DLN: 93491074005048

OMB No 1545-0052

Return of Private Foundation

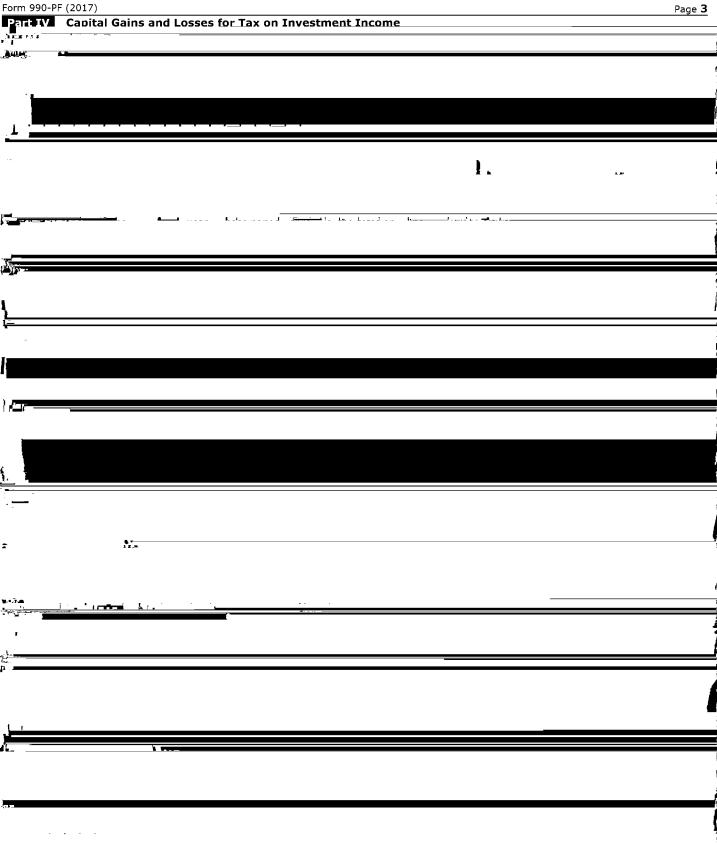
Form 990-PF Department of the Treasury Internal Revenue Service

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. 2017

Open to Public Inspection

For calendar year 2017, or tax year beginning 01-01-2017 Name of foundation	, and ending 12-31-2017 A Employer Identification number
NAME OF TOUNDATION KATHLEEN & RONALD J JACKSON FOUNDATION	04-6762777
Number and street (or P O box number if mail is not delivered to street address) Ro PO BOX 170	pom/suite B Telephone number (see instructions)
	(978) 376-3935
City or town, state or province, country, and ZIP or foreign postal code PRIDES CROSSING, MA 01965	C If exemption application is pending, check here
G Check all that apply	D 1. Foreign organizations, check here 2 Foreign organizations meeting the 85%
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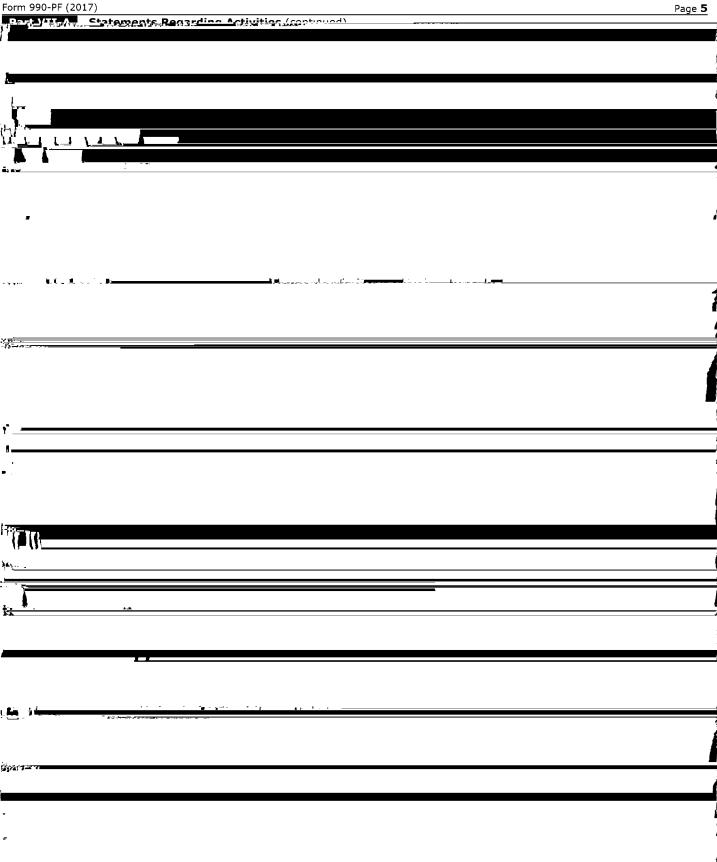
For	m 990-	-PF (2017)			Page 2
Pa	rt II	Balance Sheets Attached schedules and amounts in the description column	Beginning of year		f year
	1	should be for end-of-year amounts only (See instructions) Cash—non-interest-bearing	(a) Book Value 184,546	(b) Book Value 151,035	(c) Fair Market Value 151,035
		Savings and temporary cash investments	184,540	131,033	131,033
	2	Accounts receivable			
	3	Less allowance for doubtful accounts			
	4	Pledges receivable ►			
4		less allowance for doubtful accounts	1		l
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		•			
		Foundations that follow SFAS 117, check here			
es		and complete lines 24 through 26 and lines 30 and 31.			
in C	24	Unrestricted			
9	25	Temporarily restricted			
B B	26	Permanently restricted			
or Fund Balances	- 0	·			
Ľ.		Foundations that do not follow SFAS 117, check here			
0		and complete lines 27 through 31.			
Assets	27	Capital stock, trust principal, or current funds	2,210,033	2,210,033	
455	28	Paid-in or capital surplus, or land, bldg , and equipment fund	0	0	
Net /	29	Retained earnings, accumulated income, endowment, or other funds	507,514	681,910	
ž	30	Total net assets or fund balances (see instructions)	2,717,547	2,891,943	
	31	Total liabilities and net assets/fund balances (see instructions) .	2,717,547	2,891,943	
Pa	rt III	Analysis of Changes in Net Assets or Fund Balances	<u> </u>		



