**Return of Private Foundation** 

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

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

	Depai	tment o	of the Treasury Do not enter social security n		•	•	blic. /	the second section of the second
	Intern	al Reve	nue Service - Go to www.irs.gov/Form990					n to Public Inspection.
			dar year 2017 or tax year beginning		7, and endir	Ť -		1-30 ,2018
	Na	me of	foundation KAZYS AND STANISLAVA TAMOSAITIS EDUCATIONAL SCHOLARSHIP	j		45-518	r identification number 6460	
•	Nu	mber a	and street (or PO box number if mail is not delivered to street address)		Room/suite	1	e number (see instruction	ns)
			ELLS AVE SUITE 303				93-3020	•
•			wn, state or province, country, and ZIP or foreign postal code				tion application is pendin	n check here
	NE	WTO	N, MA 02459			- II exemp	non application is pendin	g, check field
92	G C	heck	all that apply Initial return Initial return	of a former public ch	narity	D 1. Foreig	n organizations, check h	ere · · · · ▶ ☐ Î
0	ה ה		' Final return Amended re	turn		2 Foreign	n organizations meeting	the 85% test
			Address change Name change	ge			here and attach compute	
	н_с	heck	type of organization Section 501(c)(3) exempt priv	ate foundation	~/	) NE If private	foundation status was te	rminated under —
	X	Sect	on 4947(a)(1) nonexempt charitable trust Other	taxable private found	lation $V$		07(b)(1)(A), check here	
I	l F	aır ma	rket value of all assets at J Accounting method	X Cash	Accrual	F If the fou	ndation is in a 60-month	termination
	er	nd of y	/ear (from Part II, col (c), Other (specify) _				ction 507(b)(1)(B), check	
		ne 16)	<u> </u>	e on cash basis )		<u></u>	_	
ŧ	Ŗа	rt.l寶		(a) Revenue and				(d) Disbursements
			amounts in columns (b), (c), and (d) may not necessarily equal	èxpenses per books		t investment ncome	(c) Adjusted net income	for charitable purposes
-	<del></del> -		the amounts in column (a) (see instructions) )	books	7-0-0-1-1-1-1	T W FIRM THE		(cash basis only)
	Ī	1	Contributions, gifts, grants, etc , received (attach schedule)				A DOMEST CONTROL OF THE	
		2	Check ► X If the foundation is <b>not</b> required to attach Sch B · ·	to Trade Const				THE COLD A MONTH & THE YEAR
		3	Interest on savings and temporary cash investments · · · ·	5,2	57	5,257	5,25	7 Action of the second of the
		4	Dividends and interest from securities					MARCH CON TOUR
		5a	Gross rents		(P. 14 A)		1 Am 1 - 1 - 1 - 1 - 1 - 1 - 1	E de l'Appare L'ANNESSE No l'Appare L'ANNESSE
		b	Net rental income or (loss)	Water Charles Charles Control of the Control	40 - 10 - 10 - 10 - 10 - 10 - 10 - 10 -	WATER THE STATE OF		E TOTAL TOTAL
	≘	6a b	Net gain or (loss) from sale of assets not on line 10 · · · · · · · Gross sales price for all assets on line 6a	TEMPORE TO	- 2-1/12"	mer le le	a Linda Linda	A PER TO ANTHUMEN A
	Revenue	7	Capital gain net income (from Part IV, line 2)	07.00 - 1.00 - 1.00 - 1.00 - 1.00 - 1.00 - 1.00 - 1.00 - 1.00 - 1.00 - 1.00 - 1.00 - 1.00 - 1.00 - 1.00 - 1.00	<u> </u>	ا فيد مركب كالأواط	P. T. Mar. 4 323	
	)	8	Net short-term capital gain	The state of the s	t A Tyray	- 67. W		
	-1	9	Income modifications	7317	1 2 24	17.3		
		10a	Gross sales less returns and allowances	The state of the s	- 1	San Service San	文: 本: 英: "发表"	4 22 3 A
		b	Less Cost of goods sold	3 - 12 - 12 - 13 - 13 - 13 - 13 - 13 - 1	74 L.	4 7 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4		1677.1414.00
		С	Gross profit or (loss) (attach schedule)		7. 7	7-4		A TOWN
		11	Other income (attach schedule)		1.20			10/11/19/19
		12	Total. Add lines 1 through 11	5,2	57	5,257	5,25	7 37 37 37 37 37
-	S	13	Compensation of officers, directors, trustees, etc · · · · ·					
	ses	14	Other employee salaries and wages					
	je	15	Pension plans, employee benefits					
	Ä	16a	Legal fees (attach schedule) · · · · · · · · STM107	7,8	00			7,800
	nistrative Expen	b	Accounting fees (attach schedule)					
_	aŧ,	С	Other professional fees (attach schedule) · · · · · STM109	1,9	82			1,982
2019	str	17	Interest					
~		18	Taxes (attach schedule) (see instructions) · · · · <b>STM110</b>	6	05			605
02		19	Depreciation (attach schedule) and depletion			<del></del>		The state of the state of
		20	Occupancy					+
FEB		21 22	Travel, conferences, and meetings		-			
		22 23	Printing and publications · · · · · · · · · · · · · · · · · · ·					
SCANNED		23 24	Total operating and administrative expenses.					<del> </del>
Z	er	7	Add lines 13 through 23 · · · · · · · · · · · · · · · · · ·	10,3	87	0		10,387
		25	Contributions, gifts, grants paid	31,8	44		Sheek State Sec. 1	31,844
<b>(</b> )	- 1	26	Total expenses and disbursements. Add lines 24 and 25	42,2		<u> </u>		42,231
<b>(\$)</b> -	$\rightarrow$	27	Subtract line 26 from line 12	TIME ALLE			THE PARTY OF	THE THREE THE
		а	Excess of revenue over expenses and disbursements •		74)			
		b	Net investment income (if negative, enter -0-)	****		5.257		TOTAL WATER
	- 1	С	Adjusted net income (if negative, enter -0-)					7 27 20 20

