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Form 990-PF

Department of the Treasury
Internal Revenue Service

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

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

Information about Form 990-PF and its instructions is at www.irs.gov/form990pf.

OMB No 1545-0052

2017

Open to Public Inspection

For calendar year 2017, or tax year beginning 01-01-2017, and ending 12-31-2017

Name of foundation
TAMARACK FOUNDATION

Number and street (or P.O. box number if mail is not delivered to street address)
WOODSTOCK SVCS 27 SCHOOL ST NO 200

City or town, state or province, country, and ZIP or foreign postal code
BOSTON, MA 02108

G Check all that apply

☐ Initial return

☐ Initial return of a former public charity

☐ Final return

☐ Amended return

☐ Address change

☐ Name change

H Check type of organization

☒ Section 501(c)(3) exempt private foundation

☐ Section 4947(a)(1) nonexempt charitable trust

☐ Other taxable private foundation

I Fair market value of all assets at end of year (from Part II, col (c), line 16) \$ 864,695

J Accounting method

☒ Cash

☐ Accrual

☐ Other (specify) _____
(Part I, column (d) must be on cash basis)

A Employer identification number
04-6027800

B Telephone number (see instructions)
(617) 227-0600

C If exemption application is pending, check here

D 1. Foreign organizations, check here

2 Foreign organizations meeting the 85% test, check here and attach computation

E If private foundation status was terminated under section 507(b)(1)(A), check here

F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here

Part I

Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions))

	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
Revenue	1 Contributions, gifts, grants, etc., received (attach schedule)	85,592		
	2 Check ☐ if the foundation is not required to attach Sch. B			
	3 Interest on savings and temporary cash investments			
	4 Dividends and interest from securities	713	713	
	5a Gross rents			
	b Net rental income or (loss)			
	6a Net gain or (loss) from sale of assets not on line 10	7,553		
	b Gross sales price for all assets on line 6a	114,392		
	7 Capital gain net income (from Part IV, line 2)		90,972	
	8 Net short-term capital gain			
	9 Income modifications			
	10a Gross sales less returns and allowances			
b Less Cost of goods sold				
c Gross profit or (loss) (attach schedule)				
11 Other income (attach schedule)				
12 Total. Add lines 1 through 11	93,858	91,685		
Operating and Administrative Expenses	13 Compensation of officers, directors, trustees, etc	0	0	0
	14 Other employee salaries and wages			
	15 Pension plans, employee benefits			
	16a Legal fees (attach schedule)			
	b Accounting fees (attach schedule)	5,000	3,333	1,667
	c Other professional fees (attach schedule)	5,014	3,343	1,671
	17 Interest			
	18 Taxes (attach schedule) (see instructions)	3,528	0	0
	19 Depreciation (attach schedule) and depletion			
	20 Occupancy			
	21 Travel, conferences, and meetings			
	22 Printing and publications			
	23 Other expenses (attach schedule)	36	1	35
	24 Total operating and administrative expenses. Add lines 13 through 23	13,578	6,677	3,373
	25 Contributions, gifts, grants paid	82,700		82,700
	26 Total expenses and disbursements. Add lines 24 and 25	96,278	6,677	86,073
27 Subtract line 26 from line 12				
a Excess of revenue over expenses and disbursements	-2,420			
b Net investment income (if negative, enter -0-)		85,008		
c Adjusted net income (if negative, enter -0-)				

For Paperwork Reduction Act Notice, see instructions.

Cat No 11289X

Form 990-PF (2017)

Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions.)		Beginning of year	End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value		
Assets	1 Cash—non-interest-bearing		373	373		
	2 Savings and temporary cash investments	1,731	4,767	4,767		
	3 Accounts receivable ▶ _____ Less allowance for doubtful accounts ▶ _____					
	4 Pledges receivable ▶ _____ Less allowance for doubtful accounts ▶ _____					
	5 Grants receivable					
	6 Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions)					
	7 Other notes and loans receivable (attach schedule) ▶ _____ Less allowance for doubtful accounts ▶ _____					
	8 Inventories for sale or use					
	9 Prepaid expenses and deferred charges					
	10a Investments—U S and state government obligations (attach schedule)					
	b Investments—corporate stock (attach schedule)	33,295	12,048	13,443		
	c Investments—corporate bonds (attach schedule)					
	11 Investments—land, buildings, and equipment basis ▶ _____ Less accumulated depreciation (attach schedule) ▶ _____					
	12 Investments—mortgage loans					
	13 Investments—other (attach schedule)	724,498	739,915	846,112		
	14 Land, buildings, and equipment basis ▶ _____ Less accumulated depreciation (attach schedule) ▶ _____					
15 Other assets (describe ▶ _____)						
16 Total assets (to be completed by all filers—see the instructions Also, see page 1, item I)	759,524	757,103	864,695			
Liabilities	17 Accounts payable and accrued expenses					
	18 Grants payable					
	19 Deferred revenue					
	20 Loans from officers, directors, trustees, and other disqualified persons					
	21 Mortgages and other notes payable (attach schedule)					
	22 Other liabilities (describe ▶ _____)					
	23 Total liabilities (add lines 17 through 22)	0	0			
Net Assets or Fund Balances	Foundations that follow SFAS 117, check here ☐ and complete lines 24 through 26 and lines 30 and 31.					
	24 Unrestricted					
	25 Temporarily restricted					
	26 Permanently restricted					
	Foundations that do not follow SFAS 117, check here ☒ and complete lines 27 through 31.					
	27 Capital stock, trust principal, or current funds	759,524	757,103			
	28 Paid-in or capital surplus, or land, bldg, and equipment fund	0	0			
	29 Retained earnings, accumulated income, endowment, or other funds	0	0			
30 Total net assets or fund balances (see instructions)	759,524	757,103				
31 Total liabilities and net assets/fund balances (see instructions) .	759,524	757,103				

