Form **991**

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

2011

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation) ▶ The organization may have to use a copy of this return to satisfy state reporting requirements.

04/01 2011, and ending For the 2011 calendar year, or tax year beginning 20 12 C Name of organization COMMUNITY FOUNDATION OF WESTERN MASSACHUSETTS D Employer identification number В Check if applicable: Address change Doing Business As 22-3089640 Number and street (or P.O. box if mail is not delivered to street address) E Telephone number Name change Initial return 1500 Main St Suite 2300 413-732-2858 City or town, state or country, and ZIP + 4 Terminated Sprinafield, MA 01115 G Gross receipts \$ 10,204,380 Amended return Application pending | F Name and address of principal officer: Donna Roseman David H(a) Is this a group return for affiliates? Yes No 1500 Main Street Suite 2300, Springfield, MA 01115) ◀ (insert no.) ☐ 4947(a)(1) or If "No," attach a list. (see instructions) 501(c)(3) 501(c) (Tax-exempt status: Website: ▶ www.communityfoundation.org **H(c)** Group exemption number ▶ Form of organization: Corporation V Trust Association L Year of formation: M State of legal domicile: Part I 1 Briefly describe the organization's mission or most significant activities: Community Foundation whose mission is to enrich the quality of life in the region (Hampden, Hampshire and Franklin Counties in Massachusetts) by encouraging philanthropy, Activities & Governance developing a permanent endowment and promoting efficiency in managing charitable funds. Check this box ▶ ☐ 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 17 4 Number of independent voting members of the governing body (Part VI, line 1b) . . . 4 17 5 5 Total number of individuals employed in calendar year 2011 (Part V, line 2a) 18 6 Total number of volunteers (estimate if necessary) 100 7a Total unrelated business revenue from Part VIII, column (C), line 12 7a 0 Net unrelated business taxable income from Form 990-T, line 34 7b 0 **Current Year** Contributions and grants (Part VIII, line 1h) 8 4,961,007 8,142,822 9 Program service revenue (Part VIII, line 2g) 297,060 276,424 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 10 1,552,887 1,907,108 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) . . . -378,845 -121.974 12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) 6,432,109 10,204,380 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 13 7,847,328 6,911,001 14 Benefits paid to or for members (Part IX, column (A), line 4) . . . 0 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10) 962,061 949.010 16a Professional fundraising fees (Part IX, column (A), line 11e) 0 b Total fundraising expenses (Part IX, column (D), line 25) ▶ 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 514,275 676,971 18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 9,323,664 8,536,982 19 Revenue less expenses. Subtract line 18 from line 12 -2.891.555 1,667,398 **End of Year Beginning of Current Year** 20 Total assets (Part X, line 16) 94,683,487 98.010.892 21 Total liabilities (Part X, line 26) . 8,265,775 8,270,555 22 Net assets or fund balances. Subtract line 21 from line 20 86,417,712 89,740,337 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 Signature of officer Date Here Donna Roseman David, CFO/CAO Type or print name and title Print/Type preparer's name Preparer's signature Date Check ____ if Paid self-employed **Preparer** Firm's name Firm's EIN ▶ **Use Only** Firm's address ▶ Phone no. May the IRS discuss this return with the preparer shown above? (see instructions) Yes No

Form 990 (2011) Page **2**

Part		
	Check if Schedule O contains a response to any question in this Part III	<u> LL</u>
1	Briefly describe the organization's mission:	o in
	Community Foundation whose mission is to enrich the quality of life in the region of Hampden, Hampshire and Franklin counti Massachusetts by encouraging philanthropy, developing a permanent endowment and promoting efficiency in managing chair	
	funds.	able
	Turius.	
2	Did the organization undertake any significant program services during the year which were not listed on the	
	prior Form 990 or 990-EZ?	∕ 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?	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 and the control of th	
	expenses. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the ame grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.	unt of
	grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.	
40	(Code) \(\(\(\(\) \\ \) \(
4a	(Code:) (Expenses \$ 5,868,241 including grants of \$ 5,323,463) (Revenue \$ 276,424)
	Grants Program_Competetive grant program and designated grant administered to benefit residents of the 3 counties served, approx. 400 projects funded through this process. Donor advised grants to public charities, approx 1100 grants made.	
	approx. 400 projects funded through this process. Donor advised grants to public charities, approx 1100 grants made.	
4b	(Code:) (Expenses \$ 1,919,817 including grants of \$ 1,587,538) (Revenue \$ 0	
UF	Community Scholarship Program- Provides a centralized application process for scholarships and loans to benefit residents of	
	Western Massachusetts. Awards made based on applicants financial need, academic merit, response to questions and extra	
	curricular activities in accordance with individual fund terms.	
4c	(Code:) (Expenses \$including grants of \$) (Revenue \$)
4d	Other program services (Describe in Schedule O.)	
	(Expenses \$ 0 including grants of \$ 0) (Revenue \$ 0)	
4e	Total program service expenses ► 7,788,058	

Part	V 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)? If "Yes," complete Schedule A	1	~	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	~	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		~
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>	4		-
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? If "Yes," complete Schedule C, Part III	5		~
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? If "Yes," complete Schedule D, Part I	6	v	
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		,
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		,
9	Did the organization report an amount in Part X, line 21; 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</i> "Yes," complete Schedule D, Part IV	9		_
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	,	
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.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	,	
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? If "Yes," complete Schedule D, Part VII	11b	~	
С	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? If "Yes," complete Schedule D, Part VIII	11c		~
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? If "Yes," complete Schedule D, Part IX	11d		,
	Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i> 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> .	11e	✓	~
12 a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12a	~	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b		~
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		~
14 a		14a		~
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>	14b		\ \
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15		,
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? <i>If "Yes," complete Schedule F, Parts III and IV</i>	16		,
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? If "Yes," complete Schedule G, Part I (see instructions)	17		,
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		~
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		~
20 a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		~

b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?

20b

Part	Checklist of Required Schedules (continued)			
			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	,	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		,
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? If "Yes," complete Schedule J	23	~	
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? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25	24a		_
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24b 24c		
d 25a	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If</i> "Yes," complete Schedule L, Part I	24d 25a		_
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? If "Yes," complete Schedule L, Part I	25b		,
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		,
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? If "Yes," complete Schedule L, Part III	27		~
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 b	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete	28a	~	
	Schedule L, Part IV	28b		~
С	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? If "Yes," complete Schedule L, Part IV	28c		,
29 30	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i> Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30	<i>'</i>	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		,
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		,
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</i> "Yes," <i>complete Schedule R, Part I</i>	33	,	
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34		,
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		~
b	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		~
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>	36		~
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>	37		,
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O	38	,	

1 01111 3	30 (20	11)					
Part	·V	Statements Reg	garding Other	IRS Filings a	and Tax Comp	oliance	

	Check if Schedule O contains a response to any question in this Part V			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 20			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and			
	reportable gaming (gambling) winnings to prize winners?	1c	'	
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 18			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .	2b	~	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		~
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	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		~
b	If "Yes," enter the name of the foreign country:			
	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		~
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		~
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5с		
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?	6a		<i>'</i>
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
-	gifts were not tax deductible?	6b		
7 a	Organizations that may receive deductible contributions under section 170(c). Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			
а	and services provided to the payor?	7a	~	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7a 7b	~	
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	75		
•	required to file Form 8282?	7c		1
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		1
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? .	7f		V
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 and section 509(a)(3) supporting			
	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring			
	organization, have excess business holdings at any time during the year?	8		~
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the organization make any taxable distributions under section 4966?	9a		~
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		~
10	Section 501(c)(7) organizations. Enter:			
a	Initiation fees and capital contributions included on Part VIII, line 12			
b 11	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . Section 501(a)(12) organizations. Enter:			
11 a	Section 501(c)(12) organizations. Enter: Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources			
	against amounts due or received from them.)			
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.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note. See the instructions for additional information the organization must report on Schedule O.			
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			
С	Enter the amount of reserves on hand			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		~
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O .	14b		

Form 990 (2011) Page **6**

Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a

response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Section A. Governing Body and Management Nο 1a Enter the number of voting members of the governing body at the end of the tax year . . . 17 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. Enter the number of voting members included in line 1a, above, who are independent 1b 17 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with 2 1 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? 3 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 4 5 Did the organization become aware during the year of a significant diversion of the organization's assets? . 5 6 6 Did the organization have members, stockholders, or other persons who had the power to elect or appoint 7a Are any governance decisions of the organization reserved to (or subject to approval by) members, 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: 8a 8b ~ 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. 9 Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Nο **10a** Did the organization have local chapters, branches, or affiliates? 10a 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? 10b 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a b 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* 12a Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? ~ 12b Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," 1 12c 13 13 ~ 14 1 14 Did the organization have a written document retention and destruction policy? 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? The organization's CEO, Executive Director, or top management official 15a 1 15b 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 16a / b 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 Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed ▶ 17 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) 18 available for public inspection. Indicate how you made these available. Check all that apply. Own website Another's website ☐ Upon request Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, 19 and financial statements available to the public during the tax year. 20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization: ► Donna Roseman David, (413)732-2858

Part VI

Page 7

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

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 no	r any relate	d org	aniz	atio	n c	ompe	nsa	ted any currer	t officer, directo	r, or trustee.	
	(C)										
(A)	(B) Position (do not check more that						(D)	(E)	(F)		
Name and Title	Average	١,						Reportable	Reportable	Estimated	
	hours per	box, unless person is both an officer and a director/trustee)			s per officer an				compensation	compensation from	
	week (describe	scribe		♀	<u>~</u>	e H	Fo	from the	related organizations	other compensation	
	hours for	Individual trustee or director	iti	Officer	Key employee	ples	Former	organization	(W-2/1099-MISC)	from the	
	related organizations	ctor	tion	,	nplc	/ee	<u> </u>	(W-2/1099-MISC)		organization and related	
	in Schedule	trus	al tru		уее	mp				organizations	
	O)	tee	Institutional trustee			Highest compensated employee					
			Φ			ited					
Stephen A Davis											
Foundation Trustee	1	~						0	0	0	
Irene Rodriguez Martin	'										
Foundation Trustee	1	~						0	0	0	
Peter Daboul											
Foundation Trustee	- 5	~						0	0	0	
Michael Fritz											
Foundation Trustee	1	~						0	0	0	
Sonia M Nieto										•	
Foundation Trustee	1	~						0	0	0	
Mary Ellen Scott											
Foundation Trustee	1	~						0	0	0	
Richard B Steele Jr											
Foundation Trustee	1	~						0	0	0	
Willie Hill											
Foundation Trustee	1	~						0	0	0	
Robert Pura											
Foundation Trustee	1	~						0	0	0	
Amy Jamrog											
Foundation Trustee	1	~						0	0	0	
Dana R Barrows											
Foundation Trustee	1	~						0	0	0	
Ralph Tate											
Foundation Trustee	1	~						0	0	0	
Sanford Belden											
Foundation Trustee	1	~						0	0	0	
Dianne Fuller Doherty											
Foundation Trustee	1	~						0	0	0	

Part	VII Section A. Officers, Directors, Trust	ees, Key E	mplo	yees			lighes	st C	ompensated E	mployees (conti	nued)		
	(A) Name and title	(B) Average hours per week	box, arricoo percerri				is both	an tee)	(D) Reportable compensation from	(E) Reportable compensation from related	an	(F) stimated nount of other	
		(describe hours for related organizations in Schedule O)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	com fr org and	pensation the anization direlated anization	on d
	oBello												
	dation Trustee n Mitus	1	-						0	0			0
	dation Trustee	1	~						0	C			0
	rimack		.,							_			
	dation Trustee Ancrum	1	-						0	0			0
Presi		40				~	>		150,235	0			0
		•											
		•											
1b	Sub-total			<u> </u>		<u> </u>			150,235	0)		0
С	Total from continuation sheets to Part	VII, Sectio	n A					•					
d	, , , , , , , , , , , , , , , , , , , ,							<u> </u>	150,235	0 00.00 00.00			0
2	Total number of individuals (including but reportable compensation from the organi		i to tr	iose	IIST	ea a	above	e) W	no received mo	ore than \$100,0	UU OT		
												Yes	No
3	Did the organization list any former of employee on line 1a? <i>If "Yes," complete s</i>									est compensat			1
4	For any individual listed on line 1a, is the												
	organization and related organizations	greater that	an \$1	150,	000)? I	"Ye	s,"	complete Sch	edule J for su			
5	individual	r accrue co	 mne	nsat	tion	 froi	m anv	 , un	 related organiz	 ation or individu	ıal 4	'	
Ū	for services rendered to the organization										5		~
	on B. Independent Contractors												
1	Complete this table for your five highest compensation from the organization. Repyear.												tax
	(A) Name and business add	ress							(B) Description of se	ervices	(C Comper		
Bank	of America, 1 Monarch Place, Springfield, MA	A 01115						Inv	estment Manag			1:	39,173
2	Total number of independent contractor received more than \$100,000 of compens) th	ose listed abo	ove) who			

Part	VIII	Statement of Revenue					
				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
nts nts	1a	Federated campaigns 1a	0				
Contributions, Gifts, Grants and Other Similar Amounts	b	Membership dues 1b	0				
A, G	С	Fundraising events 1c	0				
ar /	d	Related organizations 1d	0				
s, o	е	Government grants (contributions) 1e	0				
ion Si	f	All other contributions, gifts, grants,					
but the		and similar amounts not included above 1f	8,142,822				
Ę Ġ	g	Noncash contributions included in lines 1a-1f: \$	0				
Contributions, Gifts, Grants and Other Similar Amounts	h	Total. Add lines 1a-1f	▶	8,142,822			
			Business Code				
Program Service Revenue	2a /	Administration Revenue	561000	276,424	276,424	0	0
Be	b			·			
<u>ë</u> .	С						
Še Z	d						
E	е						
gra	f	All other program service revenue.		0	0	0	0
P	g	Total. Add lines 2a–2f	▶	276,424			
	3	Investment income (including divide	ends, interest,				
		and other similar amounts)	•	1,907,108	1,907,108	0	0
	4	Income from investment of tax-exempt bo	ond proceeds ►	0	0	0	0
	5	Royalties	▶	0	0	0	0
		(i) Real	(ii) Personal				
	6a	Gross rents					
	b	Less: rental expenses					
	С	Rental income or (loss) 0	0				
	d	Net rental income or (loss)	▶				
	7a	Gross amount from sales of (i) Securities	(ii) Other				
		assets other than inventory					
	b	Less: cost or other basis and sales expenses .					
	С	Gain or (loss) 0	0				
_	d	Net gain or (loss)	▶				
venue	8a	Gross income from fundraising events (not including \$ 0					
Other Reven		of contributions reported on line 1c). See Part IV, line 18 a					
£	b	Less: direct expenses b					
		Net income or (loss) from fundraising	events . ►				
	9a	Gross income from gaming activities.					
		See Part IV, line 19 a					
		Less: direct expenses b					
		Net income or (loss) from gaming acti	vities ►				
	10a	Gross sales of inventory, less					
		returns and allowances a					
		Less: cost of goods sold b					
	С	Net income or (loss) from sales of inve					
		Miscellaneous Revenue	Business Code				
	11a (Change in split interest agreements	900099	-121,974	-121,974	0	0
	b						
	С						
	d	All other revenue		0	0	0	0
		Total. Add lines 11a–11d		-121,974			
	12	Total revenue. See instructions	▶	10,204,380	2,061,558	0	0

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) but are not required to complete columns (B), (C), and (D).

