Form 990-PF

Department of the Treasury

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
Go to www irs gov/Form990PFfor instructions and the latest information

-			gov/ronnissorrior mstr			30	
ŗ		lendar year 2017 or tax year beginning of foundation	 	, 2017, and end	A Employer identif	, 20	
		~	A11.0		, ,,,		
_	SUGAR FAMILY FOUNDATION KUNT				47-3980241		
	Numb	er and street (or P.O. box number if mail is not delivered	to street address)	Room/suit	e B Telephone numbe	er (see instructions)	
_		O. BOX 1501, NJ2-130-03-31			60	9-274-6834	
	City or	town, state or province, country, and ZIP or foreign pos	tal code				
					C If exemption applica pending, check here		
_	PEN	NINGTON, NJ 08534-1501					
(C he	eck all that apply Initial return	Initial return	of a former public chai	TITY D 1 Foreign organizat	ions, check here ►	
		Final return	X Amended ret	ւուս)	2 Foreign organizat		
		Address change	Name change	е	85% test, check h		
F	Che	ck type of organization X Section 501(c)(3) exempt private f	oundation			
	s	Section 4947(a)(1) nonexempt charitable trust	Other taxable pr	vate foundation	E If private foundation under section 507(b		
ī	Fair	market value of all assets at J Accou	unting method X Ca	esh Accrual	1	n a 60-month termination	
	end	of year (from Part II, col. (c), line Ot	ther (specify))(1)(B),check here .	
			column (d) must be on ca	sh basis)			
	Part I	Analysis of Revenue and Expenses (The	(a) Poyonya and			(d) Disbursements	
		total of amounts in columns (b), (c), and (d)	(a) Revenue and expenses per	(b) Net investment income	(c) Adjusted net income	for charitable purposes	
		may not necessarily equal the amounts in column (a) (see instructions))	books	mcome	income	(cash basis only)	
_	1	Contributions gifts, grants, etc received (attach schedule)	1,512,782.				
	2	Check if the foundation is not required to					
	3	attach Sch B					
	4	Dividends and interest from securities	47,248.	46,302.		STMT 1	
<u>8</u> 107	1	Gross rents					
づ	1	Net rental income or (loss)			DECENT	7	
٦,	۔ ما	Net gain or (loss) from sale of assets not on line 10	66,491.		RECEIVE	D	
MAK Z I Revenue	ь	Gross sales price for all	00,151.		9		
وَ جِ	,	Capital gain net income (from Part IV, line 2)		992,676.	5 JAN 2 3 71	19 0	
MA Re	7 8				9	9	
	9	Net short-term capital gain			OCDEN		
Ξ		Gross sales less returns			OGDEN, I		
CANNED	١.	and allowances					
Ž	1	Less Cost of goods sold .	·			· · · · · ·	
Ķ	1	Gross profit or (loss) (attach schedule)		-			
7	11 12	Other income (attach schedule)	1,626,521.	1,038,978.			
_			1,020,321.	1,030,570.			
<u>v</u>	13	Compensation of officers, directors, trustees, etc		NONE	NONE		
a v	14	Other employee salaries and wages		NONE	NONE		
•	,,	Pension plans, employee benefits		140141	11011		
Administrative Exp	I Da	Legal fees (attach schedule)	3,500.	NONE	NONE	3,500	
ď	d	Accounting fees (attach schedule) STMT, 2.	15,272.	9,162.		6,108	
aţ;	C C	Other professional fees (attach scheduler. 3.	15,4/4.	5,102.		0,100	
#	17	Interest	29,560.	762.			
<u> </u>	18	Taxes (attach schedule) (see instructions, 4.	29,300.		· -		
Ε	19	Depreciation (attach schedule) and depletion.					
		Occupancy		MONE	NONT		
and	21	Travel, conferences, and meetings		· NONE	NONE		
<u>-</u>	22	Printing and publications	274	NONE	NONE		
ů.	23 24 25	Other expenses (attach schedule) STMT. 5.	374.	364.	·	10	
rat	24	Total operating and administrative expenses	40 500	10 000	37037-	0.610	
<u> </u>	1	Add lines 13 through 23	48,706.	10,288.	<u>NONE</u>		
C		Contributions, gifts, grants paid	643,500.	10 000	37037	643,500	
_	26	Total expenses and disbursements Add lines 24 and 25	692,206.	10,288.	NONE	653,118	
	27	Subtract line 26 from line 12				, ••	
	a	Excess of revenue over expenses and disbursements .	934,315.		 	·	
	b	Net investment income (if negative, enter -0-)		1,028,690.			

