Form **990-PF**

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		/			٠
Departr					,
Internat	Reve	ກັກລັດ	Or.		

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.

		1 0017			Open to Public Inspection
	ndar year 2017 or tax year beginning AUG	1, 2017	, and ending	JUL 31, 2018	
	f foundation			A Employer identification	number
	EDWARD AND PATRICIA AUGHLIN FOUNDATION			13-3918273	
	and street (or P O box number if mail is not delivered to street	address)	Room/suite	B Telephone number	
	MITH ROAD	,			-5132
	own, state or province, country, and ZIP or foreign po	ostal code		C If exemption application is p	
	ENWICH, CT 06830	00101 0000		o il exemption application is p	orranty, orrack more
	k all that apply Initial return	Initial return of a fo	rmer public charity	D 1 Foreign organization:	s, check here
_	Final return	Amended return			
	Address change	Name change		2 Foreign organizations me check here and attach co	eeting the 85% test, omputation
H Check	k type of organization X Section 501(c)(3) ex	empt private foundation	04	E If private foundation sta	tus was terminated
Se	ection 4947(a)(1) nonexempt charitable trust	Other taxable private founda	ition	under section 507(b)(1	
I Fair ma	arket value of all assets at end of year J Accounting	=	Accrual	F If the foundation is in a	60-month termination
•		her (specify)	_	under section 507(b)(1)(B), check here 🕨 🔲
\$	122,144. (Part I, colum	nn (d) must be on cash basi:	s)	<u> </u>	
Part i	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a))	(a) Revenue and expenses per books	(b) Net investment	(c) Adjusted net	(d) Disbursements for charitable purposes
		· · · · · · · · · · · · · · · · · · ·	ıncome	income	(cash basis only)
	Contributions, gifts, grants, etc., received	81,837.		N/A	
2	Check [Interest on savings and temporary]			 	
3	cash investments	509.	509		STATEMENT 1
22 4	Dividends and interest from securities		309.	•	STATEMENT I
_ '	Gross rents				
	Net rental income or (loss)	49,123.		<u> </u>	
⇒≝∣ິ",	Net gain or (loss) from sale of assets not on line 10 Gross sales price for all 130, 360.	49,143.		 	ļ
ှ မြွဲရ	Capital gain net income (from Part IV, line 2)		49,123		
Revenue 4 8	Net short-term capital gain		47,123	<u>'</u>	
. 9	Income modifications				
10a	Gross sales less returns				
b	Less Cost of goods sold				
•	Gross profit or (loss)				
3 11	Other income				
12	Total Add lines 1 through 11	131,469.	49,632.		
13	Compensation of officers, directors trustees, etc	0.	0 .	,	0.
14	Other employee salaries and wages				
15	, , , ,				
စ္တို 16a	Legal fees				
je pe	Accounting fees STMT 2	3,845.	1,922.		1,923.
Ώ °	Other professional fees		RE	AFIVED -	ļ
₩ 17	Interest			78	
Operating and Administrative Expenses 112 5 5 5 5 5 5 6 6 6 6 6 6 6 6 6 6 6 6 6	Taxes		101	2 6 2018	
SE 19	Depreciation and depletion		<u> \$ NO</u>	26 2010 100	
P 20 21	Occupancy Travel, conferences, and meetings				
P 22	Printing and publications		- \ -na	DEN, UT	
b 23	Other expenses STMT 3	71.	1-71		0.
E 24	Total operating and administrative	, , <u>, , , , , , , , , , , , , , , , , </u>			
Ser.	expenses Add lines 13 through 23	3,916.	1,993		1.923.
ဝီ ₂₅	Contributions, gifts, grants paid	139,625.		<u></u>	1,923. 139,625.
26			· · · · · · · · · · · · · · · · · · ·	 	
-"	Add lines 24 and 25	143,541.	1,993		141,548.
27				 	
	Excess of revenue over expenses and disbursements	-12,072.			
1	Net investment income (if negative, enter -0-)		47,639		
1	Adjusted net income (if negative, enter -0-)			N/A	
				— / \	C 000 DE (0047)

	Balance Sheets Attached schedules and amounts in the description column should be for end-of year amounts only	Beginning of year	End of y	/ear
Part	Column should be for end-of year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
1	Cash - non-interest-bearing	57,901.	120,684.	120,684.
2	Savings and temporary cash investments	1,170.	960.	960.
	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	937.	500.	500.
7	Other notes and loans receivable			
	Less allowance for doubtful accounts			
र्ह्स 8	Inventories for sale or use			
Assets	Prepaid expenses and deferred charges			
108	Investments - U.S. and state government obligations			
	o Investments - corporate stock	6,575.	0.	0.
	: Investments - corporate bonds	52,406.	0.	0.
11	Investments land, buildings and equipment basis			
40	Less accumulated depreciation			
12	Investments - mortgage loans	15 227	0.	0.
13	Investments - other	15,227.	U.	<u> </u>
14	Land, buildings, and equipment basis			
15	Other assets (describe >			
15	Total assets (to be completed by all filers - see the			
10	instructions. Also, see page 1, item I)	134,216.	122,144.	122,144.
17	Accounts payable and accrued expenses	134,210.	122,144.	122,144.
18	Grants payable			
1	Deferred revenue			
Liabilities 51 20 21 21 22 22 22 22 22 22 22 22 22 22 22	Loans from officers, directors, trustees, and other disqualified persons	-		
[21 등	Mortgages and other notes payable			
ے ₂₂	Other liabilities (describe)			
23	Total liabilities (add lines 17 through 22)	0.	0.	
	Foundations that follow SFAS 117, check here			
ړ	and complete lines 24 through 26, and lines 30 and 31			
<u>ම</u> 24	Unrestricted			
Fund Balance	Temporarily restricted -			
<u>6</u> 26	Permanently restricted			
Š	Foundations that do not follow SFAS 117, check here			
F.	and complete lines 27 through 31			
Net Assets or 28 29 30	Capital stock, trust principal, or current funds	0.	0.	
85 28	Paid-in or capital surplus, or land, bldg , and equipment fund	0.	0.	
¥ 29	Retained earnings, accumulated income, endowment, or other funds	134,216.	122,144.	
ž 30	Total net assets or fund balances	134,216.	122,144.	
	-	124 016	100 144	
31	Total liabilities and net assets/fund balances	134,216.	122,144.	
Part	III Analysis of Changes in Net Assets or Fund B	alances		
1 Tota	I net assets or fund balances at beginning of year - Part II, column (a), line	30		
	st agree with end-of-year figure reported on prior year's return)	30		12/ 216
	r amount from Part I, line 27a		1	134,216. -12,072.
	r increases not included in line 2 (itemize)		3	-12,072.
	lines 1, 2, and 3		4	122,144.
	reases not included in line 2 (itemize)		5	0.
	I net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	olumn (b), line 30	6	122,144.
	, , , , , , , , , , , , , , , , , , , ,			Form 990-PF (2017)

