C&E 927

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.

2017

Department of the Treasury Internal Revenue Service ► Go to www.irs.gov/Form990PF for instructions and the latest information. For calendar year 2017 or tax year beginning and ending Name of foundation A Employer identification number 26-1624907 SULLIVAN FAMILY CHARITABLE FOUNDATION Number and street (or P O box number if mail is not delivered to street address) Room/suite B Telephone number 00 151 PLYMPTON ROAD (978)985-8504 City or town, state or province, country, and ZIP or foreign postal code C If exemption application is pending, check here 01776 SUDBURY, MA G Check all that apply: Initial return of a former public charity D 1 Foreign organizations, check here Final return Amended return Foreign organizations meeting the 85% test, check here and attach computation Address change Name change X Section 501(c)(3) exempt private foundation H Check type of organization: E If private foundation status was terminated Section 4947(a)(1) nonexempt charitable trust ____ Other taxable private foundation under section 507(b)(1)(A), check here Fair market value of all assets at end of year J Accounting method: Accrual If the foundation is in a 60-month termination Other (specify) (from Part II, col. (c), line 16) under section 507(b)(1)(B), check here 4,392,596. (Part I, column (d) must be on cash basis) ▶\$ Analysis of Revenue and Expenses (d) Disbursements (c) Adjusted net (a) Revenue and (b) Net investment (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a)) for charitable purposes (cash basis only) expenses per books income income 2,052,274 N/A Contributions, gifts, grants, etc., received Check If the foundation is not required to attach Sch. B. Interest on savings and temporary cash investments 86 86. STATEMENT 74,379 70,458 STATEMENT Dividends and interest from securities 5a Gross rents b Net rental income or (loss) 1,094,603 6a Net gain or (loss) from sale of assets not on line 10 RECIEVED b Gross sales price for all assets on line 6a 2,439,436. 1,094,603 Capital gain net income (from Part IV, line 2) MAY 1 1 2018 8 Net short-term capital gain q Income modifications 10a Gross sales less returns and allowances OGDEN. UT b Less Cost of goods sold c Gross profit or (loss) 11 Other income 165,147 Total. Add lines 1 through 11 13 Compensation of officers, directors, trustees, etc. 14 Other employee salaries and wages 15 Pension plans, employee benefits 16a Legal fees 907. b Accounting fees STMT 3 1.815 908. c Other professional fees 17 Interest STMT 4 415 415 0. 18 Taxes 19 Depreciation and depletion 20 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications 49 14 35. 23 Other expenses 24 Total operating and administrative 2,279 1,336 expenses. Add lines 13 through 23 943. 115,000. 115,000 25 Contributions, gifts, grants paid 26 Total expenses and disbursements. Add lines 24 and 25 117,279 336 115,943. 27 Subtract line 26 from line 12: 3,104,063 a Excess of revenue over expenses and disbursements 1,163,811 b Net investment income (if negative, enter -0-) N/A c Adjusted net income (if negative, enter -0-)

723501 01-03-18 LHA For Paperwork Reduction Act Notice, see instructions.

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For	m 99	0-PF(2017) · SULLIVAN FAMILY CHARITA			1624907 Page 2
P	art	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year	End of	
			(a) Book Value	(b) Book Value	(c) Fair Market Value
		Cash - non-interest-bearing	140,635.	107 107	107,127.
	ı	Savings and temporary cash investments Accounts receivable ►	140,033.	107,127.	107,127.
	3				
	١.	Less: allowance for doubtful accounts			
	4	Pledges receivable -			
	_	Less: allowance for doubtful accounts			
	l -	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
	l _	disqualified persons			
	7	Other notes and loans receivable	1		
	١.	Less: allowance for doubtful accounts			
Assets	1	Inventories for sale or use			
\ss	ı	Prepaid expenses and deferred charges			
•	Į.	Investments - U.S and state government obligations	1 (20 052	1 007 054	1 555 705
	l	Investments - corporate stock STMT 7	1,639,853.	1,067,254.	
	l	Investments - corporate bonds STMT 8	104,065.	103,024.	104,227.
	11	Investments - land, buildings, and equipment basis			
		Less accumulated depreciation			
		Investments - mortgage loans		2 600 600	0 605 515
	13	Investments - other STMT 9	0.	2,600,679.	2,625,517.
	14	Land, buildings, and equipment: basis			
		Less accumulated depreciation			
	1	Other assets (describe			
	16	Total assets (to be completed by all filers - see the	1 004 553	2 070 004	4 200 506
_		instructions Also, see page 1, item I)	1,884,553.	3,878,084.	4,392,596.
	ĺ	Accounts payable and accrued expenses			
	18	Grants payable			
ies	19	Deferred revenue			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
Ei.	21	Mortgages and other notes payable			
	22	Other liabilities (describe)			
	22	Tatal liabilities (odd lugar 17 through 22)	0.	0.	
_	23	Total liabilities (add lines 17 through 22)		-	
		Foundations that follow SFAS 117, check here and complete lines 24 through 26, and lines 30 and 31.		i	
S	24	Unrestricted			
Š	25	Temporarily restricted			
3ale	26	Permanently restricted			
ᅙ	20	Foundations that do not follow SFAS 117, check here			
Ē		and complete lines 27 through 31.			
ō	27	Capital stock, trust principal, or current funds	0.	0.	
Net Assets or Fund Balances	28	Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.	
Ass	29	Retained earnings, accumulated income, endowment, or other funds	1,884,553.	3,878,084.	
et	30	Total net assets or fund balances	1,884,553.	3,878,084.	
Z	"	Total net assets of fame paramotes	1/001/3331	3/0/0/0040	
	31	Total liabilities and net assets/fund balances	1,884,553.	3,878,084.	
Ξ		——————————————————————————————————————		3707070011	
P	art	Analysis of Changes in Net Assets or Fund Ba	alances		
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	1,884,553.
2	•	r amount from Part I, line 27a		2	3,104,063.
		r increases not included in line 2 (itemize) > 2017 DIVIDE	NDS TAXED IN 20		492.
		lines 1, 2, and 3		4	4,989,108.
		eases not included in line 2 (itemize)	SEE STAT	FEMENT 6 5	1,111,024.
		net assets or fund balances at end of year (line 4 minus line 5) - Part II, co		6	3,878,084.
					Form 990-PF (2017)

