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.

2017

		ent of the Treasury Revenue Service		icial security numbers on 1. <i>gov/Form990PF</i> for instra					en to Public Inspection
_			or tax year beginning			and ending			, 20
_		of foundation		·			_	nployer identifi	cation number
	GER.	ALD & OLIVA	SHAPIRO FAM FDN					27-	1521392
_			ox number if mail is not delivere	d to street address)		Room/suite	ВТе	Іерһоле пить	er (see instructions)
_	632	5 S RAINBOW	BLVD STE 300				<u> </u>	85	5-834-0350
(City or	town, state or provinc	e, country, and ZIP or foreign po	stal code					
								exemption applicated	
_		VEGAS, NV	89118				4		
G	Che	ck all that apply	Initial return		of a former pu	iblic charity	D 1	Foreign organizat	ons, check here
			Final return	Amended ret				Foreign organizat 85% test, check h	
-			X Address change	Name change				computation .	
H		- · · ·	zation. X Section 501			" " " " " " " " " " " " " " " " " " "	E If p	orivate foundation	status was terminated
Ţ			onexempt charitable trust	Other taxable pri			עח	der section 507(b	(1)(A), check here . P
i			of all assets at JAcco	ounting method: <u> </u>	ash Accr	uai			n a 60-month termination
		of year (from Parts ▶ \$ 4.	1	column (d) must be on ca	uph basis \		- l un	der section 507(b)(1)(B), check here . ►
	<u> </u>		renue and Expenses (The		ISII Dasis)				(d) Disbursements
لم	eu C	total of amounts i	n columns (b), (c), and (d)	(a) Revenue and expenses per	(b) Net inves			usted net	for charitable
		may not necessar column (a) (see in	ily equal the amounts in	books	Income	9	inc	come	purposes (cash basis only)
-	1								
	2	Check Y if th	ts, etc., received (attach schedule) . e foundation is not required to ch Sch B						
	3		nd temporary cash investments.	1 170	2	2,479.			STMT 1
	4	Dividends and inte	rest from securities	99,166.	96	5,483.			STMT 2
	5a	Gross rents							
	b	Net rental income or	(loss)						
e	6a	Net gain or (loss) from	n sale of assets not on line 10	37,807.					
Revenue	0	Gross sales price for assets on line 6a	881,600	-	ļ				
ě	7	Capital gain net in-	come (from Part IV, line 2) .		3	7,807.		125	
ш.	8	•	ıtal gaın				_	+ +	
	9 10a	Income modification Gross sales less return	ons					181	
		and allowances	• • •	 				िल्ली उ ठ	N 0 1 2000 78
	1	Less Cost of goods s		 				17/	2018 13
	11	•	s) (attach schedule) ch schedule)						
	12		through 11 · · · · · · ·		136	5,769.		-	IN. UT
_	13		cers, directors, trustees, etc.						
ę		· · ·	laries and wages			NONE		NONE	
Sue	15	Pension plans, em	ployee benefits			NONE		NONE	
dx	16a	Legal fees (attach							
i) ia	b	Accounting fees (a	ittach schedule)STMT 4	1,000.		NONE		NONE	1,000
Š	С	Other professional	fees (attach schSZMET. 5.	27,829.	2	7,829.			
tra	17	Interest							
nis	18	Taxes (attach sche	dule) (see instru StIMS , 6 .	1,084.		961.			
Έ	19	Depreciation (attac	th schedule) and depletion.						
A	20	Occupancy				NONTE		MONT	
pu	14 15 16a b c 17 18 19 20 21	I ravel, conferences	s, and meetings		-	NONE NONE		NONE	
ő	22	Other are a con-	cations		 	MOINE		NONE	4,109
ţį	23 24 25	•							4,103
ere.	24		nd administrative expenses. Igh 23	24 222	25	8,790.	,	NONE	5,109
ğ	25		s, grants paid	4.50		<u>-,,,,,,,</u>		110111	172,290
_	26	. •	bursements Add lines 24 and 25	006 310	28	8,790.		NONE	
_	27	Subtract line 26 fr							
	i		expenses and disbursements	-66,860.	<u> </u>		_		
	Ь	Net investment in	come (if negative, enter -0-)		10'	7,979.			
	۱ ،	Adjusted net inco	me (if negative enter -0-).	.					

Form **990-PF** (2017)

Part I	Attached schedules and amounts in the description column should be for end-of-year	Beginning of year	End of	year
	amounts only (See instructions.)	(a) Book Value	(b) Book Value	(c) Fair Market Value
1	Cash - non-interest-bearing			
2	Savings and temporary cash investments	2,125,525.	54,488.	54,488
3	Accounts receivable			
İ	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 (attach schedule) (see instructions)		+	
7	Other notes and loans receivable (attach schedule)			
'	Less allowance for doubtful accounts NONE		j	
S				
Assets	Inventories for sale or use			
9	Prepaid expenses and deferred charges			
100		1,117,197.	2,347,048.	2,942,410
1	Investments - corporate stock (attach schedule) . STMT .9.	671,753.	1,421,225.	1,442,143
11 ^c	Investments - corporate bonds (attach schedule) . STMT .13. Investments - land, buildings, and equipment basis Less accumulated depreciation	0/1,/33.	1,421,225.	1,442,143
1.2	(attach schedule) Investments - mortgage loans			
12 13 14	Investments - mortgage roans Investments - other (attach schedule)	200,000.	200,000.	201,451
-	Less accumulated depreciation		1	
15	(attach schedule) Other assets (describe			· · · · · · · · · · · · · · · · · · ·
16	Total assets (to be completed by all filers - see the			
."	instructions Also, see page 1, item I)	4,114,475.	4,022,761.	4,640,492
 		1,111,113.	1,022,701.	1,010,102
17	Accounts payable and accrued expenses			
ν 18 γ 10				
Liabilities 20 21 22 22	Deferred revenue			
⊒ 20	Loans from officers, directors, trustees, and other disqualified persons			
면 21	Mortgages and other notes payable (attach schedule)			
- 22	Other liabilities (describe			
23	Total liabilities (add lines 17 through 22)		NONE	
- 23			NONE	
တ္က	Foundations that follow SFAS 117, check here > and complete lines 24 through 26, and lines 30 and 31			
Salances 25				
E 24	Unrestricted			
	Temporarily restricted			
26	Permanently restricted			
리	and complete lines 27 through 31.			
히		4 114 475	4 000 761	
y 27	Capital stock, trust principal, or current funds	4,114,475.	4,022,761.	
Net Assets or Fund 32 22 22 32 32 32 32 32 32 32 32 32 32	Paid-in or capital surplus, or land, bldg, and equipment fund			
Š 29	Retained earnings, accumulated income, endowment, or other funds	4 114 455	1 000 561	
a 30	Total net assets or fund balances (see instructions)	4,114,475.	4,022,761.	
Ž 31	Total liabilities and net assets/fund balances (see	4 114 485		
	instructions)	4,114,475.	4,022,761.	
	Analysis of Changes in Net Assets or Fund Bala		· · · · · · · · · · · · · · · · · · ·	
	al net assets or fund balances at beginning of year - Part I		-	4 44 4 40 5
	d-of-year figure reported on prior year's return)			4,114,475.
	er amount from Part I, line 27a			-66,860.
	ner increases not included in line 2 (itemize) MUTUAL FUND 1	_		1,091.
	d lines 1, 2, and 3		4	4,048,706.
	creases not included in line 2 (itemize) SEE STAT		5	25,945.
6 Tot	al net assets or fund balances at end of year (line 4 minus li	ne 5) - Part II, column (b)	, lıne 30 6	4,022,761.

