# Form 990-PF

#### **Return of Private Foundation**

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

Department of the Treasury Internal Revenue Service

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.

Open to Public Inspection

OMB No 1545-0052

-	· · · · ·										
		lendar year 2018 or tax year beginning			, 2018	and endir			, 20		
		foundation					A	A Employer identification number			
_		S J. PALLOTTA CHARITABLE TRU		··				22-320819	4		
Nu	mber	and street (or P O box number if mail is not delivered to	street ad	dress)		Room/suite	В	Telephone numb	er (see instructions)		
		ASH STREET				_		(781) 647-8160			
Cit	y or to	own, state or province, country and ZIP or foreign posta	1 code					-			
							C	If exemption application pending, check here			
		ron, MA 02493-1928	<del>,-</del>	- <sub>-</sub>				,			
G	Che	ck all that apply. Initial return		Initial return o	of a former p	ublic chari	ty 🗀	1 Foreign organiza	tions check here		
		Final return		Amended ret	turn			2 Foreign organiza			
_		Address change		Name change				85% test, check to computation .	nere and attach		
Ħ	_	ck type of organization X Section 501(				M		If private foundatio	n status was terminated		
L	s	ection 4947(a)(1) nonexempt charitable trust		ther taxable pr			¯		p)(1)(A) check here .		
ı	Fair	market value of all assets at JAcco	unting r	method 🔀 Ca	ash Acc	rual	F	If the foundation is	in a 60-month termination		
	end		ther (sp	ecify)				under section 507(b	)(1)(B), check here . <b>&gt;</b>		
_	16)	▶ \$ 439,312. (Part I.	column (	d) must be on ca	sh basis )						
E	art i	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in		Revenue and penses per books	(b) Net inve		(c)	Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)		
$\neg$	_	column (a) (see instructions) )		7,245.	ATCH 1				(===:: 0==:: 0:::)		
	1 2	Check  grants, etc., received (attach schedule) .  Check  nif the foundation is not required to		,,230.	111011 1			<del></del>			
- 1	3	attach Sch B		1,257.		1,257.					
	4	Dividends and interest from securities		4,533.		4,533.					
	- 5a	Gross rents									
		Net rental income or (loss)									
a		Net gain or (loss) from sale of assets not on line 10									
Revenue	b	Gross sales price for all 20,000.						RECEI	VED		
Š	7	Capital gain net income (from Part IV, line 2) .				0.	1	INLOCA	·		
_	8	Net short-term capital gain					-	1444 1 6	2019		
	9	Income modifications					1	MAY 1 3	1		
	iva	and allowances					10	ļ <u></u>	<u> </u>		
		Less Cost of goods sold .					+	OGDE	N. UT		
		Gross profit or (loss) (attach schedule)						OODE			
	11	Other income (attach schedule)		13,035.		5,790.		<u>.</u>			
_	12	Total. Add lines 1 through 11		13,033.		3, 130.	<del></del>	<del></del>	<del> </del>		
S	13	Compensation of officers, directors, trustees, etc							<del></del>		
nses	14	Other employee salaries and wages							-		
en	15	Pension plans employee benefits									
×	16 a	Legal fees (attach schedule)		7,210.					7,210		
ē		Accounting fees (attach schedule)ATCH 2		1,210.					7,210		
Ę	_ C	Other professional fees (attach schedule)									
ř	17	Interest									
n.	18	Taxes (attach schedule) (see instructions)			<u>.</u>				<del></del>		
Ē	19	Depreciation (attach schedule) and depletion.									
Ad	20	Occupancy									
Þ	21	Travel, conferences, and meetings							<del>-</del>		
ā	22	Printing and publications		35.				·	25		
ing	23 24 25	Other expenses (attach schedule) ATCH .3.		35.					35.		
rati	24	Total operating and administrative expenses.		7 045					7 045		
be		Add lines 13 through 23		7,245.					7,245		
Ō		Contributions, gifts, grants paid		20,000.					20,000.		
_	26	Total expenses and disbursements Add lines 24 and 25		27,245.		0.		0.	27,245.		
	27	Subtract line 26 from line 12		<u>.</u>							
	a	Excess of revenue over expenses and disbursements		-14,210.	<u> </u>						
	b	Net investment income (if negative, enter -0-)				5,790.		<u></u>	_		
	c	Adjusted net income (if negative, enter -0-)									

SCANNED JUN 1 0 2019

JSA For Paperwork Reduction Act Notice, see instructions.