Part III Analysis of Changes in Net Assets or Fund Balances

1 Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)	1	759,524
2 Enter amount from Part I, line 27a	2	-2,420
3 Other increases not included in line 2 (itemize) ▶ _____	3	0
4 Add lines 1, 2, and 3	4	757,104
5 Decreases not included in line 2 (itemize) ▶ _____	5	1
6 Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30 .	6	757,103

Part IV Capital Gains and Losses for Tax on Investment Income

(a) List and describe the kind(s) of property sold (e g , real estate, 2-story brick warehouse, or common stock, 200 shs MLC Co)	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
1a See Additional Data Table			
b			
c			
d			
e			

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
a See Additional Data Table			
b			
c			
d			
e			

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	
a See Additional Data Table			
b			
c			
d			
e			

2 Capital gain net income or (net capital loss) { If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 }	2	90,972
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6) If gain, also enter in Part I, line 8, column (c) (see instructions) If (loss), enter -0- in Part I, line 8	3	

Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income)

If section 4940(d)(2) applies, leave this part blank

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? ☐ Yes ☒ No

If "Yes," the foundation does not qualify under section 4940(e) Do not complete this part

1 Enter the appropriate amount in each column for each year, see instructions before making any entries

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col (b) divided by col (c))
2016	143,755	818,278	0 175680
2015	176,433	844,140	0 209009
2014	196,854	847,825	0 232187
2013	153,525	833,099	0 184282
2012	123,763	812,142	0 152391
2 Total of line 1, column (d)			2 0 953549
3 Average distribution ratio for the 5-year base period—divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years			3 0 190710
4 Enter the net value of noncharitable-use assets for 2017 from Part X, line 5			4 797,805
5 Multiply line 4 by line 3			5 152,149
6 Enter 1% of net investment income (1% of Part I, line 27b)			6 850
7 Add lines 5 and 6			7 152,999
8 Enter qualifying distributions from Part XII, line 4			8 86,073

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate See the Part VI instructions

Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see instructions)

1a	Exempt operating foundations described in section 4940(d)(2), check here ☐ and enter "N/A" on line 1 Date of ruling or determination letter _____ (attach copy of letter if necessary—see instructions)		
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here ☐ and enter 1% of Part I, line 27b	1	1,700
c	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col (b)		
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2	0
3	Add lines 1 and 2.	3	1,700
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4	0
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5	1,700
6	Credits/Payments		
a	2017 estimated tax payments and 2016 overpayment credited to 2017	6a	3,000
b	Exempt foreign organizations—tax withheld at source	6b	
c	Tax paid with application for extension of time to file (Form 8868)	6c	
d	Backup withholding erroneously withheld	6d	0
7	Total credits and payments. Add lines 6a through 6d.	7	3,000
8	Enter any penalty for underpayment of estimated tax. Check here ☒ if Form 2220 is attached	8	1
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9	
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10	1,299
11	Enter the amount of line 10 to be Credited to 2018 estimated tax ☐ 1,299 Refunded ☐	11	0

Part VII-A Statements Regarding Activities

	Yes	No
1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?	1a	No
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for definition)? <i>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</i>	1b	No
c Did the foundation file Form 1120-POL for this year?	1c	No
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year (1) On the foundation ☐ \$ 0 (2) On foundation managers ☐ \$ 0		
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers ☐ \$ 0		
2 Has the foundation engaged in any activities that have not previously been reported to the IRS? <i>If "Yes," attach a detailed description of the activities</i>	2	No
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? <i>If "Yes," attach a conformed copy of the changes</i>	3	No
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a	No
b If "Yes," has it filed a tax return on Form 990-T for this year?	4b	
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? <i>If "Yes," attach the statement required by General Instruction T</i>	5	No
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?	6	Yes
7 Did the foundation have at least \$5,000 in assets at any time during the year? <i>If "Yes," complete Part II, col (c), and Part XV</i>	7	Yes
8a Enter the states to which the foundation reports or with which it is registered (see instructions) ☐ MA		
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? <i>If "No," attach explanation</i> .	8b	Yes
9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2017 or the taxable year beginning in 2017 (see instructions for Part XIV)? <i>If "Yes," complete Part XIV</i>	9	No
10 Did any persons become substantial contributors during the tax year? <i>If "Yes," attach a schedule listing their names and addresses</i>	10	No

Part 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 meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions).	11		No
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		No
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address N/A	13	Yes	
14	The books are in care of WOODSTOCK SERVICES CO LLC Telephone no (617) 227-0600			

Located at **27 SCHOOL STREET BOSTON MA** ZIP+4 **02108**

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 2017, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? See instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). If "Yes," enter the name of the foreign country ▶	16	Yes	No

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required

File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.

