

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

Name of foundation ROBERT L CORKIN CHARITABLE FOUNDATION		A Employer identification number 05-6022654	
Number and street (or P O box number if mail is not delivered to street address) C/O THE ENTWISTLE CO-6 BIGELOW ST		B Telephone number (see instructions) (508) 481-4000	
City or town, state or province, country, and ZIP or foreign postal code HUDSON, MA 01749		C If exemption application is pending, check here ☐	
G Check all that apply ☐ Initial return ☐ Final return ☐ Address change ☐ Initial return of a former public charity ☐ Amended return ☐ Name change		D 1. Foreign organizations, check here ☐ 2 Foreign organizations meeting the 85% test, check here and attach computation ☐	
H Check type of organization ☒ Section 501(c)(3) exempt private foundation ☐ Section 4947(a)(1) nonexempt charitable trust ☐ Other taxable private foundation		E If private foundation status was terminated under section 507(b)(1)(A), check here ☐	
I Fair market value of all assets at end of year (from Part II, col (c), line 16) \$ 30,331,569		F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here ☐	
J Accounting method ☒ Cash ☐ Accrual ☐ Other (specify) (Part I, column (d) must be on cash basis)			

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)	467,911			
	2 Check ☐ if the foundation is not required to attach Sch B				
	3 Interest on savings and temporary cash investments	43,744	43,744		
	4 Dividends and interest from securities . . .	503,664	503,664		
	5a Gross rents				
	b Net rental income or (loss)				
	6a Net gain or (loss) from sale of assets not on line 10	366,853			
	b Gross sales price for all assets on line 6a 14,734,008				
	7 Capital gain net income (from Part IV, line 2) . . .		366,853		
	8 Net short-term capital gain				
	9 Income modifications				
	10a Gross sales less returns and allowances				
Operating and Administrative Expenses	b Less Cost of goods sold				
	c Gross profit or (loss) (attach schedule)				
	11 Other income (attach schedule)	510,282	510,282		
	12 Total. Add lines 1 through 11	1,892,454	1,424,543		
	13 Compensation of officers, directors, trustees, etc	0	0		0
	14 Other employee salaries and wages	8,500	0		8,500
	15 Pension plans, employee benefits				
	16a Legal fees (attach schedule)				
	b Accounting fees (attach schedule)	13,200	6,600		0
	c Other professional fees (attach schedule)				
	17 Interest				
	18 Taxes (attach schedule) (see instructions) . . .	28,709	13,679		0
	19 Depreciation (attach schedule) and depletion . . .				
	20 Occupancy				
	21 Travel, conferences, and meetings				
	22 Printing and publications				
	23 Other expenses (attach schedule)	274,065	142,283		0
	24 Total operating and administrative expenses. Add lines 13 through 23	324,474	162,562		8,500
	25 Contributions, gifts, grants paid	1,314,200			1,314,200
	26 Total expenses and disbursements. Add lines 24 and 25	1,638,674	162,562		1,322,700
	27 Subtract line 26 from line 12				
	a Excess of revenue over expenses and disbursements	253,780			
	b Net investment income (if negative, enter -0-)		1,261,981		
c Adjusted net income(if negative, enter -0-)					

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	26,354	25,358	25,358		
	2	Savings and temporary cash investments	1,415,577	873,705	873,705		
	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)	17,487,850	21,661,938	25,171,769		
	c	Investments—corporate bonds (attach schedule)	1,416,215	0	0		
	11	Investments—land, buildings, and equipment basis ▶ _____ Less accumulated depreciation (attach schedule) ▶ _____					
	12	Investments—mortgage loans					
	13	Investments—other (attach schedule)	6,070,048	4,123,410	4,211,654		
	14	Land, buildings, and equipment basis ▶ _____ Less accumulated depreciation (attach schedule) ▶ _____					
15	Other assets (describe ▶ _____)	0	0	49,083			
16	Total assets (to be completed by all filers—see the instructions Also, see page 1, item I)	26,416,044	26,684,411	30,331,569			
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	0	0			
	28	Paid-in or capital surplus, or land, bldg , and equipment fund	0	0			
	29	Retained earnings, accumulated income, endowment, or other funds	26,416,044	26,684,411			
30	Total net assets or fund balances (see instructions)	26,416,044	26,684,411				
31	Total liabilities and net assets/fund balances (see instructions) .	26,416,044	26,684,411				