ĮĘ:	art!!!	Balance Sheets Attached schedules and amounts in the description column	Beginning of year	<u> </u>	end of y	
_		should be for end-of-year amounts only (See instructions )	(a) Book Value	(b) Book Value		(c) Fair Market Value
	1	Cash - non-interest-bearing · · · · · · · · · · · · · · · · · · ·		<u> </u>		<u> </u>
	2	Savings and temporary cash investments	562,545	525,5	71	525,571
	3	Accounts receivable •		<u> </u>		
		Less allowance for doubtful accounts	-7. Waste Crast 27% and 34% and 54%			
	4	Pledges receivable	•		السيا	
		Less allowance for doubtful accounts			-	
	5	Grants receivable · · · · · · · · · · · · · · · · · · ·				<del> </del>
	6	Receivables due from officers, directors, trustees, and other	1			
		disqualified persons (attach schedule) (see instructions)				
	7	Other notes and loans receivable (attach schedule)				
"		Less allowance for doubtful accounts				
ssets	8	Inventories for sale or use				
SS	9	Prepaid expenses and deferred charges · · · · · · · · · · · · · · · · · · ·				<del></del>
⋖	10a	Investments - U S and state government obligations (attach schedule)				
	b	Investments - corporate stock (attach schedule)				
	C	Investments - corporate bonds (attach schedule)				
	11	Investments - land, buildings, and equipment basis ▶				
		Less accumulated depreciation (attach schedule)				
	12	Investments - mortgage loans		-		
	13	Investments - other (attach schedule) - · · · · · · · · · · · · · · · · · ·				
	14	Land, buildings, and equipment basis ▶				
		Less accumulated depreciation (attach schedule)				
	15	Other assets (describe )		· · · · · · · · · · · · · · · · · · ·	1	
	16	Total assets (to be completed by all filers - see the				
		instructions Also, see page 1, item I)	562,545	525,5	71	525,571
	17	Accounts payable and accrued expenses			1	
<b>'</b> 0	18	Grants payable	· ·			12
Liabilities	19	Deferred revenue · · · · · · · · · · · · · · · · · · ·				
Ę	20	Loans from officers, directors, trustees, and other disqualified persons				
iak	21	Mortgages and other notes payable (attach schedule)				
	22	Other liabilities (describe				
	23	Total liabilities (add lines 17 through 22)	0		0	
S		Foundations that follow SFAS 117, check here · · · · · · > and complete lines 24 through 26, and lines 30 and 31.	:			
alance	24	Unrestricted				
ala	25	Temporarily restricted	-			
Ä	26	Permanently restricted				
'n		Foundations that do not follow SFAS 117, check here				
豆		and complete lines 27 through 31.				
ō	27	Capital stock, trust principal, or current funds				
sts	28	Paid-in or capital surplus, or land, bldg, and equipment fund				
Net Assets or Fund B	29	Retained earnings, accumulated income, endowment, or other funds	562,545	525,5	71	
Ä		Total net assets or fund balances (see instructions)	562,545	525,5		
Vet		Total liabilities and net assets/fund balances (see	302,343	323,3	<del>'</del> -	
		Instructions)	562, 545	525,5	71	0
[Pa	ırt ill		ces	JEJ, J	· -  =	
		net assets or fund balances at beginning of year - Part II, column (a), line 3				
		f-year figure reported on prior year's return) · · · · · · · · · · · · · · · · · · ·	, ,		1	562,545
		amount from Part I, line 27a			2	(36, 974)
		increases not included in line 2 (itemize)		F	3	
		nes 1, 2, and 3			4	525,571
		eases not included in line 2 (itemize)		F	5	
		net assets or fund balances at end of year (line 4 minus line 5) - Part II, col	lumn (b), line 30		6	525,571
EEA						Form <b>990-PF</b> (2017)