1a	During the year did the foundation (either directly or indirectly)		Yes	No
(1)	Engage in the sale or exchange, or leasing of property with a disqualified person? ☐ Yes ☒ No			
(2)	Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? ☐ Yes ☒ No			
(3)	Furnish goods, services, or facilities to (or accept them from) a disqualified person? ☐ Yes ☒ No			
(4)	Pay compensation to, or pay or reimburse the expenses of, a disqualified person? ☐ Yes ☒ No			
(5)	Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? ☐ Yes ☒ No			
(6)	Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days). ☐ Yes ☒ No			
b	If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)? ☐ 1b			
c	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2017? ☐ 1c			No
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5))			
a	At the end of tax year 2017, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2017? ☐ Yes ☒ No If "Yes," list the years ▶ 20____, 20____, 20____, 20____			
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement—see instructions). ☐ 2b			
c	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here ▶ 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? ☐ Yes ☒ No			
b	If "Yes," did it have excess business holdings in 2017 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2017). ☐ Yes ☒ No 3b			
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? 4a			No
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2017? 4b			No

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

5a	During the year did the foundation pay or incur any amount to				
	(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?	☐ Yes ☒ No			
	(2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive?	☐ Yes ☒ No			
	(3) Provide a grant to an individual for travel, study, or other similar purposes?	☐ Yes ☒ No			
	(4) Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? (see instructions).	☐ Yes ☒ No			
	(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?	☐ Yes ☒ No			
b	If any answer is "Yes" to 5a(1)–(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)?		5b		
	Organizations relying on a current notice regarding disaster assistance check here.	☐			
c	If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?	☐ Yes ☐ No			
	<i>If "Yes," attach the statement required by Regulations section 53.4945–5(d)</i>				
6a	Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	☐ Yes ☒ No			
b	Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		6b	No	
	<i>If "Yes" to 6b, file Form 8870</i>				
7a	At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?	☐ Yes ☒ No			
b	If yes, did the foundation receive any proceeds or have any net income attributable to the transaction?		7b		

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

1 List all officers, directors, trustees, foundation managers and their compensation (see instructions).				
(a) Name and address	Title, and average hours per week (b) devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	Expense account, (e) other allowances
WILLIAM H DARLING	TRUSTEE	0	0	0
AGAWAM TRUST MGMT 27 SCHOOL ST BOSTON, MA 02108	1 00			
HENRY P PHIPPEN	TRUSTEE	0	0	0
AGAWAM TRUST MGMT 27 SCHOOL ST BOSTON, MA 02108	2 00			
2 Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, enter "NONE."				
(a) Name and address of each employee paid more than \$50,000	Title, and average hours per week (b) devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	Expense account, (e) other allowances
NONE				
Total number of other employees paid over \$50,000.				0
3 Five highest-paid independent contractors for professional services (see instructions). If none, enter "NONE."				
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation		
NONE				
Total number of others receiving over \$50,000 for professional services.				0

Part IX-A Summary of Direct Charitable Activities

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1	
2	
3	
4	

Part IX-B Summary of Program-Related Investments (see instructions)

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

Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.)

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes		
a	Average monthly fair market value of securities.	1a	803,774
b	Average of monthly cash balances.	1b	6,180
c	Fair market value of all other assets (see instructions).	1c	0
d	Total (add lines 1a, b, and c).	1d	809,954
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation).	1e	0
2	Acquisition indebtedness applicable to line 1 assets.	2	0
3	Subtract line 2 from line 1d.	3	809,954
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions).	4	12,149
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	797,805
6	Minimum investment return. Enter 5% of line 5.	6	39,890

Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here ☐ and do not complete this part.)

1	Minimum investment return from Part X, line 6.	1	39,890
2a	Tax on investment income for 2017 from Part VI, line 5.	2a	1,700
b	Income tax for 2017 (This does not include the tax from Part VI).	2b	
c	Add lines 2a and 2b.	2c	1,700
3	Distributable amount before adjustments. Subtract line 2c from line 1.	3	38,190
4	Recoveries of amounts treated as qualifying distributions.	4	0
5	Add lines 3 and 4.	5	38,190
6	Deduction from distributable amount (see instructions).	6	0
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1.	7	38,190

Part XII Qualifying Distributions (see instructions)

1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
a	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26.	1a	86,073
b	Program-related investments—total from Part IX-B.	1b	0
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes.	2	
3	Amounts set aside for specific charitable projects that satisfy the		
a	Suitability test (prior IRS approval required).	3a	
b	Cash distribution test (attach the required schedule).	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	86,073
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b (see instructions).	5	0
6	Adjusted qualifying distributions. Subtract line 5 from line 4.	6	86,073

Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years.

