Form 990-PF

Department of the Treasury

Return of Private Foundation

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

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

OMB No 1545-0052

201**6**

Internal Revenue Service Open to Public Inspection ▶ Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf. For calendar year 2016 or tax year beginning 1 vluL 2016, and ending June 30 20 17 Name of foundation A Employer identification number Eos Foundation 04-3494831 Number and street (or P Q, box number if mail is not delivered to street address) Room/suite Telephone number (see instructions) 537 Main Street Suite 12 508-430-8130 City or town, state or province, country, and ZIP or foreign postal code C If exemption application is pending, check here Harwich Port MA 02646 G Check all that apply. All Initial return Initial return of a former public charity D 1 Foreign organizations, check here Ø Amended return Final return 2. Foreign organizations meeting the 85% test Address change ☐ Name change check here and attach computation E If private foundation status was terminated under Section 501(c)(3) exempt private foundation H Check type of organization section 507(b)(1)(A), check here Section 4947(a)(1) nonexempt charitable trust

Other taxable private foundation Fair market value of all assets at J Accounting method X Cash Accrual If the foundation is in a 60-month termination end of year ffrom Part II, col (c). ☐ Other (specify) under section 507(b)(1)(B), check here line 16) ► \$ (Part I, column (d) must be on cash basis.) 37,151,195 Part | Analysis of Revenue and Expenses (The total of (d) Disbursements (a) Revenue and expenses per books (b) Net investment (c) Adjusted net amounts in columns (b), (c), and (d) may not necessarily equal purposes (cash basis only) income the amounts in column (a) (see instructions).) Contributions, gifts, grants, etc., received (attach schedule) 10,000 2 Check ► ☐ if the foundation is not required to attach Sch. B 3 Interest on savings and temporary cash investments 11,108 11,108 4 Dividends and interest from securities 5a Gross rents . ь Net rental income or (loss) Net gain or (loss) from sale of assets not on line 10. Gross sales price for all assets on line 6a Capital gain net income (from Part IV, line 2) 0 B050 8 Net short-term capital gain . 30 9 Income modifications 10a Gross sales less returns and allowances OGDEN. UI b Less. Cost of goods sold Gross profit or (loss) (attach schedule) C 11 Other income (attach schedule) 12 Total. Add lines 1 through 11 21,108 11.108 0 13 Compensation of officers, directors, trustees, etc 298,361 29,836 268,525 Operating and Administrative Expenses 14 262,694 Other employee salaries and wages 215,241 47,454 15 Pension plans, employee benefits 139,108 24,655 114,453 16a Legal fees (attach schedule) 392 392 b Accounting fees (attach schedule) 1,975 3,950 4975 Other professional fees (attach schedule) 160,621 160,621 Taxes (attach schedule) (see instructions) 6,604 6,000 604 19 Depreciation (attach schedule) and depletion 20 Occupancy . 34,262 3,426 30,836 21 Travel, conferences, and meetings 46,871 46,871 22 Printing and publications 5,374 5,374 23 Other expenses (attach schedule) 48,977 1,208 <u>47,769</u> Total operating and administrative expenses. 24 Add lines 13 through 23 1,007,214 0 892,661 114,554 25 Contributions, gifts, grants paid 2,362,233 2,362,233 26 Total expenses and disbursements. Add lines 24 and 25 3,369,447 114,554 0 3,254,894 27 Subtract line 26 from line 12. Excess of revenue over expenses and disbursements (3,348,339) Net investment income (if negative, enter -0-) 0 Adjusted net income (if negative, enter -0-)

For Paperwork Reduction Act Notice, see instructions.

Form 990-PF (2018)

