Department of the Treasury

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. ► Go to www.irs.gov/Form990PF for instructions and the latest information.

	For calendar year 2017 or tax year beginning , and ending							
4			f foundation				A Employer identification	number
Ξ	MORIARTY FAMILY CHARITABLE FOUNDATION TR ROWLAND T. & JANE F. MORIARTY, TRUSTEES Number and street (or P O box number if mail is not delivered to street address) Row							
\mathcal{T}	Ř	OW	LAND T. & JA	NE F. MORIA	RTY, TRUSTEE:	S	04-6834127	
\odot	Nun	iber a	and street (or PO box number if	mail is not delivered to street	address)		B Telephone number	
	1	00	SOUTH ROAD,	P.O. BOX 2	61		617-425-35	50
J	City	or t	own, state or province, cou	ntry, and ZIP or foreign p	ostal code		C if exemption application is p	
ار المام المام			BEACH, NH	03871				
	G C	heck	call that apply:	Initial return	Initial return of a fo	rmer public charity	D 1. Foreign organizations	, check here
				Final return	Amended return	•		
				Address change	Name change		Foreign organizations me check here and attach co	eting the 85% test, mputation
7	<u> </u>	heck	type of organization:	X Section 501(c)(3) ex	cempt private foundation	CAL	E If private foundation sta	tus was terminated
ζ.	<u></u>		ection 4947(a)(1) nonexem		Other taxable private founda	ition	under section 507(b)(1)	
/			arket value of all assets at e	· · · · · · · · · · · · · · · · · · ·		Accrual	F If the foundation is in a	60-month termination
			Part II, col. (c), line 16)		ther (specify)		under section 507(b)(1)	(B), check here
1 ,	<u>></u>				nn (d) must be on cash basis	s.)		,
1	Pa	irt I	Analysis of Revenue and (The total of amounts in column	nns (b), (c), and (d) may not	(a) Revenue and	(b) Net investment	(c) Adjusted net	(d) Disbursements for charitable purposes
			necessarily equal the amount	s in column (a))	expenses per books	Income	income	(cash basis only)
		1	Contributions, gifts, grant	•	565,078.		N/A	
		2	Interest on savings and tempo	is not required to attach Sch. B	10 000	40.00=		
		3	cash investments	•	19,267.	<u> 19,267.</u>		STATEMENT 2
		4	Dividends and interest from	m securities	24,673.	24,673.		STATEMENT 3
			Gross rents					
		_	Net rental income or (loss)		84,274.			STATEMENT 1
	Ę	b	Net gain or (loss) from sale of a Gross sales price for all	2,447,522.	04,2/4.			FCIEVED 1
	Revenue	7	assets on line 6a Capital gain net income (from F			1,127,379.		-(.IE(/.E1)
	8	8	Net short-term capital gair	•		1,141,313.	S	8
		9	Income modifications	•				₩ 1 1 2018
		10a	Gross sales less returns					12
<u>@</u>	.	b	Less Cost of goods sold				OC	DEN UT
2018	-	C	Gross profit or (loss)					
0	İ	11	Other income		138.	138.		STATEMENT 4
7		12	Total. Add lines 1 through	<u>111 </u>	693,430.	1,171,457.		
=		13	Compensation of officers, direct	ctors, trustees, etc	0.	0.		0.
M		14	Other employee salaries a	nd wages				
	_s		Pension plans, employee	benefits				
ũį	Se		Legal fees	_				
SCANNED	Expenses		Accounting fees	STMT 5	1,000.	1,000.		0.
\$	ΰ		Other professional fees					
S S	Ě	17	Interest	amim c	0.50	0.50		
•	and Administrative	18	Taxes	STMT 6	262.	262.		0.
	퍨	19 20	Depreciation and depletion Occupancy	1				<u> </u>
	튉	21	Travel, conferences, and r	montingo	4 029			0.
	9	22	Printing and publications	neenings	4,028.	0.)	0.
	gaı	23	Other expenses	STMT 7	16,618.	16,618.		0.
	딅		Total operating and admi		10,010.	10,010.		
	Operating	- '	expenses. Add lines 13 th		21,908.	17,880.		0.
	Ö	25	Contributions, gifts, grants	-	178,184.	17,000	<u> </u>	178,184.
•			Total expenses and disbu			-		1,0,104.
			Add lines 24 and 25		200,092.	17,880.		178,184.
		27	Subtract line 26 from line	12:		277000		
		a	Excess of revenue over expens	ses and disbursements	493,338.			
			Net investment income (#			1,153,577	,	
_			Adjusted net income (if no				N/A	
7	2350	1 01	-03-18 LHA For Paperv	vork Reduction Act Notic	e, see instructions.			Form 990-PF (2017)

ROWLAND T. & JANE F. MORIARTY, TRUSTEES

04-6834127

Form 990-PF (2017)

Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only Beginning of year End of year (a) Book Value (c) Fair Market Value (b) Book Value 31,684. 43,215 31,684 Cash - non-interest-bearing 92,156. 54,073. 92,156 2 Savings and temporary cash investments 3 Accounts receivable ▶ Less: allowance for doubtful accounts 4 Pledges receivable ▶ Less: allowance for doubtful accounts 5 Grants receivable Receivables due from officers, directors, trustees, and other disqualified persons 7 Other notes and loans receivable Less: allowance for doubtful accounts Inventories for sale or use Prepaid expenses and deferred charges 1,097,854. 10a Investments - U.S. and state government obligations STMT 8 1,100,292. 0. 3,944,348. 2,242,754 b Investments - corporate stock STMT 9 2,734,754. c Investments - corporate bonds 11 Investments - land, buildings, and equipment basis Less accumulated depreciation 12 Investments - mortgage loans 512,754. 451,789. STMT 10 592,510. 13 Investments - other 14 Land, buildings, and equipment basis Less accumulated depreciation 15 Other assets (describe ▶ 16 Total assets (to be completed by all filers - see the 5,678,796. 3.918.675 3.424.552 instructions. Also, see page 1, item I) 17 Accounts payable and accrued expenses 18 Grants payable 19 Deferred revenue Loans from officers, directors, trustees, and other disqualified persons 21 Mortgages and other notes payable 22 Other liabilities (describe 23 Total liabilities (add lines 17 through 22) 0. 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 Fund ► X Foundations that do not follow SFAS 117, check here and complete lines 27 through 31. Assets or 27 Capital stock, trust principal, or current funds 0 0 . 28 Paid-in or capital surplus, or land, bldg., and equipment fund 3,424,552. 29 Retained earnings, accumulated income, endowment, or other funds 3,918,675 30 Total net assets or fund balances 3,424,552. 3,918,675 3,424,552 31 Total liabilities and net assets/fund balances 3,918,675 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 3,424,552. (must agree with end-of-year figure reported on prior year's return) 493,338. 2 Enter amount from Part I, line 27a 2 785. 3 Other increases not included in line 2 (itemize) ▶ PRIOR PERIOD ADJUSTMENT 3 675. 4 Add lines 1, 2, and 3 4 5 Decreases not included in line 2 (itemize) 5 918,675. Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30

MORIARTY FAMILY CHARITABLE FOUNDATION TR

ROWLAND T. & JANE F. MORIARTY,

Part IV Capital Gains and Losses for Tax on Investment Income (b) How acquired P - Purchase D - Donation (d) Date sold (c) Date acquired (a) List and describe the kind(s) of property sold (for example, real estate, (mo., day, yr.) (mo., day, yr.) 2-story brick warehouse; or common stock, 200 shs. MLC Co.) 1a 130,133.750 SHARES MSIF ULTRA SHORT-INCOME 12/08/17 b FUND 09/18/17 09/13/17 c 110,893 SHARES STAPLES, INC. 12/01/86 d VIA NEW GENERATION K-1 P e VIA NEW GENERATION K-1 P (g) Cost or other basis (f) Depreciation allowed (h) Gain or (loss) (e) Gross sales price (or allowable) plus expense of sale ((e) plus (f) minus (g)) а <26.> 1,302,619 b 1,302,645 1.122.680. 1,136,653. 13,973 C 8,250. 8,250 d 3,525 <3.525.> e 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 (j) Adjusted basis (k) Excess of col. (i) Losses (from col. (h)) (i) FMV as of 12/31/69 as of 12/31/69 over col. (j), if any <26.> b 1,122,680. C 8,250. d <3,525.> If gain, also enter in Part I, line 7 1,127,379. Capital gain net income or (net capital loss) 2 If (loss), enter -0- in Part I, line 7 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). If (loss), enter -0- in Part I, line 8 N/A 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. Yes X No Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? If "Yes," the foundation doesn't qualify under section 4940(e). Do not complete this part. Enter the appropriate amount in each column for each year; see the instructions before making any entries. (d)
Distribution ratio (a) Base period years Adjusted qualifying distributions Net value of noncharitable-use assets (col. (b) divided by col (c)) Calendar year (or tax year beginning in) .041124 164,000 3,987,946. 2016 .035598 2015 115,550. 3,245,941. 3,152,406 .042436 2014 133,775 .032479 2013 66,421 2,045,051 135,165 .107667 2012 122,220 .259304 2 Total of line 1, column (d) 2 Average distribution ratio for the 5-year base period - divide the total on line 2 by 5.0, or by the number of years .051861 the foundation has been in existence if less than 5 years 3 4,742,917. Enter the net value of noncharitable-use assets for 2017 from Part X, line 5 4 245,972. Multiply line 4 by line 3 5 11,536. Enter 1% of net investment income (1% of Part I, line 27b) 6 257,508. 7 Add lines 5 and 6 7 8 Enter qualifying distributions from Part XII, line 4 178,184. 8 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.