	990-PF (2017)		\	F	Page 4
Par	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see inst	ructio	ns)		
La	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	1		ŗ	5,090
	here ▶ ☑ and enter 1% of Part I, line 27b				
c	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, col (b)				
2		2			C
3		3			5,090
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	5		į	5,090
6	Credits/Payments				
а	2017 estimated tax payments and 2016 overpayment credited to 2017 6a 4,800				
b	Exempt foreign organizations—tax withheld at source 6b				
С	Tax paid with application for extension of time to file (Form 8868) 6c				
d	Backup withholding erroneously withheld 6d				
7	Total credits and payments Add lines 6a through 6d	7		4	4,800
8	Enter any penalty for underpayment of estimated tax. Check here	8			C
9		9			290
.0	taran da antara da a	10			230
.1		11			
	t VII-A Statements Regarding Activities				
	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did			Yes	No
	it participate or intervene in any political campaign?		. 1a	103	No
h	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions	• •	· 		110
_	for definition)?		1 _b		No
	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	Did the foundation file Form 1120-POL for this year?		10		No
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year	•	1		110
_	(1) On the foundation ▶ \$ 0 (2) On foundation managers ▶ \$ 0				
_	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed				
-	on foundation managers \blacktriangleright \$0				
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?				No.
2	If "Yes," attach a detailed description of the activities		. 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? If "Yes," attach a conformed copy of the changes .		. 3		No
ŧa	Did the foundation have unrelated business gross income of \$1,000 or more during the year? \cdot . \cdot		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?		. 5		No
	If "Yes," attach the statement required by General Instruction T				
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? If "Yes," complete Part II, col (c),				
	and Part XV		. 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				
	The answer is Tes to line 7, has the foundation difficulty of Control 1950 in the According		41	l 1/	<u> </u>
		4			
	,				

Cres:

'n.



If yes, did the foundation receive any proceeds or have any net income attributable to the transaction?.

7b

Form 990-PF (2	17)
Part VIII	Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors

