

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

| (80 | 1 |
|-----|---|
| | |

| Internal H | Revenue Service | <u> </u> | <u> </u> | | s.gov/Form990PF for | instructions and | the latest info | | Open to Public Inspection |
|----------------|------------------------|-----------------------------------|------------------|-------------------|---------------------------------------|--|-------------------|---|--|
| For cale | endar year 2 | 17 or tax year b | eginning | APR | 1, 2017 | , and | ending | MAR 31, 2018 | <u> </u> |
| | of foundation | | | | | | | A Employer identification | ı number |
| SOU | <u>JTH</u> SH | ORE BAND | K CHAI | RITABLE | 3 | | | ļ | |
| FOU | JNDATI | ON, INC. | • | | | | | 04-3356807 | <u> </u> |
| Number | and street (or f | O box number of π | naıl ıs not delı | vered to street a | ddress) | | Room/suite | B Telephone number | |
| 153 | 30 MAI | N STREET | r | | | | | 781-337-30 | 0 0 |
| City or | town, state | or province, coun | ntry, and Zli | P or foreign po | ostal code | | | C If exemption application is p | ending, check here |
| | | YMOUTH, | | 02190 | | | | [| · |
| | ck all that ap | | Initial returi | | Initial return | of a former public | charity | D 1. Foreign organization | s. check here |
| u 0.100 | on an that ap | - = | Fınal return | • | Amended ret | • | 0.7L.11, | J | , o |
| | | = | Address ch | | Name change | | | Foreign organizations me check here and attach co | eeting the 85% test, |
| H Char | ck type of org | | | | empt private foundation | | <u>-(i)</u> | | · - |
| | ,, | a)(1) nonexemp | | | Other taxable private fo | | vV | E If private foundation sta under section 507(b)(1 | |
| | | | | | | | rual / | 7 | - |
| | | of all assets at er | id of year | J Accounting | | asii Acc | iruai | F If the foundation is in a | |
| - | Part II, col. | C), line 16) | COE | | her (specify) | hagis \ | | under section 507(b)(1 |)(B), check here |
| ▶ \$ | I Analysia | | | (Part I, Coluit | nn (d) must be on cash | | | | T (4) |
| Part | The total of | of Revenue and famounts in column | ns (b), (c), and | d (d) may not | (a) Revenue and expenses per boo | | nvestment come | (c) Adjusted net income | (d) Disbursements for charitable purposes |
| | _ | equal the amounts | | | | | | ļ | (cash basis only) |
| 1 | | ons, gifts, grants | | | 195,00 | <u>U. </u> | | N/A | <u> </u> |
| 2 | | if the foundation i | | o attach Sch B | · · · · · · · · · · · · · · · · · · · | | | | |
| 3 | cash investr | avings and tempora nents | a y | | | | | <u> </u> | |
| 4 | Dividends | and interest fron | n securities | ; | 103,55 | 3. 10 |) <u>3,553.</u> | | STATEMENT 1 |
| 5 | 5a Gross ren | s | | | | | | | |
| - 1 | b Net rental in | come or (loss) | | | | | | | |
| _ 6 | | loss) from sale of as | sets not on l | ne 10 | <u>129,87</u> | 4. | | | |
| | b Gross sales | price for all | 1,425 | ,9 <u>47.</u> | | | | | |
| enue 7 | | net income (from Pa | art IV, line 2) | | | 12 | 29,874. | | |
| ~~ a | Net short- | term capital gain |) | | · · · · · · · · · · · · · · · · · · · | | | | |
| 9 | Income m | odifications | | | | | | | |
| 10 | Gross sales | less returns | | | | | | | |
| | b Less Cost | - | | | | | | | |
| - | c Gross pro | - | | | | | | <u> </u> | |
| 11 | | | | | | | | | |
| 12 | | ine I lines 1 through | . 11 | | 428,42 | 7. 21 | 33,427. | | |
| | | | | -4- | 120,12 | 0. | 0. | | 0. |
| 13 | • | on of officers, direct | | , etc | | - | | | |
| 14 | • | loyee salaries ar | - | | | | | | |
| 15 | | lans, employee b | enenis | | | | RE | CEIVED | |
| Ó | Sa Legal fees | | | | <u>.</u> | | | - Q | |
| X 1 | b Accounting | - | | | | - | 101 411 | 1 2 2 2018 Y | |
| Μ | - | essional fees | | | | | ISI AU | 2 2 2018 | |
| .≥ 17 | | | | | | | 141 | | |
| 18 18 | | | | | | | 1-06 | DEN, UT | |
| .달 19 | • | on and depletion | 1 | | | | | | |
| 20 | • | | | | | | | | |
| | • | nferences, and m | neetings | | | | | | |
| F 22 | 2 Printing a | nd publications | | | | | | <u> </u> | |
| <u> </u> | 3 Other exp | enses | Si | rmt 2 | 25,21 | .6 | 25,216. | | 0. |
| Operating 23 | 4 Total ope | ating and admir | nistrative | | | | | | |
| je j | expenses | . Add lines 13 th | rough 23 | | 25,21 | | <u>25,216.</u> | L | 0. |
| Ö 25 | 5 Contributi | ons, gifts, grants | s paid | | 141,99 | | | | 141,997. |
| 26 | | enses and disbu | | | | | | | |
| | | 24 and 25 | | | 167,21 | .3. 2 | 25,216. | | 141,997. |
| 27 | | ne 26 from line | 12; | | • | | | | T |
| [" | | venue over expense | | sements | 261,21 | 4. | | | |
| - | | ment income (if | | | | 2.0 | 08,211. | | |
| 1 | | net income (if ne | | | | | <u> </u> | N/A | |
| 722501 | | | | | e, see instructions. | | | C2(2) | Form 990-PF (2017) |

