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Form **990-PF**
Department of the Treasury
Internal Revenue Service

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.**

OMB No 1545-0052

2018

Open to Public Inspection

For calendar year 2018, or tax year beginning 01-01-2018 , and ending 12-31-2018

Name of foundation
TAMARACK FOUNDATION

A Employer identification number
04-6027800

Number and street (or P O box number if mail is not delivered to street address)
WOODSTOCK SVCS 101 ARCH ST NO 1000

Room/suite

B Telephone number (see instructions)
(617) 227-0600

City or town, state or province, country, and ZIP or foreign postal code
BOSTON, MA 02110

C If exemption application is pending, check here ▶ ☐

G Check all that apply ☐ Initial return ☐ Initial return of a former public charity ☐ Final return ☐ Amended return ☑ Address change ☐ Name change

D 1. Foreign organizations, check here ▶ ☐
2 Foreign organizations meeting the 85% test, check here and attach computation ▶ ☐

H Check type of organization ☑ Section 501(c)(3) exempt private foundation ☐ Section 4947(a)(1) nonexempt charitable trust ☐ Other taxable private foundation

E If private foundation status was terminated under section 507(b)(1)(A), check here ▶ ☐

I Fair market value of all assets at end of year (from Part II, col (c), *line 16)* ▶$ 924,910

J Accounting method ☑ Cash ☐ Accrual ☐ Other (specify) _____
(Part I, column (d) must be on cash basis)

F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here ▶ ☐

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) (see instructions))*

			(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
Revenue	1	Contributions, gifts, grants, etc , received (attach schedule)	132,979			
	2	Check ▶ ☐ if the foundation is **not** required to attach Sch B				
	3	Interest on savings and temporary cash investments				
	4	Dividends and interest from securities	504	504		
	5a	Gross rents				
	b	Net rental income or (loss) _____				
	6a	Net gain or (loss) from sale of assets not on line 10	4,379			
	b	Gross sales price for all assets on line 6a 111,756				
	7	Capital gain net income (from Part IV, line 2)		100,259		
	8	Net short-term capital gain				
	9	Income modifications				
	10a	Gross sales less returns and allowances				
	b	Less Cost of goods sold				
	c	Gross profit or (loss) (attach schedule)				
	11	Other income (attach schedule)				
	12	**Total.** Add lines 1 through 11	137,862	100,763		
Operating and Administrative Expenses	13	Compensation of officers, directors, trustees, etc	0	0		0
	14	Other employee salaries and wages				
	15	Pension plans, employee benefits				
	16a	Legal fees (attach schedule)				
	b	Accounting fees (attach schedule)	5,000	3,333		1,667
	c	Other professional fees (attach schedule)	2,390	1,593		797
	17	Interest				
	18	Taxes (attach schedule) (see instructions)	1,421	0		0
	19	Depreciation (attach schedule) and depletion				
	20	Occupancy				
	21	Travel, conferences, and meetings				
	22	Printing and publications				
	23	Other expenses (attach schedule)	35	0		35
	24	**Total operating and administrative expenses.** Add lines 13 through 23	8,846	4,926		2,499
	25	Contributions, gifts, grants paid	98,800			98,800
	26	**Total expenses and disbursements.** Add lines 24 and 25	107,646	4,926		101,299
	27	Subtract line 26 from line 12				
	a	**Excess of revenue over expenses and disbursements**	30,216			
	b	**Net investment income** (if negative, enter -0-)		95,837		
	c	**Adjusted net income** (if negative, enter -0-)				

Part II Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)

		Beginning of year	End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value
Assets	1 Cash—non-interest-bearing	373	372	372
	2 Savings and temporary cash investments	4,767	4,927	4,927
	3 Accounts receivable ▶			
	Less allowance for doubtful accounts ▶			
	4 Pledges receivable ▶			
	Less allowance for doubtful accounts ▶			
	5 Grants receivable			
	6 Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions)			
	7 Other notes and loans receivable (attach schedule) ▶			
	Less allowance for doubtful accounts ▶			
	8 Inventories for sale or use			
	9 Prepaid expenses and deferred charges			
	10a Investments—U S and state government obligations (attach schedule)			
	b Investments—corporate stock (attach schedule)	12,048	42,100	40,511
	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)	739,915	739,915	879,100
	14 Land, buildings, and equipment basis ▶			
	Less accumulated depreciation (attach schedule) ▶			
	15 Other assets (describe ▶)			
	16 **Total assets** (to be completed by all filers—see the instructions Also, see page 1, item I)	757,103	787,314	924,910
Liabilities	17 Accounts payable and accrued expenses			
	18 Grants payable			
	19 Deferred revenue			
	20 Loans from officers, directors, trustees, and other disqualified persons			
	21 Mortgages and other notes payable (attach schedule)			
	22 Other liabilities (describe ▶)			
	23 **Total liabilities**(add lines 17 through 22)	0	0	
Net Assets or Fund Balances	**Foundations that follow SFAS 117, check here ▶ ☐ and complete lines 24 through 26 and lines 30 and 31.**			
	24 Unrestricted			
	25 Temporarily restricted			
	26 Permanently restricted			
	Foundations that do not follow SFAS 117, check here ▶ ☑ and complete lines 27 through 31.			
	27 Capital stock, trust principal, or current funds	757,103	787,314	
	28 Paid-in or capital surplus, or land, bldg , and equipment fund	0	0	
	29 Retained earnings, accumulated income, endowment, or other funds	0	0	
	30 **Total net assets or fund balances** (see instructions)	757,103	787,314	
	31 **Total liabilities and net assets/fund balances** (see instructions)	757,103	787,314	