8E1410 1 000 GQM2GT 0114 4/26/2019 7:44:45 PM V 18-4.5F

60025613

Form **990-PF** (2018) PAGE 1

(a) List and describe the kinds(s) of property solid (for example, real estate).  2-story brick warehouse, or common stock, 200 shs MLC Co)  1 a SEE PART IV SCHEDULE  c. d. d. e. (e) Gross safes price (f) Depreciation allowed (or allowable)  g) Gross safes price (ii) Gan or (loss) (iii) Gan or (loss) (iii	Pai	t IV Capital Gains	and Losses for Tax on Inve	estment Income			
2-story brick warehouse, or common stock, 200 shis MLC Co   Pacificate (fine day, yr)   (fine, day, yr)    1 a SEE PART IV SCHEDULE		(a) List and des	(b) How acquired	(c) Date acquired	(d) Date sold		
(e) Gross sales price (e) Gross sales price (f) Depreciation allowed (g) Cost or other biasis plus expense of sale (h) Gain or (boss) (e) plus (f) minus (g))  a		2-story b	rick warehouse, or common stock, 200	shs MLC Co)	P - Purchase	(mo day yr)	(mo , day, yr )
c (e) Gross sales price (f) Depreciation allowed (g) Coet or other basis plus expense of sale (h) Cain or (basis) (h) Cain or (basis) (h) Cain or (basis) (h) Depreciation allowed (or allowable) (l) Depreciation allowed (or allowable) (log) Development of sale (h) Depreciation and the control of the contro	1 a	SEE PART IV SCHE	DULE				
d e (e) Gross sales price (f) Deprecation allowed (or allowable) (g) Cost or other basis plus expense of sale (h) Cain or (fess) (h) Cain or (fess) (e) plus (f) minus (g))  a	b						
d e (e) Gross sales price (f) Deprecation allowed (or allowable) (g) Cost or other basis plus expense of sale (h) Cain or (fess) (h) Cain or (fess) (e) plus (f) minus (g))  a							
(e) Gross safes price (f) Depreciation allowed (or allowable) (g) Cost or other basis plus expense of sale (h) Qain or (loss) (h) Qain or (loss) (le) plus (f) menus (g))  a  Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69  Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69  (l) FMV as of 12/31/69  (l) Adjusted basis (l) Adjusted (l) A							
(e) Gross sales price  (f) Depreciation allowed (g) Cest or other basis plus expense of sale  (h) Gain or (loss) (e) plus (f) minus (g))  a  b  C  Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/89  (i) FMV as of 12/31/69  (ii) FMV as of 12/31/69  (iii) Gains (Col (h) gain minus as of 12/31/69  (iv) Excess of col (i) over col (i), if any over col (i), if any over col (i), if any  (iii) Gains (Col (h) gain minus col (ic), but not less than -0-) or Losses (from col (h))  a  b  c  d  e  C  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 If (loss), enter -0- in Part I, line 7 If (loss), enter -0- in Part I, line 8  O  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  If section 4940(d)(2) applies, leave this part blank  If Server is private foundation is acid for the section 4940 tax on the distributable amount of any year in the base peniod?  Yes X No  If Yes, the foundation doesn't qualify under section 4940(e). Do not complete this part  Therefore the appropriate amount in each column for each year, see the instructions before making any entries  (a)  Calcid (b) deniced by col (ci)  Calcid (b) deniced by col (ci)  2015  13, 935. 465, 563. 0.0033734  2015  2016  11, 035. 465, 563. 0.0037334  2015  2016  13, 935. 465, 563. 0.003925  2016  13, 935. 465, 563. 0.0096552  2016  13, 935. 465, 563. 0.009075  2013  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  Addines 5 and 6. 7 17, 944.  Enter the net value of nonchantable-use assets for 2018 from Part X, line 5 . 4  Add lines 5 and 6. 7 17, 944.							
Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/89   (i) Gains (Col. (h) gain minus (g))	<u> </u>		(f) Depreciation allowed	(g) Cost or other basis		(b) Gain or (lo	(2)
C		(e) Gross sales price		,			
C							
C							
Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/89					h		
Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/89  (i) FMV as of 12/31/89  (ii) Adjusted basis as of 12/31/89  (iv) Excess of col (i) cover col (j), flany  (iv) Excess of col (i) cover col (j), flany  (iv) Excess of col (i) cover col (ji), but not less than -0-jor Losses (from col (h))  (iv) Excess of col (i) cover col (ji), flany  (iv) Excess of col (i) cover col (ji), flany  (iv) Excess of col (ii) cover col (ji), flany  (iv) Excess of col (ii) cover col (ji), flany  (iv) Excess of col (ii) cover col (ji), flany  (iv) Excess of col (ii) cover col (ji), flany  (iv) Excess of col (ii) cover col (ji), flany  (iv) Excess of col (ii) cover col (ji), flany  (iv) Excess of col (ii) cover col (ji), flany  (iii) Excess of col (iii) cover col (ji), flany  (iv) Excess of col (iii) cover col (ji), flany  (iv) Excess of col (iii) cover col (ji), flany  (iv) Excess of col (iii) cover col (ji), flany  (iv) Excess of col (iii) cover col (ji), flany  (iv) Excess of col (iii) cover col (ji), flany  (iv) Excess of col (iii) cover col (ji), flany  (iv) Excess of col (ii) cover col (ji), flany  (iv) Excess of col (ii) cover col (ji), flany  (iv) Excess of col (ii) cover col (ji), flany  (iv) Excess of col (ii) cover col (ji), flany  (iv) Excess of col (ii) cover col (ji), flany  (iv) Excess of col (ii) cover col (ji), flany  (iv) Excess of col (ii) cover col (ji), flany  (iv) Excess of col (ii) cover col (ji), flany  (iv) Excess of col (ii) cover col (ji), flany  (iv) Excess of col (ii) cover col (ji), flany  (iv) Excess of col (ii) cover col (ji), flany  (iv) Excess of col (ii) cover col (ji), flany  (iv) Excess of col (ii) cover col (ji), flany  (iv) Excess of col (ii) cover col (ji), flany  (iv) Excess of col (ii) cover col (ji), flany  (iv) Excess of col (ii) cover col (ji) cover col (ji)  (iv) Excess of col (ii) cover col (ji) cover col (ji)  (iv) Excess of col (ji)							
Complete only for assets showing gain in column (h) and owned by the foundation on \$123188 (i) Excess of col (i) over col (j), if any col (li) gain minus col (li) pan minus col (li) pa							
(i) FMV as of 12/31/69   (i) Adjusted bases   (ii) Excess of col (i)   col (iii) Adjusted bases   (iii) Excess of col (iii)   col (iii) Adjusted bases   col (iii) Adjusted bases   col (iii) Adjusted bases   col (iii) Adjusted bases   col (iii) Adjusted base   col (iii) Adjust	<u> </u>						
a b   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   If (loss), enter -0- in Part I, line 7   If (loss), enter -0- in Part I, line 7   If (loss), enter -0- in Part I, line 7   If (loss), enter -0- in Part I, line 8, column (c) See instructions. If (loss), enter -0- in Part I, line 8, column (c) See instructions. If (loss), enter -0- in Part I, line 8, column (c) See instructions. If (loss), enter -0- in Part I, line 8, column (c) See instructions. If (loss), enter -0- in Part I, line 8, column (c) See instructions. If (loss), enter -0- in Part I, line 8, column (c) See instructions. If (loss), enter -0- in Part I, line 9, and in the section 4940(e) The 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 penod? Yes X No If Yes, the foundation doesn't qualify under section 4940(e). On not complete this part blank  Was the foundation doesn't qualify under section 4940(e). On not complete this part blank  There the appropriate amount in each column for each year, see the instructions before making any entries  1 Enter the appropriate amount in each column for each year, see the instructions before making any entries  2 (loss)		Complete only for assets s	howing gain in column (h) and owned	by the foundation on 12/31/69			
C		(i) FMV as of 12/31/69	col				
C	а						
C d d e e e e e e e e e e e e e e e e e						<del></del>	
Capital gain net income or (net capital loss)			· <del>-</del> ·				
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   If (gain, also enter in Part I, line 7   If (gain, also enter in Part I, line 7   If (gain, also enter in Part I, line 8   If gain, also enter in Part I, line 8   If gain, also enter in Part I, line 8   If gain, also enter in Part I, line 8   If gain, also enter in Part I, line 8   If gain, also enter in Part I, line 8   If gain, also enter in Part I, line 8   If gain, also enter in Part I, line 8   If gain, also enter in Part I, line 7   If (loss), enter -0- in   If gain, also enter in Part I, line 7   If (loss), enter -0- in   If gain, also enter in Part I, line 7   If (loss), enter -0- in   If gain, also enter in Part I, line 7   If (loss), enter -0- in   If gain, also enter in Part I, line 7   If (loss), enter -0- in   If gain, also enter in Part I, line 7   If (loss), enter -0- in   If gain, also enter in Part I, line 7   If (loss), enter -0- in   If gain, also enter in Part I, line 7   If (loss), enter -0- in   If gain, also enter in Part I, line 7   If (loss), enter -0- in   If gain, also enter in Part I, line 7   If (loss), enter -0- in   If gain, also enter in Part I, line 7   If (loss), enter -0- in   If gain, also enter in Part I, line 7   If (loss), enter -0- in   If gain, also enter in Part I, line 7   If (loss), enter -0- in   If gain, also enter in Part I, line 7   If (loss), enter -0- in   If gain, also enter in Part I, line 7   If (loss), enter -0- in   If gain, also enter in Part I, line 7   If (loss), enter -0- in   If gain, also enter in Part I, line 7   If (loss), enter -0- in   If gain, also enter in Part I, line 7   If (loss), enter -0- in   If gain, also enter in Part I, line 7   If (loss), enter -0- in   If gain, also enter in Part I, line 7   If (loss), enter -0- in   If (los							
2 Capital gain net income or (net capital loss)						<u>-</u>	
2 Capital gain net income or (net capital loss) { If (loss), enter -0- in Part I, line 7 } 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		<u></u> l	e 16 ma	un also enter in Bert Line 7	-		
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 and 1, line 8, column (c) See instructions. If (loss), enter -0- in 3 0.  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 X No If 'Yes,' the foundation doesn't qualify under section 4940(e). Do not complete this part  1 Enter the appropriate amount in each column for each year, see the instructions before making any entries (a) (b) (b) (b) (c) (c) (c) (c) (c) (c) (d) (c) (c) (c) (c) (c) (c) (c) (c) (c) (c	2	Capital gain net income	or (net capital loss)	The state of the s	,		0
If gain, also enter in Part I, line 8, column (c)   See instructions. If (loss), enter -0- in   3	•	Natabask tasas assistation		•	-	<del> </del>	···
Part	3			The state of the s			
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 X No (if "Yes," the foundation doesn't qualify under section 4940(e). Do not complete this part  1 Enter the appropriate amount in each column for each year, see the instructions before making any entries  (a)  Base period years  (b)  Adjusted qualifying distributions  (cc)  Net value of noncharitable-use assets  (cot) by divided by col (c))  (cot) divided by col (c)  (cot) div	_				3	· · · · · · · · · · · · · · · · · · ·	υ.
Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period?   Yes   X   No   Mode   Yes   X   No   Xes	Pai	Qualification (	Under Section 4940(e) for Rec	duced lax on Net Investment I	ncome		
Enter the appropriate amount in each column for each year, see the instructions before making any entries (a)   Base period years   Adjusted qualifying distributions   Net value of noncharitable-use assets   Distribution ratio (col (b) divided by col (c))	Was	s the foundation liable for	the section 4942 tax on the distrib	• •	ase peno	d?	Yes X No
Base period years   Calendar year (or tex year beginning in)   Adjusted qualifying distributions   Net value of noncharitable-use assets   Cool (b) divided by col (c))					ng anv en	itries	
Adjusted qualifying distributions   Net value of nonchantable-use assets   Cool (b) divided by col (col (col (b) divided by col (col (b) divided by	·	(a)			l gany on	_	
2017   23,093   460,460   0.050152	Cal					Distribution ra	
2016		· · · · · · · · · · · · · · · · · · ·		460.460.			
2015       13,535.       465,407.       0.029082         2014       35.       465,563.       0.000075         2013       46,535.       481,818.       0.096582         2       Total of line 1, column (d)       2       0.199625         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       0.039925         4       Enter the net value of noncharitable-use assets for 2018 from Part X, line 5       4       446,992.         5       Multiply line 4 by line 3       5       17,846.         6       58.         7       17,904.         8       Enter qualifying distributions from Part XII, line 4       8       27,245.			<del></del>				
2014 35. 465,563. 0.000075 2013 46,535. 481,818. 0.096592  2 Total of line 1, column (d) 2 0.199625  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 0.039925  4 Enter the net value of noncharitable-use assets for 2018 from Part X, line 5 4 446, 992.  5 Multiply line 4 by line 3 5 17,846.  6 Enter 1% of net investment income (1% of Part I, line 27b) 6 58.  7 Add lines 5 and 6 7 17,904.  8 Enter qualifying distributions from Part XII, line 4 8 27,245.							
2013       46,535.       481,918.       0.096592         2 Total of line 1, column (d)       2 0.199625         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 0.039925         4 Enter the net value of noncharitable-use assets for 2018 from Part X, line 5       4 446,992         5 Multiply line 4 by line 3       5 17,846         6 Enter 1% of net investment income (1% of Part I, line 27b)       6 58         7 Add lines 5 and 6       7 17,904         8 Enter qualifying distributions from Part XII, line 4       8 27,245			·				
Total of line 1, column (d)							
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		2013	40,333.	401,310.			0.096362
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							0 100605
the number of years the foundation has been in existence if less than 5 years	2				2		0.199625
4 Enter the net value of noncharitable-use assets for 2018 from Part X, line 5	3						
5       17,846.         6       Enter 1% of net investment income (1% of Part I, line 27b).       6       58.         7       Add lines 5 and 6.       7       17,904.         8       Enter qualifying distributions from Part XII, line 4.       8       27,245.		the number of years the	foundation has been in existence	of less than 5 years	3		0.039925
5       17,846.         6       Enter 1% of net investment income (1% of Part I, line 27b).       6       58.         7       Add lines 5 and 6.       7       17,904.         8       Enter qualifying distributions from Part XII, line 4.       8       27,245.							
5       17,846.         6       Enter 1% of net investment income (1% of Part I, line 27b).       6       58.         7       Add lines 5 and 6.       7       17,904.         8       Enter qualifying distributions from Part XII, line 4.       8       27,245.	4	Enter the net value of ne	oncharitable-use assets for 2018 fi	rom Part X, line 5	4		446,992.
6 Enter 1% of net investment income (1% of Part I, line 27b).  7 Add lines 5 and 6.  8 Enter qualifying distributions from Part XII, line 4.  8 27, 245.							
6 Enter 1% of net investment income (1% of Part I, line 27b)	5	Multiply line 4 by line 3.			5		17,846.
7 Add lines 5 and 6	_						
7 Add lines 5 and 6	6	Enter 1% of net investm	nent income (1% of Part Lline 27h)		6		58.
8 Enter qualifying distributions from Part XII, line 4	-						
8 Enter qualifying distributions from Part XII, line 4	7	Add lines 5 and 6			7		17,904.
The state of the s	•	, ad mics o and U					
The state of the s	0	Entar qualifican distribuit	tions from Part VII lims 4		اوا		27.245.
	0					using a 1% to	

