Return of Private Foundation

OMB No 1545-0052

▶ 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. For calendar year 2018 or tax year beginning , and ending

2949113810410 9

· Nar	ne of foundation			A Employer identification	number
C	LERMONT FOUNDATION			04-6772671	
	The and street (or PO box number if mail is not delivered to street ad	ldress)	Room/suite	B Telephone number	
	O HOWARD COX, 200 SEAPORT		S7A	(617) 563-	1900
			D/A	· · · · · · · · · · · · · · · · · · ·	
	or town, state or province, country, and ZIP or foreign poosTON, MA 02210	stal code		C If exemption application is pe	nding, check here
G C	Check all that apply: Initial return	Initial return of a fo	rmer public charity	D 1 Foreign organizations	, check here
	Final return	Amended return		2 Faraign arganizations may	street the REP4 test
	Address change	Name change		2 Foreign organizations mee check here and attach cor	nputation
H C	Check type of organization: X Section 501(c)(3) execute X	• •	. 1.	E If private foundation stat	us was terminated
	Section 4947(a)(1) nonexempt charitable trust (Other taxable private founda	tion 104	under section 507(b)(1)((A), check here
i Fa	ur market value of all assets at end of year J Accountin	ig method, X Cash	Accrual	F If the foundation is in a 6	60-month termination
(fr		ner (specify)		under section 507(b)(1)((B), check here
	\$ 19,460,046. (Part I, colum	n (d) must be on cash basis	5.)		
Pa r	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 income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
	1 Contributions, gifts, grants, etc., received	2,143,980.			
1	2 Check If the foundation is not required to attach Sch. B				
	Interest on savings and temporary 3 cash investments	-			
	4 Dividends and interest from securities 1	384,696.	384,696.		STATEMENT 1
	5a Gross rents $\c C$				
	b Net rental income or (loss)				
	6a Net gain or (loss) from sale of assets not on line 10	3,615,387.		A. 1	ļ
nge L	b Gross sales price for all 3,732,601.			REC	FIVED
Revenue	7 Capital gain net income (from Part IV, line 2)		3,615,387.		
ď	8 Net short-term capital gain			12	OSC T
	9 Income modifications			B WAY	1 0 2019
	Gross sales less returns and allowances			<u> </u>	<u> </u>
	b Less Cost of goods sold			030	EN UT
	c Gross profit or (loss)				
	11 Other income		·		• or
	12 Total Add lines 1 through 11	6,144,063.	4,000,083.	0.	, ,
	13 Compensation of officers, directors, trustees, etc	0.	0.	0.	0.
	14 Other employee salaries and wages				
	15 Pension plans, employee benefits				
ses					0.510
en Cen	b Accounting fees STMT 2	2,719.	0.	0.	2,719.
×	c Other professional fees STMT 3	25,000.	25,000.	0.	0.
<u>ĕ</u> .	17 Interest	101 545		0	
тat	18 Taxes STMT 4	121,545.	0.	0.	0.
S	19 Depreciation and depletion				
Q	20 Occupancy				
Z	21 Travel, conferences, and meetings		-		
Z	22 Printing and publications	1 000	0.	0.	1 000
NOT CHANNEDS	23 Other expenses STMT 5	1,000.	<u>U.</u>	J •	1,000.
يا عوال	24 Total operating and administrative	150,264.	25,000.	0.	2 710
	expenses Add lines 13 through 23	3,032,225.	23,000.	- ,	3,719. 3,032,225.
12	, , , , ,	3,032,2630			3,332,223.
4	26 Total expenses and disbursements	3,182,489.	25,000.	0.	3,035,944.
4 2019	Add lines 24 and 25	3,102,403.	23,000.	0.	J, UJJ, J44.
吕	27 Subtract line 26 from line 12:	2,961,574.		11 A 40 MAG	سويه ١
9	Excess of revenue over expenses and disbursements Net investment income (if pagetive enter (0.))	, JUL, J/4•	3,975,083.	- 4	3
	b Net investment income (if negative, enter -0-)		* 5 6	0.	
	C Adjusted net income (if negative, enter -0-)	· •	- This	1 0 •	

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Part II Balance Sheets Attached schedules and amounts in the description column should be for end-of year amounts only (a) Book Value (b) Book Value	(c) Fair Market Value
4 Cook non-interest heaving	l l
1 Cash - non-interest-bearing	
2 Savings and temporary cash investments 18,075,238. 19,010,0	46. 19,010,046.
3 Accounts receivable ▶	
Less; allowance for doubtful accounts	
4 Pledges receivable	
Less: allowance for doubtful accounts	
5 Grants receivable	
6 Receivables due from officers, directors, trustees, and other	
disqualified persons	
7 Other notes and loans receivable	
Less: allowance for doubtful accounts \	
g 8 Inventories for sale or use	
9 Prepaid expenses and deferred charges	
10a investments - 0.5. and state government obligations	
b Investments - corporate stock STMT 7 207,574. 105,0	00. 450,000.
c Investments - corporate bonds	
11 Investments - land, buildings, and equipment basis	
Less accumulated depreciation	
12 Investments - mortgage loans	
13 Investments - other	
14 Land, buildings, and equipment: basis	
Less accumulated depreciation	
15 Other assets (describe ►)	
16 Total assets (to be completed by all filers - see the	10 100 016
instructions. Also, see page 1, item I) 18, 282, 812. 19, 115, 0	46. 19,460,046.
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 22 Other liabilities (describe	
21 Mortgages and other notes payable 22 Other liabilities (describe	i
22 Other habitates (describe >	i
23 Total liabilities (add lines 17 through 22)	0.
Foundations that follow SFAS 117, check here	1
and complete lines 24 through 26, and lines 30 and 31.]
24 Unrestricted	
25 Temporarily restricted	
26 Permanently restricted	
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 18, 282, 812, 19, 115, 0]
and complete lines 27 through 31	
27 Capital stock, trust principal, or current funds 18,282,812. 19,115,0	
28 Paid-in or capital surplus, or land, bldg., and equipment fund 29 Retained earnings, accumulated income, endowment, or other funds 0 •	0.
29 Retained earnings, accumulated income, endowment, or other funds	0.
30 Total net assets or fund balances 18,282,812. 19,115,0	40.
31 Total liabilities and net assets/fund balances 18,282,812. 19,115,0	46
	20.
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 18,282,812.
2 Enter amount from Part I, line 27a	2 2,961,574.
3 Other increases not included in line 2 (itemize) ▶	3 0.
4 Add lines 1, 2, and 3	4 21,244,386.
5 Decreases not included in line 2 (itemize) SEE STATEMENT 6	5 2,129,340.
6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30	6 19,115,046.

