Return of Private Foundation

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

▶ Do not enter social security numbers on this form as it may be made public.

OMB No 1545-0052 2018

_	_	alendar year 2018 or tax year beginning		, 2018,	and endir			, 20
١		of foundation				4	Employer identif	
_		AMG CHARITABLE FOUNDATION				\perp	36-470312	
N	lumbe	r and street (or P O box number if mail is not delivered t	o street address)		Room/suite		3 Telephone numb	er (see instructions)
=		HALE STREET				4	(617) 74	7-3300
C	ity or	town, state or province, country, and ZIP or foreign post	al code			6	If exemption application pending, check here	
_	PRI	DES CROSSING, MA 01965						
C	Che	eck all that apply Initial return	Initial return	of a former pu	ublic chari	ty c	1 Foreign organizat	tions, check here >
		Final return	Amended re	turn		1	2 Foreign organiza 85% test, check h	
_		Address change	Name chang	<u> </u>		_		
H	_	eck type of organization X Section 5016 Section 4947(a)(1) nonexempt charitable trust	(c)(3) exempt private to (c)(3) Other taxable pr		~ W	<i>∤</i> ∣₌		n status was terminated
٦		r market value of all assets at J Acco				┦.)(1)(A), check here . P
'			ther (specify)	asii Acci	uai			in a 60-month termination (1)(1)(B), check here
			column (d) must be on ca	ash hasis)		-	dilder section 507(b)	(1)(b), clear lies.
f		Analysis of Revenue and Expenses (The					<u> </u>	(d) Disbursements
	ч г.	total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions)	(a) Revenue and expenses per books	(b) Net inves		(c)	Adjusted net income	for charitable purposes (cash basis only)
_	1	Contributions, gifts, grants, etc., received (attach schedule)						1
	2	Check X if the foundation is not required to attach Sch B.						
١	3	Interest on savings and temporary cash investments.	69,173.		7,173.			
	4	Dividends and interest from securities	7,159.		7,159.			
	5a	Gross rents						
	b	Net rental income or (loss)						, <u> </u>
Revenue	Ga b	Net gain or (loss) from sale of assets not on line 10 Gross sales price for all assets on line 6a	· ·					لم عمد باد بر الم مجموعة بيناوية
Š	7	Capital gain net income (from Part IV, line 2) .			0.			1
ž	8	Net short-term capital gain						1
	9 10 a	Income modifications						1
	Ь	Loss Cost of goods sold .						
		Gross profit or (loss) (attach schedule)						1
	11	Other income (attach schedule)						1
	12	Total. Add lines 1 through 11	76,332.	76	,332.			
_	13	Compensation of officers, directors, trustees, etc	0.					
es	14	Other employee salaries and wages						
ens	15	Pension plans, employee benefits						
Expe	16a	Legal fees (attach schedule) ATCH 1	53,353.					
		Accounting fees (attach schedule)ATCH 2	7,310.					
Administrative	С	Other professional fees (attach schedule)						******
rat	17	Interest						
ist	18	Taxes (attach schedue)[3].	95.					
Ē	19	Depreciation (attach-schedule) and depletion						
Þ	20	Occupancy Stravel, confedences, and meetings 19	2,740.					
9	21	Travel, conferences, and meetings						
and	22	Printing and publications						
bu	23 24 25	Other expenses (attach schedule) ATCH . 4	893.					
atii	24	Total operating and administrative expenses:						
ě		Add lines 13 through 23	64,391.					
o	25	Contributions, gifts, grants paid	271,980.		T			271,980
_	26	Total expenses and disbursements Add lines 24 and 25	336,371.		0.		0.	271,980.
	27	Subtract line 26 from line 12						
	а	Excess of revenue over expenses and disbursements	-260,039.					
	ь	Net investment income (if negative, enter -0-)		76	,332.			
_		Adjusted net income (if negative, enter -0-)						
Fo		Derwork Reduction Act Notice, see instructions.						Form 990-PF (2018)

JSA For Paperwork Reduction Act Notice, see instructions. 8E1410 1 000 6829DW 2687

=	$\overline{}$	(2010)	Attached schedules and amounts in the	Beginning of year	End	of year
Pa	rt li	Balance Sheets	description column should be for end-of-year amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
T	1 (Cash - non-interest-bear	ing	10,375,195.		
			cash investments		10,643,704.	10,643,704
- 1		Accounts receivable				
		•	btful accounts ▶			
		Pledges receivable				
			btful accounts ▶			
- {				500,000.		
- 1			officers, directors, trustees, and other	· 		
			tach schedule) (see instructions)			
			receivable (attach schedule)			
			btful accounts ▶			
B			se			
<u>%</u>			leferred charges			
		` .	e government obligations (attach schedule).			
1'			e stock (attach schedule) ATCH 5	1,229,294.	581,327.	581,327
İ			e bonds (attach schedule)			
1	1 1	nvestments - land, buildings				
	L	and equipment basis ess accumulated deprecia				
	(attach schedule)	·	-		
1:			loans			
17	4 L	and, buildings, and	_ _ [
	Ē	equipment basis less accumulated deprecia	ation			
ا ا	- (attach schedule)	<u> </u>		- 	
1	•	Jither assets (describe •			 -	
10			completed by all filers - see the	12,104,489.	11,225,031.	11,225,031
-			age 1, item ()	12,104,403.	23,775.	
1			ccrued expenses		23,773.	ļ
<u>1</u> 18						<u> </u>
<u>.</u> [2]		Deferred revenue				
Liabilities			rs, trustees, and other disqualified persons	_		<u> </u>
호 2		- -	otes payable (attach schedule)			<u> </u>
-4 22	2 (Other liabilities (describe	•▶)			<u> </u>
					22 775	
- 2			es 17 through 22)	0.	23,775.	
6	F		w SFAS 117, check here ▶ X			
ë	а	and complete lines 24	through 26, and lines 30 and 31.			
[24	4 L			12,104,489.	11,201,256.	<u> </u>
ල 2:	5 T	[emporarily restricted].		·- <u>-</u>		[
필 26	6 F	•	·····			<u> </u>
Net Assets or Fund Balances	F		ot follow SFAS 117, check here ▶ 🔠			
בו	а	and complete lines 27	through 31.			
S 27	7 (Capital stock, trust princ	cipal, or current funds			
현 28	3 P	Paid-in or capital surplus, or	land, bldg , and equipment fund			<u> </u>
<u>ن</u> 29) R	-	ulated income, endowment, or other funds			<u></u>
સૂં 30) Т	otal net assets or fund	l balances (see instructions)	12,104,489.	11,201,256.	
Ž 31	ı T	otal liabilities and	net assets/fund balances (see			
_			<u></u>	12,104,489.	11,225,031.	
			nges in Net Assets or Fund Balar			
			alances at beginning of year - Part I		_	
e	nd-c	of-year figure reporte	d on prior year's return)		1	12,104,489
			line 27a			-260,039
			led in line 2 (itemize) ►			
						11,844,450
		eases not included in			5	643,194
6 T	otal	net assets or fund b	alances at end of year (line 4 minus	line 5) - Part II, column (b), line 30 6	11,201,256