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2016	(c) 2016	(d) 2017
1 Distributable amount for 2017 from Part XI, line 7				38,190
2 Undistributed income, if any, as of the end of 2017				
a Enter amount for 2016 only.			0	
b Total for prior years 20____, 20____, 20____		0		
3 Excess distributions carryover, if any, to 2017				
a From 2012.	15,501			
b From 2013.	114,614			
c From 2014.	157,931			
d From 2015.				
e From 2016.	115,057			
f Total of lines 3a through e.	403,103			
4 Qualifying distributions for 2017 from Part XII, line 4 ▶ \$ 86,073				
a Applied to 2016, but not more than line 2a			0	
b Applied to undistributed income of prior years (Election required—see instructions).		0		
c Treated as distributions out of corpus (Election required—see instructions).	0			
d Applied to 2017 distributable amount.				38,190
e Remaining amount distributed out of corpus	47,883			
5 Excess distributions carryover applied to 2017 (If an amount appears in column (d), the same amount must be shown in column (a))	0			0
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	450,986			
b Prior years' undistributed income Subtract line 4b from line 2b		0		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed.		0		
d Subtract line 6c from line 6b Taxable amount—see instructions		0		
e Undistributed income for 2016 Subtract line 4a from line 2a Taxable amount—see instructions			0	
f Undistributed income for 2017 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2018				0
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions).	0			
8 Excess distributions carryover from 2012 not applied on line 5 or line 7 (see instructions).	15,501			
9 Excess distributions carryover to 2018. Subtract lines 7 and 8 from line 6a	435,485			
10 Analysis of line 9				
a Excess from 2013.	114,614			
b Excess from 2014.	157,931			
c Excess from 2015.				
d Excess from 2016.	115,057			
e Excess from 2017.	47,883			

b Check box to indicate whether the organization is a private operating foundation described in section ☐ 4942(j)(3) or ☐ 4942(j)(5)Form **990-PF** (2017)

Part XV **Supplementary Information** (continued)**3 Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i> See Additional Data Table				
Total			3a	82,700
b <i>Approved for future payment</i>				
Total			3b	0

Enter gross amounts unless otherwise indicated

Enter gross amounts unless otherwise indicated		Unrelated business income		Excluded by section 512, 513, or 514		(e) Related or exempt function income (See instructions)
	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount		
1 Program service revenue						
a _____						
b _____						
c _____						
d _____						
e _____						
f _____						
g Fees and contracts from government agencies						
2 Membership dues and assessments.						
3 Interest on savings and temporary cash investments						
4 Dividends and interest from securities.			14	713		
5 Net rental income or (loss) from real estate						
a Debt-financed property.						
b Not debt-financed property.						
6 Net rental income or (loss) from personal property						
7 Other investment income.						
8 Gain or (loss) from sales of assets other than inventory			18	7,553		
9 Net income or (loss) from special events						
10 Gross profit or (loss) from sales of inventory						
11 Other revenue a _____						
b _____						
c _____						
d _____						
e _____						
12 Subtotal Add columns (b), (d), and (e). . .		0		8,266		0
13 Total. Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify calculations)			13	8,266		8,266

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

[illegible]

Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

		Yes	No
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--	--	--

1a(1)		No
1a(2)		No

--	--	--

1b(1)	No
--------------	-----------

1b(2)		No
--------------	--	-----------

1b(3)		No
--------------	--	-----------

1b(4)		No
--------------	--	-----------

1b(5)		No
--------------	--	-----------

1b(6)		No
--------------	--	-----------

1c		No
----	--	----

value
ue

[illegible]

described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? ☐ Yes ☒ No

(a) Name of organization	(b) Type of organization	(c) Description of relationship

**Sign
Here**

* * * * *

Title

(see instr)? ☒ Yes ☐ No

Form **990-PF** (2017)

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d			
List and describe the kind(s) of property sold (e g , real estate, (a) 2-story brick warehouse, or common stock, 200 shs MLC Co)	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
10 SHS UNITED TECHNOLOGIES CORP	D	2014-08-12	2017-06-05
5 SHS UNITED TECHNOLOGIES CORP	D	2014-08-12	2017-07-10
2 SHS ALPHABET INC CAP STK CL C	D	2009-07-09	2017-01-17
1 SHS ALPHABET INC CAP STK CL C	D	2009-07-09	2017-06-07
1 SHS ALPHABET INC CAP STK CL C	D	2009-07-09	2017-07-10
10 SHS BERKSHIRE HATHAWAY INC CL B	P	2015-03-27	2017-06-05
3 SHS BERKSHIRE HATHAWAY INC CL B	P	2015-03-27	2017-07-10
30 SHS BP PLC SPONS ADR	D	1988-03-03	2017-06-05
25 SHS BP PLC SPONS ADR	D	1988-03-03	2017-07-10
25 SHS CISCO SYSTEM INC	D	2003-02-14	2017-06-05

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
1,210		1,050	160
614		525	89
1,605		412	1,193
983		206	777
927		206	721
1,665		1,436	229
513		431	82
1,082		679	403
859		566	293
793		337	456

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - l

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	
			160
			89
			1,193
			777
			721
			229
			82
			403
			293
			456