Part IV Capital Gains a	ind Losses for Tax on I		Income				9 077	ZO/I Tage 3
	he kind(s) of property sold (for exceptionse; or common stock, 200 s		te,	(b) H	ow acquired Purchase Donation	(c) Date (mo., c	acquired day, yr.)	(d) Date sold (mo., day, yr.)
1a 13,242 SHS MONS	SANTO COMPANY				D	VARI	OUS	01/17/18
b 12,000 SHS PALO		, INC.			D	VARI	OUS	12/21/18
C			·		_			
d								
<u>e</u>								
(e) Gross sales price	(f) Depreciation allowed (or allowable)		st or other basis expense of sale			(h) (((e) plu	Gain or (loss is (f) minus	(g))
a 1,576,909.	· -	.	102,57		· · · · ·			1,474,335.
b 2,155,692.			14,64	0.				2,141,052.
C								
<u>d</u>				-+				
Complete only for assets showing	a coin in column (h) and owned by	v the foundation	on 12/21/60	\rightarrow		(I) O (0-1 (5)	
Complete only for assets showing		_		\dashv	C		Col. (h) gain not less tha	
(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69		cess of col. (1) col. (1), if any		•		(from col. (
2			(,,,)					1,474,335.
a b		<u> </u>		-+				2,141,052.
C					-			2,111,032.
d								
e				\neg				
	(If gain, also en	ter in Part I, line	7	7			•	
2 Capital gain net income or (net cap		-0- in Part I, line	7	<i>}</i>	2			3,615,387.
3 Net short-term capital gain or (loss				ÍΓ				· -
If gain, also enter in Part I, line 8, o		uno (0).		ĴΙ				
If (loss), enter -0- in Part I, line 8					3			0.
	nder Section 4940(e) fo				stment Inc	come		
(For optional use by domestic private	foundations subject to the section	1 4940(a) tax on	net investment ind	come.)				
If section 4940(d)(2) applies, leave thi	is part blank.							
	•							
Was the foundation liable for the secti		, ,	•	od?				Yes X No
If "Yes," the foundation doesn't qualify 1 Enter the appropriate amount in ea				ntriac				
		mstructions ber	ore making any en			<u> </u>		(4)
(a) Base period years Calendar year (or tax year beginnin			Net value of no				Distrit (col. (b) div	bution ratio
2017		24,654.			988,47			.251968
2016	2,6	22,665.			739,29			.223409
2015	2,0	19,045.			023,35			.290252
2014		94,560. 39,250.			333,25 381,32			.411486
2013	1,4	39,250.		۷,	301,32	9.		.604389
2 Total of line 1, column (d)						2		1.781504
3 Average distribution ratio for the 5	year base period - divide the tota	al on line 2 by 5.0), or by the numbe	er of ye	ars			
the foundation has been in existen		•		•		3		.356301
	•							
4 Enter the net value of noncharitable	e-use assets for 2018 from Part X	K, line 5				4	1	8,081,246.
5 Multiply line 4 by line 3						5		6,442,366.
6 Enter 1% of net investment income	e (1% of Part I, line 27b)					6_	L	39,751.
	·							
7 Add lines 5 and 6						7	<u>L</u>	6,482,117.
8 Enter qualifying distributions from	Part XII, line 4					8	<u></u>	3,035,944.
If line 8 is equal to or greater than	line 7, check the box in Part VI. Iii	ne 1b, and comp	lete that part using	g a 1%	tax rate.			
See the Part VI instructions.								
823521 12-11-18							F	Form 990-PF (2018)