			I FAMILY CHAI			TI	ON		26	<u>-162</u>	<u>4907</u>	Page 3
LF			sses for Tax on In			(h) I	low acquired	 	\ D-4:		70.0	
) of property sold (for exan or common stock, 200 shs.		ie,	J, P	How acquired - Purchase - Donation) Date ac (mo., day			te sold lay, yr.)
18						1	Donation	├				
_t	SEE ATTACHED	STAT	TEMENTS									
_(+-				
_						₩						
_6	(e) Gross sales price	(f) [Depreciation allowed (or allowable)		t or other basis xpense of sale					n or (loss) f) minus (.
	1											
t)											
_(-					
_					1 2// 02	2					1 004	,603.
_6	2,439,436. Complete only for assets showin	a asın in i	column (h) and owned by t		1,344,83	3.		(I) G	ains (Col	l. (h) gaın		,603.
_	(i) FMV as of 12/31/69		j) Adjusted basis as of 12/31/69	(k) Ex	cess of col. (1) col. (j), if any			cól. (k	(), but no	t less thar rom col. (1 -0-) or	
{{2}}												
_t	1			·		}						
_												
_											1 094	,603.
_5		-	C If many also enter	ın Dort I. lina		\neg					<u> </u>	,003.
	Capital gain net income or (net ca		((),	ın Part I, line)	2				1,094	,603.
3	Net short-term capital gain or (los If gain, also enter in Part I, line 8,			d (6):		1						
	If (loss), enter -0- in Part I, line 8					ا ل	3			N/A		
_			ection 4940(e) for					nco	me			
(F	or optional use by domestic private	foundation	ons subject to the section 4	940(a) tax on	net investment ir	ncome	e.)					
lf	section 4940(d)(2) applies, leave th	ns part bla	ank.									
w	as the foundation liable for the sect	tion 4942	tax on the distributable am	ount of any ve	ear in the base pe	riod?					Yes	X No
	"Yes," the foundation doesn't qualif				•							
1	Enter the appropriate amount in e	each colui	nn for each year; see the in	structions be	fore making any e	entries	<u>. </u>					
	(a) Base period years		(b) Adjusted qualifying dist	ributione	Net value of no	(c)		este	, ,	Distrib	(d) outlon ratio	(-))
_	Calendar year (or tax year beginnii	ng in)		3,507.	Net value of the		,103,0		(0	:oi. (b) aiv	ided by col	. (c)) 68236
_	2016 2015			9,288.			,356,6			·		50617
_	2014			0,598.			,615,3					42288
_	2013			9,997.		``2	,629,2	55.				57049
_	2012		16	0,189.		2	<u>,662,6</u>	<u>19.</u>			.0	60162
												=
	Total of line 1, column (d)	r			0				2		. 2	<u>78352</u>
3	Average distribution ratio for the the foundation has been in exister			on line 2 by 5.	o, or by the numb	er oi	years		3		0	<u>55</u> 670
	the foundation has been in existe	1106 11 1699	tilati 5 years						•			33070
4	Enter the net value of noncharitat	le-use as	sets for 2017 from Part X, I	ine 5		,			4		2,846	,658.
5	Multiply line 4 by line 3								5		158	,473.
6	Enter 1% of net investment incon	ne (1% of	Part I, line 27b)						6		11	<u>,638.</u>
7	Add lines 5 and 6								7		170	,111.
8	Enter qualifying distributions from								8		115	,943.
_	If line 8 is equal to or greater than See the Part VI instructions.	n line 7, ch	eck the box in Part VI, line	1b, and comp	olete that part usin	ng a 1	% tax rate.					

