Return of Private Foundation or Section 4947(a)(1) Trust Treated as Private Foundation

OMB No 1545-0052

2017

Department of the Treasury Internal Revenue Service

Do not enter social security numbers on this form as it may be made public.
 Go to www.irs.gov/Form990PF for instructions and the latest information

Open to Public Inspection

For	cale	ndar	year 2017 or tax year beginning	, 2017,	and ending	,		
TOI		.т	AHERN SCHOLARSHIP INC			Α	Employer Identification num 87-0790992	nber
P.().~	BOX	9136 GH, MA 02035			В	Telephone number (see instr 508-543-3939	ructions)
10.			o, ooo			С	If exemption application is	pending, check here
G (Chec	k all	that apply Initial return	Initial return of a form	ner public charity	_	1 Foreign organizations, chec	
			Final return	Amended return	,			ليا
-			X Address change	Name change			2 Foreign organizations meet here and attach computation	
н	Chec		be of organization X Section 501 tion 4947(a)(1) nonexempt charitable t	(c)(3) exempt private for	oundation private foundation	/ _F	If private foundation status	was terminated
ī	air n			ounting method X Ca		-	under section 507(b)(1)(A)	
	(from	Part I	I, column (c), line 16)	Other (specify)	i	F	If the foundation is in a 60	
	\$	1 A -		column (d) must be on		<u> </u>	under section 507(b)(1)(B)	
Pa	πı		nalysis of Revenue and (penses (The total of amounts in	(a) Revenue and expenses per books	(b) Net investment income	nt	(c) Adjusted net income	(d) Disbursements for charitable
		col	umns (b), (c), and (d) may not neces- rily equal the amounts in column (a)					purposes (cash basis only)
			e instructions))					(cdoff bdois offly)
		1 2	Contributions, gifts, grants, etc., received (attach schedule) Check X If the foundation is not required to attach Sch. B					
<i>)</i>	ļ	_	if the foundation is not required to attach Sch B					
9		3 4	Interest on savings and temporary cash investments Dividends and interest from securities	3. 10,895.	10,89	3.	N/A	
G	ł		Gross rents	10,695.	10,0	<u>,,,</u>		
1		b	Net rental income or (loss).					
R	!		Net gain or (loss) from sale of assets not on line 10 Gross sales price for all	-1,405.	- · · · · · · · · · · · · · · · · · · ·			
V	1 1	7	assets on line 6a Capital gain net income (from Part IV, line 2)					
E	i	8	Net short term capital gain.					
L) }	9	Income modifications Gross sales less					
-		10 a	returns and allowances					
	ļ	b	Less Cost of goods sold					
		-	Gross profit or (loss) (attach schedule)					
		11	Other income (attach schedule)					
		12	Total Add lines 1 through 11	9,493.	10,89	98.	DEATH	
-		13	Compensation of officers, directors, trustees, etc	0.			VERRIA	
		14	Other employee salaries and wages Pension plans, employee benefits.					
		15 16 a	Legal fees (attach schedule).					
	A D M		Accounting fees (attach sch)				OGDEN	T S
	N		Other professional fees (attach sch)					
0 P	5	17 18	Interest		-			
	R	19	Taxes (attach schedule)(see instrs) . Depreciation (attach					
	Ŷ		schedule) and depletion					
≿́n ⊝ ⊝	Ě	20 21	Occupancy				-	
	Ē	22	Printing and publications .					
\$M€	X P E	23	Other expenses (attach schedule)	462	4	62.		
¬	N S	24	SEE STATEMENT 1 Total operating and administrative	462.	4	02.		
Ē	E S		expenses Add lines 13 through 23	462.	4	62.		
		25	,,,	20,000.		-		20,000.
		26	Total expenses and disbursements. Add lines 24 and 25	20,462.	4	62.		20,000.
ē —		27	Subtract line 26 from line 12.					
		ª	Excess of revenue over expenses and disbursements	-10,969.				
		l t	Net investment income (if negative, enter -0-)		10,4	36.		
		_ (Adjusted net income (if negative, enter -0-)	L			L	Form 000 PF (2017)