Part II		Balance Sheets Attached schedules and amounts in the description column	Beginning of year		of year		
		Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions.)	(a) Book Value	(b) Book Value	(c) Fair Market Value		
	1	Cashnon-interest-bearing	378,953	579,748	579,748		
	2	Savings and temporary cash investments	2,887,547	1,992,871	1,992,87		
	3	Accounts receivable ▶	TO THE PERSON	THE WATER STREET	建筑在建筑 的建设有效		
	{	Less: allowance for doubtful accounts ▶					
	4	Pledges receivable ►	设态等的	医研究院院 1000年8月11日	The state of the state of the state of		
	Į	Less: allowance for doubtful accounts ▶					
	5	Grants receivable					
	6	Receivables due from officers, directors, trustees, and other					
		disqualified persons (attach schedule) (see instructions)					
	7	Other notes and loans receivable (attach schedule)	张文理(研究 X 3 3 3 5	ALL MERCENSON	WAR ALEYS THE TO A T		
		Less. allowance for doubtful accounts ▶	The self-state and service and service	Commence of the control of the control of	0.2.4		
S	8	Inventories for sale or use			· · · · · · · · · · · · · · · · · · ·		
Assets	9	Prepaid expenses and deferred charges	750		750		
As	10a	Investments—U.S. and state government obligations (attach schedule)	139		/3		
•	Ь	Investments—corporate stock (attach schedule)					
	C	Investments—corporate bonds (attach schedule)					
	11	Investments—land, buildings, and equipment, basis	CHARLES SALE	を作がある。 ないでんかは、	A STATE OF THE PERSON		
] ``	Less accumulated depreciation (attach schedule)▶		Seat ATT Strategies and B. Talling and	Problem of the second of the con-		
	12	Investments—mortgage loans					
- '	13	Investments—other (attach schedule)	20,805,573	10 504 440	24 926		
	14	Land buildings and equipment hards	20,005,5/3	18,504,448	34,577,826		
	' '	Land, buildings, and equipment: basis ▶ o Less. accumulated depreciation (attach schedule) ▶	LAMEN CHARLES AND MANAGE	AND A THE PROPERTY OF THE	Man Barrier St. or any 1.		
	15	Other assets (describe >	 		<u> </u>		
	16	Total assets (to be completed by all filers—see the	 				
		instructions. Also, see page 1, item I)	24,072,823	32.077.067	27.457.40		
	17	Accounts payable and accrued expenses	24,0/2,023	21,077,067	37,151,195		
	18	Grants payable					
es	19	Deferred revenue					
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons					
ᅙ	21	Mortgages and other notes payable (attach schedule)					
ا ڏ	22		900		200		
		Other liabilities (describe ►) Total liabilities (add lines 17 through 22)	888		Carried and the second		
	23	والمنظون ببروانات كالبروان كالأنبي والبراث أكاليب بالمكالي والتناف والأناب والماكات والمساوات والمجاور والمحار	888	0			
S		Foundations that follow SFAS 117, check here					
စ္အ၂	•	and complete lines 24 through 26 and lines 30 and 31.			一种种种的		
alances	24	Unrestricted					
<u>a</u> (25	Temporarily restricted					
힏	26	Permanently restricted			4		
₹		Foundations that do not follow SFAS 117, check here ▶ □					
Net Assets or Fund B		and complete lines 27 through 31.					
8		Capital stock, trust principal, or current funds					
ا ق		Paid-in or capital surplus, or land, bldg, and equipment fund					
82		Retained earnings, accumulated income, endowment, or other funds	36,016,530	37,151,195	The state of the s		
2		Total net assets or fund balances (see instructions)	36,016,530	37,151,195			
2		Total liabilities and net assets/fund balances (see					
		instructions)	36,017,418	37,151,195	建口物品类工		
	t III	Analysis of Changes in Net Assets or Fund Balances					
1		net assets or fund balances at beginning of year-Part II, colui	mn (a), line 30 (mus	agree with			
		of-year figure reported on prior year's return)	•	1	36,016,530		
2		amount from Part I, line 27a	•	2	(3,348,339		
3	3 Other increases not included in line 2 (itemize) ► Unrealized investment gains 3						
4		ines 1, 2, and 3		. 4	4,510,683 37,178,874		
5	Decre	eases not included in line 2 (itemize) Realized loss on investme	ents	5	27,679		
-		net assets or fund balances at end of year (line 4 minus line 5)-F		e 30 6	37,151,195		

Par	IV Capital Gains and	Losses for Tax on Investme	nt Income			
		e kind(s) of property sold (e.g., real estate, se; or common stock, 200 shs MLC Co.)		(b) How acquired P—Purchase D—Oonation	(c) Date acquired (mo . day, yr)	(d) Date sold (mo_day, yr)
1a Chalkstream Investments P V						01/31/2017
b Chalkstream Investments P						04/30/2017
c	· 	······································	- , , 			
<u>d</u>						
<u>e</u>		·····		<u> </u>		
	(e) Gross sales price	(f) Depreciation allowed (or allowable)		other basis nse of sale		iain or (loss) s (l) minus (g)
a	1,280,094			1,315,904		(35,81
<u>b</u>	1,375,253			1,367,122		8,13
<u>c</u>						
<u>d</u>						
<u>е</u>			44 - 6 4-41-	40/04/00		
	Complete only for assets sho	wing gain in column (h) and owned by				iol. (h) gain minus
	(I) F.M.V as of 12/31/69	(j) Adjusted basis as of 12/31/69		s of cot (I) (j), if any		not less than -0-) or (from cal (h))
<u>a</u>						
b						
<u>c</u>					· ·	· · · · · · · · · · · · · · · · · · ·
<u>d</u>						
e		/ If only old		A 1 11 2 2 3		
2	Capital gain net income or		o enter in Par nter -0- in Par			
3		or (loss) as defined in sections 12	222(5) and (6):		2	
		I, line 8, column (c) (see instruction	ins). If (loss),	enter -0- in	[
_	Part I, line 8		· · ·	, , , ,	3	(27,679
Part		er Section 4940(e) for Reduce rate foundations subject to the sec				
Nas t		this part blank section 4942 tax on the distributab qualify under section 4940(e). Do r			ase period?	☐ Yes 🖾 No
1		unt in each column for each year;		. <u> </u>	king any entries	
	(0)	(b)		(c)	- 1	(d)
Cale	Base period years inder year (or tax year beginning in)	Adjusted qualifying distributions	Net value of	noncharitable-use as		stribution ratio divided by col (c))
	2015	3,764,67	7	35,009		0.1075
	2014	3,181,56		37,420,		0.0850
	2013	2,379,80		40,335,		0.0590
	2012	3,407,82		42,251		0.0807
	2011	7,137,92		43,940,		0.1624
2	Total of line 1, column (d)			_ 	. 2	0.4946
3		or the 5-year base period-divide	the total on li	ne 2 bv 5. or bv t		0.4540
	•	ation has been in existence if less			. 3	.09892
4	Enter the net value of nonc	haritable-use assets for 2016 from	Part X, line 5	;	4	36,244,288
5	5 Multiply line 4 by line 3				5	3,585,285
6	Enter 1% of net investment	income (1% of Part I, line 27b)			6	0
7	Add lines 5 and 6				7	3,585,285
8	Enter qualifying distribution				8	3,254,894
	If line 8 is equal to or great Part VI instructions.	er than line 7, check the box in Pa	art VI, line 1b,	and complete th	at part using a	1% tax rate. See the