Form	990-PF (2018) CLERMONT NDATION		(04-	6772	671		Page -	4
	rt VI - Excise Tax Based on Investment Income (Section 4940)	a), 49	940(b)	, 4940(e)	or 49						<u>-</u>
	Exempt operating foundations described in section 4940(d)(2), check here and en				<u> </u>	<u> </u>	•				7
	Date of ruling or determination letter:									•	1
h	Domestic foundations that meet the section 4940(e) requirements in Part V, check here				,	1		7	9,5	02.	2
	of Part I, line 27b		una omo	. 170		Ė	1	<u> </u>		• • •	ì
c	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations, enter 4%	of Part	I. line 12	P. col. (b).	J						
	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only; oth			., (5).		2				0.	4
	Add lines 1 and 2	,	o. o ,			3		7	9,5	02.	-
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only, of	iers. en	ter -0-)			4				0.	-
5	Tax based on investment income Subtract line 4 from line 3. If zero or less, enter -0-	,	,			5		7	9,5	02.	-
6	Credits/Payments:										Ì
	2018 estimated tax payments and 2017 overpayment credited to 2018	6a		70,0	000.						l
	Exempt foreign organizations - tax withheld at source	6b			0.	1					ŀ
C	Tax paid with application for extension of time to file (Form 8868)	6c			0.	1					
d	Backup withholding erroneously withheld	6d			0.	1					1
	Total credits and payments. Add lines 6a through 6d	-		_		7		7	0,0	00.	-
8	Enter any penalty for underpayment of estimated tax. Check here X if Form 2220 is attack	hed				8				0.	-
	Tax due If the total of lines 5 and 8 is more than line 7, enter amount owed					9			9,5	02.	-
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			Refund	led 🖊	11					-
Pa	rt VII-A Statements Regarding Activities										_
1a	During the tax year, did the foundation attempt to influence any national, state, or local legisla	ition or	did it pa	rticipate or in	itervene	ın			Yes	No	_
	any political campaign?							1a		Х	_
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purpositions	es? See	the inst	ructions for t	he defin	ition		1b		Х	_
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of	any m	aterials p	ublished or							1
	distributed by the foundation in connection with the activities.										J
C	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										1
	(1) On the foundation. > \$ (2) On foundation managers.	\$			0.	_					
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditi	ıre tax	ımposed	on foundation	n			;			
	managers. ► \$ 0 .]
2	Has the foundation engaged in any activities that have not previously been reported to the IR	5?						2		Х	-
	If "Yes," attach a detailed description of the activities.										
3	Has the foundation made any changes, not previously reported to the IRS, in its governing in	strume	nt, artıcle	s of incorpo	ation, o	r]
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes							3		X	_
	Did the foundation have unrelated business gross income of \$1,000 or more during the year	•						4a		X	_
	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		Х	-
	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 eith	er:									ł
	By language in the governing instrument, or]
	By state legislation that effectively amends the governing instrument so that no mandatory	directio	ons that o	conflict with t	he state	law					i
	remain in the governing instrument?							6	X		-
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," comple	te Part	II, col. (c), and Part λ	(V			7	X		7
											l
8a	Enter the states to which the foundation reports or with which it is registered. See instruction	s. P	 .								l
	MA										1
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Att	orney (eneral (or designate)			j		 _	-	J
_	of each state as required by General Instruction G2 If "No," attach explanation				_		ļ	8b	X		7
	Is the foundation claiming status as a private operating foundation within the meaning of sec			or 4942(j)(5)	for cale	ndar				 -	٦,
	year 2018 or the tax year beginning in 2018? See the instructions for Part XIV. If "Yes," comp	lete Pai	rt XIV					9		X	_/
	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule						ŀ	10		X	- ر

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Pa	rt VII-A Statements Regarding Activities (continued)			
			Yes	No
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of			_
	section 512(b)(13)? If "Yes," attach schedule. See instructions	11		X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges?			
_	If "Yes," attach statement. See instructions	12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Х	
	Website address ► N/A			
14	The books are in care of ► BROWN ADVISORY CORP Telephone no. ► (857)	244	-22	02
	Located at ▶ 100 HIGH STREET, 27TH FLOOR, BOSTON, MA ZIP+4 ▶02			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here		_	П
	and enter the amount of tax-exempt interest received or accrued during the year	N	/A	
16	At any time during calendar year 2018, did the foundation have an interest in or a signature or other authority over a bank,		Yes	No
	securities, or other financial account in a foreign country?	16		X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the	-"		 1
	foreign country			
Pa	irt VII-B Statements Regarding Activities for Which Form 4720 May Be Required	لـــــــــــــــــــــــــــــــــــــ		'
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.	Т	Yes	No
10	During the year, did the foundation (either directly or indirectly):			
Ια	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes X No			1
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			ľ
	a disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes X No			1
	(5) Transfer any income or assets to a disqualified person (or make any of either available			1
	for the benefit or use of a disqualified person)?			
				1
	(6) Agree to pay money or property to a government official? (Exception. Check "No"			1
	if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.) Yes X No			
	<u> </u>			1
D	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions N/A	1b		—
		10		 i
_	Organizations relying on a current notice regarding disaster assistance, check here			1
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	1		$\overline{\mathbf{x}}$
•	before the first day of the tax year beginning in 2018?	1c		
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation			1
	defined in section 4942(j)(3) or 4942(j)(5)): 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]
a				1
				1
	If "Yes," list the years \(\bigsim			1
U	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach			!
	statement - see instructions.) N/A	2b		—
•	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.	20		
U		'		1
3.	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			1
Ja	during the year? Yes X No		İ	1
h	If "Yes," did it have excess business holdings in 2018 as a result of (1) any purchase by the foundation or disqualified persons after			1
U	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	1		i
	of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C,			1
	Form 4720, to determine if the foundation had excess business holdings in 2018.) N/A	3b		—
An	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	-	<u>x</u>
	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that	70		
U	had not been removed from jeopardy before the first day of the tax year beginning in 2018?	4b		$\overline{\mathbf{x}}$
		rm 99 0)-PF	
		550	•	(2010)