Form 990-PF (2)	017) ' MCL	AUGHLIN FOUN	DATION		t Income				1	3-391	8273	Page 3
		and Losses for Ta				1/h)	How a	coured T	4 . 5 .		40.5	
		the kind(s) of property solo arehouse; or common stock			ite,	1,0k	- Purc) - Don	cquired chase ation		acquired day, yr)	(d) Dai (mo , d	
<u>1a</u>						-		_				
	ATTACHED	STATEMENTS			<u> </u>	-			_			
<u>c</u>						╁						
e						1						
	s sales price	(f) Depreciation allow (or allowable)	/ed		st or other basis expense of sale	<u></u>		<u> </u>	(h) (((e) plu	Gain or (loss is (f) minus i) (g))	
_ a										_		
_b												
<u>c</u>												
<u>d</u>	100-0-0											
_e	130,360.				81,23	7.					49	<u>,123.</u>
Complete or	nly for assets showing	ig gain in column (h) and o	wned by the fou					()) Gains ((Col (h) gain	minus	
(i) FMV a	s of 12/31/69	(j) Adjusted basis as of 12/31/69			cess of col (i)					not less that (from col (
<u>a</u>												
b											•	
<u>C</u>	_			<u>-</u>								
<u>d</u>			<u> </u>			_					4.0	100
<u>e</u>								I			49	,123.
	net income or (net ca	pital loss) { If (loss),	also enter in Par , enter -0- in Par	rt I, line rt I, line	7 7	}	2		<u> </u>		49	,123.
		ss) as defined in sections 12	222(5) and (6)			`						
	nter in Part I, line 8,	column (c)								NT / B		
	<u>r -0- in Part I, line 8</u> Qualification U	nder Section 4940	(a) for Red	lucad	Tay on Net	Inv	ostn	cent inc	ome	N/A		
		foundations subject to the	``			_		ione inc	Joine			
(i oi optional use	by domestic private	Houndations Subject to the	5000001 4940(a	i) lax Uii	net mvestment ir	COIII	e)					
If section 4940(c	f)(2) applies, leave th	nis part blank										
		tion 4942 tax on the distribi y under section 4940(e). Do				rod?					Yes	X No
		each column for each year;				ntries	3				.	
	(a) se period years (or tax year beginnii	ng in) Adjusted quali	(b) fying distribution	ons	Net value of no	(c) ncha	ritable-	use assets		Distrib (col (b) div	(d) ution ratio	(c))
	2016		124,1	19.		_	19	6,719	•	(30946
	2015		158,7					5,399				03337
	2014		185,0					1,952				97411
	2013		74,2	37.				4,997				91129
	2012			66.				3,749				27781
2 Total of line 1	l, column (d)								2		2.1	50604
3 Average distr	ibution ratio for the	5-year base period - divide t	the total on line	2 by 5.0), or by the numb	er of	years					
the foundatio	n has been in exister	nce if less than 5 years							3		4	30121
4 Enter the net	value of noncharitab	le-use assets for 2017 from	Part X, line 5						4			,484.
5 Multiply line 4	1 by line 3								5		51	,393.
6 Enter 1% of n	iet investment incom	ie (1% of Part I, line 27b)							6			476.
												· <u>v •</u>
7 Add lines 5 ar	nd 6								7	<u> </u>	51	<u>,869.</u>
	ng distributions from								8		141	,548.
If line 8 is equ See the Part \	ial to or greater than /I instructions	line 7, check the box in Par	rt VI, line 1b, an	d comp	lete that part usin	g a 1	% tax r	ate				

THE EDWARD AND PATRICIA

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_	990-PF-(2017) · MCLAUGHLIN FOUNDATION		<u>13-391</u>			Page 4
	t VI Excise Tax Based on Investment Income (Section 4940(a), 49		948 - see	instru	ction	1S)
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-s	1				
	Domestic foundations that meet the section 4940(e) requirements in Part V, check here 🕨 🗶 a		1		4	<u>76.</u>
	of Part I, line 27b					
	All other domestic foundations enter 2% of line 27b Exempt foreign organizations, enter 4% of Part	i, line 12, col (b).				
	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only, others, enti-		2			0.
	Add lines 1 and 2	•	3		4	76.
	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, ent	er -0-)	4			0.
	Tax based on investment income Subtract line 4 from line 3 If zero or less, enter -0-	/	5		4	76.
	Credits/Payments:					
	2017 estimated tax payments and 2016 overpayment credited to 2017 6a	1,262.				
	Exempt foreign organizations - tax withheld at source 6b	0.	1			
	Tax paid with application for extension of time to file (Form 8868) 6c	0.	1			
	Backup withholding erroneously withheld 6d	0.	1			
	Total credits and payments. Add lines 6a through 6d		7		1,2	62.
	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached		8		± 1 4	<u>02.</u>
	Tax due If the total of lines 5 and 8 is more than line 7, enter amount owed		9	_		
	Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid		10		7	86.
	Enter the amount of line 10 to be: Credited to 2018 estimated tax	786. Refunded	11			0.
	t VII-A Statements Regarding Activities	700 • Refulided	<u> </u>			<u> </u>
		did it participate as interven			Yes	No
	During the tax year, did the foundation attempt to influence any national, state, or local legislation or	aid it participate or intervent	; IN		163	
	any political campaign?	AL		1a		X
	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See		ution	16		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any ma	terials published or				l
	distributed by the foundation in connection with the activities					
	Did the foundation file Form 1120-POL for this year?			1c		X
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year	•			ĺ	l
	(1) On the foundation \blacktriangleright \$ 0 . (2) On foundation managers \blacktriangleright \$ _		-			l
	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax is	mposed on foundation				
	managers ► \$O.			}		l
	Has the foundation engaged in any activities that have not previously been reported to the IRS?			2		<u>X</u>
	If "Yes," attach a detailed description of the activities					l
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrumer	nt, articles of incorporation,	or			
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes			3		<u>X</u>
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?			4a		<u>X</u>
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 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			j j	-	
	 ■ By language in the governing instrument, or 				ĺ	
	 By state legislation that effectively amends the governing instrument so that no mandatory direction 	ns that conflict with the stat	e law))	. Ì	
	remain in the governing instrument?			6	Х	
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	х	
		, ,.				
8a	Enter the states to which the foundation reports or with which it is registered. See instructions.				,	
	CT			·]	
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney G	eneral (or designate)			1	
	of each state as required by General Instruction G? If "No," attach explanation			8ь	x	
	Is the foundation claiming status as a private operating foundation within the meaning of section 494	2(i)(3) or 4942(i)(5) for call	endar	"		
	year 2017 or the tax year beginning in 2017? See the instructions for Part XIV. If "Yes," complete Par		mour	9	1	x
	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing the			10		X
0						

