<u> </u>	م ند			Z 7/2/37 &	)   4	523103		
. 990-T	Exempt Organization B			ax Return	i	OMB No 1545-0687		
	For calendar year 2017 or other tax year beginning JUL		• • • • • • • • • • • • • • • • • • • •	N 30, 201	.8	<i>2</i> 017		
rtment of the Treasury	Go to www irs gov/Form990T f					LUII		
al Revenue Service	Do not enter SSN numbers on this form as it	may be mad	e public if your organize	ation is a 501(c)(3)		Open to Public Inspection fo 001(c)(3) Organizations Only		
Check box if	Name of organization ( Check box if nai	me changed a	and see instructions )		Emple	yer identification number byees' trust, see		
address changed	MILE CAMPATROE COURSE OF MECHAN THO					04-2103964		
xempt under section 501(c)(3	Print THE CAMBRIDGE SCHOOL OF WESTON, INC.					E Unrelated business activity codes		
1408(e) 220(e)	Type 45 GEORGIAN ROAD	Number, street, and room of suite no if a 1 0 box, see instructions.						
408A 530(a)	City or town, state or province, country, and Z	IP or foreign	postal code		1			
529(a)	WESTON, MA 02493							
ok value of all assets end of year	F Group exemption number (See instructions							
50,581,3		corporation	501(c) trust	401(a	) trust	Other trust		
	n's primary unrelated business activity NONE				<u> </u>	s X No		
-	the corporation a subsidiary in an affiliated group or a p	parent-subsid	liary controlled group?	▶	Yes	S A No		
	nd identifying number of the parent corporation  KATHLEEN CHERY		Telenho	one number > 7	781 – 6	542-8600		
	Trade or Business Income		(A) Income	(B) Expense		(C) Net		
Gross receipts or sale	s							
Less returns and allov		<b>▶</b> 1c						
Cost of goods sold (S	chedule A, line 7)	2						
Gross profit Subtract		3						
Capital gain net incom	•	48	<del></del>					
	4797, Part II, line 17) (attach Form 4797)	4b	· <del>-</del> -					
Capital loss deduction	i for trusts artnerships and S corporations (attach statement)	4c 5	<del></del>					
Rent income (Schedul		6						
	ed income (Schedule E)	7				<u></u> .		
	valties, and rents from controlled organizations (Sch. F)	8						
Investment income of	a section 501(c)(7), (9), or (17) organization (Schedule	e G) <b>9</b>						
Exploited exempt activ	vity income (Schedule I)	10						
Advertising income (S	•	11				_		
•	structions; attach schedule)	12	0.		-+			
rt II Deduction	ns Not Taken Elsewhere (See instruction	13 s for limitat		<del></del>				
	contributions, deductions must be directly connec			income )				
Compensation of offi	cers, directors, and trustees (Schedule K)			<del></del>	14			
Salaries and wages	, , , , , ,				15			
Repairs and maintena	ance				16			
Bad debts					17			
Interest (attach sched	dule)				18			
Taxes and licenses	ons (See Testruction Vie Imitation Jules)				19			
Depression (attach )	Form (1562)		21		20			
Less depreciation bla	uned on Schedule Agang (alsewhele on return		21 22a		22b			
Denletion 1 U	DI WAI - INI		[]		23			
Contributions to dele	fred compensation plans				24			
Employee benefit pro	grams OGDEN				25			
Excess exempt exper	ses (Schedule-1)				26			
Excess readership co					27			
Other deductions (att					28			
Total deductions. Add lines 14 through 28  Uncertaint business taxable income before not operating loss deduction. Subtract line 29 from line 13					29	0.		
Unrelated business taxable income before net operating loss deduction. Subtract line 29 from line 13.  Net operating loss deduction (limited to the amount on line 30).					30			
Unrelated business taxable income before specific deduction. Subtract line 31 from line 30						0.		
	Generally \$1,000, but see line 33 instructions for excepti		· <del>-</del>		32	1,000.		
	axable income Subtract line 33 from line 32 If line 3:		han line 32, enter the sm	aller of zero or,				
		-	•	24	34	0.		