Part III Analysis of Changes in Net Assets or Fund Balances

1	Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)	1	757,103
2	Enter amount from Part I, line 27a	2	30,216
3	Other increases not included in line 2 (itemize) ▶	3	0
4	Add lines 1, 2, and 3	4	787,319
5	Decreases not included in line 2 (itemize) ▶	5	5
6	Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30	6	787,314

Part IV Capital Gains and Losses for Tax on Investment Income

	(a) List and describe the kind(s) of property sold (e g , real estate, 2-story brick warehouse, or common stock, 200 shs MLC Co)	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
1a	See Additional Data Table			
b				
c				
d				
e				

	(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
a	See Additional Data Table			
b				
c				
d				
e				

	Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col (h) gain minus col (k), but not less than -0-) **or** Losses (from col (h))
	(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	
a	See Additional Data Table			
b				
c				
d				
e				

2	Capital gain net income or (net capital loss) { If gain, also enter in Part I, line 7 / If (loss), enter -0- in Part I, line 7 }	2	100,259
3	Net short-term capital gain or (loss) as defined in sections 1222(5) and (6) If gain, also enter in Part I, line 8, column (c) (see instructions) If (loss), enter -0- in Part I, line 8	3	

Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income)

If section 4940(d)(2) applies, leave this part blank

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? ☐ Yes ☑ No
If "Yes," the foundation does not qualify under section 4940(e) Do not complete this part

1 Enter the appropriate amount in each column for each year, see instructions before making any entries

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col (b) divided by col (c))
2017	86,073	797,805	0 107887
2016	143,755	818,278	0 175680
2015	176,433	844,140	0 209009
2014	196,854	847,825	0 232187
2013	153,525	833,099	0 184282

2	**Total** of line 1, column (d)	2	0 909045
3	Average distribution ratio for the 5-year base period—divide the total on line 2 by 5 0, or by the number of years the foundation has been in existence if less than 5 years	3	0 181809
4	Enter the net value of noncharitable-use assets for 2018 from Part X, line 5	4	870,695
5	Multiply line 4 by line 3	5	158,300
6	Enter 1% of net investment income (1% of Part I, line 27b)	6	958
7	Add lines 5 and 6	7	159,258
8	Enter qualifying distributions from Part XII, line 4	8	101,299

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate See the Part VI instructions

Part VI **Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see instructions)**

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 here ▶ ☐ and enter 1% of Part I, line 27b	1	1,917
c	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, col (b)		
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)	2	0
3	Add lines 1 and 2	3	1,917
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)	4	0
5	**Tax based on investment income.** Subtract line 4 from line 3 If zero or less, enter -0-	5	1,917
6	Credits/Payments		
a	2018 estimated tax payments and 2017 overpayment credited to 2018 — 6a: 1,720		
b	Exempt foreign organizations—tax withheld at source — 6b:		
c	Tax paid with application for extension of time to file (Form 8868) — 6c: 0		
d	Backup withholding erroneously withheld — 6d: 0		
7	Total credits and payments Add lines 6a through 6d	7	1,720
8	Enter any **penalty** for underpayment of estimated tax Check here ☑ if Form 2220 is attached	8	0
9	**Tax due.** If the total of lines 5 and 8 is more than line 7, enter **amount owed** ▶	9	197
10	**Overpayment.** If line 7 is more than the total of lines 5 and 8, enter the **amount overpaid** ▶	10	
11	Enter the amount of line 10 to be **Credited to 2019 estimated tax** ▶ **Refunded** ▶	11	

Part VII-A **Statements Regarding Activities**

			Yes	No
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?	1a		No
b	Did it spend more than $100 during the year (either directly or indirectly) for political purposes? (see Instructions for definition)	1b		No
	*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*			
c	Did the foundation file **Form 1120-POL** for this year?	1c		No
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year **(1)** On the foundation ▶ $ 0 **(2)** On foundation managers ▶ $ 0			
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers ▶ $ 0			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS? *If "Yes," attach a detailed description of the activities*	2		No
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		No
4a	Did the foundation have unrelated business gross income of $1,000 or more during the year?	4a		No
b	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? *If "Yes," attach the statement required by General Instruction T*	5		No
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	Yes	
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	Yes	
8a	Enter the states to which the foundation reports or with which it is registered (see instructions) ▶ 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? *If "No," attach explanation* .	8b	Yes	
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 2018 or the taxable year beginning in 2018? See the instructions for Part XIV If "Yes," complete Part XIV	9		No
10	Did any persons become substantial contributors during the tax year? *If "Yes," attach a schedule listing their names and addresses*	10		No

Part 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 meaning of section 512(b)(13)? If "Yes," attach schedule See instructions.	11		No
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		No
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Yes	

Website address ▶ N/A

14 The books are in care of ▶ WOODSTOCK SERVICES CO LLC Telephone no ▶ (617) 227-0600

Located at ▶ 1000 ARCH ST STE 1000 BOSTON MA ZIP+4 ▶ 02110

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 2018, 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?	16		No

Yes No

See the instructions for exceptions and filing requirements for FinCEN Form 114 If "Yes", enter the name of the foreign country ▶

Part 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.