b	(a) List and desc 2-story bridge IBLICLY TRADED Solution (IBLICLY TRADE	(f) Depreciation allowed (or allowable) Diving gain in column (h) and owned (j) Adjusted basis as of 12/31/69	(g) Cost or other basis plus expense of sale 843,793. by the foundation on 12/31/69 (k) Excess of col. (i) over col (j), if any gain, also enter in Part I, line 7 loss), enter -0- in Part I, line 7 1222(5) and (6).			us (g)) 37,807.
b c d e {e} a b c d e Co (i) FF a b c d e 1	2-story bright process sales price 881,600. Implete only for assets shown as of 12/31/69 Applicating an inet income of the short-term capital gain, also enter in Pagain, also	ck warehouse, or common stock, 200 SECURITIES (f) Depreciation allowed (or allowable) Dwing gain in column (h) and owned (j) Adjusted basis as of 12/31/69 or (net capital loss) If column or (loss) as defined in sections	(g) Cost or other basis plus expense of sale 843,793. by the foundation on 12/31/69 (k) Excess of col. (i) over col (j), if any gain, also enter in Part I, line 7 loss), enter -0- in Part I, line 7 1222(5) and (6).	P - Purchase D - Donattor	(h) Gain or (lo ((e) plus (f) min	(mo , day, yr) ss) us (g)) 37 , 807 . lin minus han -0-) or l. (h)) 37 , 807 .
b c d e (e) a b c d e Co (i) FF a b c d e 1	get short-term capital gan, also enter in Page	(f) Depreciation allowed (or allowable) Diving gain in column (h) and owned (j) Adjusted basis as of 12/31/69 or (net capital loss) If gain or (loss) as defined in sections	plus expense of sale 843,793. by the foundation on 12/31/69 (k) Excess of col. (i) over col (j), if any gain, also enter in Part I, line 7 loss), enter -0- in Part I, line 7 1222(5) and (6).	(I) col.	(h) Gain or (lo ((e) plus (f) min	us (g)) 37,807. In minus han -0-) or 1. (h)) 37,807.
b c d e (e) a b c d e Co (i) FF a b c d e 1	get short-term capital gan, also enter in Page	(f) Depreciation allowed (or allowable) Diving gain in column (h) and owned (j) Adjusted basis as of 12/31/69 or (net capital loss) If gain or (loss) as defined in sections	plus expense of sale 843,793. by the foundation on 12/31/69 (k) Excess of col. (i) over col (j), if any gain, also enter in Part I, line 7 loss), enter -0- in Part I, line 7 1222(5) and (6).	col.	((e) plus (f) min	us (g)) 37,807. In minus han -0-) or 1. (h)) 37,807.
d e (e) a b c d e Co (i) FF a b c d e 2 Ca 3 Ne	mplete only for assets show MV as of 12/31/69 apital gain net income of the short-term capital gain, also enter in Pa	(or allowable) Diving gain in column (h) and owned (j) Adjusted basis as of 12/31/69 or (net capital loss) [If (plus expense of sale 843,793. by the foundation on 12/31/69 (k) Excess of col. (i) over col (j), if any gain, also enter in Part I, line 7 loss), enter -0- in Part I, line 7 1222(5) and (6).	col.	((e) plus (f) min	us (g)) 37,807. In minus han -0-) or 1. (h)) 37,807.
e (e) a b c d e Co (ii) FR a b c d e 2 Ca 3 Ne FR Pa	mplete only for assets show MV as of 12/31/69 apital gain net income of the short-term capital gain, also enter in Pa	(or allowable) Diving gain in column (h) and owned (j) Adjusted basis as of 12/31/69 or (net capital loss) [If (plus expense of sale 843,793. by the foundation on 12/31/69 (k) Excess of col. (i) over col (j), if any gain, also enter in Part I, line 7 loss), enter -0- in Part I, line 7 1222(5) and (6).	col.	((e) plus (f) min	us (g)) 37,807. In minus han -0-) or 1. (h)) 37,807.
a b c d e Co (i) FF a b c d e 2 Ca 3 Ne FF Pa	mplete only for assets show MV as of 12/31/69 apital gain net income of the short-term capital gain, also enter in Pa	(or allowable) Diving gain in column (h) and owned (j) Adjusted basis as of 12/31/69 or (net capital loss) [If (plus expense of sale 843,793. by the foundation on 12/31/69 (k) Excess of col. (i) over col (j), if any gain, also enter in Part I, line 7 loss), enter -0- in Part I, line 7 1222(5) and (6).	col.	((e) plus (f) min	us (g)) 37,807. In minus han -0-) or 1. (h)) 37,807.
a b c d e Co (i) Fr a b c d e 2 Ca 3 Ne	mplete only for assets show MV as of 12/31/69 apital gain net income of the short-term capital gain, also enter in Pa	(or allowable) Diving gain in column (h) and owned (j) Adjusted basis as of 12/31/69 or (net capital loss) [If (plus expense of sale 843,793. by the foundation on 12/31/69 (k) Excess of col. (i) over col (j), if any gain, also enter in Part I, line 7 loss), enter -0- in Part I, line 7 1222(5) and (6).	col.	((e) plus (f) min	us (g)) 37,807. In minus han -0-) or 1. (h)) 37,807.
b c d e Co (i) Fr a b c d e 2 Ca 3 Ne	mplete only for assets showing the short-term capital gain, also enter in Pagain, also e	(j) Adjusted basis as of 12/31/69 or (net capital loss) { If (by the foundation on 12/31/69 (k) Excess of col. (i) over col (j), if any gain, also enter in Part I, line 7 loss), enter -0- in Part I, line 7 1222(5) and (6).	col.	(k), but not less t	nin minus han -0-) or l. (h)) 37,807.
c d e Co (i) Fr a b c d e 2 Ca 3 Ne	MV as of 12/31/69 apital gain net income of the short-term capital gain, also enter in Pa	(j) Adjusted basis as of 12/31/69 or (net capital loss) { If ((k) Excess of col. (i) over col (j), if any gain, also enter in Part I, line 7 loss), enter -0- in Part I, line 7	col.	(k), but not less t	han -0-) or 1. (h)) 37,807.
d e Co (i) FN a b c d e 2 Ca 3 Ne If	MV as of 12/31/69 apital gain net income of the short-term capital gain, also enter in Pa	(j) Adjusted basis as of 12/31/69 or (net capital loss) { If ((k) Excess of col. (i) over col (j), if any gain, also enter in Part I, line 7 loss), enter -0- in Part I, line 7	col.	(k), but not less t	han -0-) or 1. (h)) 37,807.
e Co (i) FN a b c d e 2 Ca 3 Ne	MV as of 12/31/69 apital gain net income of the short-term capital gain, also enter in Pa	(j) Adjusted basis as of 12/31/69 or (net capital loss) { If ((k) Excess of col. (i) over col (j), if any gain, also enter in Part I, line 7 loss), enter -0- in Part I, line 7	col.	(k), but not less t	han -0-) or 1. (h)) 37,807.
Co (i) Fr a b c d e 2 Ca 3 Ne	MV as of 12/31/69 apital gain net income of the short-term capital gain, also enter in Pa	(j) Adjusted basis as of 12/31/69 or (net capital loss) { If ((k) Excess of col. (i) over col (j), if any gain, also enter in Part I, line 7 loss), enter -0- in Part I, line 7	col.	(k), but not less t	han -0-) or 1. (h)) 37,807.
a b c d e 2 Ca 3 Ne If Pa	apital gain net income o et short-term capital ga gain, also enter in Pa	as of 12/31/69 or (net capital loss) If (If (If or (loss) as defined in sections	gain, also enter in Part I, line 7 loss), enter -0- in Part I, line 7 1222(5) and (6).	col.	(k), but not less t	han -0-) or 1. (h)) 37,807.
b c d e 2 Ca 3 Ne If Pa	et short-term capital ga gain, also enter in Pa	or (net capital loss) {	loss), enter -0- in Part I, line 7 } 1222(5) and (6).	2		
b c d e 2 Ca 3 Ne If Pa	et short-term capital ga gain, also enter in Pa	or (net capital loss) {	loss), enter -0- in Part I, line 7 } 1222(5) and (6).	2		
d e 2 Ca 3 Ne If Pa	et short-term capital ga gain, also enter in Pa	or (net capital loss) {	loss), enter -0- in Part I, line 7 } 1222(5) and (6).	2		37,807.
e 2 Ca 3 Ne If Pa	et short-term capital ga gain, also enter in Pa	or (net capital loss) {	loss), enter -0- in Part I, line 7 } 1222(5) and (6).	2		37,807.
2 Ca 3 Ne If Pa	et short-term capital ga gain, also enter in Pa	or (net capital loss) {	loss), enter -0- in Part I, line 7 } 1222(5) and (6).	2		37,807.
3 Ne	et short-term capital ga gain, also enter in Pa	or (net capital loss) {	loss), enter -0- in Part I, line 7 } 1222(5) and (6).	2		37,807.
lf Pa	gain, also enter in Pa	in or (loss) as defined in sections	1222(5) and (6).			
Pa	-	art I, line 8, column (c). See ir		1 1		
	william O	• • • • • • • • • • • • • • • • • • • •	istructions. If (loss), enter -0- in			
Part V		<u></u>		3		
	Qualification U	nder Section 4940(e) for Red	duced Tax on Net Investment I	ncome		
		he section 4942 tax on the distri t qualify under section 4940(e). I	butable amount of any year in the b	ase perio	od?	Yes X No
			ar, see the instructions before making	ng anv er	ntries.	
	(a) Base period years year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets		(d) Distribution ra (col. (b) divided by	
00/0/100	2016	12,100.	2,412,056.	1	(44- (5) 21-1-22-21	0.005016
	2015	126,300.	2,360,094.			0.053515
	2014	191,264.	2,509,969.			0.076202
	2013	156,826.	2,517,518.			0.062294
	2012	177,662.	2,432,667.	ļ		0.073032
2 To	otal of line 1, column (d	d)		2		0.270059
	•		de the total on line 2 by 5.0, or by	-		
th	e number of years the	foundation has been in existence	of less than 5 years	3		0.054012
4 Er	nter the net value of no	ncharitable-use assets for 2017	from Part X, line 5	4	4,	428,465.
5 M	ultiply line 4 by line 3.			5		239,190.
6 Er	nter 1% of net investme	ent income (1% of Part I, line 27b)	6		1,080.
7 A	dd lines 5 and 6			7		240,270.
lf			x in Part VI, line 1b, and complete	8 that par	t using a 1% ta	177,399. ex rate. See th

