

Form **990-PF** 

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.

Internal Revenue Service	➤ Go to www.irs.gov/Form990PF for instruction	ctions and the latest info	ormation. Open to Put	olic Inspection
For calendar year 2017 or tax year begin	ning	, and ending		<del></del>
Name of foundation			A Employer identification number	
THE LAWRENCE A. BC			06-1188527	
Number and street (or P O box number if mail is a 452 WEST MOUNTAIN		Room/suite	B Telephone number 2034319832	,
City or town, state or province, country, a	nd ZIP or foreign postal code		C if exemption application is pending, check her	• •
	877 return. Linual return of a form	mer public charity	D 1 Foreign organizations check here	<b>▶</b> □
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For	n 990	O-PF (2017) THE LAWRENCE A. BOSSIDY	FOUNDATION	06-1	188527 Page 2
TO:	77 X	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year	End of y	year
U	airiff.	column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing	956,235.	464,627.	464,627.
	2	Savings and temporary cash investments			
	3	Accounts receivable			
ĺ		Less: allowance for doubtful accounts			
	4	Pledges receivable ▶			
Ì		Less; allowance for doubtful accounts			_
J	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons	4,282.	5,878.	5,878.
	7	Other notes and loans receivable			
ı		Less; allowance for doubtful accounts			
S	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			
As	10a	Investments - U.S. and state government obligations			
	Ь	Investments - corporate stock STMT 7	2,046,294.	2,046,294.	2,005,583.
		Investments - corporate bonds			
	11	Investments - land, buildings, and equipment basis			
		Less accumulated depreciation			
ı	12	Investments - mortgage loans			
	13	Investments - other			
	14	Land, buildings, and equipment: basis			
		Less accumulated depreciation			
	15	Other assets (describe			
	1	Total assets (to be completed by all filers - see the			
!		instructions. Also, see page 1, item I)	3,006,811.	2,516,799.	2,476,088.
	17	Accounts payable and accrued expenses			
	18	Grants payable			
	19	Deferred revenue			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
ij	21	Mortgages and other notes payable			
٣	22	Other liabilities (describe )			
	23	Total liabilities (add lines 17 through 22)	0.	0.	
_	-	Foundations that follow SFAS 117, check here			
	•	and complete lines 24 through 26, and lines 30 and 31.			
ces	24	Unrestricted			
	l	Temporarily restricted			
ala	26	Permanently restricted			
Assets or Fund Balar	-"	Foundations that do not follow SFAS 117, check here	<del></del>		
Ē		and complete lines 27 through 31.			
٥	27	Capital stock, trust principal, or current funds	3,006,811.	3,006,811.	
ets	28	Paid-in or capital surplus, or land, bldg., and equipment fund	0.1	0.	
SS	29	Retained earnings, accumulated income, endowment, or other funds	0.	-490,012.	
Net /	30	Total net assets or fund balances	3,006,811.	2,516,799.	
Z	"	Total net assets of famo balances	3733373337		
	31	Total liabilities and net assets/fund balances	3,006,811.	2,516,799.	
E	चिति	Analysis of Changes in Net Assets or Fund Ba	BIANCES		
1	Tota	I net assets or fund balances at beginning of year - Part II, column (a), line	30		
•		st agree with end-of-year figure reported on prior year's return)		1	3,006,811.
2	•	r amount from Part I, line 27a	•	2	3,006,811.
		r increases not included in line 2 (itemize)		3	0.
		lines 1, 2, and 3		4	2,516,799.
		eases not included in line 2 (itemize)		5	0.
		net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	olumn (b), line 30	6	2,516,799.
<u> </u>	· via	the til or			Form 990-PF (2017)