1. At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of sections 12(0)(13)? If "Yes, attach schodule See instructions." 1. A.	P 8	art VII-A Statements Regarding Activities (continued)			
section 512(b)(13)? If vest, attach schedule. See instructions 10 Oild the foundation make a distribution to a donor advised fund over which the foundation or a disqualiked person had advisory privileges? If Yes, attach statement. See instructions 10 Oild the foundation make a distribution to a donor advised fund over which the foundation or a disqualiked person had advisory privileges? 11 The books are in care of both FTHE FOUNDATION 12 February 12 Section 4947(a)(1) anomalized the foundation have an interest in or a signature or other authority over a bank, section 4947(a)(1) anomalized repair interest creaved or accurated during the year 15 Section 4947(a)(1) anomalized repair country? 16 All any time during calendar year 2017, did the foundation have an interest in or a signature or other authority over a bank, sectimes, or other financial account in a driving country? 16 All any time did in the foundation have an interest in or a signature or other authority over a bank, section 4947(a)(1) anomalized person and interest ground interest creaved or accurated during the year 17 File Form 4720 if any time in schecked in the "Yes" column, unless an exception applies. 18 In any time in schedule in the "Yes" column, unless an exception applies. 19 File Form 4720 if any time in schecked in the "Yes" column, unless an exception applies. 19 File Form 4720 if any time in schecked in the "Yes" column, unless an exception applies. 19 File Form 4720 if any time in schecked in the "Yes" column, unless an exception applies. 19 File Form 4720 if any time in schecked in the "Yes" column, unless an exception applies. 19 File Form 4720 if any time in schecked in the "Yes" column, unless an exception applies. 19 File Form 4720 if any time in schecked in the "Yes" column, unless an exception applies. 19 File Form 4720 if any time in schecked in the "Yes" column, unless an exception applies. 10 File Form 4720 if any time in schecked in the "Yes" column in schedule in Schedule in Schedule in Schedule in Schedule		·		Yes	No
12 Det the foundation make a distribution to a dinor advised fund over which the foundation or a disqualified person had advisory privileges? 13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website additions ► N/A 13 The books are in our or ► THE FOUNDATION Located at ►9 SMTHH ROAD, GREENWICH, CT The power are in our or of ► THE FOUNDATION Located at ►9 SMTHH ROAD, GREENWICH, CT ZIP+4 ▶068.30 Section 9497(3)(1) monexempt chariable trusts thing form 90-PF in lise of Form 1041 - check there and enter the amount of lax-exempt interest received or accused during the year A larry time dumining cleanedy yea? CIT, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? See the instructions for exceptions and filting requirements for FinCEN Form 114 it 1*Ves, enter the name of the foreign country. See the instructions for exceptions and filting requirements for FinCEN Form 114 it 1*Ves, enter the name of the foreign country. See the instructions for exceptions and filting requirements for FinCEN Form 114 it 1*Ves, enter the name of the foreign country. See the instructions for exceptions and filting requirements for FinCEN Form 114 it 1*Ves, enter the name of the foreign country. See the instructions for exceptions and filting requirements for FinCEN Form 114 it 1*Ves, enter the name of the foreign foreign for the same seek present or seek present or exception applies. 1a During the year, did the foundation (either directly or indirectly): 1b Engage in the sale or exchange, or leasing of proprety with a disqualified person? 2yes No 1c Engage in the sale or exchange or leasing of proprety with a disqualified person? 2yes \times	11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of			
II Yes, attach statements See instructions 12		section 512(b)(13)? If "Yes," attach schedule See instructions	11		X
13 Dut the loundstone comply with the public inspection requirements for its annual returns and exemption application?	12				
Weeste address ► N/A 1 The books are in car of ▶ THE FOUNDATION 1 Telephone no. ► (203) 869-5132 Located at ▶ 9 SMTTH ROAD, GRERWICH, CT 15 Section 4947(a)(1) nonexempt charitable trusts liting Form 990-PF in leve of Form 1041 - check here and eather the amount of lax-exempt interest reasons or accused form the year and eather the amount of lax-exempt interest reasons or accused form the year 18 At any time during celerator year 2017, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? See the instructions for exceptions and filing requirements for FinCEN Form 114 If Yes,* enter the name of the foundation for exceptions and filing requirements for FinCEN Form 114 If Yes,* enter the name of the foundation of the filing filin				_	X
14. The books are in care of ▶ THE FOUNDATION Telephone no. ▶ (203) 859-5132 Located at ▶ 9 SMITH ROAD, GREENWICH, CT The property of the second of t	13		13	_X_	
Located at ▶ 9 SMTTH ROAD, GREENWICH, CT Section 4947(a)(1) nonexempt charactele trusts filting Form 990-PF in five of Form 1041 - check here and enter the amount of tax-exempt interest received or accrued during the year 15. All any time during calendary year 2017, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial execution to a foreign country? See the instructions for exceptions and filing requirements for FindEN Form 114. If Yes,* enter the name of the foreign country. Part VIII-B Statements Regarding Activities for Which Form 4720 May Be Required File Form 4720 if any item is checked in the "Yes" column, unless are exception applies. 16. Proma 4720 if any item is checked in the "Yes" column, unless are exception applies. 17. Despire in the sale or exchange, or leasing of property with a disqualited person? 18. During the year, did the foundation (either directly or indirectly) 19. Engage in the sale or exchange, or leasing of property with a disqualited person? 19. Formish goods, services, or facilities to (or accept them from) a disqualited person? 19. Formish goods, services, or facilities to (or accept them from) a disqualited person? 19. Formish goods, services, or facilities to (or accept them from) a disqualited person? 19. Formish goods, services, or facilities to (or accept them from) a disqualited person? 19. Formish goods, services, or facilities to (or accept them from) a disqualited person? 19. Formish goods, services, or facilities to (or accept them from) a disqualited person? 19. Formish goods, services, or facilities to (or accept them from) a disqualited person? 19. Formish goods, services, or facilities to (or accept them from) a disqualitied person? 19. Formish goods, services, or facilities to (or accept them from) a disqualitied person? 19. Formish goods, services, or facilities to (or accept them from) a disqualitied person? 19. Formish goods, services, or facilities to (or accept them from) a di					
15 Section 4947(a)(1) nonexempt charatable trusts fling Form 990.PE in lieu of Form 1041 - check here and enter the amount of tax exempt interest received or accrued during the year. 16. All any time during calendar year 2017, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? See the instructions for exceptions and filing requirements for FinCEN Form 114. If "yes," enter the name of the foreign country. PORTI VII-B Statements Regarding Activities for Which Form 4720 May Be Required File Form 4720 of any item is checked in the "Yes" column, unless an exception applies. File Form 4720 of any item is checked in the "Yes" column, unless an exception applies. 1 bring the year, did the foundation (either directly or indirectly)? (1) Engage in the sale or exchange, or reissing of property with a disqualitied person? (2) Borrow maney from, lend money to, or otherwise extend credit to (or accept it from) a disqualitied person? (3) Furnish goods, services, or facilities to (or accept them from) a disqualitied person? (4) Pay compensation to, or pay or reimbruse the expenses of, a disqualitied person? (5) Fransfer any income or assets to a disqualetied person (or make any of either available for the benefit or use of a disqualitied person)? (6) Agree to pay money or property to a government official? (Exception Check No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if letter granding disaster assistance? See instructions N/A 10 brill foundation engage in a prior year in any of the eacts described in 18, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2017? If Yes, Not the year's undistributed income? (If applying section 4942(a)(2) to all years isseld, answer 'No" and attach statement - see instructions) If the provisions of section 4942(a)(3) or 4942(a)(2) are being applied to an	14			<u>-51</u>	32
and enter the amount of tax-exempt interest received or account during the year 1			830		
18 A lary time during calendary year 2017, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the torging country. Part VIII-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. File Form 4720 if any item is checked in the "Yes" column, unless an exception applies. File Form 4720 if any item is checked in the "Yes" column, unless an exception applies. File Form 4720 if any item is checked in the "Yes" column, unless an exception applies. File Form 4720 if any item is checked in the "Yes" column, unless an exception applies. File Form 4720 if any item is checked in the "Yes" column, unless an exception applies. File Form 4720 if any item is checked in the "Yes" column, unless an exception applies. File Form 4720 if any item is checked in the "Yes" column, unless an exception applies. File Form 4720 if any item is checked in the "Yes" column, unless an exception applies. File Form 4720 if any item is checked in the "Yes" column, unless an exception applies. File Form 4720 if any item is checked in the "Yes" column, unless an exception applies. File Form 4720 if any item is checked in the "Yes" column, unless an exception applies. File Form 4720 if any item is checked in the "Yes" column, unless any item is checked in the sale of exceptions described in a checked in the sale of exceptions and item is checked in the sale of exceptions of exceptions and item is checked in the sale of exceptions of exceptions and item is checked in the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if the remarking within 30 days is a sestimated. Period at the exceptions described in Regulations section 53.4941(e) 3 or in a current notice regard	15			·	ш
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3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? b If "Yes," did it have excess business holdings in 2017 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2017) N/A 4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? 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? Ab X	Ü				
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Form 4720, to determine if the foundation had excess business holdings in 2017) 4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? 4b 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 X					
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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 X	4a				<u>x</u>
had not been removed from jeopardy before the first day of the tax year beginning in 2017?					 -
			4b	1	Х
				-PF	