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Pa	rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e),	or 4948	- see inst	ructio	ns)
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)	ļ			
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here and enter 1%	_ 1		23,	<u> 276.</u>
	of Part I, line 27b				
C	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations, enter 4% of Part I, line 12, col. (b).				
2	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		23,	276.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)	4			0.
	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5		23,	276.
	Credits/Payments:				
	2017 estimated tax payments and 2016 overpayment credited to 2017 6a 1, 35	50.			
	Exempt foreign organizations - tax withheld at source 6b	0.			
	Tax paid with application for extension of time to file (Form 8868) 6c	0.			
	Backup withholding erroneously withheld 6d 6d	0.			
	Total credits and payments. Add lines 6a through 6d	7		1.3	350.
	Enter any penalty for underpayment of estimated tax. Check here X if Form 2220 is attached	8			0.
	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9	 	21.	926.
	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10		=-/.	
	Enter the amount of line 10 to be: Credited to 2018 estimated tax		 		
	rt VII-A Statements Regarding Activities	· · · · · ·	<u></u>		
	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or inte	rvene in		Yes	s No
10	any political campaign?		1a		X
h	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the	definition	16	_	$\frac{1}{X}$
U	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or	definition	"		+
	distributed by the foundation in connection with the activities.			1	
_	•		1.		X
	Did the foundation file Form 1120-POL for this year?		10	'	 ^
0	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:	٥			
_	(1) On the foundation. \$\(\bigcup \) \(\b	0.	1	1	l
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation			İ	
•	managers. S 0.		١,		
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?		2		X
	If "Yes," attach a detailed description of the activities.		1	,	
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorpora	tion, or			١,,,
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes		3		<u>X</u>
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?		7 / 3		X
	If "Yes," has it filed a tax return on Form 990-T for this year?	1/	1/A 4t		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?		5		<u> </u>
_	If "Yes," attach the statement required by General Instruction T.				1
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:			ł	
	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	e state law		,,	
_	remain in the governing instrument?	,	6		
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	1	7	X	
				-	1
8a	Enter the states to which the foundation reports or with which it is registered. See instructions.				
	MA			1	1
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		81	<u> </u>	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for	or calendar			
	year 2017 or the tax year beginning in 2017? See the instructions for Part XIV. If "Yes," complete Part XIV		9		X
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses		10		
	,		Form 9	90-PI	F (2017)

-	n 990-PF (2017) SULLIVAN FAMILY CHARITABLE FOUNDATION 26-162 art VII-A Statements Regarding Activities (continued)	<u>4907</u>		Page 5
		1 7	Yes	No
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of			
	section 512(b)(13)? If "Yes," attach schedule. See instructions	11	-	<u>X</u>
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges?	,,		7.5
	If "Yes," attach statement. See instructions	12		_X_
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Х	
	Website address ► N/A		0.5.0	
14	The books are in care of ▶ PATRICK J. SULLIVAN Located at ▶ 151 PLYMPTON ROAD, SUDBURY, MA ZIP+4 ▶0		850	<u>4</u>
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	N	/A	
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		X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the			
	foreign country			
Pa	art 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.	T	Yes	No
1:	a 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?	1	Ì	
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)	1 1		
	a disqualified person?	1 [ļ	
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	1 1		
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	1 1		
	(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"	1 1	(
	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.)			
	b If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations	1 [
	section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions N/A	16		
	Organizations relying on a current notice regarding disaster assistance; check here	10		
	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?	10		x
	, , , , , , , , , , , , , , , , , , ,	1c		
2				
	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			
i				}
	If "Yes," list the years ▶			
,		[[
	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach	05		
	statement - see instructions.) N/A	<u>2b</u>		
	c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			
2	a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			
0.	during the year?			
	b If "Yes," did it have excess business holdings in 2017 as a result of (1) any purchase by the foundation or disqualified persons after]
	May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose			
	of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C,	1 1	<u>'</u> !	
		2.		
4.		3b		X
	a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		<u> </u>
	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?			x
	had not been removed from jedpardy before the hist day of the tax year beginning in 2017 f	4b		$ldsymbol{ldsymbol{\Delta}}$