	Check if Schedule O contains a respons	se to any question i	in this Part IX		🗌
	t include amounts reported on lines 6b, 7b, o, 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 governments and organizations in the United States. See Part IV, line 21	6,911,001	6,911,001		
2	Grants and other assistance to individuals in the United States. See Part IV, line 22	0	0		
3	Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16	0	0		
4 5	Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees	0 150,235	93,146	21,033	36,056
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 8	Other salaries and wages	599,720 58,316	371,826 36,156	83,961 8,164	143,933
9	Other employee benefits	78,421	48,621	10,979	18,821
10	Payroll taxes	62,318	38,637	8,725	14,956
11	Fees for services (non-employees):	02,310	30,037	0,725	14,900
	· · · · · · · · · · · · · · · · · · ·				
a	Management	07.004	44.047	0.007	
b	Legal	27,334	16,947	3,827	6,560
C	Accounting	92,595	57,409	12,963	22,223
d	Lobbying	0	0	0	0
e	Professional fundraising services. See Part IV, line 17	0	40.400	4=0.004	0
f	Investment management fees	196,591	12,400	179,391	4,800
g	Other	1,308	811	183	314
12	Advertising and promotion	4,426	2,744	620	1,062
13	Office expenses	64,458	39,964	9,024	15,470
14	Information technology	45,455	28,182	6,364	10,909
15	Royalties	07.700	40.500	00.047	04.054
16	Occupancy	96,609	42,508	32,847	21,254
17 18	Travel	11,221	6,957	1,571	2,693
19	Conferences, conventions, and meetings .	92,413	57,298	12,936	22,179
20	Interest	, , , , ,	- ,	,	
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	12,158	5,349	4,134	2,675
23	Insurance	11,040	4,857	3,754	2,429
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.)				
а	Publications	21,363	13,245	2,991	5,127
b					
c d					
е	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	8,536,982	7,788,058	403,467	345,457
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 if following SOP 98-2 (ASC 958-720)				·

Part X Balance Sheet

	art X	Balance Sheet	(A) Beginning of year		(B) End of year
	1	Cash-non-interest-bearing	551,903	1	0
	2	Savings and temporary cash investments	1,557,070	2	3,257,820
	3	Pledges and grants receivable, net	245,473	3	144,630
	4	Accounts receivable, net	0	4	0
	5	Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L	0	5	0
s.	6	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)	0	6	0
Assets	7	Notes and loans receivable, net	3,266,847	7	3,509,022
As	8	Inventories for sale or use	0	8	0
	9	Prepaid expenses and deferred charges	29,453	9	29,275
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10a 144,618	,		
	b	Less: accumulated depreciation 10b 133,272	15,222	10c	11,346
	11	Investments—publicly traded securities			67,803,881
	12	Investments—other securities. See Part IV, line 11	21,648,308		23,254,918
	13	Investments—program-related. See Part IV, line 11	0		0
	14	Intangible assets	0	14	0
	15	Other assets. See Part IV, line 11	0	15	0
	16	Total assets. Add lines 1 through 15 (must equal line 34)	94,683,487	16	98,010,892
	17	Accounts payable and accrued expenses	28,631	17	71,333
	18	Grants payable		18	0
	19	Deferred revenue		19	0
	20	Tax-exempt bond liabilities		20	0
	21	Escrow or custodial account liability. Complete Part IV of Schedule D .		21	0
Liabilities	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L			
jak		•		22	0
_	23	Secured mortgages and notes payable to unrelated third parties		23	0
	24	Unsecured notes and loans payable to unrelated third parties		24	0
	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	8,237,144	25	8,199,222
	26	Total liabilities. Add lines 17 through 25	0.2/5.775	26	0.270 FFF
	20	Organizations that follow SFAS 117, check here ▶ ✓ and complete	8,265,775	20	8,270,555
Fund Balances		lines 27 through 29, and lines 33 and 34.			
<u>la</u>	27	Unrestricted net assets	25,946,772	27	28,847,007
Ba	28	Temporarily restricted net assets	55,780,011	28	56,202,369
u	29	Permanently restricted net assets	4,690,929	29	4,690,961
or Fu		Organizations that do not follow SFAS 117, check here ▶ □ and complete lines 30 through 34.			
ts	30	Capital stock or trust principal, or current funds		30	
Net Assets or	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
À	32	Retained earnings, endowment, accumulated income, or other funds .		32	
Ne	33	Total net assets or fund balances	86,417,712	33	89,740,337
	34	Total liabilities and net assets/fund balances	94,683,487	34	98,010,892

Form 990 (2011) Page **12**

Par	XI Reconciliation of Net Assets				
	Check if Schedule O contains a response to any question in this Part XI	<u> </u>			~
1	Total revenue (must equal Part VIII, column (A), line 12)	1		10.20	4 200
2	Total expenses (must equal Part IX, column (A), line 25)	2		10,20	
3	Revenue less expenses. Subtract line 2 from line 1	3			6,982
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4			7,398
5	Other changes in net assets or fund balances (explain in Schedule O)	5		86,41	
6	Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33,	-		1,65	5,227
0	column (B))	6		89,74	ი 337
Part	XII Financial Statements and Reporting			07/11	0,001
	Check if Schedule O contains a response to any question in this Part XII				
				Yes	No
1	Accounting method used to prepare the Form 990: ☐ Cash ☑ Accrual ☐ Other				
	If the organization changed its method of accounting from a prior year or checked "Other," exp Schedule O.	lain in			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant? .		2a		~
b	Were the organization's financial statements audited by an independent accountant?		2b	~	
C	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for over				
	of the audit, review, or compilation of its financial statements and selection of an independent accoun	_	2c	V	
	If the organization changed either its oversight process or selection process during the tax year, exp Schedule O.	lain in			
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the yea issued on a separate basis, consolidated basis, or both:	r were			
	✓ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set for	orth in			
	the Single Audit Act and OMB Circular A-133?		3a		~
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo	go the			
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such au	dits	3b		
			Forn	n 990	(2011

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

OMB No. 1545-0047 2011

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

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions. **Employer identification number**

COM	MUNITY FOUNDAT	ION OF WESTER	N MASSACHUSETTS						22-308	39640	
Par			rity Status (All orga			-			nstructio	ns.	
The c	•	•	ation because it is: (Fo		-		-	,			
1			hes, or association of			ed in sec	tion 170	(b)(1)(A)(i).		
2			170(b)(1)(A)(ii). (Attac		-						
3			spital service organiza						\(\langle\) \(\lan		
4		earcn organizatione, city, and state	on operated in conjun	ction witr	ı a nospit	aı descrii	oea in se	ction 170)(A)(1)(d)(III). Enter the	
5	•	=	the benefit of a colle	ao or uni	vorcity o	wood or	oporated	by 2 go	vornmont		
3)(1)(A)(iv). (Com		ge or um	versity of	wiled of	operateu	by a go	verriirierita	ai uiiii described	J 111
6	☐ A federal, stat	e, or local gover	nment or government	al unit de	scribed ir	section	170(b)(1)(A)(v).			
7			receives a substantia (A)(vi). (Complete Par	•	its suppo	ort from a	a governr	mental ur	it or from	the general pu	blic
8	✓ A community	trust described i	n section 170(b)(1)(A)(vi). (Cor	nplete Pa	art II.)					
9	•	•	receives: (1) more that								
			d to its exempt funct								
			ent income and unre fter June 30, 1975. Se						n bii tax	d) from busines	ses
10		=	l operated exclusively					-	4)		
11		_	nd operated exclusively		-	-				or to carry out	the
			licly supported organ								
	509(a)(3). Che	eck the box that	describes the type of	supportir	ng organiz	zation an	d comple	te lines 1	1e throug	h 11h.	
	a 🗌 Type I	b □	Type II c	□ Туре	III-Funct	ionally in	tegrated		d□	Type III-Other	
е			that the organization								
			ers and other than one	e or more	publicly	support	ed organ	izations c	lescribed	in section 509(a	a)(1)
_	or section 509						_				
f	_		a written determination			that it is	a Type	I, Type I	I, or Type	e III supporting	
g	Since August	17, 2006, has t	he organization accep	pted any	gift or co	ontributio	n from a	ny of the	•		
	following pers										
			ndirectly controls, eitle							d Yes I	No
			ody of the supported							11g(i)	
		•	on described in (i) abo							11g(ii)	
h	• •	•	a person described in ion about the support	., .,						11g(iii)	
	Name of supported	(ii) EIN	(iii) Type of organization		rganization		ou notify	(vi) I	s the	(vii) Amount of	
(1)	organization	(11) 2.11	(described on lines 1–9	in col. (i) lis	sted in your	the organ	nization in	organizat	ion in col.	support	
			above or IRC section (see instructions))	governing	document?		of your port?		zed in the S.?		
			(see mea dedens)	Yes	No	Yes	No	Yes	No		
(A)											
(B)											
(C)											
(D)											
(E)											

Page **2**

Part	Support Schedule for Organiza	ations Descri	bed in Secti	ons 170(b)(1)	(A)(iv) and 1	70(b)(1)(A)(vi	
	(Complete only if you checked the				•	•	alify under
	Part III. If the organization fails to	qualify unde	r the tests lis	ted below, pl	ease comple	te Part III.)	
	on A. Public Support						
Calen	dar year (or fiscal year beginning in) ▶	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	8,923,706	7,449,442	8,210,442	6,478,013	4,961,007	36,022,610
2	Tax revenues levied for the						
	organization's benefit and either paid						
_	to or expended on its behalf				0		0
3	The value of services or facilities						
	furnished by a governmental unit to the organization without charge						
	_	0.000.707	7.440.440	0.040.440	0	4.0/4.007	0
4	Total. Add lines 1 through 3	8,923,706	7,449,442	8,210,442	6,478,013	4,961,007	36,022,610
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)						5,982,169
6	Public support. Subtract line 5 from line 4.						30,040,441
	on B. Total Support						30/010/111
	dar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
7	Amounts from line 4	8,923,706	7,449,442	8,210,442	6,478,013	4,961,007	36,022,610
8	Gross income from interest, dividends,						
	payments received on securities loans,						
	rents, royalties and income from similar						
	sources	3,288,281	2,929,506	1,829,131	1,468,016	1,552,887	11,067,821
9	Net income from unrelated business						
	activities, whether or not the business						
	is regularly carried on				0	0	0
10	Other income. Do not include gain or						
	loss from the sale of capital assets						
	(Explain in Part IV.)	0			0	0	0
11	Total support. Add lines 7 through 10	, , , , ,	,				47,090,431
12	Gross receipts from related activities, etc	•	•			12	0
13	First five years. If the Form 990 is for the	=			=		
Coati	organization, check this box and stop he			· · · · ·			
	on C. Computation of Public Suppor			1 column (f)		14	(2.70.9/
14 15	Public support percentage for 2011 (line of Public support percentage from 2010 Sci					15	63.79 %
16a	33 ¹ / ₃ % support test—2011. If the organi						
104	box and stop here. The organization qua						
b	331/3% support test—2010. If the organ	=		_			_
-	check this box and stop here. The organ						. ▶ □
17a	10%-facts-and-circumstances test - 20						
	10% or more, and if the organization me						
	Part IV how the organization meets the "f	acts-and-circu	mstances" tes	t. The organiza	ation qualifies	as a publicly su	ipported
	organization						. ▶ □
b	10%-facts-and-circumstances test-26						
	15 is 10% or more, and if the organization						
	Explain in Part IV how the organization m				ne organizatio	n qualities as a	publicly
40	supported organization						. 🕨 📙
18	Private foundation. If the organization di	a not check a l	box on line 13,	10a, 16b, 1/a	, or 17b, chec	k this box and s	see

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

(Complete only if you checked the box on line 9 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.)

C+:	and Dublic Comment	under the te	oto noted ben	ov, picase ce	inpicte i ait	11.,	
	on A. Public Support	() 0007	(1) 0000	() 0000	(1) 00 (0	() 0044	(n =
	dar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(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						
3	organization's tax-exempt purpose Gross receipts from activities that are not an						
J	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						
	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						
С	Add lines 7a and 7b						
8	Public support (Subtract line 7c from						
	line 6.)						
	on B. Total Support						
	dar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(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						
С	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 IV.)						
13	Total support. (Add lines 9, 10c, 11,						
	and 12.)						
14	First five years. If the Form 990 is for the	ne organizatior	n's first, secon	d, third, fourth	, or fifth tax ve	ear as a sectio	n 501(c)(3)
	organization, check this box and stop he	re					▶ □
Secti	on C. Computation of Public Suppor	t Percentag	е				
15	Public support percentage for 2011 (line 8	. ,	•				%
16	Public support percentage from 2010 Sch					16	%
	on D. Computation of Investment In						
17	Investment income percentage for 2011 (-			%
18	Investment income percentage from 2010					18	%
19a	331/3% support tests—2011. If the organ						
	17 is not more than 33 ¹ / ₃ %, check this box		_	-		=	_
b	33 ¹ /3% support tests—2010. If the organize line 18 is not more than 33 ¹ /3%, check this line 18 is not more than 33 ¹ /3%.						
20	Private foundation. If the organization di	_	_				
20	i ilvate iounidation. Il tile organization di	a not oneck a	201 UII III IE 14	, 13a, 01 130, (DIRECT THIS DOX	and see modu	

Part IV	Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).

SCHEDULE D (Form 990)

Supplemental Financial Statements

OMB No. 1545-0047

Open to Public

Department of the Treasury Internal Revenue Service Name of the organization ► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

► Attach to Form 990. ► See separate instructions. Inspection Employer identification number

COMN	MUNITY FOUNDATION OF WESTERN MASSACHU	JSETTS		22-3089640			
Par		r Advised Funds or Other Similar Fu	ınds or Ac	counts. Comple	te if the		
	organization answered "Yes" to Fo						
		(a) Donor advised funds	(b) F	Funds and other accou	nts		
1	Total number at end of year	257		279			
2	00 0						
3	Aggregate grants from (during year)	4,668,576		2,242,425			
4	Aggregate value at end of year	25,964,308		68,920,571			
5	Did the organization inform all donors and				. –		
_	funds are the organization's property, subject			_	es 🗌 No		
6	Did the organization inform all grantees, dor						
	only for charitable purposes and not for the				N		
Dor	conferring impermissible private benefit? . till Conservation Easements. Comp	ato if the organization answered "Vec	" to Form (V Y			
			to Forms	990, Part IV, line	1.		
1	Purpose(s) of conservation easements held be Preservation of land for public use (e.g., r		of an histori	ically important law	- d araa		
		·		d historic structure			
	□ Protection of natural habitat□ Preservation of open space	☐ Preservation	or a certified	a nistoric structure	;		
2	Complete lines 2a through 2d if the organization	ion held a qualified conservation contribu	tion in the fo	orm of a conservat	ion		
_	easement on the last day of the tax year.	non neid a qualifica conservation contribu		orni or a conscivat	.1011		
				Held at the End of	the Tax Yea		
а	Total number of conservation easements .		2	a			
b	Total acreage restricted by conservation ease						
C	Number of conservation easements on a cert						
d	Number of conservation easements include			_			
	historic structure listed in the National Regist		20	d			
3							
	tax year ▶						
4	Number of states where property subject to	conservation easement is located ►					
5	Does the organization have a written poli						
	violations, and enforcement of the conservat				es 🗌 No		
6	Staff and volunteer hours devoted to monitor	ing, inspecting, and enforcing conservation	n easement	ts during the year			
	>						
7	Amount of expenses incurred in monitoring, i	nspecting, and enforcing conservation ea	sements du	ring the year			
_	\$						
8	Does each conservation easement reported						
_					es ∐ No		
9	In Part XIV, describe how the organization re		-				
	balance sheet, and include, if applicable, the organization's accounting for conservation ea		ili lai loiai Stai	terrierits triat desc	libes lile		
Pari		ctions of Art, Historical Treasures, o	or Other Si	imilar Assets			
r ar		ered "Yes" to Form 990, Part IV, line 8		illiai Assets.			
1a	10.1			statement and bal	ance shee		
	works of art, historical treasures, or other s	• • • • • • • • • • • • • • • • • • • •					
	public service, provide, in Part XIV, the text of						
b	If the organization elected, as permitted un	der SFAS 116 (ASC 958), to report in it	s revenue s	statement and bal	ance shee		
	works of art, historical treasures, or other s						
	public service, provide the following amounts	relating to these items:					
				> \$			
	(i) Revenues included in Form 990, Part VIII,(ii) Assets included in Form 990, Part X			> \$			
2	If the organization received or held works	of art, historical treasures, or other simil	ar assets fo	or financial gain, i	orovide th		
	following amounts required to be reported ur			5 / 1			
а	Revenues included in Form 990, Part VIII, line	91		▶ \$			
b	Revenues included in Form 990, Part VIII, line 1						