Part IV	Capital Gains and	Losses for Tax on Investr	nent incom	<u>e</u>		
	(a) List and describe the 2-story bnck warehous	e kınd(s) of property sold (for example, re- e, or common stock, 200 shs MLC Co )	al estate,	(b) How acquired P-Purchase D-Donation	(c) Date acquired (mo , day, yr )	(d) Date sold (mo , day, yr )
1a						
b						
<u> </u>						
d				-		
е	<del></del>	<del>-</del>		L		
(e)	Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or o plus expens			in or (loss) (f) minus (g))
a						
b						
d d						
e e	-					
	e only for assets showing o	gain in column (h) and owned by the fo	oundation on 12	/31/69		
	as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess	of col (ı)	col (k), but no	ol (h) gain minus t less than -0-) <b>or</b> from col (h))
		as 01 12/31/09	over col (j)	), II arry		
<u>a</u> b						
C						_
d						
e						
2 Capital g	ain net income or (net capi	tal loss) 1	ter in Part I, line	7	2	
3 Net shor	t-term capital gain or (loss)	as defined in sections 1222(5) and (	•	•		
	, , ,	olumn (c) See instructions If (loss), e	•	}		
		Costion 4040(s) for Body		Not Investme	3	
Part V		er Section 4940(e) for Redu				
(For optional	use by domestic private to	undations subject to the section 4940	(a) tax on net inv	vestment income )		
If section 494	10(d)(2) applies, leave this	part blank				
Was the four	ndation liable for the section	n 4942 tax on the distributable amoun	of any vear in t	he hase period?		Yes X No
		nder section 4940(e) Do not complet		ne base penda		
		ch column for each year, see the instru	•	naking any entries		
	(a)	(b)		(c)	Diet	(d)
	Base penod years ear (or tax year beginning in)	Adjusted qualifying distributions	Net value of n	oncharitable-use as		ribution ratio divided by col (c))
	2016	34,845		566,2	81 0	061533
	2015	30,403		588,3	19 0	051678
<u></u>	2014			593,1		. 0
	2013			584,5		. 0
	2012	627,579		585,1	63 1.	072486
2 Total of	line 1, column (d)				. 2 1	185697
3 Average	distribution ratio for the 5-y	ear base period - divide the total on lii	ne 2 by 5 0, or b	у		· · · · · · · · · · · · · · · · · · ·
the numb	per of years the foundation	has been in existence if less than 5 years	ears · · · ·		. 3 0	237139
4 Enter the	enet value of noncharitable	-use assets for 2017 from Part X, line	5		. 4	535,799_
5 Multiply I	ine 4 by line 3 · · · · ·				. 5	127,059
6 Enter 1%	of net investment income	(1% of Part I, line 27b)			. 6	53
7 Add lines	5 5 and 6				. 7	127,112
	alifying distributions from P					567,802
	s equal to or greater than lii structions	ne 7, check the box in Part VI, line 1b	, and complete t	nat part using a 19	% tax rate. See the	`