| _ | |
|------------|--------|
| FOUNDATION | . INC. |
| LOUNDALION | . TMC. |

04-3356807

Page 2

| Б | art | Balance Sheets Attached schedules and amounts in the description | Beginning of year | End of | |
|------------|------|--|--------------------|----------------|-----------------------|
| | ai t | column should be for end-of-year amounts only | (a) Book Value | (b) Book Value | (c) Fair Market Value |
| | 1 | Cash - non-interest-bearing | 13,293. | 36,432. | 36,432. |
| | 2 | Savings and temporary cash investments | 241,616. | 292,119. | 292,119. |
| | 3 | Accounts receivable - | | | |
| | | Less; allowance for doubtful accounts ▶ | | | |
| | 4 | Pledges receivable - | | · | |
| | | Less: allowance for doubtful accounts ▶ | | | |
| | 5 | Grants receivable | | | |
| | 6 | Receivables due from officers, directors, trustees, and other | | | |
| | | disqualified persons | | | |
| | 7 | Other notes and loans receivable | | | |
| | | Less; allowance for doubtful accounts ▶ | | | |
| ĸ | 8 | Inventories for sale or use | | | |
| Assets | 9 | Prepaid expenses and deferred charges | | | |
| Ą | 10a | Investments - U.S. and state government obligations | | | |
| | b | Investments - corporate stock STMT 3 | 2,655,888. | 2,913,134. | 2,913,134. |
| | C | Investments - corporate bonds | | | |
| | 11 | Investments - land, buildings, and equipment basis | | | |
| | | Less accumulated depreciation | | | |
| | 12 | Investments - mortgage loans | | | |
| | 13 | Investments - other | | | |
| | 14 | Land, buildings, and equipment basis | | | |
| | | Less accumulated depreciation | | | |
| | 15 | Other assets (describe ►) | | | |
| 1 | 16 | Total assets (to be completed by all filers - see the | | | |
| _ | | instructions. Also, see page 1, item 1) | 2,910,797. | 3,241,685. | 3,241,685. |
| | 17 | Accounts payable and accrued expenses | | | |
| | 18 | Grants payable | | | |
| ģ | 19 | Deferred revenue | | | |
| ij | 20 | Loans from officers, directors, trustees, and other disqualified persons | | | |
| iabilities | 21 | Mortgages and other notes payable | | | |
| _ | 22 | Other liabilities (describe 🕨) | | | ĺ |
| | | | • | | |
| _ | 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. | | | |
| ances | 24 | Unrestricted | | | |
| | | Temporarily restricted | · | | |
| ä | 26 | Permanently restricted | | | 1 |
| Š | | Foundations that do not follow SFAS 117, check here | | | |
| or Fund Ba | ١ | and complete lines 27 through 31. | 0. | 0. | |
| | 27 | Capital stock, trust principal, or current funds | 0. | 0. | |
| Assets | 28 | Paid-in or capital surplus, or land, bldg., and equipment fund | 2,910,797. | 3,241,685. | 1 |
| | 29 | Retained earnings, accumulated income, endowment, or other funds | 2,910,797. | 3,241,685. | |
| Ş | 30 | Total net assets or fund balances | 2,310,131. | 3,241,003. | |
| | ١., | Table 10 - k 100 - and an about a Mond hadrons | 2,910,797. | 3,241,685. | 1 |
| = | 31 | Total liabilities and net assets/fund balances | | _ 3,241,003. | |
| P | art | Analysis of Changes in Net Assets or Fund Ba | alances | | |
| 1 | Tota | 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 | 2,910,797. |
| | | r amount from Part I, line 27a | | 2 | 261,214. |
| | | r increases not included in line 2 (itemize) CHANGE IN U | NREALIZED GAIL | NS 3 | 69,674. |
| 4 | Add | lines 1, 2, and 3 | | 4 | 3,241,685. |
| 5 | Deci | eases not included in line 2 (itemize) | | 5 | 0. |
| 6 | Tota | net assets or fund balances at end of year (line 4 minus line 5) - Part II, co | olumn (b), line 30 | 6 | 3,241,685. |