Part VI instructions



orm	990-PF (2018) JAMES J. PALLOTTA CHARITABLE TRUST	22-320	2194	F	Page 4
Pai	t VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 49	48 - see	instru	ction	s)
1a	Exempt operating foundations described in section 4940(d)(2) check here				
	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				58.
	here ► X and enter 1% of Part I, line 27b			1	
С	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-)	1			
3	Add lines 1 and 2				58.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-)				0.
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-				58.
6	Credits/Payments				
а	2018 estimated tax payments and 2017 overpayment credited to 2018   6a   206.				
ь	Exempt foreign organizations - tax withheld at source				
С	Tax paid with application for extension of time to file (Form 8868).				
d	Backup withholding erroneously withheld				
7	Total credits and payments Add lines 6a through 6d			2	206.
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached 8				
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed				
0	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid				L48.
1	Enter the amount of line 10 to be Credited to 2019 estimated tax ▶ 148. Refunded ▶ 11				
a	t VII-A Statements Regarding Activities				
1a	During the tax year, did the foundation attempt to influence any national, state or local legislation of	r did it		Yes	No
	participate or intervene in any political campaign?		1a		Х
ь	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes?				
-	instructions for the definition		1b		Х
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any				
	published or distributed by the foundation in connection with the activities				
c	Did the foundation file Form 1120-POL for this year?		1c		Х
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year				
_	(1) On the foundation ▶ \$(2) On foundation managers ▶ \$				
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax im	posed			
Ī	on foundation managers > \$	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?		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 instrument	articles			
•	of incorporation, or bylaws, or other similar instruments? If "Yes " attach a conformed copy of the changes		3		х
42	Did the foundation have unrelated business gross income of \$1,000 or more during the year?		4a		Х
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?		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 either				
•	By language in the governing instrument or				
	By state legislation that effectively amends the governing instrument so that no mandatory directive.	one that			
	conflict with the state law remain in the governing instrument?		6	Х	
7	Did the foundation have at least \$5 000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and		7	X	
	Enter the states to which the foundation reports or with which it is registered. See instructions.	I GIL XV	<u> </u>		
va	MA,				
ь	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney	General			
U	•		8b	Х	
9	(or designate) of each state as required by General Instruction G2 If "No," attach explanation				<u> </u>
3	is the foundation claiming status as a private operating foundation within the meaning of section 4942	,			
	4942(j)(5) for calendar year 2018 or the tax year beginning in 2018? See the instructions for Part XIV		9		x
	complete Part XIV		-		<del></del>
0	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listi	-	10	Х	
	names and addresses		10		Ь—