	D (5 200) 2011								_ ^
enedui Part	e D (Form 990) 2011	Callastians of /	ht Histori	aal Traaauraa	ν α ν Ο	thar Cimilar A	nacta (c		Page 2
3	Using the organization's acquisition, a								
3	collection items (check all that apply):	ccession, and on	iei records,	Check any or ti	ie iolio	wing that are a s	sigiiiiicai	it use	01 113
а	☐ Public exhibition		4 	Loan or exchan	ae nroa	rams			
b	Scholarly research			O.H					
	☐ Preservation for future generations		c _						
4	Provide a description of the organization XIV.	on's collections a	nd explain h	now they further	the or	ganization's exer	mpt pur	ose ir	n Part
5	During the year, did the organization s	aliait ar ragaina a	donations of	art historical t	rooouro	a or other simil	Or.		
5	assets to be sold to raise funds rather							∕es □	No
Part									
rait	line 9, or reported an amount				answe	ied les toll	51111 550), i aii	LIV,
1a					tions o	r other assets n	ot		
	included on Form 990, Part X?							∕es □	No
b	If "Yes," explain the arrangement in Pa						Ш.		,
-	ree, explain the arrangement in rea	. t y ti t di la comple		g table:		А	mount		
С	Beginning balance				10	2			
d	Additions during the year				10				
е	Distributions during the year				16	•			
f	Ending balance				11	F			
2a	Did the organization include an amount	t on Form 990, Pa	rt X, line 21	?	. –			∕es 🗌	No
b	If "Yes," explain the arrangement in Pa	rt XIV.							
Part	V Endowment Funds. Comple	te if the organiza	ation answ	ered "Yes" to	Form 9	90, Part IV, line	e 10.		
		(a) Current year	(b) Prior ye	ar (c) Two yea	ars back	(d) Three years bac	k (e) Fo	ur years	back
1a	Beginning of year balance	61,196,679	57,89	1,223 43,	674,099	60,086,71	3		
b	Contributions	1,542,206	86	5,847 2,	457,947	3,582,29	8		
С	Net investment earnings, gains, and								
	losses	799,091	5,94	1,655 14,	899,229	-16,955,26	8		
d	Grants or scholarships	2,419,918	2,72	7,138 2,	400,677	2,329,60	5		
е	Other expenditures for facilities and								
	programs	0		0	0		0		
f	Administrative expenses	727,647		· -	739,375	-			
g	End of year balance	60,390,411	61,19		891,223		9		
2	Provide the estimated percentage of the	-	-	ne 1g, column (a	a)) held	as:			
а	Board designated or quasi-endowment		_%						
b		<u>10</u> %							
С	Temporarily restricted endowment ▶	30 %	20/						
За	The percentages in lines 2a, 2b, and 2c Are there endowment funds not in the			on that are hold	and ac	lministored for th	20		
Ja	organization by:	possession or the	e Organizati	on that are neid	anu ac	iriiriisterea ior ti		Yes	No
	(i) unrelated organizations						3a(i		~
	()						3a(ii)	~
_	If "Yes" to 3a(ii), are the related organiz		•				3b		
4	Describe in Part XIV the intended uses								
Part	, , ,					<u> </u>			
	Description of property	(a) Cost or oth (investme	' '	Cost or other basis (other)		Accumulated epreciation	(d) Bo	ook value	e
1a	Land		0	0					0
h	Ruildinge	1		0	1	0			0

0

0

0

Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).)

0

144,618

c Leasehold improvements

d Equipment

0

0

11,346

11,346

0

0

133,272

. ▶

Schedule D (Form 990) 2011 Page **3**

Part VII	Investments – Other Securities.	See Form 990, Part X, I	line 12.	
(a	a) Description of security or category (including name of security)	(b) Book value	(c) Method of va Cost or end-of-year i	
(1) Financia	I derivatives	13,877,267	End-of-Year Market Value	
	held equity interests	9,377,651	End-of-Year Market Value	
(3) Other				
(A)				
(B)				
(C)				
(D) (E)				
(F)				
(G)				
(H)				
(I)				
	(b) must equal Form 990, Part X, col. (B) line 12.) ▶	23,254,918		
Part VIII	Investments – Program Related			
	(a) Description of investment type	(b) Book value	(c) Method of va Cost or end-of-year	
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
(10)	(b) must equal Form 990, Part X, col. (B) line 13.) ▶			
Part IX	Other Assets. See Form 990, Pa	rt X line 15		
I alt IX) Description		(b) Book value
(1)	· ·	, ,		(,,
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
(10)	(I) 15 000 D 17	1 (D) !: 45 \		
	umn (b) must equal Form 990, Part X, co		· · · · · · · · · · · · · · · · · · ·	
Part X	Other Liabilities. See Form 990, (a) Description of liability	(b) Book value		
	income taxes	`,		
(2) Agency		<u> </u>		
	y Under Unitrust Agreements	2,615,954		
(4)	y Under Unitrust Agreements	2,015,754		
(5)				
(6)				
(7)				
(8)				
(9)				
(10)				
(11)				
Total. (Column	(b) must equal Form 990, Part X, col. (B) line 25.) ▶	8,199,222		

2. FIN 48 (ASC 740) Footnote. In Part XIV, 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).

Schedule D (Form 990) 2011 Page 4 Part XI Reconciliation of Change in Net Assets from Form 990 to Audited Financial Statements 10,204,380 2 Total expenses (Form 990, Part IX, column (A), line 25) 2 8,536,982 3 3 Excess or (deficit) for the year. Subtract line 2 from line 1 . . . 1,667,398 4 4 1,655,227 5 Donated services and use of facilities 5 0 6 Investment expenses 6 0 7 Prior period adjustments 7 0 8 8 0 Total adjustments (net). Add lines 4 through 8 9 9 1,655,227 10 Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9 10 3,322,625 Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return Total revenue, gains, and other support per audited financial statements . . . 11,859,607 Amounts included on line 1 but not on Form 990, Part VIII, line 12: 2 2a 1,655,227 2b 0 2c 0 C 2d 0 2e 1,655,227 3 Subtract line **2e** from line **1** 3 10,204,380 Amounts included on Form 990, Part VIII, line 12, but not on line 1: Investment expenses not included on Form 990. Part VIII. line 7b . . . 4a 0 0 Add lines **4a** and **4b** 4c 0 5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) 10,204,380 Reconciliation of Expenses per Audited Financial Statements With Expenses per Return Part XIII Total expenses and losses per audited financial statements 8,536,982 Amounts included on line 1 but not on Form 990, Part IX, line 25: 2 0 Prior year adjustments 2b 0 0 d Other (Describe in Part XIV.) 2d 0 Add lines **2a** through **2d** 2e 0 3 Subtract line **2e** from line **1** 3 8.536.982 Amounts included on Form 990. Part IX. line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b . 4a 0 4b 0 4c 0 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.). 8,536,982 Supplemental Information Complete this part to 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, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also complete this part to provide any additional information. Schedule D, Part V, Line 4 - Endowments are used to make grants to not for profit organizations for programs within the counties served by the organization and scholarships for students from within the counties served to attend college.

SCHEDULE I (Form 990)

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

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22. ► Attach to Form 990.

Open to Public Inspection Employer identification number

COMMUNITY FOUNDATION OF WESTERN MASSACHUSETTS							22-3089640		
Part I General Information									
1 Does the organization mainta the selection criteria used to			•			r the grants or assistanc			
2 Describe in Part IV the organi	ization's procedur	es for monitoring	the use of grant fu	ınds in the United	States.				
Part II Grants and Other As to Form 990, Part IV, Part II can be duplica	line 21, for any r	ecipient that red	ceived more than						
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 non-cash assistance	(h) Purpose of grant or assistance		
(1) Sch I, Stmt 1									
(2)									
(3)									
(4)									
(5)									
(6)									
(7)									
(8)									
(9)									
(10)									
(11)									
(12)									
2 Enter total number of section							. ▶ 257		
3 Enter total number of other o	rganizations listed	I in the line 1 table					. • 0		

Schedule I (Form 990) (2011) Page 2 Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22. Part III Part III can be duplicated if additional space is needed. (a) Type of grant or assistance (b) Number of (c) Amount of (d) Amount of (e) Method of valuation (book, (f) Description of non-cash assistance recipients cash grant non-cash assistance FMV, appraisal, other) 3 5 6 Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information. Schedule I, Part I, Line 2 - Scholarships are paid to US educational institutions to which the student is attending and are refunded by the educational istitution if the student does not maintain their status as a student. Grants are made only to verified 501(c)3 organizations, with grant reports being required of all discretionary grants to receive full payment.

Form: Schedule I

Page: 1

Line Number: Part II

Description of Grants and Other Assistance to Governments and Organizations in the United States

		Amount of cash grant	Amount of non-cash assistance
	1-10-0	-	Amount of non-cash assistance
Name and address	1540 Connection	15,000	
	53 Otis St		
	Westborough, MA 01581		
EIN	26-2874008		
IRC code section	501c3		
Method of valuation	cash		
Description of non-			
cash assistance	Conoral Hoolth		
Purpose of grant	General Health		
Name and address	Arcadia Players	5,100	
	PO Box 387		
	Northampton, MA 01061		
EIN	04-3074722		
IRC code section	501c3		
Method of valuation	cash		
Description of non-			
cash assistance			
Purpose of grant	Human Services		
Name and address	Action Against Hunger USA	10,000	
	247 West 37th St		
	New York, NY 10018		
EIN	13-3327008		
IRC code section	501c3		
Method of valuation	cash		
Description of non-			
cash assistance			
Purpose of grant	Food and Nutrition		
Name and address	Alzheimers Association	7,000	
ranic and dadress	225 N Michigan Ave	1,000	
	Chicago, IL 60601		
EIN	36-3464008		
IRC code section	501c3		
Method of valuation			
Description of non-	casii		
cash assistance			
Purpose of grant	General Health		
Name and address	Alzheimers Dis Assoc MA NH	10,000	
	480 Pleasant St		
	Watertown, MA 02472		
EIN	04-2731194		
IRC code section	501c3		
Method of valuation	cash		
Description of non-			
cash assistance			
Purpose of grant	General Health		
Name and address	America Walks Inc	15,000	
	PO Box 10581	2,000	
	Portland, OR 97296		
EIN	04-3401323		
IRC code section	501c3		
Method of valuation			
Description of non-	00011		
cash assistance			
Purpose of grant	Community Imprv		
-			
Name and address	American Cancer Society Inc	10,593	

Schedule I, Part IV, Statement 1 COMMUNITY FOUNDATION OF WESTERN MASSACHUSETTS

PO Box 720366

Oklahoma City, OK 73162

EIN 13-1788008 IRC code section 501c3 Method of valuation cash

Description of noncash assistance

Purpose of grant General Health

Name and address American International College 78,475

1000 State St

Springfield, MA 01109

EIN 04-2103701 IRC code section 501c3 Method of valuation cash

Description of noncash assistance

cash assistance

cash assistance

Purpose of grant Scholarships

Name and address Amer Red Cross Pioneer Valley 21,450

506 Cottage St Springfield, MA 01104

EIN 53-0197008
IRC code section 501c3
Method of valuation cash
Description of non-

Purpose of grant Human Services

Name and address Amherst Cinema Arts Center Inc 35,900

28 Amity St Amherst, MA 01002

EIN 04-3456950
IRC code section 501c3
Method of valuation cash
Description of non-

Purpose of grant Arts and Culture

Name and address Artspace Com Arts Center 7,100

15 Mill St

Greenfield, MA 01302

EIN 23-7354008
IRC code section 501c3
Method of valuation cash

Description of noncash assistance

cash assistance

Purpose of grant Arts and Culture

Name and address Atheneum Soc of Wilb Inc 7,349

450 Main St

Wilbraham, MA 01095

EIN 23-7349008
IRC code section 501c3
Method of valuation cash
Description of non-

Purpose of grant Arts and Culture

Name and address Babson College 18,000

231 Forest St

Babson Park, MA 02457

EIN 04-2103544
IRC code section 501c3
Method of valuation cash
Description of non-

Schedule I, Part IV,	Statement 1	COMMUNITY FOUNDATION OF WESTERN MASSACHUSETT
cash assistance		
Purpose of grant	Scholarships	
Name and address	Bay Path College	25,000
	588 Longmeadow St	
	Longmeadow, MA 01106	
EIN	04-2103865	
IRC code section	501c3	
Method of valuation	cash	
Description of non-		
cash assistance	0.11	
Purpose of grant	College Univ	
Name and address	Bay Path College	42,661
	588 Longmeadow St	
	Longmeadow, MA 01106	
EIN	04-2103865	
IRC code section	501c3	
Method of valuation	cash	
Description of non-		
cash assistance		
Purpose of grant	Scholarships	
Name and address	Baystate Health Found Inc	279,814
	280 Chestnut St 6th FI	,
	Springfield, MA 01199	
EIN	04-3549011	
IRC code section	501c3	
Method of valuation		
Description of non-		
cash assistance		
Purpose of grant	General Health	
		40.400
Name and address	Bay State Reading Institute	10,100
	114 Jennings Rd	
EIN	Holliston, MA 01746 32-0161930	
IRC code section	501c3	
Method of valuation		
Description of non-	Casii	
cash assistance		
Purpose of grant	Education	
Name and address	Becker College	6,000
	61 Sever St	
	Worcester, MA 01609	
EIN	04-2108346	
IRC code section	501c3	
Method of valuation	casn	
Description of non-		
cash assistance		
Purpose of grant	Scholarships	
Name and address	Behavioral Health Network Inc	6,500
	417 Liberty St	
	Springfield, MA 01104	
EIN	04-2103756	
IRC code section	501c3	
Method of valuation	cash	
Description of non-		
cash assistance		
Purpose of grant	Human Services	
Name and address	Bennington College Corp	14,500
	One College Dr	. 9555
	Bennington, VT 05201	
EIN	03-0179414	

Schedule I, Part IV, Statement 1 **COMMUNITY FOUNDATION OF WESTERN MASSACHUSETTS** IRC code section 501c3 Method of valuation cash Description of noncash assistance Purpose of grant College Univ Name and address Bentley University 18,000 175 Forest St Waltham, MA 02452 **EIN** 04-1081650 IRC code section 501c3 Method of valuation cash Description of noncash assistance Purpose of grant Scholarships Name and address Berkshire Children and Fam Inc 175,674 480 West St Pittsfield, MA 01201 EIN 04-2226238 IRC code section 501c3 Method of valuation cash Description of noncash assistance **Human Services** Purpose of grant 6,000 Name and address Big BrsBig Sis Assoc of FrkIn Cty 16 Court Square 3rd Fl Greenfield, MA 01302 EIN 04-2491950 501c3 IRC code section Method of valuation cash Description of noncash assistance Purpose of grant **Human Services** 13,000 Name and address Boston College 140 Commonwealth Ave Chestnut Hill, MA 02467 EIN 04-2103545 IRC code section 501c3 Method of valuation cash Description of noncash assistance Purpose of grant Scholarships Name and address Boston University 26,700 881 Commonwealth Ave Boston, MA 02215 EIN 04-2103547 IRC code section 501c3 Method of valuation cash Description of noncash assistance Purpose of grant Scholarships Name and address Boys and Girls Club Family Center Inc 8,706 100 Acorn St Springfield, MA 01109 EIN 04-2105940 IRC code section Method of valuation cash Description of noncash assistance Purpose of grant Youth Developmnt

16,203

Name and address Boys and Girls Club of Grtr Holyoke

Schedule I, Part IV,		COMMUNITY FOUNDATION OF WESTERN MASSACHUSET
	70 Nick Cosmos Way	
	Holyoke, MA 01041	
EIN	04-2103792	
IRC code section	501c3	
Method of valuation	cash	
Description of non-		
cash assistance		
Purpose of grant	Youth Developmnt	
Name and address	Boys and Girls Club of Grtr Westfield	41,123
	28 West Silver St	
	Westfield, MA 01086	
EIN	04-2464259	
IRC code section	501c3	
Method of valuation	cash	
Description of non-		
cash assistance		
Purpose of grant	Youth Developmnt	
Name and address	Bridgewater State College	7,500
	Tillinghast Hall	
	Bridgewater, MA 02325	
EIN	04-3010428	
IRC code section	501c3	
Method of valuation	cash	
Description of non-		
cash assistance		
Purpose of grant	Scholarships	
Name and address	Brightside Inc	39,962
	PO Box 9012	
	Springfield, MA 01102	
EIN	04-2182395	
IRC code section	501c3	
Method of valuation	cash	
Description of non-		
cash assistance		
Purpose of grant	Human Services	
Name and address	Brown University	5,250
	PO Box 1877	
	Providence, RI 02912	
EIN	05-0258809	
IRC code section	501c3	
Method of valuation	cash	
Description of non-		
cash assistance		
Purpose of grant	College Univ	
Name and address	Bryant University	21,000
	1150 Douglas Pike	
	Smithfield, RI 02917	
EIN	05-0258810	
IRC code section	501c3	
Method of valuation	cash	
Description of non-		
cash assistance		
Purpose of grant	Scholarships	
Name and address	Bur for Exceptional Children Inc	7,462
	PO Box 1039	
	Holyoke, MA 01041	
FIN	23-7228632	