| Partily Capital Gains a | and Loss | ses for Tax on Inv | vestment | Income | | | | | |
|--|-----------------|--|------------------|--------------------------------------|----------|--|--|--|----------------------------------|
| | | of property sold (for exam common stock, 200 shs. | | e, | 1 . b | How acquired - Purchase - Donation | (c) Date (mo., c | acquired day, yr.) | (d) Date sold (mo., day, yr.) |
| 18 SALE OF INVESTM | MENTS | | | | | P | | | |
| ь | | | | | _ | | | | |
| <u>.c</u> | | | | | ↓_ | | | | |
| _d | | | | | - | | | | |
| _e | | | | | Ц, | | | | |
| (e) Gross sales price | | preciation allowed or allowable) | plus e | t or other basis xpense of sale | | | | Gain or (loss is (f) minus | (g)) |
| <u>a</u> 1,425,947. | | | | 1, <u>296,07</u> | 3. | | | | 129,874. |
| _Ь | | | | | | | | | |
| <u> </u> | | | | | | | | | |
| <u> </u> | | | <u> </u> | | | | | | |
| Complete only for assets showing | g gain in 60 | lumn (h) and award by t | he foundation | on 12/21/60 | | | (I) Como (| 0-1 (h) | |
| Complete only for assets showing | | | _ | | | | | Col. (h) gain not less tha | |
| (i) FMV as of 12/31/69 | | Adjusted basis s of 12/31/69 | | cess of col. (1) col. (1), if any | | | Losses | (from col. (| h)) |
| _ | | | | \111 =1 | | | | <u>-</u> | 129,874. |
| <u>a</u> | | | | | - | | | | 140,014. |
| b c | | | | | | | | | _ |
| d | | | | | | | | | |
| <u> </u> | | | | | | | | | |
| | | C If goin, also enter | us Dort Line | | 7 | | | | |
| 2 Capital gain net income or (net cap | oital loss) | If gain, also enter if (loss), enter -0- | | | <u> </u> | 2 | | | 129,874. |
| | | | | • | | | | | <u> </u> |
| 3 Net short-term capital gain or (los if gain, also enter in Part I, line 8, | , | u III sections 1222(5) ani | u (o). | | J | | | | |
| If (loss), enter -0- in Part I, line 8 | ` ' | | | | ľ | 3 | | N/A | <u> </u> |
| Part V Qualification Ur | nder Sed | ction 4940(e) for | Reduced | Tax on Net | Inve | estment Inc | ome | | |
| (For optional use by domestic private | foundations | s subject to the section 4 | 940(a) tax on | net investment in | come | -) | | | |
| Management 4040/d\/0\ annient lance the | | | | | | | | | |
| If section 4940(d)(2) applies, leave th | us part biam | (. | | | | | | | |
| Was the foundation liable for the section | ion 4942 tax | c on the distributable am | ount of any ye | ar in the base per | ıod? | - | | | Yes X No |
| If "Yes," the foundation doesn't qualify | | | | | | | | | |
| 1 Enter the appropriate amount in e | ach column | for each year; see the in | structions bef | ore making any er | ntries | <u>. </u> | | | (2) |
| (a) Base period years | | (b) Adjusted qualifying dist | tributions | Net value of no | (C) |) ritable-use ass et | _ ا | Distril | (d) oution ratio |
| Calendar year (or tax year beginning | ng in) | | | IVEL VALUE OF THE | | | | (col. (b) div | vided by col. (c)) |
| 2016 | | | 0,460. | | | ,614,589 | | | .053722 |
| 2015 | | | 7,116. 8,479. | | | ,497,55; ,435,53 | | | .052752 |
| 2014 | | | 7,122. | | - 4 | ,433,33. | 1 | | .051959 |
| 2013 | | | 5,869. | | | ,640,36 | | | .052348 |
| 2012 | | | 3,003. | | | ,040,30 | - | г — | .032340 |
| 2 Total of line 1, column (d) | | | | | | | 2 | | .261677 |
| 3 Average distribution ratio for the 5 | i_voar haco | neriod - divide the total o | on line 2 hv 5 (|) or by the numb | er of | | | | .201011 |
| the foundation has been in existen | - | • | on into 2 by o.c | , or by the number | GI () | - | 3 | | .052335 |
| the roundation has been in existen | 106 11 1633 111 | an 5 years | | | | | <u> </u> | <u> </u> | |
| 4 Enter the net value of noncharitab | la_uca accat | s for 2017 from Part Y I | line 5 | | | | 4 | | 3,011,669. |
| 4 Enter the het value of honehalitab | 15-035 03351 | 3 101 2017 110111 F Q11 A, 1 | ilite J | | | • | -4 | | 3,011,003. |
| 5 Multiply line 4 by line 3 | | | | | | | 5 | ł | 157,616. |
| 3 Manpy and 4 by and 5 | | | | | | •- | _ <u>~</u> | | |
| 6 Enter 1% of net investment incom | e (1% of Pa | rt I line 27h) | | | | | 6 | ļ | 2,082. |
| Elitai 178 at hat invocations moons | | | | | | | <u> </u> | | |
| 7 Add lines 5 and 6 | | | | | | | 7 | | 159,698. |
| | | | | | | •• | <u> </u> | † | |
| 8 Enter qualifying distributions from | Part XII. III | ne 4 | | | | | 8 | | 141,997. |
| If line 8 is equal to or greater than | • | | th and come | lete that nart usin | ng a 1 | % tax rate | | • | |
| See the Part VI instructions. | | | | | | | | | |
| 723521 01-03-18 | | | | | | - | | | Form 990-PF (2017) |

SOUTH SHORE BANK CHARITABLE

| Form 990-PF (2017) FOUNDATION, INC. Part VI Excise Tax Based on Investment Income (Section 49) | 40(a), 4940(b), 4940(e), or 4 | 04-335 1948 - see i | 6807 nstruction | Page 4 |
|---|---|------------------------|--------------------|--|
| 1a Exempt operating foundations described in section 4940(d)(2), check here | d enter "N/A" on line 1. | | | |
| Date of ruling or determination letter: (attach copy of letter if | | İİ | | |
| b Domestic foundations that meet the section 4940(e) requirements in Part V, check here | | _ 1 | 4,1 | 64. |
| of Part I, line 27b | Į, | | | |
| c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations, enter | 4% of Part I, line 12, col. (b). 丿 | | | |
| 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 | 4,1 | 64. |
| 4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only | r, others, enter -0-) | 4 | | 0. |
| 5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0- | | 5 | 4,1 | 64. |
| 6 Credits/Payments; | | | | |
| a 2017 estimated tax payments and 2016 overpayment credited to 2017 | 6a 1,455 | <u>.</u>] | | |
| b Exempt foreign organizations - tax withheld at source | 6b 0 | | | ļ |
| c Tax paid with application for extension of time to file (Form 8868) | 6cO | | | |
| d Backup withholding erroneously withheld | 6d O | .] | | |
| 7 Total credits and payments. Add lines 6a through 6d | | 7 | 1,4 | 55. |
| 8 Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is | attached | 8 | | 0. |
| 9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed | • | 9 | 2,7 | 09. |
| 10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid | • | 10 | | |
| 11 Enter the amount of line 10 to be: Credited to 2018 estimated tax | Refunded - | 11 | | |
| Part VII-A Statements Regarding Activities | | | | |
| 1a During the tax year, did the foundation attempt to influence any national, state, or local le | gislation or did it participate or interven | ie in | Yes | No |
| any political campaign? | | | 1a | X |
| b Did it spend more than \$100 during the year (either directly or indirectly) for political pul | poses? See the instructions for the defi | inition | 1b | X |
| If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copi | | | | |
| distributed by the foundation in connection with the activities. | · | | 1 1 | |
| c Did the foundation file Form 1120-POL for this year? | | | 1c | X |
| 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 management | | | | |
| e Enter the reimbursement (if any) paid by the foundation during the year for political expe | | | | |
| managers. ▶ \$ 0. | • | | † | |
| 2 Has the foundation engaged in any activities that have not previously been reported to th | e IRS? | | 2 | X |
| 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 | ng instrument, articles of incorporation, | or | | i |
| bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes | | | 3 | X |
| 4a Did the foundation have unrelated business gross income of \$1,000 or more during the | vear? | | 4a | X |
| b If "Yes," has it filed a tax return on Form 990-T for this year? | • | N/A | 4b | |
| 5 Was there a liquidation, termination, dissolution, or substantial contraction during the ye | ar? | • | 5 | X |
| If "Yes," attach the statement required by General Instruction T | | | | |
| 6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfies | d either: | | 1 1 | |
| By language in the governing instrument, or | | | 1 1 | 1 |
| By state legislation that effectively amends the governing instrument so that no manda | itory directions that conflict with the sta | te law |] [| |
| remain in the governing instrument? | , | | 6 X | |
| 7 Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," co | mplete Part II. col. (c), and Part XV | • | 7 X | |
| | , | • • | | l l |
| 8a Enter the states to which the foundation reports or with which it is registered. See instru | ctions. ► | | | |
| b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the | e Attorney General (or designate) | | | 1 |
| of each state as required by General Instruction G? If "No," attach explanation | , | | 8b X | 1 |
| 9 Is the foundation claiming status as a private operating foundation within the meaning of | f section 4942(i)(3) or 4942(i)(5) for ca | lendar | | ┌ 、 |
| year 2017 or the tax year beginning in 2017? See the instructions for Part XIV. If "Yes," or | | | 9 | $\bar{\mathbf{x}}$ |
| 10 Did any persons become substantial contributors during the tax year? If "Yes," attach a sch | | | 10 | X |
| | | F | orm 990-PF | (2017) |

