

EXTENDED TO NOVEMBER 15, 2018
Return of Private Foundation

OMB No 1545-0052

2017

Open to Public Inspection

Form 990-PF

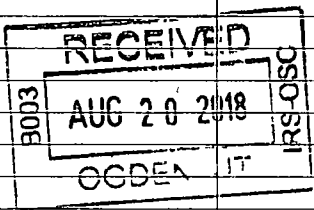
Department of the Treasury Internal Revenue Service

Do not enter social security numbers on this form as it may be made public
Go to www.irs.gov/Form990PF for instructions and the latest information

For calendar year 2017 or tax year beginning , and ending

Name of foundation: W.H. GREENE FOUNDATION
Employer identification number: 33-1049504
Telephone number: 716-805-1090
City or town, state or province, country, and ZIP or foreign postal code: EAST AURORA, NY 14052
Fair market value of all assets at end of year: \$ 3,637,668.

Table with 5 columns: (a) Revenue and expenses per books, (b) Net investment income, (c) Adjusted net income, (d) Disbursements for charitable purposes. Rows include Revenue (1-11) and Operating and Administrative Expenses (13-26).



Handwritten initials: G24

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		607,422.	1,447,867.	1,447,867.
	2	Savings and temporary cash investments		1,106,877.	1,107,984.	1,107,984.
	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 5		976,305.	985,079.	1,081,817.
	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)		2,690,604.	3,540,930.	3,637,668.	
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 SFAS 117, check here <input type="checkbox"/>					
	and complete lines 24 through 26, and lines 30 and 31					
	24	Unrestricted				
	25	Temporarily restricted				
	26	Permanently restricted				
	Foundations that do not follow SFAS 117, check here <input checked="" type="checkbox"/>					
	and complete lines 27 through 31					
27	Capital stock, trust principal, or current funds		1,398,175.	1,398,175.		
28	Paid-in or capital surplus, or land, bldg, and equipment fund		0.	0.		
29	Retained earnings, accumulated income, endowment, or other funds		1,292,429.	2,142,755.		
30	Total net assets or fund balances		2,690,604.	3,540,930.		
31	Total liabilities and net assets/fund balances		2,690,604.	3,540,930.		

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 30 (must agree with end-of-year figure reported on prior year's return)	1	2,690,604.
2	Enter amount from Part I, line 27a	2	850,326.
3	Other increases not included in line 2 (itemize) ▶ _____	3	0.
4	Add lines 1, 2, and 3	4	3,540,930.
5	Decreases not included in line 2 (itemize) ▶ _____	5	0.
6	Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30	6	3,540,930.

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				
b	NONE			
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				
b				
c				
d				
e				
Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(i) Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col. (h))	
(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		
a				
b				
c				
d				
e				

2 Capital gain net income or (net capital loss)	{ If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 }	2	
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		3	

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))
2016	141,410.	2,290,517.	.061737
2015	110,571.	1,901,863.	.058138
2014	88,904.	1,704,173.	.052168
2013	123,328.	1,397,993.	.088218
2012	74,833.	1,112,642.	.067257
2 Total of line 1, column (d)			2 .327518
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 .065504
4 Enter the net value of noncharitable-use assets for 2017 from Part X, line 5			4 2,676,644.
5 Multiply line 4 by line 3			5 175,331.
6 Enter 1% of net investment income (1% of Part I, line 27b)			6 91.
7 Add lines 5 and 6			7 175,422.
8 Enter qualifying distributions from Part XII, line 4			8 189,171.

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.

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 <input type="checkbox"/> 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 <input checked="" type="checkbox"/> and enter 1% of Part I, line 27b	1	91.
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-)	2	0.
3	Add lines 1 and 2	3	91.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)	4	0.
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5	91.
6	Credits/Payments:		
a	2017 estimated tax payments and 2016 overpayment credited to 2017	6a	875.
b	Exempt foreign organizations - tax withheld at source	6b	0.
c	Tax paid with application for extension of time to file (Form 8868)	6c	0.
d	Backup withholding erroneously withheld	6d	0.
7	Total credits and payments. Add lines 6a through 6d	7	875.
8	Enter any penalty for underpayment of estimated tax. Check here <input type="checkbox"/> if Form 2220 is attached	8	0.
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9	
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10	784.
11	Enter the amount of line 10 to be: Credited to 2018 estimated tax <input type="checkbox"/> 784. Refunded <input checked="" type="checkbox"/>	11	0.

Part VII-A Statements Regarding Activities

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

N/A

STMT 6

Part VII-A Statements Regarding Activities (continued)

Table with 3 columns: Question, Yes, No. Rows 11-16 containing questions about controlled entities, distributions, public inspection requirements, books in care, and foreign country interests.