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Orm 990-PF (2017) SULLIVAN FAMILY CHARITAB			<u> 26-16249</u>	07 Pa	ige 6
Part VII-B Statements Regarding Activities for Which I	-orm 4/20 May Be F	requirea (contin	ued)	N/	
5a During the year, did the foundation pay or incur any amount to:			<u> </u>	Yes	No
(1) Carry on propaganda, or otherwise attempt to influence legislation (section			es X No		
(2) Influence the outcome of any specific public election (see section 4955); o	r to carry on, directly or indire				
any voter registration drive?			es X No		
(3) Provide a grant to an individual for travel, study, or other similar purposes		Y€	es X No		
(4) Provide a grant to an organization other than a charitable, etc., organization	n described in section	(
4945(d)(4)(A)? See instructions		Ye	es X No		
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or f				
the prevention of cruelty to children or animals?			es 🗶 No		
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und	der the exceptions described i	n Regulations			
section 53.4945 or in a current notice regarding disaster assistance? See instr	uctions		N/A	5b	
Organizations relying on a current notice regarding disaster assistance, check l	here			į l	
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fi	rom the tax because it mainta	ined			
expenditure responsibility for the grant?	N	Γ/A □ Y€	es 🔲 No 📗		
if "Yes," attach the statement required by Regulations section 53.4945-5(d).					
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums on				
a personal benefit contract?		Ye	es X No		
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal benefit contract?		1.0	6b	X
If "Yes" to 6b, file Form 8870.					
7a At any time during the tax year, was the foundation a party to a prohibited tax s	helter transaction?		es X No		
b If "Yes," did the foundation receive any proceeds or have any net income attribu		,,		7b	
Part VIII Information About Officers, Directors, Trust		nagers, Highly			
Paid Employees, and Contractors	,		•		
List all officers, directors, trustees, and foundation managers and t	heir compensation.			· <u> </u>	
	(b) Title, and average hours per week devoted	(c) Compensation	(d) Contributions to	(e) Exper account, o	ışe
(a) Name and address	l hours per week devoted to position	(If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	account, o allowanc	ther
PATRICK J. SULLIVAN	TRUSTEE	United 0 J	Compensation	ano viano	
L51 PLYMPTON ROAD	IRODIDD				
SUDBURY, MA 01776-1804	1.00	0.	0.		0.
	TRUSTEE		- 0.		<u> </u>
L51 PLYMPTON ROAD	IKOSIBB				
SUDBURY, MA 01776-1804	1.00	0.	0.		0.
50DBORI, MA 01770-1804	1.00	<u></u>			<u> </u>
			}	1	
· · · · · · · · · · · · · · · · · · ·					
			1		
2 Compensation of five highest-paid employees (other than those inc	luded on line 1). If none	ontor "NONE "	L	<u> </u>	
2 Compensation of five highest-paid employees (other than those inc	(b) Title, and average	enter NONE.	(d) Contributions to	(e) Exper	920
(a) Name and address of each employee paid more than \$50,000	hours per week	(c) Compensation	(d) Contributions to employee benefit plans and deferred	ačcount, o	other
	devoted to position		compensation	allowand	es
NONE					
		 			
		 	ļ <u></u>	L	
		<u></u>			
Total number of other employees paid over \$50,000					0
			Form	990-PF (2	2017)

orm 990-PF (2017) SULLIVAN FAMILY CHARITABLE FOUNDATION	26-162	4907 Page 7
Part VIII Information About Officers, Directors, Trustees, Foundation Management Paid Employees, and Contractors (continued)	gers, Highly	
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		
		ļ
T		
		
Total number of others receiving over \$50,000 for professional services		<u> </u>
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 number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	such as the	Expenses
ı N/A		
2		
	· · · · · · · · · · · · · · · · · · ·	
<u> </u>		
1		
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
N/A		
2		
		
All other program-related investments. See instructions.		
3		
Total, Add lines 1 through 3	▶	0.
	F	orm 990-PF (2017)

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

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115,943.

3a

3b

4

6

Amounts set aside for specific charitable projects that satisfy the:

Adjusted qualifying distributions Subtract line 5 from line 4

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

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

a Suitability test (prior IRS approval required)

income. Enter 1% of Part I, line 27b

Cash distribution test (attach the required schedule)

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				119,057.
2 Undistributed income, if any, as of the end of 2017				
a Enter amount for 2016 only			0.	
b Total for prior years:		0.		
3 Excess distributions carryover, if any, to 2017:		- 0.		
a From 2012 8, 216.				
b From 2013 20,540.				
c From 2014				
d From 2015 2,947.				
e From 2016 39,359.				
f Total of lines 3a through e	71,062.		}	
4 Qualifying distributions for 2017 from				
Part XII, line 4: ►\$ 115,943.			ĺ	
a Applied to 2016, but not more than line 2a			0.	
b Applied to undistributed income of prior				
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus				
(Election required - see instructions)	0.			
d Applied to 2017 distributable amount				115,943.
e Remaining amount distributed out of corpus	0.			
5 Excess distributions carryover applied to 2017	3,114.			3,114.
(If an amount appears in column (d), the same amount must be shown in column (a))				
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	67,948.			
b Prior years' undistributed income. Subtract				
line 4b from line 2b	1	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 instr.			0.	
f Undistributed income for 2017. Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2018				0.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3) (Election				
may be required - see instructions)	0.			
8 Excess distributions carryover from 2012				
not applied on line 5 or line 7	5,102.			
9 Excess distributions carryover to 2018.				
Subtract lines 7 and 8 from line 6a	62,846.			
10 Analysis of line 9:	1		ł	
a Excess from 2013 20,540.				
b Excess from 2014				
c Excess from 2015 2, 947.]			
d Excess from 2016 39,359.				
e Excess from 2017				5 000 DE (0047)