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Form 990-PF (2017)

Form 0	MORIARTY FAMILY CHARITABLE FO 90-PF (2017) ROWLAND T. & JANE F. MORIARTY			04 602	1127	Do	na A
Part		, TRUSTEE:	5 4940(e), or 4	04-6834 948 - see		_	<u>ge 4</u>
	empt operating foundations described in section 4940(d)(2), check here)	1			
	ate of ruling or determination letter: (attach copy of letter if no		ions)				
	omestic foundations that meet the section 4940(e) requirements in Part V, check here			1	23	,07	2.
	Part I, line 27b		,				
	I other domestic foundations enter 2% of line 27b. Exempt foreign organizations, enter	I% of Part I. line 12. c	201 (h)				
	ex under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only;		.02 (0).	2			0.
	dd lines 1 and 2		-	3	23	,07	
	ubtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only;	others, enter -0-1	• •• •	4			0.
	ax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	o	·	5	23	,07	
	redits/Payments:	• •	•				
	217 estimated tax payments and 2016 overpayment credited to 2017	6a	0.				
	kempt foreign organizations - tax withheld at source	6b	0.				
	ax paid with application for extension of time to file (Form 8868)	6c	0.				
	ackup withholding erroneously withheld	6d	0.				
	otal credits and payments. Add lines 6a through 6d		<u> </u>	7			0.
	nter any penalty for underpayment of estimated tax. Check here if Form 2220 is at		• •	8			8.
	ax due. If the total of lines 5 and 8 is more than line 7, enter amount owed		_	9	23	, 08	
	verpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			10			
	nter the amount of line 10 to be: Credited to 2018 estimated tax	• •	Refunded >	11			
	VII-A Statements Regarding Activities		THE INTERIOR P	· •••			
	uring the tax year, did the foundation attempt to influence any national, state, or local leg	islation or did it partie	cinate or intervene	ın		Yes	No
	ny political campaign?	ordinarior or did it partit	orpato or intervente		1a		X
	d it spend more than \$100 during the year (either directly or indirectly) for political purp	oses? See the instru	ctions for the defir	ution	1b		X
	the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies				1		
	stributed by the foundation in connection with the activities.	or any materials put	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		1 1	- 1	,
	d the foundation file Form 1120-POL for this year?				10	- 1	X
	nter the amount (if any) of tax on political expenditures (section 4955) imposed during t	he vear					
) On the foundation. > \$ 0 . (2) On foundation manage		0.			- [
	nter the reimbursement (if any) paid by the foundation during the year for political exper			<u>-</u>			
	anagers. ▶\$ 0.	and and mipocod o	ii iodiioddoii				
	as the foundation engaged in any activities that have not previously been reported to the	IRS?			2	- 1	X
	"Yes," attach a detailed description of the activities.						
	as the foundation made any changes, not previously reported to the IRS, in its governin	n instrument articles	of incorporation	or			
	/laws, or other similar instruments? If "Yes," attach a conformed copy of the changes	g a	or moor poranors,	0,	3		Х
	d the foundation have unrelated business gross income of \$1,000 or more during the y	ear?			4a		X
	"Yes," has it filed a tax return on Form 990-T for this year?	• • • • • • • • • • • • • • • • • • • •		N/A	4b		
	as there a liquidation, termination, dissolution, or substantial contraction during the year	ır?	•	-1,	5		X
	"Yes," attach the statement required by General Instruction T.						
A	re the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied	either:					l
	By language in the governing instrument, or						l
	By state legislation that effectively amends the governing instrument so that no mandal	ory directions that co	onflict with the sta	te law		Ì	١.
	main in the governing instrument?	,			6	Х	
D	d the foundation have at least \$5,000 in assets at any time during the year? If "Yes," coi	molete Part II. col. (c)	. and Part XV		7	X	
		, (0)	,				
Ba E	nter the states to which the foundation reports or with which it is registered. See instruc	tions. ►					ļ
	MA	<u>-</u>			_	1	
_	the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the	Attorney General (or	r designate)		-		
	each state as required by General Instruction G? If "No," attach explanation				86	x	
	the foundation claiming status as a private operating foundation within the meaning of	section 4942(i)(3) or	r 4942(i)(5) for ca	lendar	<u> </u>	† <u></u>	
	ear 2017 or the tax year beginning in 2017? See the instructions for Part XIV. If "Yes," c		o iz(J)(o) ioi oa		9	1	x
	id any persons become substantial contributors during the tax year? if "Yes," attach a sch		and addresses		10	T^{-}	X
	· · · · · · · · · · · · · · · · · · ·				Form 99	A. DE	/2017