	990-PF (2017) KAZYS AND STANISLAVA TAMOSAITIS EDU 45-51864	
Pal	rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see inst	ructions)
1a `	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1 Date of ruling or determination letter (attach copy of letter if necessary-see instructions)	
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check	53
_	here X and enter 1% of Part I, line 27b	<u> </u>
С	All other domestic foundations enter 2% of line 27b Exempt foreign organizations, enter 4% of	į
·	Part I, line 12, col (b)	
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-)	0
3	Add lines 1 and 2	53
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-)	0
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-	53
6	Credits/Payments	
		<u> </u>
a		
د د		重 流
d		
7		338
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached 8	
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	285
II Date	Enter the amount of line 10 to be Credited to 2018 estimated tax ▶ 285 Refunded ▶ 11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
		Yes No
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it	1a X
<b>L</b>	participate or intervene in any political campaign?	10 A
b	Instructions for the definition	1b X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials	- + +
	published or distributed by the foundation in connection with the activities	
^	Did the foundation file Form 1120-POL for this year?	1c
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year	
_	(1) On the foundation > \$ (2) On foundation managers > \$	
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed	
•	on foundation managers >\$	
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2 X
	If "Yes," attach a detailed description of the activities	
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of	
	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3 X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a X
ь	If "Yes," has it filed a tax return on Form 990-T for this year?	4b
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	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) satisfied either	
	By language in the governing instrument, or	
	By state legislation that effectively amends the governing instrument so that no mandatory directions that	
	conflict with the state law remain in the governing instrument?	6 X
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV •	7 X
8a	Enter the states to which the foundation reports or with which it is registered. See instructions ▶	a .
	MA	
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General	
	(or designate) of each state as required by General Instruction G <sup>2</sup> If "No," attach explanation · · · · · · · · · · · · · · · · · · ·	8b X
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or	
	4942(j)(5) for calendar year 2017 or the tax year beginning in 2017? See instructions for Part XIV)? If "Yes,"	7
	complete Part XIV	9 X
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their	
	names and addresses	10   X

Form **990-PF** (2017)

Form		5-5186 <b>4</b>	60	F	age 5
Pa	rt VII-A Statements Regarding Activities (continued)				
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the			Yes	No
	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	Χ	
	Website address N/A	·			
14	The books are in care of PHILIP C AMARU Telephone no	781-49	3-3	020	
		02459			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041-check here				▶ [
	and enter the amount of tax-exempt interest received or accrued during the year	15			
16	At any time during calendar year 2017, did the foundation have an interest in or a signature or other authority			Yes	No
	over a 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
1a	During the year, did the foundation (either directly or indirectly)				
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes	No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a	_			•
	disqualified person?	No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes	□ No │			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes	No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for	_			
	the benefit or use of a disqualified person)? Yes	□No			
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the				
	foundation agreed to make a grant to or to employ the official for a period after				
	termination of government service, if terminating within 90 days ) Yes	□ No			
b	If any answer is "Yes" to 1a(1)-(6), did <b>any</b> of the acts fail to qualify under the exceptions described in Regulations				
	section 53 4941(d)-3 or in a current notice regarding disaster assistance? See instructions		1b		
	Organizations relying on a current notice regarding disaster assistance, check here			-	
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that	_			
	were not corrected before the first day of the tax year beginning in 2017?		1c		
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private	j	_		
	operating foundation defined in section 4942(j)(3) or 4942(j)(5))				
а	At the end of tax year 2017, did the foundation have any undistributed income (lines 6d and		-		
	6e, Part XIII) for tax year(s) beginning before 2017? Yes	No			
	If "Yes," list the years , , ,	_			
ь	Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2)				
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to				:
	all years listed, answer "No" and attach statement - see instructions )		2b		
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here		<u> </u>		
	• <u> </u>				
За	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise				
	at any time during the year? Yes	No			
b	If "Yes," did it have excess business holdings in 2017 as a result of (1) any purchase by the foundation or			'	
	disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the				
	Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of				
	the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the				
	foundation had excess business holdings in 2017 )		3b	<del></del> -	
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? • •		4a		
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its		-		
-	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2017?		4b		