Part IV Capital Gains	and Loss	es for Tax on Inv	estment	Income					
		f property sold (for exam common stock, 200 shs.		te,	( <b>b)</b> I	How acquired - Purchase - Donation		acquired lay, yr.)	(d) Date sold (mo., day, yr.)
1a									
b NO	NE				<u> </u>				
С									
_d					<u> </u>				
_e		<del></del>			<u>Ļ</u> _,				
(e) Gross sales price	, , .	oreciation allowed or allowable)		st or other basis expense of sale		<u>.</u>		Sain or (loss s (f) minus	
<u>a</u>		<del></del>		<del></del>					
<u>b</u>						<del></del>			
<u>-c</u>									
<u>d</u>	·								<del></del>
Complete only for assets shown	a ann in col	umn (h) and owned by th	he foundation	on 12/31/60			I) Coine //	Cal (b) man	
Complete only for assets shown		<del></del>				CO	i) Gains (c l. (k). but i	Col. (h) gain not less tha	minus n -0-) or
(i) FMV as of 12/31/69		Adjusted basis s of 12/31/69		cess of col. (ı) col. (ı), ıf any			Losses	(from col. (	h))
	<u>_</u>	-		(),,					
<u>a</u>			<del></del>		$\dashv$			<del></del> .	
<u>b</u>									
<u>-c</u>									
<u>d</u>			<del></del>						
<u>e</u>					$\dashv$	<del></del>			
2 Capital gain net income or (net ca	ıpıtal loss)	$ \begin{cases} \text{ If gain, also enter} \\ \text{ If (loss), enter -0-} \end{cases} $	ın Part I, line ın Part I, line	7 7	}	2			
3 Net short-term capital gain or (los	ss) as defined	d in sections 1222(5) and	៨ (6):		51				
If gain, also enter in Part I, line 8,	column (c).				1				
If (loss), enter -0- in Part I, line 8  Part V   Qualification U	ndor Coo	tion 4040/a) for I	Dodugod	Tay on Not	1000	3			
<u> </u>							ome		
(For optional use by domestic private	foundations	subject to the section 49	940(a) tax on	net investment in	come.	.)			
If section 4940(d)(2) applies, leave the	his part blank	<b>(</b> _							
Was the foundation liable for the sec				•	iod?				Yes X No
If "Yes," the foundation doesn't qualif	<del> </del>								
1 Enter the appropriate amount in	each column	for each year, see the ins	structions bei	ore making any er	ntries.	<del></del>			(4)
(a) Base period years Calendar year (or tax year beginni	ng IN)	Adjusted qualifying dist		Net value of no		itable-use assets		Dıstril (col. (b) dıv	(d) putton ratio yided by col. (c))
2016			4,304.	<u> </u>		,474,393			.252306
2015	<u></u> -		7,134.			,079,766			.447155
2014		1,49	3,553.			,991,538			.374180
2013			5,686.			,131,736			.594347
2012		250	6,650.		2	,283,778	-		.112380
2 Total of line 1, column (d)							2	ļ <u>.</u>	1.780368
3 Average distribution ratio for the			n line 2 by 5.0	J, or by the numb	er of y	/ears		]	356074
the foundation has been in existe	nce if less tha	an 5 years					3	<del> </del>	.356074
4 Enter the net value of noncharitat	le-use assets	s for 2017 from Part X, I	ine 5				4		2,896,818.
5 Multiply line 4 by line 3							5		1,031,482.
6 Enter 1% of net investment incon	ne (1% of Pai	rt I, line 27b)					6		669.
							1	[	
7 Add lines 5 and 6							7_		1,032,151.
8 Enter qualifying distributions from	n Dart VII 1.a	ο <b>Λ</b>					8		1,206,904.
	•		46	*	40	1/ tou			_,,,
If line 8 is equal to or greater than See the Part VI instructions.	n line /, chec	k trie dox in Part VI, line	ib, and comp	ilete that part usin	ig a 15	70 tax rate.			
		<del></del>	<del></del> _	<del></del>					orm 990-PF (2017)
723521 01-03-18									UTITIO - 1 (2017)