Par	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see i	<u>nstru</u>	ctions	s)
1a	Exempt operating foundations described in section 4940(d)(2), check here			
	Date of ruling or determination letter $\frac{04/30/2011}{2011}$ (attach copy of letter if necessary - see instructions)			
ь	Domestic foundations that meet the section 4940(e) requirements in Part V, check		2,1	.6 <u>0</u> .
	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-)		N	ONE
3	Add lines 1 and 2		2,1	<u>.60.</u>
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-)			<u>IONE</u>
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0		2,1	<u>.60.</u>
6	Credits/Payments			
a	2017 estimated tax payments and 2016 overpayment credited to 2017 6a 888.			
b	Exempt foreign organizations - tax withheld at source			
C	Tax paid with application for extension of time to file (Form 8868) 6c 1,272.			
d	Backup withholding erroneously withheld			
7	Total credits and payments. Add lines 6a through 6d		2,1	<u>.60.</u>
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 2018 estimated tax ► NONE Refunded ► 11			
	t 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		Yes	No
	participate or intervene in any political campaign?	1a		<u> </u>
р	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the	ا ا		1,
	instructions for the definition	1b		<u>X</u>
	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.	1. 1		.,
	Did the foundation file Form 1120-POL for this year?	1c		<u>X</u>
ď	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year.			
	(1) On the foundation. ► \$ (2) On foundation managers ► \$			
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed			
_	on foundation managers. • \$	2		Х
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.	i I		
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		X
4a		4a		X
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4b	-	
5	If "Yes," has it filed a tax return on Form 990-T for this year?	5		X
J	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	, 1		
•	By language in the governing instrument, or			
	By state legislation that effectively amends the governing instrument so that no mandatory directions that	i		l
	conflict with the state law remain in the governing instrument?	6	Х	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV	7	X	
8a	Enter the states to which the foundation reports or with which it is registered. See instructions.			
	FL			
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 ² If "No," attach explanation	8ъ	Х	
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 2017 or the tax year beginning in 2017? See the instructions for Part XIV If "Yes,"			
	complete Part XIV	9		X
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their			
. •	names and addresses	10		Х
			0-PF	(2017)

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	11		X
12	to the state of th			
12	person had advisory privileges? If "Yes," attach statement. See instructions	12	_	X
13	and a second a second and a second a second and a second a second and a second a second and a second a second and a second a second and	13	X	
13	Website address ► N/A			
14	The books are in care of ► Wells Fargo Bank NA Telephone no. ► (855) 834-	035	0	
	Located at ► 100 N MAIN FL6 D40001-065, WINSTON SALEM, NC ZIP+4 ► 27101-3			
15	Cl. 5 COARS 1 ACA Short have		▶	
	and enter the amount of tax-exempt interest received or accrued during the year			
16	At any time during calendar year 2017, did the foundation have an interest in or a signature or other authority		Yes	No
	over a bank, securities, or other financial account in a foreign country?	16		X
	See the instructions for exceptions and filing requirements for FinCEN Form 114 If "Yes," enter the name of			
	the foreign country			
Pari	t VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
_	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1a	During the year, did the foundation (either directly or indirectly)			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes X No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a			
	disqualified person? Yes X No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes 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)?			
	(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), Yes X No			
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations		<u> </u>	
	section 53 4941(d)-3 or in a current notice regarding disaster assistance? See instructions	1b		
	Organizations relying on a current notice regarding disaster assistance, check here	, ,	1	
C	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that	4-		$\frac{1}{x}$
	were not corrected before the first day of the tax year beginning in 2017?	1c	×27.	
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private	ŀ	B	
	operating foundation defined in section 4942(j)(3) or 4942(j)(5))		15	
а	At the end of tax year 2017, did the foundation have any undistributed income (lines 6d and			
	de, l'ait Ain/ foi tax years/ aegiming acione zon.		Ì	
_	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)		٠,	
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to	2b	<u> </u>	X
	all years listed, answer "No" and attach statement - see instructions)		<u> </u>	1
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here			
٥.	Old the foundation hald made then a 20' direct or indirect interest in any hydroce enterprise		l	1
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise			
	de dity time during the year.			1
t	old if "Yes," did it have excess business holdings in 2017 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 2017.)	3b	<u> </u>	
4-	a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	†	X
	b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its			
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2017?	4b	1	X
_	F(0-PF	(2017)