Part	VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see	instr	uctio	ns)			
1a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1						
	Date of ruling or determination letter: (attach copy of letter if necessary—see instructions)						
D	Domestic foundations that meet the section 4940(e) requirements in Part V, check here ▶ □ and enter 1% of Part I, line 27b		0	_			
С	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of						
	Part I, line 12, col. (b).						
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)						
3	Add lines 1 and 2		0				
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) 4						
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-		0				
6	Credits/Payments			"			
а	2016 estimated tax payments and 2015 overpayment credited to 2016 6a 3,153			1			
þ	Exempt foreign organizations—tax withheld at source			}			
C	Tax paid with application for extension of time to file (Form 8868) 6c			ļ			
d	Backup withholding erroneously withheld 6d 6d						
7	Total credits and payments. Add lines 6a through 6d		<u>3,153</u>				
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached 8						
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed		0				
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid		3,153				
11_	Enter the amount of line 10 to be: Credited to 2017 estimated tax ▶ Refunded ▶ 11		<u>3,153</u>	<u> </u>			
Paru 1a	VII-A Statements Regarding Activities During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it		1000	No			
10	participate or intervene in any political campaign?	1a	168	X			
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see	1a	 				
J	Instructions for the definition)?	1b	<u> </u>	x			
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials						
	published or distributed by the foundation in connection with the activities.						
C	**************************************						
d	d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year (1) On the foundation. ▶ \$ (2) On foundation managers ▶ \$						
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed						
_	on foundation managers. ▶ \$						
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		X			
	If "Yes," attach a detailed description of the activities						
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of			•			
	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		<u> </u>			
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		X			
b	If "Yes," has it filed a tax return on Form 990-T for this year?	4b		X			
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year? If "Yes," attach the statement required by General Instruction T.	5		X			
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:						
	By language in the governing instrument, or		1				
	· By state legislation that effectively amends the governing instrument so that no mandatory directions that	} }	1				
	conflict with the state law remain in the governing instrument?	6	x J				
7							
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)						
	Massachusetts	, ,					
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General						
	(or designate) of each state as required by General Instruction G? If "No," attach explanation is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or	8b	_X				
9							
	4942()(5) for calendar year 2016 or the taxable year beginning in 2016 (see instructions for Part XIV)? If "Yes,"		l	$\overline{}$			
	complete Part XIV	9		\underline{x}			
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their						
	names and addresses	10	j	Χ			

Par	t VII-A Statements Regarding Activities (continued)			
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the		Yes	No
	meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		х
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement (see instructions)	12		х
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	
	Website address ► www.eosfoundation.org			
14	The books are in care of ► Eos Foundation Telephone no ► 508-430	-8130		
	Located at ► 537 Main Street Suite 12 Harwich Port ZIP+4 ► 02646			<u></u>
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041—Check here and enter the amount of tax-exempt interest received or accrued during the year 15			▶ [
16	At any time during calendar year 2016, did the foundation have an interest in or a signature or other authority	/	Yes	No
	over a bank, securities, or other financial account in a foreign country?	16		X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of	\$ ·	4	
	the foreign country ▶	<u> </u>	<u> </u>	i L
Part	VII-B Statements Regarding Activities for Which Form 4720 May Be Required	F-2		
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1a	During the year did the foundation (either directly or indirectly):	1		-
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a			ŀ
	disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?		,	
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?		· *	,
	(5) Transfer any income or assets to a disqualified person (or make any of either available for			5
	the benefit or use of a disqualified person)?		₿ ′. ₹	
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.)		Α	es.
b	If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?		,	! }
	Organizations relying on a current notice regarding disaster assistance check here	1b		-
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that			
	were not corrected before the first day of the tax year beginning in 2016?	1c		X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942()(3) or 4942()(5)):	1		,
а	At the end of tax year 2016, did the foundation have any undistributed income (lines 6d and		, 1	:
	6e, Part XIII) for tax year(s) beginning before 2016? ☐ Yes ☐ No	- 1	1	
	If "Yes," list the years ▶ 20, 20, 20, 20	ļ. ļ	ľ	,
þ	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)	* 1	1	
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to	1 4	1	
	all years listed, answer "No" and attach statement—see instructions.)	2b		-
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here ≥ 20 , 20 , 20 , 20			,
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise			•
	at any time during the year?			
b	If "Yes," did it have excess business holdings in 2016 as a result of (1) any purchase by the foundation or		}	
	disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the	j. 4	ſ	
	Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of	.	1	
	the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the	1	ŀ	
	foundation had excess business holdings in 2016.)	3b		
	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		X
	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its	· **		
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2016?	4b	- 1	X