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? ☐ Yes ☑ 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 **any** of the acts fail to qualify under the exceptions described in Regulations section 53 4941(d)-3 or in a current notice regarding disaster assistance? See instructions	1b		
	Organizations relying on a current notice regarding disaster assistance check here ▶ ☐			
c	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2018?	1c		No
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5))			
a	At the end of tax year 2018, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2018? ☐ Yes ☑ No			
	If "Yes," list the years ▶ 20____, 20____, 20____, 20____			
b	Are there any years listed in 2a for which the foundation is **not** applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to **all** years listed, answer "No" and attach statement—see instructions)	2b		
c	If the provisions of section 4942(a)(2) are being applied to **any** of the years listed in 2a, list the years here ▶ 20____, 20____, 20____, 20____			
3a	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 2018 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 2018).*	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		No
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 2018?	4b		No

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required *(continued)*

			Yes	No
5a	During the year did the foundation pay or incur any amount to			
	(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?	☐ Yes ☑ No		
	(2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive?	☐ Yes ☑ No		
	(3) Provide a grant to an individual for travel, study, or other similar purposes?	☐ Yes ☑ No		
	(4) Provide a grant to an organization other than a charitable, etc , organization described in section 4945(d)(4)(A)? See instructions	☐ Yes ☑ No		
	(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?	☐ Yes ☑ No		
b	If any answer is "Yes" to 5a(1)–(5), did **any** of the transactions fail to qualify under the exceptions described in Regulations section 53 4945 or in a current notice regarding disaster assistance? See instructions	5b		
	Organizations relying on a current notice regarding disaster assistance check here ▶	☐		
c	If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?	☐ Yes ☐ 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?	☐ Yes ☑ No		
b	Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	6b		No
	If "Yes" to 6b, file Form 8870			
7a	At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?	☐ Yes ☑ No		
b	If yes, did the foundation receive any proceeds or have any net income attributable to the transaction?	7b		
8	Is the foundation subject to the section 4960 tax on payment(s) of more than $1,000,000 in remuneration or excess parachute payment during the year?	☐ Yes ☑ No		

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors

1 List all officers, directors, trustees, foundation managers and their compensation. See instructions

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
WILLIAM H DARLING AGAWAM TRUST MGMT101 ARCH ST STE 1000 BOSTON, MA 02110	TRUSTEE 1 00	0	0	0
HENRY P PHIPPEN AGAWAM TRUST MGMT 101 ARCH ST STE 1000 BOSTON, MA 02110	TRUSTEE 2 00	0	0	0

2 Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, enter "NONE."

(a) Name and address of each employee paid more than $50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE				

Total number of other employees paid over $50,000 ▶ 0

Part VIII **Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors *(continued)***

3 Five highest-paid independent contractors for professional services (see instructions). If none, enter "NONE".

(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 information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc	Expenses
1	
2	
3	
4	

Part IX-B **Summary of Program-Related Investments** (see instructions)

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1	
2	
All other program-related investments See instructions **3**	
Total. Add lines 1 through 3 . . . . . ▶	0

Part X Minimum Investment Return (All domestic foundations must complete this part Foreign foundations,see instructions)

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc , purposes		
a	Average monthly fair market value of securities	1a	880,090
b	Average of monthly cash balances	1b	3,864
c	Fair market value of all other assets (see instructions)	1c	0
d	**Total** (add lines 1a, b, and c)	1d	883,954
e	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	883,954
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	13,259
5	**Net value of noncharitable-use assets.** Subtract line 4 from line 3 Enter here and on Part V, line 4	5	870,695
6	**Minimum investment return.** Enter 5% of line 5	6	43,535

Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here ▶ ☐ and do not complete this part)

1	Minimum investment return from Part X, line 6			1	43,535
2a	Tax on investment income for 2018 from Part VI, line 5	2a	1,917		
b	Income tax for 2018 (This does not include the tax from Part VI)	2b			
c	Add lines 2a and 2b			2c	1,917
3	Distributable amount before adjustments Subtract line 2c from line 1			3	41,618
4	Recoveries of amounts treated as qualifying distributions			4	0
5	Add lines 3 and 4			5	41,618
6	Deduction from distributable amount (see instructions)			6	0
7	**Distributable amount** as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1			7	41,618

Part XII Qualifying Distributions (see instructions)

1	Amounts paid (including administrative expenses) to accomplish charitable, etc , purposes		
a	Expenses, contributions, gifts, etc —total from Part I, column (d), line 26	1a	101,299
b	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		
a	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	101,299
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	0
6	**Adjusted qualifying distributions.** Subtract line 5 from line 4	6	101,299

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 4940(e) reduction of tax in those years

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2017	(c) 2017	(d) 2018
1 Distributable amount for 2018 from Part XI, line 7				41,618
2 Undistributed income, if any, as of the end of 2018				
a Enter amount for 2017 only.			0	
b Total for prior years 20___, 20___, 20___		0		
3 Excess distributions carryover, if any, to 2018				
a From 2013. 114,614				
b From 2014. 157,931				
c From 2015.				
d From 2016. 115,057				
e From 2017. 47,883				
f **Total** of lines 3a through e.	435,485			
4 Qualifying distributions for 2018 from Part XII, line 4 ▶ $ 101,299				
a Applied to 2017, 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).	101,299			
d Applied to 2018 distributable amount.				0
e Remaining amount distributed out of corpus	0			
5 Excess distributions carryover applied to 2018	41,618			41,618
(If an amount appears in column (d), the same amount must be shown in column (a).)				
6 **Enter the net total of each column as indicated below:**				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	495,166			
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 2017 Subtract line 4a from line 2a Taxable amount—see instructions			0	
f Undistributed income for 2018 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2019				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 2013 not applied on line 5 or line 7 (see instructions) . . .	72,996			
9 **Excess distributions carryover to 2019.** Subtract lines 7 and 8 from line 6a	422,170			
10 Analysis of line 9				
a Excess from 2014. . . . 157,931				
b Excess from 2015. . . .				
c Excess from 2016. . . . 115,057				
d Excess from 2017. . . . 47,883				
e Excess from 2018. . . . 101,299				

Part XIV Private Operating Foundations (see instructions and Part VII-A, question 9)

1a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2018, enter the date of the ruling. . . . . ▶

b Check box to indicate whether the organization is a private operating foundation described in section ☐ 4942(j)(3) or ☐ 4942(j)(5)

	Tax year	Prior 3 years			(e) Total
	(a) 2018	(b) 2017	(c) 2016	(d) 2015	
2a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed					
b 85% of line 2a					
c Qualifying distributions from Part XII, line 4 for each year listed					
d Amounts included in line 2c not used directly for active conduct of exempt activities					
e Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the alternative test relied upon					
a "Assets" alternative test—enter					
(1) Value of all assets					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test— enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed. . .					
c "Support" alternative test—enter					
(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii). . . .					
(3) Largest amount of support from an exempt organization					
(4) Gross investment income					

Part XV Supplementary Information (Complete this part only if the foundation had $5,000 or more in assets at any time during the year—see instructions.)

