

EXTENDED TO NOVEMBER 16, 2020

Return of Private Foundation

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

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OMB No 1545-0047

2019

Open to Public Inspection

Form 990-PF

Department of the Treasury
Internal Revenue Service

For calendar year 2019 or tax year beginning

, and ending

| | | |
|--|--|--|
| Name of foundation CLERMONT FOUNDATION | | A Employer identification number 04-6772671 |
| Number and street (or P.O. box number if mail is not delivered to street address) C/O HOWARD COX, 200 SEAPORT BLVD S7A | | B Telephone number 6175631900 |
| City or town, state or province, country, and ZIP or foreign postal code BOSTON, MA 02210 | | C If exemption application is pending, check here <input type="checkbox"/> |
| G Check all that apply: Initial return <input type="checkbox"/> Initial return of a former public charity <input type="checkbox"/> Final return <input type="checkbox"/> Amended return <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> | | D 1. Foreign organizations, check here <input type="checkbox"/> 2. Foreign organizations meeting the 85% test, check here and attach computation <input type="checkbox"/> |
| H Check type of organization: <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation <input type="checkbox"/> | | E If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/> |
| I Fair market value of all assets at end of year (from Part II, col. (c), line 16) \$ 18,176,790. | J Accounting method <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual Other (specify) _____ | F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/> |

| Part I Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a)) | | (a) Revenue and expenses per books | (b) Net investment income | (c) Adjusted net income | (d) Disbursements for charitable purposes (cash basis only) |
|--|--|------------------------------------|---------------------------|-------------------------|---|
| 1 Contributions, gifts, grants, etc., received | | 2,123,100. | | | |
| 2 Check <input type="checkbox"/> if the foundation is not required to attach Sch. B | | | | | |
| 3 Interest on savings and temporary cash investments | | | | | |
| 4 Dividends and interest from securities | | 423,015. | 423,015. | | STATEMENT 1 |
| 5a Gross rents | | | | | |
| b Net rental income or (loss) | | | | | |
| 6a Net gain or (loss) from sale of assets not on line 10 | | 2,102,057. | | | |
| b Gross sales price for all assets on line 6a | | 2,114,257. | | | |
| 7 Capital gain net income (from Part IV, line 2) | | | 2,102,057. | | |
| 8 Net short-term capital gain | | | | | |
| 9 Income modifications | | | | | |
| 10a Gross sales less returns and allowances | | | | | |
| b Less Cost of goods sold | | | | | |
| c Gross profit or (loss) | | | | | |
| 11 Other income | | | | | |
| 12 Total. Add lines 1 through 11 | | 4,648,172. | 2,525,072. | 0. | |
| 13 Compensation of officers, directors, trustees, etc | | 0. | 0. | 0. | 0. |
| 14 Other employee salaries and wages | | | | | |
| 15 Pension plans, employee benefits | | | | | |
| 16a Legal fees | | | | | |
| b Accounting fees STMT 2 | | 4,551. | 0. | 0. | 4,551. |
| c Other professional fees STMT 3 | | 25,000. | 25,000. | 0. | 0. |
| 17 Interest | | | | | |
| 18 Taxes STMT 4 | | 70,502. | 0. | 0. | 0. |
| 19 Depreciation and depletion | | | | | |
| 20 Occupancy | | | | | |
| 21 Travel, conferences, and meetings | | | | | |
| 22 Printing and publications | | | | | |
| 23 Other expenses STMT 5 | | 500. | 0. | 0. | 500. |
| 24 Total operating and administrative expenses. Add lines 13 through 23 | | 100,553. | 25,000. | 0. | 5,051. |
| 25 Contributions, gifts, grants paid | | 3,719,975. | | | 3,719,975. |
| 26 Total expenses and disbursements. Add lines 24 and 25 | | 3,820,528. | 25,000. | 0. | 3,725,026. |
| 27 Subtract line 26 from line 12. | | | | | |
| a Excess of revenue over expenses and disbursements | | 827,644. | | | |
| b Net investment income (if negative, enter -0-) | | | 2,500,072. | | |
| c Adjusted net income (if negative, enter -0-) | | | | 0. | |

9-38

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| Part II Balance Sheets | | Attached schedules and amounts in the description column should be for end-of-year amounts only | | | |
|--|---|---|----------------|-----------------------|----------|
| | | Beginning of year | End of year | | |
| | | (a) Book Value | (b) Book Value | (c) Fair Market Value | |
| Assets | 1 Cash - non-interest-bearing | | | | |
| | 2 Savings and temporary cash investments | 19,010,046. | 17,726,790. | 17,726,790. | |
| | 3 Accounts receivable ▶ | | | | |
| | Less: allowance for doubtful accounts ▶ | | | | |
| | 4 Pledges receivable ▶ | | | | |
| | Less: allowance for doubtful accounts ▶ | | | | |
| | 5 Grants receivable | | | | |
| | 6 Receivables due from officers, directors, trustees, and other disqualified persons | | | | |
| | 7 Other notes and loans receivable ▶ | | | | |
| | Less: allowance for doubtful accounts ▶ | | | | |
| | 8 Inventories for sale or use | | | | |
| | 9 Prepaid expenses and deferred charges | | | | |
| | 10a Investments - U.S. and state government obligations | | | | |
| | b Investments - corporate stock | STMT 7 | 105,000. | 105,000. | 450,000. |
| | c Investments - corporate bonds | | | | |
| | 11 Investments - land, buildings, and equipment basis ▶ | | | | |
| Less: accumulated depreciation ▶ | | | | | |
| 12 Investments - mortgage loans | | | | | |
| 13 Investments - other | | | | | |
| 14 Land, buildings, and equipment basis ▶ | | | | | |
| Less: accumulated depreciation ▶ | | | | | |
| 15 Other assets (describe ▶) | | | | | |
| 16 Total assets (to be completed by all filers - see the instructions. Also, see page 1, item I) | | 19,115,046. | 17,831,790. | 18,176,790. | |
| Liabilities | 17 Accounts payable and accrued expenses | | | | |
| | 18 Grants payable | | | | |
| | 19 Deferred revenue | | | | |
| | 20 Loans from officers, directors, trustees, and other disqualified persons | | | | |
| | 21 Mortgages and other notes payable | | | | |
| | 22 Other liabilities (describe ▶) | | | | |
| 23 Total liabilities (add lines 17 through 22) | | 0. | 0. | | |
| Net Assets or Fund Balances | Foundations that follow FASB ASC 958, check here and complete lines 24, 25, 29, and 30. ▶ | | | | |
| | 24 Net assets without donor restrictions | | | | |
| | 25 Net assets with donor restrictions | | | | |
| | Foundations that do not follow FASB ASC 958, check here ▶ <input checked="" type="checkbox"/> | | | | |
| | 26 Capital stock, trust principal, or current funds | 19,115,046. | 17,831,790. | | |
| | 27 Paid-in or capital surplus, or land, bldg., and equipment fund | 0. | 0. | | |
| | 28 Retained earnings, accumulated income, endowment, or other funds | 0. | 0. | | |
| | 29 Total net assets or fund balances | 19,115,046. | 17,831,790. | | |
| 30 Total liabilities and net assets/fund balances | 19,115,046. | 17,831,790. | | | |