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Dart	14	Balance Sheets	Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year	End	of year
rait	<u>"</u>	Dalance Sheets	(See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest	-bearing			
	2	Savings and tempor	ary cash investments	83,732.	74,167	. 74,237.
	3	Accounts receivable	>		-	
		Less allowance for	doubtful accounts ►			
i	4	Pledges receivable	•			
		Less allowance for	doubtful accounts ►			
	5	Grants receivable				
	6	Receivables due from offic disqualified persons (atta	cers, directors, trustees, and other ch schedule) (see instructions)			
	7	Other notes and loans rec	eivable (attach sch). 🕨			
A		Less allowance for	doubtful accounts ▶			
ASSETS	8	Inventories for sale	or use		_	
E	9	Prepaid expenses a	nd deferred charges			
Š	10:	a Investments – US obligations (attach s	and state government chedule)			
	ı	b Investments — corporate	stock (attach schedule) STATEMENT 2	126,797.	145,607	. 155,175.
		c Investments — corporate	Ĭ	20,214.		
	11	Investments – land, equipment basis	buildings, and			
		Less accumulated deprec (attach schedule)	nation – – – – – – – – – – – – – – – – – – –			
	12	Investments - mort	gage loans			
	13	Investments - other	(attach schedule)			
	14	Land, buildings, and	equipment basis ►			
		Less accumulated depred (attach schedule)	iation			
		Other assets (descri	be completed by all filers —			
		see the instructions	Also, see page 1, item I)	230,743.	219,774	. 229,412.
Ĺ	17	· •	nd accrued expenses			
À	18	Grants payable			· · · · · · · · · · · · · · · · · · ·	_
В	19	Deferred revenue				
Ļ	20		tors, trustees, & other disqualified persons			
ť	21	• •	s payable (attach schedule)			
- 1	22	Other liabilities (des	cribe)			_
E S	23		lines 17 through 22)	0.	0	.]
		Foundations that fo and complete lines	llow SFAS 117, check here 24 through 26, and lines 30 and 31.			
NF	24	Unrestricted				
E U T N	25	Temporarily restricte	ed			
D	26	Permanently restrict	ed		· ·	
A S B S A		Foundations that do and complete lines	o not follow SFAS 117, check here ►X 27 through 31.			
Ĕ L T A	27	Capital stock, trust p	orincipal, or current funds			
ŚŅ	28	Paid-in or capital surplus	, or land, bldg., and equipment fund			7
OE	29	Retained earnings, accum	ulated income, endowment, or other funds	230,743.	219,774	.]
ŔŚ	30		fund balances (see instructions) .	230,743.	219,774	.]
	31	Total liabilities and (see instructions)	net assets/fund balances	230,743.	219,774	
Pari		<u> </u>	ges in Net Assets or Fund Balanc		217,114	<u>· l </u>
			<u> </u>			T
1	end-	of-year figure reporte	alances at beginning of year – Part II, colu d on prior year's return)	inni (a), iine 30 (inust ag	1	230,743.
2		er amount from Part I,	•		2	-10,969.
3	Other	increases not included in li	ne 2 (ıtemize).		3	20,,007.
4	Add	lines 1, 2, and 3			4	219,774.
		eases not included in line 2	· ·		5	
6	Tota	l net assets or fund b	alances at end of year (line 4 minus line 5)	- Part II, column (b), li	ne 30 6	219,774.

Parti	(a) List and describe t	ne kind(s) of property sold (for examp ouse, or common stock, 200 shares	le, real estate,	(b) How acqu P — Purchas D — Donatio	se (mo day yr)	(d) Date sold (mo , day, yr)
1a N	I/A					-
b	·			_		
С				_		
d						
е		· · · · · · · · · · · · · · · · · · ·				
	(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other ba		(h) Gain or ((e) plus (f) m	
<u>a</u>	 					
b						
d						
e	amplete only for accets show	una agus un agluma (h) and awaad h	by the foundation on 12/21	150		
	<u> </u>	ing gain in column (h) and owned to (i) Adjusted basis	(k) Excess of col (i)		(I) Gains (Col gain minus col (k), t	
	(i) FMV as of 12/31/69	as of 12/31/69	over col (j), if any		than -0-) or Losses (f	
а						
b						
C						
d						
e 2 C	capital gain net income or (ne		enter in Part I, line 7	_	_	
		loss), en (loss), en (loss), en (loss), en (loss), en (loss)	iter -0- in Part I, line 7	-	2	
lf	, ,	e 8, column (c) See instructions If	· · · · · ¬	-	3	
Part '		Section 4940(e) for Reduce	d Tay on Not Investo	nent Inco		
		oundations subject to the section 4940			N/A	
Was th		his part blank ction 4942 tax on the distributable a fy under section 4940(e) Do not co	• •	oase period	Yes	No
1 E	inter the appropriate amount in	each column for each year, see the in	structions before making any	entries	 	
C	(a) Base period years alendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use as	sets	(d) Distribution (col (b) divided	
	2016					. ,,,,,,,,,
	2015					
	2014					
	2013					
	2012					
	P-A-1 - () 1 1 ()					
	otal of line 1, column (d)			· -	2	
3 A	Average distribution ratio for the number of years the foundation	5-year base period — divide the total on has been in existence if less than	on line 2 by 5.0, or by the 15 years		3	
4 E	Enter the net value of nonchar	itable-use assets for 2017 from Pa	rt X, line 5	.	4	
5 N	Multiply line 4 by line 3				5	
6 E	Enter 1% of net investment in	come (1% of Part I, line 27b)			6	
7 /	Add lines 5 and 6				7	
8 E	Enter qualifying distributions fi	rom Part XII, line 4 .			8	
	f line 8 is equal to or greater tha Part VI instructions.	n line 7, check the box in Part VI, line	e 1b, and complete that part	using a 1% t	ax rate. See the	