Form 990-T	(2017) THE CAMBRIDGE SCHOOL OF WESTON, INC.	04-210	3964	Page 2
Part II				
35	Organizations Taxable as Corporations. See instructions for tax computation.			
	Controlled group members (sections 1561 and 1563) check here   See instructions and:			
	Enter your share of the S50,000, \$25,000, and \$9,925,000 taxable income brackets (in that order):			
	Enter organization's share of: (1) Additional 5% tax (not more than \$11,750)	į	ŀ	
	(2) Additional 3% tax (not more than \$100,000)			0
	Income tax on the amount on line 34	▶	35c	0.
36	Trusts Taxable at Trust Rates. See instructions for tax computation. Income tax on the amount on line 34 from:	1		
į	Tax rate schedule or Schedule D (Form 1041)	. ▶	36	
37	Proxy tax. See instructions	▶	37	
38	Alternative minimum tax		38	
39	Tax on Non-Compliant Facility Income See instructions	[	39	
40	Total. Add lines 37, 38 and 39 to line 35c or 36, whichever applies	LUU	40	0.
Part IV	Tax and Payments		2	
	Foreign tax credit (corporations attach Form 1118; trusts attach Form 1116)			· · ·
	Other credits (see instructions) 41b		l	
	General business credit. Attach Form 3800		ŀ	
	Credit for prior year minimum tax (attach Form 8801 or 8827)			
	Total credits. Add lines 41a through 41d		4 e	
	Subtract line 41e from line 40			0.
		* }	42	<u> </u>
		ich schodulo)	43	
	Total tax Add lines 42 and 43	- uto	44	0.
	Payments: A 2016 overpayment credited to 2017		11	
b :	2017 estimated tax payments			
c ·	Fax deposited with Form 8868			
d f	oreign organizations: Tax paid or withheld at source (see instructions)			
e l	Backup withholding (see instructions) 45e		-	
f (	Credit for small employer health insurance premiums (Attach Form 8941) 45f		1	
	Other credits and payments Form 2439			
ľ	Form 4136 Other Total > 45g			
46 1	Total payments Add lines 45a through 45g		45	
	stimated tax penalty (see instructions) Check if Form 2220 is attached	""	47	
	ax due. If line 46 is less than the total of lines 44 and 47, enter amount owed	<i>??</i> ? ⊾ !	48	0.
	Overpayment. If line 46 is larger than the total of lines 44 and 47, enter amount overpaid	au I	49	0.
	inter the amount of line 49 you want: Credited to 2018 estimated tax	dod .	50	
Part V	Statements Regarding Certain Activities and Other Information (see instruction		1 1	
	• • • • • • • • • • • • • • • • • • • •		<u>-</u>	1, 1,
	At any time during the 2017 calendar year, did the organization have an interest in or a signature or other authority			Yes No
	over a financial account (bank, securities, or other) in a foreign country? If YES, the organization may have to file			]
	inCEN Form 114, Report of Foreign Bank and Financial Accounts. If YES, enter the name of the foreign country			
	ere <b>&gt;</b>			X
52 [	During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a foreig	n trust?		X
	YES, see instructions for other forms the organization may have to file.			1 1
53 E	nter the amount of ax-exempt interest received or accrued during the tax year 🕨 \$			
۵.	Under penalties of perjury, I declare that I have exemined this return, including accompanying schedules and statements, and to the best correct and complete. Declaration of preparer (other than tay gayer) is based on all information of which preparer has any knowledge.	t of my knowledg	e and belief, it is th	uo,
Sign	1/2011/2/11/11/10		the IRS discuss th	
Here	TREASURER		proparar shown bel	
	Signature of officer Date / / Title		ructions)? X Y	
	Print/Type preparer's name	eck it	PTIN	
Doid		f- employed	1	
Paid	TOTO TO 1277 NOT	. umployed	P00095	5129
Prepar	CONTRACTOR ATTO	rm's EIN 🕨	26-375	
Use Or	ONE CITIZENS PLAZA, 9TH FLOOR	im a CIN	<u> </u>	,J.J.T
		hone no. 40	01-626-3	200
	Trumpanones & ETGATDEMOR' INT 05202	10115 11U. 41		
			Form >	990-T (2017)

## FOOTNOTES

STATEMENT 1

SECTION 1.263(A)-1(F) DE MINIMIS SAFE HARBOR ELECTION

EMPLOYER IDENTIFICATION NUMBER: 04-2103964 FOR THE YEAR ENDING JUNE 30, 2018 THE CAMBRIDGE SCHOOL OF WESTON IS MAKING THE DE MINIMIS SAFE HARBOR ELECTION UNDER REG. SEC. 1.263(A)-1(F).