O	4

Par	VII-B Statements Regarding Activitie	s for \	Nhich Form	1 4720	May Be F	Requir	ed (conti	nued)			
5a	During the year did the foundation pay or incur	any am	ount to:						10.63	۾ يون د	至"高
	(1) Carry on propaganda, or otherwise attempt						☐ Yes	X No) [[2]	J. W.	1
	(2) Influence the outcome of any specific publi				arry on),			1		
	directly or indirectly, any voter registration d		•				Yes	X) No	11/1	1	5
	(3) Provide a grant to an individual for travel, stu						· 🗌 Yes	X) No			16.33
	(4) Provide a grant to an organization other tha	n a ch	aritable, etc.,	organi	zation desc	ribed i			453	2.1	
	section 4945(d)(4)(A)? (see instructions)		•				☐ Yes	· 🛛 No	> % g	- /	2 .
	(5) Provide for any purpose other than religious				ary, or edu	cationa	al	·		*	<u> </u>
_	purposes, or for the prevention of cruelty to						Yes	⊠ No		1	
Þ	If any answer is "Yes" to 5a(1)-(5), did any of the							ribed ir	_ f '		[
	Regulations section 53.4945 or in a current notice	_	_		•	ructions	5)?		5b		, +
_	Organizations relying on a current notice regard							▶ [ا (<u>الربية</u> ا	,. ,. ,	ŗ.
С	If the answer is "Yes" to question 5a(4), does because it maintained expenditure responsibility			n exem	iption from	the ta		— ·	15 J. S.	٠. ٠. ٠. ٠.	
	•		_	, 45 54			☐ Yes	□No	13,4	2 .5	
6a	If "Yes," attach the statement required by Regulation, during the year, receive any						_		G 274 23	1	
0a	on a personal benefit contract?	iunus,	=	unecuy	, to pay pro	Buttoni	S ☐Yes	X No		1	; ,
ь	Did the foundation, during the year, pay premiur	no dire	•			I banafi	_	_	6ь	77.37	V
	If "Yes" to 6b, file Form 8870.	115, 011	schy or mane	Cuy, Oi	a persona	Denen	it Contract		60	5,74	, <u>^</u>
7a	At any time during the tax year, was the foundation	a nadv	to a prohibite	d tax sh	elter transa	ction?	☐ Yes	IXI No	. F. 1	6 6	
	If "Yes," did the foundation receive any proceed								7b		ĺ
	VIII Information About Officers, Direct									ees.	<u> </u>
	and Contractors	•	•							•	
1	List all officers, directors, trustees, foundatio	n man	agers and th	eir cor	npensatio	n (see i	nstructio	ns).			
	(a) Name and address	(b) Tit	le, and average ars per week		mpensation not paid,	(d)	Contribution oyee benefit	s to	(e) Expe		
	(a) rank and address		ted to position		nter -0-)	and det	erred compe	ensetion	other	allowar	ices
Kenne	th Nickerson	Trust	ee								
	ain Street Suite 12 Harwich Port, MA 02646	10	· · · · · · · · · · · · · · · · · · ·		0			0			0
	rine A. Deyst	Truste	ee			l					
	nn Street Suite 12 Harwich Port, MA 02646	10		<u> </u>	0	ļ		0	ļ		0
	a Silbert	Presio	lent			1		_			
537 Ma	ain Street Suite 12 Harwich Port, MA 02646	40		ļ	235,403			2,958	ļ		0
		ļ	•	ŀ		_					
	Companyation of the blobast sold amplement	- (24)	as Aban Aba	!!	udad an E	7		42	-> 16		
2	Compensation of five highest-paid employed "NONE."	23 (OU	er than tho:	se inci	uaea on II	ne 1	see instr	uction	s). IT N	one, (enter
			(b) Title, and a	verane			(d) Contribu	tions to	4-15		
(a) Name and address of each employee paid more than \$50,00	20	hours per v	veek ဳ	(c) Comper	rsation	employee plans and d	leferred	(e) Exper		
			develop to p				compens	ation			
	Mach Dube		Dir. Major Ir	nit							
	in Street Suite 12 Harwich Port, MA 02646		40		1	19,607	4	4,596			
	Marchant		Exec Assist	ant			<u> </u>				
537 Ma	in Street Suite 12 Harwich Port, MA 02646		40			94,907	3	9,246			
					_						
			ļ								
					Ì						
Totals	umber of other employees paid over \$50,000		L		L <u></u>		L	. ▶			
TUBIT!	amber of other employees paid over 400,000 .								991		<u> </u>

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Page	١,

Part VIII	and Contractors (continued)		
3 Five h	Ighest-paid independent contractors for professional services (see		
	(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
Saggara Con		Program Consulting (NKI)	1
99 High Stre	et Winchester, MA 01890		70,133
			1
			
			
			ļ
Total numbe	of others receiving over \$50,000 for professional services	<u> </u>	0
Part IX-A	Summary of Direct Charitable Activities		
	lation's four largest direct charitable activities during the tax year include relevant sta and other beneficiaries served, conferences convened, research papers produced etc	itistical information such as the number of	Expenses
1 N/A Gra	ntmaking		
2			
3	<u> </u>		
		•	
4	***************************************	***************************************	
Part IX-B	Summary of Program-Related Investments (see instructi	(one)	L
	wo largest program-related investments made by the foundation during the tax year on		Amount
1			

2			
All other progr	am-related investments See instructions		
3			1
		•••••••••••••••••••••••••••••••••••••••	i
			i
otal. Add lin	es 1 through 3		0
		ſ	Form 990-PF (2016)