AMC	CHADITADIE	EOIND ATTON	

* I - C	(a) List and de	scribe the kind(s) of property sold (for rick warehouse, or common stock, 200	example, real estate,	(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo, day, yr)	(d) Date sold (mo , day, yr)
1 8	a					
	b			ļ	<u> </u>	
	<u> </u>			<u> </u>		
	<u> </u>				 	
			(a) Cost or other house	 	# \ C = \ \ (1 = 1)	>
	(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		(h) Gain or (lo ((e) plus (f) minu	
8	<u> </u>	<u> </u>				
	0			.		
_	·			 -		
	<u> </u>			<u> </u>		
	Complete only for assets s	howing gain in column (h) and owned	d by the foundation on 12/31/69		0 (0 1 (1)	
	(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any		Gains (Col. (h) ga (k), but not less to Losses (from co	han -0-) or
	1					
t)				<u> </u>	
	·					
	<u> </u>					
				 	 	·- <u>-</u>
2	Capital gain net income	Or (not capital lose)	gain, also enter in Part I, line 7	,		
3	Not short term capital a	ا الله الله الله الله الله الله الله ال	loss), enter -0- in Part I, line 7	2		
3			structions If (loss), enter -0- in $igl)$			
	=			3		
Pa			educed Tax on Net Investment I	ncome	<u> </u>	-
Wa			butable amount of any year in the b	ase perio	d?	Yes X No
1			ear, see the instructions before make	ing any er	ntries	
	(a)	(b)	(c)		(d)	
Cal	Base period years endar year (or tax year beginning in)	Adjusted qualifying distributions	Net value of nonchantable-use assets		Distribution ra (col (b) divided by	
	2017	346,306.	11,442,885.			0.030264
	2016	315,744.	11,596,799.			0.027227
	2015	711,858.	11,588,422.			0.061428
	2014	436,994.	3,345,525.			0.130620
	2013	776,304.	2,620,855.	 		0.296203
_	Total of head and only on to	45		2		0.545742
2			de the total on line 2 hii 5 0 as hii			0.545742
3	_		de the total on line 2 by 5 0, or by if less than 5 years	3		0.109148
	the number of years the	roundation has been in existence	il less than 5 years			
4	Enter the net value of no	oncharitable-use assets for 2018	from Part X, line 5	4	10,	989,371.
5	Multiply line 4 by line 3	******		5	1,	199,468.
6	Enter 1% of net investme	ent income (1% of Part I, line 27b)		6		763.
7	Add lines 5 and 6			7	1,:	200,231.
8	Enter qualifying distribut] _]		
	If the 9 is said to a second	ons from Part XII, line 4		8		271,980.

	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see	ınstrı	uction	5)
	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1			
	Date of ruling or determination letter (attach copy of letter if necessary - see instructions)			- 2 - 2
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check		<u> </u>	527.
	here and enter 1% of Part I, line 27b			
	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of J			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-)			
3	Add lines 1 and 2		1,	527.
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		1,	527.
	Credits/Payments			
a	2018 estimated tax payments and 2017 overpayment credited to 2018 6a			
	Exempt foreign organizations - tax withheld at source			
	Tax paid with application for extension of time to file (Form 8868) 6c 1,600.			
	Backup withholding erroneously withheld			
	Total credits and payments Add lines 6a through 6d		1,6	500.
	Enter any penalty for underpayment of estimated tax. Check here X if Form 2220 is attached			6.
	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed			67
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			67.
	Enter the amount of line 10 to be Credited to 2019 estimated tax ► 67. Refunded ► 11			
	VII-A Statements Regarding Activities	1		T
	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it		Yes	No X
	participate or intervene in any political campaign?	1a		<u> </u>
	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the	۱		X
	nstructions for the definition	1b_		<u> </u>
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials			Ì
	published or distributed by the foundation in connection with the activities		-	
	Did the foundation file Form 1120-POL for this year?	1c		_^
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year 11 On the foundation \$\int \$\text{\$\tex{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\exitit{\$\text{\$\text{\$\text{	1		l
	(2) On realization			
ď	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers > \$0.			
	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		Х
3 H	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles	I		 .
C	of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		Х
4a [Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		Х
b l	f "Yes," has it filed a tax return on Form 990-T for this year?	4b		
	Nas there a liquidation, termination, dissolution, or substantial contraction during the year?	5		х
6 /	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either			
•	By language in the governing instrument, or			
•	By state legislation that effectively amends the governing instrument so that no mandatory directions that			
	conflict with the state law remain in the governing instrument?	6_	X	
	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV	7_	X	
	Enter the states to which the foundation reports or with which it is registered. See instructions. IA,			
b l	f the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General			
(or designate) of each state as required by General Instruction G? If "No," attach explanation	8b_	Х	
9 l:	s the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or			
	1942(j)(5) for calendar year 2018 or the tax year beginning in 2018? See the instructions for Part XIV If "Yes,"			
4		9		Х
	complete Part XIV	-		
c	complete Part XIV			х