Part III Analysis of Changes in Net Assets or Fund Balances

| | |
|--|---------------|
| 1 Total net assets or fund balances at beginning of year - Part II, column (a), line 29 (must agree with end-of-year figure reported on prior year's return) | 1 19,115,046. |
| 2 Enter amount from Part I, line 27a | 2 827,644. |
| 3 Other increases not included in line 2 (itemize) ▶ | 3 0. |
| 4 Add lines 1, 2, and 3 | 4 19,942,690. |
| 5 Decreases not included in line 2 (itemize) ▶ | 5 2,110,900. |
| 6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 29 | 6 17,831,790. |

SEE STATEMENT 6

Part IV Capital Gains and Losses for Tax on Investment Income

| (a) List and describe the kind(s) of property sold (for example, real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.) | (b) How acquired P - Purchase D - Donation | (c) Date acquired (mo., day, yr.) | (d) Date sold (mo., day, yr.) |
|---|--|--------------------------------------|----------------------------------|
| 1a 10,000 SHS PALO ALTO NETWORKS, INC. | D | VARIOUS | 10/14/19 |
| b | | | |
| c | | | |
| d | | | |
| e | | | |

| (e) Gross sales price | (f) Depreciation allowed (or allowable) | (g) Cost or other basis plus expense of sale | (h) Gain or (loss) (e) plus (f) minus (g) |
|-----------------------|--|---|--|
| a 2,114,257. | | 12,200. | 2,102,057. |
| b | | | |
| c | | | |
| d | | | |
| e | | | |

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69.

| (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 | (l) Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col. (h)) |
|------------------------|--------------------------------------|---|---|
| a | | | 2,102,057. |
| b | | | |
| c | | | |
| d | | | |
| e | | | |

| | | | |
|---|---|---|------------|
| 2 Capital gain net income or (net capital loss) | <div style="display: flex; align-items: center;"> <div style="border-left: 1px solid black; padding-left: 5px;"> If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 </div> <div style="margin-left: 10px;"> <div style="border-top: 1px solid black; border-bottom: 1px solid black; width: 20px; height: 10px;"></div> </div> </div> | 2 | 2,102,057. |
| 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). If (loss), enter -0- in Part I, line 8 | <div style="display: flex; align-items: center;"> <div style="border-left: 1px solid black; padding-left: 5px;"> If gain, also enter in Part I, line 8, column (c). If (loss), enter -0- in Part I, line 8 </div> <div style="margin-left: 10px;"> <div style="border-top: 1px solid black; border-bottom: 1px solid black; width: 20px; height: 10px;"></div> </div> </div> | 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 ☒ 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 Calendar year (or tax year beginning in) | (b) Adjusted qualifying distributions | (c) Net value of noncharitable-use assets | (d) Distribution ratio (col. (b) divided by col. (c)) |
|--|--|--|---|
| 2018 | 3,035,944. | 18,081,246. | .167906 |
| 2017 | 3,524,654. | 13,988,471. | .251968 |
| 2016 | 2,622,665. | 11,739,291. | .223409 |
| 2015 | 2,619,045. | 9,023,356. | .290252 |
| 2014 | 2,194,560. | 5,333,255. | .411486 |

| | | |
|---|---|-------------|
| 2 Total of line 1, column (d) | 2 | 1.345021 |
| 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 | .269004 |
| 4 Enter the net value of noncharitable-use assets for 2019 from Part X, line 5 | 4 | 17,798,799. |
| 5 Multiply line 4 by line 3 | 5 | 4,787,948. |
| 6 Enter 1% of net investment income (1% of Part I, line 27b) | 6 | 25,001. |
| 7 Add lines 5 and 6 | 7 | 4,812,949. |
| 8 Enter qualifying distributions from Part XII, line 4 If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the Part VI instructions. | 8 | 3,725,026. |

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

1a Exempt operating foundations described in section 4940(d)(2), check here ☐ and enter "N/A" on line 1.
Date of ruling or determination letter: _____ (attach copy of letter if necessary-see instructions)

b Domestic foundations that meet the section 4940(e) requirements in Part V, check here ☐ and enter 1% of Part I, line 27b

c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations, enter 4% of Part I, line 12, col. (b)

2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)

3 Add lines 1 and 2

4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)

5 **Tax based on investment income.** Subtract line 4 from line 3. If zero or less, enter -0-

6 Credits/Payments:

a 2019 estimated tax payments and 2018 overpayment credited to 2019

b Exempt foreign organizations - tax withheld at source

c 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.