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.

Table with 3 columns: Question, Yes, No. Rows 1a-4b containing questions about disqualified persons, taxes on failure to distribute income, and business holdings.

Part VII B Statements Regarding Activities for Which Form 4720 May Be Required (continued)

		Yes	No
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))?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(3) Provide a grant to an individual for travel, study, or other similar purposes?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(4) Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? See instructions	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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 Organizations relying on a current notice regarding disaster assistance, check here	N/A <input type="checkbox"/>	5b	
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? If "Yes," attach the statement required by Regulations section 53.4945-5(d).	N/A <input type="checkbox"/> Yes <input type="checkbox"/> No		
6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
b If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction?	N/A	7b	

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
SEE STATEMENT 7		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

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."

Table with 3 columns: (a) Name and address of each person paid more than \$50,000, (b) Type of service, and (c) Compensation. The first row contains 'NONE' in column (a).

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.

Table with 2 columns: Description of activities and Expenses. Row 1 contains 'N/A' in the first column.

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.

Table with 2 columns: Description of investments and Amount. Row 1 contains 'N/A' in the first column. Row 3 is labeled 'All other program-related investments. See instructions'.

Total. Add lines 1 through 3 0.

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	950,710.
b	Average of monthly cash balances	1b	1,766,695.
c	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	2,717,405.
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	2,717,405.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	40,761.
5	Net value of noncharitable-use assets . Subtract line 4 from line 3. Enter here and on Part V, line 4	5	2,676,644.
6	Minimum investment return . Enter 5% of line 5	6	133,832.

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	133,832.
2a	Tax on investment income for 2017 from Part VI, line 5	2a	91.
b	Income tax for 2017 (This does not include the tax from Part VI.)	2b	
c	Add lines 2a and 2b	2c	91.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	133,741.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	133,741.
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	133,741.

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	189,171.
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	189,171.
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	91.
6	Adjusted qualifying distributions . Subtract line 5 from line 4	6	189,080.

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

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2016	(c) 2016	(d) 2017
1 Distributable amount for 2017 from Part XI, line 7				133,741.
2 Undistributed income, if any, as of the end of 2017				
a Enter amount for 2016 only			0.	
b Total for prior years:		0.		
3 Excess distributions carryover, if any, to 2017				
a From 2012	19,241.			
b From 2013	53,948.			
c From 2014	5,130.			
d From 2015	16,018.			
e From 2016	26,884.			
f Total of lines 3a through e	121,221.			
4 Qualifying distributions for 2017 from Part XII, line 4: ▶ \$	189,171.			
a Applied to 2016, 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 2017 distributable amount				133,741.
e Remaining amount distributed out of corpus	55,430.			
5 Excess distributions carryover applied to 2017 (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:	176,651.			
a Corpus Add lines 3f, 4c, and 4e Subtract line 5				
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 2016. Subtract line 4a from line 2a Taxable amount - see instr.			0.	
f Undistributed income for 2017. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2018				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 2012 not applied on line 5 or line 7	19,241.			
9 Excess distributions carryover to 2018 Subtract lines 7 and 8 from line 6a	157,410.			
10 Analysis of line 9:				
a Excess from 2013	53,948.			
b Excess from 2014	5,130.			
c Excess from 2015	16,018.			
d Excess from 2016	26,884.			
e Excess from 2017	55,430.			

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 2017, enter the date of the ruling

4942(j)(3) or 4942(j)(5)

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

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

Tax year	Prior 3 years			(e) Total
(a) 2017	(b) 2016	(c) 2015	(d) 2014	

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).)

NONE

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.

SEE STATEMENT 8

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
<p>a Paid during the year</p> <p>SEE ATTACHED SCHEDULE</p>	NONE	PUBLIC CHARITY	SEE ATTACHED SCHEDULE	187,936.
Total			▶ 3a	187,936.
<p>b Approved for future payment</p> <p>NONE</p>				
Total			▶ 3b	0.

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated

Table with columns: (a) Business code, (b) Amount, (c) Exclusion code, (d) Amount, (e) Related or exempt function income. Rows include Program service revenue (a-f), Fees and contracts from government agencies, Membership dues and assessments, Interest on savings and temporary cash investments (14, 1,147), Dividends and interest from securities (14, 18,571), Net rental income from real estate (a-b), Net rental income from personal property, Other investment income, Gain or loss from sales of assets other than inventory, Net income from special events, Gross profit from sales of inventory, Other revenue (a-e), Subtotal (0, 19,718), Total (0, 19,718).