	990-PF (2017) KAZYS AND STANISLAV.  † VII-B   Statements Regarding Activitie				) May Re	Requi		5-518		Р	age 6
			William Toll	7/2	o may be	ricqui	ieu (con	unaca,	<del>/                                    </del>	Vaa	N <sub>0</sub>
5a	During the year, did the foundation pay or incur any am			- 40454-	0	1	П <b>у</b> Г	¬	-	Yes	No
	(1) Carry on propaganda, or otherwise attempt to influ	_	•	,	• •	• • •	∐ Yes [	No		7.	, ;
	(2) Influence the outcome of any specific public electrons				ry on,	4	<u> — г</u>	<b>¬</b>		-	
	directly or indirectly, any voter registration drive?					• • •	Yes	_  No			. ]
	(3) Provide a grant to an individual for travel, study, or	other sir	nılar purposes		• • • • • •	• • •	Yes [	No	1.		
	(4) Provide a grant to an organization other than a cha	ritable, e	etc, organization	n descri	bed in				-		
	section 4945(d)(4)(A)? See instructions	• • • •	• • • • • • •	• • • •	• • • • • •	• • •	Yes	No	·= _		
	(5) Provide for any purpose other than religious, charif	able, sc	entific, literary,	or educa	ational			_	-		
	purposes, or for the prevention of cruelty to childre	n or anir	mals?				Yes	No			-
b	If any answer is "Yes" to 5a(1)-(5), did any of the trans	actions	fail to qualify ur	der the	exceptions di	escribed	ın		-		
	Regulations section 53 4945 or in a current notice rega	arding dis	saster assistan	ce? See	instructions				5b		
	Organizations relying on a current notice regarding dis-	aster ass	sistance check	here				▶ □			- 1
С	If the answer is "Yes" to question 5a(4), does the found				tax						I
	because it maintained expenditure responsibility for the		•			[	Yes	No		.	- 1
	If "Yes," attach the statement required by Regulations	•				·					i
6a	Did the foundation, during the year, receive any funds,			nav prom	ourme					İ	
oa	on a personal benefit contract?	•	•			ſ	¬ v [				
<b>h</b>	'		•			1	Yes [	No			
b	Did the foundation, during the year, pay premiums, dire	ectly or in	orectly, on a p	ersonaı ı	benetit contra	act.			6b		—
_	If "Yes" to 6b, file Form 8870				_	ı	r	<b>¬</b>		ì	
7a	At any time during the tax year, was the foundation a pa					• • •	Yes [	No			
<u>_b</u>	If "Yes," did the foundation receive any proceeds or have							· <u>· · ·</u>	7b		
Pai	t VIII Information About Officers, Dire	ectors,	, Trustees,	Found	dation Ma	ınager	s, Highl	y Paid	Empl	oyee	s,
	and Contractors										
1 L	st all officers, directors, trustees, and foundation i	nanage	rs and their co	ompens	ation. See ir	structio	ons.				
	(a) Name and address		le, and average rs per week		ompensation		Contribution		(e) Expe		
	(a) Name and address		ed to position		not paid, nter -0-)		oyee benefit ferred comp		other :	allowan	ces
PHI	IP C AMARU	TRUST	EE								
189	WELLS AVE SUITE 303, MA 02459		2.00		0			0		,	0
											<u> </u>
	<del></del>										
		L		<u> </u>		L					
	ompensation of five highest-paid employees (othe	r than tr	nose included	on line	1 - see insti	uctions	). If none,	enter			
	NONE."		T			·	Υ				
			(b) Title, and	average			(d) Contrib employee		(e) Expe	nce acc	count
	(a) Name and address of each employee paid more than \$50	,000	hours per v		(c) Compe	nsation	plans and	deferred		llowand	
			devoted to po	silion			compensation				
NON											
		-									
					]		İ				
	,			-	<del>                                     </del>		<del></del>				
	<b>\$</b>										
T			L		L		L				
	number of other employees paid over \$50,000 · · ·	• • • •	· · · · · · ·	• • • •		• • • •	<u> </u>				0
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Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Hig and Contractors (continued)	ghly Paid Employees,
3 Five highest-paid independent contractors for professional services. See instructions. If none, enter "NOI	NE."
(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	. •
Part IX-A Summary of Direct Charitable Activities	
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the nur organizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1 COASTAL CAROLINA UNIVERSITY	
108 JAMES P BLANTON CIRCLE	
CONWAY, SC 29526	31,844
2	
3	
4	
Part IX-B Summary of Program-Related Investments (see instructions)	<del></del>
bescribe the two largest program-related investments made by the loundation during the tax year on lines 1 and 2	' Amount
1 INTEREST BEARING SAVINGS ACCOUNTS	
•	525 571
2	525,571
All other program-related investments See instructions	
3	

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525, 571 Form **990-PF** (2017)