8 Enter any **penalty** for underpayment of estimated tax. Check here ☒ if Form 2220 is attached

9 **Tax due** If the total of lines 5 and 8 is more than line 7, enter **amount owed**

10 **Overpayment** If line 7 is more than the total of lines 5 and 8, enter the **amount overpaid**

11 Enter the amount of line 10 to be: **Credited to 2020 estimated tax** ☐ **Refunded** ☐

| | |
|-----------|---------|
| 6a | 61,000. |
| 6b | 0. |
| 6c | 50,000. |
| 6d | 0. |

| | |
|-----------|----------|
| 1 | 50,001. |
| 2 | 0. |
| 3 | 50,001. |
| 4 | 0. |
| 5 | 50,001. |
| 7 | 111,000. |
| 8 | 0. |
| 9 | |
| 10 | 60,999. |
| 11 | 0. |

Part VII-A Statements Regarding Activities

1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?

b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition. If the answer is "Yes" to **1a** or **1b**, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities.

c Did the foundation file **Form 1120-POL** for this year?

d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:
(1) On the foundation. ☐ \$ 0. (2) On foundation managers. ☐ \$ 0.

e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. ☐ \$ 0.

2 Has the foundation engaged in any activities that have not previously been reported to the IRS?
If "Yes," attach a detailed description of the activities.

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

4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?

b If "Yes," has it filed a tax return on **Form 990-T** for this year?

5 Was there a liquidation, termination, dissolution, or substantial contraction during the year?
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 directions that conflict with the state law remain in the governing instrument?

7 Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV

8a Enter the states to which the foundation reports or with which it is registered. See instructions ☐ **MA**

b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by *General Instruction G*? If "No," attach explanation

9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2019 or the tax year beginning in 2019? See the instructions for Part XIV. If "Yes," complete Part XIV

10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses

| | Yes | No |
|-----------|-----|----|
| 1a | | X |
| 1b | | X |
| 1c | | X |
| 2 | | X |
| 3 | | X |
| 4a | | X |
| 4b | | |
| 5 | | X |
| 6 | X | |
| 7 | X | |
| 8b | X | |
| 9 | | X |
| 10 | | X |

N/A

Part 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 | | X |
| 12 Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement See instructions | | X |
| 13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application? | X | |
| Website address N/A | | |
| 14 The books are in care of BROWN ADVISORY CORP Telephone no. (857) 244-2202 | | |
| Located at 100 HIGH STREET, 27TH FLOOR, BOSTON, MA ZIP+4 02110 | | |
| 15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here and enter the amount of tax-exempt interest received or accrued during the year 15 N/A | | |
| 16 At any time during calendar year 2019, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? | | X |
| See the instructions for exceptions and filing requirements for FinCEN Form 114 If "Yes," enter the name of the foreign country | | |

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required

File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.

| | 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? | X | No |
| (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? | X | No |
| (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? | X | No |
| (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? | X | No |
| (5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? | | X |
| (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.) | | X |
| b If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions | | N/A |
| 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 2019? | | 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)): | | |
| a At the end of tax year 2019, did the foundation have any undistributed income (Part XIII, lines 6d and 6e) for tax year(s) beginning before 2019? | | X |
| If "Yes," list the years | | |
| b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement - see instructions.) | | N/A |
| c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here | | |
| 3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? | X | No |
| b If "Yes," did it have excess business holdings in 2019 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 Form 4720, Schedule C, to determine if the foundation had excess business holdings in 2019.) | | N/A |
| 4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? | | X |
| b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2019? | | X |

Form 990-PF (2019)

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required (continued)**5a** During the year, did the foundation pay or incur any amount to:

(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?

Yes ☒ No

(2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, any voter registration drive?

Yes ☒ No

(3) Provide a grant to an individual for travel, study, or other similar purposes?

Yes ☒ No

(4) Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? See instructions

☐ Yes ☒ No

(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?

☐ Yes ☒ No**b** If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance? See instructions

N/A

Organizations relying on a current notice regarding disaster assistance, check here

☐**c** If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?

N/A

☐ Yes ☐ No

If "Yes," attach the statement required by Regulations section 53.4945-5(d).

6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?☐ Yes ☒ No**b** Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?

If "Yes" to 6b, file Form 8870.

6b

X

7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?Yes ☒ No**b** If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction?

N/A

7b

8 Is the foundation subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year?☐ Yes ☒ No**Part VIII** Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors**1** List all officers, directors, trustees, and foundation managers and their compensation.

| (a) Name and address | (b) Title, and average hours per week devoted to position | (c) Compensation (If not paid, enter -0-) | (d) Contributions to employee benefit plans and deferred compensation | (e) Expense account, other allowances |
|--|---|---|---|---------------------------------------|
| HOWARD E. COX JR 200 SEAPORT BLVD., S7A BOSTON, MA 02210 | TRUSTEE 2.00 | 0. | 0. | 0. |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |

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

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

Total number of other employees paid over \$50,000

0

Form 990-PF (2019)

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors *(continued)***3** Five highest-paid independent contractors for professional services. If none, enter "NONE."

| (a) Name and address of each person paid more than \$50,000 | (b) Type of service | (c) Compensation |
|---|---------------------|------------------|
| NONE | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |

Total number of others receiving over \$50,000 for professional services

0

Part IX-A Summary of Direct Charitable Activities

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.

| | Expenses |
|-------|----------|
| 1 N/A | |
| | |
| 2 | |
| | |
| 3 | |
| | |
| 4 | |
| | |

Part IX-B Summary of Program-Related Investments

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

| | Amount |
|--|--------|
| 1 N/A | |
| | |
| 2 | |
| | |
| All other program-related investments. See instructions. | |
| 3 | |
| | |
| | |
| | |
| | |
| Total. Add lines 1 through 3 | 0. |

Form 990-PF (2019)