(See worksheet in line 13 instructions to verify calculations.)

Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes

Table with columns: Line No, Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes). Row 1: N/A

Part XVII Information Regarding Transfers to and Transactions and Relationships With Noncharitable Exempt Organizations

		Yes	No
1 Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?			
a Transfers from the reporting foundation to a noncharitable exempt organization of:			
(1) Cash	1a(1)		X
(2) Other assets	1a(2)		X
b Other transactions:			
(1) Sales of assets to a noncharitable exempt organization	1b(1)		X
(2) Purchases of assets from a noncharitable exempt organization	1b(2)		X
(3) Rental of facilities, equipment, or other assets	1b(3)		X
(4) Reimbursement arrangements	1b(4)		X
(5) Loans or loan guarantees	1b(5)		X
(6) Performance of services or membership or fundraising solicitations	1b(6)		X
c Sharing of facilities, equipment, mailing lists, other assets, or paid employees	1c		X
d If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received.			

(a) Line no	(b) Amount involved	(c) Name of noncharitable exempt organization	(d) Description of transfers, transactions, and sharing arrangements
		N/A	

2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) (other than section 501(c)(3)) or in section 527? Yes No

b If "Yes," complete the following schedule

(a) Name of organization	(b) Type of organization	(c) Description of relationship
N/A		

Sign Here Under penalties of perjury I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

William J. Scaroza | 8/15/18 | **PRESIDENT**

Signature of officer or trustee Date Title

May the IRS discuss this return with the preparer shown below? See instr.

Yes No

Paid Preparer Use Only	Print/Type preparer's name MARIA T. SCAROZZA	Preparer's signature <i>Maria Scaroza</i>	Date 7/20/18	Check <input type="checkbox"/> if self-employed	PTIN P01240837
	Firm's name ▶ SZYMKOWIAK & ASSOCIATES CPAS, PC			Firm's EIN ▶ 16-1600045	
	Firm's address ▶ 6325 MAIN STREET, SUITE 100 WILLIAMSVILLE, NY 14221			Phone no 716-626-2626	

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

2017

Name of the organization

W.H. GREENE FOUNDATION

Employer identification number

33-1049504

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 foundationCheck 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).

LHA For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2017)

Name of organization W.H. GREENE FOUNDATION	Employer identification number 33-1049504
-------------------------------------------------------	-----------------------------------------------------

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	W.H. GREENE \$ ASSOCIATES, INC. 400 QUAKER ROAD EAST AURORA, NY 14052	\$ <u>1,021,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
	_____ _____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
	_____ _____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
	_____ _____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
	_____ _____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
	_____ _____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
	_____ _____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)

Name of organization

Employer identification number

W. H. GREENE FOUNDATION

33-1049504

Part II Noncash Property (see instructions) Use duplicate copies of Part II if additional space is needed

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$ _____	_____
		\$ _____	_____
		\$ _____	_____
		\$ _____	_____
		\$ _____	_____
		\$ _____	_____
		\$ _____	_____

Name of organization W. H. GREENE FOUNDATION	Employer identification number 33-1049504
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Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this info once) ▶ \$ _____
Use duplicate copies of Part III if additional space is needed.

(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 INTEREST ON SAVINGS AND TEMPORARY CASH INVESTMENTS STATEMENT 1

SOURCE	(A) REVENUE PER BOOKS	(B) NET INVESTMENT INCOME	(C) ADJUSTED NET INCOME
AXA ADVISORS	40.	40.	
M&T BANK	1,107.	1,107.	
TOTAL TO PART I, LINE 3	1,147.	1,147.	

FORM 990-PF DIVIDENDS AND INTEREST FROM SECURITIES STATEMENT 2

SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDENDS	(A) REVENUE PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME
AXA ADVISORS	18,423.	0.	18,423.	18,408.	
CIGNA	148.	0.	148.	148.	
TO PART I, LINE 4	18,571.	0.	18,571.	18,556.	

FORM 990-PF TAXES STATEMENT 3

DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
FOREIGN TAXES	276.	276.		0.
TO FORM 990-PF, PG 1, LN 18	276.	276.		0.

FORM 990-PF OTHER EXPENSES STATEMENT 4

DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
INVESTMENT FEES	9,293.	9,293.		0.
NEW YORK STATE FILING FEE	250.	0.		250.
MISCELLANEOUS	370.	60.		60.
ACCOUNTING	1,850.	925.		925.
TO FORM 990-PF, PG 1, LN 23	11,763.	10,278.		1,235.