EIN

IRC code section

Method of valuation cash **Description of non-**

23-7228632

501c3

Schedule I, Part IV, Scash assistance	Statement 1	COMMUNITY FOUNDATION OF WESTERN MASSACHUSETTS
Purpose of grant	Human Services	
		40.550
Name and address	Cancer Connection Inc 41 Locust St	18,550
	Northampton, MA 01060	
EIN	04-3493483	
IRC code section	501c3	
Method of valuation		
Description of non-	Caon	
cash assistance		
Purpose of grant	Human Services	
Name and address	Roman Cath Diocese of Spfld	20,000
Maine and address	65 Elliot St	20,000
	Springfield, MA 01002	
EIN	86-1122008	
IRC code section	501c3	
Method of valuation		
Description of non-	casii	
cash assistance		
Purpose of grant	Human Services	
Name and address		24 500
Name and address	Ctr for Human Development Inc 332 Birnie Ave	21,500
EIN	Springfield, MA 01107 04-2503926	
IRC code section	501c3	
Method of valuation		
Description of non-	Casii	
cash assistance		
Purpose of grant	Human Services	
Name and address	Center for New Americans	11,851
	42 Gothic St	
	Northampton, MA 01060	
EIN	04-3224215	
IRC code section	501c3	
Method of valuation	cash	
Description of non-		
cash assistance	Human Caminas	
Purpose of grant	Human Services	
Name and address	Central CT State University	16,000
	1615 Stanley St	
	New Britain, CT 06050	
EIN	06-1303381	
IRC code section	501c3	
Method of valuation	cash	
Description of non-		
cash assistance		
Purpose of grant	Scholarships	
Name and address	Church of God in Christ Fam Ser	10,000
	35 Alden St	
	Springfield, MA 01109	
EIN	23-7002419	
IRC code section	501c3	
Method of valuation	cash	
Description of non-		
cash assistance		
Purpose of grant	Human Services	
Name and address	Clinical and Support Options Inc	20,000
	8 Atwood Dr	
	Northampton, MA 01060	

EIN

04-2206041

Schedule I, Part IV, S	Statement 1 501c3	COMMUNITY FOUNDATION OF WESTERN MASSACHUSETTS
Method of valuation		
Description of non-	54577	
cash assistance		
Purpose of grant	Human Services	
Name and address	College of Our Lady of the Elms	66,700
	291 Springfield St	
	Chicopee, MA 01013	
EIN	04-2225850	
IRC code section	501c3	
Method of valuation	cash	
Description of non-		
cash assistance		
Purpose of grant	Scholarships	
Name and address	College of Our Lady of the Elms	15,000
	291 Springfield St	
	Chicopee, MA 01013	
EIN	04-2225850	
IRC code section	501c3	
Method of valuation	cash	
Description of non-		
cash assistance	College Univ	
Purpose of grant	College Univ	
Name and address	Com Action of Frkln Hampshire	75,614
	393 Main St	
=	Greenfield, MA 01301	
EIN	04-2384972	
IRC code section Method of valuation	501c3	
Description of non-	Casii	
cash assistance		
Purpose of grant	Human Services	
Name and address	Com Adolescent Res and Ed Ctr	87,660
Mariic and address	247 Cabot St	37,000
	Holyoke, MA 01040	
EIN	04-2962882	
IRC code section	501c3	
Method of valuation	cash	
Description of non-		
cash assistance		
Purpose of grant	Human Services	
Name and address	Com Economic Dev Assist Corp	10,000
	One Center Plaza	•
	Boston, MA 02465	
EIN	04-2962882	
IRC code section	501c3	
Method of valuation	cash	
Description of non-		
cash assistance		
Purpose of grant	Human Services	
Name and address	Community Education Project Inc 317 Main St	9,000
	Holyoke, MA 01040	
EIN	04-3458723	
IRC code section	501c3	
Method of valuation	cash	
Description of non-		
cash assistance		
Purpose of grant	Human Services	

15,000

Schedule I, Part IV, Statement 1

338 Montague City Rd

Turners Falls, MA 01376

EIN 04-3312968

IRC code section 501c3 Method of valuation cash

Description of noncash assistance

Purpose of grant Human Services

One Sugarloaf St S Deerfield, MA 01373

EIN 04-3416862 IRC code section 501c3 Method of valuation cash

Description of noncash assistance

Purpose of grant Community Imprv

Name and address Com Music School of Springfield 52,625

COMMUNITY FOUNDATION OF WESTERN MASSACHUSETTS

19,750

127 State St

Springfield, MA 01103

EIN 22-2501008
IRC code section 501c3
Method of valuation cash

Description of noncash assistance

Purpose of grant Education

1441 Main St

Springfield, MA 01103

EIN 04-2152680
IRC code section 501c3
Method of valuation cash
Description of non-

Description of nor cash assistance

Purpose of grant Human Services

Name and address Community YMCA of Greenfield 35,600

451 Main St

Greenfield, MA 01301

EIN 04-2149363
IRC code section 501c3
Method of valuation cash

Description of noncash assistance

Purpose of grant Human Services

Name and address Congregational Church of Holland 6,582

11 Sturbridge Rd Holland, MA 01521

EIN 04-3069643
IRC code section 501c3
Method of valuation cash

Description of noncash assistance

Purpose of grant Religious Church

Name and address CT River Watershed Council 13,400

15 Bank Row Greenfield, MA 01301

EIN 04-2148397
IRC code section 501c3
Method of valuation cash
Description of non-

Schedule I, Part IV, Scash assistance	State((1811)	COMMUNITY FOUNDATION OF WESTERN MASSACHUSET
Purpose of grant	Environmental	
Name and address	Cooley Dickinson Hosp Health Care	32,759
	30 Locust St	
	Northampton, MA 01060	
EIN	04-2103561	
RC code section	501c3	
Method of valuation	cash	
Description of non-		
cash assistance	Canaral Haalth	
Purpose of grant	General Health	
Name and address	Cooperative Dev Institute	13,000
	PO Box 422	
	Shelburne Falls, MA 01370	
EIN	04-3241596	
IRC code section	501c3	
Method of valuation Description of non-	Cash	
cash assistance		
Purpose of grant	Community Imprv	
		40.400
Name and address	Cooperative Fund of N England	10,100
	PO Box 3413	
EIN	Amherst, MA 01004 03-0264092	
RC code section	501c3	
Method of valuation		
Description of non-	casii	
cash assistance		
Purpose of grant	Community Imprv	
Name and address	Cornell University	10,750
	PO Box 223623	13,133
	Pittsburgh, PA 15251	
EIN	15-0532008	
IRC code section	501c3	
Method of valuation	cash	
Description of non-		
cash assistance		
Purpose of grant	College Univ	
Name and address	Cutchins Prog for Children and Fam	11,200
	78 Pomeroy Terrace	•
	Northampton, MA 01060	
EIN	04-2604427	
IRC code section	501c3	
Method of valuation	cash	
Description of non-		
cash assistance		
Purpose of grant	Human Services	
Name and address	Dakin Pioneer Valley Humane Soc	29,634
	PO Box 6307	
	Springfield, MA 01101	
EIN	20-5319008	
IRC code section	501c3	
Method of valuation	cash	
Description of non-		
cash assistance	Arrianal Dalata d	
Purpose of grant	Animal Related	
Name and address	Dana Farber Cancer Institute Inc	12,400
	10 Brookline Place West 6th Fl	
	Prookling MA 02445	

Brookline, MA 02445

04-2263040

EIN

Schedule I, Part IV, S	Statement 1 501c3	COMMUNITY FOUNDATION OF WESTERN MASSACHUSETTS
Method of valuation Description of non-		
cash assistance Purpose of grant	General Health	
Name and address	DevelopSpringfield Corporation 1182 Main St Springfield, MA 01103 26-3863008	11,000
IRC code section Method of valuation Description of non- cash assistance	501c3 cash	
Purpose of grant	Human Services	
Name and address	Digital Divide Data 115 West 30th St Ste 400 New York, NY 10001	11,000
EIN IRC code section	20-1148008 501c3	
Method of valuation Description of non- cash assistance		
Purpose of grant	Education	
Name and address	Doctors Without Borders USA Inc 333 Seventh Ave 2nd FI New York, NY 10001	14,300
EIN IRC code section Method of valuation	13-3433008 501c3 cash	
Description of non- cash assistance Purpose of grant	General Health	
Name and address	Drama Studio Inc PO Box 80892 Springfield, MA 01138	11,450
EIN IRC code section Method of valuation	22-2823008 501c3	
Description of non- cash assistance		
Purpose of grant	Arts and Culture	
Name and address	Eagle Hill Foundation of MA 242 Old Petersham Rd Hardwick, MA 01037	10,000
EIN IRC code section Method of valuation	04-2761985 501c3	
Description of non- cash assistance		
Purpose of grant	Private School	2.221
Name and address	Early Childhood Ctrs of Grtr Spfld 15 Catharine St Springfield, MA 01109	8,021
EIN IRC code section Method of valuation	04-2545187 501c3 cash	
Description of non- cash assistance Purpose of grant	Education	
Name and address	Forthdones Creative Living Proj Inc	12 200

13,300

Schedule I, Part IV, Statement 1

252 Prospect St

Plainfield, MA 01070

EIN

22-2996008

IRC code section

501c3

Method of valuation cash

Description of non-

cash assistance

Purpose of grant **Human Services**

Name and address E Longmeadow Scholarships Found

P O Box 66

E Long, MA 01028

EIN

04-2592638

IRC code section

501c3

Method of valuation cash

Description of non-

cash assistance

Purpose of grant

Education

120 Boylston St Boston, MA 02116

EIN

04-1286950

IRC code section

501c3

Method of valuation cash

Description of non-

cash assistance

Purpose of grant Scholarships

4 Open Square Way Studio 206

Holyoke, MA 01040

EIN 04-2685213

IRC code section 501c3

Method of valuation cash Description of non-

cash assistance

Arts and Culture Purpose of grant

Name and address Fairfield University

P O Box 762

Fairfield, CT 06430

06-0646623

EIN

IRC code section 501c3

Method of valuation cash Description of non-

cash assistance

Purpose of grant Scholarships

Name and address Feeding Hills Cong Church

Feeding Hills, MA 01030

21 N Westfield St

EIN 04-2311639

IRC code section 501c3 Method of valuation cash

Description of non-

cash assistance

Purpose of grant Religious Church

Name and address First Church of Christ in Long

763 Longmeadow St

Longmeadow, MA 01106

FIN 04-2104075

IRC code section 501c3

Method of valuation cash Description of non**COMMUNITY FOUNDATION OF WESTERN MASSACHUSETTS**

22,300

7.500

5,650

10,500

10,596

5,438

Schedule I, Part IV, Scash assistance		
Purpose of grant	Religious Church	
Name and address	First Church of Monson	20,000
	5 High St	
EIN	Monson, MA 01057 04-6054104	
EIN IRC code section	501c3	
Method of valuation		
Description of non-	casii	
cash assistance		
Purpose of grant	Human Services	
Name and address	First Cong Church of Brimfield	20,000
Name and address	20 Main St	20,000
	Brimfield, MA 01010	
EIN	13-1957221	
IRC code section	501c3	
Method of valuation	cash	
Description of non-		
cash assistance		
Purpose of grant	Human Services	
Name and address	First Cong Church of S Hadley	10,700
	One Church St	
	S Hadley, MA 01075	
EIN	04-2115501	
RC code section	501c3	
Method of valuation	cash	
Description of non-		
cash assistance		
Purpose of grant	Religious Church	
Name and address	Fitchburg State College	11,600
	160 Pearl St	
	Fitchburg, MA 01420	
EIN	04-6002284	
IRC code section	501c3	
Method of valuation	cash	
Description of non-		
cash assistance		
Purpose of grant	Scholarships	
Name and address	FOCUS Alt Learning Ctr Inc	10,000
	126 Dowd Ave	
	Canton, CT 06019	
EIN	31-1725008	
IRC code section	501c3	
Method of valuation	cash	
Description of non-		
cash assistance	Education	
Purpose of grant	Education	
Name and address	Fourth Presbyterian Church	8,500
	5500 River Rd Rethesda, MD 20816	
EIN	Bethesda, MD 20816 53-0197008	
EIN IRC code section	501c3	
Method of valuation		
Description of non-		
cash assistance		
Purpose of grant	Religious Church	
Name and address	Fractured Atlas Productions Inc	7,000
	248 West 35th St 10th FI	7,000
	New York, NY 10001	
EIN	11-3/52008	

EIN

11-3452008

Schedule I, Part IV, S IRC code section Method of valuation Description of non- cash assistance Purpose of grant	501c3	COMMUNITY FOUNDATION OF WESTERN MASSACHUSETTS
Name and address EIN IRC code section Method of valuation Description of non- cash assistance	Framingham State College 100 State St Framingham, MA 01701 04-6002284 501c3 cash	5,100
Purpose of grant Name and address EIN IRC code section	Scholarships Franciscan Mountain Retreat Inc PO Box 100 W Clarksville, NY 14806 22-2439008 501c3	5,200
Method of valuation Description of non- cash assistance Purpose of grant Name and address	Religious Church Franklin Area Survival Ctr Inc	8,000
EIN IRC code section Method of valuation Description of non- cash assistance		
Purpose of grant Name and address EIN IRC code section Method of valuation Description of non- cash assistance Purpose of grant	Human Services Franklin County Com Dev 324 Wells St Greenfield, MA 01301 04-2678309 501c3 cash Human Services	7,000
Name and address EIN IRC code section Method of valuation Description of non- cash assistance Purpose of grant	Franklin CountyMeals Prog PO Box 172 Greenfield, MA 01301 22-3027098 501c3 cash Human Services	5,500
Name and address EIN IRC code section Method of valuation Description of non- cash assistance Purpose of grant	Franklin County DIAL SELF Inc 21 Abbott St Greenfield, MA 01302 04-2619617 501c3 cash Human Services	11,000

22,500

Name and address Franklin Cty Home Care Corp

Schedule I, Part IV, Statement 1

330 Montague City Rd

Turners Falls, MA 01376

EIN 04-2542539 IRC code section 501c3

Method of valuation cash Description of noncash assistance

Purpose of grant **Human Services**

Name and address Franklin Land Trust Inc

679A Mohawk Trail

Shelburne Falls, MA 01370

EIN 22-2744008 IRC code section 501c3 Method of valuation cash

Description of noncash assistance

Environmental Purpose of grant

Name and address Franklin Pierce University 20.000

COMMUNITY FOUNDATION OF WESTERN MASSACHUSETTS

11,500

40 University Dr Rindge, NH 03461 **EIN** 02-0263136 IRC code section 501c3

Method of valuation cash Description of noncash assistance

cash assistance

cash assistance

cash assistance

Purpose of grant College Univ

Name and address Frds of Grandmothers Garden Inc 39,809

> PO Box 1432 Westfield, MA 01086

EIN 04-3267287 IRC code section 501c3 Method of valuation cash Description of non-

Environmental Purpose of grant

Name and address Frds of the Holyoke Coun on Aging 10,800

> 310 Appleton St Holyoke, MA 01040 01-0910861

EIN IRC code section 501c3 Method of valuation cash Description of non-

Purpose of grant **Building Fund**

Name and address Friends of the Homeless Inc 100,700

> 755 Worthington St Springfield, MA 01105

EIN 22-2787008 IRC code section 501c3 Method of valuation cash Description of non-

Purpose of grant Housing

Name and address George Washington Univ 5,500

> 2121 Eye St NW Washington, DC 20052

FIN 53-0197008 IRC code section 501c3 Method of valuation cash Description of non-