16 Exempt operating foundations described in section 4940(s)(2), circle be s		m 990-PF (2017) THE LAWRENCE A. BOSSIDY FOUNDATION art VII Excise Tax Based on Investment Income (Section 4940(a), 4940(b),	4940(e), or 49	06÷1 48 - s	188527 Page 4
Datase for ruling or determination letter: [attase cays of letter if necessary-se instructions] b Drimensic foundations that meter the section 4940(e) requirements in Part V, check here   X   1   66.9 .  All other domainst foundations and received 4947(e)(1) trusts and brable foundations, enter 4% of Part I, line 27b.  2 Tax under section 511 (domestic section 4947(e)(1) trusts and brable foundations, enter 4% of Part I, line 12, cot. (b).  3 Add fines 1 and 2   3 66.9 .  Subtitled Funcions tax (domestic section 4947(e)(1) trusts and brable foundations only, others, enter -0-)   3 66.9 .  5 Tax based on investment income. Subtract line 4 from line 3.1 if 20 or less, enter -0-  5 Tax based on investment income. Subtract line 4 from line 3.1 if 20 or less, enter -0-  5 Tax based on investment income. Subtract line 4 from line 3.1 if 20 or less, enter -0-  5 Tax based on investment income. Subtract line 4 from line 3.1 if 20 or less, enter -0-  5 Tax based on investment income. Subtract line 4 from line 3.1 if 20 or less, enter -0-  5 Tax based on investment income. Subtract line 4 from line 3.1 if 20 or less, enter -0-  5 Tax based on investment income. Subtract line 4 from line 3.1 if 20 or less, enter -0-  5 Tax based on investment income. Subtract line 4 from line 3.1 if 20 or less, enter -0-  6 B					
a Domestic foundations that meet the section 4940(e) requirements in Part V, check here	-				•
of Part I, line 27b All other domestic boundations enter 2% of line 27b. Exempt foreign organizations, enter 4% of Part I, line 12, col. (b).  2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-) 3 Add lines 1 and 2 3 Subtitis A (money) lax (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-) 5 Tax based on investment income. Subtract line 4 from line 3.1 zero or less, enter -0- 5 Tax based on investment income. Subtract line 4 from line 3.1 zero or less, enter -0- 5 Tax based on investment incomes. Subtract line 4 from line 3.1 zero or less, enter -0- 5 Tax based on investment incomes. Subtract line 4 from line 3.1 zero or less, enter -0- 5 Tax based on investment incomes. Subtract line 4 from line 3.1 zero or less, enter -0- 6 Less and payments. Add lines 5 as through 6 de 3 C. 1 destargency engranzations - Lax withhield at source 6 Less and payments. Add lines 5 as through 6 de 3 C. 1 destargency engranzations - Lax withhield at source 6 Total credits and payments. Add lines 5 as through 6 de 5 C. 2 destargency engranzations - Lax withhield at source 7 Total credits and payments. Add lines 5 as through 6 de 6 D. 1 destargency engranzations - Lax withhield at source 8 Total credits and payments. Add lines 5 as through 6 de 6 D. 1 destargency engranzations - Lax withhield at source of 1 are destargency engranzations. Line 1 destargency engranzations - Lax withhield at source of 1 are destargency engranzations. Line 1 destargency engranzations - Lax withhield at source of 1 are destargency engranzations. Line 1 destargency engranzations - Lax withhield at source of 1 destargency engranzations. Line 1 destargency engranzation	ь			1	669.
1 Az under section \$11 (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-) 3 d. 669. 3 d. 669. 4 Subtilize A (niconne) tax (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-) 5 Tax based on investment income. Subtract line 4 from line 3.1 zero or less, enter -0- 5 Tax based on investment income. Subtract line 4 from line 3.1 zero or less, enter -0- 5 Tax based on investment income. Subtract line 4 from line 3.1 zero or less, enter -0- 5 Tax based on investment income. Subtract line 4 from line 3.1 zero or less, enter -0- 5 Tax based on investment income. Subtract line 4 from line 3.1 zero or less, enter -0- 6 C redistry-pyments; a 2017 estimated tax pyments and 2016 oversyment credited to 2017 6 Exempt from granactanos - tax withheld at source 6 Tax des. If the total of lines 5 and 8 served than 10 zero or less, enter the amount overpaid 7 Total credits and paymonis. Add lines 6s through 6d 8 Enter any penalty for underpayment of submanded tax. Check here in Form 220 is attached 9 Tax des. If the total of lines 5 and 8 server than line 7, enter amount overpaid 10 oversymment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 10 oversymment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 10 oversymment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 10 oversymment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 10 oversymment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 10 oversymment. If line 7 is more than the total of lines 5 and 8, enter the amount of line 10 to be credited to 20 line 10 zero over 10 z	_				
3 d 56.9.  Stubbile A (income) tax (domestic section 4947(a)(1) busts and taxable foundations only, others, enter -0-)  Tax based on investment income. Subtract line 4 from line 3. if zero or less, enter -0-  Tax based on investment income. Subtract line 4 from line 3. if zero or less, enter -0-  Exempt foreign organizations - Lax withheld at source  Tax pad with application for extension of time to life (form 8688)  Exempt and applicants or extension of time to life (form 8688)  Better any penalty for underpayment of estimated tax. Check here ☐ if Form 2220 is attached  Total credits and payments. Add lines 6 through 6d  Enter any penalty for underpayment of estimated tax. Check here ☐ if Form 2220 is attached  Total credits and payments. Add lines 6 through 6d  Enter any penalty for underpayment of estimated tax. Check here ☐ if Form 2220 is attached  Total credits and payments. Add lines 6 through 6d  Enter any penalty for underpayment of estimated tax. Check here ☐ if Form 2220 is attached  Total credits and payments. Add lines 6 through 6d  Enter any penalty for underpayment of estimated tax. Check here ☐ if Form 2220 is attached  Total credits and payments. Hime 7 is more than line 7, enter amount event  Overapyment. Hime 7 is more than 1 the total fines 5 and 8, enter the amount or event 1 in 1	c	c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations, enter 4% of Part I, line 12,	col. (b).		
Subtlie A (income) tax (formests eaction 4947(a)(1) trusts and taxable foundations only, others, enter -0-)  5 Tax based on investment income. Subtract line 4 from line 3. if zero or less, enter -0-  6 C reditcPayments:  2 2017 estimated tax payments and 2016 overpayment credited to 2017  Exempt foreign organizations -1 was withheld at source  6 Tax paid with application for extension of time to file (form 8688)  6 B 0 0 6  6 B 0 0 6  6 B 0 0 6  6 B 0 0 7  6 B 28.2.  8 D 1 Tax disc. If the total of lines 5 and 8 is more than fine 7 enter amount owed  9 Tax disc. If the total of lines 5 and 8 is more than fine 7 enter amount owed  10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid  10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid  11 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid  12 During the tax year, did the foundation attempt to inflive entire than the set of the state and the state and the set of t	2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)	, ·	2	0.
5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0- 6 Cr edits/Payments. 2 (2) 17 stimulated ax payments and 2016 overpayment credited to 2017 6 Exempl foreign organizations - tax withhold at source 7 To total credits and peptication for extension of time to this (Form 8568) 6 Backup withholding erroneously withhold 7 To total credits and pepticans for extension of time to the (Form 8568) 6 Backup withholding erroneously withhold 7 To total credits and pepticans for extension of time to the (Form 8568) 6 Backup withholding erroneously withhold 8 Enter any penalty for underpayment of estimated tax. Check here ☐ if Form 2220 is attached 9 To tax due. If the total of lines 5 and 8 is more than line 7, enter amount owned 10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 11 Center the amount of line 10 to be: Credited to 2016 estimated tax 12 During the tax year, ded the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? 1a During the tax year, ded the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? 1a During the tax year, ded the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? 2 Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the delimition if the activities and copies of any materials published or distributed by the foundation in connection with the activities. 2 Did the foundation in connection with the activities. 3 Did the foundation in connection with the activities. 4 Did the foundation in any political purposes? See the instructions for the delimition in the activities of the form 1128-POL for this year?  1a Did the foundation in the form 1128-POL for this year?  1b A S Did the foundation in (f a	3	Add lines 1 and 2	[	3	669.
6 C redist/Payments:  2 2017 estimated tax payments and 2016 overpayment credited to 2017  6 & 6, 282.  8 Exempt foreign organizations - tax withheld at source  7 To tax paid with application for extension of time to file (Form 8868)  8 En ter any penalty for underpayment of estimated tax. Check here I form 2220 is attached  9 To talk credits and payments. Add lines 6 at through 64  8 En ter any penalty for underpayment of estimated tax. Check here I form 2220 is attached  9 Tax due. If the total of lines 5 and 8 is more than fine 7, enter amount owed  10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid  10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid  10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid  10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid  10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid  10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid  10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid  10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid  10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid  10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid  11 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid  12 During the tax year, did the foundation internated 1 is extracted 11 to 4, 9 33.  13 During the tax year, did the foundation internated to 11 to	4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-)	[	4	0.
a 2017 estimated tax payments and 2016 everpayment credited to 2017 b Exempt foreign organizations - tax withheld at source c Tax paid with application for extension of time to file (Form 8868) d Backup withholding erroneously withheld T 7 total credits and payments. Add these Sa through 6d 8 Enter any penalty for underpayment of estimated tax. Check here ☐ if Form 2220 is attached 9 Tax due. If the total of lines 5 and 8 is more than hine 7, enter amount owed 10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 11 First the amount of time 10 to bic. Credited to 2018 estimated tax  12 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? 13 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? 14 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? 15 Did it spend more than 510 during the year (either directly or indirectly) for political purposes? See the instructions for the definition if it he answer is Yes to 1s or 1b, attach a detailed description of the activities. 16 Did the foundation hie Form 1120-POL for this year? 2 If Yes, attach a detailed description of the activities. 2 Did the foundation hie Form 1120-POL for this year? 3 Has the foundation mada my changes, not promosely reported to the IRS? 3 Has the foundation mada my changes, not promosely reported to the IRS? 3 Has the foundation mada my changes, not promosely reported to the IRS? 3 Has the foundation mada my changes, not promosely reported to the langes. 4 Did the foundation have all least societions of section 508(e) (relating to sections 4941 through 4945) satisfied either:  8 By language in the governing mistrument, or  9 By state legislation that effectively amends the	5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	[	5	669.
b Exempt toreign organizations - tax withheld at source c Tax paid with application for extension of time to file (Form 8868) d Backup withholding erroneously withheld T Total tredits and payments. Add lines 6 at through 6d C Enter any penalty for undeproyment of estimated tax. Check here ☐ if form 2220 is attached S Enter any penalty for undeproyment of estimated tax. Check here ☐ if form 2220 is attached S C Overpayment. If the fold of lines 5 and 8 is more than hine 7, enter amount owed O Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid I Enter the amount of line 10 to to; credited to 2018 estimated tax ▶ 68.0 _ Refunded ▶ 10. 5, 61.3. If Enter the amount of line 10 to to; credited to 2018 estimated tax ▶ 68.0 _ Refunded ▶ 11. 4, 93.3. If Enter the xyear, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?  b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition if the anxwer is Yes' to 1 ao if b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities.  c) Did the foundation (Enter 1129-PDI. of this year?  d) Enter the amount (if any) of tax on political expenditures (section 455) imposed during the year:  (1) On the foundation engaged in any activities that have not previously been reported to the IRS?  If Yes, attach a detailed description of the sactivities.  2 Lake the foundation engaged in any activities that have not previously been reported to the IRS?  If Yes, attach a detailed description of the sactivities.  3 Lake the endication made any changes, not premously 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  4 Lake the foundation engaged in any activities that have not p	6	Cr edits/Payments:	[		
c Tax paid with application for extension of time to file (Form 8868) d Backup withholding erroneously withhold f To Total credits and payments. Add files 68 through 60 8 Enter any penalty for underpayment of estimated tax. Check here ☐ if Form 2220 is attached 9 Tax due. If the fotal of lines 5 and 8 is more than hine 7, enter amount ewed 10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount everpaid 10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount everpaid 11 Enter the amount of line 10 to be: Credited to 2018 estimated tax ▶ 680 ⋅ Refunded ▶ 11  4.,933 ⋅	a	a 2017 estimated tax payments and 2016 overpayment credited to 2017 6a 6a	6,282.		
Backup withholding erroneously withheld   Bd   O .	b	b Exempt foreign organizations - tax withheld at source	0.		
7   5   282.  8   First any penalty for underpayment of estimated tax. Check here   If Form 2220 is attached   8   0.9    9   Tax Aue. If the total of lines 5 and 8 is more than the total of lines 5 and 8, enter the amount owed   9    10   Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid   10   5   61.3    11   First the amount of line 10 to be. Credited to 2018 estimated tax   680   Refunded   11   4   93.3    12   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?  13   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?  14   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?  15   Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the 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 econection with the activities.  16   Did it is foundation file Form 1120-POL for this year?  17   Or the foundation file Form 1120-POL for this year?  18   Enter the rembursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers.   \$ 0.   (2) On foundation managers.   \$	C	c Tax paid with application for extension of time to file (Form 8868)			
8 Enter any penalty for underpayment of estimated tax. Check here ☐ if Form 2220 is attached 9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed 10 Overpayment. If line 7 is more than line 10at of lines 5 and 8, enter the amount overpaid 11 Enter the amount of line 10 to be; Credited to 2018 estimated tax ▶ 68.0 . Refunded ▶ 11	đ	d Backup withholding erroneously withheld . 6d	0.		
9 Ta x due. If the total of lines 5 and 8 is more than line 7, enter amount ewed 10 Overpayment. If line? Is more than line total of lines 5 and 8, enter the amount overpaid 10 Overpayment. If line? Is more than line total of lines 5 and 8, enter the amount overpaid 11	7	Total credits and payments. Add lines 6a through 6d	1	7	6,282.
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid  11 Enter the amount of line 10 to be: Credited to 2018 estimated tax ▶ 680  Refunded ▶ 11 4, 933.  12 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 campagin?  12 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 campagin?  13 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 campagin?  13 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 campagin?  14 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 campagin?  15 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 campagin?  15 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 campagin.  16 During the tax year, did the foundation attempt to the activities and copies of any materials published or distributed by the foundation attended escription of the activities.  16 During the tax year, did the foundation in connection with the activities and copies of any materials published or distributed by the foundation managers.  16 During the tax year, did the foundation attended escription of the activities.  17 During the tax year, did the foundation attended escription of the activities and copies of any materials published or distributed or intervene in any political purposes? See the instructions of special published or foundation attended escripti	8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	1	8	0.
11 Enter the amount of line 10 to be: Credited to 2018 estimated tax ▶ 680	9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	▶	9	
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 poblicial campaign?  b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the 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 meth the activities.  c Did the foundation file Form 1120-P0L for this year?  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 made any changes, not previously been reported to the IRS?  If "Yes," attach a detailed description of the activities.  3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes  4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?  b if "Yes," has it filed a tax return on Form 990-T for this year?  Was there a liquidation, termination, dissolution, or substantial contraction during the year?  If "Yes," attach the statement required by General Instruction T.  Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:  b By language in the governing instrument, or  b 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, or  b By state legislation that effectively amends the governing instrument in the meaning of section 4942(i)(3) or 4942(i)(5) for calendar year 2017 or the tax year beginning in			▶	10	
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F 000 DF	10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names a	and addresses S	T,W,T,	8   10   X   Form 990-PF (2017)