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	26,416,044
2	Enter amount from Part I, line 27a	2	253,780
3	Other increases not included in line 2 (itemize) ▶ _____	3	14,587
4	Add lines 1, 2, and 3	4	26,684,411
5	Decreases not included in line 2 (itemize) ▶ _____	5	0
6	Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30 .	6	26,684,411

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)
1 a PUBLICLY TRADED SECURITIES - LONG-TERM	P		
b PUBLICLY TRADED SECURITIES - SHORT-TERM	P		
c CAPITAL GAINS DIVIDENDS	P		
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 10,269,859		9,939,522	330,337
b 4,460,957		4,427,633	33,324
c 3,192			3,192
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			330,337
b			33,324
c			3,192
d			
e			

2 Capital gain net income or (net capital loss)	2	366,853
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	1,371,210	26,736,594	0 051286
2015	1,289,975	27,543,011	0 046835
2014	1,163,800	27,544,849	0 042251
2013	1,130,674	25,086,938	0 045070
2012	1,000,808	22,818,024	0 043860
2 Total of line 1, column (d)			0 229302
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			0 045860
4 Enter the net value of noncharitable-use assets for 2017 from Part X, line 5			28,756,169
5 Multiply line 4 by line 3			1,318,758
6 Enter 1% of net investment income (1% of Part I, line 27b)			12,620
7 Add lines 5 and 6			1,331,378
8 Enter qualifying distributions from Part XII, line 4			1,322,700

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	25,240
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	25,240
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	25,240
6	Credits/Payments		
a	2017 estimated tax payments and 2016 overpayment credited to 2017	6a	39,083
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	49,083
8	Enter any penalty for underpayment of estimated tax. Check here ☐ if Form 2220 is attached	8	0
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	23,843
11	Enter the amount of line 10 to be Credited to 2018 estimated tax ☐ 23,843 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)? 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	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? 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
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? If "Yes," attach the statement required by General Instruction T	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? 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) ☐ RI		
b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? If "No," attach explanation .	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)? If "Yes," complete Part XIV	9	No
10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses	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 ► GEORGE KAPLAN Telephone no ► (508) 481-4000			

Located at **►** C/O THE ENTWISTLE COMPANY 6 BIGELOW STREET HUDSON MA ZIP+4 **►** 017492697

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 Yes			
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
See Additional Data Table				

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	Contributions to employee benefit plans and deferred compensation (d)	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

0

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	27,710,616
b	Average of monthly cash balances.	1b	1,483,464
c	Fair market value of all other assets (see instructions).	1c	0
d	Total (add lines 1a, b, and c).	1d	29,194,080
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	29,194,080
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions).	4	437,911
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4.	5	28,756,169
6	Minimum investment return. Enter 5% of line 5.	6	1,437,808

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	1,437,808
2a	Tax on investment income for 2017 from Part VI, line 5.	2a	25,240
b	Income tax for 2017 (This does not include the tax from Part VI).	2b	
c	Add lines 2a and 2b.	2c	25,240
3	Distributable amount before adjustments. Subtract line 2c from line 1.	3	1,412,568
4	Recoveries of amounts treated as qualifying distributions.	4	0
5	Add lines 3 and 4.	5	1,412,568
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	1,412,568

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	1,322,700
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	1,322,700
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	1,322,700

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				1,412,568
2 Undistributed income, if any, as of the end of 2017				
a Enter amount for 2016 only.			1,233,227	
b Total for prior years 20____, 20____, 20____		0		
3 Excess distributions carryover, if any, to 2017				
a From 2012.				
b From 2013.				
c From 2014.				
d From 2015.				
e From 2016.				
f Total of lines 3a through e.	0			
4 Qualifying distributions for 2017 from Part XII, line 4 ▶ \$ <u>1,322,700</u>				
a Applied to 2016, but not more than line 2a			1,233,227	
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.				89,473
e Remaining amount distributed out of corpus	0			
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	0			
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				1,323,095
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).	0			
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.				

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

1	Information Regarding Foundation Managers:
a	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) (See section 507(d)(2))
b	List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest

Check here ☒ if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d.