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Part VI Excise Tax Based on Investment Income (Section 494)	J(a), 4940(b), 4940(e), or 4948 - see instruction	ons)
1 a Exempt operating foundations described in section 4940(d)(2), check here	nd enter 'N/A' on line 1	
Date of ruling or determination letter (attach copy of letter if necessary)	· '	
b Domestic foundations that meet the section 4940(e) requirements in Part	V, 1	209.
check here. ▶ ☐ and enter 1% of Part I, line 27b		
c All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of	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	0. 209.
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable for	<u> </u>	0.
5 Tax based on investment income. Subtract line 4 from line 3. If zero or le	· 1	209.
6 Credits/Payments		205.
a 2017 estimated tax pmts and 2016 overpayment credited to 2017	6a 553.	
b Exempt foreign organizations — tax withheld at source	6 b	
c Tax paid with application for extension of time to file (Form 8868)	6c 400.	
d Backup withholding erroneously withheld	6 d	
7 Total credits and payments Add lines 6a through 6d	7	953.
	Form 2220 is attached 8	
9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	▶ 9	0.
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	▶ 10	744.
11 Enter the amount of line 10 to be Credited to 2018 estimated tax	744. Refunded 11	0.
Part VII-A Statements Regarding Activities		
1 a During the tax year, did the foundation attempt to influence any national, participate or intervene in any political campaign?	state, or local legislation or did it	Yes No
b Did it spend more than \$100 during the year (either directly or indirectly) for po See the instructions for the definition	litical purposes?	1 b X
If the answer is 'Yes' to 1a or 1b , attach a detailed description of the activities and or distributed by the foundation in connection with the activities	d copies of any materials published	
c Did the foundation file Form 1120-POL for this year?		1 c X
d Enter the amount (if any) of tax on political expenditures (section 4955) i	mposed during the year	
(1) On the foundation >\$ 0. (2) On foundation	ion managers •\$ ().
e Enter the reimbursement (if any) paid by the foundation during the year for poli	itical expenditure tax imposed on	
foundation managers. > \$ 0.	and the IDC2	
2 Has the foundation engaged in any activities that have not previously been if 'Yes,' attach a detailed description of the activities	en reported to the IRS?	2 X
3 Has the foundation made any changes, not previously reported to the IRS, in it	s governing instrument, articles	
of incorporation, or bylaws, or other similar instruments? If 'Yes,' attach a	· •	3 X
4a Did the foundation have unrelated business gross income of \$1,000 or mi	ore during the year?	4 a X
b If 'Yes,' has it filed a tax return on Form 990-T for this year?		4b N/A
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year?		5 X
If 'Yes,' attach the statement required by General Instruction T	4045	
 6 Are the requirements of section 508(e) (relating to sections 4941 through By language in the governing instrument, or 	4945) Satisfied either	
By state legislation that effectively amends the governing instrument so that		
5 5		6 X
7 Did the foundation have at least \$5,000 in assets at any time during the year? If 'Yes,' comple		. 7 X .
8 a Enter the states to which the foundation reports or with which it is registe MA	red. See instructions	
b If the answer is 'Yes' to line 7, has the foundation furnished a copy of Form 990-PF to the Att (or designate) of each state as required by <i>General Instruction G</i> ? If 'No,' attach explanation	orney General	8 b X
9 Is the foundation claiming status as a private operating foundation within for calendar year 2017 or the tax year beginning in 2017? See the instruc-	the meaning of section 4942(j)(3) or 4942(j)(5) ctions for Part XIV If 'Yes,' complete Part XIV	5) 9 X
10 Did any persons become substantial contributors during the tax year? If 'Yes,' and addresses	attach a schedule listing their names	10 X
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	· · · · · · · · · · · · · · · · · · ·			
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	Yes	No X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If 'Yes,' attach statement See instructions	12		
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Х	
	Website address • N/A			
14	The books are in care of ► WILLIAM R. BUCKLEY, JR. Telephone no ► 508-5 Located at ► 4 SCHOOL STREET FOXBOROUGH MA ZIP + 4 ► 02035	<u>43-3</u>	939_	
16	Located at ► 4 SCHOOL STREET FOXBOROUGH MA ZIP + 4 ► 02035 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 — check here	_N_\A		· [-
15	and enter the amount of tax-exempt interest received or accrued during the year	117 17	•	⊔ 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		Yes	No
10	bank, 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			
Pa	rt 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.		Yes	No
1	a During the year, did the foundation (either directly or indirectly)	1		
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes X No	İ		
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? Yes X No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes X No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? Yes X No			
	(6) Agree to pay money or property to a government official? (Exception. Check 'No' if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.) Yes X No			
	b If any answer is 'Yes' to 1a(1)—(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53 4941(d)-3 or in a current notice regarding disaster assistance? See instructions.	1 b	N N	/A
	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 before the first day of the tax year beginning in 2017?	1 c		Х
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5))			
	a At the end of tax year 2017, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2017? Yes X No			
	If 'Yes,' list the years ▶ 20 _ , 20 _ , 20			
	b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to	2.		
	all years listed, answer 'No' and attach statement — see instructions) 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 b	IN IN	/A
	► 20 , 20 , 20			
3	a Did the foundation hold more than a 2% direct or indirect interest in any business			
	enterprise at any time during the year?			
	b If 'Yes,' did it have excess business holdings in 2017 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2017)	3 b	N	/A
4	a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4 a		х
	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			
BA	the tax year beginning in 2017?	4 b	0_PF	X (2017)
UM	Γι	ハー・ココ	O-L.L	(2017)