orm 990-PF (20					04-67726	71	Page 6
	Statements Regarding	<u> </u>	Form 4720 May Be R	ed (contin	ued)	IV	- N-
	year, did the foundation pay or i					Yes	No
		empt to influence legislation (sect			es X No		
` '		public election (see section 4955)	; or to carry on, directly or indire		es X No		
•	ter registration drive?	unt aturdu ar athar armilar arrena			es X No		
		vel, study, or other similar purpos		Te	ES A NO		
	•	er than a charitable, etc., organiza	non described in section	[es X No		
=	l)(4)(A)? See instructions	igious, charitable, scientific, litera	ry or aducational nurnocae or f		5 <u>[21]</u> NO		
` '	vention of cruelty to children or	• • • • • • • • • • • • • • • • • • • •	ry, or educational purposes, or r		es X No		li
•	•	of the transactions fail to qualify	under the exceptions described i		.0 (==).00		
•		rding disaster assistance? See ins			N/A	ib	
		garding disaster assistance, chec					
-		es the foundation claim exemption		ned			
	responsibility for the grant?	·		I/A 🔲 Ye	es 🔲 No		
If "Yes," atta	ach the statement required by R	egulations section 53.4945-5(d).					{
6a Did the four	ndation, during the year, receive	any funds, directly or indirectly,	to pay premiums on				{
a personal t	penefit contract?			Ye	es 🗶 No 📙		<u> </u>
b Did the four	ndation, during the year, pay pro	emiums, directly or indirectly, on	a personal benefit contract?		_ 6	Sb	X
	b, file Form 8870.					į.	
•	• • •	undation a party to a prohibited ta		Ye	es X No	.	—
•		ceeds or have any net income attr			N/A	'b	
	pation subject to the section 496 achute payment(s) during the ye	60 tax on payment(s) of more that	n \$ 1,000,000 in remuneration or		es X No		
Part VIII		officers, Directors, Trus	stees. Foundation Mar		:5 [21] NU		L
	Paid Employees, and	d Contractors	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				
1 List all offic	ers, directors, trustees, ar	nd foundation managers and	their compensation.				
	(a) Nama and add	draga	(b) Title, and average hours per week devoted	(c) Compensation (If not paid,	(d) Contributions to employee benefit plans and deferred	(e) Exp account,	ense other
-	(a) Name and add	uress	to position	enter -0-)	and deterred compensation	allowa	nces
HOWARD E			TRUSTEE		,		
	PORT BLVD., S7A	<u> </u>					•
BOSTON,	MA 02210		2.00	0.	0.		0.
			_				
		·					
							
	-						
		- -		ļ			
2 Compensa	tion of five highest-paid en	nployees (other than those in		enter "NONE."	(d) Contributions to	(a) [:	
(a) Nan	ne and address of each employe	ee paid more than \$50,000	(b) Title, and average hours per week	(c) Compensation	employee benefit plans and deferred	(e) Exp account,	ense , other
37/	NTE		devoted to position		compensation	allowa	nces
NC	ONE		_				
				1			
· ·							
		·····					
					-		
					<u> </u>		
					<u> </u>		
Total number of	f other employees paid over \$50	0,000			>		0
					Form	990-PF	(2018)

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.

Amount

Amount

All other program-related investments. See instructions.

Total. Add lines 1 through 3

Form 990-PF (2018)

Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.) IPart X Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes: 450,000. a Average monthly fair market value of securities 1a 17,906,595. Average of monthly cash balances 1b c Fair market value of all other assets 10 18,356,595. 1d d Total (add lines 1a, b, and c) Reduction claimed for blockage or other factors reported on lines 1a and 0. 1c (attach detailed explanation) 1e Acquisition indebtedness applicable to line 1 assets 356, 3 Subtract line 2 from line 1d 275,349 Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions) 4 18,081,246. 5 Net value of noncharitable-use assets Subtract line 4 from line 3. Enter here and on Part V, line 4 904,062. Minimum investment return Enter 5% of line 5 [Part:XII 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.) 904,062. Minimum investment return from Part X, line 6 79,502. Tax on investment income for 2018 from Part VI, line 5 Income tax for 2018. (This does not include the tax from Part VI.) 2b 79.502. 2¢ Add lines 2a and 2b 824,560. Distributable amount before adjustments. Subtract line 2c from line 1 3 Recoveries of amounts treated as qualifying distributions 4 560 Add lines 3 and 4 5 0. Deduction from distributable amount (see instructions) 6 560 Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1 [Part:XII] Qualifying Distributions (see instructions) Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes: 3,035,944. a Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26 1a Program-related investments - total from Part IX-B 1b Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes 2 Amounts set aside for specific charitable projects that satisfy the: a Suitability test (prior IRS approval required) 3a Cash distribution test (attach the required schedule) 3b 3,035,944. Qualifying distributions Add lines 1a through 3b. Enter here and on Part V, line 8; and Part XIII, line 4 4 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b 3,035, Adjusted qualifying distributions. Subtract line 5 from line 4 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

NDATION

CLERMONT

Form **990-PF** (2018)

4940(e) reduction of tax in those years.

Part XIII Undistributed Income (see instructions)

(a) (b) Corpus Years prior to 2017	(c) 2017	(d)
		2018
1 Distributable amount for 2018 from Part XI,		224 552
line 7		824,560.
2 Undistributed income, if any, as of the end of 2018	0.	
a Enter amount for 2017 only b Total for prior years:	- 0.	
o -		
3 Excess distributions carryover, if any, to 2018:		
a From 2013 1,387,519.		
b From 2014 2,009,408.		
c From 2015 2,343,575.		
d From 2016 2,113,676.		
e From 2017 2,999,775.		
f Total of lines 3a through e 10,853,953.		
4 Qualifying distributions for 2018 from		
Part XII, line 4: ► \$ 3,035,944.		
a Applied to 2017, but not more than line 2a	0.	
b Applied to undistributed income of prior		
years (Election required - see instructions)		
c Treated as distributions out of corpus (Election required - see instructions)		
(824,560.
d Applied to 2018 distributable amount e Remaining amount distributed out of corpus 2,211,384.		024,300.
5 Excess distributions carryover applied to 2018		0.
(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		
b Prior years' undistributed income. Subtract line 4b from line 2b		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed 0 •		
d Subtract line 6c from line 6b. Taxable		
amount - see instructions		
e Undistributed income for 2017. Subtract line	0	
4a from line 2a. Taxable amount - see instr.	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		1
corpus to satisfy requirements imposed by		
section 170(b)(1)(F) or 4942(g)(3) (Election		ŀ
may be required - see instructions) 0 •		
8 Excess distributions carryover from 2013		
not applied on line 5 or line 7		
9 Excess distributions carryover to 2019		Ī
Subtract lines 7 and 8 from line 6a 11,677,818.		
10 Analysis of line 9.		{
a Excess from 2014 2,009,408.		
b Excess from 2015 2,343,575.		
c Excess from 2016 2,113,676.		1
d Excess from 2017 2,999,775. e Excess from 2018 2,211,384.		
e Excess from 2018 2,211,384.		Form 990-PF (2018)