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	art II	Palanca Chasta	Attached schedules and amounts in the description column should be for end-of-year	Beginning of year	End	of year
_		Balance Sheets	amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing	ng	19,002.	2	
	2	Savings and temporary of	cash investments	25,147.	59,530	. 59,530
	3	Accounts receivable				
		Less allowance for doub	otful accounts >			
	4					
		Less allowance for doub	otful accounts >			
	5					
	6		officers, directors, trustees, and other		_	
	•		ach schedule) (see instructions)			
	7	•	eceivable (attach schedule)		<u>-</u>	
			otful accounts NONE			
s						
ssets	8		e			
Ass	9	•	eferred charges	44,988.		
`						
		•			·	
	11 ^C	Investments - corporate Investments land, building and equipment basis Less accumulated deprecia (attach schedule)	·			
	12		loans			
	13	Investments - other (atta	ch schedule) STMT . 7	1,355,133.	2,305,599	2,504,684
		Land, buildings, and equipment basis	•			
		Less accumulated deprecia (attach schedule)	tion			
)			
			completed by all filers - see the			
				1,444,270.	2,365,131	2,564,216
\neg			ccrued expenses			
		, ,	,			1
S					· _ ·	1
Liabilities			rs, trustees, and other disqualified persons.			1
Ē			tes payable (attach schedule)		- 15	
			b	·		-
		Other habilities (describe				
	23	Total liabilities (add line	s 17 through 22)		NONI	1
┪			SFAS 117, check here		110111	
Balances		and complete lines 24 t	hrough 26, and lines 30 and 31			
<u>a</u>			· · · · · · · · · · · · · · · · · · ·			-
Ba				· · · · · · · · · · · · · · · · · · ·		-
힏	26	Permanently restricted .	·— —			1
ᆵ			t follow SFAS 117, check here ► X			
5		and complete lines 27 t	nrough 31	1 444 050	0 265 121	
S		Capital stock, trust princi	pal, or current funds	1,444,270.	2,365,131	<u>.</u>
set	28	Paid-in or capital surplus, or	land, bldg, and equipment fund			_
As	29	Retained earnings, accumula	ated income, endowment, or other funds		0 0 45 104	1
Ħ	30	Total net assets or fund	balances (see instructions)	1,444,270.	2,365,131	
Ž			net assets/fund balances (see			
			<u></u>	1,444,270.	2,365,131	
			ges in Net Assets or Fund Balan			
1			alances at beginning of year - Part II,			
			on prior year's return)			1,444,270.
			line 27a			934,315.
3	Othe	er increases not includ	ed in line 2 (itemize) >		3	
	Add	lines 1, 2, and 3				2,378,585.
5	Decr	eases not included in	line 2 (itemize) ► SEE STATE	EMENT 9	5	13,454.
6	Tota	I net assets or fund ba	lances at end of year (line 4 minus lin	e 5) - Part II, column (b)	, line 30 6	2,365,131.
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Pa	rt IV Capital Gains	s and Losses for Tax on Inv	estment Income			
	(a) List and de	scribe the kind(s) of property sold (for crick warehouse, or common stock, 200	•	(b) How acquired P · Purchase D · Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
1 a	PUBLICLY TRADED	SECURITIES				
<u>t</u>	<u> </u>					
c						
				<u> </u>		
<u> </u>	<u> </u>	r	/) (
	(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		(h) Gain or (lo ((e) plus (f) min	us (g))
a	2,276,216.		1,283,540.			<u>992,676.</u>
b	<u> </u>					
c				ļ		
d						
<u>e</u>		l nowing gain in column (h) and owned l	by the foundation on 12/31/69			
	Complete only for assets si		T		Gains (Col. (h) ga (k), but not less t	
	(ı) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any		Losses (from co	l (h))
а					<u> </u>	<u>992,676.</u>
b	<u> </u>					 _
С				<u> </u>		
d			-			
e						
2	Capital gain net income		ain, also enter in Part I, line 7 oss), enter -0- in Part I, line 7	2		992,676.
3		ain or (loss) as defined in sections				
	lf gain, also enter in F	Part I, line 8, column (c). See in	structions If (loss), enter -0- in			
	Part I, line 8	<u> </u>	<u></u>	3		
			butable amount of any year in the b	ase perio	d?	Yes X No
_		't qualify under section 4940(e)				
1	(a)		ar, see the instructions before makir	ng any en	(d)	
Cale	Base period years endar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets		Distribution ra (col (b) divided by	
	_2016	957,599.	1,482,314.			0.646016
	2015		326,884.			0.876188
	2014					
	2013		ļ			
	2012		<u></u>			
_	-					1 500004
2				2		1.522204
3	7		de the total on line 2 by 5 0, or by	3		0.761102
	the number of years the	foundation has been in existence	ıf less than 5 years	-3		0.761102
4	Enter the net value of no	oncharitable-use assets for 2017 f	rom Part X, line 5	4	1,	738,400.
5	Multiply line 4 by line 3			5_	1,	323,100.
6	Enter 1% of net investm	ent income (1% of Part I, line 27b)		6		10,287.
7				7	1,	333,387.
8				8		653,118.
•	If line 8 is equal to or g	greater than line 7, check the box	x in Part VI, line 1b, and complete		using a 1% ta	