1 Information Regarding Foundation Managers:

a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than $5,000) (See section 507(d)(2))

b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest

2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:

Check here ▶ ☑ if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds If the foundation makes gifts, grants, etc to individuals or organizations under other conditions, complete items 2a, b, c, and d See instructions

a The name, address, and telephone number or email address of the person to whom applications should be addressed

b The form in which applications should be submitted and information and materials they should include

c Any submission deadlines

d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors

Part XV Supplementary Information (continued)

3 Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year* See Additional Data Table				
Total . . . . . ▶ **3a**				
b *Approved for future payment*				
Total . . . . . ▶ **3b**				

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated	Unrelated business income		Excluded by section 512, 513, or 514		(e) Related or exempt function income (See instructions)
	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	
1 Program service revenue					
a					
b					
c					
d					
e					
f					
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	504	
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 than inventory			18	4,379	
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue a					
b					
c					
d					
e					
12 Subtotal Add columns (b), (d), and (e). .		0		4,883	0
13 **Total.** Add line 12, columns (b), (d), and (e).				13	4,883

(See worksheet in line 13 instructions to verify calculations)

Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes

Line No. ▼	Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes) (See instructions)

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

		Yes	No
1 Did the organization directly or indirectly engage in any of the following with any other organization described in section 501 (c) (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?			
a Transfers from the reporting foundation to a noncharitable exempt organization of			
(1) Cash	1a(1)		No
(2) Other assets	1a(2)		No
b Other transactions			
(1) Sales of assets to a noncharitable exempt organization	1b(1)		No
(2) Purchases of assets from a noncharitable exempt organization	1b(2)		No
(3) Rental of facilities, equipment, or other assets	1b(3)		No
(4) Reimbursement arrangements	1b(4)		No
(5) Loans or loan guarantees	1b(5)		No
(6) Performance of services or membership or fundraising solicitations	1b(6)		No
c Sharing of facilities, equipment, mailing lists, other assets, or paid employees	1c		No

d If the answer to any of the above is "Yes," complete the following schedule Column **(b)** should always show the fair market value of the goods, other assets, or services given by the reporting foundation If the foundation received less than fair market value in any transaction or sharing arrangement, show in column **(d)** the value of the goods, other assets, or services received

(a) Line No	**(b)** Amount involved	**(c)** Name of noncharitable exempt organization	**(d)** Description of transfers, transactions, and sharing arrangements

2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) (other than section 501(c)(3)) or in section 527? ☐ Yes ☑ No

b If "Yes," complete the following schedule

(a) Name of organization	**(b)** Type of organization	**(c)** Description of relationship

Sign Here

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge

******	2019-05-15	******
Signature of officer or trustee	Date	Title

May the IRS discuss this return with the preparer shown below (see instr)? ☑ Yes ☐ No

Paid Preparer Use Only

Print/Type preparer's name	Preparer's Signature	Date	Check if self-employed ▶ ☐	PTIN
THOMAS J LESPASIO		2019-05-15		P00423878

Firm's name ▶ WOODSTOCK SERVICES COMPANY LLC	Firm's EIN ▶20-8708209
Firm's address ▶ 101 ARCH STREET SUITE 1000 BOSTON, MA 02110	Phone no (617) 227-0600

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d

	List and describe the kind(s) of property sold (e g , real estate, **(a)** 2-story brick warehouse, or common stock, 200 shs MLC Co)	**(b)** How acquired P—Purchase D—Donation	**(c)** Date acquired (mo , day, yr)	**(d)** Date sold (mo , day, yr)
1	203 SHS ABBVIE	D	1972-05-26	2018-06-04
1	90 SHS ABBVIE	D	1972-05-26	2018-12-04
	14 SHS CISCO	D	2018-11-08	2018-11-08
	115 SHS COCA COLA	D	1961-05-11	2018-04-13
	230 SHS COCA COLA	D	1961-05-11	2018-04-23
	39 SHS GENERAL ELECTRIC	D	1951-06-06	2018-08-06
	25 SHS HANESBRAND	D	2009-02-26	2018-08-06
	3 SHS IDEXX	D	2015-01-16	2018-11-08
	22 SHS INTUITIVE SURGICAL	D	2009-07-09	2018-12-03
	60 SHS JOHNSON & JOHNSON	D	1981-02-05	2018-11-08

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h

(e) Gross sales price	Depreciation allowed **(f)** (or allowable)	Cost or other basis **(g)** plus expense of sale	Gain or (loss) **(h)** (e) plus (f) minus (g)
20,084		248	19,836
8,188		24	8,164
676		257	419
5,081		26	5,055
10,059		52	10,007
513		36	477
451		37	414
630		237	393
11,949		1,059	10,890
8,732		120	8,612

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - l

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			Gains (Col (h) gain minus col (k), but not less than -0-) **or** **(l)** Losses (from col (h))
(i) F M V as of 12/31/69	Adjusted basis **(j)** as of 12/31/69	Excess of col (i) **(k)** over col (j), if any	
			19,836
			8,164
			419
			5,055
			10,007
			477
			414
			393
			10,890
			8,612