- a. The name, address, and telephone number or email address of the person to whom applications should be addressed

- b. The form in which applications should be submitted and information and materials they should 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

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	1,314,200
b <i>Approved for future payment</i>				
Total			3b	0

Enter gross amounts unless otherwise indicated

Part XVI-B Relationship of Activities to the Accomplishment of Exempt PurposesForm **990-PF** (2017)

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

1 Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?		Yes	No
a Transfers from the reporting foundation to a noncharitable exempt organization of			
(1) Cash.	1a(1)		No
(2) Other assets.	1a(2)		No
b Other transactions			
(1) Sales of assets to a noncharitable exempt organization.	1b(1)		No
(2) Purchases of assets from a noncharitable exempt organization.	1b(2)		No
(3) Rental of facilities, equipment, or other assets.	1b(3)		No
(4) Reimbursement arrangements.	1b(4)		No
(5) Loans or loan guarantees.	1b(5)		No
(6) Performance of services or membership or fundraising solicitations.	1b(6)		No
c Sharing of facilities, equipment, mailing lists, other assets, or paid employees.	1c		No
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

2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? ☐ Yes ☒ No

b If "Yes," complete the following schedule

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

Sign Here	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.		
	*****	2018-11-14	*****
	Signature of officer or trustee	Date	Title

May the IRS discuss this return with the preparer shown below (see instr)? ☒ Yes ☐ No
--

Paid Preparer Use Only	Print/Type preparer's name	Preparer's Signature	Date	Check if self-employed ☐	PTIN
	PAUL WEIRETER				P00140887
	Firm's name ▶ RSM US LLP				Firm's EIN ▶ 42-0714325
	Firm's address ▶ 80 CITY SQUARE BOSTON, MA 021293742				Phone no (617) 912-9000

Form 990PF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation

(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
MARJORIE C KAPLAN	TRUSTEE 5 00	24,499	0	0
C/O ENTWISTLE CO 6 BIGELOW STREET HUDSON, MA 01749				
THOMAS O KATZ	TRUSTEE 5 00	24,499	0	0
C/O KATZ BASKIE LLC 2255 GLADES ROAD SUITE 240W BOCA RATON, FL 33431				
DALE F ECK	TRUSTEE 5 00	24,499	0	0
C/O ENTWISTLE CO 6 BIGELOW STREET HUDSON, MA 01749				
LEE MANNING	TRUSTEE 5 00	24,499	0	0
C/O ENTWISTLE CO 6 BIGELOW STREET HUDSON, MA 01749				
MARY LOU SULLIVAN	ADMINISTRATOR 5 00	8,500	0	0
C/O ENTWISTLE CO 6 BIGELOW STREET HUDSON, MA 01749				

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>				
ABBEY'S HOUSE52 HIGH STREET WORCESTER, MA 01609	NONE	PUBLIC CHARITY	GENERAL SUPPORT	500
AIDS ACTION COMMITTEE 75 AMORY STREET BOSTON, MA 02119	NONE	PUBLIC CHARITY	GENERAL SUPPORT	7,500
AMERICAN HEART ASSOCIATION 7272 GREENVILLE AVENUE DALLAS, TX 75231	NONE	PUBLIC CHARITY	GENERAL SUPPORT	600
Total ▶ 3a				1,314,200

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>				
AMERICAN JEWISH HISTORY NATURAL MUSEUM 101 SOUTH INDEPENDENCE MALL EAST PHILADELPHIA, PA 19106	NONE	PUBLIC CHARITY	GENERAL SUPPORT	15,000
ASPCAPO BOX 96929 WASHINGTON, DC 200777127	NONE	PUBLIC CHARITY	GENERAL SUPPORT	250
ASSABET VALLEY REGIONAL TECHNICAL HIGH SCHOOL SCHOLARSHIP FUND 215 FITCHBURG STREET MARLBORO, MA 01752	NONE	GOVERNMENT	GENERAL SUPPORT	5,000
Total ► 3a				1,314,200

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>				
AUGUSTANA COLLEGE639 38TH STREET ROCK ISLAND, IL 61201	NONE	PUBLIC CHARITY	GENERAL SUPPORT	5,000
BENTLEY UNIVERSITY 175 FOREST STREET WALTHAM, MA 02452	NONE	PUBLIC CHARITY	GENERAL SUPPORT	2,500
BERLIN FOOD PANTRY 23 LINDEN ST CLUSTER BOX 6 BERLIN, MA 01503	NONE	PUBLIC CHARITY	GENERAL SUPPORT	500
Total ▶ 3a				1,314,200