Schedule I, Part IV, S cash assistance		COMMUNITY FOUNDATION OF WESTERN MASSACHUSETT
Purpose of grant	Scholarships	
Name and address	Girls Incorporated of Holyoke 6 Open Square Way Holyoke, MA 01041	19,450
EIN	04-2748244	
RC code section	501c3	
Method of valuation	cash	
Description of non-		
cash assistance		
Purpose of grant	Youth Developmnt	
Name and address	Grace Episcopal Church 14 Boltwood Ave Amherst, MA 01002	6,050
EIN	04-2104256	
IRC code section	501c3	
Method of valuation	cash	
Description of non-		
cash assistance		
Purpose of grant	Religious Church	
Name and address	Greater Spfld Senior Services 66 Industry Ave Springfield, MA 01104	11,889
EIN	04-2510895	
IRC code section	501c3	
Method of valuation	cash	
Description of non-		
cash assistance		
Purpose of grant	Human Services	
Name and address	Greenfield Community College One College Dr Greenfield, MA 01301	9,700
EIN	23-7090085	
IRC code section	501c3	
Method of valuation	cash	
Description of non-		
cash assistance		
Purpose of grant	Scholarships	
Name and address	Greenfield Com College Found 270 Main St Greenfield, MA 01302	94,900
EIN	04-2449856	
IRC code section	501c3	
Method of valuation	cash	
Description of non-		
cash assistance		
Purpose of grant	Education	
Name and address	Hampshire Com United Way 71 King St Northampton, MA 01061	12,649
EIN	Northampton, MA 01061 04-2104792	
IRC code section	501c3	
Method of valuation		
Description of non- cash assistance	Cadi	
Purpose of grant	Human Services	
Name and address	Hampshire Edl Collaborative 97 Hawley St	6,600
EIN	Northampton, MA 01061	

EIN

04-2562893

Schedule I, Part IV, S	Statement 1 501c3	COMMUNITY FOUNDATION OF WESTERN MASSACHUSETTS
Method of valuation		
Description of non-	Casii	
cash assistance		
Purpose of grant	Education	
Name and address	HAP Inc	20,000
	322 Main St	
	Springfield, MA 01105	
EIN	04-2518368	
IRC code section	501c3	
Method of valuation	cash	
Description of non-		
cash assistance Purpose of grant	Housing	
-		
Name and address	Heath Agricultural Society Inc	11,375
	21 Number9 Rd	
EIN	Heath, MA 01346 04-2607187	
IRC code section	501c3	
Method of valuation		
Description of non-		
cash assistance		
Purpose of grant	Environment	
Name and address	Hitchcock Free Academy	14,900
	2 Brookfield Rd	. ,,
	Brimfield, MA 01010	
EIN	04-2277210	
IRC code section	501c3	
Method of valuation	cash	
Description of non-		
cash assistance		
Purpose of grant	Education	
Name and address	Holy Name Church	6,134
	323 Dickinson St	
=	Springfield, MA 01108	
EIN IRC code section	04-2121346	
Method of valuation	501c3	
Description of non-	Casii	
cash assistance		
Purpose of grant	Education	
Name and address	Holyoke Catholic High School	30,846
unu addicəs	134 Springfield St	50,040
	Chicopee, MA 01013	
EIN	04-2315532	
IRC code section	501c3	
Method of valuation	cash	
Description of non-		
cash assistance		
Purpose of grant	Education	
Name and address	Holyoke Com College	73,050
	303 Homestead Ave	
	Holyoke, MA 01040	
EIN	04-2719849	
IRC code section	501c3	
Method of valuation	casn	
Description of non- cash assistance		
Purpose of grant	Scholarships	
- urpose or grant	Controllarings	

18,250

Name and address Holyoke Com College Found

Schedule I, Part IV,		COMMUNITY FOUNDATION OF WESTERN MASSACHUSETTS
	303 Homestead Ave	
	Holyoke, MA 01040	
EIN	23-7182008	
IRC code section	501c3	
Method of valuation	casn	
Description of non- cash assistance		
Purpose of grant	College Univ	
Name and address	Holyoke Public Library Corp	11,500
	335 Maple St	
	Holyoke, MA 01040	
EIN	04-6002895	
IRC code section	501c3	
Method of valuation	casn	
Description of non- cash assistance		
Purpose of grant	Arts and Culture	
Name and address	Homework House Inc	8,250
	54 N Summer St Holyoke, MA 01041	
EIN	56-2667008	
IRC code section	501c3	
Method of valuation		
Description of non-	Casii	
cash assistance		
Purpose of grant	Education	
Name and address		10,000
Name and address	Hospice of Franklin County Inc 329 Conway St Ste 2	10,000
	Greenfield, MA 01301	
EIN	20-1612008	
IRC code section	501c3	
Method of valuation		
Description of non-		
cash assistance		
Purpose of grant	General Health	
Name and address	Human Rights Defense Center	10,000
	PO Box 2420	.,
	W Brattleboro, VT 05303	
EIN	94-3143008	
IRC code section	501c3	
Method of valuation	cash	
Description of non-		
cash assistance		
Purpose of grant	Human Services	
Name and address	Intl Center for Journalists	10,000
	1616 H St NW Third FI	
	Washington, DC 20006	
EIN	11-2725008	
IRC code section	501c3	
Method of valuation	cash	
Description of non-		
cash assistance	Human Candasa	
Purpose of grant	Human Services	
Name and address	Intl Rescue Committee Inc	10,700
	122 East 42nd St	
	Washington, DC 20009	
EIN	13-5661008	
IRC code section	501c3	
Method of valuation	ooch	

Method of valuation cash **Description of non-**

Schedule I, Part IV, Scash assistance		COMMUNITY FOUNDATION OF WESTERN MASSACHUSETT
Purpose of grant	Human Services	
Name and address	Jewish Federation of Wmass	16,918
	1160 Dickinson St	
	Springfield, MA 01108	
EIN	04-2127023	
IRC code section	501c3	
Method of valuation	cash	
Description of non-		
cash assistance		
Purpose of grant	Human Services	
Name and address	Jewish Guild for the Blind	150,000
	15 West 65th St	
	New York, NY 10023	
EIN	13-1624008	
IRC code section	501c3	
Method of valuation	cash	
Description of non-		
cash assistance		
Purpose of grant	General Health	
Name and address	Johnson Memorial Hospital	160,000
	201 Chestnut Hill Rd	,
	Stafford Springs, CT 06076	
EIN	06-0646696	
IRC code section	501c3	
Method of valuation	cash	
Description of non-		
cash assistance		
Purpose of grant	General Health	
Name and address	Karuna Ctrr for Peacebuilding Inc	20,104
	447 West St	
	Amherst, MA 01002	
EIN	04-3437359	
IRC code section	501c3	
Method of valuation	cash	
Description of non-		
cash assistance		
Purpose of grant	Community Imprv	
Name and address	Kestrel Land Trust	29,250
und uddi 603	PO Box 1016	20,200
	Amherst, MA 01004	
EIN	04-6243236	
IRC code section	501c3	
Method of valuation		
Description of non-		
cash assistance		
Purpose of grant	Environmental	
Name and address	L John Schinelli Renal Assist Fund	10.000
ivanie anu audress	999 River Rd	10,000
	Agawam, MA 01001	
EIN	20-0995008	
IRC code section	501c3	
Method of valuation		
Description of non-	Casii	
cash assistance		
Purpose of grant	General Health	
-		
Name and address	Le Moyne College	6,000
	1419 Salt Springs Rd	
	Syracuse NY 13214	

Syracuse, NY 13214

15-0546008

EIN

Schedule I, Part IV, Statement 1 **COMMUNITY FOUNDATION OF WESTERN MASSACHUSETTS** IRC code section 501c3 Method of valuation cash Description of noncash assistance Purpose of grant Scholarships Name and address Lorraines Soup Kitchen and Pantry Inc 13,000 170 Pendexter Ave Chicopee, MA 01013 **EIN** 04-2616751 501c3 IRC code section Method of valuation cash Description of noncash assistance Purpose of grant **Human Services** 6,000 Name and address Lutheran Social Ser of N England 1214 East Worcester St Worcester, MA 01604 EIN 04-2496563 IRC code section 501c3 Method of valuation cash Description of noncash assistance **Human Services** Purpose of grant Name and address Maine Maritime Museum 10,000 243 Washington St Bath, ME 04530 EIN 01-0271477 IRC code section 501c3 Method of valuation cash Description of noncash assistance Purpose of grant Education Name and address Maine Public Broadcasting Corp 10,035 1450 Lisbon St Lewiston, ME 04240 EIN 22-3172008 IRC code section 501c3 Method of valuation cash Description of noncash assistance Purpose of grant Education 7,500 Name and address Mass Mentoring Partnership Inc 105 Chauncy St Boston, MA 02111 EIN 22-3208008 IRC code section 501c3 Method of valuation cash Description of noncash assistance Purpose of grant Education Name and address MasssAdoption Resource Exchange 8,000 45 Franklin St Boston, MA 02110 **EIN** 04-2227431 IRC code section Method of valuation cash Description of noncash assistance Purpose of grant **Human Services**

26,046

Name and address Mass Audubon Society Inc

Schedule I, Part IV, Statement 1 **COMMUNITY FOUNDATION OF WESTERN MASSACHUSETTS** 208 South Great Rd Lincoln, MA 01773 **EIN** 04-2104702 IRC code section 501c3 Method of valuation cash Description of noncash assistance Purpose of grant Environmental Name and address Mass College of Liberal Arts 13,000 357 Church St N Adams, MA 02147 **EIN** 04-2660810 IRC code section 501c3 Method of valuation cash Description of noncash assistance Purpose of grant Scholarships Name and address Masss College of Pharmacy 8.000 179 Longwood Ave Boston, MA 02115 **EIN** 04-2104700 IRC code section 501c3 Method of valuation cash Description of noncash assistance Purpose of grant Scholarships Name and address Mass Institute of Technology 6,000 77 Massachusetts Ave Cambridge, MA 02139 **EIN** 04-2103594 IRC code section 501c3 Method of valuation cash Description of noncash assistance Purpose of grant Scholarships Name and address Mass Workforce Alliance Inc 7,500 14 Beacon St Boston, MA 02108 EIN 04-0089926 IRC code section 501c3 Method of valuation cash Description of noncash assistance **Human Services** Purpose of grant Name and address M Smith End for Excellence in Ed 15,200 1 Silverwood Terrace S Hadley, MA 01075 04-3558819 EIN IRC code section 501c3 Method of valuation cash Description of noncash assistance Purpose of grant Education Name and address Monson Home for Aged People Inc 20,000 106 Main St

Monson, MA 01057

04-2127024

501c3

FIN

IRC code section

Method of valuation cash Description of non-

Schedule I, Part IV, Scash assistance		COMMUNITY FOUNDATION OF WESTERN MASSACHUSE
Purpose of grant	Human Services	
Name and address	Montague Catholic Soc Ministries	9,000
	4143 Third St	
	Turners Falls, MA 01376	
EIN	04-3274078	
IRC code section	501c3	
Method of valuation Description of non-	casn	
cash assistance		
Purpose of grant	Human Services	
Name and address	MotherWoman Inc	8,000
Name and address	96 N Pleasant St	8,000
	Amherst, MA 01004	
EIN	14-1867008	
IRC code section	501c3	
Method of valuation		
Description of non-		
cash assistance		
Purpose of grant	Human Services	
Name and address	Mt Grace Land Conservation Tr	8,600
	1461 Old Keene Rd	
	Athol, MA 01331	
EIN	04-2938967	
IRC code section	501c3	
Method of valuation	cash	
Description of non-		
cash assistance		
Purpose of grant	Environmental	
Name and address	Mount Holyoke College	10,500
	50 College St	
	S Hadley, MA 01075	
EIN	04-2103578	
IRC code section	501c3	
Method of valuation Description of non-	casn	
cash assistance		
Purpose of grant	Scholarships	
	·	7,000
Name and address	Mt Toby Monthly Mtg of Friends 475 New Salem Rd	7,000
	Wendell, MA 01379	
EIN	51-0193008	
IRC code section	501c3	
Method of valuation		
Description of non-		
cash assistance		
Purpose of grant	Religious Church	
Name and address	MultiService Eating Disorders Assoc	11,000
	92 Pearl St	
	Newton, MA 02458	
EIN	04-3224394	
IRC code section	501c3	
Method of valuation	cash	
Description of non-		
cash assistance		
Purpose of grant	MEDA Workshops in western	
Name and address	Natl Conf for Com and Justice CT WMA	31,000
	820A Prospect Hill Rd	

Windsor, CT 06095

14-1938008

EIN

Schedule I, Part IV, S		COMMUNITY FOUNDATION OF WESTERN MASSACHUSETTS
IRC code section Method of valuation	501c3	
Description of non-	Casii	
cash assistance		
Purpose of grant	Community Imprv	
Name and address	National Guild for Com Arts Ed	29,500
	520 8th Ave Ste 302	
	New York, NY 10018	
EIN	13-6161008	
IRC code section Method of valuation	501c3	
Description of non-	Casii	
cash assistance		
Purpose of grant	Arts and Culture	
Name and address	National Priorities Project	10,150
	243 King St Ste 109	
	Northampton, MA 01060	
EIN	04-3070112	
IRC code section	501c3	
Method of valuation Description of non-	casn	
cash assistance		
Purpose of grant	Community Imprv	
Name and address	Natl Soc for the Gifted Talented	5,128
ramo ana adaroco	9 West Broad St	0,120
	Stamford, CT 06902	
EIN	16-1689008	
IRC code section	501c3	
Method of valuation	cash	
Description of non- cash assistance		
Purpose of grant	Education	
Name and address	N England Public Radio Found	51,139
	131 County Circle	
	Amherst, MA 01003	
EIN	04-6130523	
IRC code section	501c3	
Method of valuation Description of non-	cash	
cash assistance		
Purpose of grant	Arts and Culture	
Name and address	New England School of Law	8,000
	154 Stuart St	0,000
	Boston, MA 02116	
EIN	04-2152671	
IRC code section	501c3	
Method of valuation	cash	
Description of non-		
cash assistance Purpose of grant	Scholarships	
	·	0.000
Name and address	New Hope Com Health Clinic Inc 915 Plumtree Rd	9,000
	Springfield, MA 01119	
EIN	20-2865008	
IRC code section	501c3	
Method of valuation	cash	
Description of non-		
cash assistance Purpose of grant	General Health	
. arposs or grain	Ostrorai Flouiti	

10,000

Name and address New Pond Farm Ed Ctr Inc

Schedule I, Part IV, Statement 1 **COMMUNITY FOUNDATION OF WESTERN MASSACHUSETTS** 101 Marchant Rd W Redding, CT 06896 **EIN** 61-1108007 IRC code section 501c3 Method of valuation cash Description of noncash assistance Purpose of grant Education Name and address New York University 7,500 25 West 4th St New York, NY 10012 **EIN** 13-5562008 IRC code section 501c3 Method of valuation cash Description of noncash assistance Purpose of grant Scholarships Name and address Nichols College of Business 53.000 Center Rd P O Box 5000 Dudley, MA 01571 **EIN** 04-2104778 IRC code section 501c3 Method of valuation cash Description of noncash assistance Purpose of grant College Univ 25,437 Name and address Noble Health Systems Inc 115 West Silver St Westfield, MA 01086 **EIN** 04-2131755 IRC code section 501c3 Method of valuation cash Description of noncash assistance General Health Purpose of grant Name and address Northampton Arts Council Inc 6,400 240 Main St Northampton, MA 01060 EIN 05-0523540 IRC code section 501c3 Method of valuation cash Description of noncash assistance Purpose of grant Arts and Culture Name and address Northampton Com Music Ctr Inc 17,150 139 South St Northampton, MA 01060 EIN 04-3428393 IRC code section 501c3 Method of valuation cash Description of noncash assistance Purpose of grant Arts and Culture Name and address Northampton Ed Found Inc 16,354 PO Box 44