Par	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see	nstrı	ictions	3)
1a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1			
	Date of ruling or determination letter (attach copy of letter if necessary - see instructions)			
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check	_	20,5	74.
	here and enter 1% of Part I, line 27b			
С	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of			
_	Part I, line 12, col (b) Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only others, enter -0-).		N	ONE
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-) 2 Add lines 1 and 2		20,5	
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-)			ONE
5	Tax based on investment income Subtract line 4 from line 3 If zero or less, enter -0		20,5	
6	Credits/Payments		20,0	
а	2017 estimated tax payments and 2016 overpayment credited to 2017 6a 17,444 .			
ь	Exempt foreign organizations - tax withheld at source			
c	Tax paid with application for extension of time to file (Form 8868) 6c 3, 130.			
d	Backup withholding erroneously withheld			
7	Total credits and payments Add lines 6a through 6d		20,5	74.
8	Enter any penalty for underpayment of estimated tax. Check here X if Form 2220 is attached 8			
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			
	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		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the	۱		77
	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	٠.		Х
	Did the foundation file Form 1120-POL for this year?	1c		
a	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year (1) On the foundation ▶ \$			
	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed			
-	on foundation managers \$	ĺ		
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		Х
-	If "Yes," attach a detailed description of the activities			•
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of			
	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		<u>X</u>
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		<u> X</u>
b	If "Yes," has it filed a tax return on Form 990-T for this year?	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		<u> </u>
	If "Yes," attach the statement required by General Instruction T			
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either			
	By language in the governing instrument, or			
	• By state legislation that effectively amends the governing instrument so that no mandatory directions that	_	_ v	
	conflict with the state law remain in the governing instrument?	6	X	
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	^	
8a	Enter the states to which the foundation reports or with which it is registered. See instructions CA			
L	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General			
IJ	(or designate) of each state as required by General Instruction G ² If "No," attach explanation	8ь	x l	
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		X
		0.0	A DE .	