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		Х
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 WWW . AMG . COM			
14	The books are in care of ▶ LAURA THOMPSON Telephone no ▶ 617-747	-330	0	
	Located at ▶600 HALE STREET, PRIDES CROSSING, MA ZIP+4 ▶ 01965			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here		>	ا
	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	
	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			ĺ
	the foreign country ▶			<u> </u>
Pa	rt VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1a	During the year, did the foundation (either directly or indirectly)			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes X No			1
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a		İ	
		l		
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	1		
	(1) by compensation to, or pay or reimbarde the expenses of a disquarmed 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)?			
	the benefit or use of a disqualified person)?			ĺ
	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)			
h	of f any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations			
	section 53 4941(d)-3 or in a current notice regarding disaster assistance? See instructions	1b		x
	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		X
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))			
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?			
	If "Yes," list the years 🕨,,,			
þ	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)			'
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to			
	all years listed, answer "No" and attach statement - see instructions)	<u>2b</u>		X
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here			ı
	•			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise			
	at any time during the year?			
b	If "Yes," did it have excess business holdings in 2018 as a result of (1) any purchase by the foundation or			
	disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the			
	Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of			
	the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the			
-	foundation had excess business holdings in 2018)	3b		_ v
	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		X
þ	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its		—	
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2018?	4b		<u> </u>

Pa	rt VII-B	Statements Regarding Activities	for Which Form	4720 May Be Rec	uired (continued)			
5a	During th	e year, did the foundation pay or incur any am	ount to				Yes	No
•	(1) Carry	on propaganda, or otherwise attempt to influ	ence legislation (sectio	n 4945(e))?	. Yes X No	,		
	(2) Influe	ence the outcome of any specific public el	ection (see section 4	4955), or to carry or				
	direct	ly or indirectly, any voter registration drive?, ,				>		
	(3) Provid	de a grant to an individual for travel, study, or	other similar purposes?		. Yes X No	•		
	(4) Provid	de a grant to an organization other than a	ı charıtable, etc , org	janization described i				1 l
		on 4945(d)(4)(A)? See instructions				•		
	(5) Provid	de for any purpose other than religious, c	haritable, scientific, l	literary, or education				1 }
		ses, or for the prevention of cruelty to children			· — —			
b		nswer is "Yes" to 5a(1)-(5), did any of the					<u> </u>	ائی۔
	-	ns section 53 4945 or in a current notice rega	-			<u>5b</u>		X
	_	tions relying on a current notice regarding disa						
С		swer is "Yes" to question 5a(4), does the						
		t maintained expenditure responsibility for the	-		. X Yes No	'		. 1
		attach the statement required by Regulations s						
6a		foundation, during the year, receive any fu	· ·		Yes X No			. 1
ь		onal benefit contract?			. — —	6b		<u></u> '
U		o 6b, file Form 8870	ectly of manectly, on a	personal benefit contra	101.	00		
7a		ne during the tax year, was the foundation a p	earty to a probibited tax	shelter transaction?	Yes X No	,		
b		lid the foundation receive any proceeds or ha				7b		\overline{x}
8		ndation subject to the section 4960 tax on pa	-					
•		tion or excess parachute payment(s) during the			. Yes X No	,		. 1
Pai	rt VIII	Information About Officers, Directo	rs, Trustees, Fou	ndation Manager				
	l ist all of	and Contractors ficers, directors, trustees, and foundat	ion managers and	their compensation	See instructions			
<u> </u>	2.00 0.17 0.1		(b) Title, and average	(c) Compensation	(d) Contributions to	(e) Expens	e accou	unt.
	_	(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	employee benefit plans and deferred compensation	other all	owance	s ·
ATCI	H 8			0.	0.			<u>0.</u>
						···-		
	Compane	ation of five highest-paid employees	Inther than thes	e included on line	a 1 - see instructi	one) If n	200	onter
•	"NONE."	action of tive highest-paid employees	(Other than thos	e included on inc	c i - sec instructi	φπ <i>σ</i> γ. π τι	Jile, (
			(b) Title, and average	(1) (1)	(d) Contributions to employee benefit	(e) Expens	e accou	unt.
(a)	Name and a	ddress of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	plans and deferred compensation	other all	owance	s
	_	,		· · · · · · · · · · · · · · · · · · ·			•	
	NONE		1					
				-		_		
_								
						_		
<u> Fotal</u>	number o	f other employees paid over \$50,000			<u> ▶</u>			
						Form 990)-PF (2018)

Par	t VIII	Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Emploannd Contractors (continued)	yees,
3	Five I	nighest-paid independent contractors for professional services. See instructions. If none, enter "NONE	E."
		(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
	NONE		
[nta	Lnumbe	er of others receiving over \$50,000 for professional services	
	t IX-A	Summary of Direct Charitable Activities	<u> </u>
		idation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of	
org	ganization	s and other beneficianes served, conferences convened, research papers produced, etc	Expenses
1	NONE		
_			
_			
2			
_			
3_			
_			
_			
4 _			
_			
	IV D	Summary of Brancon Balated Investments (see instructions)	
_	IX-B	Summary of Program-Related Investments (see Instructions) two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
	NONE	two largest program-related investments made by the localization during the tax year on lines 1 and 2	
. –			
_			
2 _			
_			
_	-		
All	other pro	gram-related investments. See instructions	
3 _			
	NONE		
	.ا خدم	non 1 through 2	