ROWLAND T. & JANE F. MORIARTY, 04-6834127 Part VII-A | Statements Regarding Activities (continued) Yes No 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 X 12 Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? X 12 If "Yes," attach statement. See instructions 13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application? 13 N/A Website address ► N/A Telephone no. ►617-425-3550 14 The books are in care of ▶ ROWLAND T. MORIARTY Located at ► 100 SOUTH ROAD, P.O. BOX 261, RYE BEACH ZIP+4 **▶**03871 15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here N/A and enter the amount of tax-exempt interest received or accrued during the year No 16 At any time during calendar year 2017, did the foundation have an interest in or a signature or other authority over a bank, Yes securities, or other financial account in a foreign country? 16 See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the Part VII-B | Statements Regarding Activities for Which Form 4720 May Be Required Yes No 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 X No (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) Yes X No a disqualified person? Yes X No (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? Yes X No (5) Transfer any income or assets to a disqualified person (or make any of either available Yes X No for 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 Yes X No termination of government service, if terminating within 90 days.) 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 N/A 1b Organizations relying on a current notice regarding disaster assistance, check here 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 X before the first day of the tax year beginning in 2017? 1c 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 Yes X No before 2017? If "Yes," list the years 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 N/A statement - see instructions.) **2**b c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here. 3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time Yes X No during the year? 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.) N/A 3b X 4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? 4a b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that

Form 990-PF (2017)

MORIARTY FAMILY CHARITABLE FOUNDATION TR

had not been removed from jeopardy before the first day of the tax year beginning in 2017?

Part VII-B Statements Regarding Activities for Which			<u> 14-683412</u>	<u> </u>	Page 6
5a During the year, did the foundation pay or incur any amount to:	. Cilii Ti Zu Way De n	icdan ea (connun		Yes	No
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	on 4945(e))?	√ Vac	x No	1	
(2) Influence the outcome of any specific public election (see section 4955);	• **				
any voter registration drive?	aa sairy sing an oouly or mone		X No		ĺ
(3) Provide a grant to an individual for travel, study, or other similar purpose:	s?	• —	X No	- [
(4) Provide a grant to an organization other than a charitable, etc., organization	• • • •				1
4945(d)(4)(A)? See instructions		Ye:	s X No		ļ
(5) Provide for any purpose other than religious, charitable, scientific, literary	, or educational purposes, or f	•	I		
the prevention of cruelty to children or animals?			s X No		İ
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify un	nder the exceptions described i	n Regulations			1
section 53.4945 or in a current notice regarding disaster assistance? See inst	ructions .		N/A 5	b	
Organizations relying on a current notice regarding disaster assistance, check	here		▶□		ļ
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption	from the tax because it maintai	ineđ	1		ļ
expenditure responsibility for the grant?	N	I/A 🔲 Ye	s 🔲 No	Ì	
If "Yes," attach the statement required by Regulations section 53.4945-5(d).					
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums on	—			
a personal benefit contract?		Ye	s X No .	<u>-</u> .	
b Did the foundation, during the year, pay premiums, directly or indirectly, on a	personal benefit contract?		<u> </u>	ib	<u> </u>
If "Yes" to 6b, file Form 8870.				-	'
7a At any time during the tax year, was the foundation a party to a prohibited tax		Ye	s X No		
Part VIII Information About Officers, Directors Trus				Ъ	
Part VIII Information About Officers, Directors, Trus Paid Employees, and Contractors	tees, Foundation Ma	anagers, Highly	<i>'</i>		
List all officers, directors, trustees, and foundation managers and	their compensation.				
		(c) Compensation	(d) Contributions to	(e) E	xpense
(a) Name and address	(b) Title, and average hours per week devoted to position	(If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	accou	nt, other vances
ROWLAND T. MORIARTY	TRUSTEE	enter -0-)	oompenaauu	2.101	
100 SOUTH ROAD, P.O. BOX 261					
RYE BEACH, NH 03871	1.00	0.	0.		0.
JANE F. MORIARTY	TRUSTEE	1			
100 SOUTH ROAD, P.O. BOX 261	7 -		1		
RYE BEACH, NH 03871	1.00	0.	0.		0.
				1	
	_}				
	1		<u> </u>	<u> </u>	
2 Compensation of five highest-paid employees (other than those in		, enter "NONE."	(cf) Contributions to	(-)	Evnanca
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week	(c) Compensation	(d) Contributions to employee benefit plans and deterred	accou	Expense unt, other
DOLL THE WORLD AND THE STATE OF	devoted to position	107	compensation	allo	wances
ROWLAND T. MORIARTY - 100 SOUTH	TRUSTEE	_			_
ROAD, P.O. BOX 261, RYE BEACH, NH	1.00	0.	0.	 	0.
JANE F. MORIARTY - 100 SOUTH ROAD,	TRUSTEE				۸
P.O. BOX 261, RYE BEACH, NH 03871	1.00	0	. 0.	 	0.
	4			1	
	 	 	 	+	
	_				
	 		-	+	
	-				
Total number of other employees paid over \$50,000		<u> </u>	<u> </u>	ــــــــــــــــــــــــــــــــــــــ	
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MORIARTY FAMILY CHARITABLE FOUNDATION TR