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d			
List and describe the kind(s) of property sold (e g , real estate, (a) 2-story brick warehouse, or common stock, 200 shs MLC Co)	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
150 SHS COMCAST CORP NEW CL A	D	1993-04-12	2017-11-16
15 SHS CVS HEALTH CORP	D	2017-06-05	2017-06-05
15 SHS EXXON MOBIL CORP	P	2017-06-05	2017-06-05
25 SHS GENERAL ELECTRIC CO	D	1951-06-06	2017-06-05
55 SHS HANESBRANDS INC	D	2009-02-26	2017-06-05
40 SHS HANESBRANDS INC	D	2009-02-25	2017-07-10
22 SHS INTUITIVE SURGICAL INC	D	2009-07-09	2017-06-02
7 SHS INTUITIVE SURGICAL INC	D	2009-07-09	2017-11-07
25 SHS JOHNSON & JOHNSON	D	1991-02-05	2017-11-07
75 SHS JOHNSON & JOHNSON	D	1981-02-05	2017-11-16

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h

(e) Gross sales price	Depreciation allowed (f) (or allowable)	Cost or other basis (g) plus expense of sale	Gain or (loss) (h) (e) plus (f) minus (g)
5,621		275	5,346
1,181		274	907
1,202		866	336
700		3	697
1,171		81	1,090
925		59	866
20,289		3,177	17,112
2,712		337	2,375
3,488		50	3,438
10,422		150	10,272

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - l

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(I) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
(i) F M V as of 12/31/69	Adjusted basis (j) as of 12/31/69	Excess of col (i) (k) over col (j), if any	
			5,346
			907
			336
			697
			1,090
			866
			17,112
			2,375
			3,438
			10,272

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d			
List and describe the kind(s) of property sold (e g , real estate, (a) 2-story brick warehouse, or common stock, 200 shs MLC Co)	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
10 SHS MEDTRONIC PLC	P	2015-01-27	2017-01-17
10 SHS MEDTRONIC PLC	P	2015-01-27	2017-06-05
5 SHS MEDTRONIC PLC	P	2015-01-27	2017-07-10
20 SHS MERCK & CO INC	P	2011-10-31	2017-01-17
10 SHS MERCK & CO INC	P	2011-10-31	2017-06-05
15 SHS MICROSOFT CORP	D	1994-02-23	2017-06-05
10 SHS MICROSOFT CORP	D	1994-02-23	2017-10-11
175 SHS MICROSOFT CORP	D	1997-11-13	2017-11-16
10 SHS PEPSICO INC	P	1997-10-20	2017-06-05
5 SHS PEPSICO INC	P	1997-10-20	2017-07-10

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h

(e) Gross sales price	Depreciation allowed (f) (or allowable)	Cost or other basis (g) plus expense of sale	Gain or (loss) (h) (e) plus (f) minus (g)
756		741	15
859		741	118
437		371	66
1,227		699	528
651		350	301
1,086		38	1,048
762		25	737
14,544		2,849	11,695
1,179		384	795
576		192	384

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - l

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(I) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
(i) F M V as of 12/31/69	Adjusted basis (j) as of 12/31/69	Excess of col (i) (k) over col (j), if any	
			15
			118
			66
			528
			301
			1,048
			737
			11,695
			795
			384

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d			
List and describe the kind(s) of property sold (e.g., real estate, (a) 2-story brick warehouse, or common stock, 200 shs MLC Co.)	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
60 SHS PFIZER INC	D	1972-06-30	2017-01-17
20 SHS PFIZER INC	D	1972-06-30	2017-06-05
214 SHS PFIZER INC	D	1972-06-30	2017-11-03
31 SHS PFIZER INC	D	1972-06-30	2017-11-03
15 SHS STATE STREET CORP	P	1999-12-22	2017-06-05
5 SHS STATE STREET CORP	P	1999-12-22	2017-07-10
5 SHS STATE STREET CORP	P	1999-12-22	2017-10-11
250 SHS VERSUM MATERIALS INC	D	2010-03-04	2017-12-08
120 SHS WALMART STORES INC	D	1991-09-24	2017-11-16

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
1,918		54	1,864
647		18	629
7,580		193	7,387
1,098		27	1,071
1,246		529	717
457		176	281
496		176	320
9,224		3,258	5,966
11,687		1,479	10,208

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - l

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col. (h))
(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any	
			1,864
			629
			7,387
			1,071
			717
			281
			320
			5,966
			10,208

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
BOSTON SYMPHONY ORCHESTRA 301 MASSACHUSETTS AVE BOSTON, MA 02115	NONE	NONE	EDUCATIONAL	500
BOY'S TOWN JERUSALEM 1 PENN PLAZA 9 NEW YORK, NY 10119	NONE	NONE	EDUCATIONAL	300
BROOKWOOD SCHOOL 1 BROOKWOOD RD MANCHESTER, MA 01944	NONE	NONE	SOCIAL	100
CHABAD LUBAVITCH44 BURRILL STREET SWAMPSCOTT, MA 01907	NONE	NONE	RELIGIOUS	10,000
COLLEGE BOUND DORCHESTER 18 SAMOSET ST DORCHESTER, MA 02124	NONE	NONE	EDUCATIONAL	3,000
Total ► 3a				82,700