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

| | | | |
|----------|---|-----------|-------------|
| 1 | Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes | | |
| a | Average monthly fair market value of securities | 1a | 450,000. |
| b | Average of monthly cash balances | 1b | 17,619,847. |
| c | Fair market value of all other assets | 1c | |
| d | Total (add lines 1a, b, and c) | 1d | 18,069,847. |
| e | Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation) | 1e | 0. |
| 2 | Acquisition indebtedness applicable to line 1 assets | 2 | 0. |
| 3 | Subtract line 2 from line 1d | 3 | 18,069,847. |
| 4 | Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions) | 4 | 271,048. |
| 5 | Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4 | 5 | 17,798,799. |
| 6 | Minimum investment return. Enter 5% of line 5 | 6 | 889,940. |

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

| | | | |
|-----------|---|-----------|----------|
| 1 | Minimum investment return from Part X, line 6 | 1 | 889,940. |
| 2a | Tax on investment income for 2019 from Part VI, line 5 | 2a | 50,001. |
| b | Income tax for 2019. (This does not include the tax from Part VI.) | 2b | |
| c | Add lines 2a and 2b | 2c | 50,001. |
| 3 | Distributable amount before adjustments. Subtract line 2c from line 1 | 3 | 839,939. |
| 4 | Recoveries of amounts treated as qualifying distributions | 4 | 0. |
| 5 | Add lines 3 and 4 | 5 | 839,939. |
| 6 | Deduction from distributable amount (see instructions) | 6 | 0. |
| 7 | Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1 | 7 | 839,939. |

Part XII Qualifying Distributions (see instructions)

| | | | |
|----------|---|-----------|------------|
| 1 | Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes: | | |
| a | Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26 | 1a | 3,725,026. |
| b | Program-related investments - total from Part IX-B | 1b | 0. |
| 2 | Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes | 2 | |
| 3 | Amounts set aside for specific charitable projects that satisfy the | | |
| a | Suitability test (prior IRS approval required) | 3a | |
| b | Cash distribution test (attach the required schedule) | 3b | |
| 4 | Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8; and Part XIII, line 4 | 4 | 3,725,026. |
| 5 | Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b | 5 | 0. |
| 6 | Adjusted qualifying distributions. Subtract line 5 from line 4 | 6 | 3,725,026. |

Note The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years.

Form 990-PF (2019)

Part XIII Undistributed Income (see instructions)

| | (a) Corpus | (b) Years prior to 2018 | (c) 2018 | (d) 2019 |
|---|---------------|----------------------------|-------------|-------------|
| 1 Distributable amount for 2019 from Part XI, line 7 | | | | 839,939. |
| 2 Undistributed income, if any, as of the end of 2019 | | | | |
| a Enter amount for 2018 only | | | 0. | |
| b Total for prior years. | | 0. | | |
| 3 Excess distributions carryover, if any, to 2019: | | | | |
| a From 2014 | 2,009,408. | | | |
| b From 2015 | 2,343,575. | | | |
| c From 2016 | 2,113,676. | | | |
| d From 2017 | 2,999,775. | | | |
| e From 2018 | 2,211,384. | | | |
| f Total of lines 3a through e | 11,677,818. | | | |
| 4 Qualifying distributions for 2019 from Part XII, line 4: ► \$ 3,725,026. | | | | |
| a Applied to 2018, but not more than line 2a | | | 0. | |
| b Applied to undistributed income of prior years (Election required - see instructions) | | 0. | | |
| c Treated as distributions out of corpus (Election required - see instructions) | 0. | | | |
| d Applied to 2019 distributable amount | | | | 839,939. |
| e Remaining amount distributed out of corpus | 2,885,087. | | | |
| 5 Excess distributions carryover applied to 2019 (If an amount appears in column (d), the same amount must be shown in column (a).) | 0. | | | 0. |
| 6 Enter the net total of each column as indicated below | | | | |
| a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5 | 14,562,905. | | | |
| b Prior years' undistributed income. Subtract line 4b from line 2b | | 0. | | |
| c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed | | 0. | | |
| d Subtract line 6c from line 6b. Taxable amount - see instructions | | 0. | | |
| e Undistributed income for 2018. Subtract line 4a from line 2a. Taxable amount - see instr. | | | 0. | |
| f Undistributed income for 2019. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2020 | | | | 0. |
| 7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions) | 0. | | | |
| 8 Excess distributions carryover from 2014 not applied on line 5 or line 7 | 2,009,408. | | | |
| 9 Excess distributions carryover to 2020. Subtract lines 7 and 8 from line 6a | 12,553,497. | | | |
| 10 Analysis of line 9: | | | | |
| a Excess from 2015 | 2,343,575. | | | |
| b Excess from 2016 | 2,113,676. | | | |
| c Excess from 2017 | 2,999,775. | | | |
| d Excess from 2018 | 2,211,384. | | | |
| e Excess from 2019 | 2,885,087. | | | |

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

N/A

1 a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2019, enter the date of the ruling

b Check box to indicate whether the foundation is a private operating foundation described in section

☐ 4942(j)(3) or ☐ 4942(j)(5)

2 a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed

b 85% of line 2a

c Qualifying distributions from Part XII, line 4, for each year listed

d Amounts included in line 2c not used directly for active conduct of exempt activities

e Qualifying distributions made directly for active conduct of exempt activities.

Subtract line 2d from line 2c

3 Complete 3a, b, or c for the alternative test relied upon:

a "Assets" alternative test - enter.