	r FONDATIO			04-6	772671 Page 10
Part XIV Private Operating Fo			-A, question 9)	N/A	
1 a If the foundation has received a ruling or	determination letter tha	t 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 found	ation is a private operati	ng foundation described i		4942(j)(3) or	4942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years		
income from Part I or the minimum	(a) 2018	(b) 2017	(c) 2016	(d) 2015	(e)/Tótal
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(i)(3)(B)(iii)					
(3) Largest amount of support from					
an exempt organization					
(4) Gross investment income					
Part:XV Supplementary Infor	mation (Comple	te this part only i	f the foundation	had \$5,000 or mo	ore in assets
at any time during th	ne year-see instr	ructions.)			
1 Information Regarding Foundation	n Managers:				
a List any managers of the foundation who	have contributed more	than 2% of the total cont	ributions received by the	foundation before the clo	se of any tax
year (but only if they have contributed m					
HOWARD E. COX JR					
b List any managers of the foundation who			or an equally large portio	n of the ownership of a p	partnership or
other entity) of which the foundation has	a 10% or greater intere	st.			
NONE					
2 Information Regarding Contribution					
Check here $ ightharpoonup \overline{\mathbf{X}}$ if the foundation of					uests for funds. If
the foundation makes gifts, grants, etc.,	to individuals or organiz	ations under other condit	ions, complete items 2a,	b, c, and d.	
a The name, address, and telephone numb	er or email address of the	ne person to whom applic	ations should be address	ed:	
h. The form in which applications should be	a cub mutted and informa	tion and materials they al	aculd include:		
b The form in which applications should be	e submitted and informa	ition and materials they si		• 	
c Any submission deadlines:					
d Any restrictions or limitations on awards	, such as by geographic	al areas, charitable fields,	kinds of institutions, or o	other factors:	
				-	
	<u>`</u>		 .	 	

3 Grants and Contributions Paid During the Ye	ar or Approved for Future f	Pavment		
Recipient	If recipient is an individual,		Durages of great or	
Name and address (home or business)	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				
BOSTON SYMPHONY ORCHESTRA 301 MASSACHUSETTS AVENUE		PC	GENERAL OPERATING	- · · · · · · · · · · · · · · · · · · ·
BOSTON, MA 02115				10,000.
BRIGHAM AND WOMEN'S HOSPITAL 75 FRANCIS STREET BOSTON, MA 02115		PC	GENERAL OPERATING	20,000.
BODION, III VELIS				20,000.
BUSINESS EXECUTIVES FOR NATIONAL SECURITY 1030 15TH STREET NW, SUITE 200 EAST		PC	GENERAL OPERATING	
WASHINGTON, DC 20005			-	50,000.
COLLEGIATE SCHOOL, INC.		PC	GENERAL OPERATING	
260 W 78TH STREET				2,000.
NEW YORK, NY 10024				2,000.
COUNCIL ON FOREIGN RELATIONS 58 E 68TH STREET		PC	GENERAL OPERATING	
NEW YORK, NY 10065	MINULAMION CHEE		N 0	150,000.
Total SEE CON b Approved for future payment	TINUATION SHEE	T(\$)	▶ 3a	3,032,225.
- Approved for future payment				
NONE		,		
				
Total		-	▶ 3b	0. orm 990-PF (2018)

5,000. 2,800,225.

1 N CLEMATIS STREET, SUITE 200 WEST PALM BEACH, FL 33401

Total from continuation sheets

CLERN	r FOUNDATION		04-07	72671
Part XV Supplementary Information Point Survivor the	Y (01)			1
3 Grants and Contributions Paid During the				
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
	or substantial contributor			
GRANT FOUNDATION INC., DBA HOSPITAL ALBERT SCHWEITZER HAITI		PC	GENERAL OPERATING	
2840 LIBERTY AVENUE NO 201				
PITTSBURGH , PA 15222				2,500.
,				=,,
HARVARD BUSINESS SCHOOL		₽C	GENERAL OPERATING	
SOLDIERS FIELD				
BOSTON, MA 02163				1,000,000.
HARVARD UNIVERSITY		₽C	GENERAL OPERATING	
1033 MASSACHSETTS AVENUE, SUITE 3				
CAMBRIDGE, MA 02138				210,000.
HOPE FOR DEPRESSION RESEARCH		PC	GENERAL OPERATING	
40 W 57TH STREET, SUITE 1440 NEW YORK , NY 10019				1,000.
NEW TORK , NI TOOTS				1,000.
TINED CLEV COVOLADOVIA DIDE				
INNER-CITY SCHOLARSHIP FUND 1011 FIRST AVENUE, SUITE 1800		PC	GENERAL OPERATING	
NEW YORK, NY 10022				5,000.
INVEST IN GIRLS, INC.		PC	GENERAL OPERATING	
125 LAKE STREET				
SHERBORN, MA 01770				40,000.
MASSACHUSETTS GENERAL HOSPITAL 125 NASHUA STREET, SUITE 540		PC	GENERAL OPERATING	
BOSTON, MA 02114				1,000.
MORRIS MUSEUM OF ART		PC	GENERAL OPERATING	
1 TENTH STREET, SUITE 320				
AUGUSTA , GA 30901				5,000.
MUSEUM OF FINE ARTS BOSTON		₽C	GENERAL OPERATING	
465 HUNTINGTON AVENUE			SHARKAH OFEKATING	
BOSTON, MA 02115				345,425.
NEW ENGLAND HISTORIC GENEALOGICAL		PC	GENERAL OPERATING	
SOCIETY				
101 NEWBURY STREET				
BOSTON, MA 02116				2,500.
Total from continuation sheets		·		