FORM 990-PF CORPORATE STOCK STATEMENT 5

DESCRIPTION	BOOK VALUE	FAIR MARKET VALUE
AXA ADVISORS - SEE ATTACHED STATEMENT	985,079.	1,081,817.
TOTAL TO FORM 990-PF, PART II, LINE 10B	985,079.	1,081,817.

FORM 990-PF LIST OF SUBSTANTIAL CONTRIBUTORS STATEMENT 6
PART VII-A, LINE 10

NAME OF CONTRIBUTOR	ADDRESS
W.H. GREENE & ASSOCIATES, INC.	400 QUAKER ROAD EAST AURORA, NY 14052

FORM 990-PF PART VIII - LIST OF OFFICERS, DIRECTORS STATEMENT 7
TRUSTEES AND FOUNDATION MANAGERS

NAME AND ADDRESS	TITLE AND AVRG HRS/WK	COMPEN-SATION	EMPLOYEE BEN CONTRIB	PLAN EXPENSE ACCOUNT
WILLIAM H. GREENE III 33 ORCHARD TERRACE ORCHARD PARK, NY 14127	PRESIDENT & TRUSTEE 3.00	0.	0.	0.
MARY JANE GREENE 33 ORCHARD TERRACE ORCHARD PARK, NY 14127	SECRETARY & TRUSTEE 0.01	0.	0.	0.
TERRENCE G. GREENE 3443 S. CREEK RD. HAMBURG, NY 14075	TREASURER & TRUSTEE 2.00	0.	0.	0.
JENNIFER L. GREENE 15 WINTERHALL DR. ORCHARD PARK, NY 14127	TRUSTEE 1.00	0.	0.	0.
KRISTIE A. GREENE 2311 W MORRISON AVENUE, UNIT 15 TAMPA, FL 33629	TRUSTEE 0.01	0.	0.	0.

CAITLIN E. GREENE
145 CHAUNCEY LANE
ORCHARD PARK, NY 14127

TRUSTEE
0.01

0. 0. 0.

TOTALS INCLUDED ON 990-PF, PAGE 6, PART VIII

0. 0. 0.

FORM 990-PF

GRANT APPLICATION SUBMISSION INFORMATION
PART XV, LINES 2A THROUGH 2D

STATEMENT 8

NAME AND ADDRESS OF PERSON TO WHOM APPLICATIONS SHOULD BE SUBMITTED

WILLIAM H. GREENE III, C/O W.H. GREENE & ASSOCIATES, INC.
400 QUAKER ROAD
EAST AURORA, NY 14052

TELEPHONE NUMBER

716-805-1090

EMAIL ADDRESS

BGREENE@WHGREENE.COM

FORM AND CONTENT OF APPLICATIONS

NO SPECIFIC FORM

ANY SUBMISSION DEADLINES

NONE

RESTRICTIONS AND LIMITATIONS ON AWARDS

APPROVAL OF AWARDS REQUIRES MAJORITY VOTE OF THE TRUSTEES

	<u>Recipient Name & Address</u>	<u>Relationship</u>	<u>Purpose of Contribution</u>	<u>Dollar Amount</u>
1)	Women s and Children's Hospital of Buffalo Foundation 1028 Main St, Fl 4 Buffalo NY 14202	none	Support children's emergency room	\$2,500
2)	Hospice Foundation 225 Como Park Blvd Cheektowaga NY 14227-1480	none	Support patients suffering from advanced illnesses	\$2,500
3)	Response for Love Center 130 Kosciuszko St. Buffalo NY 14212	none	Support those people in need that attend St. Adelbert s	\$2,500
4)	Churches in Action 144 Long Ave Hamburg NY 14075	none	Community Mission Work for the needy	\$1,500
5)	Villa Mane Convent 600 Doal St Buffalo NY 14211	none	Support the Felician Nuns	\$1,000
6)	Community Health - Loyola 2611 W Chicago Ave Chicago, IL 60622	none	Support medical projects in the Chicago inner city	\$1,500
7)	WNY United Against Drug & Alcohol Abuse 1067 Harlem Road Cheektowaga, NY 14227	none	Support to WNY high school students who have abused drugs and alcohol	\$5,000
8)	Buffalo City Mission 100 East Tupper Buffalo NY 14203	none	Support for Homeless of Buffalo	\$1,000
9)	Harvest House 1782 Seneca St Buffalo, NY 14210-1895	none	Support for Unwed Mothers	\$1,500
10)	Dunkirk Conference Center 3602 East Lake Road Dunkirk NY 14048	none	Support for UCC Church Camp	\$1,000
11)	Variety Club Telethon 193 Delaware Ave Buffalo, NY 14202	none	Support medical research for children s illnesses	\$3,500
12)	Foundation of the Roman Catholic Diocese of Buffalo - Make A Difference Dinner 795 Main St Buffalo NY 14203-1250	none	Support for Catholic Education for the inner city people	\$1,500
13)	Roswell Park Alliance Foundation Elm and Carlton Sts Buffalo, NY 14263	none	Small Cell Lung Cancer Research	\$25,000
14)	St Francis High School 4129 Lake Shore Road Athol Springs NY 14010	none	Support Catholic Education High School	\$57,000
15)	Retirement Fund for Religious 795 Main St Buffalo NY 14203-1250	none	Support of the retired religious in Buffalo	\$3,000
16)	Catholic Charities of Buffalo 525 Washington St Buffalo NY 14203	none	Support the needs for the poor in Buffalo NY	\$20,000
17)	St Luke s Mission of Mercy 325 Walden Ave Buffalo NY 14211	none	Support the Corporal and Spiritual works of the Mercy	\$1,500
18)	St Bonaventure University 3261 W State Rd St Bonaventure NY 14778	none	Support the college fund raiser	\$5,000
19)	PUNT Foundation 3859 North Buffalo Road Orchard Park, NY 14127	none	Fighting Pediatric Cancer	\$1,500
20)	Kathleen Mary House PO Box 2142 Blasdell NY 14219	none	Support the charity in the assistance to abused mothers	\$2,000