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Pa	Minimum Investment Return (All domestic foundations must complete this part. Foreign	1 found	lations,
	see instructions.)	<del>, , , , , , , , , , , , , , , , , , , </del>	
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purposes.	Ĺ	
а	Average monthly fair market value of securities	1a	0_
b	Average of monthly cash balances	1b	543,958
С	Fair market value of all other assets (see instructions)	1c	0
d	Total (add lines 1a, b, and c)	1d	543,958
е	Reduction claimed for blockage or other factors reported on lines 1a and	1	
	1c (attach detailed explanation) · · · · · · · · · · · · · · · · · · ·	<u> </u>	
2	Acquisition indebtedness applicable to line 1 assets	2	0
3	Subtract line 2 from line 1d	3	543,958
4	Cash deemed held for charitable activities   Enter 1 1/2% of line 3 (for greater amount, see		
	instructions)	4	8,159
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	535,799
6	Minimum investment return. Enter 5% of line 5	6	26,790
Pa	rt XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating for	oundat	ions
	and certain foreign organizations, check here ▶ and do not complete this part )		
1	Minimum investment return from Part X, line 6	1	26,790
2a	Tax on investment income for 2017 from Part VI, line 5 · · · · · · · · 2a 53		
b	Income tax for 2017. (This does not include the tax from Part VI) 2b	L L	
С	Add lines 2a and 2b	2c	53
3	Distributable amount before adjustments Subtract line 2c from line 1	3	26,737
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4 · · · · · · · · · · · · · · · · · ·	5	26,737
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	26,737
Da	rt XII Qualifying Distributions (see Instructions)		
Га	rt XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
а	Expenses, contributions, gifts, etc - total from Part I, column (d), line 26	1a	42,231
b	Program-related investments - total from Part IX-B	1b	525,571
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		
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	567,802
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	53
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	567,749
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the f	oundation	
	qualifies for the section 4940(e) reduction of tax in those years		
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Undistributed Income (see instructions) Part XIII (d) 2017 (c) 2016 (a) Corpus (b) Years prior to 2016 Distributable amount for 2017 from Part XI, 26,737 Undistributed income, if any, as of the end of 2017 Total for prior years: Excess distributions carryover, if any, to 2017 From 2012 . . . . . . . . From 2013 . . . . . . . . . c From 2014 . . . . . . . . . **d** From 2015 . . . . . . . . 1,449 e From 2016 . . . . . . . . . . 5,290 6,739 Qualifying distributions for 2017 from Part XII, line 4 ► \$ 567,802 a Applied to 2016, but not more than line 2a b Applied to undistributed income of prior years (Election required - see instructions) . . . . . . c Treated as distributions out of corpus (Election d Applied to 2017 distributable amount .... 26,737 Remaining amount distributed out of corpus . . . 541,065 Excess distributions carryover applied to 2017 (If an amount appears in column (d), the same amount must be shown in column (a) ) Enter the net total of each column as indicated below: a Corpus Add lines 3f, 4c, and 4e Subtract line 5 . 547,804 b Prior years' undistributed income Subtract line 4b from line 2b . . . . . . . . . . . . . . . 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 d Subtract line 6c from line 6b Taxable amount - see instructions . . . . . . . . . e Undistributed income for 2016. Subtract line 4a from line 2a Taxable amount - see instructions ........ f Undistributed income for 2017 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2018 . . . . . . . . . Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be Excess distributions carryover from 2012 not applied on line 5 or line 7 (see instructions) Excess distributions carryover to 2018. Subtract lines 7 and 8 from line 6a 547,804 Analysis of line 9 a Excess from 2013 b Excess from 2014 c Excess from 2015 . . . . . 1,449 d Excess from 2016 . . . . . 5,290

e Excess from 2017 . . . . .