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 Paid during the year				
BEST FRIENDS ANIMAL SOCIETY 5001 ANGEL CANYON ROAD KANAB, UT 84741	NONE	PUBLIC CHARITY	GENERAL SUPPORT	500
BOSTON CHILDREN'S HOSPITAL 401 PARK DRIVE SUITE 602 BOSTON, MA 02215	NONE	PUBLIC CHARITY	GENERAL SUPPORT	500
BOSTON MED FLIGHT ROBINS STREET HANGER 1727 BEDFORD, MA 01730	NONE	PUBLIC CHARITY	GENERAL SUPPORT	500
Total ▶ 3a				1,314,200

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 Paid during the year				
BOSTON MED CTR 1 BOSTON MEDICAL CENTER PLACE BOSTON, MA 02118	NONE	PUBLIC CHARITY	GENERAL SUPPORT	1,000
BOSTON RESCUE MISSION PO BOX 120069 BOSTON, MA 02112	NONE	PUBLIC CHARITY	GENERAL SUPPORT	250
BOSTON UNIVERSITY 595 COMMONWEALTH AVENUE SUITE 700 WEST ENTRANCE BOSTON, MA 02215	NONE	PUBLIC CHARITY	GENERAL SUPPORT	20,000
Total ▶ 3a				1,314,200

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>				
BOYS & GIRLS CLUB OF CENTRAL NEW HAMPSHIRE 55 BRADLEY STREET CONCORD, NH 033016439	NONE	PUBLIC CHARITY	GENERAL SUPPORT	675
BOYS & GIRLS CLUB OF LAKES REGION 876 N MAIN STREET LACONIA, NH 03246	NONE	PUBLIC CHARITY	GENERAL SUPPORT	675
BRAIN TUMOR SOCIETY 8550 W BRYN MAWR AVE CHICAGO, IL 60631	NONE	PUBLIC CHARITY	GENERAL SUPPORT	42,500
Total ► 3a				1,314,200

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>				
BRANDEIS INTERNATIONAL BUSINESS SCHOOL 415 SOUTH STREET WALTHAM, MA 02453	NONE	PUBLIC CHARITY	GENERAL SUPPORT	5,000
BRIGHAM AND WOMEN'S HOSPITAL 75 FRANCIS STREET BOSTON, MA 02115	NONE	PUBLIC CHARITY	GENERAL SUPPORT	200,000
BRIMMER & MAY SCHOOL 69 MIDDLESEX ROAD CHESTNUT HILL, MA 02467	NONE	PUBLIC CHARITY	GENERAL SUPPORT	200,000
Total ► 3a				1,314,200

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>				
CAPUCHIN FRANCISCAN PROVINCE OF ST JOSEPH 1820 MT ELLIOT STREET DETROIT, MI 48207	NONE	PUBLIC CHARITY	GENERAL SUPPORT	300
CENTER FOR LEARNING & LEADERSHIP CLAL - THE NATIONAL JEWISH CENTER FOR LEARNING LEADERSHIP 440 PARK AV NEW YORK, NY 10016	NONE	PUBLIC CHARITY	GENERAL SUPPORT	42,500
CHAPS INC78 MAIN STREET HUDSON, MA 01749	NONE	PUBLIC CHARITY	GENERAL SUPPORT	5,000
Total ▶ 3a				1,314,200

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>				
CHILDREN'S HOSPITAL BOSTON 300 LONGWOOD AVE BOSTON, MA 02115	NONE	PUBLIC CHARITY	GENERAL SUPPORT	312,500
DANA-FARBER CANCER INSTITUTE 450 BROOKLINE AVE BOSTON, MA 02215	NONE	PUBLIC CHARITY	GENERAL SUPPORT	350
FAMILY HEALTH CENTER OF WORCESTER PO BOX 20205 WORCESTER, MA 016020205	NONE	PUBLIC CHARITY	GENERAL SUPPORT	250
Total ► 3a				1,314,200

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>				
FRANCISCAN CHILDRENS 30 WARREN STREET BRIGHTON, MA 02135	NONE	PUBLIC CHARITY	GENERAL SUPPORT	20,000
FRIENDS OF AUCKLAND UNIVERSITY 275 MADISON AVE NEW YORK, NY 10016	NONE	PUBLIC CHARITY	GENERAL SUPPORT	1,000
GIFT OF LIFE 800 YAMATO ROAD SUITE 101 BOCA RATON, FL 33431	NONE	PUBLIC CHARITY	GENERAL SUPPORT	1,000
Total ▶ 3a				1,314,200