orm 9	90-PF (2017)		27-15	21392		J	Page 6
	VII-B Statements Regarding Activities f	or Which Form 4					
5a	During the year, did the foundation pay or incur any amo					Yes	No
	(1) Carry on propaganda, or otherwise attempt to influe	nce legislation (sectio	n 4945(e))?	. Yes X No	, –		
	(2) Influence the outcome of any specific public ele	ection (see section	4955), or to carry or		İ	1	
	directly or indirectly, any voter registration drive?			. Yes X No	,		1
	(3) Provide a grant to an individual for travel, study, or o				,		
	(4) Provide a grant to an organization other than a	• •			Ì	Ì	1
	section 4945(d)(4)(A)? See instructions	_			,		
	(5) Provide for any purpose other than religious, ch						
	purposes, or for the prevention of cruelty to children	•	**		,	}	1
ь	If any answer is "Yes" to 5a(1)-(5), did any of the						
-	Regulations section 53,4945 or in a current notice regar			•	. 5b		1
	Organizations relying on a current notice regarding disas	-				_	\vdash
c	If the answer is "Yes" to question 5a(4), does the				<u> </u>	1	
·	because it maintained expenditure responsibility for the		•		,		
	If "Yes," attach the statement required by Regulations se	-	· · · · · · · · · · · · ·				
6a	Did the foundation, during the year, receive any fur	· ·	ectly to nay premiur	ne	´	ĺ	
O.	on a personal benefit contract?			Yes X No	,		
ь	Did the foundation, during the year, pay premiums, direct				6ь		Х
•	If "Yes" to 6b. file Form 8870.	ay or maneouty, on a	personal benefit contro		. 55		
7a	At any time during the tax year, was the foundation a pa	rty to a prohibited tax	shelter transaction?	Yes X No	,		
b		•					1
Par	VIII Information About Officers, Directo					·	
	and Contractors						
1		pagare and their	componentian Soc	instructions			
1_	List all officers, directors, trustees, foundation ma	nagers and their	compensation. See	instructions. (d) Contributions to	(a) Evpan		
1					(e) Expens		
	List all officers, directors, trustees, foundation ma	(b) Title, and average hours per week	(c) Compensation (If not paid,	(d) Contributions to employee benefit plans			
Geral	List all officers, directors, trustees, foundation ma (a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid,	(d) Contributions to employee benefit plans			
Geral	List all officers, directors, trustees, foundation ma (a) Name and address	(b) Title, and average hours per week devoted to position Trustee	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation			es
eral 131 Olivi	List all officers, directors, trustees, foundation ma (a) Name and address d M Shapiro Queenferry Circle, Boca Raton, FL 33496-5951	(b) Title, and average hours per week devoted to position Trustee	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation			es
eral 131 Olivi	List all officers, directors, trustees, foundation ma (a) Name and address d M Shapiro Queenferry Circle, Boca Raton, FL 33496-5951 a S. Shapiro	(b) Title, and average hours per week devoted to position Trustee 5 Trustee	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation			-()-
Geral 7131 Olivi	List all officers, directors, trustees, foundation ma (a) Name and address d M Shapiro Queenferry Circle, Boca Raton, FL 33496-5951 a S. Shapiro	(b) Title, and average hours per week devoted to position Trustee 5 Trustee	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation			-()-
eral 131 Olivi	List all officers, directors, trustees, foundation ma (a) Name and address d M Shapiro Queenferry Circle, Boca Raton, FL 33496-5951 a S. Shapiro	(b) Title, and average hours per week devoted to position Trustee 5 Trustee	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation			-()-
Geral 7131 01ivi 7131	List all officers, directors, trustees, foundation ma (a) Name and address d M Shapiro Queenferry Circle, Boca Raton, FL 33496-5951 a S. Shapiro Queenferry Circle, Boca Raton, FL 33496-5951	(b) Title, and average hours per week devoted to position Trustee 5 Trustee 5	(c) Compensation (if not paid, enter -0-) -0-	(d) Contributions to employee benefit plans and deferred compensation - 0 -	other all	owanc	-0- -0-
Geral 7131 01ivi 7131	List all officers, directors, trustees, foundation ma (a) Name and address d M Shapiro Queenferry Circle, Boca Raton, FL 33496-5951 a S. Shapiro Queenferry Circle, Boca Raton, FL 33496-5951 Compensation of five highest-paid employees	(b) Title, and average hours per week devoted to position Trustee 5 Trustee 5	(c) Compensation (if not paid, enter -0-) -0-	(d) Contributions to employee benefit plans and deferred compensation - 0 -	other all	owanc	-0- -0-
Geral 7131 01ivi 7131	List all officers, directors, trustees, foundation ma (a) Name and address d M Shapiro Queenferry Circle, Boca Raton, FL 33496-5951 a S. Shapiro Queenferry Circle, Boca Raton, FL 33496-5951	(b) Title, and average hours per week devoted to position Trustee 5 Trustee 5 (other than thos	(c) Compensation (if not paid, enter -0-) -0-	(d) Contributions to employee benefit plans and deferred compensation -0-	other all	owanc	-0- -0-
Geral 7131 01ivi 7131	List all officers, directors, trustees, foundation ma (a) Name and address d M Shapiro Queenferry Circle, Boca Raton, FL 33496-5951 a S. Shapiro Queenferry Circle, Boca Raton, FL 33496-5951 Compensation of five highest-paid employees	(b) Title, and average hours per week devoted to position Trustee 5 Trustee 5	(c) Compensation (if not paid, enter -0-) -0-	(d) Contributions to employee benefit plans and deferred compensation - () - - () - 2 1 - see instruction (d) Contributions to employee benefit	other all	one,	-0- -0- enter
Geral 7131 01ivi 7131	List all officers, directors, trustees, foundation ma (a) Name and address d M Shapiro Queenferry Circle, Boca Raton, FL 33496-5951 a S. Shapiro Queenferry Circle, Boca Raton, FL 33496-5951 Compensation of five highest-paid employees "NONE."	(b) Title, and average hours per week devoted to position Trustee 5 Trustee 5 (other than those)	(c) Compensation (if not paid, enter -0-) -0- -0-	(d) Contributions to employee benefit plans and deferred compensation - () () () - () - () - () - ()	other all	one,	-0- -0- enter
Geral 7131 11ivi 131 2	List all officers, directors, trustees, foundation material (a) Name and address d M Shapiro Queenferry Circle, Boca Raton, FL 33496-5951 a S. Shapiro Queenferry Circle, Boca Raton, FL 33496-5951 Compensation of five highest-paid employees "NONE." Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position Trustee 5 Trustee 5 (other than those hours per week hours per week hours per week hours per week hours per week hours per week hours per week hours per week	(c) Compensation (if not paid, enter -0-) -0- -0- (c) Compensation	(d) Contributions to employee benefit plans and deferred compensation - () - - () - - () - (d) Contributions to employee benefit plans and deferred compensation	other all	one,	-0- -0- enter
Geral 7131 01ivi 7131	List all officers, directors, trustees, foundation material (a) Name and address d M Shapiro Queenferry Circle, Boca Raton, FL 33496-5951 a S. Shapiro Queenferry Circle, Boca Raton, FL 33496-5951 Compensation of five highest-paid employees "NONE." Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position Trustee 5 Trustee 5 (other than those hours per week hours per week hours per week hours per week hours per week hours per week hours per week hours per week	(c) Compensation (if not paid, enter -0-) -0- -0-	(d) Contributions to employee benefit plans and deferred compensation -0- -0- (d) Contributions to employee benefit plans and deferred compensation and deferred compensation and deferred	other all	one,	-0- -0- enter
Geral 7131 11ivi 131 2	List all officers, directors, trustees, foundation material (a) Name and address d M Shapiro Queenferry Circle, Boca Raton, FL 33496-5951 a S. Shapiro Queenferry Circle, Boca Raton, FL 33496-5951 Compensation of five highest-paid employees "NONE." Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position Trustee 5 Trustee 5 (other than those hours per week hours per week hours per week hours per week hours per week hours per week hours per week hours per week	(c) Compensation (if not paid, enter -0-) -0- -0- (c) Compensation	(d) Contributions to employee benefit plans and deferred compensation - () - - () - - () - (d) Contributions to employee benefit plans and deferred compensation	other all	one,	-0- -0- enter
Geral 7131 11ivi 131 2	List all officers, directors, trustees, foundation material (a) Name and address d M Shapiro Queenferry Circle, Boca Raton, FL 33496-5951 a S. Shapiro Queenferry Circle, Boca Raton, FL 33496-5951 Compensation of five highest-paid employees "NONE." Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position Trustee 5 Trustee 5 (other than those hours per week hours per week hours per week hours per week hours per week hours per week hours per week hours per week	(c) Compensation (if not paid, enter -0-) -0- -0- (c) Compensation	(d) Contributions to employee benefit plans and deferred compensation - () - - () - - () - (d) Contributions to employee benefit plans and deferred compensation	other all	one,	-0- -0- enter
Geral 7131 11ivi 131 2	List all officers, directors, trustees, foundation material (a) Name and address d M Shapiro Queenferry Circle, Boca Raton, FL 33496-5951 a S. Shapiro Queenferry Circle, Boca Raton, FL 33496-5951 Compensation of five highest-paid employees "NONE." Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position Trustee 5 Trustee 5 (other than those hours per week hours per week hours per week hours per week hours per week hours per week hours per week hours per week	(c) Compensation (if not paid, enter -0-) -0- -0- (c) Compensation	(d) Contributions to employee benefit plans and deferred compensation - () - - () - - () - (d) Contributions to employee benefit plans and deferred compensation	other all	one,	-0- -0- enter
Geral 7131 11ivi 131 2	List all officers, directors, trustees, foundation material (a) Name and address d M Shapiro Queenferry Circle, Boca Raton, FL 33496-5951 a S. Shapiro Queenferry Circle, Boca Raton, FL 33496-5951 Compensation of five highest-paid employees "NONE." Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position Trustee 5 Trustee 5 (other than those hours per week hours per week hours per week hours per week hours per week hours per week hours per week hours per week	(c) Compensation (if not paid, enter -0-) -0- -0- (c) Compensation	(d) Contributions to employee benefit plans and deferred compensation - 0 - - 0 - 2 1 - see instructio (d) Contributions to employee benefit plans and deferred compensation NONE	other all	one,	-0- -0- enter
Geral 7131 11ivi 131 2	List all officers, directors, trustees, foundation material (a) Name and address d M Shapiro Queenferry Circle, Boca Raton, FL 33496-5951 a S. Shapiro Queenferry Circle, Boca Raton, FL 33496-5951 Compensation of five highest-paid employees "NONE." Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position Trustee 5 Trustee 5 (other than those hours per week hours per week hours per week hours per week hours per week hours per week hours per week hours per week	(c) Compensation (if not paid, enter -0-) -0- -0- (c) Compensation	(d) Contributions to employee benefit plans and deferred compensation - () - - () - - () - (d) Contributions to employee benefit plans and deferred compensation	other all	one,	-0- -0- enter
Geral 7131 11ivi 131 2	List all officers, directors, trustees, foundation material (a) Name and address d M Shapiro Queenferry Circle, Boca Raton, FL 33496-5951 a S. Shapiro Queenferry Circle, Boca Raton, FL 33496-5951 Compensation of five highest-paid employees "NONE." Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position Trustee 5 Trustee 5 (other than those hours per week hours per week hours per week hours per week hours per week hours per week hours per week hours per week	(c) Compensation (if not paid, enter -0-) -0- -0- (c) Compensation	(d) Contributions to employee benefit plans and deferred compensation - 0 - - 0 - 2 1 - see instructio (d) Contributions to employee benefit plans and deferred compensation NONE	other all	one,	-0- -0- enter