MORIARTY FAMILY CHARITABLE FOUNT Form 990-PF (2017) ROWLAND T. & JANE F. MORIARTY Part VIII Information About Officers, Directors, Trustees, Fount Paid Employees, and Contractors (continued)	TRUSTEES 04-	683 4127 Page 7
3 Five highest-paid independent contractors for professional services. If none,	enter "NONE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Fatal number of others recovered over \$50,000 for professional convers		•
Total number of others receiving over \$50,000 for professional services Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant number of organizations and other beneficiaries served, conferences convened, research papers N/A 2	s produced, etc.	Expenses
Part IX-B Summary of Program-Related Investments		
Describe the two largest program-related investments made by the foundation during the tax years.	ar on lines 1 and 2.	Amount
I N/A		
2		
All other program-related investments. See instructions.		
		

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Total. Add lines 1 through 3

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P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign foun	dations, s	ee 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	4,136,576.
	Average of monthly cash balances	1b	110,172.
ε	Fair market value of all other assets	1c	568,396.
d	Total (add lines 1a, b, and c)	1d	4,815,144.
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	4,815,144.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	72,227.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	4,742,917.
6	Minimum investment return. Enter 5% of line 5	6	237,146.
Р	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and foreign organizations, check here ☐ and do not complete this part.)	d certain	
1	Minimum investment return from Part X, line 6	1	237,146.
2a	Tax on investment income for 2017 from Part VI, line 5		
b	Income tax for 2017. (This does not include the tax from Part VI.)		
C	Add lines 2a and 2b	2c	23,072.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	214,074.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	214,074.
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	214,074.
P	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		4.6.4
â	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	18	178,184
þ	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	- 150 101
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8; and Part XIII, line 4	4	178,184
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	5	0
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	178,184
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation	qualifies fo	or the section
	AUGULOS FORUNTIAN AT TAY IN THANA WAYS		

Form,990-PF (2017)

Part XIII Undistributed Income (see instructions)

(d) (b) (c) 2017 Corpus Years prior to 2016 2016 1 Distributable amount for 2017 from Part XI. 214,074. line 7 2 Undistributed income, if any, as of the end of 2017 0. a Enter amount for 2016 only b Total for prior years: 0 3 Excess distributions carryover, if any, to 2017: a From 2012 45,958. **b** From 2013 c From 2014 d From 2015 e From 2016 f Total of lines 3a through e 45,958 4 Qualifying distributions for 2017 from Part XII, line 4: ► \$_ 178,184 a Applied to 2016, but not more than line 2a 0 **b** Applied to undistributed income of prior vears (Election required - see instructions) 0 c Treated as distributions out of corpus (Election required - see instructions) 0 178,184. d Applied to 2017 distributable amount 0. e Remaining amount distributed out of corpus 35,890. 35,890. Excess distributions carryover applied to 2017 (If an amount appears in column (d), the same amount must be shown in column (a)) 6 Enter the net total of each column as indicated below: 10,068. & Corpus. Add lines 3f, 4c, and 4e Subtract line 5 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 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 instr. 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 10,068 not applied on line 5 or line 7 9 Excess distributions carryover to 2018. Subtract lines 7 and 8 from line 6a 0. 10 Analysis of line 9: a Excess from 2013 b Excess from 2014 c Excess from 2015 d Excess from 2016 e Excess from 2017

Part XIV Private Operating Foundations (see instructions and Part VII-A question 9) N/A 1 all the foundation has received a ruling or determination letter that it is a private operating			ARITABLE FO		•	34127 Page 10
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	· mo term in which applications should be	Milling one commune or	non and materials they s	iodia include:	•	
	c Any submission deadlines:		- , 	 -		
d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors:	, out					
,	d Any restrictions or limitations on awards	s, such as by geographic	al areas, charitable fields	kinds of institutions or	other factors:	

Form 990-PF (2017)