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>				
HEBREW SENIOR LIFE1200 CENTRE ST BOSTON, MA 02131	NONE	PUBLIC CHARITY	GENERAL SUPPORT	5,000
HORACE MANN EDUCATIONAL ASSOCIATES 8 FORGE PARK EAST FRANKLIN, MA 02038	NONE	PUBLIC CHARITY	GENERAL SUPPORT	15,000
HORIZONS FOR HOMELESS CHILDREN 1705 COLUMBUS AVENUE ROXBURY, MA 02119	NONE	PUBLIC CHARITY	GENERAL SUPPORT	25,000
Total ▶ 3a				1,314,200

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 Paid during the year				
HUDSON HIGH SCHOOL SCHOLARSHIP FUND 69 BRIGHAM STREET HUDSON, MA 01749	NONE	GOVERNMENT	GENERAL SUPPORT	5,000
HUDSON PUBLIC LIBRARY 3 WASHINGTON STREET HUDSON, MA 01749	NONE	PUBLIC CHARITY	GENERAL SUPPORT	1,500
HULL LITTLE LEAGUEPO BOX 29 HULL, MA 02045	NONE	PUBLIC CHARITY	GENERAL SUPPORT	500
Total ▶ 3a				1,314,200

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>				
INSTITUTE OF CONTEMPORARY ART BOSTON 25 HARBOR SHORE DRIVE BOSTON, MA 02210	NONE	PUBLIC CHARITY	GENERAL SUPPORT	50,000
JEWISH VOCATIONAL SERVICE 6505 WILSHIRE BLVD SUITE 200 LOS ANGELES, CA 90048	NONE	PUBLIC CHARITY	GENERAL SUPPORT	2,500
JUDGE BAKER CHILDREN'S CENTER 53 PARKER HILL AVENUE BOSTON, MA 02120	NONE	PUBLIC CHARITY	GENERAL SUPPORT	500
Total ► 3a				1,314,200

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>				
LEWY BODY DEMENTIA ASSOCIATION 912 KILLIAN HILL ROAD SW SUITE 204 205 LILBURN, GA 30047	NONE	PUBLIC CHARITY	GENERAL SUPPORT	300
LINCOLN-SUDBURY SCHOLARSHIP FUND 390 LINCOLN ROAD SUDBURY, MA 01776	NONE	GOVERNMENT	GENERAL SUPPORT	10,000
MAKE A WISH FOUNDATION ONE BULFINCH PLACE SUITE 201 BOSTON, MA 02114	NONE	PUBLIC CHARITY	GENERAL SUPPORT	1,500
Total ▶ 3a				1,314,200

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>				
MARCH OF DIMES 112 TURNPIKE ROAD SUITE 300 WESTBORO, MA 01581	NONE	PUBLIC CHARITY	GENERAL SUPPORT	500
MASS 4-H22 ELLIOT STREET ASHLAND, MA 01721	NONE	PUBLIC CHARITY	GENERAL SUPPORT	7,750
MASSACHUSETTS GENERAL HOSPITAL 125 NASHUA STREET BOSTON, MA 02114	NONE	PUBLIC CHARITY	GENERAL SUPPORT	5,000
Total ▶ 3a				1,314,200

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 Paid during the year				
MDSC BUDDY WALK 20 BURLINGTON MALL ROAD SUITE 261 BURLINGTON, MA 01803	NONE	PUBLIC CHARITY	GENERAL SUPPORT	600
MEALS ON WHEELSPO BOX 1063 BERLIN, MA 01503	NONE	PUBLIC CHARITY	GENERAL SUPPORT	500
METROWEST BOYS & GIRLS CLUB OF HUDSON 21 CHURCH STREET HUDSON, MA 01749	NONE	PUBLIC CHARITY	GENERAL SUPPORT	26,500
Total 				1,314,200
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, 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>				
MSPCA350 S HUNTINGTON AVENUE BOSTON, MA 02130	NONE	PUBLIC CHARITY	GENERAL SUPPORT	2,000
MUSCULAR DYSTROPHY ASSOCIATION PO BOX 97075 WASHINGTON, DC 200907075	NONE	PUBLIC CHARITY	GENERAL SUPPORT	250
NEADSPO BOX 1100 PRINCETON, MA 01541	NONE	PUBLIC CHARITY	GENERAL SUPPORT	2,500
Total ▶ 3a				1,314,200