Part	Minimum Investment Return (All domestic foundations must complete this part. Fore see instructions.)	ign foun	idations,
1		江源	
_	• •	ا مه ا	24 407 257
8	Average monthly fair market value of securities	1a	34,097,353
b	Average of monthly cash balances Fair market value of all other assets (see instructions)	1b	2,698,128
C	Total (add lines 1a, b, and c)	1c	750
d e	Reduction claimed for blockage or other factors reported on lines 1a and	1d	36,796,231
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	36 706 733
4	Cash deemed held for charitable activities. Enter 11/2% of line 3 (for greater amount, see	 	36,796,231
	instructions)	4	5F1 0/3
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	551,943 36,244,288
6	Minimum investment return. Enter 5% of line 5	6	1,812,214
Part			
1	Minimum investment return from Part X, line 6	1	1,812,214
2a	Tax on investment income for 2016 from Part VI, line 5		
b	Income tax for 2016 (This does not include the tax from Part VI) 2b o	1	
C	Add lines 2a and 2b	2c	o
3	Distributable amount before adjustments Subtract line 2c from line 1	3	1,812,214
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	1,812,214
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, tine 1	7	1,812,214
Part	XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes.		
а	Expenses, contributions, gifts, etc —total from Part I, column (d), line 26	1a	3,254,894
b	Program-related investments—total from Part IX-B	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.		
	purposes	2	o
3	Amounts set aside for specific charitable projects that satisfy the:	, ,,,,	
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	3,254,894
	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income		
	Enter 1% of Part I, line 27b (see instructions)	5	
	Adjusted qualifying distributions. Subtract line 5 from line 4	6	3,254,894
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating qualifies for the section 4940(e) reduction of tax in those years.	whethe	
			000 DE

Form 990-PF (2018)

Part	XIII Undistributed Incom	ne (see instruction	ons)			
1	Distributable amount for 201	6 from Part XI,	(a) Corpus	(b) Years prior to 2015	(c) 2015	(d) 2016
	line 7					1,812,214
2	Undistributed income, if any, as o	f the end of 2018			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
а	Enter amount for 2015 only		·			
b	Total for prior years: 20,2			·		
3	Excess distributions carryover	If any, to 2016.			•	
а	From 2011	4,940,893				
þ	From 2012	1,316,295				•
C	From 2013	372,456			<u> </u>	
đ	From 2014 .	1,324,182	·	•	·	
е	From 2015	2,019,916				قي ا
f 4	Total of lines 3a through e Qualifying distributions for 201		9,973,742	 		
	line 4. ► \$ 3,254,894					
a	Applied to 2015, but not more					
b	Applied to undistributed incom (Election required—see instruc	tions)			,	
С	Treated as distributions out of required—see instructions)	corpus (Election				
d	Applied to 2016 distributable a	mount .				1,812,214
e	Remaining amount distributed	out of corpus	1,442,680			
5	Excess distributions carryover					
	(If an amount appears in colun amount must be shown in colu				4.	,
6	Enter the net total of each indicated below:	ch column as			,- -	
а	Corpus Add lines 3f, 4c, and 4e	. Subtract line 5	11,416,422	,		
b	Prior years' undistributed incline 4b from line 2b			0		
С	Enter the amount of prior year				· .	
	income for which a notice of been issued, or on which the				·	
	tax has been previously assess			ļ	1	
d	Subtract line 6c from line amount—see instructions	6b Taxable		o		
е	Undistributed income for 2015	5. Subtract line			· · · · · · · · · · · · · · · · · · ·	
•	4a from line 2a. Taxable instructions					•
f		Subtract lines			0	
•	4d and 5 from line 1. This ar distributed in 2017				4	
7	Amounts treated as distribution				. •	
•	to satisfy requirements impos 170(b)(1)(F) or 4942(g)(3) (Ele	sed by section			, -	
	required—see instructions)					•
8	Excess distributions carryover applied on line 5 or line 7 (see in		4,940,893		,	
9	Excess distributions carryo Subtract lines 7 and 8 from line	ver to 2017.				
10	Analysis of line 9	· · · · · · · · · · · · · · · · · · ·	6,475,529			
a	Excess from 2012	1,316,295	İ	}	İ	
b	Excess from 2013	372,456		. 1	}	
~	Excess from 2014	1,324,182	}		•	1
d	Excess from 2015	2,019,916		1		
e	Excess from 2016	1,442,680	}	1		
	CONTRACTOR STATE CONTRACTOR STATE OF ST	-14-15-14-0				Form 990-PF (2016)