	TIVIEAS Statements Regarding Activities (continued)	3327		raye J
Ų Ų	(continued)		Yes	No
44	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of		163	140
"	section 512(b)(13)? If "Yes," attach schedule. See instructions	1!		х
10	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges?	11		<del>^</del>
12	If "Yes," attach statement. See instructions	,,	'	x
40	·	12	X	^
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?  Website address   N/A	[_13_		L
14	The books are in care of ► MR. LAWRENCE A. BOSSIDY  Telephone no. ► 203-4	31-9	832	
1-4	Located at > 452 WEST MOUNTAIN ROAD, RIDGEFIELD, CT ZIP+4 >0		032	
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here	<del>5077</del>		$\overline{}$
,,,	and enter the amount of tax-exempt interest received or accrued during the year	N	/A	ш
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	No
	securities, or other financial account in a foreign country?	16		Х
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the			
	foreign country			
Pe	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.		Yes	No
1a	During the year, did the foundation (either directly or indirectly):			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
	a disqualified person? Yes $\overline{X}$ 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?			
	(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)?			
	(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		j	
	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			77
	section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions	1b		_X
	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)):  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			
a	before 2017?			
	If "Yes," list the years \(\bigs\),,			
h	Are there any years listed in 2a for which the foundation is <b>not</b> 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.)  N/A	2b		
0	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			
	<b>&gt;</b>			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			
	during the year? Yes $\overline{\mathbf{X}}$ No	i e		
t	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.)	<u>3b</u>		<b> </b>
	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		Х
ŧ	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 orm 990		X
	Į.	arm UUI	1-1-1-	1701171