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d

	List and describe the kind(s) of property sold (e g , real estate, **(a)** 2-story brick warehouse, or common stock, 200 shs MLC Co)	**(b)** How acquired P—Purchase D—Donation	**(c)** Date acquired (mo , day, yr)	**(d)** Date sold (mo , day, yr)
	110 SHS JOHNSON & JOHNSON	D	1981-02-05	2018-11-19
1	8 SHS MERCK	D	2013-03-20	2018-11-08
	120 SHS MICROSOFT	D	1997-11-13	2019-11-08
	10 SHS O'REILLY	D	2015-03-19	2018-08-06
	93 SHS DISNEY	D	2018-01-16	2019-11-08
	10 SHS PEPSICO	D	2015-01-16	2018-11-08
	1 SH BANK OF AMERICA	P	2018-04-17	2018-08-06

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h

(e) Gross sales price	Depreciation allowed **(f)** (or allowable)	Cost or other basis **(g)** plus expense of sale	Gain or (loss) **(h)** (e) plus (f) minus (g)
16,260		221	16,039
605		353	252
13,373		2,347	11,026
3,138		2,147	991
10,826		3,336	7,490
1,159		972	187
32		25	7

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - l

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			Gains (Col (h) gain minus col (k), but not less than -0-) **or** **(l)** Losses (from col (h))
(i) F M V as of 12/31/69	Adjusted basis **(j)** as of 12/31/69	Excess of col (i) **(k)** over col (j), if any	
			16,039
			252
			11,026
			991
			7,490
			187
			7

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
AMERICAN RED CROSSPO BOX 37839 BOONE, IA 500370839	NONE	NONE	SOCIAL	500
BEYOND PESTICIDES 701 E ST SE SUITE 200 WASHINGTON, DC 20003	NONE	NONE	HEALTH	1,000
BOSTON SYMPHONY ORCHESTRA 301 MASSACHUSETTS AVE BOSTON, MA 02115	NONE	NONE	EDUCATIONAL	500
Total . . . . . ▶ **3a**				98,800

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
BOY'S TOWN JERUSALEM 1 PENN PLAZA 9 NEW YORK, NY 10119	NONE	NONE	EDUCATIONAL	500
BROOKWOOD SCHOOL 1 BROOKWOOD RD MANCHESTER, MA 01944	NONE	NONE	SOCIAL	100
CHABAD LUBAVITCH 44 BURRILL STREET SWAMPSCOTT, MA 01907	NONE	NONE	RELIGIOUS	10,000
Total . . . . . ▶ **3a**				98,800

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
CIRCLE OF CONCERN 112 SAINT LOUIS AVE VALLEY PARK, MO 63088	NONE	NONE	HEALTH	2,000
COLLEGE BOUND DORCHESTER 18 SAMOSET ST DORCHESTER, MA 02124	NONE	NONE	EDUCATIONAL	3,000
EMERALD MOUNTAIN SCHOOL 818 OAK ST STEAMBOAT SPRINGS, CO 80487	NONE	NONE	EDUCATIONAL	1,000
Total . . . . . ▶ **3a**				98,800

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
EPWORTH CHILDREN AND FAMILY SERVICES 110 N ELM AVE WEBSTER GROVES, MO 63119	NONE	NONE	EDUCATIONAL	1,500
FAMILY & CHILDREN'S SERVICES OF GREATER LYNN 111 NORTH COMMON ST LYNN, MA 01902	NONE	NONE	SOCIAL	3,000
FRONTIER NURSING SERVICES 132 FRONTIER NURSING SERVICE DR WENDOVER, KY 41775	NONE	NONE	MEDICAL	4,000
Total . . . . . ▶ **3a**				98,800

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
GIRL'S INC50 HIGH STREET LYNN, MA 01902	NONE	NONE	EDUCATIONAL	8,000
HIPPOCRATES1466 HIPPOCRATES WAY WEST PALM BEAC, FL 33411	NONE	NONE	HEALTH	1,000
HUMANE SOCIETY OF MISSOURI 1201 MACKLIND AVE ST LOUIS, MO 63110	NONE	NONE	SOCIAL	2,000
Total . . . . . ▶ **3a**				98,800

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
LAHEY HOSPITAL41 MALL ROAD BURLINGTON, MA 01805	NONE	NONE	MEDICALMEDICAL	200
LAKE FOREST COLLEGE 555 N SHERIDAN RD LAKE FOREST, IL 60045	NONE	NONE	EDUCATIONAL	100
MASSACHUSETTS GENERAL HOSPITAL 55 FRUIT ST BOSTON, MA 02114	NONE	NONE	MEDICAL	1,200
Total . . . . . ▶ **3a**				98,800

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
MCLEAN HOSPITAL115 MILL ST BELMONT, MA 02478	NONE	NONE	MEDICALMEDICAL	2,800
NATURE CONSERVANCY99 BEDFORD ST BOSTON, MA 02111	NONE	NONE	EDUCATIONAL	500
NEW ENGLAND HISTORICAL GENEALOGICAL SOCIETY 99 - 101 NEWBURY ST BOSTON, MA 02116	NONE	NONE	SOCSOCIALSOCIALSOCIAL	2,000
Total . . . . . ▶ **3a**				98,800

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
NORTH SHORE MEDICAL CENTER 81 HIGHLAND AVE SALEM, MA 01970	NONE	NONE	MEDICAL	200
NORTH WEST COLORADO VISITING NURSE ASSOC 745 RUSSELL ST CRAIG, CO 81625	NONE	NONE	MEDICAL	1,000
OPERATION FOOD SEARCH 6282 OLIVE BLVD ST LOUIS, MO 63130	NONE	NONE	HEALTH	2,000
Total . . . . . ▶ **3a**				98,800