Part VII-B Statements Regarding Activities for Which I	Form 4/20 May Be	Requirea (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 (section	n 4945(e))?	Ye	es X No			
(2) Influence the outcome of any specific public election (see section 4955); of	or to carry on, directly or indir					
any voter registration drive?		Ye	es X No			
(3) Provide a grant to an individual for travel, study, or other similar purposes	?	Ye	es X No			
(4) Provide a grant to an organization other than a charitable, etc., organizatio	n described in section					
4945(d)(4)(A)? See instructions		Y6	es X No			
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or	for		- }	ł	
the prevention of cruelty to children or animals?		Y6	es X No			
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und	der the exceptions described	ın Regulations				
section 53 4945 or in a current notice regarding disaster assistance? See instr	uctions		N/A	5b		
Organizations relying on a current notice regarding disaster assistance, check l	here		▶□□			
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fi		uned				
expenditure responsibility for the grant?		√A	es No			
If "Yes," attach the statement required by Regulations section 53.4945-5(d)	_	.,				
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums on					
a personal benefit contract?	, , ,	□ ve	es X No	-		
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	personal henefit contract?		.5 (22) 110	6ь		Х
If "Yes" to 6b, file Form 8870	or bottle bottom bottle but		-	-		
7a At any time during the tax year, was the foundation a party to a prohibited tax s	helter transaction?	□ v _e	s X No			
b If "Yes," did the foundation receive any proceeds or have any net income attribu			N/A	7b		
Part VIII Information About Officers, Directors, Trust		nagers, Highly		70		
Paid Employees, and Contractors	ood, roundation me	anagoro, rngm	•			
List all officers, directors, trustees, and foundation managers and t	heir compensation.		,			
	(b) Title, and average	(c) Compensation	(d) Contributions to employee benefit plans and deferred	(6	e) Expe	ense
(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	and deferred compensation	ač	count, Illowan	other
PATRICIA MCLAUGHLIN	TRUSTEE	enter-0-)	compensation	+	illowan	003
9 SMITH ROAD						
GREENWICH, CT 06830	1.00	0.	0.	1		0.
	TRUSTEE		•	1		
295 MADISON AVENUE, FLOOR 5						
NEW YORK, NY 10017-7733	1.00	0.	0.			0.
NEW TORRY III TOUTY 1755	1.00		<u> </u>	<u> </u>		
				 		