Form 990-PF (2017) THE LAWRENCE A. BUSSIDY FOUNDATION U6-1	.1885	27 Page 7
Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)		
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		
	}	
	$-\!+$	
	<del></del>	
Total number of others receiving over \$50,000 for professional services	_ ▶	0
Part (X-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	ſ	Expenses
number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.		
1 <u>N/A</u>		
		0.
2		
3		
4		
Part IX-B Summary of Program-Related Investments		
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.		Amount
1 NOT APPLICABLE		
		0.
2		
All the control of th		<del></del>
All other program-related investments. See instructions.		
*		
Total. Add lines 1 through 3		0.
	Form	990-PF (2017)

P	art X: Minimum Investment Return (All domestic foundations must complete this part. Foreign fou	ndations,	see instructions.)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:	2	
·	Average monthly fair market value of securities	1a	2,233,505.
b	Average of monthly cash balances	10	707,427.
C	Fair market value of all other assets	10	
	Total (add lines 1a, b, and c)	1d	2,940,932.
	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	2,940,932.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	44,114.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	2,896,818.
6	Minimum investment return. Enter 5% of line 5	6	144,841.
ij.	art:XIX Distributable Amount (see instructions) (Section 4942(1)(3) and (1)(5) private operating foundations a	nd certain	
	foreign organizations, check here 🕨 🔃 and do not complete this part.)		
1	Minimum investment return from Part X, line 6	1	144,841.
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	669.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	144,172.
4	Rec overies of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	144,172.
6	Dediction 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	144,172.
P	Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
а	Exp enses, contributions, gifts, etc total from Part I, column (d), line 26	1a	1,206,904.
b	Pro gram-related investments - total from Part IX-B	16	<u> </u>
2	Am ounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	<del></del>
3	Am ounts set aside for specific charitable projects that satisfy the:		
a	Sui tability test (prior IRS approval required)	3a	
b	Cash distribution lest (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	1,206,904.
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	669.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	1,206,235.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation 4940(e) reduction of tax in those years	qualifies foi	the section

Form 990-PF (2017)

THE LAWRENCE A. BOSSIDY FOUNDATION 06-1188527 Page 9 Part XIII Undistributed Income (see instructions) (b) Years prior to 2016 (c) 2016 (**d**) 2017 Corpus 1 Distributable amount for 2017 from Part XI, 144,172. 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: 143,841. 2,269,159. a From 2012 **b** From 2013 [--- 0014