1 List all officers, directors, trus	tees, f	oundation managers a	nd their compensation		_
(a) Name and address	(b) devoted to pos		(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	Expense account, (e) other allowances
KATHLEEN JACKSON PO BOX 170	TRU:	STEE)	0	(
PRIDES CROSSING, MA 01965	TDU	CTEE	0		
RONALD J JACKSON PO BOX 170 PRIDES CROSSING, MA 01965	1 00	STEE)	0	(
NANCY A RUSHTON	TRU	STEE	0	(
11 LENOX CIRCLE	1 00)			
ANDOVER, MA 01810			_		
SUSAN L JACKSON 14 JONES ROAD	- 1 RU	STEE)	0	(
MIDDLETON, MA 01949					
2 Compensation of five highest-	oaid e	mployees (other than t	hose included on line 1	.—see instructions). If no	ne, enter "NONE."
(a) Name and address of each employee more than \$50,000	paid	Title, and average hours per week (b) devoted to position	(c) Compensation	Contributions to employee benefit plans and deferred (d) compensation	Expense account, (e) other allowances
NONE					
		+			
		-			
Total number of other employees paid					(
3 Five highest-paid independent					
(a) Name and address of each per	son pai	id more than \$50,000	(b) Typ	e of service	(c) Compensation
NONE			-		
			-		
			-		
			-		
			4		
	E0 000	2 fan musfaasianal aanwaa			
Total number of others receiving over \$					(
Part IX-A Summary of Direct					
ist the foundation's four largest direct charita organizations and other beneficiaries served, c				lation such as the number of	Expenses
1					
2					
3					
4					
Part IX-B Summary of Progr Describe the two largest program-related i		elated Investments	•	and 2	Amount
1		,	,		
2					
All other program-related investmen 3	ts See	instructions			
Fotal. Add lines 1 through 3					
				-	Form QQ0-DE (2017

1b

Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for

2

3a 3h

4

5

333.035

5.090

327.945

Form **990-PF** (2017)

Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,

Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment

Adjusted qualifying distributions. Subtract line 5 from line 4.

Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4

Amounts set aside for specific charitable projects that satisfy the

the section 4940(e) reduction of tax in those years

2

3

4

5

(d)

Page 9

210,653

210,653

Form 990-PF (2017)

0

Form 990-PF (20	017)
Part XIII	Und

90-PF (20	017)	
XIII	Undistributed Income	(see instructions)

1 Distributable amount for 2017 from Part XI, line 7 2 Undistributed income, if any, as of the end of 2017

a Enter amount for 2016 only.

b Total for prior years Excess distributions carryover, if any, to 2017 a From 2012.

b From 2013. . . .

c From 2014. . . 16 808 d From 2015. 67.754

10,406 e From 2016. f Total of lines 3a through e. 4 Qualifying distributions for 2017 from Part

XII, line 4 🕨 \$

e Remaining amount distributed out of corpus

5 Excess distributions carryover applied to 2017

a Corpus Add lines 3f, 4c, and 4e Subtract line 5

applied on line 5 or line 7 (see instructions) . . .

Subtract lines 7 and 8 from line 6a

9 Excess distributions carryover to 2018.

10 Analysis of line 9

a Excess from 2013. . .

c Excess from 2015. . . .

d Excess from 2016. . .

e Excess from 2017. . .

b Excess from 2014. .

(If an amount appears in column (d), the

6 Enter the net total of each column as

b Prior years' undistributed income Subtract line 4b from line 2b 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. d Subtract line 6c from line 6b Taxable amount e Undistributed income for 2016 Subtract line 4a from line 2a Taxable amount—see instructions f Undistributed income for 2017 Subtract lines 4d and 5 from line 1. This amount must be distributed in 2018 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) 8 Excess distributions carryover from 2012 not

indicated below:

a Applied to 2016, but not more than line 2a

(a)

Corpus

128.993

122,382

251,375

23.306

228,069

10.719 16,808

67.754

10,406

122.382

23.306 10,719 (b)

Years prior to 2016

(c)

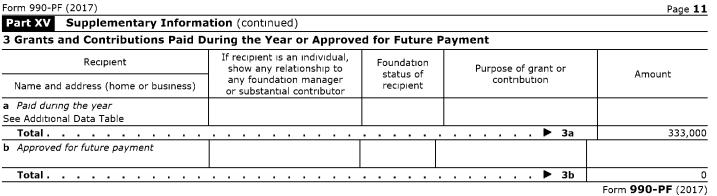
2016

b Applied to undistributed income of prior years (Election required—see instructions).

c Treated as distributions out of corpus (Election

d Applied to 2017 distributable amount.

same amount must be shown in column (a))



