPROVING MAJOR CORPORATE ACTIONS SUCH AS MERGER OR DISSOLUTION.

PART VI, SECTION B LINE 11: DRAFT OF THE FORM 990 IS SENT TO EACH MEMBER OF THE BOARD OF DIRECTORS FOR COMMENT PRIOR TO FILING.

PART VI, SECTION B, LINE 12C: THE FOUNDATION REVIEWS INFORMATION FROM KEY EMPLOYEES, BOARD MEMEBERS AND MEMBERS OF KEY
COMMITTEES AT THE TIME WHEN GRANTS AND SCHOLARSHIP AWARDS ARE DETERMINED. BOARD MEMBERS ABSTAIN FROM VOTING IN
SITUATIONS WHERE REAL OR PERCEIVED CONFLICTS MAY EXIST.

PART VI, SECTION C, LINE 19: The financial statements and conflict of interest policy are available on the Foundation's website.

Governing documents are available upon request.

PART XI, LINE 9 - OTHER CHANGES IN FUND BALANCE: INCREASE IN AGENCY FUND BALANCE THAT ARE REFLECTED AS LIABILITIES ON OUR
FINANCIAL STATEMENTS.

PART XII, LINE 2: THE AUDIT COMMITTEE IS RESPONSIBLE FOR SELECTION OF THE INDEPENDENT AUDITOR, SUBJECT TO BOARD APPROVAL AND
FOR OVERSIGHT OF THE ANNUAL AUDIT.

**SCHEDULE R
(Form 990)**

Department of the Treasury
Internal Revenue Service

Related Organizations and Unrelated Partnerships

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.
▶ Attach to Form 990.

▶ Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2017

**Open to Public
Inspection**

Name of the organization

GREATER WORCESTER COMMUNITY FOUNDATION

Employer identification number

04-2572276

Part I Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
(1) -----					
(2) -----					
(3) -----					
(4) -----					
(5) -----					
(6) -----					

Part II Identification of Related Tax-Exempt Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related tax-exempt organizations during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
						Yes	No
(1) FAIRLAWN FOUNDATION 04-2983690 370 MAIN STREET, WORCESTER, MA 01608	HEALTH GRANTMAKING	Us	501C3	LINE 112(d)111-0			X
(2) -----							
(3) -----							
(4) -----							
(5) -----							
(6) -----							
(7) -----							

Part III Identification of Related Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a partnership during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512—514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	
(1)												
(2)												
(3)												
(4)												
(5)												
(6)												
(7)												

Part IV Identification of Related Organizations Taxable as a Corporation or Trust. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a corporation or trust during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity?	
								Yes	No
(1)									
(2)									
(3)									
(4)									
(5)									
(6)									
(7)									

Part V Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

	Yes	No
1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II–IV?		
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity	1a	X
b Gift, grant, or capital contribution to related organization(s)	1b	X
c Gift, grant, or capital contribution from related organization(s)	1c	X
d Loans or loan guarantees to or for related organization(s)	1d	X
e Loans or loan guarantees by related organization(s)	1e	X
f Dividends from related organization(s)	1f	X
g Sale of assets to related organization(s)	1g	X
h Purchase of assets from related organization(s)	1h	X
i Exchange of assets with related organization(s)	1i	X
j Lease of facilities, equipment, or other assets to related organization(s)	1j	X
k Lease of facilities, equipment, or other assets from related organization(s)	1k	X
l Performance of services or membership or fundraising solicitations for related organization(s)	1l	X
m Performance of services or membership or fundraising solicitations by related organization(s)	1m	X
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n	X
o Sharing of paid employees with related organization(s)	1o	X
p Reimbursement paid to related organization(s) for expenses	1p	X
q Reimbursement paid by related organization(s) for expenses	1q	X
r Other transfer of cash or property to related organization(s)	1r	X
s Other transfer of cash or property from related organization(s)	1s	X

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.

	(a) Name of related organization	(b) Transaction type (a–s)	(c) Amount involved	(d) Method of determining amount involved
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				

Part VI **Unrelated Organizations Taxable as a Partnership.** Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512—514)	(e) Are all partners section 501(c)(3) organizations?		(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
				Yes	No			Yes	No		Yes	No	
(1)													
(2)													
(3)													
(4)													
(5)													
(6)													
(7)													
(8)													
(9)													
(10)													
(11)													
(12)													
(13)													
(14)													
(15)													
(16)													