Pa	Minimum Investment Return (All domestic foundations must complete this part. Fore see instructions.)	eign foun	dations,
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	868,898.
	Average of monthly cash balances	1b	10,287,824.
	Fair market value of all other assets (see instructions)	1c	
d		1d	11,156,722.
	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	11,156,722.
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see	-	
*	instructions)	4	167,351.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	10,989,371.
6	Minimum investment return. Enter 5% of line 5	6	549,469.
	t XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating four		317,107.
r a	and certain foreign organizations, check here ▶ and do not complete this part)	iuations	
1	Minimum investment return from Part X, line 6	1	549,469.
		- 	
2a	Tax of livestified income for 2016 from Part VI, line 5	}	
	Income tax for 2018 (This does not include the tax from Part VI) 2b	-	1,527.
	Add lines 2a and 2b	2c	547,942.
3	Distributable amount before adjustments Subtract line 2c from line 1		
4	Recoveries of amounts treated as qualifying distributions		547,942.
5	Add lines 3 and 4	5	547,342.
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,	_	547,942.
	line 1	7	547,942.
Par	t XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
а	Expenses, contributions, gifts, etc - total from Part I, column (d), line 26	1a	271,980.
b	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	
	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	271,980.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income		
	Enter 1% of Part I, line 27b See instructions.	5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	271,980.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when ca		whether the foundation
_	qualifies for the section 4940(e) reduction of tax in those years	3	

Form 990-PF (2018)

e Excess from 2018 . .

	•					
	n 990-PF (2018)		CHARITABLE FOUN			1703120 Page 1
		erating Foundation				OT APPLICABLE
ຸ1a ຸ	If the foundation has	•		= = = = = = = = = = = = = = = = = = = =	· 1	
	foundation, and the ruling	•				2) - 1 1040/1/5
_	Check box to indicate v		is a private operating		in section 4942(j)(3) or 4942(j)(5)
2 a	Enter the lesser of the ad- justed net income from Part	Tax year_	#1.0047	Prior 3 years	100015	(e) Total
	I or the minimum investment	(a) 2018	(b) 2017	(c) 2016	(d) 2015	
	return from Part X for each					
	year listed	<u> </u>			 	-
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					
е	Qualifying distributions made directly for active conduct of exempt activities. Subtract line					
3	2d from line 2c					<u> </u>
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, 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)					
	public and 5 or more exempt organizations as provided in section 4942					
	(j)(ð)(B)(III)	-				
	port from an exempt					
	organization					·· · ·
Pa	rt XV Supplemen	tary Information (uring the year - see	1 A A A A.	only if the found	lation had \$5,000 or	more in assets a
1	Information Regarding	<u> </u>				
		_		re than 2% of the to	tal contributions receive	d by the foundation
	before the close of any				See section 507(d)(2))	•
-	N/A	the formulation who	40º/	f the stack of a ser	poration (or an equally	large parties of the
Б	ownership of a partner					large portion or the
	N/A					
2	Information Regarding	Contribution, Grant	, Gift, Loan, Scholars	hip, etc., Programs:		
	Check here ► X if the unsolicited requests for complete items 2a, b, c	or funds If the found	ation makes gifts, gr	to preselected cha ants, etc , to individu	iritable organizations an ials or organizations und	d does not accep er other conditions
a	The name, address, ar	nd telephone number	or email address of t	he person to whom ap	oplications should be addre	essed

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

c Any submission deadlines

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

Form **990-PF** (2018)

Form 990-PF (2018)

THE AMG CHARITABLE FOUNDATION

Part XV Supplementary Information (continued) Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient

Remaind address (home or business)

Remaind address (home or business)

Remaind address (home or business)

Remaind Tracipient is an individual, show any relationship to any foundation manager or substantial continbutor or substa Purpose of grant or contribution Amount a Paid during the year ATCH 9 OPERATING SUPPORT 271,980. 271,980. **b** Approved for future payment Total . .