| Pa | rt VII-A Statements Regarding Activities (continued) | | | |
|----|--|----------------------|----------------|-------------|
| | | | Yes | No |
| 11 | At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of | | | |
| | section 512(b)(13)? If "Yes," attach schedule. See instructions | 11 | | X |
| 12 | Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? | | | |
| | 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 | | | |
| 14 | The books are in care of ▶ DAN BRENNAN Telephone no. ▶ 781-68 | 2-3 | 247 | |
| | Located at ▶ 1530 SOUTH MAIN STREET, SOUTH WEYMOUTH, MA ZIP+4 ▶02 | 190 | | |
| 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 | | /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 | | <u> X</u> |
| | See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the | } | | - |
| | foreign country | <u> </u> | | |
| 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 | <u>No</u> |
| 1a | 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? | | ł | |
| | (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) | ١, | 1 | |
| | a disqualified person? | 1 , | 1 | ł |
| | (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) Yes X No | | 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)? | | | Ì |
| | | ł | | 1 |
| | (6) Agree to pay money or property to a government official? (Exception. Check "No" | | | 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.) Yes X No | } | | 1 |
| L | · · · · · · · · · · · · · · · · · · · | | } | 1 |
| Q | If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53,4941(d)-3 or in a current notice regarding disaster assistance? See instructions N/A | 1b | | |
| | Organizations relying on a current notice regarding disaster assistance, check here | 10 | | |
| | Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected | 1 | | |
| | before the first day of the tax year beginning in 2017? | 10 | | X |
| 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)): | } | | |
| 8 | 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 | 1 | } | |
| • | before 2017? Yes X No | 1 | } | |
| | If "Yes," list the years | ł | 1 | |
| t | Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect | 1 | | |
| | 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. | 1 | | |
| | | } | } | |
| 38 | Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time | ł |] | |
| | during the year? Yes X No | ł | | i |
| 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 | 1 | | |
| | 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 | | | i |
| | of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, | | - | |
| | Form 4720, to determine if the foundation had excess business holdings in 2017.) N/A | 3b | - | |
| | Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? | 48 | | <u>X</u> |
| t | 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? | 1 <u>4b</u> rm 99 | D-DE | (2017) |
| | FC | 1111 33 | y-ı-ı | (2017) |

| Part VII-B Statements Regarding Activities for Whic | n Form 4/20 May Be R | equired _{(contin} | ued) | | | |
|--|--|----------------------------|---|-------|-------------------|--------------|
| 5a During the year, did the foundation pay or incur any amount to: | | | | | Yes | No |
| (1) Carry on propaganda, or otherwise attempt to influence legislation (se | ection 4945(e))? | Ye | s X No | | | |
| (2) Influence the outcome of any specific public election (see section 495 | 5); or to carry on, directly or indire | | | | | |
| any voter registration drive? | | | s X No | | | |
| (3) Provide a grant to an individual for travel, study, or other similar purp | oses? | Ye | s X No | | | |
| (4) Provide a grant to an organization other than a charitable, etc., organization | zation described in section | | | | | |
| 4945(d)(4)(A)? See instructions | | Ye | es X No | | | |
| (5) Provide for any purpose other than religious, charitable, scientific, lite | rary, or educational purposes, or f | | | | | |
| the prevention of cruelty to children or animals? | | | es X No | | | |
| b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualif | y under the exceptions described i | n Regulations | | | | |
| section 53.4945 or in a current notice regarding disaster assistance? See i | | | N/A | 5b | | |
| Organizations relying on a current notice regarding disaster assistance, ch | | • | | | | |
| c If the answer is "Yes" to question 5a(4), does the foundation claim exempti | | | | | | |
| expenditure responsibility for the grant? | | Γ/A | s L 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 | y, to pay premiums on | | [GET | | ļ | |
| a personal benefit contract? | _ | Ye | es X No | | | |
| b Did the foundation, during the year, pay premiums, directly or indirectly, or | n a personal benefit contract? | | | 6b | \longrightarrow | X |
| If "Yes" to 6b, file Form 8870. | | | | | | |
| 7a At any time during the tax year, was the foundation a party to a prohibited | | Ye | s X No | | _ | |
| b If "Yes," did the foundation receive any proceeds or have any net income at Part VIII Information About Officers, Directors, True | | | N/A | 7b | | |
| Information About Officers, Directors, Tru Paid Employees, and Contractors | istees, Foundation Mar | nagers, Hignly | | | | |
| List all officers, directors, trustees, and foundation managers are | nd their compensation | | | | | |
| The state of the s | | (c) Compensation | (d) Contributions to |) (e | 1 Expe | ense |
| (a) Name and address | (b) Title, and average hours per week devoted | (If not paid, | (d) Contributions to employee benefit plan and deferred | acc | Expe | othe |
| ARTHUR H. SHARP | to position DIRECTOR | enter -O-) | compensation | _ a | llowan | Les |
| 1530 MAIN STREET | —DIKECTOK | | | | | |
| SOUTH WEYMOUTH, MA 02190 | 1.00 | 0. | 0 | | | 0 |
| PAMELA O'LEARY | VP/DIRECTOR | | | ╫─ | | - 0 |
| 1530 MAIN STREET | -VI / DIRECTOR | | | | | |
| SOUTH WEYMOUTH, MA 02190 | 1.00 | 0. | 0 | | | 0 . |
| JAMES M. DUNPHY | PRESIDENT/DIR | | | + | | |
| 1530 MAIN STREET | | Toron | | | | |
| SOUTH WEYMOUTH, MA 02190 | 1.00 | 0. | 0 | | | 0 |
| MARIELLE HARDIMAN | DIRECTOR | · · · · · · | , i | • | | |
| 1530 MAIN STREET | | | | | | |
| SOUTH WEYMOUTH, MA 02190 | 1.00 | 0. | 0 | | | 0. |
| 2 Compensation of five highest-paid employees (other than those | 4 4 1 1 4 4 4 4 | | | • | | |
| | (b) Title, and average | (c) Compensation | (d) Contributions to employee benefit plan and deferred |) (e | Expe | nșe |
| | | La Compansation | and deferred | " acc | count, Ilowan | othe Ices |
| (a) Name and address of each employee paid more than \$50,000 | hours per week devoted to position | (c) compensation | compensation | ı a | | |
| | devoted to position | (c) compensation | compensation | a | | |
| (a) Name and address of each employee paid more than \$50,000 | | (C) Comportation | compensation | a | | |
| | | (c) comparisation | compensation | a | | |
| | | (c) compensation | compensation | a | | |
| | | (c) compensation | compensation | a | | |
| | | (c) compensation | compensation | a | - | |
| | | (c) compensation | compensation | d | - | |
| | | (c) compensation | compensation | a | _ | |
| | | (c) compensation | compensation | d | | |
| | | (c) compensation | compensation | d | | |