Compensation of five highest-paid employees (other than those inc	luded on line 1). If none	enter "NONE "				
	(b) Title, and average	CITE HOIL.	(d) Contributions to	14	e) Expe	ense
(a) Name and address of each employee paid more than \$50,000	hours per week	(c) Compensation	employee benefit plans and deferred	acc	count, i	other
NONE	devoted to position		compensation	a	llowan	ces
NONE						
	. =			<u> </u>		
				 		
	· · · · · · · · · · · · · · · · · · ·		 			
otal number of other employees paid over \$50,000						. 0

Part VIII Information About Officers, Directors, Trustees, Foundation Paid Employees, and Contractors (continued)	n Managers, Highly	
3 Five highest-paid independent contractors for professional services. If none, enter "N	IONE."	
(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		▶ 0
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical number of organizations and other beneficiaries served, conferences convened, research papers produce	Information such as the	Expenses
22.7.2	50, 610	
1 <u>N/A</u>		
2		
3		
Part IX-B Summary of Program-Related Investments		
Describe the two largest program-related investments made by the foundation during the tax year on line.	s 1 and 2	Amount
1 N/A		
?		· · · · · · · · · · · · · · · · · · ·
All other program-related investments. See instructions		
3		
Total, Add lines 1 through 3	>	0.
		Form 990-PF (2017)

1 01	m sso-ri(2017) MCLAUGALIN FOUNDATION	<u> </u>	9182/3 Page 8
P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign for	undations, se	e instructions)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes		
а		1a	15,785.
b	Average of monthly cash balances	1b	105,519.
C	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	121,304.
ę	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 1e 0		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	121,304.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	1,820.
5	Net value of noncharitable-use assets Subtract line 4 from line 3. Enter here and on Part V, line 4.	5	119,484.
6_	Minimum investment return Enter 5% of line 5	6	5,974.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations a	and certain	
	foreign organizations, check here 🕨 💹 and do not complete this part)		
1	Minimum investment return from Part X, line 6	1	<u>5,974.</u>
2a	Tax on investment income for 2017 from Part VI, line 5	<u>.</u>	
b	Income tax for 2017 (This does not include the tax from Part VI)		
C	Add lines 2a and 2b	2c	476.
3	Distributable amount before adjustments Subtract line 2c from line 1	3	5,498.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	5,498.
6	Deduction from distributable amount (see instructions)	6	0.
<u>7</u>	Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII, line 1.	7	5,498.
P	art 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	1 1a	141,548.
	Program-related investments - total from Part IX-B	1b	0.
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	141,548.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		
	income Enter 1% of Part I, line 27b	5	476.
6	Adjusted qualifying distributions Subtract line 5 from line 4	6	141,072.

Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section

Form **990-PF** (2017)

4940(e) reduction of tax in those years

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MCLAUGHLIN FOUNDATION

Part XIII. Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2016	(c) 2016	(d) 2017
1 Distributable amount for 2017 from Part XI, line 7				5,498.
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 56,024.				
b From 2013 61,638.				
c From 2014 168,963.				
d From 2015 142,992.				
e From 2016 114,309.				
f Total of lines 3a through e	543,926.			
4 Qualifying distributions for 2017 from	}			
Part XII, line 4 [.] ► \$ 141,548.				
a Applied to 2016, but not more than line 2a			0.	
b Applied to undistributed income of prior				
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus				
(Election required - see instructions)	0.			
d Applied to 2017 distributable amount				5,498.
e Remaining amount distributed out of corpus	136,050.			
5 Excess distributions carryover applied to 2017 (If an amount appears in column (d), the same amount must be shown in column (a))	0.			0.
6 Enter the net total of each column as indicated below.				
a Corpus Add lines 3f, 4c and 4e Subtract line 5	679,976.			
b Prior years' undistributed income. Subtract				
line 4b from line 2b		0.		
c Enter the amount of prior years'		-		
undistributed income for which a notice of				
deficiency has been issued, or on which the section 4942(a) tax has been previously				
assessed		0.		
d Subtract line 6c from line 6b Taxable				
amount - see instructions		0.		
e Undistributed income for 2016. Subtract line				
4a from line 2a Taxable amount - see instr			0.	
f Undistributed income for 2017 Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2018				0.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3) (Election				
may be required - see instructions)	0.			
8 Excess distributions carryover from 2012	FC 004			
not applied on line 5 or line 7	56,024.			
9 Excess distributions carryover to 2018 Subtract lines 7 and 8 from line 6a	622 052			
O Analysis of line 9	623,952.			
a Excess from 2013 61,638.				
b Excess from 2014 168, 963.				
c Excess from 2015 142,992.				
d Excess from 2016 114, 309.				
e Excess from 2017 136,050.				
1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1				- 000 DE

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Part XV | Supplementary Information (continued)