ROWLAND T. & JANE F. MORIARTY, TRUSTEES

04-6834127 Page 11

Supplementary Information (continued) Part XV 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Purpose of grant or contribution Foundation show any relationship to Amount status of any foundation manager Name and address (home or business) recipient or substantial contributor a Paid during the year AMERICAN RED CROSS (HURRICANE HARVEY) N/A NON-PROFIT GIFT P.O. BOX 97089 WASHINGTON, DC 20090 5,000. AMERICAN RED CROSS (HURRICANE IRMA) N/A NON-PROFIT GIFT P.O. BOX 97089 GIFT WASHINGTON DC 20090 5,000. ABENAQUI COUNTRY CLUB MCDONOUGH FUND N/A NON-PROFIT GIFT 731 CENTRAL ROAD RYE BEACH, NH 03871 35. CARDINAL CUSHING CENTERS N/A NON-PROFIT GIFT C/O RITA HARRIS, 300 SOUTH POINTE 1,000. DRIVE #2503 MIAMI BEACH FL 33139 CODMAN ACADEMY CHARTER PUBLIC SCHOOL N/A NON-PROFIT GIFT 637 WASHINGTON STREET DORCHESTER MA 02124 10,000. SEE CONTINUATION SHEET(S) ▶ 3a 178 184. **b** Approved for future payment NONE Total

MORIARTY FAMILY CHARITABLE FOUNDATION TR ROWLAND T. & JANE F. MORIARTY, TRUSTEES

Analysis of Income-Producing Activities

Form 990-PF (2017)

Part XVI-A

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Enter gross amounts unless otherwise indicated.	Unrelat	ed business income		ded by section 512, 513, or 514	(e)
•	(a) Business	(b)	EXCID-	(d)	Related or exempt
1 Program service revenue:	Business	Amount	sion	Amount	function income
	Code	-	1000	<u> </u>	
<u> </u>			 		
b		· · · · · · · · · · · · · · · · · · ·	ļ		
c			<u> </u>		
d					
e					_
f			†		
g Fees and contracts from government agencies			1		
2 Membership dues and assessments			+		
•	-		+-		<u> </u>
3 Interest on savings and temporary cash					
investments			14	19,267.	
4 Dividends and interest from securities			14	<u>24,673.</u>	
5 Net rental income or (loss) from real estate:					
a Debt-financed property					
b Not debt-financed property			1		
, , , , , , , , , , , , , , , , , , ,			+		
6 Net rental income or (loss) from personal					
property			.		
7 Other investment income			14	138.	
8 Gain or (loss) from sales of assets other				i	
than inventory	-				84,274.
9 Net income or (loss) from special events			1		
10 Gross profit or (loss) from sales of inventory			 		
11 Other revenue:			+	 	
			1		
<u> </u>					
b			<u> </u>		
C					
d					
e					
12 Subtotal. Add columns (b), (d), and (e)		0		44,078	84,274.
13 Total. Add line 12, columns (b), (d), and (e)		<u>V</u>	<u> </u>		128,352.
(See worksheet in line 13 instructions to verify calculations.)				10_	120/3324
Part XVI-B Relationship of Activities to	the Acc	omplishment of E	xemp	ot Purposes	
Line No. Explain below how each activity for which incom	ne is reported	in column (e) of Part XVI-	A contri	buted importantly to the acco	implishment of
the foundation's exempt purposes (other than t		unds for such purposes).			
8 SALE OF INVESTMENT ASSE	TS				
-					
		<u>-</u>			
		· · · · · · · · · · · · · · · · · · ·			
					
					
 					
					
				······································	
	_		_		Form QQ0-PF (2017)

MORIARTY FAMILY CHARITABLE FOUNDATION TR

Form 990-PF (2017) ROWLAND T. & JANE F. MORIARTY, TRUSTEES 04-6834127 Page 13 Part XVII Information Regarding Transfers to and Transactions and Relationships With Noncharitable **Exempt Organizations** Yes No Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) (other than section 501(c)(3) organizations) or in section 527, relating to political organizations? a Transfers from the reporting foundation to a noncharitable exempt organization of X (1) Cash X (2) Other assets 1a(2) **b** Other transactions: (1) Sales of assets to a noncharitable exempt organization 1b(1) X (2) Purchases of assets from a noncharitable exempt organization 1b(2) X (3) Rental of facilities, equipment, or other assets 1b(3) (4) Reimbursement arrangements X 1b(4) X (5) Loans or loan guarantees 1b(5) (6) Performance of services or membership or fundraising solicitations X 1b(6) c Sharing of facilities, equipment, mailing lists, other assets, or paid employees 1c d If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received. (a) Line no (b) Amount involved (c) Name of noncharitable exempt organization (d) Description of transfers, transactions, and sharing arrangements N/A 2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described X No in section 501(c) (other than section 501(c)(3)) or in section 527? ____ Yes b If "Yes," complete the following schedule. (a) Name of organization (b) Type of organization (c) Description of relationship N/A Under penalties of perjury, lyde ed this return, including accompanying schedules and statements, and to the best of my knowledge Sign return with the preparer Here TRUSTEE X Yes Signature of officer or trustee Title Print/Type preparer's name Date Check self- employed Paid MICHAEL CINTOLO 05/07/18 P00803568 **Preparer** Firm's name ► CINTOLO & MCCAR Firm's EIN ► 04-3033342 **Use Only** Firm's address ▶ 99 SUMMER STREET 17TH FLR