Par	t VIFA 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		163	110
•••	meaning of section 512(b)(13)? If "Yes," attach schedule See instructions	11		х
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified			
12	person had advisory privileges? If "Yes," attach statement See instructions	12		х
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 JAMES J. PALLOTTA  Telephone no 781-647-	816	0	
14	Located at ▶180 ASH STREET WESTON, MA ZIP+4 ▶ 02493-19	28	_	
15			Þ	$\Box$
	and enter the amount of tax-exempt interest received or accrued during the year			
16	At any time during calendar year 2018, did the foundation have an interest in or a signature or other authority		Yes	No
	over a bank, securities, or other financial account in a foreign country?	16		Х
	See the instructions for exceptions and filing requirements for FinCEN Form 114 If "Yes," enter the name of		·	
	the foreign country ▶			
Par	t VII-B Statements Regarding Activities for Which Form 4720 May Be Required	•		
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1a	During the year, did the foundation (either directly or indirectly).			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes X No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a		i	
	disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes	İ		
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?			
	(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)?			
	(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)	ļ		
	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations			
IJ	section 53 4941(d)-3 or in a current notice regarding disaster assistance? See instructions	1ь		
		·		
_	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		х
•			<b>-</b>	· · · · · · ·
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))	ļ		
а	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?	ļ		
	If "Yes," list the years			
	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	2b	-	
	all years listed, answer "No" and attach statement - see instructions )	20		-
c	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here	1		
_	<u> </u>		1	
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise			
	at any time during the year?			
ь	off "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	2.		
	foundation had excess business holdings in 2018 )	3b		<del>                                     </del>
	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	-	X
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its		1	,,
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2018?	<u>4b</u>	<u></u>	/2011

Page 6

Par	t VII-B Statements Regarding Activities	for Which Form	4720 May Be Req	uired (cont	inued)			
5a	During the year, did the foundation pay or incur any ame	ount to					Yes	No
	(1) Carry on propaganda, or otherwise attempt to influ	ence legislation (sectio	n 4945(e))?	. Yes	X No			
	(2) Influence the outcome of any specific public ele	ection (see section 4	955), or to carry or	1				
	directly or indirectly any voter registration drive?			Yes	X No		•	
	(3) Provide a grant to an individual for travel, study, or o	other similar purposes?		. Yes	X No			
	(4) Provide a grant to an organization other than a	charitable, etc., org	anization described in	n	<u> </u>			
	section 4945(d)(4)(A)? See instructions				X No			
	(5) Provide for any purpose other than religious, c							
	purposes or for the prevention of cruelty to children				X No			
b	if any answer is "Yes" to 5a(1)-(5), did any of the			- —	cribed in	1		
	Regulations section 53 4945 or in a current notice regal					5b		
	Organizations relying on a current notice regarding disaster assistance, check here							
с	If the answer is "Yes" to question 5a(4), does the					_		
	because it maintained expenditure responsibility for the	grant?	· · · · · · · · · · · · · · · · · · ·	. Yes	☐ No			
	If "Yes," attach the statement required by Regulations s	ection 53 4945-5(d)						
6a	Did the foundation, during the year, receive any ful		ectly, to pay premiur	ns				
	on a personal benefit contract?				X No			
b	Did the foundation, during the year, pay premiums, dire					6b		Х
	If "Yes" to 6b, file Form 8870							
7a	At any time during the tax year, was the foundation a p	arty to a prohibited tax	shelter transaction?	. Yes	X No			
b	If "Yes," did the foundation receive any proceeds or ha	ve any net income attr	butable to the transact	on?		7b_		
8	is the foundation subject to the section 4960 tax on pa	yment(s) of more tha	n \$1,000,000 in			}		
	remuneration or excess parachute payment(s) during the			. Yes	No			
Pa	t VIII Information About Officers, Directors	rs, Trustees, Fou	indation Managers	s, Highly Pa	aid Empl	oyees,		
1	List all officers, directors, trustees, and foundat	ion managers and	their compensation	See instruc	tions.			
•	2.01 47, 07,10070, 2.11 001070, 11 4010700, 4114 10 4114		then compensation					
	(a) Name and address	(b) Title and average hours per week	(c) Compensation	(d) Contribut	ions to	(e) Expens		
		(b) Title and average			ions to efit plans	(e) Expension		
	(a) Name and address	(b) Title and average hours per week	(c) Compensation (If not paid, enter -0-)	(d) Contribut employee bene	ions to efit plans inpensation			:5
ATCI	(a) Name and address	(b) Title and average hours per week	(c) Compensation (If not paid,	(d) Contribut employee bene	ions to efit plans			
	(a) Name and address	(b) Title and average hours per week	(c) Compensation (If not paid, enter -0-)	(d) Contribut employee bene	ions to efit plans inpensation			:5
	(a) Name and address	(b) Title and average hours per week	(c) Compensation (If not paid, enter -0-)	(d) Contribut employee bene	ions to efit plans inpensation			:5
	(a) Name and address	(b) Title and average hours per week	(c) Compensation (If not paid, enter -0-)	(d) Contribut employee bene	ions to efit plans inpensation			:5
	(a) Name and address	(b) Title and average hours per week	(c) Compensation (If not paid, enter -0-)	(d) Contribut employee bene	ions to efit plans inpensation			:5
	(a) Name and address	(b) Title and average hours per week	(c) Compensation (If not paid, enter -0-)	(d) Contribut employee bene	ions to efit plans inpensation			:5
ATCI	(a) Name and address	(b) Title and average hours per week devoted to position	(c) Compensation (if not paid, enter -0-)	(d) Contribut employee bene and deferred cor	ions to efft plans npensation	other al	lowance	0.
ATCI	(a) Name and address	(b) Title and average hours per week devoted to position	(c) Compensation (if not paid, enter -0-)	(d) Contribute mployee beneand deferred cor	ions to efft plans in pensation 0 .	other al	lowance	0.
ATCI	(a) Name and address  H 5  Compensation of five highest-paid employees "NONE."	(b) Title and average hours per week devoted to position  (other than thos	(c) Compensation (if not paid, enter -0-)  0 .	(d) Contribut employee bene and deferred cor	nstructio	other al	one,	0.
ATCI	(a) Name and address  H 5  Compensation of five highest-paid employees	(b) Title and average hours per week devoted to position	(c) Compensation (if not paid, enter -0-)	(d) Contribute employee beneand deferred cor	nstructio	ns). If n	one,	O.
ATCI	(a) Name and address  H 5  Compensation of five highest-paid employees "NONE."	(b) Title and average hours per week devoted to position  (other than those hours per week hours per week	(c) Compensation (if not paid, enter -0-)  0 .	(d) Contribute and deferred core and deferred co	nstructio	ns). If n	one,	O.
ATCI	(a) Name and address  H 5  Compensation of five highest-paid employees "NONE."	(b) Title and average hours per week devoted to position  (other than those hours per week hours per week	(c) Compensation (if not paid, enter -0-)  0 .	(d) Contribute and deferred core and deferred co	nstructio	ns). If n	one,	O.
ATCI	(a) Name and address  H 5  Compensation of five highest-paid employees "NONE."  Name and address of each employee paid more than \$50,000	(b) Title and average hours per week devoted to position  (other than those hours per week hours per week	(c) Compensation (if not paid, enter -0-)  0 .	(d) Contribute and deferred co	nstructio	ns). If n	one,	O.
ATCI	(a) Name and address  H 5  Compensation of five highest-paid employees "NONE."  Name and address of each employee paid more than \$50,000	(b) Title and average hours per week devoted to position  (other than those hours per week hours per week	(c) Compensation (if not paid, enter -0-)  0 .	(d) Contribute and deferred co	nstructio	ns). If n	one,	O.
ATCI	(a) Name and address  H 5  Compensation of five highest-paid employees "NONE."  Name and address of each employee paid more than \$50,000	(b) Title and average hours per week devoted to position  (other than those hours per week hours per week	(c) Compensation (if not paid, enter -0-)  0 .	(d) Contribute and deferred co	nstructio	ns). If n	one,	O.
ATCI	(a) Name and address  H 5  Compensation of five highest-paid employees "NONE."  Name and address of each employee paid more than \$50,000	(b) Title and average hours per week devoted to position  (other than those that the second s	(c) Compensation (if not paid, enter -0-)  0 .	(d) Contribute and deferred co	nstructio	ns). If n	one,	O.
ATCI	(a) Name and address  H 5  Compensation of five highest-paid employees "NONE."  Name and address of each employee paid more than \$50,000	(b) Title and average hours per week devoted to position  (other than those that the second s	(c) Compensation (if not paid, enter -0-)  0 .	(d) Contribute and deferred co	nstructio	ns). If n	one,	O.
ATCI	(a) Name and address  H 5  Compensation of five highest-paid employees "NONE."  Name and address of each employee paid more than \$50,000	(b) Title and average hours per week devoted to position  (other than those that the second s	(c) Compensation (if not paid, enter -0-)  0 .	(d) Contribute and deferred co	nstructio	ns). If n	one,	O.
ATCI	(a) Name and address  H 5  Compensation of five highest-paid employees "NONE."  Name and address of each employee paid more than \$50,000	(b) Title and average hours per week devoted to position  (other than those that the second s	(c) Compensation (if not paid, enter -0-)  0 .	(d) Contribute and deferred co	nstructio	ns). If n	one,	O.
2 (a)	(a) Name and address  H 5  Compensation of five highest-paid employees "NONE."  Name and address of each employee paid more than \$50,000	(other than thos  (b) Title and average hours per week devoted to position  (b) Title and average hours per week devoted to position	(c) Compensation (if not paid, enter -0-)  0 .  ce included on line (c) Compensation	(d) Contribute mployee beneated conditions and deferred conditions are the conditions are the compens.	nstruction  nstruction  nstruction  tions to benefit eferred altion	ns). If n	one,	O.