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
EMERALD MOUNTAIN SCHOOL 818 OAK ST STEAMBOAT SPRINGS, CO 80487	NONE	NONE	EDUCATIONAL	1,000
FAMILY & CHILDREN'S SERVICES OF GREATER LYNN 111 NORTH COMMON ST LYNN, MA 01902	NONE	NONE	SOCIAL	3,000
FRONTIER NURSING SERVICES 132 FRONTIER NURSING SERVICE DR WENDOVER, KY 41775	NONE	NONE	MEDICAL	4,000
GIRL'S INC50 HIGH STREET LYNN, MA 01902	NONE	NONE	EDUCATIONAL	8,000
CIRCLE OF CONCERN 112 SAINT LOUIS AVE VALLEY PARK, MO 63088	NONE	NONE	HEALTH	2,000
Total ▶ 3a				82,700

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
HIPPOCRATES1466 HIPPOCRATES WAY WEST PALM BEAC, FL 33411	NONE	NONE	HEALTH	1,000
LAHEY HOSPITAL41 MALL ROAD BURLINGTON, MA 01805	NONE	NONE	MEDICALMEDICAL	200
LAKE FOREST COLLEGE 555 N SHERIDAN RD LAKE FOREST, IL 60045	NONE	NONE	EDUCATIONAL	100
EPWORTH CHILDREN AND FAMILY SERVICES 110 N ELM AVE WEBSTER GROVES, MO 63119	NONE	NONE	EDUCATIONAL	1,500
MASSACHUSETTS GENERAL HOSPITAL 55 FRUIT ST BOSTON, MA 02114	NONE	NONE	MEDICAL	1,200
Total ▶ 3a				82,700

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
MCLEAN HOSPITAL115 MILL ST BELMONT, MA 02478	NONE	NONE	MEDICAL	2,800
NATURE CONSERVANCY99 BEDFORD ST BOSTON, MA 02111	NONE	NONE	EDUCATIONAL	500
NEW ENGLAND HISTORICAL GENEALOGICAL SOCIETY 99 - 101 NEWBURY ST BOSTON, MA 02116	NONE	NONE	EDUCATIONAL	2,000
NORTH SHORE MEDICAL CENTER 81 HIGHLAND AVE SALEM, MA 01970	NONE	NONE	MEDICAL	200
NORTH WEST COLORADO VISITING NURSE ASSOC 745 RUSSELL ST CRAIG, CO 81625	NONE	NONE	MEDICAL	500
Total ▶ 3a				82,700

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
PINGREE SCHOOL537 HIGHLAND ST HAMILTON, MA 01982	NONE	NONE	EDUCATIONAL	600
PLUMMER HOME FOR BOYS 35 WINTER ISLAND RD SALEM, MA 01970	NONE	NONE	SOCIAL	2,100
QUEBEC LABRADOR FOUNDATION 55 SOUTH MAIN ST IPSWICH, MA 01938	NONE	NONE	EDUCATIONAL	200
ROUTT COUNTY UNITED WAY PO BOX 774005 STEAMBOAT SPRINGS, CO 80477	NONE	NONE	SOCIAL	500
SEWPपोर्टIVE FRIENDSPO BOX 5223 BEVERLY FARMS, MA 01915	NONE	NONE	SOCIAL	200
Total ▶ 3a				82,700

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
SIMMONS COLLEGE300 THE FENWAY BOSTON, MA 02115	NONE	NONE	EDUCATIONAL	300
ST JOHN THE BAPTIST PARISH 19 CHESTNUT ST PEABODY, MA 01960	NONE	NONE	RELIGIOUS	20,000
STEAMBOAT MOUNTAIN SCHOOL 42605 CO RD 36 STEAMBOAT SPRINGS, CO 80487	NONE	NONE	EDUCATIONAL	1,000
TANGLEWOOD279 WEST STREET LENOX, MA 01240	NONE	NONE	SOCIALEDUCATIONALSOCIAL	200
TEMPLE EMANU-ELONE EAST 65TH ST NEW YORK, NY 10065	NONE	NONE	RELIGIOUS	1,000
Total 3a				82,700

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
TOWER SCHOOL75 WEST SHORE DR MARBLEHEAD, MA 01945	NONE	NONE	EDUCATIONAL	100
TRUSTEES OF RESERVATIONS 572 ESSEX ST BEVERLY, MA 01915	NONE	NONE	EDUCATIONAL	500
UNITARIAN UNIVERSALIST CHURCH OF GREATER LYNN 101 FOREST AVE SWAMPSCOTT, MA 01907	NONE	NONE	RELIGIOUS	1,000
UNITARIAN UNIVERSALIST CHURCH OF SWAMPSCOTT 101 FOREST AVE SWAMPSCOTT, MA 01907	NONE	NONE	RELIGIOUS	1,500
UNIVERSITY OF VERMONT 85 S PROSPECT ST BURLINGTON, VT 05405	NONE	NONE	EDUCATIONAL	500
Total ▶ 3a				82,700

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
WGBH CHANNEL 2ONE GUEST ST BOSTON, MA 02135	NONE	NONE	EDUCATIONAL	1,000
WGBH RADIOONE EAST 65TH ST BOSTON, MA 02135	NONE	NONE	EDUCATIONAL	100
AMERICAN CANCER SOCIETY 25 STUART ST BOSTON, MA 02110	NONE	NONE	HEALTH	1,000
AMERICAN RED CROSSPO BOX 37839 BOONE, IA 500370839	NONE	NONE	SOCIAL	500
KINGDOM HOUSE1321 S 11TH ST ST LOUIS, MO 63104	NONE	NONE	EDUCATIONAL	1,500
Total ▶ 3a				82,700