art VII-B Statements Regarding Activitie	es for Which Form	4720 May Be Requ	uired (continued)			
5 a During the year, did the foundation pay or incur an	y amount to				Yes	No
(1) Carry on propaganda, or otherwise attemp	t to influence legislation	n (section 4945(e))?	Yes X	No		
(2) Influence the outcome of any specific publion, directly or indirectly, any voter registra	tion drive?			No		
(3) Provide a grant to an individual for travel,	study, or other similar p	ourposes ⁷	X Yes	No		
(4) Provide a grant to an organization other than in section 4945(d)(4)(A)? See instructions	a charitable, etc , organiz	zation described	Yes X	No		
(5) Provide for any purpose other than religious educational purposes, or for the prevention	is, charitable, scientific n of cruelty to children o	, literary, or or animals?	Yes X	No		
b If any answer is 'Yes' to 5a(1)—(5), did any of described in Regulations section 53.4945 or in a c See instructions	the transactions fail to urrent notice regarding d	qualify under the exceptions assist assistance?	otions	5 b		x
Organizations relying on a current notice regains	ding disaster assistanc	e, check here	▶ □	, -		<u> </u>
c If the answer is 'Yes' to question 5a(4), does to tax because it maintained expenditure responsif 'Yes,' attach the statement required by Requirement required by Requirement requirement.	sibility for the grant?		N/A Yes	No		
6 a Did the foundation, during the year, receive an		• •	•			
on a personal benefit contract? b Did the foundation, during the year, pay premi			∐Yes [X]	No 6 b		Х
If 'Yes' to 6b, file Form 8870						
7 a At any time during the tax year, was the found				No		
b If 'Yes,' did the foundation receive any procee				1/A 7b		
Part VIII Information About Officers, Di and Contractors				.mpioyee	s, 	
1 List all officers, directors, trustees, and found		neir compensation. See		1		
(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense other a	se acc allowa	ount, nces
KEVIN WEINFELD	DIRECTOR	0.	0.			0
43 GRANITE STREET	0					
FOXBOROUGH, MA 02035						
WILLIAM R. BUCKLEY, JR.	TREASURER/DI	0.	0.			0
3 THOMPSON ROAD	0					
FOXBOROUGH, MA 02035						
JEFFREY M. LOVELY	CLERK/DIRECT	0.	0.			0
6 RAILROAD AVENUE	0					
FOXBOROUGH, MA 02035						
JEFFREY C. PETERSON	PRESIDENT/DI	0.	0.			0
25B EDWARD ROAD	0	1				
FOXBOROUGH, MA 02035						
2 Compensation of five highest-paid employees (or	ther than those included	on line 1 – see instructio	ns). If none, enter 'NONE	1		
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d)Contributions to employee benefit plans and deferred compensation	(e) Expension	se acc allowa	ount, nces
NONE			· · · · · · · · · · · · · · · · · · ·			
				 		
				<u> </u>		
			1			
Total number of other ampleyage said ever 650 000	<u> </u>	<u> </u>	<u> </u>			0
Total number of other employees paid over \$50,000		·		<u> </u>		