Form 990-PF (2017) SULLIVA Part XIV Private Operating Form					24907 Page 10
<u> </u>			17, question 9)	N/A	
1 a If the foundation has received a ruling of					
foundation, and the ruling is effective for	· ·	=	▶└─		
b Check box to indicate whether the found		ng foundation described		4942(j)(3) or4	942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years		
income from Part I or the minimum	(a) 2017	(b) 2016	(c) 2015	(d) 2014	(e) Total
investment return from Part X for				-	
each year listed		<u> </u>			
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					
exempt activities					
e Qualifying distributions made directly				/	
for active conduct of exempt activities.			1 /		
Subtract line 2d from line 2c					
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)				_	
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:					T
(1) Total support other than gross				1	
investment income (interest,					
dividends, rents, payments on					
securities loans (section 512(a)(5)), or royalties)		/			
(2) Support from general public					<u> </u>
and 5 or more exempt					
organizations as provided in					
section 4942(j)(3)(B)(III)			 		
(3) Largest amount of support from					
an exempt organization			 		
(4) Gross investment income Part XV Supplementary Info	rmetica (Comple	to this next only	if the foundation	had \$5 000 ax m	ore in essets
at any time during t			ir the foundation	nad \$5,000 or m	ore in assets
		ructions.)			
1 Information Regarding Foundation	_				
a List any managers of the foundation wh			tributions received by the	foundation before the clo	ose of any tax
year (but only if they have contributed in	iore man \$5,000). (See s	section 507 (u)(2).)			
NONE		·-··			
b List any managers of the foundation wh			(or an equally large portion	on of the ownership of a p	partnership or
other entity) of which the foundation has	s a 10% or greater interes	SI.			
NONE					
2 Information Regarding Contributi					
Check here 🕨 🗓 if the foundation o	•	•	· ·		uests for funds. If
the foundation makes gifts, grants, etc.,	to individuals or organiz	ations under other cond	tions, complete items 2a,	b, c, and d.	
a The name, address, and telephone num	ber or email address of the	he person to whom appl	cations should be address	sed:	
b The form in which applications should b	e submitted and informa	ition and materials they s	should include;	-	
c Any submission deadlines:					
- They occurred to a control of the					
d Any restrictions or limitations on awards	s, such as by geographic	al areas, charitable fields	, kinds of institutions, or o	other factors:	

Grants and Contributions Paid During the You		Payment	<u> </u>	
Recipient Name and address (home or business)	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
A Doub during the year	Of Substantial Contributor	reorpient		
a Paid during the year				
AFTERWORKS ST. PETER'S	NONE	CHURCH	UNRESTRICTED	
338 MASSACHUSETTS AVENUE				
CAMBRIDGE, MA 02139				10,000
	ļ			
AGE AFRICA	NONE	FOUNDATION	UNRESTRICTED	
921 PENNSYLVANIA AVENUE NW,#312				
WASHINGTON, DC 20003				10,000
BOSTON SYMPHONY ORCHESTRA	NONE	PUBLIC CHARITY	UNRESTRICTED	
301 MASSACHUSETTS AVENUE				10,000
BOSTON, MA 02115				10,000
EVANSTON DANCE ENSEMBLE 1934 DEMPSTER ST	NONE	FOUNDATION	UNRESTRICTED	
EVANSTON IL 60202				10,000
FLAMBOYAN FOUNDATION	NONE	FOUNDATION	UNRESTRICTED	
1730 MASSACHUSETTS AVENUE, NW				
WASHINGTON DC 20036		<u> </u>	<u>L </u>	20,000
	TINUATION SHE	ET(S)	<u>▶ 3a</u>	115,000
b Approved for future payment				
NONE				
Total			▶ 3b	

Excluded by section 512, 513, or 514

Unrelated business income

Part XVI-A **Analysis of Income-Producing Activities**

Enter gross amounts unless otherwise indicated.	Unrelate	Unrelated business income		ed by section 512, 513, or 514	(e)	
	(a) Business	(b)	(c) Exclu-	(d)	Related or exempt	
1 Program service revenue:	Business	Amount	sion	Amount	function income	
_			1 1			
3			+			
b	t t		++			
<u> </u>	l l		-			
d	1		+			
e				· · · · · · · · · · · · · · · · · · ·		
f	-					
g Fees and contracts from government agencies						
2 Membership dues and assessments						
3 Interest on savings and temporary cash						
investments			14	86.		
4 Dividends and interest from securities			14	74,379.		
5 Net rental income or (loss) from real estate:						
a Debt-financed property						
b Not debt-financed property						
6 Net rental income or (loss) from personal						
property			+			
7 Other investment income						
8 Gain or (loss) from sales of assets other			1	1 004 603		
than inventory			18	1,094,603.		
9 Net income or (loss) from special events					<u> </u>	
10 Gross profit or (loss) from sales of inventory				· · · · · · · · · · · · · · · · · · ·		
11 Other revenue:						
a						
b						
c	l					
d						
e						
12 Subtotal. Add columns (b), (d), and (e)		0		1,169,068.	0.	
13 Total Add line 12, columns (b), (d), and (e)		<u>'</u>	 	13		
(See worksheet in line 13 instructions to verify calculations.)						
				_		
Part XVI-B Relationship of Activities	to the Acc	omplishment of E	Exempt	Purposes		
		on and war (a) of Doub VV (I	A sontribi	utad importantly to the ecom	unliches ont of	
Line No. Explain below how each activity for which inc the foundation's exempt purposes (other that	ome is reported	in column (e) of Part XVI	-A CONTINU	nted importantly to the accom	ipiisiii reiit oi	
the foundation's exempt purposes (other than	i by providing it	ulius for such purposes).			<u> </u>	
					_	
		-··· - · · · · · · · · · · · · · · · ·		· · ·	· · · · · · · · · · · · · · · · · · ·	
-						
				· · ·		
		<u> </u>				
		<u>.</u>				
						