Form 990-PF (2017)

Total, Add lines 1 through 3

| F | Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations | dations, | , see instructions.) |
|----|--|-------------|------------------------|
| 1 | Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes: | | |
| · | | 1a | 2.816.917. |
| b | | 1b | 2,816,917. 240,615. |
| C | | 1c | |
| d | | 1d | 3,057,532. |
| - | Reduction claimed for blockage or other factors reported on lines 1a and | | |
| Ĭ | 1c (attach detailed explanation) 1e 0. | | |
| 2 | Acquisition indebtedness applicable to line 1 assets | 2 | 0. |
| 3 | Subtract line 2 from line 1d | 3 | 3,057,532. |
| 4 | Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions) | 4 | 45,863. |
| 5 | Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4 | 5 | 3,011,669. |
| 6 | Minimum investment return. Enter 5% of line 5 | 6 | 150,583. |
| _ | Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations an | d certain | |
| _ | foreign organizations, check here and do not complete this part.) | | |
| 1 | Minimum investment return from Part X, line 6 | 1 | 150,583. |
| 2a | 1 1 4 4 6 4 | | |
| Ь | | | |
| G | | 2c | 4,164. |
| 3 | Distributable amount before adjustments. Subtract line 2c from line 1 | 3 | 146,419. |
| 4 | Recoveries of amounts treated as qualifying distributions | 4 | 0. |
| 5 | Add lines 3 and 4 | 5 | 146,419. |
| 6 | Deduction from distributable amount (see instructions) | 6 | 0. |
| 7 | Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1 | 7 | 146,419. |
| F | Part XII Qualifying Distributions (see instructions) | | |
| = | | - | |
| 1 | Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes: | | 141,997. |
| 8 | | 1a | 141,997. |
| þ | : | 1b | <u> </u> |
| 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: | | |
| 8 | | 3a | |
| , | , | 3b | 141,997. |
| 4 | Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8; and Part XIII, line 4 | 4 | 141,33/• |
| 5 | Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment | | 0. |
| _ | income. Enter 1% of Part I, line 27b | 5 6 | 141,997. |
| 6 | Adjusted qualifying distributions. Subtract line 5 from line 4 | <u> </u> | ·— |
| | Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation q | ualities fo | or the section |
| _ | 4940(e) reduction of tax in those years. | | |

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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, | ουιρασ | rears prior to 2010 | 2010 | |
| line 7 | | | | 146,419. |
| 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: a From 2012 10, 387. | | | | Ì |
| a From 2012 10,387. b From 2013 6,638. | j | | | } |
| c From 2014 9, 202. | | | | |
| d From 2015 3,687. | | | | |
| e From 2016 10,325. | | | | |
| f Total of lines 3a through e | 40,239. | | | |
| 4 Qualifying distributions for 2017 from | | | | |
| Part XII, line 4: ► \$141,997. | | | | |
| 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. | | | 4.44 000 |
| d Applied to 2017 distributable amount | | | | 141,997. |
| e Remaining amount distributed out of corpus | 0. | | | 4 422 |
| Excess distributions carryover applied to 2017 (If an amount appears in column (d), the same amount must be shown in column (a)) | 4,422. | | | 4,422. |
| 6 Enter the net total of each column as indicated below: | | ļ | | |
| & Corpus Add lines 3f, 4c, and 4e Subtract line 5 | 35,817. | | | |
| b Prior years' undistributed income. Subtract | | | | |
| line 4b from line 2b | | 0. | | |
| c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously | | 0. | | |
| assessed 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. | 1 | | 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 | 1 | 1 | |] |
| corpus to satisfy requirements imposed by | | | | |
| section 170(b)(1)(F) or 4942(g)(3) (Election | . 1 | ĺ | | |
| may be required - see instructions) | 0. | | | |
| 8 Excess distributions carryover from 2012 | 5 065 | | | |
| not applied on line 5 or line 7 | 5,965. | | | |
| 9 Excess distributions carryover to 2018. Subtract lines 7 and 8 from line 6a | 29,852. | ţ | | |
| 10 Analysis of line 9: | 27,032. | | | |
| a Excess from 2013 6,638. | ľ | ł | | i |
| b Excess from 2014 9, 202. | | | | |
| c Excess from 2015 3,687. | | l | | 1 |
| d Excess from 2016 10,325. | | | | 1 |
| e Excess from 2017 | | | | Form 990-DF (2017) |
| | | | | |