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3 Five highest-paid independent contractors for professional services. See i		
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
-		
	·	
Total number of others receiving over \$50,000 for professional services	<u> </u>	
Part IX-A Summary of Direct Charitable Activities		
ust the foundation's four largest direct charitable activities during the tax year. Include relevant statistic organizations and other beneficiaries served, conferences convened, research papers produced, etc.	cal information such as the number of	Expenses
1 N/A		
2		
3		1
	· · · · · · · · · · · · · · · · · · ·	
4		
Part IX-B Summary of Program-Related Investments (see Instru	ictions)	Ļ.,
Describe the two largest program-related investments made by the foundation during the		Amount
1 N/A		
NC		
2		
All other program-related investments. See instructions.		
3		
Total. Add lines 1 through 3		0
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Parl	see instructions.)	eign i	oundations,
1 a	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes Average monthly fair market value of securities	1 a	214,308.
	Average of monthly cash balances	1 b	12,199.
	Fair market value of all other assets (see instructions)	1 c	12,233.
	Total (add lines 1a, b, and c)	1 d	226,507.
	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	226,507.
4	Cash deemed held for charitable activities Enter 1-1/2% of line 3 (for greater amount, see instructions)	4	3,398.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	223,109.
6	Minimum investment return. Enter 5% of line 5	6	11,155.
Par	TXI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private opera and certain foreign organizations, check here □ and do not complete this part.)	ting fo	oundations
1	Minimum investment return from Part X, line 6	1	11,155.
2 a	Tax on investment income for 2017 from Part VI, line 5 2a 209.		
b	Income tax for 2017 (This does not include the tax from Part VI) 2b		
c	Add lines 2a and 2b	2 c	209.
3	Distributable amount before adjustments Subtract line 2c from line 1	3	10,946.
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	10,946.
6	Deduction from distributable amount (see instructions)	6	
7_	Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII, line 1.	7	10,946.
Par	t XII Qualifying Distributions (see instructions)		
1 a	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes Expenses, contributions, gifts, etc. — total from Part I, column (d), line 26	1 a	20,000.
t	Program-related investments – total from Part IX-B	1 Ь	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the Suitability test (prior IRS approval required)	3 a	
t	Cash distribution test (attach the required schedule)	3 b	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	20,000.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income Enter 1% of Part I, line 27b See instructions	5	
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	20,000.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the four qualifies for the section 4940(e) reduction of tax in those years	ndation	
BAA			Form 990-PF (2017)

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				10,946.
2 Undistributed income, if any, as of the end of 2017				10, 540.
a Enter amount for 2016 only			0.	
b Total for prior years 20 , 20 , 20		0.		
3 Excess distributions carryover, if any, to 2017				
a From 2012 889.				
b From 2013 5, 707.				
c From 2014 11,019.				
d From 2015 18, 489.				
e From 2016				
f Total of lines 3a through e	36,104.			
4 Qualifying distributions for 2017 from Part	•			
XII, line 4 \(\) \$ 20,000.				
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				10,946.
e Remaining amount distributed out of corpus	9,054.			
5 Excess distributions carryover applied to 2017 (If an amount appears in column (d), the	0.			0.
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	45,158.			
b Prior years' undistributed income Subtract line 4b from line 2b		0.		
c Enter the amount of prior years' undistributed				
income for which a notice of deficiency has been issued, or on which the section 4942(a)				
tax has been previously assessed		0.		
d Subtract line 6c from line 6b Taxable				
amount — see instructions		0.		
e Undistributed income for 2016 Subtract line 4a from				
line 2a Taxable amount — see instructions.			0.	
f Undistributed income for 2017 Subtract lines				
4d and 5 from line 1. This amount must be distributed in 2018.				0
7 Amounts treated as distributions out of				0.
corpus to satisfy requirements imposed by				•
section 170(b)(1)(F) or 4942(g)(3) (Election may be required — see instructions).	0.			
· · · · · · · · · · · · · · · · · · ·				
8 Excess distributions carryover from 2012 not applied on line 5 or line 7 (see instructions)	889.			
9 Excess distributions carryover to 2018. Subtract lines 7 and 8 from line 6a	44,269.			
10 Analysis of line 9		ļ.	•	
a Excess from 2013 5, 707.				
b Excess from 2014 11, 019.			1	
c Excess from 2015 18, 489.				
d Excess from 2016				
e Excess from 2017 9,054.		<u> </u>		orm 990 PF (2017)