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>				
NEONATAL ICU PATIENT & FAMILY ADV FUND UMASS MEMORIAL MEDICAL CENTER 119 BELMONT STREET WORCESTER, MA 01605	NONE	PUBLIC CHARITY	GENERAL SUPPORT	1,000
PAN MASS CHALLENGE77 FOURTH AVE NEEDHAM, MA 02494	NONE	PUBLIC CHARITY	GENERAL SUPPORT	1,550
PLANNED PARENTHOOD 1055 COMMONWEALTH AVENUE BOSTON, MA 02215	NONE	PUBLIC CHARITY	GENERAL SUPPORT	750
Total ▶ 3a				1,314,200

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>				
PROJECT STEP 301 MASSACHUSETTS AVENUE BOSTON, MA 02115	NONE	PUBLIC CHARITY	GENERAL SUPPORT	15,000
PROVISION MINISTRY INC 7 THOMAS NEWTON DRIVE WESTBOROUGH, MA 01581	NONE	PUBLIC CHARITY	GENERAL SUPPORT	1,000
SHORE COUNTRY DAY SCHOOL 545 CABOT BEVERLY, MA 01915	NONE	PUBLIC CHARITY	GENERAL SUPPORT	250
Total ▶ 3a				1,314,200

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>				
SILENT SPRING INSTITUTE 320 NEVADA STREET SUITE 302 NEWTON, MA 02460	NONE	PUBLIC CHARITY	GENERAL SUPPORT	2,500
SMART FROM THE START 68 ANNUNCIATION ROAD BOSTON, MA 02120	NONE	PUBLIC CHARITY	GENERAL SUPPORT	67,500
SNOW COLLEGE150 COLLEGE AVENUE EPHRAIM, UT 84627	NONE	PUBLIC CHARITY	GENERAL SUPPORT	10,000
Total ▶ 3a				1,314,200

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>				
SPECIAL OLYMPICS MASSACHUSETTS PO BOX 322 HATHORNE, MA 019370322	NONE	PUBLIC CHARITY	GENERAL SUPPORT	150
STRAIGHT AHEAD MINISTRIES 791 MAIN STREET WORCESTER, MA 01610	NONE	PUBLIC CHARITY	GENERAL SUPPORT	1,500
SUDBURY COMMUNITY ARTS CENTER 37 ATKINSON LANE SUDBURY, MA 01776	NONE	PUBLIC CHARITY	GENERAL SUPPORT	600
Total ▶ 3a				1,314,200

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 Paid during the year				
SUSTAINABLE CAPE PO BOX 10048 TRURO CENTER ROADTRURO, MA 02666	NONE	PUBLIC CHARITY	GENERAL SUPPORT	500
SYMPHONY PRO MUSICA14 MAIN ST HUDSON, MA 01749	NONE	PUBLIC CHARITY	GENERAL SUPPORT	500
TEMPLE ISRAEL OF BOSTON 477 LONGWOOD AVE BOSTON, MA 02215	NONE	PUBLIC CHARITY	GENERAL SUPPORT	25,000
Total ▶ 3a				1,314,200

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 Paid during the year				
THE DANNY DID FOUNDATION PO BOX 46576 CHICAGO, IL 60646	NONE	PUBLIC CHARITY	GENERAL SUPPORT	100
THE DAVID SHELARICK WILDLIFE 25283 CABOT ROAD SUITE 101 LAGUNA HILLS, CA 92653	NONE	PUBLIC CHARITY	GENERAL SUPPORT	200
THE MILLBURN SHORT HILLS FIRST AID SQUAD PO BOX 226 MILLBURN, NJ 07041	NONE	PUBLIC CHARITY	GENERAL SUPPORT	500
Total ► 3a				1,314,200

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>				
THE RIVERS SCHOOL 333 WINTER STREET WESTON, MA 02493	NONE	PUBLIC CHARITY	GENERAL SUPPORT	6,500
TOYS FOR TOTSP0 BOX 25845 LEHIGH VALLEY, PA 180025845	NONE	PUBLIC CHARITY	GENERAL SUPPORT	250
TRUSTEES OF UNIVERSITY OF PA 3451 WALNUT STREET SUITE 305 PHILADELPHIA, PA 19104	NONE	PUBLIC CHARITY	GENERAL SUPPORT	5,000
Total ▶ 3a				1,314,200