SOUTH SHORE BANK CHARITABLE 04-3356807 FOUNDATION. INC. Page 10 Part XIV | Private Operating Foundations (see instructions and Part VII-A, question 9) N/A 1 a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2017, enter the date of the ruling 4942(1)(5) b Check box to indicate whether the foundation is a private operating foundation described in section 4942(j)(3) or Tax year Prior 3 years 2 a Enter the lesser of the adjusted net (c) 2015 (d) 2014 (e) Total (a) 2017 (b) 2016 income from Part I or the minimum investment return from Part X for 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 exempt activities e Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c 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 c "Support" alternative test - enter: (1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties) (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 the year-see instructions.) Information Regarding Foundation Managers: a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000). (See section 507(d)(2).) NONE b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest. NONE Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs: Check here > [] if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc., to individuals or organizations under other conditions, complete items 2a, b, c, and d. a The name, address, and telephone number or email address of the person to whom applications should be addressed: SEE STATEMENT 4 b The form in which applications should be submitted and information and materials they should include: c Any submission deadlines: d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors:

Form 990-PF (2017)

| 3 Grants and Contributions Paid During the | Year or Approved for Future | Payment | | |
|--|--|---------------------|----------------------------------|-----------------|
| Recipient | If recipient is an individual, | Foundation | Purpose of grant or | • |
| Name and address (home or business) | If recipient is an individual, show any relationship to any foundation manager or substantial contributor | status of recipient | Purpose of grant or contribution | Amount |
| a Paid during the year | O O O O O O O O O O O O O O O O O O O | | | |
| | | | | |
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| PLEASE SEE ATTACHMENT | NOT RELATED | PC | EXEMPT PURPOSE | |
| ON FILE - DETAILS UPON REQUEST | | | | 141,997 |
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| | | <u> </u> | <u> </u> | 141,997 |
| b Approved for future payment | | , | <u> </u> | 141,997 |
| • Approved for fature payment | | { | | |
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| Total | | | > 3b | 0 |
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| Enter gross amounts unless otherwise indicated. | Unrelate | d business income | | ded by section 512, 513, or 514 | (e) |
|--|-------------------------|-------------------|-------------------------------|---------------------------------|-----------------------------------|
| 1 Program service revenue: | (a) Business code | (b) Amount | (C) Exclu- sion code | (d) Amount | Related or exempt function income |
| a | _ [] | | L | | |
| b | _ | | | | |
| c | _ | | | | |
| d | _ | | | | |
| e | _ | | <u> </u> | | |
| t | - | | <u> </u> | | |
| g Fees and contracts from government agencies | | | | | |
| 2 Membership dues and assessments | | | | | |
| 3 Interest on savings and temporary cash | ł | | | | |
| investments | ļ | | | | |
| 4 Dividends and interest from securities | ļ | | 14 | 103,553. | |
| 5 Net rental income or (loss) from real estate: | | | | | |
| 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 | 100 074 | |
| than inventory | | | 18 | 129,874. | |
| 9 Net income or (loss) from special events | | | | | |
| 10 Gross profit or (loss) from sales of inventory | | | | | |
| 11 Other revenue: | ľ | | | | |
| å | - | | | | |
| b | | | | | |
| | 1 1 | | | | |
| c | _ | | ├ | | |
| d | _ | | | | |
| c | _ | 0 | | 233 427 | 0. |
| c d e Subtotal. Add columns (b), (d), and (e) | _ | 0. | | 233,427. | 444 |
| c d e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) | | 0. | | 233,427. | 444 |
| c d e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations. | .) | | | 13 | 444 |
| c | .) | | empt | 13 | 444 |
| c d e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations. Part XVI-B Relationship of Activities | s to the Acco | mplishment of Exe | | 13 | 233,427. |
| c d e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations. Part XVI-B Relationship of Activities Line No. Explain below how each activity for which in | s to the Acco | mplishment of Exe | | 13 | 233,427. |
| c d e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations. Part XVI-B Relationship of Activities | s to the Acco | mplishment of Exe | | 13 | 233,427. |
| c d e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations. Part XVI-B Relationship of Activities Line No. Explain below how each activity for which in | s to the Acco | mplishment of Exe | | 13 | 233,427. |
| c d e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations. Part XVI-B Relationship of Activities Line No. Explain below how each activity for which in | s to the Acco | mplishment of Exe | | 13 | 233,427. |
| c d e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations. Part XVI-B Relationship of Activities Line No. Explain below how each activity for which in | s to the Acco | mplishment of Exe | | 13 | 233,427. |
| c d e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations. Part XVI-B Relationship of Activities Line No. Explain below how each activity for which in | s to the Acco | mplishment of Exe | | 13 | 233,427. |
| c d e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations. Part XVI-B Relationship of Activities Line No. Explain below how each activity for which in | s to the Acco | mplishment of Exe | | 13 | 233,427. |
| c d e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations. Part XVI-B Relationship of Activities Line No. Explain below how each activity for which in | s to the Acco | mplishment of Exe | | 13 | 233,427. |
| c d e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations. Part XVI-B Relationship of Activities Line No. Explain below how each activity for which in | s to the Acco | mplishment of Exe | | 13 | 233,427. |
| c d e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations. Part XVI-B Relationship of Activities Line No. Explain below how each activity for which in | s to the Acco | mplishment of Exe | | 13 | 233,427. |
| c d e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations. Part XVI-B Relationship of Activities Line No. Explain below how each activity for which in | s to the Acco | mplishment of Exe | | 13 | 233,427. |
| c d e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations. Part XVI-B Relationship of Activities Line No. Explain below how each activity for which in | s to the Acco | mplishment of Exe | | 13 | 233,427. |
| c d e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations. Part XVI-B Relationship of Activities Line No. Explain below how each activity for which in | s to the Acco | mplishment of Exe | | 13 | 233,427. |
| c d e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations. Part XVI-B Relationship of Activities Line No. Explain below how each activity for which in | s to the Acco | mplishment of Exe | | 13 | 233,427. |
| c d e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations. Part XVI-B Relationship of Activities Line No. Explain below how each activity for which in | s to the Acco | mplishment of Exe | | 13 | 233,427. |
| c d e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations. Part XVI-B Relationship of Activities Line No. Explain below how each activity for which in | s to the Acco | mplishment of Exe | | 13 | 233,427. |
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| c d e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations. Part XVI-B Relationship of Activities Line No. Explain below how each activity for which in | s to the Acco | mplishment of Exe | | 13 | 233,427. |