Form 990-PF (2017) JOHN J. AHERN SCH			\//II A	87-079099	
Part XIV Private Operating Foundat 1 a If the foundation has received a ruling or dete					N/A
is effective for 2017, enter the date of the	ruling		-	•	
b Check box to indicate whether the foundat		rating foundation d		4942(j)(3) or	4942(1)(5)
2a Enter the lesser of the adjusted net income from Part I or the minimum	Tax year		Prior 3 years		(e) Total
investment return from Part X for	(a) 2017	(b) 2016	(c) 2015	(d) 2014	
each year listed b 85% of line 2a			 		
c Qualifying distributions from Part XII,				/	
line 4 for each year listed			l l		
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 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			<u> </u>		
(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					
 Total support other than gross investment income (interest, dividends, rents, payments 			;		
on securities loans (section 512(a)(5)), or royalties)		ľ			
(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 an exempt organization					
(4) Gross investment income					
Part XV Supplementary Information	(Complete this	part only if the	foundation had	\$5,000 or more	in
assets at any time during th		structions.)			
 Information Regarding Foundation Manage a List any managers of the foundation who have 		an 2% of the total o	antributions received	by the foundation bef	oro tho
close of any tax year (but only if they have	e contributed more	than \$5,000) (See	section 507(d)(2)	by the loundation bei	ore trie
	·····	·			
b List any managers of the foundation who own a partnership or other entity) of which the NONE	10% or more of the foundation has a 1	stock of a corporation O% or greater inter	n (or an equally large est	portion of the owner	ship of
		·			
2 Information Regarding Contribution, Grant, € Check here if the foundation only ma requests for funds. If the foundation make	kes contributions to	preselected charitab			
2a, b, c, and d. See instructions.				·	
a The name, address, and telephone number or	r email address of th	e person to whom ap	pplications should be	addressed.	
SEE STATEMENT 3	submitted and infor	mation and materia	la thou about a polic	do.	
b The form in which applications should be	Soomilee and infor	mation and materia	ns triey snoula inclu	ue	
SEE STATEMENT FOR LINE 2A					· · · · · · · · · · · · · · · · · · ·
c Any submission deadlines					
SEE STATEMENT FOR LINE 2A					
d Any restrictions or limitations on awards,	such as by geograp	hical areas, charita	ble fields, kinds of i	nstitutions, or other	factors
SEE STATEMENT FOR LINE 2A					
BAA	TE	EA0310L 09/14/17		F	orm 990-PF (2017)

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3 Grants and Contribution	s Paid During the Ye	ar or Approved for Fut	ure Paymen	it	
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 (hon	ne or business)	or substantial contributor	recipient	Contribution	
a Paid during the year			-		
SEE STATEMENT 4					
Total				<u> </u>	30 000
b Approved for future payre	nent				20,000.
SEE STATEMENT 5					
SEE STATEMENT S					
	:				
Total	· · ·			▶ 3b	15,000.
	<u>·</u>	·			1 13,000.

	A Analysis of Income-1 Todacing					
•	amounts unless otherwise indicated am service revenue	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	(e) Related or exempt function income (See instructions)
_						
		+		+		
·		 		 - -		
		+	·	- - - 		
ŭ		 		++		
·		1				
a Foos	and contracts from government agencies	 		 		
•	pership dues and assessments	 				
	t on savings and temporary cash investments	 	<u> </u>	1 1 1	—— 	
	ends and interest from securities	 		14	3.	
	ental income or (loss) from real estate:	1		14	10,895.	· · · · · · · · · · · · · · · · · · ·
	financed property	 		- 		
	ebt-financed property	<u> </u>	\ 	+ +-		
	ebt-infanced property ntal income or (loss) from personal property			+ +		
						
	r investment income	 				
	r (loss) from sales of assets other than inventory	-		18	-1,405.	
	ncome or (loss) from special events					
	s profit or (loss) from sales of inventory					
	revenue			- 		
						
b		1		-		
C						
d		-				
e						
IZ Subt	otal Add columns (b), (d), and (e)				9,493.	
13 Total	. Add line 12, columns (b), (d), and (e)				13	9,493.
13 Total (See works	. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculati					9,493.
13 Total (See works Part XVI	. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculate. -B Relationship of Activities to the	e Accompli		`	9S	
13 Total (See works Part XVI Line No.	. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculati	e Accompli		`	9S	
13 Total (See works Part XVI Line No.	. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculate. -B Relationship of Activities to the	e Accompli		`	9S	
13 Total (See works Part XVI Line No.	. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculate. -B Relationship of Activities to the	e Accompli		`	9S	
13 Total (See works Part XVI Line No.	. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculate. -B Relationship of Activities to the	e Accompli		`	9S	
13 Total (See works Part XVI Line No.	. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculate. -B Relationship of Activities to the	e Accompli		`	9S	
13 Total (See works Part XVI Line No.	. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculate. -B Relationship of Activities to the	e Accompli		`	9S	
13 Total (See works Part XVI Line No.	. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculate. -B Relationship of Activities to the	e Accompli		`	9S	
13 Total (See works Part XVI Line No.	. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculate. -B Relationship of Activities to the	e Accompli		`	9S	
13 Total (See works Part XVI Line No.	. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculate. -B Relationship of Activities to the	e Accompli		`	9S	
13 Total (See works Part XVI Line No.	. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculate. -B Relationship of Activities to the	e Accompli		`	9S	
13 Total (See works Part XVI Line No.	. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculate. -B Relationship of Activities to the	e Accompli		`	9S	
13 Total (See works Part XVI Line No.	. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculate. -B Relationship of Activities to the	e Accompli		`	9S	
13 Total (See works Part XVI Line No.	. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculate. -B Relationship of Activities to the	e Accompli		`	9S	
13 Total (See works Part XVI Line No.	. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculate. -B Relationship of Activities to the	e Accompli		`	9S	
13 Total (See works Part XVI Line No.	. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculate. -B Relationship of Activities to the	e Accompli		`	9S	
13 Total (See works Part XVI Line No.	. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculate. -B Relationship of Activities to the	e Accompli		`	9S	
13 Total (See works Part XVI Line No.	. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculate. -B Relationship of Activities to the	e Accompli		`	9S	
13 Total (See works Part XVI Line No.	. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculate. -B Relationship of Activities to the	e Accompli		`	9S	
13 Total (See works Part XVI Line No.	. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculate. -B Relationship of Activities to the	e Accompli		`	9S	
13 Total (See works Part XVI Line No.	. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculate. -B Relationship of Activities to the	e Accompli		`	9S	
13 Total (See works Part XVI Line No.	. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculate. -B Relationship of Activities to the	e Accompli		`	9S	
13 Total (See works Part XVI Line No.	. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculate. -B Relationship of Activities to the	e Accompli		`	9S	
13 Total (See works Part XVI Line No.	. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculate. -B Relationship of Activities to the	e Accompli		`	9S	
13 Total (See works Part XVI Line No.	. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculate. -B Relationship of Activities to the	e Accompli		`	9S	