W H GREENE FOUNDATION

EID # - 33-1049504

21)	NYS Right to Life Committee / Education Trust 41 State Street Suite M-100 Albany NY 12207	none	Support to the education of people on right to life	\$1,000
22)	WNY Physically Challenged Youth Sports c/o Daniel P Murray / Lawley Services 701 Parkside Ave Buffalo, NY 14216	none	Support to physically challenged children	\$250
23)	Nativity of Our Lord School 4414 South Buffalo St Orchard Park NY 14127	none	Support to an Catholic elementary school	\$2,500
24)	American Lung Association 1595 Elmwood Ave Rochester, NY 14620	none	Support fight against lung cancer	\$1 000
25)	AVM Foundation 12 Halladay Lane Suite A Tonawanda NY 14150	none	Supporting Young Adults in their fight Against Cancer	\$75
26)	St Vincent de Paul Society 4737 Lake Shore Rd Hamburg NY 14075	none	Donation to support this charities goals to help the poor	\$1 000
27)	Storehouse Mission PO Box 615 Orchard Park NY 14127	none	Children's orphanage in Honduras	\$1 000
28)	Hand in Hand for Haiti 100 United Nations Plaza, Suite 43D New York NY 10017	none	Education in Haiti	\$1 000
29)	Ballers For Jesus 4716 Whispering Wind Ave Tampa FL 33614	none	Support youth sports program	\$2,000
30)	Hamburg Alumni Program PO Box 174 Hamburg NY 14075	none	Provide support for the enrichment of Hamburg central school district	\$300
31)	Friends of the Night People 394 Hudson St Buffalo NY 14201	none	Support a Buffalo charity who provides meals, clothing to the homeless	\$1 500
32)	SMART 28 S Shore Blvd Lackawanna, NY 14218	none	Spinal Muscular Atrophy Research Team	\$1,000
33)	Bison Children's Scholarship Fund PO Box 1134 Buffalo NY 14205	none	Support children s early education	\$1 000
34)	Ride For Roswell Elm & Carlton Streets Buffalo NY 14263	none	Support fight against cancer	\$3 902
35)	Sisters of St Francis 201 Reist Street Williamsville NY 14221	none	Ministries and future needs of sisters	\$250
36)	Orchard Park Police Foundation PO Box 484 Orchard Park NY 14127	none	Golf Tournament	\$1,000
37)	Canesus Fest for Charity Inc PO Box 400 Buffalo, NY 14205	none	Children with Cancer	\$1 000
38)	Our Little Roses Foreign Mission Society PO Box 530947 Miami Shores, FL 33153-0947	none	Empowerng and car for girls in Honduras	\$1 000
39)	Hilbert College 5200 South Park Ave Hamburg NY 14075	none	Risk Management Program	\$25,000
40)	St Francis DeSales Catholic Church 614 South Oakwood Ave Beckley WV 25801-5928	none	Support corporal and spiritual works of St Francis	\$1,000
41)	St Benedict Abbey 252 Still River Rd Harvard, MA 01451	none	Support the sharing of the Catholic Faith	\$1 000
42)	The Service Collaborative of WNY 173 Elm St Buffalo, NY 14203	none	Beds For Buffalo	<u>\$159</u>

Total \$187,936