Northampton, MA 01061

04-3157289

501c3

FIN

IRC code section

Method of valuation cash Description of non-

Schedule I, Part IV, Scash assistance	Statement 1	COMMUNITY FOUNDATION OF WESTERN MASSACHUSETTS
Purpose of grant	Education	
Name and address	Northampton Survival Ctr Inc 265 Prospect St Northampton, MA 01060	23,300
EIN	04-2774166	
IRC code section	501c3	
Method of valuation Description of non-	cash	
cash assistance	Food and North of	
Purpose of grant	Food and Nutrition	
Name and address	Northeastern University 360 Huntington Ave Boston, MA 02115	27,500
EIN	04-1679980	
IRC code section	501c3	
Method of valuation	cash	
Description of non-		
cash assistance	Cahalarahina	
Purpose of grant	Scholarships	
Name and address	Northfield Mt Hermon School One Lamplighter Way MT Hermon, MA 01354	7,500
EIN	04-2109865	
IRC code section	501c3	
Method of valuation	cash	
Description of non-		
cash assistance		
Purpose of grant	Education	
Name and address	Nueva Esperanza Inc 401 Main St Holyoke, MA 01040	8,000
EIN	04-2774010	
IRC code section	501c3	
Method of valuation		
Description of non-		
cash assistance		
Purpose of grant	Education	
Name and address	Old Deerfield Prod Inc	5,100
	7 Memorial St	
	Deerfield, MA 01342	
EIN	26-1773008	
IRC code section	501c3	
Method of valuation	cash	
Description of non-		
cash assistance	Arts and Culture	
Purpose of grant		
Name and address	Open Fld Found Bramble Hill Farm 593 South Pleasant St Amherst, MA 01002	13,000
EIN	04-3313646	
IRC code section	501c3	
Method of valuation		
Description of non-		
cash assistance		
Purpose of grant	Fertile Ground School Food	
Name and address	OxfamAmerica Inc	24,100
	226 Causeway St	- 9
	Boston, MA 02114	
EIN	23-7069008	

Schedule I, Part IV, S		COMMUNITY FOUNDATION OF WESTERN MASSACHUSETTS
IRC code section	501c3	
Method of valuation	cash	
Description of non-		
cash assistance		
Purpose of grant	Human Services	
Name and address	Paris Press Inc	34,000
	PO Box 487	
	Ashfield, MA 01330	
EIN	04-3302441	
IRC code section	501c3	
Method of valuation	cash	
Description of non-		
cash assistance	Arts and Culture	
Purpose of grant		
Name and address	Pathfinder International	25,000
	9 Galen St Ste 217	
	Watertown, MA 02472	
EIN	53-0235008	
IRC code section Method of valuation	501c3	
	casn	
Description of non- cash assistance		
Purpose of grant	General Health	
Name and address	Peace Development Fund Inc	15,100
	44 N Prospect St	
EIN	Amherst, MA 01004 04-2738794	
IRC code section	501c3	
Method of valuation		
Description of non-	Casii	
cash assistance		
Purpose of grant	Community Imprv	
Name and address	Pioneer Valley Assembly of God	10,000
	63 Old Chester Rd	
	Huntington, MA 01050	
EIN	44-0577787	
IRC code section	501c3	
Method of valuation	cash	
Description of non-		
cash assistance		
Purpose of grant	Human Services	
Name and address	Pioneer Valley Reg Ventures Ctr	6,000
	60 Congress St	
	Springfield, MA 01104	
EIN	04-3560951	
IRC code section	501c3	
Method of valuation	cash	
Description of non-		
cash assistance	Homes Ornices	
Purpose of grant	Human Services	
Name and address	Planned Parenthood Fed of Amer	9,800
	434 West 33rd St	
	New York, NY 10001	
EIN	13-1644008	
IRC code section	501c3	
Method of valuation	casn	
Description of non-		
cash assistance	Education	
Purpose of grant		

11,500

Name and address Planned Parenthood League of MA

Schedule I, Part IV, Statement 1 **COMMUNITY FOUNDATION OF WESTERN MASSACHUSETTS** 1055 Commonwealth Ave Boston, MA 02115 **EIN** 04-2698497 IRC code section 501c3 Method of valuation cash Description of noncash assistance Purpose of grant General Health Name and address Quabbin Mediation Inc 8,000 13 South Main St Orange, MA 01364 **EIN** 04-3429086 IRC code section 501c3 Method of valuation cash Description of noncash assistance **Human Services** Purpose of grant Name and address Reader to Reader Inc 42.100 38 Woodside Ave Amherst, MA 01002 **EIN** 03-0496901 IRC code section 501c3 Method of valuation cash Description of noncash assistance Purpose of grant Education Name and address Rebuilding Together Spfld Inc 10,000 1145 Main St Ste 111 Springfield, MA 01103 **EIN** 04-3172737 IRC code section 501c3 Method of valuation cash Description of non-

Description of noncash assistance
Purpose of grant

Name and address
Reg Employ Bd of Hampden Cty
1441 Main St
Springfield, MA 01103

EIN 22-2489896
IRC code section 501c3
Method of valuation cash

Description of noncash assistance

Purpose of grant

cash assistance

Managara di addina a a Danagala a Babda da da da 1866

Community Imprv

Name and address Rensselaer Polytechnic Institute 14,000

In Eight St Troy, NY 12180

EIN 14-1340095

IRC code section 501c3

Method of valuation cash

Description of non-

Purpose of grant Scholarships

Name and address River Valley Counseling Ctr Inc 20,000

319 Beech St Holyoke, MA 01040 04-2174657

EIN 04-217469
IRC code section 501c3
Method of valuation cash
Description of non-

Schedule I, Part IV, S cash assistance		
Purpose of grant	General Health	
Name and address	Roman Catholic Diocese of Spfld	63,900
	65 Elliot St	
	Springfield, MA 01101	
EIN	04-3437398	
IRC code section	501c3	
Method of valuation	cash	
Description of non-		
cash assistance		
Purpose of grant	Human Services	
Name and address	Russian Com Assoc of MA	27,500
	1845 Commonwealth Ave	
	Boston, MA 02135	
EIN	04-3102943	
RC code section	501c3	
Method of valuation	cash	
Description of non-		
cash assistance		
Purpose of grant	Human Services	
Name and address	Safe Passage Inc	12,100
	43 Center St	
	Northampton, MA 01060	
EIN	04-2690131	
IRC code section	501c3	
Method of valuation	cash	
Description of non-		
cash assistance		
Purpose of grant	Human Services	
Name and address	Saint Joseph College	6,000
	1678 Asylum Ave	7
	W Hartford, CT 06117	
EIN	06-0646829	
IRC code section	501c3	
Method of valuation		
Description of non-		
cash assistance		
Purpose of grant	Scholarships	
Name and address	Saint Joseph College Corp	7,500
itume una adaress	1678 Asylum Ave	7,000
	W Hartford, CT 06118	
EIN	06-0646829	
IRC code section	501c3	
Method of valuation		
Description of non-	Saori	
cash assistance		
Purpose of grant	College Univ	
	-	7.500
Name and address	Salem State College 352 Lafayette St	7,500
=IN	Salem, MA 01970 04-2325342	
EIN IRC code section	04-2325342 501c3	
Method of valuation		
	Caon	
Description of non- cash assistance		
casn assistance Purpose of grant	Scholarships	
	·	
Name and address	Shea Com Theater Inc	5,700
	71 Ave A	
	Turners Falls, MA 01376	

EIN

04-2998644

Schedule I, Part IV, Statement 1 **COMMUNITY FOUNDATION OF WESTERN MASSACHUSETTS** IRC code section 501c3 Method of valuation cash Description of noncash assistance Purpose of grant Arts and Culture Name and address Shriners Hosp for Children 10,596 PO Box 31356 Tampa, FL 33631 **EIN** 36-2194008 IRC code section 501c3 Method of valuation cash Description of noncash assistance Purpose of grant General Health 7,000 Name and address Simmons College 300 The Fenway Boston, MA 02115 EIN 04-2103629 IRC code section 501c3 Method of valuation cash Description of noncash assistance Purpose of grant Scholarships 9,700 Name and address Srs of Providence Health Sys 271 Carew St Springfield, MA 01102 EIN 04-3398374 IRC code section 501c3 Method of valuation cash Description of noncash assistance Purpose of grant **Human Services** Name and address Smith Voc and Ag High School 8,000 80 Locust St Northampton, MA 01060 EIN 04-6001406 IRC code section 501c3 Method of valuation cash Description of noncash assistance Purpose of grant Scholarshipss Name and address Sons and Daughters of Hawley 6,000 PO Box 206 Hawley, MA 01339 EIN 04-2738928 IRC code section 501c3 Method of valuation cash Description of noncash assistance Purpose of grant Community Imprv Name and address South End Com Center Inc 8,000 PO Box 30192 Springfield, MA 01103 **EIN** 04-2103854 IRC code section Method of valuation cash Description of noncash assistance Purpose of grant **Human Services**

5,453

Name and address S Hadley Historical Society Inc

Schedule I, Part IV, Statement 1 **COMMUNITY FOUNDATION OF WESTERN MASSACHUSETTS** PO Box 387 S Hadley, MA 01075 **EIN** 52-2084008 IRC code section 501c3 Method of valuation cash Description of noncash assistance Purpose of grant **Human Services** Name and address S Middlesex Opportunity Council 10,000 300 Howard St Framingham, MA 01702 **EIN** 04-2389659 IRC code section 501c3 Method of valuation cash Description of noncash assistance Purpose of grant **Human Services** Name and address Southeast Asia Devt Prog Inc 6.100 36 Pondview Dr Amherst, MA 01002 **EIN** 04-3237647 IRC code section 501c3 Method of valuation cash Description of noncash assistance **Human Services** Purpose of grant Name and address Springfield College 21,000 263 Alden St Springfield, MA 01109 **EIN** 04-2104329 IRC code section 501c3 Method of valuation cash Description of noncash assistance Purpose of grant Scholarships Name and address Spfld Day Nursery Corp 56,625 1 Federal St Bldg 101 Springfield, MA 01105 EIN 04-2103855 IRC code section 501c3 Method of valuation cash Description of noncash assistance Purpose of grant March 2011 Distribution Name and address Spfld Lib and Museums Assoc 34,413 21 Edwards St Springfield, MA 01103 EIN 04-6002239 IRC code section 501c3 Method of valuation cash Description of noncash assistance Purpose of grant Arts and Culture Name and address Spfld Rescue Mission Inc 41,096 PO Box 9045 Springfield, MA 01102 FIN 52-1048008

IRC code section

Method of valuation cash Description of non-

501c3

Schedule I, Part IV, Scash assistance	Julieniene i	COMMUNITY FOUNDATION OF WESTERN MASSACHUSETTS
Purpose of grant	Human Services	
Name and address	Spfld School Volunteers Inc	7,200
Name and address	1550 Main St Third Fl	1,200
	Springfield, MA 01103	
EIN	04-2643527	
IRC code section	501c3	
Method of valuation	cash	
Description of non-		
cash assistance		
Purpose of grant	Human Services	
Name and address	Spfld Symphony Orchestra	61,412
	1350 Main St	
	Springfield, MA 01103	
EIN	04-2210746	
IRC code section	501c3	
Method of valuation	cash	
Description of non-		
cash assistance		
Purpose of grant	Arts and Culture	
Name and address	Spfld Technical Com College	74,320
	One Armory Square	
	Springfield, MA 01101	
EIN	04-2444774	
IRC code section	501c3	
Method of valuation	cash	
Description of non-		
cash assistance		
Purpose of grant	Scholarships	
Name and address	Springfield VACA Inc	10,000
	433 Belmont Ave	
	Springfield, MA 01108	
EIN	04-3239763	
IRC code section	501c3	
Method of valuation	casn	
Description of non- cash assistance		
Purpose of grant	Human Services	
		40.000
Name and address	St Andrews Hospital 6 St Andrews Lane	10,000
	Boothbay Har, ME 04538	
EIN	01-0153960	
IRC code section	501c3	
Method of valuation		
Description of non-		
cash assistance		
Purpose of grant	General Health	
Name and address	St Johns Lutheran Church	15,183
	60 Broad St	10,100
	Westfield, MA 01085	
EIN	04-2381428	
IRC code section	501c3	
Method of valuation	cash	
Description of non-		
cash assistance		
Purpose of grant	Religious Church	
Name and address	St Patrick Parish	7,000
	30 Main St	·
	S Hadley, MA 01075	
EIN	04-2106777	

Schedule I, Part IV,		COMMUNITY FOUNDATION OF WESTERN MASSACHUSETTS
IRC code section Method of valuation	501c3	
Description of non-	Casii	
cash assistance		
Purpose of grant	Religious Church	
Name and address	St Pauls Episcopal Church	21,906
	485 Appleton St	
	Holyoke, MA 01040	
EIN	04-2104902	
IRC code section	501c3	
Method of valuation	cash	
Description of non-		
cash assistance	Policious Church	
Purpose of grant	Religious Church	
Name and address	St Peter and St Paul Orth Ch	7,500
	118 Carew St	
FINI	Springfield, MA 01101	
EIN	04-6000817 501c3	
IRC code section Method of valuation		
Description of non-	casii	
cash assistance		
Purpose of grant	Religious Church	
Name and address	Stanley Park of Westfield Inc	11,596
Name and address	PO Box 1191	11,550
	Westfield, MA 01085	
EIN	04-2131404	
IRC code section	501c3	
Method of valuation	cash	
Description of non-		
cash assistance		
Purpose of grant	Recreation	
Name and address	Suffolk Univ School of Law	9,000
	120 Tremont St	
	Boston, MA 02108	
EIN	04-2133255	
IRC code section	501c3	
Method of valuation	cash	
Description of non-		
cash assistance	Sahalarahina	
Purpose of grant	Scholarships	
Name and address	Survival Centers Inc	24,900
	1200 N Pleasant St	
EIN	Amherst, MA 01059 04-2698462	
IRC code section	501c3	
Method of valuation		
Description of non-		
cash assistance		
Purpose of grant	Human Services	
Name and address	Tapestry Health Systems Inc	10,000
raine and address	296 Nonotuck St	10,000
	Florence, MA 01062	
EIN	23-7303008	
IRC code section	501c3	
Method of valuation	cash	
Description of non-		
cash assistance		
Purpose of grant	Human Services	

19,050

Schedule I, Part IV, Statement 1 **COMMUNITY FOUNDATION OF WESTERN MASSACHUSETTS** 220 Brookdale Dr

Springfield, MA 01104

EIN 04-2210685 IRC code section 501c3 Method of valuation cash

Description of noncash assistance

Purpose of grant **Human Services**

16,471

> 44 Sherman St Springfield, MA 01109

EIN 04-2105939 IRC code section 501c3 Method of valuation cash

Description of noncash assistance

Human Services Purpose of grant

Name and address The Food Bank of Wmass 60.600

97 N Hatfield Rd Hatfield, MA 01038 04-2751023 IRC code section 501c3

Method of valuation cash Description of noncash assistance

EIN

Purpose of grant Food and Nutrition

Name and address The Nolumbeka Project 5,900

> 88 Columbus Ave Greenfield, MA 01301

EIN 26-4509867 IRC code section 501c3 Method of valuation cash Description of noncash assistance

Education Purpose of grant

9,000

170 Pearl St

Springfield, MA 01101

EIN 22-2406008 IRC code section 501c3 Method of valuation cash

Description of noncash assistance

Human Services Purpose of grant

Name and address The Yellow House Inc 100,000

> 1479 N Main St Palmer, MA 01069 45-3998008

EIN IRC code section 501c3 Method of valuation cash Description of non-

Purpose of grant **Human Services**

Name and address Tilton Fund Inc 10,000

75 N Main St

S Deerfield, MA 01373

FIN 04-6075146 IRC code section 501c3

Method of valuation cash Description of non-

cash assistance

Schedule I, Part IV,	Statement 1	COMMUNITY FOUNDATION OF WESTERN MASSACHUSETTS
cash assistance Purpose of grant	Human Services	
		40.000
Name and address	Tolland Vol Fire Dept Inc 162A Colebrook River Rd	10,000
	Tolland, MA 01034	
EIN	26-3373008	
IRC code section	501c3	
Method of valuation	cash	
Description of non-		
cash assistance	Community Impa	
Purpose of grant	Community Imprv	
Name and address	Top FI Learning Inc	6,000
	1455 N Main St	
	Palmer, MA 01069	
EIN	20-0525008	
IRC code section	501c3	
Method of valuation	casn	
Description of non- cash assistance		
Purpose of grant	Education	
Name and address	Town of Agawam	10,596
	36 Main St	
FIN	Agawam, MA 01001	
EIN IRC code section	04-6001065 501c3	
Method of valuation	casn	
Description of non- cash assistance		
Purpose of grant	Education	
Name and address	Trickle Up Program Inc	10,000
	104 West 27th St 12th FI	
EIN	New York, NY 10001 06-1043042	
IRC code section	501c3	
Method of valuation		
Description of non-	Casii	
cash assistance		
Purpose of grant	Human Services	
Name and address	Trustees of Forbes Library	5,200
Name and address	20 West St	3,200
	Northampton, MA 01060	
EIN	04-6004208	
IRC code section	501c3	
Method of valuation		
Description of non-		
cash assistance		
Purpose of grant	Education	
Name and address	Trustees of Mt Holyaka Cal	16,064
ivanie anu audress	Trustees of Mt Holyoke Col 50 College St	10,004
	S Hadley, MA 01075	
EIN	04-2103578	
IRC code section	501c3	
Method of valuation		
Description of non-		
cash assistance		
Purpose of grant	College Univ	
<u>-</u>	-	12,000
Name and address	Trustees of the Smith Col	13,000
	College Hall Northampton, MA 01060	
	Normanipion, MA 01000	