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

	Jannea III					
Did the organization di described in section 50 relating to political org	rectly or indirectly of 11(c) of the Code (canizations?	engage in any of the following vother than section 501(c)(3) org	vith any other organization anizations) or in section	on 527,	Yes	No
		o a noncharitable exempt organ	zation of			
(1) Cash	-			1 a	(1)	Х
(2) Other assets				1a	(2)	X
b Other transactions						
(1) Sales of assets to	a noncharitable exe	empt organization		1 b	(D)	X
(2) Purchases of asse	ts from a noncharit	able exempt organization		1 b		X
(3) Rental of facilities				1 b	(3)	X
(4) Reimbursement ar				1 b	``	Х
(5) Loans or loan gua	•			1 b	·	X
• • • • •		hip or fundraising solicitations		1 b		X
\ -/		ists, other assets, or paid emplo	vees	1,		X
o onaring or racinges, ex	quipinient, maining ii	10.00, 0.1101 0.000.00, 01 paid 0111p.10	,,,,,,,	\ <u>`</u>	<u>- 1 </u>	
d If the answer to any of the goods, other assets, any transaction or sha	f the above is 'Yes, or services given by	' complete the following schedu the reporting foundation If the fo show in column (d) the value of	le Column (b) should alvundation received less that the goods, other assets.	ways show the fair market n fair market value in , or services received	value of	
(a) Line no (b) Amount invo		of noncharitable exempt organization		nsfers, transactions, and sharing	arrangemen	ts
N/A	(3) (12.11)					
1/11						
			-			
						
			+			
		1. 1,1				
						
2 a Is the foundation directl described in section 5 b If 'Yes,' complete the	01(c) of the Code (ed with, or related to, one or more other than section 501(c)(3)) or	tax-exempt organizations in section 527?		Yes X	No,
(a) Name of org		(b) Type of organization	on (c) Description of relations	пр	
N/A	· · ·					
				·	•	
Under penalties of perjury	. I declare that I have exa	imined this return, including accompanying er than taxpayer) is based on all information	schedules and statements, and t	to the best of my knowledge and be	lief, it is true	
Sign Correct, and complete Dé	claration of preparer (other	1	n of which preparer has any know TREASURER	May this pre	the IRS disc return with to parer shown	cuss the below?
Signature of officer or tr	ustee	Date	Title	See	Yes	No
Print/Type prepa	\	Preparer's signature	Date	Check I of PTIN	1_1.24	
		NON-PAID PREPA	RER	self employed		
Paid	•	INON FAID EKEEN	IVDIV	Firm's EIN		
Preparer Firm's name	<u> </u>			JETHITS EIN		
Use Only Firm's address				1		
				Phone no		
BAA	1			Form	1 990-PF	(2017)

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FEDERAL STATEMENTS

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JOHN J. AHERN SCHOLARSHIP INC

87-0790992

STATEMENT 1 FORM 990-PF, PART I, LINE 23 OTHER EXPENSES

		(A) EXPENSES PER BOOKS	(B) NET INVESTMENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
FILING FEES, EXPENSES,	& TAXES TOTAL	\$ 462. \$ 462.	\$ 462. \$ 462.		\$ 0.