3 Five highest-paid independent co	ntractors for professional services. See instructions. If none, enter "NONI	E."
	ch person paid more than \$50,000 (b) Type of service	(c) Compensation
NONE		
		(
	V.	
otal number of others receiving over \$5	0,000 for professional services	
Part IX-A Summary of Direct Ch		ļ
	e activities during the tax year. Include relevant statistical information such as the number of	Expenses
1 THE FOUNDATION IS NOT IN	VOLVED IN ANY DIRECT CHARITABLE	
	Y PURPOSE IS TO SUPPORT, BY	
CONTRIBUTIONS, OTHER ORGAN	NIZATIONS EXEMPT UNDER IRC 501(C)(3)	
2		
****		
3		
A		<del>                                     </del>
Part IX-B Summary of Program	Related Investments (see instructions)	
	ments made by the foundation during the tax year on lines 1 and 2	Amount
1 N/A		
2		
	<del></del>	
All other program-related investments. See instruc	ctions	
3		
NONE		

FOIIII	990-PF (2018)		rageu
Pai	Minimum Investment Return (All domestic foundations must complete this part. Fore see instructions.)	ign founda	tions,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes		
а	Average monthly fair market value of securities	1a	243,442.
	Average of monthly cash balances	1b	210,357.
С	Fair market value of all other assets (see instructions),	1c	
d	<b>Total</b> (add lines 1a, b, and c)	1d	453,799.
е	Reduction claimed for blockage or other factors reported on lines 1a and	'	
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	453,799.
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see		
	instructions),	4	6,807.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	446,992.
6	Minimum investment return. Enter 5% of line 5	6	22,350.
Pa	TXI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating four	ndations	
	and certain foreign organizations, check here ▶ and do not complete this part.)		22.250
1	Minimum investment return from Part X, line 6	1	22,350.
2 a		<u> </u>	
þ	Income tax for 2018 (This does not include the tax from Part VI)	<b> </b>	5.0
C	Add lines 2a and 2b	2c	58.
3	Distributable amount before adjustments Subtract line 2c from line 1		22,292.
4	Recoveries of amounts treated as qualifying distributions	4	00 000
5	Add lines 3 and 4	5	22,292.
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII,	1 _	22 222
	line 1	7	22,292.
Pa	t XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
а	——————————————————————————————————————	<del></del>	27,245.
þ	Program-related investments - total from Part IX-B	1b	
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		3b	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	27,245.
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	58.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	27,187.
	Note: The amount on line 6 will be used in Part V. column (b), in subsequent years when ca	alculating w	hether the foundation