2 Eine L!	and Contractors (continued)	mtor PAIOAIE	n
3 Five hi	ghest-paid independent contractors for professional services. See instructions. If none, (a) Name and address of each person paid more than \$50,000 (b) Type of se		(c) Compensation
			
NONE		`	NONE
			-
-4-1			NON
	r of others receiving over \$50,000 for professional services	<u>, , , ,</u> ▶	NON
Part IX-A	Summary of Direct Charitable Activities		
	dation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the sand other beneficiaries served, conferences convened, research papers produced, etc	ne number of	Expenses
1NONE			
2			
3			
4			
			
Part IX-B	Summary of Program-Related Investments (see instructions)		
Describe the	two largest program-related investments made by the foundation during the tax year on lines 1 and 2		Amount
1 NONE			
2			
	gram-related investments. See instructions		
3NONE			
otal Add In	nes 1 through 3		···

Par	Minimum Investment Return (All domestic foundations must complete this part. Fore see instructions.)	ign found	ations,
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	3,937,341.
b	Average of monthly cash balances	1b	<u>558,563.</u>
C	Fair market value of all other assets (see instructions)	1c	NONE NONE
d	Total (add lines 1a, b, and c)	1d	4,495,904.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	NONE
3	Subtract line 2 from line 1d	3	4,495,904.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see		
	instructions)	4	67,439.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	4,428,465.
6	Minimum investment return. Enter 5% of line 5	6	221,423.
Par	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating four	dations	
	and certain foreign organizations, check here ▶ and do not complete this part.)		
1	Minimum investment return from Part X, line 6 · · · · · · · · · · · · · · · · · ·	1	221,423.
2a	Tax on investment income for 2017 from Part VI, line 5 2a 2,160.		
b	Income tax for 2017. (This does not include the tax from Part VI.) 2b	}	
C	Add lines 2a and 2b	2c	2,160.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	219,263.
4	Recoveries of amounts treated as qualifying distributions	4	NONE
5	Add lines 3 and 4	5	219,263.
6	Deduction from distributable amount (see instructions)	6	NONE
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII,		
	line 1	7	219,263.
Par	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	177,399.
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	NONE
3	Amounts set aside for specific charitable projects that satisfy the.	- - - - - - - - - - 	
а	Suitability test (prior IRS approval required)	3a	NONE
	Cash distribution test (attach the required schedule)	3b	NONE
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	177,399.
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	N/A
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	177,399.
3	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when ca		
	qualifies for the section 4940(e) reduction of tax in those years.	nculating	ANTICULE! THE LOURINGUOL