Part	XIV Private Operating Founda	itions (see instru	ctions and Part	VII-A, question 9	9)			
1a	If the foundation has received a ruling			private operating				
	foundation, and the ruling is effective for							
b			operating foundat		ection	3) or 4942(j)(5		
2a	Enter the lesser of the adjusted net income from Part I or the minimum	Tex year		Prior 3 years		(e) Total		
	investment return from Part X for each year listed	(a) 2016	(b) 2015	(c) 2014	(d) 2013			
b	85% of line 2a .	-	0	0	/0			
C	Qualifying distributions from Part XII,							
	line 4 for each year listed	ļ				c		
d	Amounts included in line 2c not used directly for active conduct of exempt activities			,				
е	Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c	o	o		0			
3	Complete 3a, b, or c for the alternative test relied upon							
а	"Assets" alternative test-enter	Į	i					
	(1) Value of all assets	L	/					
	(2) Value of assets qualifying under							
	section 4942(j)(3)(B)(i)					c		
b	"Endowment" alternative test—enter 2/3 of minimum investment return shown in							
	Part X, line 6 for each year listed							
С	"Support" alternative test—enter	;						
	(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					o		
	(2) Support from general public							
	and 5 or more exempt organizations as provided in section 4942()(3)(B)(iii)					o		
	(3) Largest amount of support from							
	an exempt organization					0		
Part	(4) Gross investment income	n (Complete th	la mart amb if th	o formeledien h	-d &E 000 or	0		
Fairu	any time during the year-	see Instruction	•	e toundation n	ad \$5,000 or mo	e in assets at		
1	Information Regarding Foundation				••			
a	List any managers of the foundation v before the close of any tax year (but or					by the foundation		
	th Nickerson and Katherine Deyst							
ь	List any managers of the foundation ownership of a partnership or other en					ge portion of the		
None								
2	Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs: Check here ► ☑ if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds If the foundation makes gifts, grants, etc. (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d							
а	The name, address, and telephone nu	mber or e-mail add	iress of the persor	n to whom applica	ntions should be ac	idressed		
b	The form in which applications should	be submitted and	information and m	naterials they shou	ıld include:			
C	Any submission deadlines:							
	Any restrictions or limitations on awa	ande euch ac hi	accuration or	an charitable fiel	de kinds of isset	tutions as other		
u	factors:	uius, suuli es by	Acchighner als	as, chanable le	ws, kiilus 01 liis(i	lutions, or other		

	Part XV Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment							
		If recipient is an individual		ture Payment				
	Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount			
	Name and address (home or business)	any foundation manager or substantial contributor	recipient	4012.00				
а	Paid during the year							
See A	ttached				1			
		1						
					2,362,233			
			i					
		Į.			į.			
			- 1					
			İ					
]					
			l					
			<u>_</u>					
				► 3a	2,362,233			
b None	Approved for future payment							
AOHE								
			i					
			Ī					
			-					
			İ					
	Total			▶ 3b	0			

Pa	rt X\	I-A Analysis of income-Producing Ac	ctivities				
Ente	r g ro	ss amounts unless otherwise indicated.		isiness income	Excluded by sect	on 512, 513, or 514	(e)
1	Prog	gram service revenue:	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income (See instructions)
	a Ì						
	b						
	c Î						
	ď						
	e ¯						
	f				<u> </u>		
	g F	Fees and contracts from government agencies					
2	_	nbership dues and assessments					
3		est on savings and temporary cash investments					
4		lends and interest from securities	······································	 	14	11,108	
5		rental income or (loss) from real estate.	. 15		<u> </u>		
_		Debt-financed property					
		Not debt-financed property					
6		rental income or (loss) from personal property					
7		er investment income	<u> </u>				
8		or (loss) from sales of assets other than inventory					
9		income or (loss) from special events					
10		is profit or (loss) from sales of inventory	 				
11		r revenue: a					·
11	b	revenue. a					
	-						
	<u> </u>			· · · · · · · · · · · · · · · · · · ·			
	d -		} 	 			
			1		1		
	<u>-</u>	4.1 4.4 4.4 4.4 4.4 4.4 4.4 4.4			-,		
		otal. Add columns (b), (d), and (e)		0		11,108	
13	Tota	I. Add line 12, columns (b), (d), and (e)		0		11,108	
13 See	Tota work	 Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation 	<u> </u>		·		
13 See Par	Tota work	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation Relationship of Activities to the A	ccomplishm	ent of Exemp	Purposes	13	11,108
13 See Par Line	Tota work t XV No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation Relationship of Activities to the A	ccomplishm	ent of Exemp	Purposes	13	11,108
13 See Par Line	Tota work	 Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation 	ccomplishm	ent of Exemp	Purposes	13	11,108
13 See Par Line	Tota work t XV No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation Relationship of Activities to the A	ccomplishm	ent of Exemp	Purposes	13	11,108
13 See Par Line	Tota work t XV No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation Relationship of Activities to the A	ccomplishm	ent of Exemp	Purposes	13	11,108
13 See Par Line	Tota work t XV No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation Relationship of Activities to the A	ccomplishm	ent of Exemp	Purposes	13	11,108
13 See Par Line	Tota work t XV No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation Relationship of Activities to the A	ccomplishm	ent of Exemp	Purposes	13	11,108
13 See Par Line	Tota work t XV No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation Relationship of Activities to the A	ccomplishm	ent of Exemp	Purposes	13	11,108
13 See Par Line	Tota work t XV No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation Relationship of Activities to the A	ccomplishm	ent of Exemp	Purposes	13	11,108
13 See Par Line	Tota work t XV No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation Relationship of Activities to the A	ccomplishm	ent of Exemp	Purposes	13	11,108
13 See Par Line	Tota work t XV No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation Relationship of Activities to the A	ccomplishm	ent of Exemp	Purposes	13	11,108
13 See Par Line	Tota work t XV No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation Relationship of Activities to the A	ccomplishm	ent of Exemp	Purposes	13	11,108
13 See Par Line	Tota work t XV No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation Relationship of Activities to the A	ccomplishm	ent of Exemp	Purposes	13	11,108
13 See Par Line	Tota work t XV No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation Relationship of Activities to the A	ccomplishm	ent of Exemp	Purposes	13	11,108
13 See Par Line	Tota work t XV No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation Relationship of Activities to the A	ccomplishm	ent of Exemp	Purposes	13	11,108
13 See Par Line	Tota work t XV No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation Relationship of Activities to the A	ccomplishm	ent of Exemp	Purposes	13	11,108
13 See Par Line	Tota work t XV No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation Relationship of Activities to the A	ccomplishm	ent of Exemp	Purposes	13	11,108
13 See Par Line	Tota work t XV No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation Relationship of Activities to the A	ccomplishm	ent of Exemp	Purposes	13	11,108
13 See Par Line	Tota work t XV No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation Relationship of Activities to the A	ccomplishm	ent of Exemp	Purposes	13	11,108
13 See Par Line	Tota work t XV No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation Relationship of Activities to the A	ccomplishm	ent of Exemp	Purposes	13	11,108
13 See Par Line	Tota work t XV No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation Relationship of Activities to the A	ccomplishm	ent of Exemp	Purposes	13	11,108
13 See Par Line	Tota work t XV No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation Relationship of Activities to the A	ccomplishm	ent of Exemp	Purposes	13	11,108
13 See Par Line	Tota work t XV No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation Relationship of Activities to the A	ccomplishm	ent of Exemp	Purposes	13	11,108
13 See Par Line	Tota work t XV No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation Relationship of Activities to the A	ccomplishm	ent of Exemp	Purposes	13	11,108
13 See Par Line	Tota work t XV No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation Relationship of Activities to the A	ccomplishm	ent of Exemp	Purposes	13	11,108
13 See Par Line	Tota work t XV No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation Relationship of Activities to the A	ccomplishm	ent of Exemp	Purposes	13	11,108
13 See Par Line	Tota work t XV No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation Relationship of Activities to the A	ccomplishm	ent of Exemp	Purposes	13	11,108