Enter gross amounts unless otherwise indicated		Unrelated b	ısıness ıncome	Excluded by section	512, 513, or 514	(e) Related or exempt
_	service revenue	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	function income (See instructions)
е						
_	and contracts from government agencies					
Intere	rship dues and assessments					
	ds and interest from securities			14	29,385	
	tal income or (loss) from real estate					
	financed property					
	ebt-financed property notes in the state of the					
	nvestment income					
	r (loss) from sales of assets other than					
	ory			18	479,598	
	ome or (loss) from special events profit or (loss) from sales of inventory					
	evenue a					
b						
				-		
е			0		F00 003	,
е			0	13	508,983	
e Subtota Total. (See wo	Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcul	ations)			508,983 	508,983
eSubtota Total. (See wo	al Add columns (b), (d), and (e)	ations) e Accomplish ncome is report	ment of Exempled in column (e) of	pt Purposes Fart XVI-A contribu	ted importantly to	
e Subtota Total. , (See wo	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcul B Relationship of Activities to th Explain below how each activity for which	ations) e Accomplish ncome is report	ment of Exempled in column (e) of	pt Purposes Fart XVI-A contribu	ted importantly to	
eSubtota Total. , (See wo art XVI	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcul B Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex	ations) e Accomplish ncome is report	ment of Exempled in column (e) of	pt Purposes Fart XVI-A contribu	ted importantly to	
eSubtota Total. , (See wo art XVI	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcul B Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex	ations) e Accomplish ncome is report	ment of Exempled in column (e) of	pt Purposes Fart XVI-A contribu	ted importantly to	
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orm 9	90-PF (2	2017)											Pa	ge 13
Pari	IVX	Information Re Exempt Organi		ansfers T	Го а	nd Trans	actio	ns and	Relatio	nships With Noi	ncharit	able		
		anization directly or in Code (other than sectio									on 501		Yes	No
		rom the reporting foun								-				
(1) Cash.											1a(1)		No
(2) Other	assets										1a(2)		No
b Oth	ner trans	sactions												
(1) Sales	of assets to a nonchari	table exempt	organızatıo	on.							1b(1)		No
(2) Purcha	ases of assets from a n	oncharitable e	exempt org	anıza	ation						1b(2)		No
(3) Rental	l of facilities, equipmer	nt, or other as:	sets								1b(3)		No
		ursement arrangemen										1b(4)		No
	•	or loan guarantees.										1b(5)		No
•	•	nance of services or m	•	_							•	1b(6)		No
	_	facilities, equipment, n er to any of the above	-								•	1c		No
	any tran:	ls, other assets, or services or services or sharing arra (b) Amount involved		w in columi	n (d)) the value	of the	goods, d	other asse		ved		ngemen	its
des	scribed ii	dation directly or indire n section 501(c) of the mplete the following so	Code (other t								[□Yes	✓	No
		(a) Name of organization	n		(b) Type of org	janizatio	n	1	(c) Description	of relation	nship		
									+					
Sign	of my which	r penalties of perjury, / knowledge and belief n preparer has any kno	, it is true, cor								ased on	all infor	mation	n of
Here		****				2018-02-1	19	\	*****		return	ne IRS di: ne prepar		
		ignature of officer or ti	rustee			Date		p	Title		below	nstr)?	_	
		Print/Type preparer's	name	Preparer's	Signa	ature		Date		Check if self-	PTIN			
Paid		HILLARY BURR CPA	4							employed ▶ □		P00910	379	
	oarer Only	Firm's name ► WOL	F & COMPANY	PC							Fırm's E	IN ▶04-	26898	383
		Firm's address ▶ 99	HIGH STREET	Γ 21ST FLO	OR									
		D.C.	STON MA O	2110							Phone n	o (617)	439-9	9700

BOSTON, MA 02110

Form 990PF Part XV Line 1a - List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000).

than \$5,000).

KATHLEEN JACKSON

RONALD J JACKSON

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year ANDOVER HIGH SCHOOL NOT RELATED 501(C)(3) UNRESTRICTED 5,000 80 SHAWSHEEN ROAD ANDOVER, MA 01810 **NOT RELATED** UNRESTRICTED 5,000 BEVERLY BOOTSTRAPS35 PARK STREET 501(C)(3) BEVERLY, MA 01915 000

BEVERLY FARMS LIBRARY 24 VINE STREET BEVERLY FARMS, MA 01915	NOT RELATED	501(C)(3)	CHILDREN'S PROGRAMS	1,000
BOSTON BALLET19 CLARENDON STREET BOSTON, MA 021166100	NOT RELATED	501(C)(3)	UNRESTRICTED	5,000

.000

BOSTON, MA 021166100				
BOSTON POPS FUND 301 MASSACHUSETTS AVENUE BOSTON, MA 02115	NOT RELATED	501(C)(3)	UNRESTRICTED	10,0

Total . 333,000 3a

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year CHILDREN'S FRIEND AND FAMILY NOT RELATED 501(C)(3) UNRESTRICTED 5,000 SE

SERVICES 10 BOSTON STREET SALEM, MA 01970				
MCLEAN HOSPITAL115 MILL STREET	NOT RELATED	501(C)(3)	WOMEN'S CLINICAL	

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

LEM, MA 01970				
CLEAN HOSPITAL115 MILL STREET LMONT, MA 02478	NOT RELATED	501(C)(3)	WOMEN'S CLINICAL FELLOWSHIP	
CLEAN HOSPITAL115 MILL STREET	NOT RELATED	501(C)(3)	3 EAST PROGRAM	