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Pa	t XIII Undistributed Income (see instri	uctions)			
	Distributable amount for 2017 from Part XI,	(a) Corpus	(b) Years prior to 2016	(c) 2016	(d) 2017
•	line 7				219,263.
2	Undistributed income, if any, as of the end of 2017				
а	Enter amount for 2016 only.			NONE	
	Total for prior years 20,20,20		NONE		
	Excess distributions carryover, if any, to 2017				
а	From 2012 NONE				
b	From 2013 NONE			ŀ	
c	From 2014				-
d	From 2015				
_	From 2016 NONE		ļ		
f	Total of lines 3a through e	59,172.			
4	Qualifying distributions for 2017 from Part XII,	1			
	line 4 ▶ \$177,399.			NONE	
а	Applied to 2016, but not more than line 2a			NONE	
b	Applied to undistributed income of prior years		NONE		
	(Election required - see instructions)		NONE		
С	Treated as distributions out of corpus (Election	NONE			
	required - see instructions)				177,399.
	Applied to 2017 distributable amount	NONE			111,395.
	Remaining amount distributed out of corpus Excess distributions carryover applied to 2017	41,864.			41,864.
3	(If an amount appears in column (d), the same	1270011	 _	_ _	12/001.
_	amount must be shown in column (a))	}			
ь	Enter the net total of each column as indicated below:				
а	Corpus Add lines 3f, 4c, and 4e Subtract line 5	17,308.			
ь	Prior years' undistributed income. Subtract				
	line 4b from line 2b		NONE		
c	Enter the amount of prior years' undistributed				
	been issued, or on which the section 4942(a)				
	tax has been previously assessed		NONE		
d	Subtract line 6c from line 6b Taxable		370377		
	amount - see instructions		NONE		
-	4a from line 2a Taxable amount - see			NONE	
	instructions			INOINE	
f	Undistributed income for 2017. Subtract lines				
	4d and 5 from line 1 This amount must be distributed in 2018		}		NONE
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)	NONE			
8	Excess distributions carryover from 2012 not				
	applied on line 5 or line 7 (see instructions)	NONE			
9	Excess distributions carryover to 2018.				
	Subtract lines 7 and 8 from line 6a	17,308.		-	
	Analysis of line 9				
	Excess from 2013 NONE				
	Excess from 2014				
	Excess from 2015 9,947.				
	Excess from 2016 NONE				
e	Excess from 2017 NONE				

Form **990-PF** (2017)

	Private Opi	erating roundation	s (see instructions a	ina Part VII-A, questi	on 9)		NOT APPLICABLE
1 a	If the foundation has	received a ruling or o	letermination letter tha	at it is a private opera	ating		
	foundation, and the ruling	g is effective for 2017, en	ter the date of the ruling	1	▶∟		
b	Check box to indicate v	whether the foundation Tax year	is a private operating	foundation described in Prior 3 years	section	4942(j)(3	3) or 4942(j)(5)
2 a	Enter the lesser of the ad-	(a) 2017	(b) 2016	(c) 2015	(d) 20	114	(e) Total
	Justed net income from Part I or the minimum investment return from Part X for each		(8) 2010	(6) 2013	(4) 20	,,,,	
	year listed		 	 	 -		
	85% of line 2a			 	 		
С	Qualifying distributions from Part XII, line 4 for each year listed .				1		
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						
а	"Assets" alternative test - enter				1		
	(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	<u> </u>	ļ	 	 		
C	"Support" alternative test - enter				ļ		
	(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)),						
	or royalties),	ļ		ļ	 		
	(2) Support from general public and 5 or more exempt organizations as provided in section 4942						
	(j)(3)(B)(iii)		ļ	 	 		
	(3) Largest amount of sup- port from an exempt organization						
	(4) Gross investment income.	<u> </u>		<u> </u>	<u> </u>		
Pa		ntary Information (uring the year - see		only if the founda	tion had \$	5,000 or i	more in assets at
1	Information Regarding	•					
а	List any managers of before the close of any	the foundation who tax year (but only if the	have contributed mo ney have contributed	re than 2% of the tota more than \$5,000). (S	al contribution 5	ons receive 07(d)(2).)	d by the foundation
	N/A				 		
Þ	List any managers of ownership of a partner					an equally	large portion of the
	N/A		- AU	-			
2	Information Regarding			· —			
	Check here ► X if t unsolicited requests for complete items 2a, b,	or funds. It the found	ation makes gifts, gr	to preselected char ants, etc., to individua	itable organ als or organi	izations an izations und	d does not accept fer other conditions,
a	The name, address, an	d telephone number o	or email address of the	e person to whom app	lications sho	uld be addr	essed [.]
b	The form in which app	lications should be su	bmitted and informati	on and materials they	should inclu	de.	
	Any submission deadli	nes.					
d	Any restrictions or li	mitations on awards	, such as by geog	aphical areas, charita	able fields,	kinds of ir	nstitutions, or other

Part XV Supplementary Information 3 Grants and Contributions Paid During	(continued)	oved for F	uture Payment	
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation	Purpose of grant or	
Name and address (home or business)	any foundation manager	Foundation status of recipient	Purpose of grant or contribution	Amount
a Paid during the year	Gr aggatunity contributor			
• ,				
SEE STATEMENT 20		}		172,290.
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 	<u> </u>	<u> </u>		
Total	· · · · · · · · · · · · · · · · · · ·		▶ 3a	172,290
b Approved for future payment	İ	l	1	
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		1	1	
		1	1	
Total		<u> </u>	N 21	
Iotal		· · · · · ·	▶ 3b	Form 990-PF (2017

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gross amounts unless otherwise indicated.	Unrela	ited business income	Excluded by s	ection 512, 513, or 514	(e)
ogram service revenue	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exemption function income (See instructions
ogram sarvice revenue					(See Macraellells
					
Fees and contracts from government agencies					
embership dues and assessments			14	2 470	
erest on savings and temporary cash investments			$\frac{14}{14}$	2,479. 99,166.	
vidends and interest from securities			1-1-1	99,100.	
et rental income or (loss) from real estate		·	+		
Debt-financed property				-	
et rental income or (loss) from personal property				-	
ther investment income					
an or (loss) from sales of assets other than inventory	<u>.</u>		18	37,807.	
et income or (loss) from special events · · ·					
ross profit or (loss) from sales of inventory					
her revenue a					
	<u> </u>				
ubtotal Add columns (b), (d), and (e)	lations)				139,
otal. Add line 12, columns (b), (d), and (e)	to the A	ccomplishment of	Exempt Purpo	oses of Part XVI-A contribu	ted importantly
otal. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calcumate and the second second second second second second second second second second second second second second second sec	to the A	ccomplishment of	Exempt Purpo	oses of Part XVI-A contribu	ted importantly
otal. Add line 12, columns (b), (d), and (e)	to the A	ccomplishment of	Exempt Purpo	oses of Part XVI-A contribu	ted importantly
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800-691-8916 Form **990-PF** (2017)

INVESTMENTS		-	REVENUE
CASH			
TEMPORARY			
NO	H H N		
- INTEREST	11 14 14 14 14 14 14 14 14 14 14 14 14 1		
H	II		
PART			
990PF,			
FORM	 		

NET	INVESTMENT	INCOME	1 1 1 1 1	2,479.	1 1 1 1 1 1 1 1 1 1	2,479.	
		PER BOOKS	1 1 1 1 1	2,479.		. 2,479.	
						TOTAL	-
		DESCRIPTION		SECURED MARKET DEPOSIT ACCOUNT			

FORM 990PF, PART I - DIVIDENDS AND INTEREST FROM SECURITIES

NET INVESTMENT INCOME	9	, 288. 7 994	16	57.	20. 12,347.	ο t	.616.6	163.	96.	144	·ω	, 58	9	,34	22	2,335.	707.	411.	S	9	29.		٦ ,	٦,	605.	7	
REVENUE AND EXPENSES PER BOOKS	9	588. 6 200.	16	57.	. 20. 12,347.	υ r	.010,0		96.			58		34	22	α		1 (9		. 222			605.	7	
DESCRIPTION		APPLE INC ASHMORE EMERG MKTS OR DR-INS	DS INC		⊣ ∽	INC MINE THE OF T	‡ 1		HALLIBURTON CO	INCHE DEFOT INC INTERCONTINENTAL EXCHANGE, INC		SELECT D	IBOXX \$ INVESTME	MID-CAP	RUSSELL MID-CAP GRO	RUSSELL 2000 VALUE ETF	ISHAKES RUSSELL 2000 GROWI'H ETF	1 E	VERT	MICROSOFT CORP	MONDELEZ INTERNATIONAL INC	NEWELL RUBBERMAID INC	C T # 1 12/18/1	OFFENHELMER DEVELOFING MAI-1 #/99	FFG INDUSTRIES INC T ROWE CORPORATE INCOME FD #112	C FUND #1857	77/2018 12:4