EIN

04-1843040

Schedule I, Part IV,	Statement 1	COMMUNITY FOUNDATION OF WESTERN MASSACHUSETTS
IRC code section	501c3	
Method of valuation	cash	
Description of non-		
cash assistance		
Purpose of grant	Scholarships	
Name and address	Tufts University	9,000
	106 Packard Hall	
	Medford, MA 02155	
EIN	04-2103634	
IRC code section	501c3	
Method of valuation	cash	
Description of non-		
cash assistance		
Purpose of grant	Scholarships	
Name and address	Two State YMCA	8,000
	748 Hamilton Rd	
	Becket, MA 01223	
EIN	04-2105946	
IRC code section	501c3	
Method of valuation	cash	
Description of non-		
cash assistance		
Purpose of grant	Human Services	
Name and address	Union of Concerned Scientists Inc	15,250
	Two Brattle Square	
	Cambridge, MA 02138	
EIN	04-2535767	
IRC code section	501c3	
Method of valuation	cash	
Description of non-		
•		
cash assistance	Environmental	
cash assistance Purpose of grant	Environmental	45.40
cash assistance	Utd ARC of Frkln and Hamp Ctys	15,849
cash assistance Purpose of grant	Utd ARC of Frkin and Hamp Ctys 111 Summer St	15,849
cash assistance Purpose of grant Name and address	Utd ARC of Frkln and Hamp Ctys 111 Summer St Greenfield, MA 01301	15,849
cash assistance Purpose of grant Name and address EIN	Utd ARC of Frkln and Hamp Ctys 111 Summer St Greenfield, MA 01301 04-2267562	15,849
cash assistance Purpose of grant Name and address EIN IRC code section	Utd ARC of Frkln and Hamp Ctys 111 Summer St Greenfield, MA 01301 04-2267562 501c3	15,849
cash assistance Purpose of grant Name and address EIN IRC code section Method of valuation	Utd ARC of Frkln and Hamp Ctys 111 Summer St Greenfield, MA 01301 04-2267562 501c3	15,849
cash assistance Purpose of grant Name and address EIN IRC code section Method of valuation Description of non-	Utd ARC of Frkln and Hamp Ctys 111 Summer St Greenfield, MA 01301 04-2267562 501c3	15,849
cash assistance Purpose of grant Name and address EIN IRC code section Method of valuation	Utd ARC of Frkln and Hamp Ctys 111 Summer St Greenfield, MA 01301 04-2267562 501c3	15,849
Cash assistance Purpose of grant Name and address EIN IRC code section Method of valuation Description of non- cash assistance	Utd ARC of Frkln and Hamp Ctys 111 Summer St Greenfield, MA 01301 04-2267562 501c3 cash	15,849
cash assistance Purpose of grant Name and address EIN IRC code section Method of valuation Description of non- cash assistance Purpose of grant	Utd ARC of Frkln and Hamp Ctys 111 Summer St Greenfield, MA 01301 04-2267562 501c3 cash Human Services	
cash assistance Purpose of grant Name and address EIN IRC code section Method of valuation Description of non- cash assistance Purpose of grant	Utd ARC of Frkln and Hamp Ctys 111 Summer St Greenfield, MA 01301 04-2267562 501c3 cash Human Services United Way of Frkln Cnty Inc	
cash assistance Purpose of grant Name and address EIN IRC code section Method of valuation Description of non- cash assistance Purpose of grant	Utd ARC of Frkln and Hamp Ctys 111 Summer St Greenfield, MA 01301 04-2267562 501c3 cash Human Services United Way of Frkln Cnty Inc 51 Davis St	
cash assistance Purpose of grant Name and address EIN IRC code section Method of valuation Description of non- cash assistance Purpose of grant Name and address	Utd ARC of Frkln and Hamp Ctys 111 Summer St Greenfield, MA 01301 04-2267562 501c3 cash Human Services United Way of Frkln Cnty Inc 51 Davis St Greenfield, MA 01301	
cash assistance Purpose of grant Name and address EIN IRC code section Method of valuation Description of non- cash assistance Purpose of grant Name and address EIN IRC code section Method of valuation	Utd ARC of Frkln and Hamp Ctys 111 Summer St Greenfield, MA 01301 04-2267562 501c3 cash Human Services United Way of Frkln Cnty Inc 51 Davis St Greenfield, MA 01301 04-2212894 501c3	
cash assistance Purpose of grant Name and address EIN IRC code section Method of valuation Description of non- cash assistance Purpose of grant Name and address EIN IRC code section Method of valuation Description of non-	Utd ARC of Frkln and Hamp Ctys 111 Summer St Greenfield, MA 01301 04-2267562 501c3 cash Human Services United Way of Frkln Cnty Inc 51 Davis St Greenfield, MA 01301 04-2212894 501c3	
cash assistance Purpose of grant Name and address EIN IRC code section Method of valuation Description of non- cash assistance Purpose of grant Name and address EIN IRC code section Method of valuation Description of non- cash assistance	Utd ARC of Frkln and Hamp Ctys 111 Summer St Greenfield, MA 01301 04-2267562 501c3 cash Human Services United Way of Frkln Cnty Inc 51 Davis St Greenfield, MA 01301 04-2212894 501c3 cash	
cash assistance Purpose of grant Name and address EIN IRC code section Method of valuation Description of non- cash assistance Purpose of grant Name and address EIN IRC code section Method of valuation Description of non-	Utd ARC of Frkln and Hamp Ctys 111 Summer St Greenfield, MA 01301 04-2267562 501c3 cash Human Services United Way of Frkln Cnty Inc 51 Davis St Greenfield, MA 01301 04-2212894 501c3 cash Human Services	28,500
cash assistance Purpose of grant Name and address EIN IRC code section Method of valuation Description of non- cash assistance Purpose of grant Name and address EIN IRC code section Method of valuation Description of non- cash assistance	Utd ARC of Frkln and Hamp Ctys 111 Summer St Greenfield, MA 01301 04-2267562 501c3 cash Human Services United Way of Frkln Cnty Inc 51 Davis St Greenfield, MA 01301 04-2212894 501c3 cash Human Services University of Connecticut	
cash assistance Purpose of grant Name and address EIN IRC code section Method of valuation Description of non- cash assistance Purpose of grant Name and address EIN IRC code section Method of valuation Description of non- cash assistance Purpose of grant	Utd ARC of Frkln and Hamp Ctys 111 Summer St Greenfield, MA 01301 04-2267562 501c3 cash Human Services United Way of Frkln Cnty Inc 51 Davis St Greenfield, MA 01301 04-2212894 501c3 cash Human Services University of Connecticut 233 Glennbrook Rd Unit 4116	28,500
cash assistance Purpose of grant Name and address EIN IRC code section Method of valuation Description of non- cash assistance Purpose of grant Name and address EIN IRC code section Method of valuation Description of non- cash assistance Purpose of grant Name and address	Utd ARC of Frkln and Hamp Ctys 111 Summer St Greenfield, MA 01301 04-2267562 501c3 cash Human Services United Way of Frkln Cnty Inc 51 Davis St Greenfield, MA 01301 04-2212894 501c3 cash Human Services University of Connecticut 233 Glennbrook Rd Unit 4116 Storrs, CT 06269	28,500
cash assistance Purpose of grant Name and address EIN IRC code section Method of valuation Description of non- cash assistance Purpose of grant Name and address EIN IRC code section Method of valuation Description of non- cash assistance Purpose of grant Name and address	Utd ARC of Frkln and Hamp Ctys 111 Summer St Greenfield, MA 01301 04-2267562 501c3 cash Human Services United Way of Frkln Cnty Inc 51 Davis St Greenfield, MA 01301 04-2212894 501c3 cash Human Services University of Connecticut 233 Glennbrook Rd Unit 4116 Storrs, CT 06269 06-0772160	28,500
cash assistance Purpose of grant Name and address EIN IRC code section Method of valuation Description of non- cash assistance Purpose of grant Name and address EIN IRC code section Method of valuation Description of non- cash assistance Purpose of grant Name and address EIN IRC code section Name and address	Utd ARC of Frkln and Hamp Ctys 111 Summer St Greenfield, MA 01301 04-2267562 501c3 cash Human Services United Way of Frkln Cnty Inc 51 Davis St Greenfield, MA 01301 04-2212894 501c3 cash Human Services University of Connecticut 233 Glennbrook Rd Unit 4116 Storrs, CT 06269 06-0772160 501c3	28,500
cash assistance Purpose of grant Name and address EIN IRC code section Method of valuation Description of non- cash assistance Purpose of grant Name and address EIN IRC code section Method of valuation Description of non- cash assistance Purpose of grant Name and address EIN IRC code section Method of valuation Name and address	Utd ARC of Frkln and Hamp Ctys 111 Summer St Greenfield, MA 01301 04-2267562 501c3 cash Human Services United Way of Frkln Cnty Inc 51 Davis St Greenfield, MA 01301 04-2212894 501c3 cash Human Services University of Connecticut 233 Glennbrook Rd Unit 4116 Storrs, CT 06269 06-0772160 501c3	28,500
cash assistance Purpose of grant Name and address EIN IRC code section Method of valuation Description of non- cash assistance Purpose of grant Name and address EIN IRC code section Method of valuation Description of non- cash assistance Purpose of grant Name and address EIN IRC code section Method of valuation Description of non- cash assistance Purpose of grant Name and address	Utd ARC of Frkln and Hamp Ctys 111 Summer St Greenfield, MA 01301 04-2267562 501c3 cash Human Services United Way of Frkln Cnty Inc 51 Davis St Greenfield, MA 01301 04-2212894 501c3 cash Human Services University of Connecticut 233 Glennbrook Rd Unit 4116 Storrs, CT 06269 06-0772160 501c3	28,500
cash assistance Purpose of grant Name and address EIN IRC code section Method of valuation Description of non- cash assistance Purpose of grant Name and address EIN IRC code section Method of valuation Description of non- cash assistance Purpose of grant Name and address EIN IRC code section Method of valuation Description of non- cash assistance Purpose of grant Name and address	Utd ARC of Frkln and Hamp Ctys 111 Summer St Greenfield, MA 01301 04-2267562 501c3 cash Human Services United Way of Frkln Cnty Inc 51 Davis St Greenfield, MA 01301 04-2212894 501c3 cash Human Services University of Connecticut 233 Glennbrook Rd Unit 4116 Storrs, CT 06269 06-0772160 501c3 cash	28,500
cash assistance Purpose of grant Name and address EIN IRC code section Method of valuation Description of non- cash assistance Purpose of grant Name and address EIN IRC code section Method of valuation Description of non- cash assistance Purpose of grant Name and address EIN IRC code section Method of valuation Description of non- cash assistance Purpose of grant Name and address	Utd ARC of Frkln and Hamp Ctys 111 Summer St Greenfield, MA 01301 04-2267562 501c3 cash Human Services United Way of Frkln Cnty Inc 51 Davis St Greenfield, MA 01301 04-2212894 501c3 cash Human Services University of Connecticut 233 Glennbrook Rd Unit 4116 Storrs, CT 06269 06-0772160 501c3	28,500

Schedule I, Part IV, Statement 1 **COMMUNITY FOUNDATION OF WESTERN MASSACHUSETTS** 200 Bloomfield Ave

W Hartford, CT 06117 **EIN** 06-0731360

IRC code section 501c3 Method of valuation cash Description of non-

cash assistance

Purpose of grant Scholarships

Name and address University of Mass Foundation 16,000

225 Franklin St Boston, MA 02110 **EIN** 04-6013152 IRC code section 501c3 Method of valuation cash

Description of noncash assistance

Purpose of grant

Name and address University of Mass Amherst 303.200

255 Admin Bldg Amherst, MA 01003 04-3167352 IRC code section 501c3

Education

Method of valuation cash Description of noncash assistance

EIN

Purpose of grant Scholarships

Name and address University of Mass Dartmouth 9,200

> 285 Old Westport Rd N Dartmouth, MA 02747

EIN 04-3167352 IRC code section 501c3 Method of valuation cash Description of noncash assistance

Purpose of grant Scholarships

Name and address University of MassBoston 7,200

> 100 Morrissey Blvd Boston, MA 02125 04-3167352

EIN IRC code section 501c3 Method of valuation cash Description of non-

Purpose of grant Scholarships

cash assistance

cash assistance

Name and address Urban League of Spfld Inc 12,427

1 Federal St

Springfield, MA 01105

EIN 04-2133248 IRC code section 501c3 Method of valuation cash Description of non-

Purpose of grant **Human Services**

Name and address Valley Com Dev Corp 10,800

30 Market St

Northampton, MA 01060

FIN 22-2906008

IRC code section 501c3 Method of valuation cash Description of non-

Schedule I, Part IV, Scash assistance		COMMUNITY FOUNDATION OF WESTERN MASSACHUSETT
Purpose of grant	Foreclosure Prevention and	
Name and address	Valley Free Radio 140 Pine St Northampton, MA 01060	6,000
EIN	20-3003681	
IRC code section	501c3	
Method of valuation Description of non-	cash	
cash assistance Purpose of grant	Arts and Culture	
Name and address	Valley Opportunity Council 300 High St Holyoke, MA 01040	12,000
EIN	04-2692763	
IRC code section	501c3	
Method of valuation	cash	
Description of non- cash assistance		
Purpose of grant	Human Services	
		0.000
Name and address	Vermont Law School Inc Chelsea St S Royalton, VT 05068	8,000
EIN	23-7252008	
IRC code section	501c3	
Method of valuation	cash	
Description of non- cash assistance		
Purpose of grant	Scholarships	
Name and address	Village Enterprise Fund Inc	10,000
Name and address	751 Laurel St PMB 222 San Carlos, CA 94070	10,000
EIN	22-2852008	
IRC code section	501c3	
Method of valuation	cash	
Description of non- cash assistance		
Purpose of grant	Community Imprv	
Name and address	Wentworth Inst of Tech	7,000
rame and address	550 Huntington Ave	7,000
EIN	Boston, MA 02115 04-1958460	
IRC code section	501c3	
Method of valuation		
Description of non-		
cash assistance		
Purpose of grant	Scholarships	
Name and address	W Cummington Cong Church 27 West Main St	141,000
=1.1	Cummington, MA 01026	
EIN	90-0141008	
IRC code section Method of valuation	501c3	
Description of non- cash assistance	Odd:	
Purpose of grant	Religious Church	
Name and address	WMass Coun Inc Boy Scouts Amer 1 Arch Rd	19,761
EINI	Westfield, MA 01085	

EIN

04-2104279

Schedule I, Part IV, Statement 1 **COMMUNITY FOUNDATION OF WESTERN MASSACHUSETTS** IRC code section 501c3 Method of valuation cash Description of noncash assistance Purpose of grant Youth Developmnt Name and address Western N England Univ 126,050 1215 Wilbraham Rd Springfield, MA 01119 **EIN** 04-2108376 501c3 IRC code section Method of valuation cash Description of noncash assistance Purpose of grant Scholarships Name and address Western N England Univ 5,845 1215 Wilbraham Rd Springfield, MA 01119 EIN 04-2108376 IRC code section 501c3 Method of valuation cash Description of noncash assistance Purpose of grant College Univ Name and address Western N Eng Univ School of Law 14,500 1215 Wilbraham Rd Springfield, MA 01119 EIN 04-2108376 501c3 IRC code section Method of valuation cash Description of noncash assistance Purpose of grant Scholarships Name and address Westfield Athenaeum 16,007 6 Elm St Westfield, MA 01085 EIN 04-6004372 IRC code section 501c3 Method of valuation cash Description of noncash assistance Purpose of grant Arts and Culture Name and address Westfield State University 117,150 577 Western Ave Westfield, MA 01085 EIN 04-3062617 IRC code section 501c3 Method of valuation cash Description of noncash assistance Purpose of grant Scholarships Name and address WGBH Educational Foundation 26,447 44 Hampden St Springfield, MA 01103 EIN 04-2104397 IRC code section Method of valuation cash Description of noncash assistance Purpose of grant Education