Form 990-PF (2017) THE LAW	RENCE A. BO	SSIDY FOUNDA	ATION		.88527 Page 10
Part XIV Private Operating F			A, question 9)	N/A	
1 a If the foundation has received a ruling o					
foundation, and the ruling is effective fo	r 2017, enter the date of t	the ruling	▶		
b Check box to indicate whether the found	lation is a private operation	ng foundation described in		4942(j)(3) or 4	942(1)(5)
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years	<del></del>	
income from Part I or the minimum	(a) 2017	(b) 2016	(c) 2015	(d) 2014	(e) Total
investment return from Part X for				1	1
each year listed					
b 85% of line 2a					
c Qualifying distributions from Part XII,					
line 4 for each year listed					
d Amounts included in line 2c not					
used directly for active conduct of				Y	
exempt activities			/	1	L
e Qualifying distributions made directly					
for active conduct of exempt activities.					
Subtract line 2d from line 2c				<u> </u>	
3 Complete 3a, b, or c for the					
alternative test relied upon:  a "Assets" alternative test - enter:					
(1) Value of all assets	·				
(2) Value of assets qualifying			/		
under section 4942(j)(3)(B)(i)		L/			<u> </u>
b "Endowment" alternative test - enter					
2/3 of minimum investment return shown in Part X, line 6 for each year listed					
c "Support" alternative test - enter:		/			
(1) Total support other than gross	}	/			
investment income (interest,	1				[
dividends, rents, payments on		/			
securities loans (section 512(a)(5)), or royalties)		V			
(2) Support from general public					
and 5 or more exempt					
organizations as provided in section 4942(j)(3)(B)(iii)	/				
(3) Largest amount of support from	<del></del>			<del> </del>	
an exempt organization					
(4) Gross investment income					
Part XV Supplementary Info	rmation (Comple	te this part only if	the foundation I	had \$5.000 or mo	re in assets
at any time during t	he year-see instr	uctions.)		, ,	
1 Information Regarding Foundation		<del> </del>		· · · · · · · · · · · · · · · · · · ·	
a List any managers of the foundation wh	_	than 2% of the total contri	ibiltions received by the t	foundation before the clos	se of any tax
year (but only if they have contributed n					o or any tan
LAWRENCE A. BOSSIDY					
b List any managers of the foundation wh	o own 10% or more of th	e stock of a corporation (	or an equally large portio	n of the ownership of a pa	artnership or
other entity) of which the foundation ha			,, p-p-1		-
NONE					
2 Information Regarding Contributi	on, Grant, Gift, Loan,	Scholarship, etc., Pro	ograms:	<del></del>	
Check here ► X if the foundation of				ot accept unsolicited requ	ests for funds. If
the foundation makes gifts, grants, etc.,					
a The name, address, and telephone num	ber or email address of th	e person to whom applica	ations should be address	ed:	
, , <del>, , ,</del>		,,			
b The form in which applications should b	e submitted and informat	tion and materials they sh	ould include;	-	
c Any submission deadlines:					
d Any restrictions or limitations on award	s, such as by geographica	al areas, charitable fields,	kınds of ınstıtutıons, or o	other factors:	
	, , , , , ,		,		
723601 01-03-18					Form 990-PF (2017)

Part XV Supplementary Informa	ation (continued)			
3 Grants and Contributions Paid During	the Year or Approved for Future F	ayment		
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient	Contribution	
a Paid during the year				
BOSTON CHILDRENS HOSPITAL	N/A		CASH GIFT	
				1,000.
CARDINAL SHEHAN CENTER	N/A		CASH GIFT	
				1,000.
	İ			
COLGATE UNIVERSITY	N/A		CASH GIFT	
				11,000.
DAMON RUNYON CANCER RESEARCH	N/A		CASH GIFT	
				10,000.
COVENANT HOUSE NY	N/A		CASH GIFT	50,000.
Total SEE	CONTINUATION SHEE	L r(s)	<b>▶</b> 3a	1,206,904.
b Approved for future payment	VV			
.,,				
NO.				
NONE				
				<del></del>
		ļ	]	
		}		
		L		
Total			<b>▶</b> 3b	0. orm <b>990-PF</b> (2017

Enter gross amounts unless otherwise indicated.	Unrelated b	usiness income		section 512, 513, or 514	(e)
1 Program service revenue;	(a) Business code	(b) Amount	Exclu- sion code	(d) Amount	Related or exempt function income
a	<b> </b>	<u>.</u>	$\rightarrow$		
ь	<u> </u>				
c	<b> </b>				<del></del>
d	<b></b>				
e	<b></b>				
1	<del> </del>		<del></del>		
g Fees and contracts from government agencies	<b></b>				
2 Membership dues and assessments	<del> </del>		<del></del>		
3 Interest on savings and temporary cash investments			14	956.	
4 Dividends and interest from securities	<del>                                     </del>		14	66,086.	<del></del>
5 Net rental income or (loss) from real estate:			بعد خشر س		
a Debt-financed property		<u></u>		المناب ال	<del></del>
b Not debt-financed property					
6 Net rental income or (loss) from personal		<del></del>			
property					
7 Other investment income					
8 Gain or (loss) from sales of assets other					
than inventory					
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue:					
a FEDERAL TAX OVERPAYMENT			14	6,282.	
b					
c	<u> </u>				
d	<u> </u>				
e					
12 Subtotal. Add columns (b), (d), and (e)			).	73,324.	0
13 Total. Add line 12, columns (b), (d), and (e)	-			13	73,324
(See worksheet in line 13 instructions to verify calculations.)					
Relationship of Activities to					. <u> </u>
Line No. Explain below how each activity for which inco the foundation's exempt purposes (other than				importantly to the accomp	lishment of
1 NOT APPLICABLE				· · · · · · · · · · · · · · · · · · ·	
				<del></del>	
					<del></del>