2 C + 1 C + 2 C +				
3 Grants and Contributions Paid During the		Payment		
Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (nome of business)	any foundation manager or substantial contributor	recipient	<u></u>	
a Paid during the year				
AMERICAN HEART ASSOCIATION	NONE	PUBLIC CHARITY	SUPPORT	
7272 GREENVILLE AVE				
DALLAS, TX 75231				2,500,
AMERICAN HISTORICAL ASSOCIATION 400 A ST, SE WASHINGTON, DC 20003	NONE	PUBLIC CHARITY	SUPPORT	1,000.
AMERICAN HUMANE SOCIETY 1400 16TH ST NW, STE 360 WASHINGTON, DC 20036	NONE	PUBLIC CHARITY	SUPPORT	3,500,
ANN NORTON SCULPTURE GARDEN 2051 S FLAGLER DR WEST PALM BEACH, FL 33401	NONE	PUBLIC CHARITY	SUPPORT	2,500.
AT HOME IN GREENWICH 139 E PUTNAM AVENUE GREENWICH, CT 06830	NONE	PUBLIC CHARITY	SUPPORT	5,650,
Total SEE CO	NTINUATION SHEE	TT(S)	▶ 3a	139 625.
b Approved for future payment . NONE	_			
•				
Total			▶ 3b	
10101			► 30	0.

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated	Unrelated t	ousiness income	Excluded b	ny 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					
b					
c	i i				
d					
e					
f	_		<u> </u>		
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash					
investments			 		
4 Dividends and interest from securities			14	509.	
5 Net rental income or (loss) from real estate.					
a Debt-financed property			 		
b Not debt-financed property					
6 Net rental income or (loss) from personal					
property			_		
7 Other investment income					
8 Gain or (loss) from sales of assets other			1.0	40 102	
than inventory			18	49,123.	
9 Net income or (loss) from special events	-				
10 Gross profit or (loss) from sales of inventory 11 Other revenue					
a			 		
b	1 1		 		
c	1				
			-		
e	_	0		49,632.	0.
13 Total Add line 12, columns (b), (d), and (e)	<u> </u>		•		49,632.
(See worksheet in line 13 instructions to verify calculations)				
Part XVI-B Relationship of Activitie	s to the Accon	plishment of E	xempt P	urposes	
Line No Explain below how each activity for which is	ncome is reported in c	column (e) of Part XVI	-A contributed	I importantly to the accomp	olishment of
the foundation's exempt purposes (other th					
			_		
					
					
		. <u> </u>			·
		···			
					Form 990-PF (2017

	-PF.(2017) MCLAUC	<u> HLIN FC</u>	<u>OTLLAGNOC</u>	<u>N</u>		13-39.			ge 13
Part X	Information Re Exempt Organi		ansfers to a	nd Transactions a	and Relationsh	nips With Noncha	aritable	!	
1 Did	the organization directly or indire	ectly engage in a	ny of the followin	g with any other organizat	ion described in sect	ion 501(c)	Ì	Yes	No
(oth	er than section 501(c)(3) organi	zations) or in sec	ction 527, relating	g to political organizations'	7				
a Tran	sfers from the reporting foundat	tion to a nonchar	itable exempt or	ganization of			ļ		
(1)	Cash						1a(1)		<u>X</u>
	Other assets						1a(2)		<u>X</u>
•	r transactions'								
٠,	Sales of assets to a noncharitab						1b(1)		<u>X</u>
	Purchases of assets from a non		ot organization				1b(2)	\vdash	X
٠,	Rental of facilities, equipment, o	or other assets					1b(3)		X
	Reimbursement arrangements						1b(4)	\vdash	X
	Loans or loan guarantees	mharabia ar fund	rainina naliaitatia	.00			1b(5)	 	<u>X</u> _X
٠,	Performance of services or men	•	•				1b(6) 1c		<u> </u>
	ring of facilities, equipment, mail e answer to any of the above is "	_			hwave chow the fair in	narket value of the goods		i de	
	e allswel to any of the above is ervices given by the reporting fo		_	* *	-			5613,	
	mn (d) the value of the goods, o			cu icaa man ian market va	ide in any transaction	or snaring arrangement	, 311044 111		
a) Line no	T			e exempt organization	(d) Description	of transfers, transactions, ar	nd sharing ar	rangeme	nts
			N/A	Franka -	(-,				
	 								
									
_								-	
		··							
2a Is th	e foundation directly or indirectly	y affiliated with,	or related to, one	or more tax-exempt organ	nizations described				_
ın se	ection 501(c) (other than section	1 501(c)(3)) or in	section 527?				Yes	X	No
<u>b</u> If "Y	es," complete the following sche								
	(a) Name of orga	anization		(b) Type of organization		(c) Description of relation	nship		
	N/A				 				
									
			_ _		 				
					 				
	Under penalties of perjury, I declare the	hat I have examined	this return includin	ng accompanying schedules an	d statements and to the	hest of my knowledge -			
Sign	and belief, it is true, correct, and com					. han and knowledge	Aay the IRS eturn with th	discuss t	his er
Here	Mana.	1 7	a. all	V	MRITCHT	9	hown below	7 See ins	str 7
	Signature of officer or trustee	mod	mogrem	Date	TRUSTE	<u> </u>	LX∐ Yes		No
	Print/Type preparer's nar		Preparer's s		Date	Check If PTIN	<u> </u>		
	WILLIAM K.			. 1//1/		self- employed	-		
Paid	JR.	CULTRICA	wa	ear (which	NOV 0 6 2018	· · ·	00039	603	
Prepa		ER. DONT	EN. LEV	INE ET AL	P.A.	Firm's EIN ► 59 –			
Use C	7 B		,	THE DI RU! I		Thin selle P 33-7		J 1	
	Firm's address ► 50	5 SOUTH	FLAGLER	DR, #900					
				,		i .			