qualifies for the section 4940(e) reduction of tax in those years

Page 9

1 Distributable amount for 2018 from Part XI, Inne 7 2017 forly, 2018 22,292.  2 Undistribute recome of any, as of the end of 2018 a Enter amount for 2017 forly, 2014 22,554.  3 Enter amount for 2017 forly, 2014 22,554.  5 Enter amount for 2018 from Part XII, Inne 2018 a From 2019 from Part XII, Inne 4 b \$ 2,7,245.  4 Optatifying distributions for 2018 from Part XII, Inne 4 b \$ 2,7,245.  5 Applied to 2017, but not more than line 2a .  5 Applied to undistributed concer of prior years (Election required see instructions).  6 Enter the amount of prior years (Inne 2018 distributions amount distributions carryover applied to 2018 (if an amount appears in column (s)), the same amount must be shown in column (a) in the same amount must be shown in column as indicated below:  a Corpus Year spired to 2018 Subtract line 6 b From 2018 from Part XII, Inne 4 b From Inne 20.  6 Enter the net total of each column as indicated below:  a Corpus Add lines 31, 4c, and 46 Subtract line 5 b From years' undistributed morne For 2017 Subtract line 6 b from line 20.  6 Undistributed income for 2017 Subtract line 6 d from line 6 Taxable amount for 22 Taxable amount 4 prior previously assessed from 24 Taxable amount 5 prior years' undistributed morne for 2017 Subtract line 6 b from line 6 Taxable amount 5 prior years' undistributed morne for 2017 Subtract line 6 d from line 6 Taxable amount 5 prior years' undistributed morne for 2017 Subtract line 6 from line 6 Taxable amount 5 prior years' undistributed morne for 2017 Subtract line 6 from line 6 Taxable amount 5 prior years' undistributed morne for 2017 Subtract line 6 from line 6 Taxable amount 5 prior years' undistributed morne for 2017 Subtract line 6 from line 6 Taxable amount 5 prior years' undistributed morne for 2017 Subtract line 6 from line 6 Taxable amount 5 prior years' undistributed morne for 2018 Subtract line 6 from line 6 Taxable amount 5 prior years' undistributed morne for 2018 Subtract line 6	Pa	art XIII Undistributed Income (see instructions)								
Distributable amount for 2016 from reart X, line 7			(a)	(b)	(c)	(d)				
2 Undesholzed morare if any, as of the end of 2018 a Enter amount for 2017 any.  1 Total to pray span 20_16_20_15_20_14 3 Excess distributions carryover, if any, to 2018 a From 2013 b From 2014 c From 2015 d From 2016 d From 2017 1 Total of lines 3a through e	1	Distributable amount for 2018 from Part XI.	Corpus ·	Years prior to 2017	2017					
a Enter amount for 2017 only,		line 7	•	•		22,292.				
b Total to prior years 20 16 20 15 20 14 3 Excess distributions carryover, if any, to 2018 a From 2013 b From 2014 c From 2015 d From 2016 e From 2017 1 Total of lines 3s shrough e 4 Qualifying distributions for 2018 from Part XII, line 4 b 2 7, 245 a Applied to 2017, but not more than line 2a b Applied to 2017, but not more than line 2a b Applied to 2017, but not more than line 2a c Treated as distributions out of corpus (Election required -see instructions) c Treated as distributions out of corpus (Election required -see instructions) 5 Excess distributions amount distributed aud of corpus 5 Excess distributions amount distributed out of corpus 5 Excess distributions carryover applied to 2018 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 iprior years' undistributed income for which a notice of deficiency has taken been previously assessed element 6 Subtract line 8c from line 1 This mount must be distributed income for 2018 Subtract line 4a from line 2c 6 Undistributed income for 2018 Subtract line 4a from line 2a Tixable amount - see instructions 6 Lines 8c from line 1 This mount must be distributed income for 2018 Subtract line 4a from line 1 This mount must be distributed income for 2018 Subtract line 4a from line 1 This mount must be distributed income for 2018 Subtract line 4a from line 1 This mount must be distributed income for 2018 Subtract line 4a from line 1 This mount must be distributed income for 2018 Subtract line 4a from line 5 c line 7 (see instructions)  9 Excess distributions carryover from 2013 not applied on line 5 or line 7 (see instructions) 9 Excess from 2015 10 Analysis of line 9 a Excess from 2016 11 Excess from 2016 12 Excess from 2016 13 Excess from 2016	2	Undistributed income if any, as of the end of 2018								
3 Excess distributions carryover, if any, to 2018 a From 2013	а	Enter amount for 2017 only			22,554.					
a From 2013	b	Total for pnor years 20_16_,20_15_,20_14_	,							
b From 2015	3	Excess distributions carryover, if any, to 2018								
c From 2015	а	From 2013								
d From 2016	b	From 2014								
e From 2017	С	From 2015								
f Total of lines 3a through e	d	From 2016								
A Qualifying distributions for 2018 from Part XII, Iline 4 ▶ \$ 27,245.  A Applied to 2017, but not more than line 2a  b Applied to undistributed income of prior years (Election required - see instructions).  c Treated as distributions out of corpus (Election required - see instructions).  d Applied to 2018 distributions carryover applied to 2018 (ff an amount appears in column (d)).  5 Excess distributions carryover applied to 2018 (ff an amount must be shown in column (d)).  6 Enfert he 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 342(a) tax has been previously assessed.  4 Subtract line 6c from line 1b Taxable amount - see instructions.  £ Undistributed income for 2017 Subtract line 4a from line 2a Taxable amount - see instructions.  £ Undistributed income for 2018 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2019.  7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(a)(3) (Election may be required -see instructions).  8 Excess distributions carryower from 2013 not applied on line 5 or line 7 (see instructions).  9 Excess distributions carryower to 2019.  Subtract lines 7 and 8 from line 6a  10 Analysis of line 9  a Excess from 2014  b Excess from 2015  c Excess from 2015  c Excess from 2016  d Excess from 2017	e	From 2017								
Inne 4 S 27.245.  a Applied to 2017, but not more than line 2a b Applied to undistributed income of prior years (Election required -see instructions) c Treated as distributions out of corpus (Election required -see instructions) d Applied to 2018 distributions carryover applied to 2018 diff an amount appears in column (d), the same amount must be shown in column (a) in the same amount must be shown in column (a) in the same amount must be shown in column (a) in the same amount must be shown in column (a) in the same amount must be shown in column (a) in the same amount must be shown in column (a) in the same amount must be shown in column (a) in the same amount must be shown in column (a) in the same amount must be shown in column (a) in the same amount must be seen in saud, or on which the section 4942(a) it ax has been previously assessed d Subtract line 6 from line 6 b Taxable amount - see instructions	f	Total of lines 3a through e	0.1							
a Applied to 2017, but not more than line 2a	4									
b Applied to undistributed income of prior years (Election required - see instructions).  c Treated as distributions out of corpus (Election required - see instructions).  d Applied to 2018 distributions curryover applied to 2018 (ff an amount appears in column (d), the same amount must be shown in column (a), the same amount must be shown in column (a), 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  d Subtract line 6c from line 6b Taxable amount - see instructions  e Undistributed income for 2017 Subtract line 4a from line 2a Taxable amount - see instructions  f Undistributed income for 2018 Subtract lines 4d and 5 from line 1 This amount must be distribution and 5 from line 1. This amount must be distributed in 2019		line 4 ▶ \$ 27,245.								
(Election required - see instructions).  c Treated as distributions out of corpus (Election required - see instructions).  d Applied to 2018 distributable amount.  e Remaining amount distributable amount.  E Remaining amount distributed out of corpus.  Excess distributions carryover applied to 2018 (if an amount appears in column (q.) it he same amount must be shown in column,(a) it.  Enter the net total of each column as indicated below:  a Corpus Add lines 31, 4c, and 4e Subtract line 5  D 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 sessesed.  d Subtract line 8c from line 6b Taxable amount - see instructions.  e Undistributed income for 2018 Subtract lines 4a from line 2 a Taxable amount - see instructions.  f Undistributed income for 2018 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2019.  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).  8 Excess distributions carryover from 2013 not applied on line 5 or hine 7 (see instructions).  9 Excess distributions carryover to 2019. Subtract lines 7 and 8 from line 6a.  10 Analysis of line 9  a Excess from 2015 b Excess from 2015 c Excess from 2016 b Excess from 2017	а	Applied to 2017, but not more than line 2a			22,554.	· ·- ·- ·- ·- ·- ·- ·- ·- ·- ·- ·- ·				
required - see instructions)	b									
required - see instructions)	_	Treated as distributions out of corous (Election								
e Remaining amount distributed out of corpus.  5 Excess distributions carryover applied to 2018 (If an amount must be shown in column (a)).  6 Enter the net total of each column as indicated below:  a Carpus 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 494(a) tax has been previously assessed.  d Subtract line 6c from line 6b Taxable amount - see instructions.  d Undistributed income for 2017 Subtract line 4a from line 2a Taxable amount - see instructions.  f Undistributed income for 2018 Subtract lines 4d and 5 from line 1 This amount must be distributed and 2019.  7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(a)(3) (Election may be required -see instructions).  8 Excess distributions carryover from 2013 not applied on line 5 or line 7 (see instructions).  9 Excess distributions carryover to 2019.  Subtract lines 7 and 8 from line 6a  10 Analysis of line 9  a Excess from 2015  c Excess from 2015	Ĭ									
5 Excess distributions carryover applied to 2018 (if an amount appears in column (id), the same amount must be shown in column,(a)	d	Applied to 2018 distributable amount				4,691.				
(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  d Subtract line 6c from line 6b Taxable amount - see instructions  e Undistributed income for 2017 Subtract lines 4a from line 2a Taxable amount - see instructions  f Undistributed income for 2018 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2019  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)  8 Excess distributions carryover from 2013 not applied on line 5 or line 7 (see instructions)  9 Excess distributions carryover to 2019. Subtract lines 7 and 8 from line 6a  10 Analysis of line 9 a Excess from 2014 b Excess from 2015 c Excess from 2016 d Excess from 2016 d Excess from 2017										
amount must be shown in column.(a)	5									
indicated below: a Corpus Add lines 3f, 4c, and 4e Subtract line 5 b Prior years' undistributed income Subtract line 4b from line 2b		` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` `								
b Prior years' undistributed income Subtract line 4b from line 2b	6									
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	а	Corpus Add lines 3f, 4c, and 4e Subtract line 5								
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	b	Prior vears' undistributed income Subtract								
income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed	_									
been issued, or on which the section 4942(a) tax has been previously assessed	c									
tax has been previously assessed										
amount - see instructions										
e Undistributed income for 2017 Subtract line 4a from line 2a Taxable amount - see instructions	d									
4a from line 2a Taxable amount - see instructions						-				
f Undistributed income for 2018 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2019	е	4a from line 2a Taxable amount - see								
f Undistributed income for 2018 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2019		instructions			* **	···				
distributed in 2019	f	Undistributed income for 2018 Subtract lines	·							
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)						17 601				
to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions)						1,,001.				
170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions)	7	•								
required - see instructions)										
8 Excess distributions carryover from 2013 not applied on line 5 or line 7 (see instructions)										
applied on line 5 or line 7 (see instructions)  9 Excess distributions carryover to 2019. Subtract lines 7 and 8 from line 6a  10 Analysis of line 9 a Excess from 2014 b Excess from 2015 c Excess from 2016 d Excess from 2017	_	·								
9 Excess distributions carryover to 2019. Subtract lines 7 and 8 from line 6a  10 Analysis of line 9 a Excess from 2014 b Excess from 2015 c Excess from 2016 d Excess from 2017	8	¥ .								
Subtract lines 7 and 8 from line 6a	9		,							
10 Analysis of line 9 a Excess from 2014 b Excess from 2015 c Excess from 2016 d Excess from 2017	,		0.							
a Excess from 2014	10									
b Excess from 2015 c Excess from 2016 d Excess from 2017		· · · · · · · · · · · · · · · · · · ·	'							
c Excess from 2016 d Excess from 2017										
d Excess from 2017	c	Excess from 2016								
				ĺ						