		Exempt O	ganizations				_				
1	in se			y engage in any of the n section 501(c)(3) or					1.	Yes	No
а	_		norting foundation	to a noncharitable e	xempt or	anizatio	n of		1.	F 1	-
ű		Cash .	Joining Iounication		Acilipt Oil	garneation			1a(1)	1 .	x
	• •	Other assets				•		•	1a(2)		X
b		er transactions	• •	, , ,		• •				, 1	 ^
-			a noncharitable ex	empt organization					16(1)		X
				itable exempt organi	zation	•	•	. ,	1b(2)		X
			, equipment, or oth						1b(3)		X
	(4) F	Reimbursement a	rrangements .						1b(4)	_	X
	(5) L	oans or loan gua	rantees						1b(5)		X
	(6) F	Performance of se	rvices or members	ship or fundraising so	olicitation	S			1b(6)		X
C		_		lists, other assets, o	•				1c		X
(a) Line	value value	e of the goods, of	ther assets, or serv on or sharing arrang	es." complete the for vices given by the re gement, show in col charitable exempt organize	porting found to	oundation ne value	If the foundation	n received less er assets, or se	than rvices	fair m	narke ived
(a) Ente	-	(a) rancent arroned	(9/10/10/10/10/10/10/10/10/10/10/10/10/10/	Grando Grant organiz		(0) 003	Arphon of transicis, th	arabbuoria, card orio		angan.	
	7		· · · · · · · · · · · · · · · · · · ·				····	 			
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	_							 			
											
											
	\dashv										
	desc	ribed in section 5		ffiliated with, or rela other than section 5				_] Yes	X	
		(a) Name of organi		(b) Type of o	roanization		(c) De	scription of relation	ship		
		, , , , , , , , , , , , , , , , , , ,			- 30		(4)				
		······································									
				†							
								 			
	Unde	r penalties of perjury, I o	leclare that I have examine	ed this return, including acci nan taxpayer) is based on all	ompanying s	hedules and	statements, and to the	best of my knowled	ge and t	elief, it	ıs true.
Sign Here		ature of officer or trust	7/	1 1/3/1/8	Title	resi	1	May the IR with the pi	S discu Teoarer	ss this : shown !	return betow
		Print/Type preparer's	name	Preparer's signality			Date	Charle C 4 P	תח		
Paid Propa	-	Stefanie Fournie	r		EX.		01/18/2018	Check if self-employed #	P014	27047	,
Prepa Use C			rennan and Fourni	ier_ ~		$\overline{}$		6 EN ► 01-0721		7 : 3/	
USG C	····y		6 OLiver Drive Bre					e no. 508-896-6			

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

Schedule B

(Form 990, 990-EZ. or 990-PF)

Department of the Treasury Internal Revenue Service

Schedule of Contributors

➤ Attach to Form 990, Form 990-EZ, or Form 990-PF.