Par	t 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	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified			
-	person had advisory privileges? If "Yes," attach statement See instructions	12		χ
13		13	Х	
	Website address ► N/A			
14	HO MONOR REDUCTABLE MAY ORDER ORDER (COO) 274	-683	4	
14	Located at ► 1300 MERRILL LYNCH DRIVE, PENNINGTON, NJ ZIP+4 ► 08534	005	<u>-</u>	
16				ГТ
15	1 1		–	ш
10	and enter the amount of tax-exempt interest received or accrued during the year		Yes	No
16	At any time during calendar year 2017, did the foundation have an interest in or a signature or other authority	16		Х
	over a bank, securities, or other financial account in a foreign country?	-		
	See the instructions for exceptions and filing requirements for FinCEN Form 114 If "Yes," enter the name of			
Dan	the foreign country ► t VII-B Statements Regarding Activities for Which Form 4720 May Be Required	Įį		
reu		1	Yes	No
_	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies	-	103	110
1a	During the year, did the foundation (either directly or indirectly)	İ		
	(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?			
		Ý I		
	V	1		
	(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)			
ь	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			
C	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that	<u> </u>		
	were not corrected before the first day of the tax year beginning in 2017?	1c		X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private			
	operating foundation defined in section 4942(j)(3) or 4942(j)(5))			
а	At the end of tax year 2017, did the foundation have any undistributed income (lines 6d and			
	6e, Part XIII) for tax year(s) beginning before 2017?			
	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)	1		
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to			
	all years listed, answer "No" and attach statement - see instructions)	2b		<u>X</u>
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here			
	·			
За	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise	ľ	İ	
	at any time during the year?	ļ		
b	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	1		
	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		
4a	Did the foundation invest during the year any amount in a mainer that would jeopardize its charitable purposes?	4 à		X
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its	<u> </u>		
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2017?	4b		X
	r.	00	U-DE	12017

NONE

NONE

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NONE

NONE

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Part VIII Information About Officers, Directors, Trustees, Foundand Contractors (continued)	dation Managers, Highly Paid Emplo	
3 Five highest-paid independent contractors for professional services	"	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		NONE
Total number of others receiving over \$50,000 for professional services		NONE
Part IX-A Summary of Direct Charitable Activities	<u> </u>	NONE
List the foundation's four largest direct charitable activities during the tax year. Include releving and other beneficiaries served, conferences convened, research papers produced		Expenses
1 NONE		
2		
3		
4	· · · · · · · · · · · · · · · · · · ·	
Part IX-B Summary of Program-Related Investments (see Instru Describe the two largest program related investments made by the foundation during the tax ye		Amount
1 NONE		
2		
All other program-related investments. See instructions 3 NONE		
Total. Add lines 1 through 3		Form 990-PF (2017)

	17 3300211		
Par	Minimum Investment Return (All domestic foundations must complete this part. Foreign see instructions)	gn foun	dations,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purposes		
а	Average monthly fair market value of securities	1a	1,643,096.
b	Average of monthly cash balances	1b	<u>121,777.</u>
C	Fair market value of all other assets (see instructions)	1c	NONE
d	Total (add lines 1a, b, and c)	1d	<u>1,764,873.</u>
е	Reduction claimed for blockage or other factors reported on lines 1a and	i	
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	NONE NONE
3	Subtract line 2 from line 1d	3	1,764,873.
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see		
	instructions)	4	26,473.
5	Net value of noncharitable-use assets Subtract line 4 from line 3 Enter here and on Part V, line 4	5	1,738,400.
6	Minimum investment return Enter 5% of line 5	6	86,920.
Par	t XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foun	dations	
	and certain foreign organizations, check here ▶ and do not complete this part)		
1	Minimum investment return from Part X, line 6	1	86,920.
2 a	Tax on investment income for 2017 from Part VI, line 5 2a 20,574.		
b	Income tax for 2017. (This does not include the tax from Part VI) 2b	- 1	
С	Add lines 2a and 2b	2c	20,574.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	66,346
4	Recoveries of amounts treated as qualifying distributions	4	NONE
5	Add lines 3 and 4	5	66,346.
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	66,346
Par	t XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		·
а	Expenses, contributions, gifts, etc - total from Part I, column (d), line 26	1a	653,118.
	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
b	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	653,118.
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	653,118.
-	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when ca		
	welfing faith appeter 10.10(2) individual of the property of t		strict the realitation