9,000

Name and address Willie Ross Sch for the Deaf Inc

Schedule I, Part IV, S	Statement 1	COMMUNITY FOUNDATION OF WESTERN MASSACHUSETTS
Ochedule I, I alt IV,	32 Norway St	COMMONITY CONDATION OF WESTERN MASSAGISCETTS
	Longmeadow, MA 01106	
EIN	04-2430193	
IRC code section	501c3	
Method of valuation	cash	
Description of non-		
cash assistance		
Purpose of grant	Education	
Name and address	Williston Nampton School	10,500
	19 Payson Ave	
	Easthampton, MA 01027	
EIN	04-1975990	
IRC code section	501c3	
Method of valuation		
Description of non-		
cash assistance		
Purpose of grant	Education	
Name and address	Womanshelter Companeras Inc	6,500
Name and address	PO Box 1099	0,500
EIN	Holyoke, MA 01041 04-2716766	
IRC code section	501c3	
Method of valuation	casn	
Description of non- cash assistance		
Purpose of grant	Human Services	
Name and address	Women Donors Network	10,000
	565 Commercial St	
	San Francisco, CA 94111	
EIN	05-0542397	
IRC code section	501c3	
Method of valuation	cash	
Description of non-		
cash assistance	Caracal Hankh	
Purpose of grant	General Health	
Name and address	Womens Fund of Wmass	23,235
	116 Pleasant St Ste 358	
	Easthampton, MA 01027	
EIN	04-3342411	
IRC code section	501c3	
Method of valuation	cash	
Description of non-		
cash assistance		
Purpose of grant	Community Imprv	
Name and address	Worcester Polytechnic Inst	30,750
	100 Institute Rd	
	Worcester, MA 01609	
EIN	04-2121659	
IRC code section	501c3	
Method of valuation	casn	
Description of non-		
cash assistance	Oak alasakin a	
Purpose of grant	Scholarships	
Name and address	Worcester State College	10,000
	486 Chandler St	
	Worcester, MA 01602	
EIN	04-2760551	
IDO I- C		

IRC code section

Method of valuation cash **Description of non-**

501c3

Schedule I, Part IV,	Statement 1	COMMUNITY FOUNDATION OF WESTERN MASSACHUSETTS
cash assistance Purpose of grant	Scholarships	
Name and address	YMCA of Greater Spfld	14,824
	275 Chestnut St	
	Springfield, MA 01104	
EIN	04-1859893	
IRC code section	501c3	
Method of valuation	cash	
Description of non-		
cash assistance		
Purpose of grant	Human Services	
Name and address	YMCA of Grtr Westfield Inc	10,000
	67 Court St	
	Westfield, MA 01085	
EIN	04-2126585	
IRC code section	501c3	
Method of valuation	cash	
Description of non-		
cash assistance		
Purpose of grant	Human Services	
Name and address	Youth Action Coalition Inc	9,500
	256 N Pleasant St	
	Amherst, MA 01004	
EIN	04-3070456	

IRC code section

Method of valuation cash
Description of noncash assistance
Purpose of grant Arts a

501c3

Arts and Culture

SCHEDULE J (Form 990)

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

► Complete if the organization answered "Yes" to Form 990,

Part IV, line 23. 990. ► See separate instructions. ► Attach to Form 990.

2011

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

COMMUNITY FOUNDATION OF WESTERN MASSACHUSETTS

Questions Regarding Compensation

22-3089640

Employer identification number

		l	Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form			
	990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
	First-class or charter travel Housing allowance or residence for personal use			
	☐ Travel for companions ☐ Payments for business use of personal residence			
	☐ Tax indemnification and gross-up payments ☐ Health or social club dues or initiation fees			
	☐ Discretionary spending account ☐ Personal services (e.g., 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	415		
•	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers,	1b		
2	directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?	2		
	directors, trustees, and the OLO/Executive Director, regarding the items checked in line 1a:	2		
_				
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. Explain in Part III.			
	✓ Compensation committee			
	☐ Independent compensation consultant ☐ Compensation survey or study			
	Form 990 of other organizations Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing			
•	organization or a related organization:			
а	Receive a severance payment or change-of-control payment?	4a		1
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		1
С	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		1
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
	Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9.			
5	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any			
	compensation contingent on the revenues of:			
а	The organization?	5a		~
b	Any related organization?	5b		~
	If "Yes" to line 5a or 5b, describe in Part III.			
6	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any			
	compensation contingent on the net earnings of:			
а	The organization?	6a		~
b	Any related organization?	6b		~
	If "Yes" to line 6a or 6b, describe in Part III.			
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed			_
	payments not described in lines 5 and 6? If "Yes," describe in Part III	7		~
8	Were any amounts reported in 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	8		~
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in			
	Regulations section 53.4958-6(c)?	9	1	

Schedule J (Form 990) 2011

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 in 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 are not 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.

Note. The sum of columns (b)(i)-(iii) for ea			f W-2 and/or 1099-MIS		(C) Retirement and	(D) Nontaxable	(E) Total of columns	
(A) Name		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(i)–(D)	(F) Compensation reported as deferred in prior Form 990
Ron Ancrum	(i)	150,234	0	0	0	0	150,234	0
1	(ii)	0	0	0	0	0		
	(i)							
2	(ii)							
	(i)							
3	(ii)							
	(i)							
4	(ii)							
	(i)							
5	(ii)							
	(i)							
6	(ii)							
	(i)							
7	(ii)							
	(i)							
8	(ii)							
	(i)							
9	(ii)							
	(i)							
10	(ii)							
	(i)							
11	(ii)							
	(i)							
12	(ii)			+				
	(i)							
13	(ii)							
	(i)							
14	(ii)							
	(i)							
15	(ii)			+			<u></u>	+
	(i)							
16	(ii)							

Schedule J (Form 990) 2011 Supplemental Information Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information. Schedule J, Part I, Line 3 - The Personnel Committee of the Board of Trustees is responible for determining the President's salary. All other salaries are reviewed and monitored by the committee with management input.

SCHEDULE L (Form 990 or 990-EZ)

Transactions With Interested Persons

► Complete if the organization answered "Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.

► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

OMB No. 1545-0047

Employer identification number

Department of the Treasury Internal Revenue Service Name of the organization

COMM	JNITY FOUNDATION OF WESTERN MA	SSACH	JSETTS					22-3	308964	40		
Part	Excess Benefit Transactions Complete if the organization an	(section swered	501(c)(3 "Yes" o	3) and section 501(c)(n Form 990, Part IV, I	4) organiza ine 25a or	tions only) 25b, or Fo	rm 99	0-EZ,	Part \	√, line	40b.	
1	(a) Name of disqualified person				(h) Description	on of transact	ion				(c) Corr	rected?
'	(a) Name of disqualified person				(b) Description	on or transact	1011				Yes	No
(1)												
(2)												
(3)												
(4)												
(5)												
(6)	Coton the americal of tax increased of				el:£:l			<u></u>				
	Enter the amount of tax imposed of tax imposed of the control of tax imposed of the control of tax imposed of the control of tax imposed of t											
	Enter the amount of tax, if any, on lir											
3	Enter the amount of tax, if any, on iif	ie ∠, abc	ove, rem	ibursed by the organ	ization .			'	▶ \$			
Part I	Loans to and/or From Interes Complete if the organization an			n Form 990, Part IV, I	ine 26, or I	orm 990-E	EZ, Pa	rt V, li	ine 38	 Ba.		
la	Name of interested person and purpose		to or from	(c) Original		ance due		lefault?		oroved	(a) W	ritten
,	,		inization?	principal amount	(-,		(,,		by bo	ard or nittee?		ment?
		То	From				Yes	No	Yes	No	Yes	No
(1)												
(2)												
(3)		+										
(4)												
(5) (6)		+										
(7)		+										
(8)												
(9)												
(10)												
Total		'	٠	\$								
Part I		ng Inter	rested F	Persons.	ine 27.							
	(a) Name of interested person	(b) Re	elationship	between interested persor organization	and the	(c)	Amount	and ty	pe of as	ssistan	ce	
(1)												
(2)												
(3)												
(4)												
(5)		1										
(6)												
(7)		1										
(8)		1										
(9)		+										
(10)												

Part IV	Business Transactions Inv Complete if the organization	rolving Interested Persons. n answered "Yes" on Form 990	D, Part IV, line 28a, 2	28b, or 28c.		
	(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sha organiz rever	zation's
					Yes	No
(1) Rob	ert Atkinson	Trustee Emeriti	27,334	Legal Serviices		~
(2)						
(3)						
(4)						
(5) (6)						
(7)						
(8)						
(9)						
(10)						
Part V	Supplemental Information Complete this part to provide		sponses to question	ns on Schedule L (see instruction	ns).	

SCHEDULE M (Form 990)

Noncash Contributions

OMB No. 1545-0047 2011

► Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.

Open To Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

► Attach to Form 990.

COMMUNITY FOUNDATION OF WESTERN MASSACHUSETTS

Employer identification number

22-3089640

Part	lypes 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	Method o			
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			0.400.444				
9	Securities—Publicly traded	<i>'</i>	29	2,692,466	Quotes			
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	_							
26	Other ► ()							
27	Other ► ()							
28	Other ► () Other ► ()							
29	Number of Forms 8283 received	by the or	ganization during the tax v	year for contributions for				
23	which the organization completed				29			•
	Willow the organization completed	11 01111 0200	o, i art iv, boneo nomiowie		29		Yes	No
20-	Duving the year did the granting			under von austral im David I. linea	1 00 46 -4		103	140
30a	During the year, did the organiza							
	it must hold for at least three year							
_	used for exempt purposes for the		ing period?			30a		
	If "Yes," describe the arrangemen		, , , , , ,					
31	Does the organization have a				n-standard			
						31	~	
32a	Does the organization hire or use							
	contributions?					32a		<u> </u>
b	If "Yes," describe in Part II.							
33	If the organization did not report at describe in Part II.	n amount in	column (c) for a type of pro	perty for which column (a) i	s checked,			

Schedule M (I	Form 990) (2011) Page 2
Part II	Supplemental Information. Complete this part to 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.

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

OMB No. 1545-0047

2011

Open to Public Inspection

Employer identification number

Department of the Treasury Internal Revenue Service Name of the organization 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.

COMMUNITY FOUNDATION OF WESTERN MASSACHUSETTS	22-3089640
Form 990, Part VI, Section A, Line 2 - certain Foundation Trustees provide professional services to oth	er Foundation Trustees
Form 990, Part VI, Section B, Line 11b - Members of the Foundation's Audit and Finance Committee are 990 as prepared by the Foundation's Chief Financial Officer and staff. The committee members are pro-	
form and to inquire about and discuss any item reported therein. All such inquiries are satisfactorily re	
time a final copy of Form 990 is made available to the Board of Trustees and then Form 990 is filed with	h the IRS
Form 990, Part VI, Section B, Line 12c - Each year all trustees and senior staff are required to complete	a conflict of interest statement.
These statements are reviewed and monitored with regard to any vote by the trustees.	
Form 990, Part VI, Section B, Line 15 - The Persponnel Committee of the Board of Trustees to Foundat	
determining the President's salary. All other salaries are reviewed and monitored by this committee wi	th management input.
Form 990, Part VI, Section C, Line 19 - Summary financial information is available in the Foundation's a	
available on the website. The Form 990 is available on the Foundation's website. All other infornation i	s available upon request.
Form 990, Part XI, Line 5 - Unrealized gain on investments	

SCHEDULE R (Form 990)

Part I

Related Organizations and Unrelated Partnerships

OMB No. 1545-0047

(d)

Total income

Legal domicile (state

or foreign country)

(e)

End-of-year assets

Department of the Treasury Internal Revenue Service

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

► Attach to Form 990. ► See separate instructions.

(b)

Primary activity

Open to Public Inspection

(f)

Direct controlling

entity

Name of the organization **Employer identification number** COMMUNITY FOUNDATION OF WESTERN MASSACHUSETTS 22-3089640

Identification of Disregarded Entities (Complete if the organization answered "Yes" to Form 990, Part IV, line 33.)

					"				
	unity Foundation of Western Mass LLC		Vehicle to he	old real estate	DE	0	0	N/A	
1500 Main	Street Suite 2300, Springfield, MA 01115								
(2)			-						
(3)			-						
(4)									
(5)									
(6)									
Part II	Identification of Related Tax-Exempt Organizations one or more related tax-exempt organizations du	ations (Curing the	omplete if tl tax year.)	ne organization	answered "Yes" to	Form 990, Part	IV, line 34 bec	ause it ha	ıd
	(a) Name, address, and EIN of related organization		(b) ary activity	(c) Legal domicile (sta	(d) te Exempt Code section	(e) Public charity status	(f) Direct controllir	Soction	(g) 512(b)(13)
	Name, address, and Em orrelated organization	FIIII	ary activity	or foreign country) Exempt Code section	(if section 501(c)(3))	entity	con	trolled
(1)	Name, address, and Em orrelated organization	Fillie	ary activity	or foreign country) Exempt Code section	(if section 501(c)(3))	entity	con	trollea
(1)	Name, address, and Em of related organization		ary activity	or foreign country)	(if section 501(c)(3))	entity	en	trolled itity?
(1)	Name, address, and Em of related organization		ary activity	or foreign country)	(if section 501(c)(3))	entity	en	trolled itity?
	Name, address, and Em of related organization		ry acuvity	or foreign country)	(if section 501(c)(3))	entity	en	trolled itity?
(2)	Name, address, and Ein of related organization	Fillie	ary activity	or foreign country) Exempt Gode section	(if section 501(c)(3))	entity	en	trolled itity?
(2)	Name, address, and Em of related organization	Fillie	ary activity	or foreign country) Exempt Gode section	(if section 501(c)(3))	entity	en	trolled itity?
(2) (3) (4) (5)	Name, address, and Ein of related organization	Fillie	ary activity	or foreign country) Exempt Gode section	(if section 501(c)(3))	entity	en	trolled itity?
(3)	Name, address, and Ein of related organization	-	ary activity	or foreign country) Exempt Gode section	(if section 501(c)(3))	entity	en	trolled itity?

(a)
Name, address, and EIN of disregarded entity

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

because it had one of 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	Disprop	h) ortionate tions?	(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)			(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" to 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
(1)							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							

Part V Transactions With Related Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34, 35, 35a, or 36.)

Not	e. 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?			
а	Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity	1a		
b	Gift, grant, or capital contribution to related organization(s)	1b		
С	Gift, grant, or capital contribution from related organization(s)	1c		
d	Loans or loan guarantees to or for related organization(s)	1d		
е	Loans or loan guarantees by related organization(s)	1e		
f	Sale of assets to related organization(s)	1f		
g	Purchase of assets from related organization(s)	1g		
h	Exchange of assets with related organization(s)	1h		
i	Lease of facilities, equipment, or other assets to related organization(s)	1i		
j	Lease of facilities, equipment, or other assets from related organization(s)	1j		
k	Performance of services or membership or fundraising solicitations for related organization(s)	1k		
ı	Performance of services or membership or fundraising solicitations by related organization(s)	11		
m	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1m		
	Sharing of paid employees with related organization(s)	1n		
О	Reimbursement paid to related organization(s) for expenses	10		
р	Reimbursement paid by related organization(s) for expenses	1p		
-				
q	Other transfer of cash or property to related organization(s)	1q		
r	Other transfer of cash or property from related organization(s)	1r		
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	on thre	sholo	ls.
	(a) (b) (c)	(d)		
		nod of d		
	type (a-r)	mount ir	ivoivec	,
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				

Schedule R (Form 990) 2011

Part VI Unrelated Organizations Taxable as a Partnership (Complete if the organization answered "Yes" to 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)	(d) Predominant income (related, unrelated, excluded from tax under	(e) Are all partners section		(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	No			Yes	No		Yes	No	
(1)	-												
(2)	-												
(3)	-												
<u>(4)</u>	-												
(5)	-												
(6)	-												
(7)	-												
(8)	-												
(9)	-												
(10)	-												
(11)	-												
(12)	-												
(13)	-												
(14)	-												
(15)	-												
(16)	-												
													000) 0044

	Form 990) 2011	Page 5
Part VII	Supplemental Information Complete this part to provide additional information for responses to questions on Schedule R (see	
	instructions).	