Form **990-PF** (2017)

Phone no 561-832-9292

WEST PALM BEACH, FL 33401-5948

Part IV . Capital Gains and Los	ses for Tax on Investment Income	13 37	102	<u> </u>	AGE I	<u> </u>
	 			(b) How acquired		
	describe the kind(s) of property solo ick warehouse; or common stock, 20			P - Purchase D - Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
	ES CORE S&P			P	01/30/17	10/24/17
	ES CORE S&P 500			P	01/30/17	
**	RES US TREASURY	BONDER		P	10/18/17	
		· · · · · · · · · · · · · · · · · · ·	TINI		01/30/17	
	VANGUARD SHORTT		OIA_	P		
e 29 SHS - ISHARE				P	03/04/15	
f 667.3520 SHS -	EATONVANCE GLOB	AL MACROABS RET		P	10/16/14	
g 12 SHS - ISHARI	ES CORE S&P 500			P	11/04/14	10/24/17
h 2,964.4970 SHS	- METROPOLITAN	WEST TOTAL RETUR	ΝВ	P		10/24/17
+ 684.4710 SHS -				P		10/24/17
						10/24/17
	ARD FTSE DEVELOP			P P	12/09/15	
	ARD FTSE EMERGING			P	12/09/15	
		TERM BOND INDEX	FUN	P	04/08/16	
n 541 SHS - MICRO	DSOFT			P	11/22/95	03/26/18
0						
(a) Gross sales price	(f) Depreciation allowed	(g) Cost or other basis		(h	Gain or (loss)	
(e) Gross sales price	(or allowable)	plus expense of sale		(e) p	lus (f) minus (g)	
a 819.		754.				65.
5 540		5,943.				
						<u>769.</u>
c 4,014.		4,037.				<u>-23.</u>
d 6,508.		6,521.				<u>-13.</u>
e 3,171.		3,203.				32.
<u>f</u> 6,091.		6,105.				-14.
g 3,098.		2,429.				669.
h 31,557.		32,395.				-838.
6,132.		5,799.				333.
1,055.		776.				279.
k 2,895.					•••	
		2,459.				436.
575.		439.				136.
m 7,277.		7,385.				-108.
n 50,456.						<u>47,464.</u>
0						
Complete only for assets showing	g gain in column (h) and owned by t	he foundation on 12/31/69		(I) Los	ses (from col (h))	
(i) F M V as of 12/31/69	(j) Adjusted basis	(k) Excess of col (i)		Gains (excess of	of col. (h) gain over ot less than "-0-")	col (k),
(1)	as of 12/31/69	over col (j), if any				
<u>a</u>						65.
b						769.
С						-23.
d				-		-13.
e						-32.
,						
1						-14.
9						669.
h						<u>-838.</u>
1						333.
						279.
k						436.
						136.
m						-108.
n						
						47,464.
0			1			
	If nam also enter	in Part I, line 7				
2 Capital gain net income or (net cap	oital loss) { If gain, also enter if (loss), enter "-0-	-" in Part I, line 7	2			49,123.
3 Net short-term capital gain or (loss	s) as defined in sections 1222(5) and	d (6):				
If gain, also enter in Part I, line 8, c)				
If (loss), enter "-0-" in Part I, line 8	· ·	<u>_</u>	3		N/A	

Part XV Supplementary Informatio	n			
3 Grants and Contributions Paid During the	Year (Continuation)			
Recipient	If recipient is an individual, show any relationship to	Foundation	Purpose of grant or	Amount
Name and address (home or business)	any foundation manager or substantial contributor	status of recipient	contribution	ranoont
BOY SCOUTS OF AMERICA	NONE	PUBLIC CHARITY	CUDDODM	
63 MASON ST	NONE	PUBLIC CHARITY	SUPPORT	•
GREENWICH, CT 06830				500.
BREAST CANCER ALLIANCE	NONE	PUBLIC CHARITY	SUPPORT	
48 MAPLE AVE				
GREENWICH, CT 06830				10,000,
BROADCASTERS FOUNDATION OF AMÈRICA	NONE	PUBLIC CHARITY	SUPPORT	
125 WEST 55TH STREET 21ST FLOOR				
NEW YORK, NY 10019				52,500.
CONNECTICUT PUBLIC BROADCASTING	NONE	PUBLIC CHARITY	SUPPORT	
1049 ASYLUM AVE				
HARTFORD CT 06105	•			500.
			,	
DIOCESE OF PALM BEACH	NONE	PUBLIC CHARITY	SUPPORT	
PALM BEACH GARDENS FL 33410				2,000,
				2,000.
FRIENDS OF NATHANIEL WITHERELL 70 PARSONAGE RD	NONE	PUBLIC CHARITY	SUPPORT	
GREENWICH, CT 06830				500.
GREENWICH EMERGENCY MEDICAL SERVICE	NONE	PUBLIC CHARITY	CIIDDADT	
1111 E PUTNAM AVE	NONE	COBBIC CHARTII	BUFFORT	
GREENWICH, CT 06878				1,000,
GREENWICH GREEN & CLEAN	NONE	PUBLIC CHARITY	SUPPORT	
113 PEMBERWICK ROAD				
GREENWICH, CT 06831		 		500.
GREENWICH HOSPITAL FOUNDATION	NONE	PUBLIC CHARITY	SUPPORT	
5 PERRYRIDGE ROAD				
GREENWICH, CT 06830				15,525,
INNER CITY FOUNDATION	NONE .	PUBLIC CHARITY	SUPPORT	
238 JEWETT AVE BRIDGEPORT CT 06606				1 000
Total from continuation sheets	L			1,000,

Part XV Supplementary Information 3 Grants and Contributions Paid During the Y				
3 Grants and Contributions Paid During the Y Recipient	If recipient is an individual,		T	
Name and address (home or business)	show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
warne and address (notice of business)	or substantial contributor	recipient		
LOURDES-NOREEN MCKEEN	NONE	PUBLIC CHARITY	SUPPORT	
311 SOUTH FLAGLER DRIVE				3.5
WEST PALM BEACH, FL 33401				350
PALM BEACH CIVIC ASSOCIATION	NONE	PUBLIC CHARITY	SUPPORT	
139 N COUNTRY RD				
PALM BEACH, FL 33480				10,000
PEGGY ADAMS ANIMAL RESCUE LEAGUE	NONE	PUBLIC CHARITY	SUPPORT	
3200 N MILITARY TRAIL WEST PALM BEACH, FL 33409				8,500
PRESERVATION FOUNDATION OF PALM BEACH	NONE	PUBLIC CHARITY	SUPPORT	
311 PERUVIAN AVENUE				
PALM BEACH, FL 33480				10,000
SAINT EDWARD CHURCH	NONE	PUBLIC CHARITY	SUPPORT	
144 NORTH COUNTY RD				
PALM BEACH, FL 33480				1,100
SAINT MICHAEL THE ARCHANGEL CHURCH	NONE	PUBLIC CHARITY	SUPPORT	
469 NORTH STREET GREENWICH, CT 06830				500
GREENWICH, CT 00030				500
SOCIETY OF THE FOUR ARTS	NONE	PUBLIC CHARITY	CIIDDODT	
2 4 ARTS PLAZA	HONE	TOBBIC CHARTIT	BOTTORT	
PALM BEACH, FL 33480				10,000
Total from continuation sheets				