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>				
TUFTS COLLEGE TRUSTEESPO BOX 3306 BOSTON, MA 03306	NONE	PUBLIC CHARITY	GENERAL SUPPORT	100
UNIVERSITY OF DENVER 2190 E ASHBURY AVENUE DENVER, CO 802087500	NONE	PUBLIC CHARITY	GENERAL SUPPORT	50,000
VICTORY PROGRAMS 965 MASSACHUSETTS AVENUE BOSTON, MA 02118	NONE	PUBLIC CHARITY	GENERAL SUPPORT	45,000
Total ▶ 3a				1,314,200

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>				
ZOO NEW ENGLAND149 POND STREET STONEHAM, MA 02180	NONE	PUBLIC CHARITY	GENERAL SUPPORT	25,000
Total ▶ 3a				1,314,200

TY 2017 Accounting Fees Schedule**Name:** ROBERT L CORKIN CHARITABLE FOUNDATION**EIN:** 05-6022654**Accounting Fees Schedule**

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
ACCOUNTING/TAX PREP	13,200	6,600		0

TY 2017 Investments Corporate Stock Schedule**Name:** ROBERT L CORKIN CHARITABLE FOUNDATION**EIN:** 05-6022654

Name of Stock	End of Year Book Value	End of Year Fair Market Value
CORPORATE STOCK	21,661,938	25,171,769

TY 2017 Investments - Other Schedule

Name: ROBERT L CORKIN CHARITABLE FOUNDATION

EIN: 05-6022654

Investments Other Schedule 2

Category/ Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value
OTHER INVESTMENTS	FMV	4,123,410	4,211,654

TY 2017 Other Assets Schedule

Name: ROBERT L CORKIN CHARITABLE FOUNDATION

EIN: 05-6022654

Other Assets Schedule

Description	Beginning of Year - Book Value	End of Year - Book Value	End of Year - Fair Market Value
FEDERAL TAX DEPOSIT			49,083

TY 2017 Other Expenses Schedule**Name:** ROBERT L CORKIN CHARITABLE FOUNDATION**EIN:** 05-6022654**Other Expenses Schedule**

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
INVESTMENT FEES	142,283	142,283		0
FILING FEE	50	0		0
TRUSTEES FEES	131,732	0		0

TY 2017 Other Income Schedule

Name: ROBERT L CORKIN CHARITABLE FOUNDATION

EIN: 05-6022654

Other Income Schedule

Description	Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income
UBS 01525 OTHER INCOME	510,282	510,282	510,282

TY 2017 Other Increases Schedule

Name: ROBERT L CORKIN CHARITABLE FOUNDATION
EIN: 05-6022654

Description	Amount
OTHER ADJUSTMENTS	14,587

TY 2017 Taxes Schedule**Name:** ROBERT L CORKIN CHARITABLE FOUNDATION**EIN:** 05-6022654

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
FOREIGN TAX	13,679	13,679		0
FEDERAL TAX	15,030	0		0

efile GRAPHIC print - DO NOT PROCESS		As Filed Data -		DLN: 93491318019038							
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 ROBERT L CORKIN CHARITABLE FOUNDATION				Employer identification number 05-6022654							
Organization type (check one)											
Filers of: Form 990 or 990-EZ Form 990-PF						Section: ☐ 501(c)() (enter number) organization ☐ 4947(a)(1) nonexempt charitable trust not treated as a private foundation ☐ 527 political organization ☒ 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 <i>exclusively</i> 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 <i>exclusively</i> 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 <i>exclusively</i> religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received <i>nonexclusively</i> 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).											
For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF		Cat No 30613X		Schedule B (Form 990, 990-EZ, or 990-PF) (2017)							

Name of organization ROBERT L CORKIN CHARITABLE FOUNDATION	Employer identification number 05-6022654
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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
1	CORKIN CHARITABLE LEAD TRUST 2255 GLADES RD STE 240 BOCA RATON, FL 33431	\$ 467,911	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions)
-		\$	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions)
-		\$	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions)
-		\$	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions)
-		\$	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions)
-		\$	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions)
-		\$	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions)
-		\$	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions)

05-6022654

Part II

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

Name of organization ROBERT L CORKIN CHARITABLE FOUNDATION	Employer identification number 05-6022654
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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	