(1) Value of all assets

(2) Value of assets qualifying under section 4942(j)(3)(B)(i)

b "Endowment" alternative test - enter 2/3 of minimum investment return shown in Part X, line 6, for each year listed

c "Support" alternative test - enter

(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)

(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)

(3) Largest amount of support from an exempt organization

(4) Gross investment income

Part XV Supplementary Information (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year-see instructions.)**1 Information Regarding Foundation Managers:**

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

HOWARD E. COX JR

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

NONE

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

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

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

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

c Any submission deadlines:

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

Part XV Supplementary Information (continued)**3 Grants and Contributions Paid During the Year or Approved for Future Payment**

| Recipient Name and address (home or business) | If recipient is an individual, show any relationship to any foundation manager or substantial contributor | Foundation status of recipient | Purpose of grant or contribution | Amount |
|---|--|--------------------------------------|-------------------------------------|----------------------|
| a Paid during the year | | | | |
| BRIGHAM AND WOMEN'S HOSPITAL 75 FRANCIS STREET BOSTON, MA 02115 | | PC | GENERAL OPERATING | 130,000. |
| BULAMU HEALTHCARE INTERNATIONAL 1933 WAVERLEY STREET PALO ALTO, CA 94301 | | PC | GENERAL OPERATING | 5,000. |
| BUSINESS EXECUTIVES FOR NATIONAL SECURITY 1030 15TH STREET NW, SUITE 200 EAST WASHINGTON, DC 20005 | | PC | GENERAL OPERATING | 50,000. |
| CENTER FOR A NEW AMERICAN SECURITY 1152 15TH STREET NW SUITE 950 WASHINGTON, DC 20005 | | PC | GENERAL OPERATING | 10,000. |
| COUNCIL ON FOREIGN RELATIONS 58 E 68TH STREET NEW YORK, NY 10065 | | PC | GENERAL OPERATING | 150,000. |
| Total | SEE CONTINUATION SHEET(S) | | | 3a 3,719,975. |
| b Approved for future payment | | | | |
| NONE | | | | |
| | | | | |
| | | | | |
| Total | | | 3b | 0. |

Form 990-PF (2019)

Part XV: Supplementary Information

| 3 Grants and Contributions Paid During the Year (Continuation) | | | | |
|--|--|--------------------------------------|-------------------------------------|-------------------|
| Recipient Name and address (home or business) | If recipient is an individual, show any relationship to any foundation manager or substantial contributor | Foundation status of recipient | Purpose of grant or contribution | Amount |
| CURE ALZHEIMERS FUND 34 WASHINGTON STREET, SUITE 200 WELLESLEY HILLS, MA 02481 | | PC | GENERAL OPERATING | 55,000. |
| DANA FARBER CANCER INSTITUTE 450 BROOKLINE AVENUE BOSTON, MA 02115 | | PC | GENERAL OPERATING | 400,000. |
| DARTMOUTH COLLEGE DARTMOUTH COLLEGE HANOVER, NH 03755 | | PC | GENERAL OPERATING | 1,000. |
| DOLPHIN RESEARCH CENTER 58901 OVERSEAS HIGHWAY GRASS KEY, FL 33050 | | PC | GENERAL OPERATING | 1,000. |
| EAST END HOSPICE PO BOX 1048 WESTHAMPTON BEACH, NY 11978 | | PC | GENERAL OPERATING | 1,400. |
| EPIPHANY SCHOOL 154 CENTRE STREET DORCHESTER, MA 02124 | | PC | GENERAL OPERATING | 1,000. |
| FLORIDA SHERIFFS ASSOCIATION 2617 MAHAN DRIVE TALLAHASSEE, FL 32308 | | PC | GENERAL OPERATING | 100. |
| FOUNDATION FOR ART AND PRESERVATION IN EMBASSIES 1725 I STREET NW #300 WASHINGTON, DC 20006 | | PC | GENERAL OPERATING | 2,500. |
| FRIENDS OF CLERMONT 87 CLERMONT AVENUE GERMANTOWN, NY 12526 | | PC | GENERAL OPERATING | 1,000. |
| FRIENDS OF THE WESTHAMPTON FREE LIBRARY 7 LIBRARY AVENUE WESTHAMPTON BEACH, NY 11978 | | PC | GENERAL OPERATING | 500. |
| Total from continuation sheets | | | | 3,374,975. |

Part XV: Supplementary Information**3 Grants and Contributions Paid During the Year (Continuation)**

| Recipient Name and address (home or business) | If recipient is an individual, show any relationship to any foundation manager or substantial contributor | Foundation status of recipient | Purpose of grant or contribution | Amount |
|--|--|--------------------------------------|-------------------------------------|------------|
| FRIENDS OF WESTHAMPTON AMBULANCE 3 HAZELWOOD AVENUE WESTHAMPTON BEACH, NY 11978 | | PC | GENERAL OPERATING | 500. |
| GEORGE W BUSH FOUNDATION 2943 SMU BOULEVARD DALLAS, TX 75205 | | PC | GENERAL OPERATING | 25,000. |
| GLADES ACADEMY FOUNDATION INC. 1 N CLEMATIS STREET, SUITE 200 WEST PALM BEACH, FL 33401 | | PC | GENERAL OPERATING | 10,000. |
| GRANT FOUNDATION INC., DBA HOSPITAL ALBERT SCHWEITZER HAITI 2840 LIBERTY AVENUE NO 201 PITTSBURGH, PA 15222 | | PC | GENERAL OPERATING | 2,500. |
| HARVARD BUSINESS SCHOOL SOLDIERS FIELD BOSTON, MA 02163 | | PC | GENERAL OPERATING | 1,000,000. |
| HARVARD KENNEDY SCHOOL 79 JOHN F KENNEDY STREET CAMBRIDGE, MA 02138 | | PC | GENERAL OPERATING | 100,000. |
| HARVARD UNIVERSITY 1033 MASSACHUSETTS AVENUE, SUITE 3 CAMBRIDGE, MA 02138 | | PC | GENERAL OPERATING | 70,000. |
| HOOVER INSTITUTION 434 GALVEZ MALL STANFORD, CA 94305 | | PC | GENERAL OPERATING | 10,000. |
| INNER-CITY SCHOLARSHIP FUND 1011 FIRST AVENUE, SUITE 1800 NEW YORK, NY 10022 | | PC | GENERAL OPERATING | 5,000. |
| INTERNATIONAL SPY MUSEUM 700 L'ENFANT PLAZA SW WASHINGTON, DC 20024 | | PC | GENERAL OPERATING | 2,000. |
| Total from continuation sheets | | | | |