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Page **12**

Enter gross amounts unless otherwise indicated	Unrela	ated business income	Excluded by	section 512, 513, or 514	(e) Related or exempt
1 Program service revenue	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	function income (See instructions)
a				""	(OCO MONOGONO)
b	_		<u> </u>		
С					
d					
e				-	
f					
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash investments •			14	69,173.	
4 Dividends and interest from securities		<u> </u>	18	7,159.	
Net rental income or (loss) from real estate					
a Debt-financed property					
b Not debt-financed property					
6 Net rental income or (loss) from personal property					
7 Other investment income	1				
Gain or (loss) from sales of assets other than inventory					
9 Net income or (loss) from special events · · ·					
Gross profit or (loss) from sales of inventory					
Other revenue a					
b					
c					
d					
е					
Subtotal Add columns (b), (d), and (e)	ulations) s to the A	ccomplishment of	Exempt Purp	ooses	
Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e)	ulations) s to the Ac	ccomplishment of	Exempt Purp	ooses of Part XVI-A contrib	
Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculart XVI-B Relationship of Activitie sine No. Explain below how each activity	ulations) s to the Ac	ccomplishment of	Exempt Purp	ooses of Part XVI-A contrib	uted importantly to t
Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculart XVI-B Relationship of Activitie	ulations) s to the Ac	ccomplishment of	Exempt Purp	ooses of Part XVI-A contrib	uted importantly to t
Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e)	ulations) s to the Ac	ccomplishment of	Exempt Purp	ooses of Part XVI-A contrib	uted importantly to t
Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculart XVI-B Relationship of Activitie sine No. Explain below how each activity	ulations) s to the Ac	ccomplishment of	Exempt Purp	ooses of Part XVI-A contrib	uted importantly to t
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Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculart XVI-B Relationship of Activitie sine No. Explain below how each activity	ulations) s to the Ac	ccomplishment of	Exempt Purp	ooses of Part XVI-A contrib	uted importantly to t
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Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculart XVI-B Relationship of Activitie Explain below how each activitie	ulations) s to the Ac	ccomplishment of	Exempt Purp	ooses of Part XVI-A contrib	uted importantly to t
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Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculart XVI-B Relationship of Activitie Explain below how each activitie	ulations) s to the Ac	ccomplishment of	Exempt Purp	ooses of Part XVI-A contrib	uted importantly to t
Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculart XVI-B Relationship of Activitie Explain below how each activitie	ulations) s to the Ac	ccomplishment of	Exempt Purp	ooses of Part XVI-A contrib	uted importantly to t
Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculart XVI-B Relationship of Activitie Explain below how each activitie	ulations) s to the Ac	ccomplishment of	Exempt Purp	ooses of Part XVI-A contrib	uted importantly to t
Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculart XVI-B Relationship of Activitie	ulations) s to the Ac	ccomplishment of	Exempt Purp	ooses of Part XVI-A contrib	uted importantly to t
Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e)	ulations) s to the Ac	ccomplishment of	Exempt Purp	ooses of Part XVI-A contrib	uted importantly to t
Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e)	ulations) s to the Ac	ccomplishment of	Exempt Purp	ooses of Part XVI-A contrib	uted importantly to t
2 Subtotal Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calce Part XVI-B Relationship of Activitie Line No. Explain below how each activity	ulations) s to the Ac	ccomplishment of	Exempt Purp	ooses of Part XVI-A contrib	uted importantly to t

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	•	,									
Form 9	90-PF (2	2018)	THE AMG	CHARITAE	BLE FOUND	ATION		36-470	3120	Pa	ge 1 .
Parť	XVII	Information R Exempt Organ		ransfers to	and Tran	sactions a	ınd Relationsh	ips With Non	charit	table	;
1 [Did the	e organization direct	tly or indirectly	engage in a	any of the fo	llowing with	any other organi	zation described		Yes	No
1	n sec	tion 501(c) (other	than section	501(c)(3)	organization	s) or in se	ection 527, relat	ing to political			
C	organi	zations?									
		ers from the reportin	-								
		sh							1a(1)		Х
(2) Oth	ner assets					• • • • • • • • •		1a(2)		X
		transactions									
		es of assets to a no									X
		chases of assets fro			-						X
		ntal of facilities, equi									X
•	•	mbursement arrange									X
		ans or loan guarantee									X
		formance of service			_						X
		g of facilities, equipm	_								X
		answer to any of th									
		of the goods, other		-	-						
	-	n any transaction or				· · · · · · · · · · · · · · · · · · ·		 -	_		
(a) Line	e no	(b) Amount involved N/A	(c) Name of	noncharitable e	xempt organization	N/A	Description of transfers	, transactions, and sna	ring arra	ngeme	115
	-	N/A		-	· · · · · ·		<u> </u>				
	 +			<u> </u>							
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						- -					
								-		-	
		-									
2a ls	s the t	foundation directly (or indirectly at	ffiliated with	or related t	o one or m	ore tax-exempt o	rganizations			
		ed in section 501(c)	-					-	Ye	s X	No
		" complete the follow	·		(-), -:: -					_	,
		(a) Name of organization		(b)	Type of organiza	ation	(c)	Description of relations	ship		
							and statements, and to the	ne best of my knowledg	e and b	elief, it	is true
Sian	correct	, and complete Declaration of	preparer (other than t	uxpayer) is based	on all information o	wnich preparer h	-	W :=	alu :	41-	
Sign		Thauk	YU	וירת מא	15 2010	•	SVP, Tax	May the IRS			
Here	Sign	ature of officer or trustee		Date	1.7 2013	Title		See instruction	_	Yes	No

Form **990-PF** (2018)

_ if PTIN

self-employed P01427424

617-530-5000

Firm's EIN 13-4008324

Phone no

Paid

Preparer

Use Only

Print/Type preparer's name

LAURA MCNEIL

Firm's name

arer's name

NEIL

Preparer's signature

Jaumwill

PRICEWATERHOUSECOOPERS LLP

Firm's address ▶ 101 SEAPORT BLVD., SUITE 500

MΑ

BOSTON,

Date

02210

11/14/2019

AMG

BOOKS	53,353.	53, 353.	AM	
PER E			V 18-7.6F	
	ស្ត	TOTALS		

ATTACHMENT 1

- LEGAL FEES

PART I

FORM 990PF,

REVENUE AND EXPENSES PER BOOKS

INVESTMENT INCOME NET

ADJUSTED NET INCOME

CHARITABLE PURPOSES

DESCRIPTION

LEGAL COMPLIANCE SERVICES

	•	•		·	
int 2		CHARITABLE PURPOSES			
ATTACHMENT 2		ADJUSTED NET INCOME			
		NET INVESTMENT INCOME			
		REVENUE AND EXPENSES PER BOOKS	7,310.	7,310.	
	FORM 990PF, PART I - ACCOUNTING FEES	DESCRIPTION	TAX RETURN PREPARATION SVRCS	TOTALS	

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ATTACHMENT 3		CHARITABLE PURPOSES		
ATTAC		ADJUSTED NET INCOME		
	,	NET INVESTMENT INCOME		
		REVENUE AND EXPENSES PER BOOKS	95.	95.
	ES			TOTALS
-	FORM 990PF, PART I - TAXES	DESCRIPTION	EXCISE TAX PAYMENTS	

36-4703120

ATTACHMENT 4

AMG

EXPENSES
OTHER
ı
Н
ы
PART
_ •

CHARITABLE	PURPOSES	
ADJUSTED NET	INCOME	
NET INVESTMENT	INCOME	
REVENUE AND EXPENSES	PER BOOKS 538. 240. 70.	893.
	DESCRIPTION CT CORPORATION DELUXE BUSINESS CHECKS MA OFF OF THE ATTORNEY GENERAL AMERICAN EXPRESS	TOTALS

ATTACHMENT 5

581,327.