Part XV Supplementary Inform	FOUNDATION		0 7	72071
3 Grants and Contributions Paid During the Ye	ear (Continuation)			-
Recipient	If recipient is an individual,	Foundation	Purpose of grant or	
Name and address (home or business)	show any relationship to any foundation manager or substantial contributor	status of recipient	contribution	Amount
NORTON MUSEUM OF ART		PC	GENERAL OPERATING	
1451 S OLIVE AVENUE				
WEST PALM BEACH, FL 33401				45,000.
PIONEER INSTITUTE		₽C	GENERAL OPERATING	
185 DEVONSHIRE STREET, SUITE 1101				
BOSTON, MA 02110				1,500.
PRINCETON PROSPECT FOUNDATION PO BOX 15		PC	GENERAL OPERATING	
PRINCETON, NJ 08542				250,000.
PRINCETON UNIVERSITY		PC	GENERAL OPERATING	
PO BOX 291				
PRINCETON, NJ 08544		-	-	35,050.
PROSTATE CANCER FOUNDATION		PC	GENERAL OPERATING	
1250 FOURTH STREET			DENDINE OF BRUITING	
SANTA MONICA, CA 90401				25,000.
QUOGUE JUNIOR THEATER TROUPE		PC	GENERAL OPERATING	
BOX 427 QUOGUE, NY 11959				2,500.
REHAB CENTER FOR CHILDREN AND ADULTS		PC	GENERAL OPERATING	
300 ROYAL PALM WAY				5 500
PALM BEACH, FL 33480				5,500.
SOCIETY OF THE FOUR ARTS		₽C	GENERAL OPERATING	
FOUR ARTS PLAZA				
PALM BEACH, FL 33480				10,000.
SOUTH FLORIDA SCIENCE CENTER AND		PC	GENERAL OPERATING	
AQUARIUM				
4801 DREHER TRAIL N WEST PALM BEACH, FL 33405				150,000.
SOUTHAMPTON HOSPITAL FOUNDATION		PC	GENERAL OPERATING	
240 MEETING HOUSE LANE]		
SOUTHAMPTON, NY 11968 Total from continuation sheets		1		2,000.

04-6772671

Part XV Supplementary Informa	TOUNDATION		<u> </u>	72071
3 Grants and Contributions Paid During the	Year (Continuation)			
. Recipient	If recipient is an individual, show any relationship to	Foundation	Purpose of grant or	
Name and address (home or business)	any foundation manager or substantial contributor	status of recipient	contribution	Amount
CO ANDREW'S DIRECT SHIPCH		na	CENTRAL OPERATING	
ST ANDREW'S DUNE CHURCH PO BOX 1245		PC	GENERAL OPERATING	
SOUTHAMPTON, NY 11968				3,800
·				<u> </u>
ST ANN'S EPISCOPAL CHURCH		PC	GENERAL OPERATING	
РО ВОХ 961				
BRIDGEHAMPTON, NY 11932				6,000
ST CHRISTOPHER'S EPISCOPAL CHURCH		na	GENERAL OPERATING	
1063 HAVERHILL ROAD		PC	GENERAL OPERATING	
WEST PALM BEACH, FL 33417	-			1,000
ST MARK'S EPISCOPAL CHURCH		PC	GENERAL OPERATING	
40 MAIN STREET WESTHAMPTON BEACH, NY 11978				2,000
,				
SUFFOLK COUNTY POLICE ATHLETIC		PC	GENERAL OPERATING	
LEAGUE, INC. PO BOX 26				
YAPHANK, NY 11980				150,
THE ASPEN INSTITUTE		PC	GENERAL OPERATING	
1 DUPONT CIRCLE NW, SUITE 700			SENERAL OF ERATING	
WASHINGTON, DC 20036				204,000
THE BROOKINGS INSTITUTION		PC	GENERAL OPERATING	
1775 MASSACHUSETTS AVENUE NW WASHINGTON, DC 20036				200,000
minimoton, be 20000				200,000
THE COMMON GOOD INSTITUTE, INC.		PC	GENERAL OPERATING	
ONE METROTECH CENTER, SUITE 1703			SENERAL OF ERATING	
BROOKLYN, NY 11201				1,000
THE ORDER OF ST JOHN		PC PC	GENERAL OPERATING	
1850 M STREET, SUITE 1070				
WASHINGTON, DC 20036	 			1,000.
THE PERLMAN MUSIC PROGRAM, INC.		РC	GENERAL OPERATING	
19 WEST 69TH STREET, SUITE 1101				2 000
NEW YORK, NY 10023 Total from continuation sheets		<u> </u>		2,000.