Part XV. Supplementary Information**3 Grants and Contributions Paid During the Year (Continuation)**

| Recipient Name and address (home or business) | If recipient is an individual, show any relationship to any foundation manager or substantial contributor | Foundation status of recipient | Purpose of grant or contribution | Amount |
|--|--|--------------------------------------|-------------------------------------|----------|
| JAMES C FERRER EDUCATION FUND 200 TUCKAHOE ROAD SOUTHAMPTON, NY 11968 | | PC | GENERAL OPERATING | 2,000. |
| JEWISH FEDERATION OF PALM BEACH 1 HARVARD CIRCLE, SUITE 100 WEST PALM BEACH, FL 33409 | | PC | GENERAL OPERATING | 5,000. |
| MUSEUM OF FINE ARTS BOSTON 465 HUNTINGTON AVENUE BOSTON, MA 02115 | | PC | GENERAL OPERATING | 155,425. |
| NEW ENGLAND HISTORIC GENEALOGICAL SOCIETY 101 NEWBURY STREET BOSTON, MA 02116 | | PC | GENERAL OPERATING | 52,500. |
| NEW YORK HISTORICAL SOCIETY 170 CENTRAL PARK WEST NEW YORK, NY 10024 | | PC | GENERAL OPERATING | 1,000. |
| NORTON MUSEUM OF ART 1451 S OLIVE AVENUE WEST PALM BEACH, FL 33401 | | PC | GENERAL OPERATING | 80,000. |
| PALM BEACH CIVIV ASSOCIATION 139 NORTH COUNTY ROAD, SUITE 33 PALM BEACH, FL 33480 | | PC | GENERAL OPERATING | 2,250. |
| PALM BEACH COUNTRY CLUB FOUNDATION 760 N OCEAN BOULEVARD PALM BEACH, FL 33480 | | PC | GENERAL OPERATING | 1,000. |
| PALM BEACH COUNTY COUNCIL OF FIREFIGHTERS AND PARAMEDICS 2328 S CONGRESS AVENUE, SUITE 2C WEST PALM BEACH, FL 33406 | | PC | GENERAL OPERATING | 200. |
| PALM BEACH ISLAND HOSPICE FOUNDATION 5300 EAST AVENUE WEST PALM BEACH, FL 33407 | | PC | GENERAL OPERATING | 1,000. |
| Total from continuation sheets | | | | |

Part XV. Supplementary Information**3 Grants and Contributions Paid During the Year (Continuation)**

| Recipient Name and address (home or business) | If recipient is an individual, show any relationship to any foundation manager or substantial contributor | Foundation status of recipient | Purpose of grant or contribution | Amount |
|--|--|--------------------------------------|-------------------------------------|----------|
| PALM BEACH NAVY SEAL EVENING 277 ROYAL POINCIANA WAY, SUITE 190 PALM BEACH, FL 33480 | | PC | GENERAL OPERATING | 2,000. |
| PALM BEACH POLICE FOUNDATION 139 N COUNTY ROAD, SUITE 26 PALM BEACH, FL 33480 | | PC | GENERAL OPERATING | 2,750. |
| PIONEER INSTITUTE 185 DEVONSHIRE STREET, SUITE 1101 BOSTON, MA 02110 | | PC | GENERAL OPERATING | 1,000. |
| PRINCETON PROSPECT FOUNDATION PO BOX 15 PRINCETON, NJ 08542 | | PC | GENERAL OPERATING | 34,000. |
| PRINCETON UNIVERSITY PO BOX 291 PRINCETON, NJ 08544 | | PC | GENERAL OPERATING | 110,050. |
| PROMISE FUND OF FLORIDA 211 VIA TORTUGA PALM BEACH, FL 33480 | | PC | GENERAL OPERATING | 15,000. |
| PROSTATE CANCER FOUNDATION 1250 FOURTH STREET SANTA MONICA, CA 90401 | | PC | GENERAL OPERATING | 50,000. |
| QUOGUE JUNIOR THEATER TROUPE BOX 427 QUOGUE, NY 11959 | | PC | GENERAL OPERATING | 2,500. |
| REHAB CENTER FOR CHILDREN AND ADULTS 300 ROYAL PALM WAY PALM BEACH, FL 33480 | | PC | GENERAL OPERATING | 5,000. |
| ROYAL POINCIANA CHAPEL 60 COCOANUT ROW PALM BEACH, FL 33480 | | PC | GENERAL OPERATING | 5,000. |
| Total from continuation sheets | | | | |

Part XV. Supplementary Information**3 Grants and Contributions Paid During the Year (Continuation)**

| Recipient Name and address (home or business) | If recipient is an individual, show any relationship to any foundation manager or substantial contributor | Foundation status of recipient | Purpose of grant or contribution | Amount |
|--|--|--------------------------------------|-------------------------------------|----------|
| SACRED HEART SCHOOL 2109 SICHEL STREET LOS ANGELES, CA 90031 | | PC | GENERAL OPERATING | 10,000. |
| SOCIETY OF THE FOUR ARTS FOUR ARTS PLAZA PALM BEACH, FL 33480 | | PC | GENERAL OPERATING | 10,000. |
| SOUTH FLORIDA SCIENCE CENTER AND AQUARIUM 4801 DREHER TRAIL N WEST PALM BEACH, FL 33405 | | PC | GENERAL OPERATING | 10,000. |
| SOUTHAMPTON HOSPITAL FOUNDATION 240 MEETING HOUSE LANE SOUTHAMPTON, NY 11968 | | PC | GENERAL OPERATING | 110,000. |
| ST ANDREW'S DUNE CHURCH PO BOX 1245 SOUTHAMPTON, NY 11968 | | PC | GENERAL OPERATING | 5,000. |
| ST CHRISTOPHER'S EPISCOPAL CHURCH 1063 HAVERHILL ROAD WEST PALM BEACH, FL 33417 | | PC | GENERAL OPERATING | 1,000. |
| ST JOHN'S EPISCOPAL CHURCH 401 LIVE OAK AVENUE PENSACOLA, FL 32507 | | PC | GENERAL OPERATING | 500. |
| ST MARK'S EPISCOPAL CHURCH 40 MAIN STREET WESTHAMPTON BEACH, NY 11978 | | PC | GENERAL OPERATING | 2,000. |
| SUFFOLK COUNTY POLICE ATHLETIC LEAGUE, INC. PO BOX 26 YAPHANK, NY 11980 | | PC | GENERAL OPERATING | 200. |
| THE ASPEN INSTITUTE 1 DUPONT CIRCLE NW, SUITE 700 WASHINGTON, DC 20036 | | PC | GENERAL OPERATING | 5,500. |
| Total from continuation sheets | | | | |