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| FOI | מעוי | ATI | UN. | . INC |
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| Form 990-PF (2 | 2017) . FOUND | ATION, IN | C. | KT IIIDDD | | 04-3 | 3356807 | Pa | ge 13 |
|------------------------|---|---------------------------|---|-----------------------------------|--|---------------------------|---------------------|---------------|-------|
| Part XVII | Information Re | garding Trans | | nd Transactions ar | nd Relationsh | ips With Nonc | haritable | | |
| | Exempt Organ | izations | | | | | | <u> </u> | |
| | = | | | g with any other organization | on described in sect | on 501(c) | | Yes | No |
| | | | | to political organizations? | | | | | |
| | from the reporting founds | ation to a noncharital | ole exempt org | ganization of: | | | | | |
| (1) Cash | | | | | - | | 1a(1) | | X |
| (2) Other b Other tran | | | | | - | | 1a(2) | | Α_ |
| | isactions. i of assets to a noncharita | hla avamnt araanizat | 100 | | | | 1b(1) | | X |
| | hases of assets from a no | | | | | | 1b(2) | | X |
| . , | al of facilities, equipment, | • | · guiiizuuoii | | - | | 16(3) | | X |
| , , | bursement arrangements | | | | • | | 1b(4) | | X |
| • • | s or loan guarantees | | | | | | 1b(5) | | X |
| (6) Perfo | rmance of services or me | mbership or fundrais | sing solicitatio | ns | | | 1b(6) | | X |
| c Sharing o | f facilities, equipment, ma | uling lists, other asse | ts, or paid em | ployees | | | _1c_ | | X |
| d If the answ | wer to any of the above is | "Yes," complete the t | following sche | dule. Column (b) should al | ways show the fair r | narket value of the g | oods, other ass | ets, | |
| | | | | ed less than fair market valu | e in any transaction | or sharing arrangem | ent, show in | | |
| column (c | i) the value of the goods, | | | | | | | | |
| (a) Line no | (b) Amount involved | (c) Name of | | exempt organization | (d) Description | of transfers, transaction | s, and sharing arra | ngemen | ts |
| | | | <u> N/A</u> | | | | | | |
| | | ļ | | | | | | | |
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| | | J | | | _ | | | | |
| | | • | | or more tax-exempt organi | zations described | | | _ | ٦ |
| | 501(c) (other than sectio | | ction 527? | | • | | Yes | LX | No |
| b If "Yes," c | omplete the following sch | | | (b) Type of organization | | (c) Description of re | lationchin | | |
| | (a) Name of org | Janization | | (b) Type of organization | | (c) Description of Te | iationship | | |
| | N/A_ | | | | | | | | |
| | | | | | | | | | |
| | | | | | 1 | | | | |
| | | | | | | | | | |
| | | | | accompanying schedules and st | | | May the IRS | liecuse t | hie |
| Sign and b | elief it is tue, correct, and con | nplete Declaration of pre | parer (other than | taxpayer) is based on all informa | tion of which preparer h | as any knowledge | return with the | e prepar | er |
| Here | 1/1/19 | Du | 4 <i>01</i> 14 / | 8//8 | Presi | dery | X Yes | | No |
| Sigi | nature of officer or trustee | | | Date | Title | | | | |
| | Fruit/Type preparer's na | ame | Prepare 's S | ngnature | Date | Check ıf | PTIN | | |
| | MICHAEL J. | ROWE, | 12.1 | 190 | 8/9/18 | self- employed | | | |
| Paid | CPA | | 1,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | of 9. Rowe | 0/9/10 | l | P00535 | | |
| Preparer | Firm's name ► WOL | F & COMPA | NY, P. | C | | Firm's EIN ► 0 | 4-26898 | 83 | |
| Use Only | | | | | | | | | |
| | Firm's address ► 99 | | | 1ST FLOOR | | 1 | | | |
| | <u>BO</u> | STON, MA | 02110 | | | Phone no. 61 | | | |
| | | | | | | | Form 99 | y-PF | (2017 |

Schedule B

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

Department of the Treasury Internal Revenue Service

Schedule of Contributors

➤ Attach to Form 990, Form 990-EZ, or Form 990-PF.

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

OMB No 1545-0047

2017

| Name of the organization | Employer identification number | | | | | | |
|---|--|----------------------|--|--|--|--|--|
| | OUTH SHORE BANK CHARITABLE | 04-3356807 | | | | | |
| FOUNDATION, INC. 04-3356807 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 | | | | | | |
| · • | s covered by the General Rule or a Special Rule. (7), (8), or (10) organization can check boxes for both the General Rule and a Special Rul | e. See instructions. | | | | | |
| General Rule | | | | | | | |
| X 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, line 1. Complete Parts I and II | | | | | | | |
| For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 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, contributions is checked, enter l purpose Don't col | 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 | | | | | | |
| 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) | | | | | | | |

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
SOUTH SHORE BANK CHARITABLE
FOUNDATION, INC.