### 17) THE LAWRENCE A. BOSSIDY FOUNDATION 06-1188527 Information Regarding Transfers to and Transactions and Relationships With Noncharitable Form 990-PF (2017) Part XVII **Exempt Organizations**

1	Did the or	rganization directly or indir	ectly engage in any	of the followin	g with any other organization	on described in secti	on 501(c)	1 Y	es No	,
(other than section 501(c)(3) organizations) or in section 527, relating to political organizations?									2 33	
a Transfers from the reporting foundation to a noncharitable exempt organization of:										
	(1) Cash	1						1a(1)	X	
	(2) Othe	r assets						1a(2)	X	
þ	Other trai	nsactions:							2 23	
	٠,	s of assets to a noncharitat			•	•		1b(1)	X	
	• •	hases of assets from a nor		rganization				1b(2)	X	
	٠,	al of facilities, equipment,	or other assets					1b(3)	X	
	٠,	nbursement arrangements						1b(4)	<u> </u>	
	• •	is or loan guarantees			•			1b(5)	X	
	. ,	ormance of services or me		=				1b(6)	X	_
	-	of facilities, equipment, mai	= :		· · ·		a tanan a	1c	X	_
đ		wer to any of the above is		•	• •	=	• •		S,	
		es given by the reporting fo d) the value of the goods, (			U IESS MAII IAN MARKEL VAIL	ie iii ariy transaction	or snaring arrangement, sr	iow in		
(a)ı	on an	(b) Amount involved			exempt organization	(d) Description	of transfers, transactions, and s	haring arrang	emente.	-
(4)-		(b) runoum meored	(0) (10	N/A	- DAOTHPE OF GATHER	(6) 5000 (5.10)	. or allows, allowed the state of	Talling arrang	orians	_
									·- ·-	-
								· · · · · · · · · · · · · · · · · · ·		-
							<del></del>			-
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			·							_
		1-1 1 1	1 -81 - 1 - 11 -				<del></del>			-
2 <b>a</b>		indation directly or indirect	•	-	or more tax-exempt organi	zations described	_	□Yes	X No	
		n 501(c) (other than section complete the following schi		CHUN 327 !		•	L.	162	[A] NU	
	11 165, 0	(a) Name of org			(b) Type of organization	I	(c) Description of relations	hip		-
		N/A			(-) .,,,,		(0)	···-		-
							<del>" • • • • • • • • • • • • • • • • • • •</del>			_
						1				_
										_
										_
	andh	r penalties of perjury, I declare to belief, it is true, copert, and			accompanying schedules and st taxpayer) is based on all informa		na any knowledge	y the IRS disc		7
	gn   👠	petier, it is true, coost, arit	Decial attornor pre	eparen (outer utali	taxpayer) is based on an informa	aon of which preparer is		rn with the pown below? S		ı
He	ere	L PLA	3040C	de -	N7 15 18		[2	Yes	☐ No	١,
	Sig	nature of officer or trustee			<u>Date</u>	Title				_
		Print/Type preparer's na	me	Preparat's st	gnature	Date	Check if PTIN			
О-	امن			1 Sul	I labor	4/9/10	self- employed	04500		
Pa	_	NEIL J. TE		7000	, and	11/11/8		01793		_
	eparer	Firm's name ► ECH	FLON ADVI	SORS, 1	rrc		Firm's EIN ► 46-44	10917	1	
US	e Only		m3377.05 =	**************************************			ļ			_
		Firm's address ► 63			2.0		(722)	002	7220	
		MA.	NASQUAN,	MU 087.	36		Phone no. (732)			_
							Fo	orm <b>990-</b>	гг (2017	()

# Schedule B

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

Department of the Treasury Internal Revenue Service

Name of the organization

# **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

T	HE LAWRENCE A. BOSSIDY FOUNDATION	06-1188527					
Organization type (check	one)						
Filers of:	Section:						
Form 990 or 990-EZ	501(c)( ) (enter number) organization						
	4947(a)(1) nonexempt charitable trust not treated as a private foundation						
	527 political organization						
Form 990-PF	X 501(c)(3) exempt private foundation						
	4947(a)(1) nonexempt charitable trust treated as a private foundation						
	501(c)(3) taxable private foundation						
, ,	is covered by the <b>General Rule</b> or a <b>Special Rule.</b> c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule	e See instructions.					
General Rule							
	on filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling yone contributor. Complete Parts I and II. See instructions for determining a contributor's	· · · · · · · · · · · · · · · · · · ·					
Special Rules							
sections 509(a)(1) any one contribut	on described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support to and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, cotor, during the year, total contributions of the greater of (1) \$5,000, or (2) 2% of the amount Z, line 1 Complete Parts I and II.	or 16b, and that received from					
year, total contrib	For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.						
year, contribution is checked, enter purpose Don't co	on described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from a section	ore than \$1,000. If this box s, charitable, etc ,					
but it must answer "No" o	that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Foin Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Foil the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).						

LHA For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2017)

Name of organization

Employer identification number

## THE LAWRENCE A. BOSSIDY FOUNDATION

06-1188527

Partl	Contributors (see instructions). Use duplicate copies of Part Lif additional space is needed.					
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
1	LARRY BOSSIDY  452 WEST MOUNTAIN ROAD  RIDGEFIELD, CT 06877	\$7,706.	Person X Payroll  Noncash  (Complete Part II for noncash contributions)			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
2	LARRY BOSSIDY  452 WEST MOUNTAIN ROAD  RIDGEFIELD, CT 06877	\$650,000.	Person X 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 Occash (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 Complete Part II for noncash contributions.)			