Part XV Supplementary Information**3 Grants and Contributions Paid During the Year (Continuation)**

| Recipient Name and address (home or business) | If recipient is an individual, show any relationship to any foundation manager or substantial contributor | Foundation status of recipient | Purpose of grant or contribution | Amount |
|--|--|--------------------------------------|-------------------------------------|----------|
| THE AVENUE CONCEPT 304 LOCKWOOD STREET PROVIDENCE, RI 02907 | | PC | GENERAL OPERATING | 10,000. |
| THE BROOKINGS INSTITUTION 1775 MASSACHUSETTS AVENUE NW WASHINGTON, DC 20036 | | PC | GENERAL OPERATING | 200,000. |
| THE CHURCH OF BETHESDA BY THE SEA 141 SOUTH COUNTY ROAD PALM BEACH, FL 33480 | | PC | GENERAL OPERATING | 5,000. |
| THE COMMON GOOD INSTITUTE, INC. ONE METROTECH CENTER, SUITE 1703 BROOKLYN, NY 11201 | | PC | GENERAL OPERATING | 1,000. |
| THE COUNCIL FOR ECONOMIC EDUCATION 122 EAST 42ND STREET, SUITE 2600 NEW YORK, NY 10168 | | PC | GENERAL OPERATING | 40,000. |
| THE MILKEN INSTITUTE 1250 4TH STREET, FLOOR 2 SANTA MONICA, CA 90401 | | PC | GENERAL OPERATING | 50,000. |
| THE ORDER OF ST JOHN 1850 M STREET, SUITE 1070 WASHINGTON, DC 20036 | | PC | GENERAL OPERATING | 1,000. |
| THE PALM BEACH ZOO 1301 SUMMIT BOULEVARD WEST PALM BEACH, FL 33405 | | PC | GENERAL OPERATING | 1,000. |
| THE PRESERVATION FOUNDATION OF PALM BEACH 311 PERUVIAN AVENUE PALM BEACH, FL 33480 | | PC | GENERAL OPERATING | 17,000. |
| THE PRESIDENT AND FELLOWS OF HARVARD UNIVERSITY (HKS DEAN'S COUNCIL) 79 JOHN F KENNEDY STREET CAMBRIDGE, MA 02138 | | PC | GENERAL OPERATING | 600,000. |
| Total from continuation sheets | | | | |

Part XV Supplementary Information**3 Grants and Contributions Paid During the Year (Continuation)**

| Recipient Name and address (home or business) | If recipient is an individual, show any relationship to any foundation manager or substantial contributor | Foundation status of recipient | Purpose of grant or contribution | Amount |
|--|--|--------------------------------------|-------------------------------------|---------|
| THE SOCIETY OF THE CINCINNATI 2118 MASSACHUSETTS AVENUE, NW WASHINGTON, DC 20008 | | PC | GENERAL OPERATING | 1,000. |
| THE VENTURE CAPITAL FOUNDATION 25 MASSACHUSETTS AVENUE NW, SUITE 730 WASHINGTON, DC 20001 | | PC | GENERAL OPERATING | 50,000. |
| UNITED WAY OF PALM BEACH COUNTY INC 477 SOUTH ROSEMARY AVENUE, SUITE 230 WEST PALM BEACH, FL 33401 | | PC | GENERAL OPERATING | 1,500. |
| USTA FOUNDATION INCORPORATED 70 W RED OAK LANE WHITE PLAINS, NY 10604 | | PC | GENERAL OPERATING | 25,000. |
| WEST PALM BEACH POLICE BENEVOLENT ASSOCIATION 2100 N FLORIDA MANGO ROAD WEST PALM BEACH, FL 33409 | | PC | GENERAL OPERATING | 100. |
| WESTHAMPTON BEACH HISTORICAL SOCIETY P.O. BOX 686 WESTHAMPTON BEACH, NY 11978 | | PC | GENERAL OPERATING | 1,000. |
| WESTHAMPTON COUNTRY CLUB SHEILA MCBRIDE JAMES SCHOLARSHIP FUND 35 POTUNK LANE WESTHAMPTON BEACH, NY 11978 | | PC | GENERAL OPERATING | 1,000. |
| | | | | |
| | | | | |
| | | | | |
| Total from continuation sheets | | | | |

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

2019

Name of the organization

CLERMONT FOUNDATION

Employer identification number

04-6772671

Organization type (check one)

Filers of:

Section:

Form 990 or 990-EZ

501(c)() (enter number) organization

4947(a)(1) nonexempt charitable trust **not** treated as a private foundation

527 political organization

Form 990-PF

☒ 501(c)(3) exempt private foundation

4947(a)(1) nonexempt charitable trust treated as a private foundation

501(c)(3) taxable private foundation

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

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

Special Rules

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

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

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

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

Name of organization

Employer identification number

CLERMONT FOUNDATION**04-6772671****Part I** **Contributors** (see instructions) Use duplicate copies of Part I if additional space is needed

| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
|------------|--|----------------------------|---|
| 1 | HOWARD E COX JR 200 SEAPORT BLVD., S7A BOSTON, MA 02210 | \$ 2,123,100. | Person Payroll Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions) |
| | | \$ | Person Payroll Noncash (Complete Part II for noncash contributions) |
| | | \$ | Person Payroll Noncash (Complete Part II for noncash contributions) |
| | | \$ | Person Payroll Noncash (Complete Part II for noncash contributions) |
| | | \$ | Person Payroll Noncash (Complete Part II for noncash contributions) |
| | | \$ | Person Payroll Noncash (Complete Part II for noncash contributions) |
| | | \$ | Person Payroll Noncash (Complete Part II for noncash contributions) |