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

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

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

THE EDWARD AND PATRICIA

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

OMB No 1545-0047

Employer identification number

Mo	CLAUGHLIN FOUNDATION	13-3918273
Organization type (check o		
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	
Note: Only a section 501(c General Rule X For an organizatio	is 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 Rule, (7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule, (8), or (10) organization can check boxes for both the General Rule and a Special Rule, (8), or (10) organization can check boxes for filling Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling one contributor.	\$5,000 or more (in money or
Special Rules		
sections 509(a)(1) any one contribute	n described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or, during the year, total contributions of the greater of (1) \$5,000, or (2) 2% of the amount, line 1 Complete Parts I and II	or 16b, and that received from
year, total contribi	n described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from autions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educately to children or animals. Complete Parts I, II, and III	•
year, contributions is checked, enter purpose Don't co	n described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from a section	ore than \$1,000 If this box , charitable, etc ,
Caution: An organization th	nat isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (F.	orm 990, 990-F7, 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

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)

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

Name of organization .

THE EDWARD AND PATRICIA MCLAUGHLIN FOUNDATION

Employer identification number

13-3918273

Part I	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	EDWARD AND PATRICIA MCLAUGHLIN 1051 NORTH OCEAN BOULEVARD PALM BEACH, FL 33480	\$ 78,845.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>2</u>	EDWARD AND PATRICIA MCLAUGHLIN 1051 NORTH OCEAN BOULEVARD PALM BEACH, FL 33480	\$ 50,456.	Person Payroll Moncash X (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$·	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)

Name of organization
THE EDWARD AND PATRICIA
MCLAUGHLIN FOUNDATION

Employer identification number

art II	HLIN FOUNDATION Noncash Property (see instructions) Use duplicate copies of P.		3-3918273
	The state of the s		
(a) No.	(b)	(c)	1-1/
from		FMV (or estimate)	(d)
Part I	Description of noncash property given	(See instructions.)	Date received
	541 SHARES OF MICROSOFT STOCK	· · · · · · · · · · · · · · · · · · ·	
_2			
			02/26/10
		<u> </u>	03/26/18
(a)		(4)	
No.	(b)	(c)	(d)
from	Description of noncash property given	FMV (or estimate)	Date received
Part I		(See instructions.)	
			
—			
(a)			
No.	(b)	(c)	(d)
from	Description of noncash property given	FMV (or estimate)	Date received
Part I		(See instructions.)	
(a)		(c)	
No.	(b)	FMV (or estimate)	(d)
rom Part I	Description of noncash property given	(See instructions.)	Date received
arti		· · · · · · · · · · · · · · · · · · ·	
		\$	
(a)			
No.	(b)	(c)	(d)
from	Description of noncash property given	FMV (or estimate)	Date received
art I		(See instructions.)	
 ·			
		\ \$	
(a)			-
No.	(b)	(c)	(d)
rom	Description of noncash property given	FMV (or estimate)	Date received
art I		(See instructions.)	

Name of org	anization		Employer identification number					
THE EI	OWARD AND PATRICIA							
	GHLIN FOUNDATION		13-3918273					
Part III	Exclusively religious, charitable, etc., con	tributions to organizations described in secti	on 501(c)(7), (8), or (10) that total more than \$1,000 for					
•	the year from any one contributor Complete	columns (a) through (e) and the following line	entry For organizations					
	completing Part III, enter the total of exclusively religion Use duplicate copies of Part III if addition	us, charitable letc., contributions of \$1,000 or less for t	he year (Enterthis late once) • • • • • • • • • • • • • • • • • • •					
(a) No.	Ose duplicate copies of Fart III if addition	lai space is needed						
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held					
		(e) Transfer of gift						
-	Transferee's name, address, a	and ZIP + 4	elationship of transferor to transferee					
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held					
-	(e) Transfer of gift							
	Transferee's name, address, a	ind ZIP + 4	Relationship of transferor to transferee					
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held					
								
	(e) Transfer of gift							
-	Transferee's name, address, a	nd ZIP + 4 R	elationship of transferor to transferee					
	1							
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held					

(e) Transfer of gift

Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

0.

FORM 990-PF DI	VIDENDS	AND INTER	EST	FROM SECUR	ITIES S'	PATEMENT	1
	GROSS AMOUNT	CAPITAL GAINS DIVIDEND		(A) REVENUE PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTI NET INC	
VARIOUS	509.		0,.	509.	509.		
TO PART I, LINE 4	509.		0.	509.	509.	•	
FORM 990-PF		ACCOUNTI	NG F	EES	S	PATEMENT	2
DESCRIPTION		(A) EXPENSES PER BOOKS		(B) INVEST- IT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITAI PURPOSI	
ACCOUNTING FEES		3,845.		1,922.		1,9	23.
TO FORM 990-PF, PG 1, I	LN 16B	3,845.		1,922.		1,9	23.
FORM 990-PF		OTHER E	XPEN	ISES	S	PATEMENT	3
DESCRIPTION		(A) EXPENSES PER BOOKS		(B) 'INVEST- IT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITAI PURPOSI	
BANK CHARGES INVESTMENT ADVISORY FEE	 ES	29. 42.		29. 42.			0.

71.

TO FORM 990-PF, PG 1, LN 23

71.