BELMONT, MA 02478			FELLOWSHIP	
MCLEAN HOSPITAL115 MILL STREET BELMONT, MA 02478	NOT RELATED	501(C)(3)	3 EAST PROGRAM	25,000
MCLEAN HOSPITAL 115 MILL STREET	NOT DELATED	E01(C)(2)	CHORT TERM LINIT	35.000

200,000

BELMONT, MA 02478				
MCLEAN HOSPITAL115 MILL STREET BOSTON, MA 02478	NOT RELATED	501(C)(3)	SHORT TERM UNIT	25,000
MUSEUM OF FINE ARTS	NOT RELATED	501(C)(3)	UNRESTRICTED	5.000

MCLEAN HOSPITAL115 MILL STREET BOSTON, MA 02478	NOT RELATED	501(C)(3)	SHORT TERM UNIT	25,000
MUSEUM OF FINE ARTS 465 HUNTINGTON AVENUE	NOT RELATED	501(C)(3)	UNRESTRICTED	5,000

MUSEUM OF FINE ARTS 465 HUNTINGTON AVENUE	NOT RELATED	501(C)(3)	UNRESTRICTED	5,0
BOSTON, MA 02115				
Total				333,000

За

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year MUSEUM OF SCIENCESCIENCE PARK NOT RELATED 501(C)(3) UNRESTRICTED 1,000

BOSTON, MA 021141099				
NEW ENGLAND CENTER FOR HOMELESS VETERANS 17 COURT STREET BOSTON, MA 02108	NOT RELATED	501(C)(3)	UNRESTRICTED	5,000

BOSTON, MA 02108				
PEABODY ESSEX MUSEUM EAST INDIA SQUARE SALEM, MA 01970	NOT RELATED	501(C)(3)	UNRESTRICTED	10,000

PEABODY ESSEX MUSEUM EAST INDIA SQUARE SALEM, MA 01970	NOT RELATED	501(C)(3)	UNRESTRICTED	10,000
SHORE COUNTRY DAY SCHOOL 545 CABOT STREET BEVERLY, MA 01915	NOT RELATED	501(C)(3)	UNRESTRICTED	10,000

545 CABOT STREET BEVERLY, MA 01915	NOT RELATED	501(C)(3)	UNRESTRICTED	10,000
THE JIMMY FUND	NOT RELATED	501(C)(3)	UNRESTRICTED	15,000

333,000

BEVERLY, MA 01915				
THE JIMMY FUND 10 BROOKLINE PLACE WEST 6TH FLOOR BROOKLINE, MA 024457226	NOT RELATED	501(C)(3)	UNRESTRICTED	15,0

Total.

3a

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business)

·	or substantial contributor			
a Paid during the year				
THE TRUSTEES OF RESERVATION	NOT RELATED	501(C)(3)	UNRESTRICTED	1,000

BEVERLY.MA 01915 I	
THE TRUSTEES OF RESERVATION NOT RELATED 501(C	C)(3) UNRESTRICTED 1,000

BEVERLY, MA 01915				
WGBHONE GUEST STREET BOSTON, MA 02135	NOT RELATED	501(C)(3)	UNRESTRICTED	5,000

BOSTON, MA 02135		
Total	 	333,000

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491074005048				
TY 2017 Investments - Other Schedule						
Name:	KATHLEEN & RONA	ALD J JACKSON FOUNDATION				

EIN: 04-6762777 Investments Other Schedule 2	,		
Category / Item	Listed at Cost or	Book Value	End of Year

Investments Other Schedule 2			
Category/ Item	Listed at Cost or	Book Value	En
	FMV		l r

ar Fair Market Value

4,513,209

FIDELITY #2389 - SECURITIES FMV

2,740,908

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN:	93491074005048		
TY 2017 Other Expenses Schedule						
Name:	KATHLEEN & RO	ONALD J JACKSOI	N FOUNDATION			
EIN: 04-6762777						
Other Expenses Schedule						
Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes		

FEE

efile GRAPHIC print - DO NOT	As Filed Data	-	DLI	N: 93491074005048			
TY 2017 Taxes Schedule							
	Name:	KATHLEEN 8	k RONALD J JACKS	ON FOUNDATION			
EIN: 04-6762777							
		010702777		<u> </u>	 		
Category	An	nount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes		
TAXES		1,552	0		0		