ENDING FMV

ENDING BOOK VALUE 581,327.

581,327.

581,327.

- CORPORATE STOCK

PART II

FORM 990PF,

AMG

V 18-7.6F

6829DW 2687

L MANAGERS GROUP, INC	TOTALS				
DESCRIPTION AFFILIATED MANAGERS GROUP, INC				,	

2018 FORM 990-PF

THE AMG CHARITABLE FOUNDATION

36-4703120

ATTACHMENT 6

FORM 990PF, PART III - OTHER DECREASES IN NET WORTH OR FUND BALANCES

<u>DESCRIPTION</u> <u>AMOUNT</u>

UNREALIZED INVESTMENT LOSSES 643,194.

TOTAL 643,194.

ATTACHMENT 7

FORM 990PF, PART VII-B, LINE 5C-EXPENDITURE RESPONSIBILITY STATEMENT

GRANTEE'S NAME:

COALITION FOR INCLUSIVE CAPITALISM

GRANTEE'S ADDRESS: 435 EAST 52ND STREET, APT 18C

CITY, STATE & ZIP: NEW YORK, NY 10022

GRANT DATE:

08/29/2016

GRANT AMOUNT:

100,000.

GRANT PURPOSE:

OPERATING SUPPORT

AMOUNT EXPENDED:

ANY DIVERSION?

NO

DATES OF REPORTS:

PENDING

VERIFICATION DATE:

RESULTS OF VERIFICATION:

THE FOUNDATION HAS MADE GOOD-FAITH ATTEMPTS TO CONTACT THE GRANTEE REGARDING THE DELIVERY OF THE REQUIRED EXPENDITURE RESPONSIBILITY REPORTS, INCLUDING RECENT FOLLOW-UP REQUESTS. AS OF THE DATE OF THIS FILING, THE FOUNDATION STILL IS AWAITING RECEIPT OF THE REPORTS.

GRANTEE'S NAME:

IMPETUS FOUNDATION

GRANTEE'S ADDRESS: 183 EVERSHOLT STREET

CITY, STATE & ZIP: LONDON

FOREIGN COUNTRY:

UNITED KINGDOM NW1 1BU

GRANT DATE:

10/12/2016

GRANT AMOUNT:

12,544.

GRANT PURPOSE:

OPERATING SUPPORT

AMOUNT EXPENDED:

ANY DIVERSION?

NO

DATES OF REPORTS:

PENDING

VERIFICATION DATE:

RESULTS OF VERIFICATION:

THE FOUNDATION HAS MADE GOOD-FAITH ATTEMPTS TO CONTACT THE GRANTEE REGARDING THE DELIVERY OF THE REQUIRED EXPENDITURE RESPONSIBILITY REPORTS, INCLUDING RECENT FOLLOW-UP REQUESTS. AS OF THE DATE OF THIS FILING, THE FOUNDATION STILL IS AWAITING RECEIPT OF THE REPORTS.

GRANTEE'S NAME:

CHRISTIANS AGAINST POVERTY

GRANTEE'S ADDRESS: 30 NORTH ST

CITY, STATE & ZIP: BRADFORD

FOREIGN COUNTRY:

UNITED KINGDOM BD1 4EW

GRANT DATE:

05/25/2017

GRANT AMOUNT:

1,000. OPERATING SUPPORT

GRANT PURPOSE: AMOUNT EXPENDED:

ANY DIVERSION?

NO

DATES OF REPORTS:

PENDING

VERIFICATION DATE:

RESULTS OF VERIFICATION:

THE FOUNDATION HAS MADE GOOD-FAITH ATTEMPTS TO CONTACT THE GRANTEE REGARDING THE DELIVERY OF THE REQUIRED EXPENDITURE RESPONSIBILITY REPORTS, INCLUDING RECENT FOLLOW-UP REQUESTS. AS OF THE DATE OF THIS FILING, THE FOUNDATION STILL IS AWAITING RECEIPT OF THE REPORTS. CONT'D ON NEXT PAGE

ATTACHMENT 7 (CONT'D)

FORM 990PF, PART VII-B, LINE 5C-EXPENDITURE RESPONSIBILITY STATEMENT

GRANTEE'S NAME: ROYAL ACADEMY OF ART LONDON

GRANTEE'S ADDRESS: BURLINGTON HOUSE

CITY, STATE & ZIP: PICADILLY FOREIGN PROVINCE: MAYFAIR

FOREIGN COUNTRY: UNITED KINGDOM W1J OBD

GRANT DATE: 07/13/2017

GRANT AMOUNT: 13,371.
GRANT PURPOSE: OPERATING SUPPORT

AMOUNT EXPENDED:

ANY DIVERSION? NO

DATES OF REPORTS: PENDING

VERIFICATION DATE:

RESULTS OF VERIFICATION:

THE FOUNDATION HAS MADE GOOD-FAITH ATTEMPTS TO CONTACT THE GRANTEE REGARDING THE DELIVERY OF THE REQUIRED EXPENDITURE RESPONSIBILITY REPORTS, INCLUDING RECENT FOLLOW-UP REQUESTS. AS OF THE DATE OF THIS FILING, THE FOUNDATION STILL IS AWAITING RECEIPT OF THE REPORTS.