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STATEMENT

GERALD & OLIVA SHAPIRO FAM FDN

- DIVIDENDS AND INTEREST FROM SECURITIES PART I FORM 990PF,

NET INVESTMENT INCOME	2,789.	, <u>1</u>	9	\sim	\sim		388.	2	\sim	σ	118.	ω	31	, 24	\sim	ω	, 24	S	106.	\sim	10,065.	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	96,483.
REVENUE AND EXPENSES PER BOOKS	2,789.	14	869.	\sim	93	H	φ ($^{\prime\prime}$	\sim	σ	æ	82	31	4	84	ω	4,240.	05	106.	\supset	10,065.		99,166.
DESCRIPTION	RIDGEWORTH SEIX FLOATING CL I #5203 T BOWF DRICE INST RIOST BATE #170	NC	CT S	SCR SPDR	NCIAL SELECT	INDUSTRIAL SPDR	AMEX TECHNOLOGY SELECT SPDR	SMITH A O CORP CL B		\circ	IGM GROUP INC	ROWNE FD GLOBAL VALUE	DM #5	INTERMEDIATE	EST	A SHRS	T RT HI INC-	SHORT-TRMINCOME-I#310	ALLERGAN PLC	J J	GAI AGILITY INCOME FUND BROADCOM LID		TOTAL

STATEMENT

27-1521392

STATEMENT

FORM 990PF, PART I - ACCOUNTING FEES

CHARITABLE PURPOSES	1,000.
ADJUSTED NET INCOME	NONE
NET INVESTMENT INCOME	NONE
REVENUE AND EXPENSES PER BOOKS	1,000.
DESCRIPTION	TAX PREPARATION FEE (NON-ALLOC TOTALS

STATEMENT

FEES
PROFESSIONAL
OTHER
1
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PART
990PF,
FORM

	NET INVESTMENT INCOME	27,829.
SSIONAL FEES	REVENUE AND EXPENSES PER BOOKS	27,829.
FORM 990PF, PART I - OTHER PROFESSIONAL FEES		MANAGEMENT FEES (A TOTALS
FORM 990PF, ====================================	DESCRIPTION	CUSTODIAN & MANAGEMENT

27-1521392

	REVENUE AND EXPENSES	PER BOOKS	123.	1,084.
FORM 990PF, PART I - TAXES ====================================		DESCRIPTION	FOREIGN TAXES FEDERAL ESTIMATES - PRINCIPAL FOREIGN TAXES ON QUALIFIED FOR	TOTALS

62.

NET INVESTMENT INCOME

961.

899.

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TOTAL	

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STATEMENT

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REVENUE	AND	PER BOOKS	1 1 1 1 1 1
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OTHER NON-ALLOCABLE EXPENSE -

EXPENSES PER BOOKS	
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PER BOOKS	1 1 1 1 1 1	4,109.	

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TOTALS

DESCRIPTION

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TOTALS

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STATEMENT

FORM 990PF, PART II - CORPORATE STOCK

DESCRIPTION	BEGINNING BOOK VALUE	ENDING BOOK VALUE	ENDING FMV
872540109 TJX COMPANIES INC 30231G102 EXXON MOBIL CORPORAT			(
35851102	2,889.	6,247. 8,223.	12,531. 40,446.
3/833100 AFF 94918104 MICR	3,44	44	5,841
2826C839	, 65	79	4,40
41503403 THE PRICELINE	3,43	8,63	3,902
23135106 AMAZON COM INC	3,48	α α	α, α υ α
55244109 STARBU	, 15	₹	ά,
7612E106 TARGET CORP			
4271810			
AN ACTION CIME GROOT	10,981.	12,474.	12,523.
1324P102 UNITEDHEALTH			
97023105			
8389X105		([]
9466L302 SALESFORCE COM INC	4,04	0,62	4 x x . /
5264S833 DIAMOND	0,00	0,00	0,000
64287473 ISHARES RUSSELL MID	5,77	8,04	3,30
64287630 ISHARES	51,807.	86	325
01165100 TWEEDY BROWNE FD GL 92477101 BLACKROCK INC	2,51	8,5L	nc',
56782104			
78160104	1	[7
1843910	13,129.	10,617.	16,414.
58912108 STERICYCLE INC			
0781810 7886510	. 668, 9	. 668 '9	8,453.

STATEMENT

GERALD & OLIVA SHAPIRO FAM FDN

FORM 990PF, PART II - CORPORATE STOCK - CORPORATE STOCK

DESCRIPTION	BEGINNING BOOK VALUE	ENDING BOOK VALUE	ENDING FMV
030	4 c	17,441.	40,056.
ρ_{i}	, 45 7	10,439.	8,900.
0030N101 COMCAST C 37076102 HOME DEPO	80,	14,089.	30,325.
61202103 INTUIT COM	5,68		
9335	14,802.	10,714.	11,332.
4128R608	0,18	8,18	7,82
4925K581	0,181	98,181.	108,460.
UZUZHBSY AQK MANAGED FUTUK 15351109 ALEXION PHARMACEU	5,000	, 21	,19
16255101	6,940	2,501.	8,888
2079K107	,83	, 70	,042
137107 BOSTON S	1,192	11,192.	15,519.
4149Y108 CARDINAL HEAL	•	,	
0605P101 CONCHO RE	, 01	, 70	,01
1036P108 CONSTELLATION	0,34	0,34	8,74
4964C106 FORTUNE BRAND	,224	, 22	,46
5866F104 INTERCONT	,370	, 52	0,866
96278101 MIDDLEBY CORP	8,263	5,902.	7,422.
11. 387	11,41/. 25,000.	, 0	, /3
54106103 NIKE INC CL	,603		
835 781	, 000	198,000.	255,992.

GERALD & OLIVA SHAPIRO FAM FDN

FORM 990PF, PART II - CORPORATE STOCK

DESCRIPTION	BEGINNING BOOK VALUE	ENDING BOOK VALUE	ENDING FMV
$O \Sigma \Omega$	17,740. 64,223. 8,062.	14,100.	13,081.
244105 WHITEWAVE FOODS C 77J108 ALLERGAN PLC 371105 JAZZ PHARMACEUTIC	10,427.	16,944.	10,960.
72110 32210 36X10	6,83 9,04	3,40	T 7 / F
35B101 CENTENE CORP DEL	11,532.	_	14,829.
0 T D N O	9,00	9,23	2,88
135105 PALO ALTO NETWO	, 72	,51	3,19
09V104	0,55 9,13	8,034.	ر د و 98
STILOU INTINDICTION CHOOS	79	, 79	1,98
27K102	, 82	, 82	5,64
51C101	, 03	, 03	2,24 2,24
70G84 31111		6,25	8,42
216101 HALLIBURTON CO		00'6	8,65
287168 ISHARES SELECT D		7,74	1,90
287481 ISHARES RUSSELL M		9,92	5,73
287648 ISHARES		, 13 15	, 38 17
446448 MORGAN SIAND 101106 NETELTY INC		3,14	5,16
607769		8,53	4,57
697407 AMEX CONSUMER DISCR		8,04	6,58
69Y605 FINANCIAL SELE		8,14	8,48