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
PINGREE SCHOOL537 HIGHLAND ST HAMILTON, MA 01982	NONE	NONE	EDUCATIONAL	600
PLUMMER HOME FOR BOYS 35 WINTER ISLAND RD SALEM, MA 01970	NONE	NONE	SOCIAL	1,100
QUEBEC LABRADOR FOUNDATION 55 SOUTH MAIN ST IPSWICH, MA 01938	NONE	NONE	EDUCATIONAL	200
Total . . . . . ▶ **3a**				98,800

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
ROUTT COUNTY UNITED WAY PO BOX 774005 STEAMBOAT SPRINGS, CO 80477	NONE	NONE	SOCIAL	1,000
SEWPPORTIVE FRIENDSPO BOX 5223 BEVERLY FARMS, MA 01915	NONE	NONE	SOCIAL	200
SIMMONS COLLEGE300 THE FENWAY BOSTON, MA 02115	NONE	NONE	EDUCATIONAL	500
Total . . . . . ▶ **3a**				98,800

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
ST JOHN THE BAPTIST PARISH 19 CHESTNUT ST PEABODY, MA 01960	NONE	NONE	RELIGIOUS	20,000
ST LOUIS CHILDREN'S HOSPITAL 1 CHILDRENS PLACE ST LOUIS, MO 63110	NONE	NONE	MEDICAL	1,500
STEAMBOAT MOUNTAIN SCHOOL 42605 CO RD 36 STEAMBOAT SPRINGS, CO 80487	NONE	NONE	EDUCATIONAL	1,000
Total . . . . . ▶ **3a**				98,800

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
TANGLEWOOD279 WEST STREET LENOX, MA 01240	NONE	NONE	SOCIALEDUCATIONALSOCIAL	200
TEMPLE EMANU-ELONE EAST 65TH ST NEW YORK, NY 10065	NONE	NONE	RELIGIOUS	1,000
TOWER SCHOOL75 WEST SHORE DR MARBLEHEAD, MA 01945	NONE	NONE	EDUCATIONAL	200
Total . . . . . ▶ **3a**				98,800

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
UNICEF18 TREMONT ST SUITE 820 BOSTON, MA 02108	NONE	NONE	HEALTH	500
UNITARIAN UNIVERSALIST CHURCH OF GREATER LYNN 101 FOREST AVE SWAMPSCOTT, MA 01907	NONE	NONE	RELIGIOUS	1,000
UNITARIAN UNIVERSALIST CHURCH OF SWAMPSCOTT 101 FOREST AVE SWAMPSCOTT, MA 01907	NONE	NONE	RELIGIOUS	1,500
Total . . . . . ▶ **3a**				98,800

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
UNIVERSITY OF VERMONT 85 S PROSPECT ST BURLINGTON, VT 05405	NONE	NONE	EDUCATIONAL	500
WGBH CHANNEL 2ONE GUEST ST BOSTON, MA 02135	NONE	NONE	EDUCATIONAL	1,000
WGBH RADIOONE EAST 65TH ST BOSTON, MA 02135	NONE	NONE	EDUCATIONAL	200
Total . . . . . ▶ **3a**				98,800

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
MISSOURI BOTANICAL GARDENS 4344 SHAW BOULEVARD ST LOUIS, MO 63110	NONE	NONE	SOCIALSOCIALSOCIAL	1,000
ST LOUIS ZOOGOVERNMENT DRIVE ST LOUIS, MO 63110	NONE	NONE	SOCIALSOCIAL	1,000
OLD TOWN HOT SPRINGS PO BOX 771211 STEAM BOAT SPRINGS, CO 80477	NONE	NONE	SOCIAL	1,000
Total . . . . . ▶ **3a**				98,800

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
ROCKY MOUNTAIN PBS 1089 BANNOCK STREET DENVER, CO 80204	NONE	NONE	SOCIAL	500
ALS ASSOCIATION685 CANTON STREET NORWOOD, MA 02062	NONE	NONE	MEDICAL	5,000
SERENGETI FOUNDATION 19100 HAMILTON ROAD DRIPPING SPRINGS, TX 78620	NONE	NONE	MEDICAL	5,000
Total . . . . . ▶ **3a**				98,800

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
BOWDOIN COLLEGE255 MAINE STREET BRUNSWICK, ME 04011	NONE	NONE	EDUCATIONAL	5,000
Total . . . . . ▶ **3a**				98,800

TY 2018 Accounting Fees Schedule

Name: TAMARACK FOUNDATION

EIN: 04-6027800

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
ACCOUNTING FEES	5,000	3,333		1,667

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491135032429

TY 2018 Distribution from Corpus Election

Name: TAMARACK FOUNDATION

EIN: 04-6027800

Election: TAMARACK FOUNDATION 04-6027800 ATTACHMENT TO FORM 990 PF 2018 IN ACCORDANCE WITH SECTIONS 4942 (H)(2) AND REG.53.4942(A)-3(C)(2) OF THE IRC OF 1986 AS AMENDED, TAMARACK FOUNDATION HEREBY ELECTS TO TREAT CERTAIN CURRENT YEAR QUALIFYING DISTRIBUTIONS IN EXCESS OF THE PRECEDING TAX YEAR'S UNDISTRIBUTED INCOME AS BEING MADE FROM CORPUS. IN 2018 THE FOUNDATION RECEIVED $132,979 IN CONTRIBUTIONS OF CASH AND SECURITIES FROM INDIVIDUALS. THE FOUNDATION'S DISTRIBUTABLE AMOUNT FOR 2018 WAS $41,618. THE FOUNDATION MADE QUALIFYING DISTRIBUTIONS IN 2018 IN THE AMOUNT OF $101,299 DISTRIBUTIONS OUT OF CORPUS (TO WHICH THIS ELECTION APPLIES) WITH RESPECT TO 2018 CONTRIBUTIONS RECEIVED TO SATISFY THE REQUIREMENTS OF SECTION 170 (B)(1)(F) AND 4942 (G)(3) WERE $101,299. THE AMOUNT OF QUALIFYING DISTRIBUTIONS APPLIED TO THE 2018 DISTRIBUTABLE AMOUNT TOTALED $0. EXCESS DISTRIBUTION CARRYOVER APPLIED TO THE 2018 DISTRIBUTABLE AMOUNT TOTALED $41,618. EXCESS DISTRIBUTIONS CARRYOVER TO 2019 TOTALED $422,170.