GRANTEE'S NAME: SERPENTINE GALLERIES GRANTEE'S ADDRESS: KENSINGTON GARDENS

CITY, STATE & ZIP: LONDON

FOREIGN COUNTRY: UNITED KINGDOM W2 3XA

GRANT DATE: 07/13/2017

GRANT AMOUNT: 1,310.
GRANT PURPOSE: OPERATING SUPPORT

AMOUNT EXPENDED:

ANY DIVERSION? NO

DATES OF REPORTS: PENDING

VERIFICATION DATE:

RESULTS OF VERIFICATION:

THE FOUNDATION HAS MADE GOOD-FAITH ATTEMPTS TO CONTACT THE GRANTEE REGARDING THE DELIVERY OF THE REQUIRED EXPENDITURE RESPONSIBILITY REPORTS, INCLUDING RECENT FOLLOW-UP REQUESTS. AS OF THE DATE OF THIS FILING, THE FOUNDATION STILL IS AWAITING RECEIPT OF THE REPORTS.

GRANTEE'S NAME: NEW WAYS

GRANTEE'S ADDRESS: 47 CUMBERLAND STREET

CITY, STATE & ZIP: LONDON

FOREIGN COUNTRY: UNITED KINGDOM SW1V 4LY

GRANT DATE: 10/21/2017

GRANT AMOUNT: 2,174.

GRANT PURPOSE: OPERATING SUPPORT

AMOUNT EXPENDED:

ANY DIVERSION? NO

DATES OF REPORTS: PENDING

VERIFICATION DATE:

RESULTS OF VERIFICATION:

THE FOUNDATION HAS MADE GOOD-FAITH ATTEMPTS TO CONTACT THE GRANTEE REGARDING THE DELIVERY OF THE REQUIRED EXPENDITURE RESPONSIBILITY REPORTS, INCLUDING RECENT FOLLOW-UP REQUESTS. AS OF THE DATE OF THIS FILING, THE FOUNDATION STILL IS AWAITING RECEIPT OF THE REPORTS.

ATTACHMENT 7 (CONT'D)

FORM 990PF, PART VII-B, LINE 5C-EXPENDITURE RESPONSIBILITY STATEMENT

GRANTEE'S NAME: BEUTEL GOODMAN CHARITABLE FOUNDATION

GRANTEE'S ADDRESS: 20 EGLINTON AVENUE WEST, SUITE 2000

CITY, STATE & ZIP: TORONTO FOREIGN PROVINCE: ONTARIO

FOREIGN COUNTRY: CANADA M4R1K8 GRANT DATE: 04/10/2018

GRANT AMOUNT: 5,000.

OPERATING SUPPORT GRANT PURPOSE: 5,000.

AMOUNT EXPENDED:

ANY DIVERSION? NO

DATES OF REPORTS: 1/9/2019

VERIFICATION DATE:

RESULTS OF VERIFICATION:

GRANTEE'S NAME: SERPENTINE GALLERIES GRANTEE'S ADDRESS: KENSINGTON GARDENS

CITY, STATE & ZIP: LONDON

FOREIGN COUNTRY: UNITED KINGDOM W2 3XA

GRANT DATE: 04/26/2018

GRANT AMOUNT: 23,073.

GRANT PURPOSE: OPERATING SUPPORT

AMOUNT EXPENDED:

ANY DIVERSION? NO

DATES OF REPORTS: PENDING

VERIFICATION DATE:

RESULTS OF VERIFICATION:

THE FOUNDATION HAS MADE GOOD-FAITH ATTEMPTS TO CONTACT THE GRANTEE REGARDING THE DELIVERY OF THE REQUIRED EXPENDITURE RESPONSIBILITY REPORTS, INCLUDING RECENT FOLLOW-UP REQUESTS. AS OF THE DATE OF THIS FILING, THE FOUNDATION STILL IS AWAITING RECEIPT OF THE REPORTS.

GRANTEE'S NAME: BREST FRIENDS AL JALILA FOUNDATION

FIRST FLOOR, BLDG. 12 GRANTEE'S ADDRESS:

CITY, STATE & ZIP: DUBAI HEALTHCARE CITY, PO BOX 300100

500.

FOREIGN PROVINCE: DUBAI

FOREIGN COUNTRY: UNITED ARAB EMIRATES

GRANT DATE: 05/30/2018

GRANT AMOUNT: 500. GRANT PURPOSE: OPERATING SUPPORT

AMOUNT EXPENDED:

ANY DIVERSION? NO

5/30/2018 DATES OF REPORTS:

VERIFICATION DATE:

RESULTS OF VERIFICATION:

GRANTEE'S NAME: SERPENTINE GALLERIES KENSINGTON GARDENS GRANTEE'S ADDRESS:

CITY, STATE & ZIP: LONDON

UNITED KINGDOM W2 3XA FOREIGN COUNTRY:

GRANT DATE: 07/18/2018

CONT'D ON NEXT PAGE

ATTACHMENT 7 (CONT'D)

FORM 990PF, PART VII-B, LINE 5C-EXPENDITURE RESPONSIBILITY STATEMENT

GRANT AMOUNT:

1,379.

GRANT PURPOSE:

OPERATING SUPPORT

AMOUNT EXPENDED:

ANY DIVERSION?

NO

DATES OF REPORTS:

PENDING

VERIFICATION DATE:

RESULTS OF VERIFICATION:

THE FOUNDATION HAS MADE GOOD-FAITH ATTEMPTS TO CONTACT THE GRANTEE REGARDING THE DELIVERY OF THE REQUIRED EXPENDITURE RESPONSIBILITY REPORTS, INCLUDING RECENT FOLLOW-UP REQUESTS. AS OF THE DATE OF THIS FILING, THE FOUNDATION STILL IS AWAITING RECEIPT OF THE REPORTS.