▶ Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

Name of the organization		Employer identification number			
Eos Foundation 04-3494831					
Organization type (check	one):				
Filers of:	Section:				
Form 990 or 990-EZ	☐ 501(c)() (enter number) organization				
	4947(a)(1) nonexempt charitable trust not treated as a private	ofoundation			
	☐ 527 political organization				
Form 99 0-PF	∑ 501(c)(3) exempt private foundation				
	4947(a)(1) nonexempt charitable trust treated as a private for	Indation			
	☐ 501(c)(3) taxable private foundation				
Note: Only a section 501(c) instructions	s covered by the General Rul e or a Special Rul e. (7), (8), or (10) organization can check boxes for both the General Ru	ule and a Special Rule. See			
General Rule					
	n filing Form 990, 990-EZ, or 990-PF that received, during the year, or property) from any one contributor. Complete Parts I and II See contributions				
Special Rules					
regulations under s 13, 16a, or 16b, an	described in section 501(c)(3) filing Form 990 or 990-EZ that met the dections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form details that received from any one contributor, during the year, total continuity the grant on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, li	n 990 or 990-EZ), Part II, line ributions of the greater of (1)			
contributor, during	described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ the year, total contributions of more than \$1,000 exclusively for religinal purposes, or for the prevention of cruelty to children or animals.	ous, charitable, scientific,			
For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000 If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year					
	at isn't covered by the General Rule and/or the Special Rules doesn	't file Schedule B (Form 990,			

Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization Employer identification number 60s Foundation 04-3494831

Part I	Contributors (See instructions). Use duplicate copies of Part I if additional space is needed						
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution				
1	Mary and John Deyst 26 Upland Road Arlington, MA 02474	\$ 10,000	Person Payroli Noncash (Complete Part II for noncash contributions)				
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution				
		s	Person				
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution				
		\$	Person				
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution				
		 \$	Person				
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution				
		\$	Person				
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution				
		\$	Person				

Name of organization

Eos Foundation

Employer identification number

04-3494831

Part I	Noncash Property (See instructions). Use duplicate copies	s of Part II if additional s	pace is needed.
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
a) No. from Part i	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	

Schedule B	(Form 990,	990-EZ.	or 990-PF) (2016
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Schedule B (Form 990, 990-EZ, or 990-PF) (2016)

Name of or	ganization	, , , , , , , , , , , , , , , , , , , 		Employer Identification number		
Eos Found				04-3494831		
Part III	(10) that total more than \$1,000 t	or the year from any ozations completing Part the year. (Enter this info	ne contributor. III, enter the tota mation once	lescribed in section 501(c)(7), (8), or Complete columns (a) through (e) and all of exclusively religious, charitable, etc., See instructions) > \$		
(a) No.						
from Part I	(b) Purpose of gift	(c) Use of	gift	(d) Description of how gift is held		
	Transferee's name, address,	(e) Transfe	_	nship of transferor to transferee		
-						
(a) No. from Part I	(b) Purpose of gift	(c) Use of	gift	(d) Description of how gift is held		
		(e) Transfei	of gift			
-	Transferee's name, address,	and ZIP + 4	Relation	nship of transferor to transferee		
(a) No. from Part i	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held		
			•••••••			
	(e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee					
(a) No. from Part !	(b) Purpose of gift	(c) Use of	gift	(d) Description of how gift is held		
-	(e) Transfer of gift					
<u> </u>	Transferee's name, address, a	nd ZIP + 4	Relation	ship of transferor to transferee		
				•••••••••••••••••••••••••••••••••••••••		

Eos Foundation 04-3494831 Attachment to Form 990-PF 06/30/17

Part 1, Line16. (b) and (c)

Type of Service	Expenses per Books	Net Investment Income	Adjusted Net Income	Charitable Purposes
Accounting (990-PF Prep) & Investment Accounting and bookkeeping	3,950	1,975		1,975

Type of Service	Expenses per Books	Net Investment Income	Adjusted Net Income	Charitable Purposes
Program Consulting	100,080			100,080
Administrative Support	1,460			1,460
Public Relations	7,500			7,500
IT	42,883			42,883
Recruitment	6,918			6,918
Web Design	1,780			1,780
Total Other Professional Fees	160,621			160,621

Part 1, Line 18, taxes - \$6,604

- Penalty for Boston Rising 2014990 EZ 604
- Taxes for Eos 2015 990-PF 6,000

Part I. Line 19 - Fixed Assets & Depreciation - 2,142

Asset Category	Cost	Accumulated Depreciation		Book Value
Furniture and Fixtures	12,618	12,618	-0-	-0-
Computers and Equipment	33,108	33,108	-0-	-0-
Leasehold Improvements	2,292	2,292	-0-	-0-
Total Fixed Assets	48,018	48,018	-0-	-0-

Part 1. Line 23. Other Expenses

Expense	Expenses per Books	Net Investment Income	Adjusted Net Income	Charitable Purposes
Telecommunications	11,466	1,208		10,258
Tech Support	10,835			10,835
Insurance	7,718			7,718
Office Expenses	7,687			7,687
Memberships	2,530			2,530
Payroll Fees	2,419			2,419
Miscellaneous Expenses	6,422			6,422
Total Other Expenses	49,077	1,208	0	47,869

Part II. Line 13 - Investments

Investment	Book Value	Fair Market Value	Basis Reported
Chalkstream	10,504,448	17,740,475	FMV
Investment Fund			
PDT Partners	8,000,000	16,837,351	FMV
Total	18,504,448	34,577,826	FMV

Part II. Line 19 - Fixed Assets & Depreciation

Asset Category	Cost	Accumulated Depreciation		Book Value
Furniture and Fixtures	12,618	12,618	-0-	-0-
Computers and Equipment	33,108	33,108	-0-	-0-
Leasehold Improvements	2,292	2,292	-0-	-0-
Total Fixed Assets	48,018	48,018	-0-	-0-

Part III. Line 3 - Other Increases to Net Assets

Unrealized Gains

4,510,683

Part III. Line 5 - Other Dereases to Net Assets

Realized Loss

27,679