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491135032429

TY 2018 Investments Corporate Stock Schedule

Name: TAMARACK FOUNDATION

EIN: 04-6027800

Investments Corporation Stock Schedule

Name of Stock	End of Year Book Value	End of Year Fair Market Value
10 SHS EXXON MOBIL CORP	576	682
5 SHS STATE STREET CORP	185	315
15 SHS BP PLC SPONS ADR	697	569
20 SHS CISCO SYSTEMS INC	553	867
10 SHS CVS HEALTH CORP	251	655
5 SHS MEDTRONIC	375	455
15 SHS PEPSICO INC	1,463	1,657
44 SHS PORCUPINE LAND ASSOC	2,200	0
15 SHS MICROSOFT CORP	1,556	1,524
5 SHS O'REILLY AUTOMOTIVE	846	1,722
15 SHS MERCK & CO	652	1,145
5 SHS UNITED TECHNOLOGIES CORP	546	532
1 SHS ALPHABET INC CL C	585	1,036
7 SHS BERKSHIRE HATHAWAY INC-CL B	1,005	1,429
3 SHS INTUITIVE SURGICAL INC	1,483	1,437
11 SHS CHUBB	1,505	1,421
11 SHS ABBOTT	655	796
10 SHS ABBVIE	942	922
8 SHS APPLE	1,589	1,262
10 SHS DISNEY	1,117	1,096
10 SHS ECOLAB	1,472	1,473
5 SHS EMERSON	347	299
10 SHS FISERV	722	735
12 SHS FORTINET	689	845
8 SHS IDEXX	1,587	1,488
8 SHS ILLINOIS TOOL	1,262	1,014
10 SHS JP MORGAN CHASE	1,128	976
70 SHS JOHNSON & JOHNSON	10,342	9,034
5 SHS LIGAND PHARMACEUTICALS	860	679
7 SHS LINCOLN NATIONAL	491	359

Investments Corporation Stock Schedule

Name of Stock	End of Year Book Value	End of Year Fair Market Value
3 SHS MCDONALDS	488	533
22 SHS ORACLE	1,027	993
10 SHS PNC FINANCIAL	1,423	1,169
4 SHS PFIZER	146	175
7 SHS WALGREENS	462	478
30 SHS BANK OF AMERICA	873	739

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491135032429

TY 2018 Investments - Other Schedule

Name: TAMARACK FOUNDATION

EIN: 04-6027800

Investments Other Schedule 2

Category/ Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value
NORTHWESTERN MUTUAL LIFE INS. POLICY-500M	AT COST	739,915	879,100

TY 2018 Other Decreases Schedule

Name: TAMARACK FOUNDATION

EIN: 04-6027800

Description	Amount
ROUNDING ADJUSTMENT	5

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TY 2018 Other Expenses Schedule

Name: TAMARACK FOUNDATION

EIN: 04-6027800

Other Expenses Schedule

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
MASS PC ANNUAL FILING FEE	35	0		35

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TY 2018 Other Professional Fees Schedule

Name: TAMARACK FOUNDATION

EIN: 04-6027800

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
TRUSTEES/INVESTMENT MANAGEMENT FEES	2,390	1,593		797

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TY 2018 Taxes Schedule

Name: TAMARACK FOUNDATION

EIN: 04-6027800

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
FEDERAL PVT FOUNDATION EXCISE TAX	1,421	0		0

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Schedule B (Form 990, 990-EZ, or 990-PF)
Department of the Treasury
Internal Revenue Service

Schedule of Contributors

▶ Attach to Form 990, 990-EZ, or 990-PF
▶ Go to *www.irs.gov/Form990* for the latest information

OMB No 1545-0047

2018

Name of the organization
TAMARACK FOUNDATION

Employer identification number
04-6027800

Organization type (check one)

Filers of:	Section:
Form 990 or 990-EZ	☐ 501(c)( ) (enter number) organization
	☐ 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation
	☐ 527 political organization
Form 990-PF	☑ 501(c)(3) exempt private foundation
	☐ 4947(a)(1) nonexempt charitable trust treated as a private foundation
	☐ 501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule.**
Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See instructions

General Rule

☑ For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling $5,000 or more (in money or other property) from any one contributor Complete Parts I and II See instructions for determining a contributor's total contributions

Special Rules

☐ For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of **(1)** $5,000 or **(2)** 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1 Complete Parts I and II

☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than $1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals Complete Parts I, II, and III

☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc , purposes, but no such contributions totaled more than $1,000 If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc , purpose Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc , contributions totaling $5,000 or more during the year . . . . . ▶ $ _____

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

Name of organization
TAMARACK FOUNDATION

Employer identification number
04-6027800

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
	See Additional Data Table	$	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contribution)
		$	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contribution)
		$	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contribution)
		$	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contribution)
		$	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contribution)
		$	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contribution)

Name of organization
TAMARACK FOUNDATION

Employer identification number
04-6027800

Part II **Noncash Property** (See instructions) Use duplicate copies of Part II if additional space is needed

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
	See Additional Data Table	$	

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		$	

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		$	

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		$	

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		$	

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		$	

Name of organization	Employer identification number
TAMARACK FOUNDATION	04-6027800

Part III *Exclusively* religious, charitable, etc., contributions to organizations described in section 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* religious, charitable, etc., contributions of **$1,000 or less** for the year. (Enter this information once. See instructions.) ▶ $ ____________