GRANTEE'S NAME:

ROYAL CHILDREN'S HOSPITAL FOUNDATION

GRANTEE'S ADDRESS:

LEVEL 2, 48 FLEMINGTON ROAD

CITY, STATE & ZIP:

PARKVILLE

FOREIGN COUNTRY:

AUSTRALIA VIC 3052

GRANT DATE:

09/20/2018

GRANT AMOUNT:

745.

GRANT PURPOSE:

OPERATING SUPPORT

AMOUNT EXPENDED:

745.

ANY DIVERSION?

NO 11/6/2019

DATES OF REPORTS:

VERIFICATION DATE:

RESULTS OF VERIFICATION:

V 18-7.6F 6829DW 2687 AMG

FORM 990PF, PART VIII - LIST OF OFFICERS,	FICERS, DIRECTORS, AND TRUSTEES		ATTACHMENT	MENT 8
NAME AND ADDRESS	TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION	COMPENSATION	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	EXPENSE ACCT AND OTHER ALLOWANCES
PETER MACEWEN 600 HALE STREET PRIDES CROSSING, MA 01965	PRES&TREAS/DIR (THROUGH 12/18) 3.00	o	ó	Ċ
DAVID M. BILLINGS 600 HALE STREET PRIDES CROSSING, MA 01965	EVP & SECRETARY/DIRECTOR 3.00	. 0	Ö	·
JENNIFER BENSON KELLY 600 HALE STREET PRIDES CROSSING, MA 01965	EXECUTIVE DIRECTOR/DIRECTOR 8.00	.0	Ö	·
SEAN M. HEALEY 777 SOUTH FLAGLER DRIVE WEST PALM BEACH, FL 33401	DIRECTOR 3.00	.0	. 0	·
ALEXANDRA LYNN 600 HALE STREET PRIDES CROSSING, MA 01965	PRES&TREAS/VP/DIR(AS OF 12/18) 3.00	. 0	Ö	. 0
NATHANIEL DALTON 600 HALE STREET PRIDES CROSSING, MA 01965	EXEC DIR/VP/DIR(THROUGH 11/18) 3.00	. 0	Ö	· o

FORM 990PF, PART VIII - LIST OF OFFICERS,	OFFICERS, DIRECTORS, AND TRUSTEES		ATTACH	ATTACHMENT 8 (CONT'D)
NAME AND ADDRESS	TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION	COMPENSATION	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	EXPENSE ACCT AND OTHER ALLOWANCES
SELENE OH 600 HALE STREET PRIDES CROSSING, MA 01965	EXEC DIR/VP/DIR (AS OF 12/18) 3.00			. 0
JAY HORGEN 600 HALE STREET PRIDES CROSSING, MA 01965	VICE PRESIDENT 3.00	. 0	ò	.0
HUGH CUTLER 600 HALE STREET PRIDES CROSSING, MA 01965	VICE PRESIDENT 3.00	· 0	.0	. 0
CHRISTINE CARSMAN 600 HALE STREET PRIDES CROSSING, MA 01965	VICE PRESIDENT 3.00	. 0	.0	. 0
JOHN ERICKSON 600 HALE STREET PRIDES CROSSING, MA 01965	VICE PRESIDENT 3.00	.0	.0	. 0
RIZWAN JAMAL 600 HALE STREET PRIDES CROSSING, MA 01965	VICE PRESIDENT 3.00	·	.0	· O

THE AMG CHARITABLE FOUNDATION	2018 FORM 990-PF			36-4703120
FORM 990PF, PART VIII - LIST OF OFFICERS,	ERS, DIRECTORS, AND TRUSTEES		ATTACHMENT	MENT 8 (CONT'D)
NAME AND ADDRESS	TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION	COMPENSATION	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	EXPENSE ACCT AND OTHER ALLOWANCES
AARON GALIS 600 HALE STREET PRIDES CROSSING, MA 01965	VICE PRESIDENT 3.00	Ċ	. 0	O
BENJAMIN LANGILLE 600 HALE STREET PRIDES CROSSING, MA 01965	VICE PRESIDENT 3.00	0	ó	Ċ
DEAN MAINES 600 HALE STREET PRIDES CROSSING, MA 01965	VICE PRESIDENT 3.00	°	o	·
LAURA THOMPSON 600 HALE STREET PRIDES CROSSING, MA 01965	VICE PRESIDENT 3.00	. 0		·
GARRET WESTON 600 HALE STREET PRIDES CROSSING, MA 01965	VICE PRESIDENT 3.00	Ö	o	·

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VICE PRESIDENT (AS OF 6/18)

3.00

LOUIS SOMMA 600 HALE STREET PRIDES CROSSING, MA 01965 ATTACHMENT 8 (CONT'D)

FORM 990PF, PART VIII - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES

V 18-7.6F

EXPENSE ACCT AND OTHER ALLOWANCES	Ċ	Ċ	·o	0.
CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	.0	· 0	. 0	0
COMPENSATION	.0	ė	Ö	0.
TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION	VICE PRESIDENT 3.00	VICE PRESIDENT (AS OF 6/18) 3.00	VICE PRESIDENT (THROUGH 12/18)	GRAND TOTALS
NAME AND ADDRESS	CAITLIN NUNAN 600 HALE STREET PRIDES CROSSING, MA 01965	ELIZABETH GOLDSTEIN 600 HALE STREET PRIDES CROSSING, MA 01965	CLAIRE MANNING 600 HALE STREET PRIDES CROSSING, MA 01965	