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
BEYOND PESTICIDES 701 E ST SE SUITE 200 WASHINGTON, DC 20003	NONE	NONE	HEALTH	1,000
UNICEF18 TREMONT ST SUITE 820 BOSTON, MA 02108	NONE	NONE	HEALTH	500
HUMANE SOCIETY OF MISSOURI 1201 MACKLIND AVE ST LOUIS, MO 63110	NONE	NONE	SOCIAL	2,000
ST LOUIS CHILDREN'S HOSPITAL 1 CHILDRENS PLACE ST LOUIS, MO 63110	NONE	NONE	MEDICAL	1,500
OPERATION FOOD SEARCH 6282 OLIVE BLVD ST LOUIS, MO 63130	NONE	NONE	HEALTH	2,000
Total ▶ 3a				82,700

TY 2017 Accounting Fees Schedule**Name:** TAMARACK FOUNDATION**EIN:** 04-6027800**Accounting Fees Schedule**

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
ACCOUNTING FEES	5,000	3,333		1,667

TY 2017 Distribution from Corpus Election

Name: TAMARACK FOUNDATION

EIN: 04-6027800

Election: TAMARACK FOUNDATION 04-6027800 ATTACHMENT TO FORM 990 PF 2016 IN ACCORDANCE WITH SECTIONS 4942 (H)(2) AND REG.53.4942(A)-3(D)(2) OF THE IRC OF 1986 AS AMENDED, TAMARACK FOUNDATION HEREBY ELECTS TO TREAT CERTAIN CURRENT YEAR QUALIFYING DISTRIBUTIONS IN EXCESS OF THE PRECEDING TAX YEAR'S UNDISTRIBUTED INCOME AS BEING MADE FROM CORPUS. IN 2016 THE FOUNDATION RECEIVED \$115057 IN CONTRIBUTIONS OF CASH AND SECURITIES FROM INDIVIDUALS. THE FOUNDATION'S DISTRIBUTABLE AMOUNT FOR 2016 WAS \$38086. THE FOUNDATION MADE QUALIFYING DISTRIBUTIONS IN 2016 IN THE AMOUNT OF \$143755. DISTRIBUTIONS OUT OF CORPUS (TO WHICH THIS ELECTION APPLIES) WITH RESPECT TO 2016 CONTRIBUTIONS RECEIVED TO SATISFY THE REQUIREMENTS OF SECTION 170 (B)(1)(F) AND 4942 (G)(3) WERE \$115057. THE AMOUNT OF QUALIFYING DISTRIBUTIONS APPLIED TO THE 2016 DISTRIBUTABLE AMOUNT TOTALED \$28698. EXCESS DISTRIBUTION CARRYOVER APPLIED TO THE 2016 DISTRIBUTABLE AMOUNT TOTALED \$9388. EXCESS DISTRIBUTIONS CARRYOVER TO 2017 TOTALED \$403103

TY 2017 Investments Corporate Stock Schedule**Name:** TAMARACK FOUNDATION**EIN:** 04-6027800

Name of Stock	End of Year Book Value	End of Year Fair Market Value
10 SHS EXXON MOBIL CORP	576	836
5 SHS STATE STREET CORP	185	488
15 SHS BP PLC SPONS ADR	697	630
25 SHS CISCO SYSTEMS INC	542	958
10 SHS CVS HEALTH CORP	251	725
5 SHS MEDTRONIC	375	404
10 SHS PEPSICO INC	811	1,199
44 SHS PORCUPINE LAND ASSOC	2,200	0
35 SHS GENERAL ELECTRIC CO	1,053	611
25 SHS HANESBRANDS INC	464	523
10 SHS MICROSOFT CORP	821	855
5 SHS O'REILLY AUTOMOTIVE	285	1,203
15 SHS MERCK & CO	524	844
5 SHS UNITED TECHNOLOGIES CORP	546	638
1 SHS ALPHABET INC CL C	585	1,046
7 SHS BERKSHIRE HATHAWAY INC-CL B	1,005	1,388
3 SHS INTUITIVE SURGICAL INC	1,128	1,095

TY 2017 Investments - Other Schedule

Name: TAMARACK FOUNDATION

EIN: 04-6027800

Investments Other Schedule 2

Category/ Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value
NORTHWESTERN MUTUAL LIFE INS. POLICY-500M	AT COST	739,915	846,112

TY 2017 Other Decreases Schedule

Name: TAMARACK FOUNDATION
EIN: 04-6027800

Description	Amount
ROUNDING ADJUSTMENT	1

TY 2017 Other Expenses Schedule**Name:** TAMARACK FOUNDATION**EIN:** 04-6027800**Other Expenses Schedule**

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
MASS PC ANNUAL FILING FEE	35	0		35
BP PLC SPONS ADR ISSURER FEE	1	1		0

TY 2017 Other Professional Fees Schedule**Name:** TAMARACK FOUNDATION**EIN:** 04-6027800