	FOUNDATION		04-67	72671
Part XV Supplementary Informa				
3 Grants and Contributions Paid During the Ye				
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
THE PRESERVATION FOUNDATION OF PALM		PC	GENERAL OPERATING	
11 PERUVIAN AVENUE				
ALM BEACH , FL 33480				14,500.
HE PRESIDENT AND FELLOWS OF HARVARD ' NIVERSITY (HKS DEAN'S COUNCIL) 9 JOHN F KENNEDY STREET		PC ·	GENERAL OPERATING	
AMBRIDGE, MA 02138				25,000.
THE SHINNECOCK HILLS EDUCATIONAL FUND		PC	GENERAL OPERATING	
SOUTHAMPTON, NY 11968				1,000.
THE SOCIETY OF THE CINCINNATI		PC	GENERAL OPERATING	
ASHINGTON, DC 20008				1,000.
HE WHITE HOUSE HISTORICAL SSOCIATION 40 JACKSON PLACE NW		₽C	GENERAL OPERATING	
ASHINGTON , DC 20006				10,000.
STA FOUNDATION INCORPORATED 0 W RED OAK LANE		PC	GENERAL OPERATING	
HITE PLAINS , NY 10604		_		25,000.
VEST PALM BEACH POLICE BENEVOLENT USSOCIATION 1100 N FLORIDA MANGO ROAD		PC	GENERAL OPERATING	
EST PALM BEACH, FL 33409				100.
ESTHAMPTON BEACH HISTORICAL SOCIETY		PC	GENERAL OPERATING	
ESTHAMPTON BEACH, NY 11978				1,000.
OOLOGICAL SOCIETY OF THE PALM EACHES, INC.		PC	GENERAL OPERATING	
301 SUMMIT BLVD EST PALM BEACH, FL 33405				6,000.
Total from continuation should				
Total from continuation sheets				<u> </u>

Part XVI-A

Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated.	Unrelated t	usiness income		by section 512, 513, or 514	(e)
•	(a) Business	(b) Amount	Exclu- sion	(d) Amount	Related or exempt function income
1 Program service revenue:	code	7 117100111	code	Amount	
a					
b	_			_	
c	_				
d	I I				· · · · · · · · · · · · · · · · · · ·
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	384,696.	
5 Net rental income or (loss) from real estate:		• •		,	a
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	3,615,387.	
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	•	4,000,083.	0.
13 Total Add line 12, columns (b), (d), and (e)				13	4,000,083.
(See worksheet in line 13 instructions to verify calculations.	.)				
Part XVI-B Relationship of Activities	s to the Accom	nlishment of F	vemnt Di	urnosas	
Tare At D Treatment of Addition		phoninent of L	xompt i		
Line No Explain below how each activity for which ii	ncome is reported in c	olumn (e) of Part XVI	-A contribute	ed importantly to the accomp	lishment of
▼ the foundation's exempt purposes (other th	an by providing funds	for such purposes).			
T					

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).
	·

Form **990-PF** (2018)

CLERMONT F Part XVIII Information Regarding Transfers to and Transactions and Relationships With Noncharitable

	Exempt Organ	izations			
(other ti a Transfe (1) Cas (2) Oth b Other tr (1) Sal (2) Pui (3) Rei (4) Rei (5) Loo (6) Pei c Sharing d If the ar or servi	organization directly or indification section 501(c)(3) organizes from the reporting foundation of the respective section is an actions: les of assets to a noncharital rechases of assets from a nointal of facilities, equipment, imbursement arrangements and or loan guarantees reformance of services or me to of facilities, equipment, mainswer to any of the above is ces given by the reporting for	rectly engage in any of the following izations) or in section 527, relating ation to a noncharitable exempt or ble exempt organization incharitable exempt organization or other assets Imbership or fundraising solicitation in lists, other assets, or paid em "Yes," complete the following schemes	g to political organizations? ganization of: ons nployees edule. Column (b) should alwa ed less than fair market value	described in section 501(c) ays show the fair market value of the good in any transaction or sharing arrangement	
	(b) Amount involved	· · · · · · · · · · · · · · · · · · ·		(d) Description of transfers, transcations, as	ad charing arrangements
a) Line no	(b) Amount involved	(c) Name of noncharitable	e exempt organization	(d) Description of transfers, transactions, ar	io snaring arrangements
		N/A	· <u>-</u> .		
· †·					
			· · · · · · · · · · · · · · · · · · ·		
					
				ļ	
-					
			 		
On lothof	augustus directly or indirect	the officered with or related to one	or mare toy evernat ereasize	trans described	
	-	tly affiliated with, or related to, one	e or more tax-exempt organiza	mons described	
	, , ,	n 501(c)(3)) or in section 527?			Yes X No
b If "Yes,"	complete the following sch				
	(a) Name of org	janization	(b) Type of organization	(c) Description of relation	nship
	N/A		[]		
					
	·		 		
	-		 		
1.3			<u> </u>		
		that I have examined this return, including include Declaration of preparer (other than		ements, and to the best of my knowledge	May the IRS discuss this
Sign L		A community of the party of the control of the cont	1.11.12.2	N of which propaga has any knowledge	May the IRS discuss this return with the preparer shown below? See instr
Here			4110110	PRESIDENT	X Yes No
Is	ignature of officer or trustee	//	Date /	Title	
	Print/Type preparer's na	<u></u>		Date Check If PTI	N
	Time type proparer 5 tie	inoparer s s	g	self- employed	••
Daid			LV. Drazion		00010054
Paid	FRANK GRAZ				00218274
Prepare		CEWATERHOUSECOO	PERS, LLP	Firm's EIN ► 13-	4008324
Use Only	у				
	Firm's address ▶ 1 ∩	1 SEAPORT BLVD			
				Phono no /617) 530-5000
	I BU	STON, MA 02210		Phone no. (617	
					Form 990-PF (2018)

823622 12-11-18

Schedule B

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

Department of the Treasury Internal Revenue Service

Name of the organization



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

OMB No 1545 0047

2018

Employer identification number

Schedule B (Form 990, 990-EZ, or 990-PF) (2018)

04-6772671 CLERMONT FOUNDATION Organization type (check one) Section: Filers of: 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 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** X For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions **Special Rules** For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000, or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1 Complete Parts I and II For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), 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 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

LHA For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF.