STATEMENT 2 FORM 990-PF, PART II, LINE 10B INVESTMENTS - CORPORATE STOCKS

CORPORATE STOCKS	VALUATION	BOOK	FAIR MARKET
	METHOD	VALUE	VALUE
CAPITAL INCOME BUILDER FUND A CAPITAL WORLD GROWTH & INCOME FUND A FUNDAMENTAL INVESTORS FUND A INCOME FUND OF AMERICA FUND A WASHINGTON MUTUAL INVESTORS FUND CL A	COST COST COST COST COST	\$ 29,203. 26,252. 34,472. 33,063. 22,617. \$ 145,607.	\$ 29,270. 27,346. 38,726. 34,515. 25,318. \$ 155,175.

STATEMENT 3 FORM 990-PF, PART XV, LINE 2A-D APPLICATION SUBMISSION INFORMATION

NAME OF GRANT PROGRAM:

NAME:

CARE OF:

STREET ADDRESS:

CITY, STATE, ZIP CODE:

TELEPHONE:

E-MAIL ADDRESS:

FORM AND CONTENT: SUBMISSION DEADLINES:

RESTRICTIONS ON AWARDS:

JOHN J. AHERN SCHOLARSHIP JOHN J. AHERN SCHOLARSHIP WILLIAM R. BUCKLEY, JR.

P.O. BOX 9136

FOXBOROUGH, MA 02035

508-543-3939

SEE ATTACHED APPLICATION FORM

APRIL 1

AWARD OF COLLEGE SCHOLARSHIP(S) FOR AMOUNT(S) TO BE

DETERMINED TO STUDENT(S) GRADUATING FROM HIGH SCHOOL WHO

IS/ARE A RESIDENT OF FOXBOROUGH, MASSACHUSETTS,

20	1	7
Zυ	1	

FEDERAL STATEMENTS

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JOHN J. AHERN SCHOLARSHIP INC

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STATEMENT 4 FORM 990-PF, PART XV, LINE 3A RECIPIENT PAID DURING THE YEAR

NAME AND ADDRESS	DONEE RELATIONSHIP	FOUND- ATION STATUS	PURPOSE OF GRANT	AMOUNT
MACKENZIE ANDERSON 10 KATHRYN ROAD FOXBOROUGH MA 02035	NONE	I	COLLEGE \$ EDUCATION	2,500.
MICHAELA MCCARTHY 387 SOUTH STREET FOXBOROUGH MA 02035	NONE	I	COLLEGE EDUCATION	2,500.
KAITLIN CARROLL 36 LAKEVIEW ROAD FOXBOROUGH MA 02035	NONE	I .	COLLEGE EDUCATION	2,500.
JESSICA HOYT 9 OUIMET LANE FOXBOROUGH MA 02035	NONE	I	COLLEGE EDUCATION	2,500.
SOFIA ISAZA 5 BRADSHAW LANE FOXBOROUGH MA 02035	NONE	I	COLLEGE EDUCATION	5,000.
JACQUELYN KELLER 15 FULLER ROAD FOXBOROUGH MA 02035	NONE .	I	COLLEGE EDUCATION	2,500.
ROSE MORRISON 77 S. GROVE STREET FOXBOROUGH MA 02035	NONE	I	COLLEGE EDUCATION	2,500.

TOTAL \$ 20,000.

STATEMENT 5 FORM 990-PF, PART XV, LINE 3B RECIPIENT APPROVED FOR FUTURE PAYMENT

NAME AND ADDRESS	DONEE RELATIONSHIP	FOUND- ATION STATUS	PURPOSE OF GRANT	 AMOUNT
ZACHARY SNYDER 3 WILLOW STREET FOXBOROUGH MA 02035	NONE	I	COLLEGE EDUCATION	\$ 5,000.
KAITLIN CARROLL 36 LAKEVIEW ROAD FOXBOROUGH MA 02035	NONE	I	COLLEGE EDUCATION	2,500.
JESSICA HOYT 9 OUIMET LANE FOXBOROUGH MA 02035	NONE	I	COLLEGE EDUCATION	2,500

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JOHN J. AHERN SCHOLARSHIP INC

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STATEMENT 5 (CONTINUED) FORM 990-PF, PART XV, LINE 3B RECIPIENT APPROVED FOR FUTURE PAYMENT

NAME AND ADDRESS	DONEE RELATIONSHIP	FOUND- ATION STATUS	PURPOSE <u>GRANT</u>		 AMOUNT
JACQUELYN KELLER 15 FULLER ROAD FOXBOROUGH MA 02035	NONE	I	COLLEGE EDUCATION		\$ 2,500.
ROSE MORRISON 77 S. GROVE STREET FOXBOROUGH MA 02035	NONE	I	COLLEGE EDUCATION		2,500.
				TOTAL	\$ 15,000.