Phone no. 617-439-3004

BOSTON, MA 02110

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

OMB No 1545-0047

2017

Employer identification number

Name of the organization

MORIARTY FAMILY CHARITABLE FOUNDATION TR ROWLAND T. & JANE F. MORIARTY, TRUSTEES

Organization type (check one):					
Filers of	:	Section:			
Form 99	0 or 990-EZ	501(c)() (enter number) organization			
		4947(a)(1) nonexempt charitable trust not treated as a private foundation			
		527 political organization			
Form 99	0-PF	X 501(c)(3) exempt private foundation			
		4947(a)(1) nonexempt charitable trust treated as a private foundation			
		501(c)(3) taxable private foundation			
	nly a section 501(c)	s covered by the General Rule or a Special Rule . (7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.			
	For an organization	n filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.			
Special	Rules				
	sections 509(a)(1) any one contributo	n described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under 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 or, 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; line 1. Complete Parts I and II.			
	year, total contribu	n described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the itions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for cruelty to children or animals. Complete Parts I, II, and III.			
	year, contributions is checked, enter I purpose. Don't con	n described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the seclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box here the total contributions that were received during the year for an exclusively religious, charitable, etc., implete any of the parts unless the General Rule applies to this organization because it received nonexclusively e, etc., contributions totaling \$5,000 or more during the year \bigsim \$\$\frac{1}{2}\$.			
but it m	Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to sertify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).				

Name of organization
MORIARTY FAMILY CHARITABLE FOUNDATION TR
ROWLAND T. & JANE F. MORIARTY, TRUSTEES

Employer identification number

Part I	Contributors	(see instructions).	Use duplicate copies of	f Part I if additional space is neede	d.
--------	--------------	---------------------	-------------------------	---------------------------------------	----

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	ROWLAND T. MORIARTY 100 SOUTH ROAD, P.O. BOX 261 RYE BEACH, NH 03871	\$565,078.	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroli Noncash (Complete Part II for noncash contributions.)

Name of organization

MORIARTY FAMILY CHARITABLE FOUNDATION TR ROWLAND T. & JANE F. MORIARTY, TRUSTEES Employer identification number

Part II	Noncash Property (see instructions). Use duplicate copies of Pa	rt 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
1	55,893 SHARES OF STAPLES (SPLS)		
		\$ 565,078.	07/13/17
(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

l r1	avar idantification number
t Etiidi	oyer identification number

MORIARTY	FAM	ILY	CHAR	ITABLE	FOU	NDATION	TR
ROWLAND 1	r. &	JAN	EF.	MORIA	RTY.	TRUSTEE	:S

	Use duplicate copies of Part III if additiona	al space is needed.	
No. m rt I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-		(e) Transfer of gift	
	Transferee's name, address, an	d ZIP + 4	Relationship of transferor to transferee
lo. m t l	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-	Transferee's name, address, ar	(e) Transfer of gift	Relationship of transferor to transferee
No. m	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	Transferee's name, address, ar	(e) Transfer of gift	Relationship of transferor to transferee
No. m t!	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-		(e) Transfer of gift	
	Transferee's name, address, ar	nd ZIP + 4	Relationship of transferor to transferee

FORM 99	0-PF	G	AIN OR (LO	OSS)	FROM	SALE	OF	ASSETS		STA	TEMENT	1
DESCRIP'	(A) TION OF	PROPERTY						MANNER CQUIRED	DA ACQU		DATE	SOLD
130,133 FUND	.750 SHA	ARES MSIF	ULTRA SHO	ORT-I	INCOME	2			09/1	8/17	12/0	8/17
	(E GRO SALES	OSS	(C) COST OF OTHER BAS		EXI	(D) ENSE SALE	OF	(E) DEPRE			(F) OR LO	SS
	1,3	302,619.	1,302	,645			0.		0.			<26.>
DESCRIP	(A) TION OF	PROPERTY						MANNER CQUIRED	DA ACQU		DATE	SOLD
110,893	SHARES	STAPLES,	INC.						12/0	1/86	09/1	3/17
	(E GRO SALES	OSS	(C) COST OF OTHER BAS		EXI	(D) ENSE SALE	OF	(E) DEPRE			(F)	SS
	1,1	36,653.	1,057	,078	•		0.		0.		79,	575.
DESCRIP	(A) TION OF	PROPERTY						MANNER CQUIRED	DA ACQU	TE IRED	DATE	SOLD
VIA NEW	GENERAT	TION K-1	_				PU	RCHASED				
	(E GRC SALES	oss	(C) COST OF OTHER BAS		EXI	(D) ENSE SALE	OF	(E) DEPRE		CATN	(F)	ารร
_		8,250.		0	•	<u> </u>	0.		0.	——		,250.