Phone no. (617) 345-1000 Form 990-PF (2017)

X Yes

P00642498

Firm's EIN $\triangleright 16-0764720$

Here

Paid

Preparer

Use Only

Signature of officer or trustee

CALDWELL

Print/Type preparer's name

CHRISTOPHER F.

Firm's name ► NIXON PEABODY

Firm's address ▶ 100 SUMMER STREET

BOSTON, MA 02110

Preparer's signature

TRUSTEE

Check

self- employed

Title

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

26-1624907 SULLIVAN FAMILY CHARITABLE FOUNDATION 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 501(c)(3) exempt private foundation Form 990-PF 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 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 33 1/3% 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, Ine 1 Complete Parts I and II For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000 If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year

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)

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to

certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization

Employer identification number

SULLIVAN FAMILY CHARITABLE FOUNDATION

26-1624907

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional	I space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	PATRICK & CAROLYN SULLIVAN 151 PLYMPTON ROAD SUDBURY, MA 01776	\$ 2,050,459.	Person Payroll Moncash X (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	PATRICK & CAROLYN SULLIVAN 151 PLYMPTON ROAD SUDBURY, MA 01776	\$1,815.	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 Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash Complete Part If for noncash contributions

Employer identification number

SULLIVAN FAMILY CHARITABLE FOUNDATION

26-1624907

Part II	Noncash Property (see instructions). Use duplicate copies of P	art II if additional space is needed.	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
_1	VARIOUS STOCKS		
		\$ 2,050,459.	09/14/17
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
			
(a) No. from Part I	(b) Description of noncash property given	(c) . FMV (or estimate) (See instructions.)	(d) Date received
		*	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
~			
3453 11-0		Schedule B (Form 6	90. 990-EZ. or 990-PF) (2

Name of org	ganization				Employer identification number	
STIT.T.TY	VAN FAMILY CHARITABLE F	OTTTACINI			26-1624907	
Part III	Exclusively religious, charitable, etc., cont the year from any one contributor. Complete (ributions to organizations columns (a) through (e) an	n d the following line	e entry. For organization	(10) that total more than \$1,000 for	
	completing Part III, enter the total of exclusively religiou Use duplicate copies of Part III if addition	s, charitable, etc., contributions al space is needed	of \$1,000 or less for t	the year (Enterthis info once	s) ► \$	
(a) No. from Part I	(b) Purpose of gift	(c) Use of	gift	(d) Desc	ription of how gift is held	
	ADDITIONAL FUNDING OF	FOR GENERAL			ED STOCK WAS SOLD	
1	SULLIVAN FAMILY	FOUNDATION			WITH THE PROCEEDS	
ł	CHARITABLE FOUNDATION	PURPOSES			LD AT MORGAN	
}		(a) Trans	of a sift	STANLEY		
		(e) Trans	sfer of gift			
ľ	Transferee's name, address, a	nd ZIP + 4	R	Relationship of tra	nsferor to transferee	
	PATRICK & CAROLYN SULL				FOUNDATION	
ļ						
	151 PLYMPTON ROAD					
(a) No	SUDBURY, MA 01776		<u> </u>	<u></u>		
(a) No. from Part I	(b) Purpose of gift	(c) Use of	gift	(d) Desc	eription of how gift is held	
Ì	- <u></u>					
		(e) Trans	sfer of gift	I		
Í						
}	Transferee's name, address, a	nd ZIP + 4		Relationship of tra	nsferor to transferee	
1						
				·		
(a) No. from Part I	(b) Purpose of gift	(c) Use of	gift	(d) Desc	cription of how gift is held	
Ì						
	•	(e) Trans	sfer of gift			
	Tunnefaurate manne adduser a		-	Jalatianahin at tua		
ŀ	Transferee's name, address, a	na ziP + 4	1	relationship of tra	nsferor to transferee	
ļ						
		,	<u> L</u>	,		
(a) No. from	(b) Purpose of gift	(c) Use of	gift	(d) Desc	cription of how gift is held	
Part I		····		 		
ļ						
		(e) Trans	sfer of gift			
	-	1 71D	_	Saturation of the section		
[Transferee's name, address, and ZIP + 4			relationship of tra	nsferor to transferee	