Employer identification number

CLERMONT FOUNDATION

Name of organization

04-6772671

Part I	Contributors (see instructions) Use duplicate copies of Part I if addition	nal space is needed	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	HOWARD E COX JR 200 SEAPORT BLVD., S7A BOSTON, MA 02210	\$ 2,143,980.	Person Payroll Oncash X Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		- - - -	Person Payroll 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)
(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 Occash (Complete Part II for noncash contributions)

823452 11-08-18

Schedule B (Form 990, 990-EZ, or 990-PF) (2018)

Schedule B (Form 990, 990-EZ, or 990-PF) (20 Name of organization



Employer identification number

CLERMONT FOUNDATION

04-6772671

Part II	Noncoh Proporty (see materials) Her distants assess of D		-0772071
	Noncash Property (see instructions) Use duplicate copies of Pa	art II it additional space is needed	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
	12,000 SHS PALO ALTO NETWORKS		
1			
		<u> </u>	12/20/18
(a)		(c)	
No.	(b)	FMV (or estimate)	(d)
from Part I	Description of noncash property given	(See instructions)	Date received
art.			
			
(a)		(c)	
No. from	(b) Description of noncash property given	FMV (or estimate)	(d)
Part I	Description of noncash property given	(See instructions)	Date received
		<u> </u>	
		\$	
(a)		(0)	***************************************
No.	(b)	(c) FMV (or estimate)	(d)
from Part I	Description of noncash property given	(See instructions)	Date received
-			
		\$	
(a)		(-)	
No.	(b)	(c) FMV (or estimate)	(d)
from Part I	Description of noncash property given	(See instructions)	Date received
aiti			
		\$	
(a)			
No.	(b)	(c) FMV (or estimate)	(d)
from	Description of noncash property given	(See instructions)	Date received
Part I		(555555	
			
1		_{\$}	

823453 11-08-18

Schedule B (Form 990, 990-EZ, or 990-PF) (2018)

Employer identification number

CT.	TRMONT	FOUNDATIO	M
	PUTONI	LOONDAIL	ΥV

LERM	ONT FOUNDATION			04-6//26/1
Part III	from any one contributor. Complete columns (a	through (e) and the following li	ne entry For o	n(c)(7), (8), or (10) that total more than \$1,000 for the year rganizations
	completing Part III, enter the total of exclusively religious, Use duplicate copies of Part III if additional	charitable, etc., contributions of \$1,0 space is needed	00 or less for the	he year (Enter this into once)
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held
 -				
		(e) Transfer o	of gift	
	Transferee's name, address, a	nd ZIP + 4	R	elationship of transferor to transferee
			-	
(a) No	2000000			
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held
10.11				
		(e) Transfer of	of gift	
	Transferee's name, address, ar	nd ZIP + 4	Re	elationship of transferor to transferee
Ī				
(a) No. from	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held
Part I				
				
		(e) Transfer of	of gift	
	Transferee's name, address, ar	nd 7ID + 4	D.	platianabin of transferor to transferor
	rransieree's name, address, ar	IU ZIP + 4	ne	elationship of transferor to transferee
			·· -	
				·····
(a) No. from	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held
Part I	(4)	(4, 444 4, 444		(-,
}		(e) Transfer of	l of gift	
-	Transferee's name, address, ar	nd ZIP + 4	Re	elationship of transferor to transferee



FORM 990-PF D	IVIDENDS	AND INTER	EST FROM SECUP	RITIES ST	PATEMENT 1
	GROSS AMOUNT	CAPITAL GAINS DIVIDEND	REVENUE	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME
FIDELITY - DIVIDENDS MEDICAL INFORMATION	359,896.		0. 359,896.	359,896.	0.
TECHNOLOGY, INC	24,800.		0. 24,800.	24,800.	0.
TO PART I, LINE 4	384,696.		384,696.	384,696.	0.
FORM 990-PF		ACCOUNTI	NG FEES	S	FATEMENT 2
DESCRIPTION		(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
TAX PREPARATION FEES		2,719.	0.	0.	2,719.
TO FORM 990-PF, PG 1,	LN 16B	2,719.	0.	0.	2,719.
FORM 990-PF	ОТ	HER PROFES	SIONAL FEES	Sī	гатемент 3
DESCRIPTION		(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
FIDELITY MANAGEMENT FE	ES	25,000.	25,000.	0.	0.
TO FORM 990-PF, PG 1,	LN 16C	25,000.	25,000.	0.	0.
FORM 990-PF		TAX	ES	Si	PATEMENT 4
DESCRIPTION		(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
2017 FEDERAL PAYMENT FEDERAL Q1 PAYMENT		51,545. 70,000.	0.	0.	0.
TO FORM 990-PF, PG 1,	LN 18	121,545.	0.	0.	0.
					





FORM 990-PF OTHER		XPENSES	S7	TATEMENT 5
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
STATE AG FEES	1,000.	0.	0.	1,000.
TO FORM 990-PF, PG 1, LN 23	1,000.	0.	0.	1,000.

FORM 990-PF	OTHER	DECREASES	IN NET	ASSETS	OR	FUND	BALANCES	STATEMENT 6
DESCRIPTION								AMOUNT
EXCESS FMV OV	ER COST	BASIS CONT	TRIBUTE	D				2,129,340.
TOTAL TO FORM	990-PF,	PART III	, LINE	5				2,129,340.
FORM 990-PF			CORPO	RATE ST	OCK			STATEMENT 7
DESCRIPTION						В	OOK VALUE	FAIR MARKET VALUE
MEDICAL INFOR	MATION T	ECHNOLOGY					105,000.	450,000.
TOTAL TO FORM	990-PF,	PART II,	LINE 1	0B			105,000.	450,000.