541,065

		STANISLAVA TA			45-518646	0 Page 10
Par	XIV. Private Operating Foun	idations (see ins	tructions and Part	VII-A, question 9	)	
1a	'If the foundation has received a ruling or o	fetermination letter that	t it is a private operating	g		
	foundation, and the ruling is effective for 2	017, enter the date of	the ruling • • • •		<u> </u>	
b	Check box to indicate whether the foundat	tion is a private operati	ng foundation describe	d in section	4942(j)(3) or 5	1942(j)(5)
2a	Enter the lesser of the adjusted net	Tax year		Prior 3 years		
	income from Part I or the minimum	(a) 2017	(b) 2016	(c) 2015	(d) 2014	(e) Total
	investment return from Part X for each year listed	(-)	(-,	(4, 44	- (-,)	<u> </u>
b	85% of line 2a	<del></del>				
_						
C	Qualifying distributions from Part XII, line 4 for each year listed					
	Ţ.			<del>                                     </del>	<del>/</del>	
d	Amounts included in line 2c not used directly for active conduct of exempt activities					
е	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.  "Assets" alternative test - enter-					
a	(1) Value of all assets · · · · ·			X		
	, ,		/			· · · · · · · · · · · · · · · · · · ·
	(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		/			
•	•		/		-	<del></del>
С	"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		/		<u> </u>	
	and 5 or more exempt	/				
	organizations as provided in	/				
	section 4942(j)(3)(B)(iii)					
	(3) Largest amount of support from an exempt organization					
	(4) Gross investment income				·	
Part	XV <sub>a</sub> Supplementary Informat	tion (Complete t	his part only if the	he foundation ha	d \$5,000 or more	in assets at
	any time during the year	r - see instructio	ns.)		-	
1	Information Regarding Foundation Ma	anagers:	•	***************************************		
а	List any managers of the foundation who	_	than 2% of the total co	ontributions received by	the foundation	
	before the close of any tax year (but only					
	NONE					
b	List any managers of the foundation who	own 10% or more of th	ne stock of a comoration	on (or an equally large of	ortion of the	
-	ownership of a partnership or other entity				ornorr or nic	
	•		-			
	NONE					
2	Information Regarding Contribution, (	Grant, Gift, Loan, Sci	holarship, etc., Progr	ams:		
_	<u> </u>		• • • •			
	Check here ► ☐ if the foundation only unsolicited requests for funds. If the foundation only					
	complete items 2a, b, c, and d See instru	,	arits, etc., to moiviouals	or organizations under	other conditions,	
	The name, address, and telephone numb		the core on to whom a	anhantana ahauld ba aa	Idraccad	·
а	The name, address, and telephone numb	er or email address or	the person to whom ap	opiications should be ac	iuresseu	
	222		1			
	990APP			<u>.</u>	<del></del>	
b	The form in which applications should be	submitted and informa	ation and materials the	y snould include		
	·			· · · · · · · · · · · · · · · · · · ·		
С	Any submission deadlines					
d	Any restrictions or limitations on awards, factors:	such as by geographic	cal areas, charitable fie	ids, kinds of institutions	, or other	•
	idolois.					
						E 600 BE 100 E
EA			•			Form <b>990-PF</b> (2017)

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Form 990-PF (2017) Page 11 45-5186460 Part XV | Supplementary Information (continued) Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Foundation Purpose of grant or show any relationship to any foundation manager or substantial contributor status of Amount contribution recipient Name and address (home or business) a Paid during the year COASTAL CAROLINA INIVERSITY SCHOLARSHIP FOR 108 JAMES P BLANTON CIRCLE MED STUDENT PER CONWAY, SC 29526 NONE PF TRUST 31,844 31,844 Approved for future payment

Total

## Form 990-PF (2017) KAZYS AND STANISLAVA TAMOSAITIS EDU 45-5186460 [Part XVII | Information Regarding Transfers to and Transactions and Relationships With Noncharitable Exempt **Organizations**