			——————————————————————————————————————		
(a) List and	describe the kind(s) of property solo ck warehouse; or common stock, 20	d, e.g., real estate,		(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
		JU 5115. MILO GO.	D - Donation	(110., 64, 51.)	(1110., day, yr.)
1a .366 SHS BANCO b .148 SHS BRITIS		ADB	P		
c 9990.609 MSIF U			P		
d BANCO SANTANDER		ME A	P		
e 1,450 SHS ALIBA		TD	P		
1 299 SHS ALPHABE			P		
g 600 SHS APPLE I			P		
h 5,000 SHS BANK	• • • • • • • • • • • • • • • • • • • •		P		
1 200 SHS CNOOC I			P		
12,655 SHS FACE	BOOK INC CL-A		P		
k 627 SHS JPMORGA	AN CHASE & CO		P		
<u> 1698 SHS REYNOLI</u>			P		
m 15,000 RITE AII			P		
n 766 SHS APPLE 1			<u>P</u>		
o 750 SHS GARTNER			P		
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	\ <i>\</i>	Gain or (loss) lus (f) minus (g)	
a 2.		2.	·		<u> </u>
b 10.		10.			0.
c 100,000.		100,006.			<u>-6.</u>
d 36.		112 127			36.
e 256,906.		113,127. 183,674.			143,779.
f 278,212. g 95,275.		58,635.			94,538. 36,640.
g 95,275. h 113,433.		83,508.			29,925.
22,465.		30,421.			-7,956.
456,303.		258,321.			197,982.
k 57,156.		35,459.		····	21,697.
1 45,974.		25,180.			20,794.
m 45,263.		95,505.			-50,242.
n 121,635.		21,132.			100,503.
0 93,545.		6,337.			87,208.
Complete only for assets showing	g gain in column (h) and owned by t		(I) Los	ses (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		of col. (h) gain over ot less than "-0-")	col. (k),
a					0.
b					0.
С					<u>-6.</u>
d			 		36.
е					143,779.
f					94,538.
<u>g</u>					36,640.
<u>h</u>		 			29,925. -7,956.
!					$\frac{-7,936.}{197,982.}$
					21,697.
<u>k</u>					20,794.
m		-			-50,794.
n					$\frac{30,242.}{100,503.}$
0					87,208.
					
2 Capital gain net income or (net cap	1 11 (1000), 011101	5 1	2		
3 Net short-term capital gain or (losif gain, also enter in Part I, line 8, of (loss), enter "-0-" in Part I, line 8	column (c).	nd (6):	3		
in those in the arriving o			9		

<u>SULLIVAN FAMILY (</u>	CHARITABLE FOUND	<u> ATION 26-16</u>	<u> 24907 </u>	PAGE	2 OF 2
	sses for Tax on Investment Income				
(a) List and 2-story br	describe the kind(s) of property soluck warehouse; or common stock, 20	d, e.g., real estate, 00 shs. MLC Co.	(b) How ac P - Purch D - Dona	quired (c) Date acquire (mo., day, yr.)	d (d) Date sold (mo., day, yr.)
1a 550 SHS ISHARES	S IBOXX S H/Y CO	R BD ETF	P		
b 2,000 SHS JPMO			P		
c 3,700 SHS MICRO	OSOFT CORP		P		
d 4,200 SHS ORACI	LE CORP		P		
e CAPITAL GAINS					
f					
g					
h					
<u> </u>					
<u> </u>					
_k					
1					
<u>m</u>	· · · -				_
n					
0					
(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 47,723.		49,611.			<u>-1,888.</u>
b 182,317.		90,040.			92,277.
c 276,987.		105,487.			171,500.
d 221,135.		88,378.	 		132,757.
e 25,059.					25,059.
f					
<u>g</u>					
<u>h</u>					
k					
1					
<u>-'</u> m					
n			\ <u>\</u>	· · · · · · · · · · · · · · · · · · ·	
0					
	g gain in column (h) and owned by	the foundation on 12/31/69		(I) 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	Gains (ex	cess of col. (h) gain ov but not less than "-0-"	er col. (k),
a	·				-1,888.
b					92,277.
С					171,500.
d					132,757.
e					25,059.
f					
g					
h					
<u> </u>					
					
<u>k</u>			-	<u> </u>	<u> </u>
	· · · · · · · · · · · · · · · · · · ·				
<u>m</u>					
<u>n</u>			-	· · · · · · · · · · · · · · · · · · ·	
0	<u></u>	<u> </u>	 		
2 Capital gain net income or (net ca	ipital loss) { If gain, also enter	r in Part I, line 7)-" in Part I, line 7	2	1	,094,603.