Employer identification number

04-6772671

Part II

[illegible]

Employer identification number

04-6772671

Part III

), ► \$

| (a) No. from Part I | (b) Purpose of gift | (c) Use of gift | (d) Description of how gift is held |
|---|---------------------|--|-------------------------------------|
| | | | |
| | | | |
| | | | |
| | | | |
| (e) Transfer of gift | | | |
| Transferee's name, address, and ZIP + 4 | | Relationship of transferor to transferee | |
| | | | |
| | | | |
| | | | |
| (a) No. from Part I | (b) Purpose of gift | (c) Use of gift | (d) Description of how gift is held |
| | | | |
| | | | |
| | | | |
| | | | |
| (e) Transfer of gift | | | |
| Transferee's name, address, and ZIP + 4 | | Relationship of transferor to transferee | |
| | | | |
| | | | |
| | | | |
| (a) No. from Part I | (b) Purpose of gift | (c) Use of gift | (d) Description of how gift is held |
| | | | |
| | | | |
| | | | |
| | | | |
| (e) Transfer of gift | | | |
| Transferee's name, address, and ZIP + 4 | | Relationship of transferor to transferee | |
| | | | |
| | | | |
| | | | |
| (a) No. from Part I | (b) Purpose of gift | (c) Use of gift | (d) Description of how gift is held |
| | | | |
| | | | |
| | | | |
| | | | |
| (e) Transfer of gift | | | |
| Transferee's name, address, and ZIP + 4 | | Relationship of transferor to transferee | |
| | | | |
| | | | |
| | | | |

FORM 990-PF

DIVIDENDS AND INTEREST FROM SECURITIES

STATEMENT 1

| SOURCE | GROSS AMOUNT | CAPITAL GAINS DIVIDENDS | (A) REVENUE PER BOOKS | (B) NET INVEST- MENT INCOME | (C) ADJUSTED NET INCOME |
|---|-----------------|-------------------------------|-----------------------------|-----------------------------------|-------------------------------|
| FIDELITY - DIVIDENDS | 400,615. | 0. | 400,615. | 400,615. | 0. |
| MEDICAL INFORMATION TECHNOLOGY, INC | 22,400. | 0. | 22,400. | 22,400. | 0. |
| TO PART I, LINE 4 | 423,015. | 0. | 423,015. | 423,015. | 0. |

FORM 990-PF

ACCOUNTING FEES

STATEMENT 2

| DESCRIPTION | (A) EXPENSES PER BOOKS | (B) NET INVEST- MENT INCOME | (C) ADJUSTED NET INCOME | (D) CHARITABLE PURPOSES |
|------------------------------|------------------------------|-----------------------------------|-------------------------------|-------------------------------|
| TAX PREPARATION FEES | 4,551. | 0. | 0. | 4,551. |
| TO FORM 990-PF, PG 1, LN 16B | 4,551. | 0. | 0. | 4,551. |

FORM 990-PF

OTHER PROFESSIONAL FEES

STATEMENT 3

| DESCRIPTION | (A) EXPENSES PER BOOKS | (B) NET INVEST- MENT INCOME | (C) ADJUSTED NET INCOME | (D) CHARITABLE PURPOSES |
|------------------------------|------------------------------|-----------------------------------|-------------------------------|-------------------------------|
| FIDELITY MANAGEMENT FEES | 25,000. | 25,000. | 0. | 0. |
| TO FORM 990-PF, PG 1, LN 16C | 25,000. | 25,000. | 0. | 0. |

FORM 990-PF

TAXES

STATEMENT 4

| DESCRIPTION | (A) EXPENSES PER BOOKS | (B) NET INVEST- MENT INCOME | (C) ADJUSTED NET INCOME | (D) CHARITABLE PURPOSES |
|-----------------------------|------------------------------|-----------------------------------|-------------------------------|-------------------------------|
| 2018 FEDERAL PAYMENT | 9,502. | 0. | 0. | 0. |
| FEDERAL Q1 PAYMENT | 6,000. | 0. | 0. | 0. |
| FEDERAL Q3 PAYMENT | 5,000. | 0. | 0. | 0. |
| FEDERAL Q4 PAYMENT | 50,000. | 0. | 0. | 0. |
| TO FORM 990-PF, PG 1, LN 18 | 70,502. | 0. | 0. | 0. |

FORM 990-PF

OTHER EXPENSES

STATEMENT 5

| DESCRIPTION | (A) EXPENSES PER BOOKS | (B) NET INVEST- MENT INCOME | (C) ADJUSTED NET INCOME | (D) CHARITABLE PURPOSES |
|-----------------------------|------------------------------|-----------------------------------|-------------------------------|-------------------------------|
| STATE AG FEES | 500. | 0. | 0. | 500. |
| TO FORM 990-PF, PG 1, LN 23 | 500. | 0. | 0. | 500. |

| FORM 990-PF | OTHER DECREASES IN NET ASSETS OR FUND BALANCES | STATEMENT 6 |
|--|--|-------------|
| DESCRIPTION | | AMOUNT |
| EXCESS FMV OVER COST BASIS CONTRIBUTED | | 2,110,900. |
| TOTAL TO FORM 990-PF, PART III, LINE 5 | | 2,110,900. |

FORM 990-PF

CORPORATE STOCK

STATEMENT 7

| DESCRIPTION | BOOK VALUE | FAIR MARKET VALUE |
|---|------------|-------------------|
| MEDICAL INFORMATION TECHNOLOGY | 105,000. | 450,000. |
| TOTAL TO FORM 990-PF, PART II, LINE 10B | 105,000. | 450,000. |