	(A) TION OF PROP GENERATION				-	MANNI ACQUII	RED	DAT ACQUI		DATE SO	OLD
	(B) GROSS SALES PRIC	(C COST E OTHER	OR	(D EXPEN SA) SE OI	र	(E)	c.	GAIN	(F)	S
		0.	3,525.	-		0.		0.		<3,5	25 . >
	GAINS DIVID							_			0.
TOTAL T	O FORM 990-P	F, PART I,	LINE 6A					=		84,2	74.
FORM 99	0-PF INTERE	ST ON SAVIN	GS AND T	EMPORA	RY C	ASH IN	VESTI	MENTS	STA	ATEMENT	2
SOURCE				(A) VENUE BOOKS		NET IN	(B) VESTI COME	MENT		(C) ADJUSTED ET INCOM	
MORGAN	L REVENUE SE				4. 5. 5.		19,3	4. 5. 65. 193.			
TOTAL T	O PART I, LI	NE 3		19,26	7.		19,2	267.			
					== :						
FORM 99	0-PF	DIVIDENDS	AND INT	EREST	FROM	SECUR:	ITIE	S	ST	ATEMENT	3
SOURCE		GROSS AMOUNT	CAPIT GAIN DIVIDE	S	REV.	A) ENUE BOOKS		(B) INVES		(C) ADJUST NET INC	
MORGAN	ENTS S CAPITAL) STANLEY	472. 22,790.		0.	2:	472. 2,790.		4' 22,7	72. 90.		
NEW GEN	UND FUND	1,411.		0.		1,411.		1,4	11.		
TO PART	I, LINE 4	24,673.		0.	2	4,673.		24,6	73.		

FORM 990-PF	OTHER I	NCOME		STATEMENT	4
DESCRIPTION		(A) REVENUE PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTEI NET INCOM	
NEW GENERATION TURNAROUND FUN	1D	138.	138.	·	
TOTAL TO FORM 990-PF, PART I,	LINE 11	138.	138.		
FORM 990-PF	ACCOUNTI	NG FEES		STATEMENT	5
DESCRIPTION	(A) EXPENSES PER BOOKS		(C) ADJUSTED NET INCOME	(D) CHARITA PURPOS	
CINTOLO & MCCARTHY CPAS	1,000.	1,000	•		0.
TO FORM 990-PF, PG 1, LN 16B	1,000.	1,000	•	0.	
FORM 990-PF	TAX	ES		STATEMENT	6
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME		(D) CHARITA PURPOS	
2016 FORM 990	262.	262	•		0.
TO FORM 990-PF, PG 1, LN 18	262.	262	•		0.
FORM 990-PF	OTHER E	XPENSES		STATEMENT	7
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME			
MA ANNUAL FILING FEE	250.	250	•		0.
INVESTMENT EXPENSES VIA NEW GENERATION TURNAROUND FUND	16,188.	16,188	•		0.
INVESTMENT EXPENSES VIA CYPRESS CAPITAL	180.	180	•		0.
TO FORM 990-PF, PG 1, LN 23	16,618.	16,618	•		0.
		: 	= =====		

FORM 990-PF U.S. AND STAT	TE/CITY GOV	ERNMENT	OBLIGATIONS	STATEMENT	8
DESCRIPTION	U.S. GOV'T	OTHER GOV'T	BOOK VALUE	FAIR MARKE	r
FIDELITY INVESTMENTS (CYPRESS CAPITAL)		X	1,100,292.	1,097,8	54.
TOTAL U.S. GOVERNMENT OBLIGATION	1S	-			
TOTAL STATE AND MUNICIPAL GOVERN	MENT OBLIG	ATIONS	1,100,292.	1,097,8	54.
TOTAL TO FORM 990-PF, PART II, I	=	1,100,292. 1,097,8			
FORM 990-PF	CORPORATE	STOCK		STATEMENT	9
DESCRIPTION			BOOK VALUE	FAIR MARKE VALUE	Т
15,600 SHARES WRIGHT EXPRESS COR 39,500 SHARES VIRTUSA CORP	RP	-	1,019,244. 1,223,510.	2,203,1 1,741,1	
TOTAL TO FORM 990-PF, PART II, I	LINE 10B	:	2,242,754.	3,944,3	48.
FORM 990-PF C	OTHER INVES	TMENTS		STATEMENT	10
DESCRIPTION		ATION HOD	BOOK VALUE	FAIR MARKE VALUE	ľT
NEW GENERATION	CC	ST	451,789.	512,7	754.
TOTAL TO FORM 990-PF, PART II, I	TND 12	•	451,789.	512,7	7 E A