3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 8, column (c). If (loss), enter *-0-* in Part I, line 8

N/A

3 Grants and Contributions Paid During the	Year (Continuation)			
Recipient	If recipient is an individual	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	show any relationship to any foundation manager or substantial contributor	recipient	Contribution	, intodit
FRANCISCAN MISSIONARY SISTERS	NONE	CHURCH	UNRESTRICTED	ļ
172 FOSTER STREET BOSTON MA 02135				5 000
50STON, MA 02133		 		5,000
PRIENDS OF THE COMMUNITY LEARNING CENTER	NONE	PUBLIC CHARITY	UNRESTRICTED	
19 BROOKLINE STREET				İ
CAMBRIDGE, MA 02139				10,000
STRIMTNIAMAN MED AMED	NONE	FOUNDATION	UNRESTRICTED	
HUNTINGTON THEATER 264 HUNTINGTON AVENUE	NONE	FOUNDATION	UNRESTRICTED	
BOSTON MA 02115				10,000
				}
LT SCOTT F. MILLEY RANGER FOUNDATION	NONE	FOUNDATION	UNRESTRICTED	
P.O. BOX 475	NONE	CONDATION	DARESTRICIES	
SUDBURY MA 01776				10,000
)
SELA PUBLIC CHARTER SCHOOL	NONE	SCHOOL	UNRESTRICTED	
6015-17 CHILLUM PLACE, NE	NONE	SCHOOL	UNKESTRICTED	
WASHINGTON, DC 20011				5,000
				Ì
VAUDEVILLE CHICAGO	NONE	FOUNDATION	UNRESTRICTED	
6506 N MAPLEWOOD AVENUE				1
CHICAGO, IL 60645		 		10,000
	-			}
WASHINGTON INTERNATIONAL SCHOOL	NONE	school	UNRESTRICTED	}
3100 MACO MB STREET NW		1		
WASHINGTON , DC 20008		 	 	5,000
				II
]	j
Total from continuation sheets		<u> </u>	<u> </u>	55,000

FORM 990-PF INTERE	ST ON SAVI	NGS AND TEM	PORARY	CASH IN	VESTMENTS	STATEMENT	1
SOURCE		(A REVE PER B	NUE		(B) VESTMENT COME	(C) ADJUSTED NET INCOME	
INTEREST			86.		86.		_
TOTAL TO PART I, LI		86.		86.		_	
FORM 990-PF	DIVIDEND	S AND INTER	EST FRO	M SECUR	ITIES	STATEMENT	
SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDEND	RE	(A) EVENUE R BOOKS	(B) NET INVES MENT INCO		
DIVIDEND INCOME NONDIVIDEND DISTRIBUTIONS	95,517 3,921		9. 0.	70,458. 3,921.	-	0.	
TO PART I, LINE 4	99,438	. 25,05	9.	74,379.	70,45	58.	_ _
FORM 990-PF		ACCOUNTI	NG FEES	3		STATEMENT	3
DESCRIPTION		(A) EXPENSES PER BOOKS		3) IVEST- INCOME	(C) ADJUSTEI NET INCOM		
2016 TAX PREP FEES		1,815.		907.		908	<u> </u>
TO FORM 990-PF, PG	1, LN 16B	1,815.		907.		908	 3 •
FORM 990-PF		TAX	ES			STATEMENT	4
DESCRIPTION		(A) EXPENSES PER BOOKS	NET I	3) NVEST- INCOME	(C) ADJUSTEI NET INCOM		
FOREIGN TAX PAID	_	415.		415.		(0.
TO FORM 990-PF, PG	1, LN 18	415.		415.		(0.

FORM 990-PF	OTHER EX	KPENSES		STATEMENT	5
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME			
COMMONWEALTH OF MASS FILING FEE ADR PASS THROUGH FEES	35. 14.	0. 14.		3	35.
TO FORM 990-PF, PG 1, LN 23	49.	14.			35.
FORM 990-PF OTHER DECREASI	ES IN NET AS:	SETS OR FUND	BALANCES	STATEMENT	6
DESCRIPTION				TUUOMA	
2018 DIVIDENDS REPORTED IN 20 ADJ FOR BASIS OF STOCK CONTRI 2016 ROC - BASIS ADJUSTED IN		2,793 1,089,870 18,361			
TOTAL TO FORM 990-PF, PART I	II, LINE 5			1,111,02	24.
FORM 990-PF	CORPORAT	E STOCK		STATEMENT	7
DESCRIPTION		во	OK VALUE	FAIR MARKE	T
COMMON STOCK			1,067,254.	1,555,7	25.
TOTAL TO FORM 990-PF, PART I	I, LINE 10B		1,067,254.	1,555,7	25.
FORM 990-PF	CORPORAT	E BONDS		STATEMENT	8
DESCRIPTION		во	OK VALUE	FAIR MARKE	T
2250					
CORPORATE BONDS			103,024.	104,2	27.

FORM 990-PF OTHE	ER INVESTMENTS		STATEMENT 9
DESCRIPTION	VALUATION METHOD	BOOK VALUE	FAIR MARKET VALUE
ETF MUTUAL FUNDS	COST	295,442. 2,305,237.	322,588. 2,302,929.
TOTAL TO FORM 990-PF, PART II, LINE	3 13	2,600,679.	2,625,517.