Employer identification number

04-3356807

| Kantl. | Contributors (see instructions) Use duplicate copies of Part I if additional | space is needed. | |
|------------|--|----------------------------|--|
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| 1 | SOUTH SHORE BANCORP, MHC 1530 MAIN STREET SOUTH WEYMOUTH, MA 02190 | \$ <u>195,000.</u> | Person X Payroll |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | | \$ | Person Payroll Payroll Noncash (Complete Part II for noncash contributions.) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | | \$ | Person Payroll Oncash Complete Part II for noncash contributions.) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | | \$ | Person Payroll Oncash Complete Part II for noncash contributions) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | | \$ | Person Payroll Oncash Complete Part II for noncash contributions) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | | \$ | Person Payroll Oncash Complete Part II for noncash contributions.) |

Name of organization
SOUTH SHORE BANK CHARITABLE
FOUNDATION, INC.

Employer identification number

04-3356807

| Part II | Noncash Property (see instructions). Use duplicate copies of Part | Il 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 |
| | | | |
| (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 |
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| (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 |
| | | s | |
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (See instructions.) | (d) Date received |
| | | | |
| | | | |

| | Form 990, 990-EZ, or 990-PF) (2017) | | | Page 4 |
|-----------------------------|---|--------------------------------------|---|--|
| Name of organ | | | | Employer identification number |
| | SHORE BANK CHARITABLE | | | 04-3356807 |
| Part III | Exclusively religious, charitable, etc., contrib | utions to organizations described i | n section 501(c)(7), (8), or | (10) that total more than \$1,000 for |
| | the year from any one contributor. Complete co- completing Part III, enter the total of exclusively religious, | lumns (a) through (a) and the follow | wing line entry. For organization | ing. |
| | Use duplicate copies of Part III if additional | space is needed | LETTER MILE YOUR (ETTER MILE MILE MILE MILE MILE MILE MILE MILE | |
| (a) No. from | (b) Purpose of gift | (c) Use of gift | (d) Des | cription of how gift is held |
| Part I | | | (0) 500 | |
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| | | (e) Transfer of gift | t | |
| 1 | | | | |
| ļ | Transferee's name, address, and | I ZIP + 4 | Relationship of tra | insferor to transferee |
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| (a) No. | (1-) 2000000000000000000000000000000000000 | (a) 11a a ad aidt | (d) Dag | aviation of how wife in hold |
| from Part I | (b) Purpose of gift | (c) Use of gift | (a) Des | cription of how gift is held |
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| | | (e) Transfer of gift | t | |
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| <u>_</u> | Transferee's name, address, and | 1 ZIP + 4 | Relationship of tra | ansferor to transferee |
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| (a) No. | | | | |
| from Part I | (b) Purpose of gift | (c) Use of gift | (d) Des | cription of how gift is held |
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| - | | (e) Transfer of gif | _ | |
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| _ | Transferee's name, address, and | I ZIP + 4 | Relationship of tr | ansferor to transferee |
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| (a) No. | | | | |
| from Part I | (b) Purpose of gift | (c) Use of gift | (d) Des | cription of how gift is held |
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| | Transferee's name, address, and | 1 ZIP + 4 | Relationship of tr | ansferor to transferee |
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| 102454 14 24 1 | · | | Cahadula | B (Form 990, 990-EZ, or 990-PF) (2017 |
| '23454 11 - 01-1 | • | | Ocheusic | 1. olin oca, coc.pr. ol pop. [1] [201] |

| FORM 990-PF | DIVIDENDS | AND INTER | EST FROM SECUR | ITIES S' | PATEMENT 1 |
|------------------------------------|-----------------|------------------------------|-----------------------------------|-----------------------------------|-------------------------------|
| SOURCE | GROSS AMOUNT | CAPITAL GAINS DIVIDEND | REVENUE | (B) NET INVEST- MENT INCOME | (C) ADJUSTED NET INCOME |
| DIVIDEND INCOME INTEREST INCOME | 101,432. | | 0. 101,432. 0. 2,121. | • | |
| TO PART I, LINE 4 | 103,553. | | 0. 103,553. | 103,553. | |
| FORM 990-PF | | OTHER E | XPENSES | S' | PATEMENT 2 |
| | | | | | |
| DESCRIPTION | | (A) EXPENSES PER BOOKS | (B) NET INVEST- MENT INCOME | (C) ADJUSTED NET INCOME | (D) CHARITABLE PURPOSES |
| CUSTODIAN FEE | _ | 25,216. | 25,216. | | 0. |
| TO FORM 990-PF, PG 1 | T.N 23 | 25,216. | 25,216. | | 0. |

| FORM 990-PF CORPORATE STOCK | | STATEMENT 3 |
|---|------------|----------------------|
| DESCRIPTION | BOOK VALUE | FAIR MARKET VALUE |
| SECURITIES | 2,913,134. | 2,913,134. |
| TOTAL TO FORM 990-PF, PART II, LINE 10B | 2,913,134. | 2,913,134. |

FORM 990-PF

GRANT APPLICATION SUBMISSION INFORMATION PART XV, LINES 2A THROUGH 2D

STATEMENT 4

NAME AND ADDRESS OF PERSON TO WHOM APPLICATIONS SHOULD BE SUBMITTED

JAMES M. DUNPHY, PRESIDENT 1530 SOUTH MAIN STREET SOUTH WEYMOUTH, MA 02190

TELEPHONE NUMBER

781-337-3000

FORM AND CONTENT OF APPLICATIONS

APPLICATIONS AVAILABLE AT ABOVE ADDRESS

ANY SUBMISSION DEADLINES

SEE APPLICATIONS FOR VARIOUS DEADLINES

RESTRICTIONS AND LIMITATIONS ON AWARDS

AWARDS ARE TO BE GRANTED WITHIN SOUTHEASTERN MASSACHUSETTS, UNLESS AN EXCEPTION IS MADE BY THE BOARD OF DIRECTOR'S TO BENEFIT COMMUNITY, CHARITABLE, EDUCATIONAL, AND OTHER BENEVOLENT PURPOSES.