1	Did t	the organization d	irec	tly or indirectly engag	ge in any of the following wi	th any o	ther organ	zation desc	rıbed				Yes	No
	ın se	ection 501(c) (othe	er th	an section 501(c)(3)	organizations) or in section	n 527, r	elating to p	olitical						
	orga	nizations?										İ	-	
а	-		oorti	ng foundation to a no	oncharitable exempt organi	zation of	•					-		
				-								1a(1)		X
	٠.	Other assets · ·										1a(2)		Х
b	Othe	er transactions.												
_			anı	oncharitable exempt	organization							1b(1)		X
					exempt organization •							1b(2)		X
					sets							1b(3)		Х
		Reimbursement a										1b(4)		Х
	٠,			-								1b(5)		X
		-			r fundraising solicitations							1b(6)		X
_					ther assets, or paid employ							1c		X
		-			plete the following schedul		nn (h) sho	ıld əlwəve e	how the f	oir ma	rket			
u					iven by the reporting found									
		-			nt, show in column (d) the v									
(a) Lin		(b) Amount involve	$\overline{}$		charitable exempt organization	I	-	ription of tran				haring arr	angem	ente
(a) Lii	e 110	(b) Amount involve		(c) Name of hom	chartable exempt organization	<u>'''</u>	(4) 5030	inplion or train	Sicro, irai	Jacko	15, 4110 51	namy am	ungenn	<u> </u>
			$\dashv$				· · · · · ·							
			-		·		<del>.</del>							
		· · · · · · · · · · · · · · · · · · ·	$\neg \dagger$											
											•			
		-	1	<del></del>	··········									
								_						
2a	Is the	e foundation direc	tly o	or indirectly affiliated	with, or related to, one or m	nore tax-	exempt or	ganizations						
	desc	ribed in section 5	01(0	c) (other than section	501(c)(3)) or in section 52	27?						Ye	s X	No
b	If "Ye	es," complete the	follo	wing schedule										
		(a) Name of or	rganı	zation	(b) Type of organ	nızatıon			(c) Des	criptio	n of relati	onship		
												<del></del>		
								•						
٠.	Ur	nder perralties of perju przect, and complete	ry, I d Decla	declare that have examine	ed this return, including accompar ian taxpayer) is based on all inform	nying sche nation of v	dules and sta which prepare	tements, and to r has any know	the best o ledge	my kno	wledge ar	nd belief, it	is true,	
Sig	n   Y	/ Kili 19						,	3-			RS discuss		urn
Her	e Z	MILIP CA	MA	RO	11-08-2018		TRUSTEE				with the p	oreparer shouctions	own belg	
		Signature of officer			Date		lītle				Jee main			
Dair	4	Print/Type pre	epare	er's name	Preparer's signature	6.	hour	Date		Check	X if	PTIN		
Paid		SN BROW	N C	CPA	SN BROWN CPA	-6-7	CAT	1 <sup>1</sup> 1-08-20	18	self-en	ployed	P0031:	3352	
Preparer Firm's name > SN BROWN LI				SN BROWN L	LC		<i>V</i>		Firm's EI	<u> </u>				
Use Only Firm's address ► 785 WASHING					GTON ST- SUITE 12	?B			Phone no					
		ř .		CANTON MA (	02021				<u> </u>	781	<u>-575-</u>			
EEA												Form 99	O-PF (	20171

2017 PG01	Your Social Security Number 45-5186460	STATEMENT #107~			PG01					
nents		HEDOLE	CHARITABLE PURPOSE	7,800	а.ппанос сава	CHARITABLE PURPOSE 1,982	1, 982.			
Federal Supporting Statements		- LINE 16(A) - LEGAL FEES SCHEDULE	ADJUSTED NET INCOME	0	TIME 16(2) - OTHER DROFFSCTOMM, WERS SCHEDITE	ADJUSTED NET INCOME	0			
Federal Su		FORM 990PF - PART I - LINE 16	NET INVESTMENT	0	- (7/91 AME 16/7)	NET INVESTMENT	0			
	EDU		REVENUE AND EXPENSES	7,800	T HORD - ROAD MOOR	REVENUE AND EXPENSES	1,982			
	Name(s) as shown on return  KAZYS AND STANISLAVA TAMOSAITIS EDU	,	DESCRIPTION	LEGAL FEES TOTALS		DESCRIPTION TAX PREPARATION	TOTALS	,		

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2017 PG01	Your Social Security Number 45-5186460	STATEMENT #110~										
ments		ULE	CHARITABLE PURPOSE	500	509	-						
Federal Supporting Statements		- LINE 18 - TAXES SCHEDULE	ADJUSTED NET INCOME	0 0	0							
Federal St		- PART I	NET INVESTMENT	0 0	0				•	•		
	40SAITIS EDU	FORM 990PE	. REVENUE AND EXPENSES	500	605							
	Name(s) as shown on return KAZYS AND STANISLAVA TAMOSAITIS EDU		DESCRIPTION	IRS-990PF MA-PC	TOTALS			-				

### Federal Supporting Statements

**2017** PG01

Name(s) as shown on return

KAZYS AND STANISLAVA TAMOSAITIS EDU

Your Social Security Number

45-5186460

# FORM 990PF - PART XV - LINE 2 APPLICATION SUBMISSION INFORMATION

#### GRANT PROGRAM

TUITION-MED STUDENT

#### APPLICANT NAME

PHILIP C AMARU

#### **ADDRESS**

189 WELLS AVE SUITE 303 NEWTON, MA 02459

#### TELEPHONE

781-493-3020

#### EMAIL ADDRESS

#### FORM & CONTENT

AWARDED TO MEDICAL STUDENT PER TERMS OF THE EDUCATIONAL TRUST.

#### SUBMISSION DEADLINE

DISCRETION OF THE TRUSTEE

#### RESTRICTIONS ON AWARD

SCHOLARSHIP SHALL ONLY BE GIVEN TO A CANDIDATE ATTENDING SCHOOL IN THE U.S.