GERALD & OLIVA SHAPIRO FAM FDN

FORM 990PF, PART II - CORPORATE STOCK

DESCRIPTION 	BEGINNING BOOK VALUE	ENDING BOOK VALUE	ENDING FMV
81369Y704 AMEX INDUSTRIAL SPDR 81369Y803 AMEX TECHNOLOGY SELE 831865209 SMITH A O CORP CL B 90384S303 ULTA BEAUTY, INC 90385D107 ULTIMATE SOFTWARE GR 922908553 VANGUARD REIT VIPER 983793100 XPO LOGISTICS INC Y09827109 BROADCOM LTD		69,196. 49,921. 10,249. 6,844. 11,361. 198,141. 11,010.	79,226. 55,381. 11,582. 5,368. 11,784. 195,003. 17,402.
	1,117,197	2,3	2,942,======

GERALD & OLIVA SHAPIRO FAM FDN

FORM 990PF, PART II - CORPORATE BONDS

ENDING FMV	104,686.	72,936.	91	⊣		9	196,625. 97,835.	S	ıα	1,442,143.
ENDING BOOK VALUE	95,719.	69,370.	7,14	α, υ 2		8,00	198,000. 98,000.	198,000.	,472.	1,421,225.
BEGINNING BOOK VALUE	95,719.	69, 70,		49,520. 50,000.	50,000.	.000,2			11 11 11 11 11 11 11 11 11 11 11 11 11	671=======
										TOTALS
DESCRIPTION	15920702 FID ADV EMER MKTS	41478101 T ROWE CO 64287242 ISHARES I	MAINSIAI CONVERILEL VANGUARD INTERMEDIA	044820504 ASHMORE EMERG MKTS C	4812C0803 JPMORGAN HIGH YIELD 693390882 PIMCO FOREIGN BD FD	46763226 PUTNAM FLOATING RA 56210105 DODGE & COX INCOME	7958B402	2837F763	949917744 WF ULTR SHORT-TRMINC	

GERALD & OLIVA SHAPIRO FAM FDN

INVESTMENTS	
- OTHER	
ΙΙ	
PART	
FORM 990PF,	

COST/ FMV BEGINNING ENDING ENDING C OR F BOOK VALUE BOOK VALUE FMV	C 200,000. 200,000. 201,451. C 200,000. 200,000. 201,451. TOTALS 200,000. 200,000. 201,451.
DESCRIPTION	GTY995004 GAI AGILITY INCOME F

FORM 990PF,	PART III	- OTHER	DECREASES	IN NET	WORTH	OR	FUND	BALANCES
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DESCRIPTION	AMOUNT
MUTUAL FUND TAX EFFECT DAE AFTE TYE ROC BASIS ADJUSTMENT ROUNDING SALES GAIN EFFECT CURRENT TYE COST BASIS ADJUSTMENT	811. 1,582. 1. 21,856. 1,695.
TOTAL	25,945.

•	
FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAIL	
	=
RECIPIENT NAME:	
American friends of Magen David Adom	
ADDRESS: 352 SEVENTH AVE SUITE 400	
NEW YORK, NY 10001	
RELATIONSHIP:	
NONE	
PURPOSE OF GRANT: SUPPORT	
FOUNDATION STATUS OF RECIPIENT: PC	
AMOUNT OF GRANT PAID	1,250.
RECIPIENT NAME:	
ISREAL TENNIS CENTERS FOUNDATION	
ADDRESS:	
3275 W HILLS BLVD	
BOCA RATON, FL 33428	
RELATIONSHIP: NONE	
PURPOSE OF GRANT:	
SUPPORT	
FOUNDATION STATUS OF RECIPIENT:	
PC	
AMOUNT OF GRANT PAID	15,000.
RECIPIENT NAME:	
Jewish Adoption and Foster Care Options	
ADDRESS:	
4200 NORTH UNIVERSITY DR.	
Sunrise, FL 33351	
RELATIONSHIP:	
NONE	
PURPOSE OF GRANT:	
PLEDGE SUPPORT	
FOUNDATION STATUS OF RECIPIENT:	

AMOUNT OF GRANT PAID

STATEMENT 16

PC

1,800.

RECIPIENT NAME:

Friends of Yemin Orde

ADDRESS:

12230 WILKIN AVE

Rockville, MD 20852

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

CREATIVE THERAPEUTIC PROGRAMS

FOUNDATION STATUS OF RECIPIENT:

PC

RECIPIENT NAME:

Carrington Charitable Foundation

ADDRESS:

1700 EAST PUTNAM AVE.

Ol Greenwich, CT 06870

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

GOLF CLASSIC

FOUNDATION STATUS OF RECIPIENT:

PC

RECIPIENT NAME:

DePaul University

ADDRESS:

1E. JACKSON BLVD.

Chicago, IL 60604

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

GERALD SHAPIRO CLASS OF 1969

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID 10,000.

GERALD & OLIVA SHAPIRO FAM FDN 27-1521392 FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID _______ RECIPIENT NAME: Northwestern University ADDRESS: 2020 RIDGE AVE. Evanston, IL 60208 RELATIONSHIP: NONE PURPOSE OF GRANT: SUPPORT FOUNDATION STATUS OF RECIPIENT: AMOUNT OF GRANT PAID 20,000. RECIPIENT NAME: NORTHERN SUBURBAN SPECIAL RECREATION FOUNDATION ADDRESS: 3105 MACARTHUR BLVD NORTHBROOK, IL 60062 **RELATIONSHIP:** NONE PURPOSE OF GRANT: SUPPORT FOUNDATION STATUS OF RECIPIENT: PC AMOUNT OF GRANT PAID 12,500. RECIPIENT NAME: ARTHRITIS FOUNDATION, INC ADDRESS: 408 12TH STREET WEST BRADENTON, FL 34205 RELATIONSHIP: NONE PURPOSE OF GRANT:

AMOUNT OF GRANT PAID

SUPPORT

FOUNDATION STATUS OF RECIPIENT:

500.

FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID

RECIPIENT NAME:

Jewish Federation of South

Beach County

ADDRESS:

9901 DONNA KLEIN BLVD

Boca Raton, FL 33428

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

SUPPORT

FOUNDATION STATUS OF RECIPIENT:

AMOUNT OF GRANT PAID 55,000.

RECIPIENT NAME:

BOCA RATON REGIONAL HOSPITAL

ADDRESS:

745 MEADOWS RD

Boca Raton, FL 33486

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

PLATINUM VALUED BENEFACTOR FOR MR & MRS SHAPI

FOUNDATION STATUS OF RECIPIENT:

AMOUNT OF GRANT PAID 20,000.

RECIPIENT NAME:

RUTH AND NORMAN RALES JEWISH

FAMILY SERVICES, INC

ADDRESS:

21300 RUTH AND BARON COL

BOCA RATON, FL 33428

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

SUPPORT

FOUNDATION STATUS OF RECIPIENT:

AMOUNT OF GRANT PAID 16,800. GERALD & OLIVA SHAPIRO FAM FDN 27-1521392 FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID

RECIPIENT NAME:

ADOLPH AND ROSE LEVIS JEWSIH

COMMUNITY CETER

ADDRESS:

9801 DONNA KLEN BLVD BOCA RATON, FL 33428

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

SUPPORT

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID 2,440.

TOTAL GRANTS PAID:

172,290.

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