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
TRUSTEES/INVESTMENT MANAGEMENT FEES	5,014	3,343		1,671

TY 2017 Taxes Schedule**Name:** TAMARACK FOUNDATION**EIN:** 04-6027800

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
FEDERAL PVT FOUNDATION EXCISE TAX	3,528	0		0

Schedule B (Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service	Schedule of Contributors ▶ Attach to Form 990, 990-EZ, or 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 2017
	Name of the organization TAMARACK FOUNDATION	Employer identification number 04-6027800

Organization type (check one)

Filers of:	Section:
Form 990 or 990-EZ	☐ 501(c)() (enter number) organization
	☐ 4947(a)(1) nonexempt charitable trust not treated as a private foundation
	☐ 527 political organization
Form 990-PF	☒ 501(c)(3) exempt private foundation
	☐ 4947(a)(1) nonexempt charitable trust treated as a private foundation
	☐ 501(c)(3) taxable private foundation

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

General Rule

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

Special Rules

☐ For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33¹/₃% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.

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

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

Caution. An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Form 990PF, 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 TAMARACK FOUNDATION	Employer identification number 04-6027800
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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
<u>1</u>	JEANNETTE MCGINN WOODSTOCK SVCS CO LLC 27 SCHOOL ST BOSTON, MA02108	\$ 29,189	Person ☐ Payroll ☐ Noncash ☒ (Complete Part II for noncash contributions)
<u>2</u>	ESTHER D MULROY WOODSTOCK SVCS CO LLC 27 SCHOOL ST BOSTON, MA02108	\$ 30,615	Person ☐ Payroll ☐ Noncash ☒ (Complete Part II for noncash contributions)
<u>3</u>	SARAH PRUETT WOODSTOCK SVCS CO LLC 27 SCHOOL ST BOSTON, MA02108	\$ 7,557	Person ☐ Payroll ☐ Noncash ☒ (Complete Part II for noncash contributions)
<u>4</u>	ROBERT F PRUETT WOODSTOCK SVCS CO LLC 27 SCHOOL ST BOSTON, MA02108	\$ 7,260	Person ☐ Payroll ☐ Noncash ☒ (Complete Part II for noncash contributions)
<u>5</u>	KATHY D WALKER WOODSTOCK SVCS CO LLC 27 SCHOOL ST BOSTON, MA02108	\$ 10,971	Person ☐ Payroll ☐ Noncash ☒ (Complete Part II for noncash contributions)
<u> </u>		\$	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions)

Name of organization TAMARACK FOUNDATION	Employer identification number 04-6027800
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Part II **Noncash Property** (See instructions) Use duplicate copies of Part II if additional space is needed

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

Name of organization TAMARACK FOUNDATION	Employer identification number 04-6027800
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Part III	Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once. See instructions.) ► \$ _____ Use duplicate copies of Part III if additional space is needed
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(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	_____	_____	_____
	_____	_____	_____
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4	Relationship of transferor to transferee	
	_____	_____	_____
	_____	_____	_____
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4	Relationship of transferor to transferee	
	_____	_____	_____
	_____	_____	_____
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4	Relationship of transferor to transferee	
	_____	_____	_____
	_____	_____	_____
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4	Relationship of transferor to transferee	
	_____	_____	_____
	_____	_____	_____
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4	Relationship of transferor to transferee	
	_____	_____	_____
	_____	_____	_____
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4	Relationship of transferor to transferee	
	_____	_____	_____
	_____	_____	_____
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4	Relationship of transferor to transferee	
	_____	_____	_____
	_____	_____	_____
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4	Relationship of transferor to transferee	

Additional Data

Software ID:

Software Version:

EIN: 04-6027800

Name: TAMARACK FOUNDATION

Form 990 Schedule B, Part II - Noncash Property (see Instructions) Use duplicate copies of Part II if additional space is needed

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
<u>1</u>	250 SHS VERSUM MATERIALS INCCUSIP#92532W103	<u>\$ 9,047</u>	<u>2017-12-05</u>
<u>1</u>	22 SHS INTUITIVE SURGICAL INC NEW CUSIP#46120E602	<u>\$ 20,142</u>	<u>2017-06-01</u>
<u>2</u>	150 SHS COMCAST NEW CL ACUSIP#20030N101	<u>\$ 5,525</u>	<u>2017-11-14</u>
<u>2</u>	75 SHS JOHNSON & JOHNSONCUSIP#478160104	<u>\$ 10,470</u>	<u>2017-11-14</u>
<u>2</u>	175 SHS MICROSOFT CORPCUSIP#594918104	<u>\$ 14,620</u>	<u>2017-11-14</u>
<u>3</u>	214 SHS PFIZER INCCUSIP#717081103	<u>\$ 7,557</u>	<u>2017-11-02</u>
<u>4</u>	10 SHS INTUITIVE SURGICAL INC NEWCUSIP#46120E602	<u>\$ 3,761</u>	<u>2017-11-02</u>
<u>4</u>	25 SHS JOHNSON & JOHNSONCUSIP#478160104	<u>\$ 3,499</u>	<u>2017-11-02</u>
<u>5</u>	120 SHS WALMART STORES INC CUSIP#931142103	<u>\$ 10,971</u>	<u>2017-11-13</u>