Name of organization

Employer identification number

WKENCE A. BOSSIDI FOUNDATION	<del></del>	-1100271
Noncash Property (see instructions) Use duplicate copies of Pa	rt II if additional space is needed	
(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
	     \$	
(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
	\$	
(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
	\$	
(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
	\$	
(ხ) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
	s	
(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
	(b) Description of noncash property given   Description of noncash property given  (b)  Description of noncash property given  (c)  FMV (or estimate) (See instructions.)  (b)  Description of noncash property given  (c)  FMV (or estimate) (See instructions.)  (d)  FMV (or estimate) (See instructions.)  (e)  FMV (or estimate) (See instructions.)  (f)  FMV (or estimate) (See instructions.)  (g)  FMV (or estimate) (See instructions.)  (h)  Description of noncash property given  (c)  FMV (or estimate) (See instructions.)  (c)  FMV (or estimate) (See instructions.)	

Name of org	ganization			Employer identification number				
THE LA	AWRENCE A. BOSSIDY FOUNI	DATION		06-1188527				
Part III	Exclusively religious, charitable, etc., conti	ributions to organizations described in columns (a) through (e) and the follow	ng line entry. For org	(8), or (10) that total more than \$1,000 for				
	completing Part III, enter the total of exclusively religious Use duplicate copies of Part III if additions	, charitable, etc., contributions of \$1,000 or le	ss for the year (Enter thi	s info ance ) > \$				
(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, a	nd ZIP + 4	Relationship	of transferor to transferee				
			<del> </del>					
			<del> </del>					
(a) No.			<u> </u>					
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, a	Relationship	of transferor to transferee					
(a) No.			<del>-   -   -   -   -   -   -   -   -   -  </del>					
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			of transferor to transferee				
İ								
(a) No. from								
Part I	(b) Purpose of gift	(c) Use of gift	(c	l) Description of how gift is held				
		(e) Transfer of gift						
	(a)andici of girt							
	Transferee's name, address, a	Relationship	of transferor to transferee					
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FORM 990-PF INTERE	ST ON SAVING	S AND TE	MPORA	RY CAS	SH IN	VESTMENTS	STA	TEMENT 1
SOURCE		(A) REVENUE PER BOOKS			(B) NET INVESTMENT INCOME		(C) ADJUSTED NET INCOME	
MERRILL LYNCH		956.			956.		0.	
TOTAL TO PART I, LI	956.			956.		0.		
FORM 990-PF	DIVIDENDS	AND INTE	REST	FROM S	SECUR	ITIES	STA	TEMENT 2
SOURCE	GROSS AMOUNT	CAPITA GAINS DIVIDEN		(A) REVEN PER BO	<b>UE</b>	(B) NET INVEST MENT INCOM		(C) ADJUSTED NET INCOME
MERRILL LYNCH	66,086.		0.	66,	,086.	66,08	6.	0.
TO PART I, LINE 4	66,086.	***	0.	66,	,086.	66,08	 6.	0.
FORM 990-PF		OTHER	INCOM	Œ			STA	TEMENT 3
DESCRIPTION			REV	A) ENUE BOOKS		(B) ET INVEST- ENT INCOME		(C) ADJUSTED ET INCOME
FEDERAL TAX OVERPAY	_	7,	6,28	32.	0	•	0	
TOTAL TO FORM 990-P	F, PART I, L	INE 11 =		6,28	82.	0	- — - —	0.
FORM 990-PF		ACCOUNT	'ING F	EES			STA	TEMENT 4
		(A)		(B)	2m_	(C) ADJUSTED	(	(D)
DESCRIPTION		XPENSES PER BOOKS		TINVES		NET INCOM		PURPOSES
DESCRIPTION TAX RETURN PREPARAT	P		MEN			NET INCOM		CHARITABLE PURPOSES 0.

FORM 990-PF	TAX	ES	STATEMENT 5		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME		(D) CHARITABLE PURPOSES	
FEDERAL TAX OVERPAYMENT	6,282.	0.	0.	0.	
TO FORM 990-PF, PG 1, LN 18	6,282.	0.	0.	0.	
FORM 990-PF	OTHER E	XPENSES	STATEMENT 6		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	·=	(D) CHARITABLE PURPOSES	
BANK CHARGES	150.	150.	0.	0.	
TO FORM 990-PF, PG 1, LN 23	150.	150.	0.	0.	

FORM 990-PF CORPORA	TE STOCK	STATEMENT 7
DESCRIPTION	BOOK VALUE	FAIR MARKET VALUE
5,206 SHS - HONEYWELL	465,667.	798,392.
11,350 SHS - GE	364,846.	198,058.
10,000 SHS - GE	321,450.	174,500.
9,900 SHS - GE	318,236.	172,755.
2,110 SHS - MERCK	104,403.	118,730.
2,110 SHS - MERCK	104,403.	118,730.
2,110 SHS - MERCK	104,403.	118,730.
2,110 SHS - MERCK	104,403.	118,730.
2,000 SHS - MERCK	98,960.	112,540.
600 SHS - MERCK	29,688.	33,762.
567 SHS - MERCK	28,055.	31,905.
208 SHS - ADVANSIX INC	1,780.	8,751.
TOTAL TO FORM 990-PF, PART II, LINE 10B	2,046,294.	2,005,583.

FORM 990-PF

LIST OF SUBSTANTIAL CONTRIBUTORS
PART VII-A, LINE 10

STATEMENT 8

NAME OF CONTRIBUTOR

ADDRESS

LAWRENCE A. BOSSIDY

452 WEST MOUNTAIN ROAD RIDGEFIELD, CT 06877