Pa	rt XIV Private Op	erating Foundations	(see instructions a	nd Part VII-A, questi	on 9)	NOT APPLICABLE
`1a	If the foundation has	received a ruling or d	etermination letter tha	t it is a private opera	ating	
	foundation, and the ruling	g is effective for 2018, e	nter the date of the ruling	• • • • • • • • • • • • •	▶	
	Check box to indicate v	vhether the foundation	is a private operating	<del></del>	section 4942(j)	)(3) or 4942(j)(5)
2 a	Enter the lesser of the ad- justed net income from Part	Tax year		Prior 3 years	· · · · ·	(e) Total
	I or the minimum investment	(a) 2018	(b) 2017	(c) 2016	(d) 2015	
	return from Part X for each					
	year listed				<del> /</del>	
b	85% of line 2a					
С	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			/ "		
а	"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 invest-					
	ment return shown in Part X,					
_	Ine 6 for each year listed "Support" alternative test - enter		/	<u> </u>		
·	(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		,			
	(j)(3)(B)(iii)					
	(3) Largest amount of sup- port from an exempt					•
	organization					
	(4) Gross investment income .			1 7 1 6 1	4: 1 1 25 222	<u> </u>
Pa		ntary Information (( luring the year - see		only if the founda	ition had \$5,000 o	r more in assets at
1	Information Regardin		<u> </u>			
a	List any managers of	-		e than 2% of the tota	al contributions receiv	ed by the foundation
	before the close of any					•
	JAMES J. PA	LLOTTA				
b	List any managers of	the foundation who	own 10% or more o	f the stock of a corp	oration (or an equally	large portion of the
	ownership of a partner	rship or other entity) of	which the foundation	has a 10% or greater	ınterest	
	NONE			<u> </u>		
2	Information Regardin	•		, .		
						and does not accept
	complete items 2a, b,			ants, etc., to individua	is or organizations ur	nder other conditions,
	The name, address, a			ne nerson to whom ann	lications should be add	Iresed
_	ATCH 6A	na telephone namber	or cinali address or ti	ic person to whom app	nications sticula be add	1103564
b	The form in which app	lications should be sul	omitted and information	on and materials they	should include.	
	, ,			•		
	ATCH 6B					
С	Any submission dead	ines				
	NI / N					
_	N/A					
d	Any restrictions or li	mitations on awards	, such as by geogra	aphical areas, charita	ble fields, kinds of	institutions, or other
	factors					
	N/A					

Page 11

Part XV Supplementary Information (continued)										
3 Grants and Contributions Paid During the Year or Approved for Future Payment  Recipient If recipient is an individual show any relationship to any foundation manager or substantial contribution recipient Purpose of grant or contribution  Name and address (home or business) Amount										
Recipient	If recipient is an individual show any relationship to	Foundation status of	Purpose of grant or contribution	Amount						
Name and address (home or business)	any foundation manager or substantial contributor	recipient	contribution	,						
a Paid during the year										
_										
ATCH 7										
• •										
	İ									
				,						
		`								
				}						
		•								
	1									
			,							
Total			▶ 3a	20,000						
<b>b</b> Approved for future payment										
	,									
		•								
	,									
		*								
			1							
		<u> </u>	<u> </u>							
Total										

JSA BE1491 1 000

Form 990-PF						Page <b>12</b>
Part XVI		T		·		(a)
Enter gross	amounts unless otherwise indicated	nerwise indicated Unrelated business income Excluded by section 512, 513, or 5				(e) Related or exempt
1 Program	service revenue	(a) Business code	(b) Amount	(c) Exclusion code	( <b>d)</b> Amount	function income (See instructions)
a						
b						
c						
d			_			
е	<u> </u>					
f				<del></del>		
g Fees	and contracts from government agencies					
2 Member	ship dues and assessments			1.4	1 057	
3 Interest o	n savings and temporary cash investments -			14	1,257. 4,533.	<del></del>
4 Dividend	ds and interest from securities			+	4,000.	
	al income or (loss) from real estate	<u> </u>		-		
	-financed property	1				
	debt-financed property				<u> </u>	
	il income or (loss) from personal property				<u>-</u> -	
	vestment income					
	loss) from sales of assets other than inventory	'				
	ome or (loss) from special events · · ·					
	rofit or (loss) from sales of inventory venue a			<del>-</del>		
	venue a					
c						
e						
	Add columns (b), (d), and (e)				5,790.	
	dd line 12, columns (b), (d) and (e)				13	5,790.
	heet in line 13 instructions to verify calc					
Part XVI-	B Relationship of Activitie	s to the A	ccomplishment of t	Exempt Pur	poses	
Line No.	Explain below how each activity	ty for whic	h income is reported	ın column (	e) of Part XVI-A contrib	uted importantly to the
▼	accomplishment of the foundation					
						· · · · · · · · · · · · · · · · · · ·
1	N/A					
_					· · · · · · · · · · · · · · · · · · ·	
			<u> </u>			<del></del>
				<del></del> -		
			<del></del> -			
				14	<del></del>	<del></del>
			<u></u>			
	-		- · ·		<del></del>	
	·					
<del></del>					<u> </u>	-
	<del></del>					
					<del></del>	
	-					
					<u></u>	
			<del>-</del>			
	<u> </u>					

JAMES J. PALLOTTA CHARITABLE TRUST

Form	990-PF	/2019)	TAMES I	PALLOTTA CHAR	TTARLE	TRIIS!	יז		22-32	202194	1 12	17
$\overline{}$	t XVII	<del></del>	egarding Tr	ansfers to and Ti				tionship			10	oge 13
1	Did th	ne organization direct	ly or indirectly	engage in any of the	following	with	any other	organizat	on describe	d	Yes	No
•		ection 501(c) (other	-		_		=	•				1
		izations?		, ,, ,	,			,	,,			
а	-	fers from the reportin	a foundation to	a noncharitable exe	mpt organ	ization (	of					
_		ash	~							. la(1	)	Х
		ther assets										Х
h	, ,	transactions								.	1	<b>†</b>
•		ales of assets to a no	ncharitable exe	mot organization						160		X
	, ,	urchases of assets fro		. •								Х
		ental of facilities, equi		, -						<u> </u>		X
	• •	eimbursement arrangi	•									X
	. ,	pans or loan guarante										X
	• •	erformance of service										X
_		ng of facilities, equipm									1	13
		answer to any of th			, ,							
•		of the goods, other		· ·	_				•			
		in any transaction or	-	•	_							
(a) L	ne no	(b) Amount involved	·	nonchantable exempt orga	<del></del>				ansactions, and			
				· · ·		N/A	,					
				•			<del></del>					
						. — . —	***************************************					
				<del> </del>								
			<u> </u>									
			1	<del> </del>		<del>"</del>						
							·····		•			
									t			
			<del> </del>								·	
								<del></del>				
			1									
	descr	e foundation directly ribed in section 501(c)	) (other than se					, -		-	Yes 🗵	
	, 0	(a) Name of organizatio		(b) Type of on	ganization			(c) Des	scription of relat	ionship		
				. , ,.								
								<del></del>				

described in section 501(c) (other than s	section 501(c)(3)) or in section 527?	
b If "Yes," complete the following schedule	9.	
(a) Name of organization	(b) Type of organization	(c) Description of relationship