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Part XIII Undistributed Income (see instri	uctions)			
1 Distributable amount for 2017 from Part XI.	(a) Corpus	(b) Years prior to 2016	(c) 2016	(d) 2017
line 7	-			66,346.
2 Undistributed income, if any, as of the end of 2017				
a Enter amount for 2016 only			NONE	
b Total for prior years 20,20	<u>-</u>	NONE		
3 Excess distributions carryover, if any, to 2017		NOINE		
	·			
NONE		}		
NOND				
0.56 654				
d From 2015				
e From 2016 900,927.	1 177 501			
f Total of lines 3a through e	1,177,581.			· · · · · · · · · · · · · · · · · · ·
4 Qualifying distributions for 2017 from Part XII, line 4 ▶ \$ 653,118.				
a Applied to 2016, but not more than line 2a			NONE	<u> </u>
b Applied to undistributed income of prior years (Election required - see instructions)		NONE		
c Treated as distributions out of corpus (Election				
required - see instructions)	NONB			
d Applied to 2017 distributable amount				66,346.
e Remaining amount distributed out of corpus	586,772.			
5 Excess distributions carryover applied to 2017	NONE			NONE
(If an amount appears in column (d), the same amount must be shown in column (a)) 6 Enter the net total of each column as				
indicated below	1 764 353			
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	1,764,353.			
b Prior years' undistributed income Subtract		NONE		
line 4b from line 2b		NONE		
income for which a notice of deficiency has been issued, or on which the section 4942(a)		NOVE		
tax has been previously assessed		NONE		
d Subtract line 6c from line 6b Taxable		NONE		
amount - see instructions		NONE		<u> </u>
e Undistributed income for 2016 Subtract line 4a from line 2a Taxable amount - see instructions			NONE	
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	ĺ			
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)	NONB			
9 Excess distributions carryover to 2018.				
Subtract lines 7 and 8 from line 6a	1,764,353.			
10 Analysis of line 9				
a Excess from 2013 NONE				
b Excess from 2014 NONE				
c Excess from 2015 276,654.				
d Excess from 2016 900, 927.				
e Excess from 2017				

Form **990-PF** (2017)

Pa	rt XIV Private Op	erating Foundation	s (see instructions a	nd Part VII-A, questi	on 9)	NOT APPLICABL	
1 a	If the foundation has						
	foundation, and the ruling is effective for 2017, enter the date of the ruling						
						4942(j)(3) or 4942(j)(5)	
_	OHOUR DOX TO HIEROPI	Tax year	T product operating	Prior 3 years	1	10.100,000	
2 a	Enter the lesser of the ad-		(h) 2016		(d) 2014	(e) Total	
	justed net income from Part I or the minimum investment	(a) 2017	(b) 2016	(c) 2015	(u) 2014		
	return from Part X for each						
	year listed			ļ	ļ <u> </u>		
b	85% of line 2a						
c	Qualifying distributions from Part				1		
	XII, line 4 for each year listed .		[_				
d	Amounts included in line 2c not						
	used directly for active conduct						
	of exempt activities						
•	Qualifying distributions made directly for active conduct of						
	exempt activities. Subtract line				1		
3	2d from line 2c						
·	alternative test relied upon						
а	"Assets" alternative test enter						
	(1) Value of all assets						
	(2) Value of assets qualifying	1				1	
	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						
·	"Support' alternative test enter	1				1	
	(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	ł	1				
	public and 5 or more exempt organizations as						
	provided in section 4942						
	(j)(3)(B)(m)	- -	- -				
	port from an exempt					ł	
	organization					 	
Do.	(4) Gross investment income .	tory Information /	Complete this part	anly if the founds	tion had \$E O	00 or more in assets at	
ان		uring the year - see		only if the lounda	tion nau \$5,0	oo or more in assets at	
_							
	Information Regarding	•					
а	List any managers of before the close of any					received by the foundation	
	before the close of any	reax year (but only if the	iey nave contributeu i	note than \$5,000) (5	ee section 507(u)(2))	
	_N/A						
b	List any managers of	the foundation who	own 10% or more o	f the stock of a corp	oration (or an	equally large portion of the	
	ownership of a partner	ship or other ontity) o	f which the foundatior	n has a 10% or greater	interest		
	N / D						
2	N/A Information Regarding	Contribution Grant	Gift Loan Scholarsh	in. etc. Programs		·	
_	<u> </u>			-			
	Check here ► A if t	he foundation only	makes contributions	to preselected char	itable organizat	tions and does not accept	
	· · · · · · · · · · · · · · · · · · ·			ants, etc., to maividua	ais or organizati	ions under other conditions,	
	complete items 2a, b,						
a	The name, address, an	d telephone number o	r email address of the	person to whom app	ications should	be addressed.	
b	The form in which app	lications should be sul	bmitted and information	on and materials they	should include.		
	Any submission deadli	nes					
-	,	•					
	Any restrictions of la	mitations on sweets	euch se by cost	anhical areas charts	hle fields kin	de of institutions or other	
u	factors	iiiitations on awards	, such as by geogra	apinicai aicas, ciidilla	anie lielus, Killi	ds of institutions, or other	