Use duplicate copies of Part III if additional space is needed

(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

(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

(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

(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

Additional Data

Software ID:
Software Version:
EIN: 04-6027800
Name: TAMARACK FOUNDATION

Form 990 Schedule B, 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	JEANNETTE MCGINN WOODSTOCK SVCS CO LLC101 ARCH ST ST BOSTON, MA 02110	$ 28,961	Person ☐ Payroll ☐ Noncash ☑ (Complete Part II for noncash contributions)
2	ESTHER D MULROY WOODSTOCK SVCS CO LLC101 ARCH ST ST BOSTON, MA 02110	$ 30,163	Person ☐ Payroll ☐ Noncash ☑ (Complete Part II for noncash contributions)
3	SARAH PRUETT WOODSTOCK SVCS CO LLC101 ARCH ST ST BOSTON, MA 02110	$ 16,021	Person ☐ Payroll ☐ Noncash ☑ (Complete Part II for noncash contributions)
4	KATHY D WALKER WOODSTOCK SVCS CO LLC101 ARCH ST ST BOSTON, MA 02110	$ 11,234	Person ☐ Payroll ☐ Noncash ☑ (Complete Part II for noncash contributions)
5	NELSON J DARLING WOODSTOCK SVCS CO LLC101 ARCH ST ST BOSTON, MA 02110	$ 31,276	Person ☐ Payroll ☐ Noncash ☑ (Complete Part II for noncash contributions)
6	THOMAS J MULROY WOODSTOCK SVCS CO LLC101 ARCH ST ST BOSTON, MA 02110	$ 10,270	Person ☐ Payroll ☐ Noncash ☑ (Complete Part II for noncash contributions)

Form 990 Schedule B, 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
7	WALKER R PRUETT WOODSTOCK SVCS CO LLC101 ARCH ST ST BOSTON, MA 02110	$ 5,054	Person ☐ Payroll ☐ Noncash ☑ (Complete Part II for noncash contributions)

Form 990 Schedule B, Part II - Noncash Property (see Instructions) Use duplicate copies of Part II if additional space is needed

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
1	208 SHS ABBVIECUSIP# 00287Y109	$ 20,522	2018-06-01
1	90 SHS ABBVIECUSIP# 00287Y109	$ 8,439	2018-12-03
2	90 SHS DISNEYCUSIP# 254687106	$ 10,181	2017-10-26
2	110 SHS MICROSOFTCUSIP# 594918104	$ 11,743	2018-10-26
2	60 SHS JOHNSON & JOHNSONCUSIP# 478160104	$ 8,239	2018-10-26
3	110 SHS JOHNSON & JOHNSONCUSIP# 478160104	$ 16,021	2018-11-16
4	22 SHS INTUITIVE SURGICALCUSIP# 46120E602	$ 11,234	2018-11-28
5	11 CHS CHUBBCUSIP# H1467J104	$ 1,505	2018-04-17
5	11 SHS ABBOTT LABSCUSIP# 002824100	$ 655	2018-04-17
5	5 SHS ABBVIECUSIP# 00287Y109	$ 467	2018-04-17

Form 990 Schedule B, Part II - Noncash Property (see Instructions) Use duplicate copies of Part II if additional space is needed

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
5	1 SH BANK OF AMERICACUSIP# 060505104	$ 30	2018-04-17
5	9 SHS CISCO SYSTEMSCUSIP# 17275R102	$ 398	2018-04-17
5	13 SHS DISNEYCUSIP# 254687106	$ 1,322	2018-04-17
5	10 SHS ECOLABCUSIP# 278865100	$ 1,472	2018-04-17
5	5 SHS EMERSON ELECTRICCUSIP# 291011104	$ 347	2018-04-17
5	10 SHS FISERVCUSIP# 337738108	$ 722	2018-04-17
5	12 SHS FORTINETCUSIP# 34959E109	$ 689	2018-04-17
5	4 SHS GENERAL ELECTRICCUSIP# 369604103	$ 52	2018-04-17
5	11 SHS IDEXX LABSCUSIP# 45168D104	$ 2,182	2018-04-17
5	8 SHS ILLINOIS TOOL WORKSCUSIP# 452308109	$ 1,262	2018-04-17

Form 990 Schedule B, Part II - Noncash Property (see Instructions) Use duplicate copies of Part II if additional space is needed

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
5	7 SHS LINCOLN NATIONALCUSIP# 534187109	$ 491	2018-04-17
5	3 SHS MCDONALDSCUSIP# 580135101	$ 488	2018-04-17
5	8 SHS MERCKCUSIP# 58933Y105	$ 476	2018-04-17
5	15 SHS MICROSOFTCUSIP# 594918104	$ 1,436	2018-04-17
5	10 SHS O'REILLYCUSIP# 67103H107	$ 2,254	2018-04-17
5	22 SHS ORACLECUSIP# 68389X105	$ 1,027	2018-04-17
5	10 SHS PNCCUSIP# 693475105	$ 1,423	2018-04-17
5	15 SHS PEPSICOCUSIP# 713448108	$ 1,628	2018-04-17
5	4 SHS PZEIFERCUSIP# 717081103	$ 146	2018-04-17
5	7 SHS WALGREENCUSIP# 931427108	$ 462	2018-04-17

Form 990 Schedule B, Part II - Noncash Property (see Instructions) Use duplicate copies of Part II if additional space is needed

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
5	70 SHS JOHNSON & JOHNSONCUSIP# 478160104	$ 10,342	2018-12-12
6	230 SHS COCA COLACUSIP# 191216100	$ 10,270	2018-04-18
7	115 SHS COCA COLACUSIP# 191216100	$ 5,054	2018-04-11