Sign Here	Under penalties of penjury   declare that I have example and complete Declaration of preparer (other than Signature of officer or trustee)		May the IRS discuss this return with the preparer shown below."  See instructions X Yos N

	Print/Type preparer's name ELDA DI RE	Preparer's signature  LAA DU A	04/30/2	2019 Che self-		PTIN P01269552
Preparer	Firm's name ERNST & YOUNG	U.S. LLP		Firm's EIN	▶ 34-	6565596
Use Only	Firm's address > 5 TIMES SQUARE NEW YORK, NY		10036	Phone no	212-	773-3000
	<del>*************************************</del>	· ···· · · · · · · · · · · · · · · · ·		<del> </del>		

#### Schedule B

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

Department of the Treasury Internal Revenue Service

Name of the organization

JAMES J. PALLOTTA CHARITABLE TRUST

#### **Schedule of Contributors**

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

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

OMB No 1545-0047

2018

Employer identification number

22-3208194 Organization type (check one) Filers of: Section: 501(c)( ) (enter number) organization Form 990 or 990-EZ 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 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 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)

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

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

Employer identification number 22-3208194

Part I	Contributors (see instructions). Use duplicate cop	pies of Part I if additional space is ne	eeded
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	JAMES J. PALLOTTA  180 ASH STREET  WESTON, MA 02493-1928	<b>\$</b> 7,245.	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		<b>\$</b>	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
		<b>\$</b>	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 Noncash (Complete Part II for noncash contributions)

Employer identification number 22-3208194

art II Nonca	ash Property (see instructions) Use duplicate copies	of Part II if additional space is ne	eded
(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
	,	<b>\$</b>	
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 JAMES J. PALLOTTA CHARITABLE TRUST

Employer identification number 22-3208194

the f cont Use		ions completing Part III, e year. (Enter this infori	enter the total of	omplete columns (a) through (e) au f exclusively religious, charitable, et e instructions ) ▶\$
(a) No. from Part I	(b) Purpose of gift	(c) Use of g	uft	(d) Description of how gift is held
		(e) Transfer o	_	
	Transferee's name, address, ar	nd ZIP + 4	Relation	ship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of g	lift	(d) Description of how gift is held
	Transferee's name, address, ar	(e) Transfer o		ship of transferor to transferee
(a) No.			,	
Part I	(b) Purpose of gift	(c) Use of g	ift	(d) Description of how gift is held
		(e) Transfer o	f gift	
	Transferee's name, address, ar	nd ZIP + 4	Relation	ship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of g	uft	(d) Description of how gift is held
		(e) Transfer o	f gift	
 	Transferee's name, address, ar	nd ZIP + 4	Relation	ship of transferor to transferee

Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or

ATTACHMENT 1

FORM 990PF, PART I - CONTRIBUTIONS, GIFTS AND GRANTS RECEIVED

NAME AND ADDRESS

DATE

DIRECT PUBLIC SUPPORT 7,245.

JAMES J. PALLOTTA 180 ASH STREET WESTON, MA 02493-1928

7,245.

TOTAL CONTRIBUTION AMOUNTS

GQM2GT 0114 4/26/2019 7:44:45 PM V 18-4.5F

60025613

ATTACHMENT 1 PAGE 19 ATTACHMENT 2

FORM 990PF, PART I - ACCOUNTING FEES

CHARITABLE PURPOSES	7,210.	7,210.
ADJUSTED NET INCOME		
NET INVESTMENT INCOME		
REVENUE AND EXPENSES PER BOOKS	7,210.	7,210.
,		TOTALS
DESCRIPTION	ACCOUNTING FEES	

٠,

OTHER EXPENSES I PART I FORM 990PF, REVENUE AND

EXPENSES PER BOOKS

CHARITABLE PURPOSES

DESCRIPTION MASSACHUSETTS FILING FEE

35.

TOTALS

ATTACHMENT 3 PAGE 21

60025613

GQM2GT 0114 4/26/2019 7:44:45 PM V 18-4.5F

ATTACHMENT 4	ENDING . <u>FMV</u>	437,536.	437,536.
ATTACH	ENDING BOOK VALUE	437,536.	437,536.
FORM 990PF, PART II - U.S. AND STATE OBLIGATIONS	DESCRIPTION	BLKRK LIQUIDITY FUND	US OBLIGATIONS TOTAL

FORM 990PF, PART VIII - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES	CERS, DIRECTORS, AND TRUSTEES		ATTACH	ATTACHMENT 5
NAME AND ADDRESS	TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION	COMPENSATION	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	EXPENSE ACCT AND OTHER ALLOWANCES
JAMES J. PALLOTTA 180 ASH STREET WESTON, MA 02493-1928	TRUSTEE < 1 HR	.0	.0	.0
KIMBERLY S. PALLOTTA 180 ASH STREET WESTON, MA 02493-1928	TRUSTEE < 1 HR	´ • • • • • • • • • • • • • • • • • • •	.0	.0
	GRAND TOTALS	0.	0	•0

ATTACHMENT 6A

## FORM 990PF, PART XV - NAME, ADDRESS AND PHONE FOR APPLICATIONS

JAMES J. PALLOTTA 180 ASH STREET WESTON, MA 02493-1928

22-3208194

ATTACHMENT 6B

### FORM 990PF, PART XV - NAME, ADDRESS AND PHONE FOR APPLICATIONS

JAMES J. PALLOTTA WRITTEN REQUESTS MUST INCLUDE THE CHARITABLE FUNCTION OF THE APPLICANT.

22-3208194

FORM 990PF, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

7 44.45 PM

GQM2GT 0114 4/26/2019

V 18-4.5F

PAGE 26 ATTACHMENT 7

60025613

20,000

TOTAL CONTRIBUTIONS PAID

IDEAS, INNOVATE IN THE FACE OF COMPLEY CHALLENGES ENVIRONMENT WHERE CPEATIVE SCHOLARS GENERATE BOLD

AND DISTINGUISH THEMSELVES AS ACTIVE CITIZENS OF

THE WORLD

20,000

TUFTS IS A STUDENT-CENTERED RESEARCH UNIVERSITY

PURPOSE OF GRANT OR CONTRIBUTION

RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR

FOUNDATION STATUS OF RECIPIENT

RECIPIENT NAME AND ADDRESS

MEDFORD, MA 02155 419 BOSTON AVE TUFTS COLLEGE

NONE δ.

DEDICATED TO THE CREATION AND APPLICATION OF

KNOWLEDGE. WE ARE COMMITTED TO PROVIDING

TRANSFORMATIONAL EXPERIENCES FOR STUDENTS AND

FACULTY IN AN INCLUSIVE AND COLLABORATIVE

AMOUNT

ATTACHMENT 7

990-PF JAMES J. PALLOTTA CHARITABLE TRUST 22-3208194
FORM 990-PF - PART IV
CAPITAL GAINS AND LOSSES FOR TAX ON INVESTMENT INCOME

Kınd of F	APITAL GAI Property	ITO AITO EC		ription	IIIV LOT	P or	Date acquired	Date sold
Gross sale price less expenses of sale	Depreciation allowed/ allowable	Cost or other basis	FMV as of 12/31/69	Adj basis as of 12/31/69	Excess of FMV over adj basis	D	Gain or (loss)	
			BLKRK LIQUI PE: SECURIT		ED TRUS	P	06/26/2018	12/17/2018
20,000.		20,000.						
TOTAL GAIN(L	oss)							
		!						
				•				
	• .							
						-		