Part XV Supplementary Information ('aantinuad!			Page 1
Part XV Supplementary Information (3 Grants and Contributions Paid Durin		oved for I	Future Payment	
Recipient	If recipient is an individual,	Foundation		
Name and address (home or business)	show any relationship to any foundation manager	status of recipient	Purpose of grant or contribution	Amount
a Paid during the year	or substantial contributor	recipient		
a Tala daring the year				
ALLIANCE COLLEGE READY PUBLIC SCHOOLS			UNRESTRICTED GENERAL	
501 SOUTH FIGUEROA ST, 4TH FL LOS ANGELES CA	N/A	PC	SUPPORT	30,000
704 BOOTH TIOOBKOR BI, TIM ID BOD ANGBED CA	N	1.0	Sorrowi	30,000
GRAMEEN AMERICA INC			UNRESTRICTED GENERAL	
L50 WEST 30TH ST, 8TH FL NEW YORK NY 10001-4	N/A	PC	SUPPORT	1,000
		-		2,
NATIONAL ACADEMY OF ENGINEERING FUND	1		UNRESTRICTED GENERAL	
2101 CONSTITUTION AVE NW WASHINGTON DC 20418	N/A	PC	SUPPORT	1,000
	.,			2,744
CONNECTING CULTURES MOBILE MUSEUM			UNRESTRICTED GENERAL	
2558 AIKEN AVE LOS ANGELES CA 90064-3306	N/A	PC	SUPPORT	500
	.,			
ACHIEVEMENT REWARDS FOR COLLEGE SCIENTISTS FD			UNRESTRICTED GENERAL	
PO BOX 8394 RANCHO SANTA FE CA 92067-8394	N/A	PC	SUPPORT	10,000
	.,			,···
COMMUNITY FOUNDATION OF THE LOW COUNTRY			UNRESTRICTED GENERAL	
NORTHBRIDGE DR, STE A HILTON HEAD SC 29926	N/A	PC	SUPPORT	1,000
				-,
NIVERSITY OF SOUTHERN CALIFORNIA			UNRESTRICTED GENERAL	
NIVERSITY PARK LOS ANGELES CA 90089-0001	N/A	PC	SUPPORT	80,000
				·
OS ANGELES PHILHARMONIC ASSOCIATION			UNRESTRICTED GENERAL	
51 S GRAND AVE LOS ANGELES CA 90012-3034	N/A	PC	SUPPORT	170,000
	'			•
THE UCLA FOUNATION			UNRESTRICTED GENERAL	
.0920 WILSHIRE BLVD, STE 900 LOS ANGELES CA	N/A	PC	SUPPORT	350,000.
			1	
Total	<u>.</u> <u>.</u>		▶ 3a	643,500
b Approved for future payment				
		i		
	•			
			[
			1	

Part XVI-A Analysis of Income-Prod	ucing Activ	/ities			
Enter gross amounts unless otherwise indicated	(a)	(b)	(c)	section 512, 513, or 514 (d)	(e) Related or exempt function income
1 Program service revenue	Business code	Amount	Exclusion code	Amount	(See instructions)
a					
b					
С	<u> </u>				
d			_		
e		<u>.</u>			
f		<u>.</u>			
g Fees and contracts from government agencies					
2 Membership dues and assessments \dots					
3 Interest on savings and temporary cash investments •				48.040	
4 Dividends and interest from securities			14	47,248.	
5 Net rental income or (loss) from real estate					
a Debt-financed property	ļ				
b Not debt-financed property - · · · · · ·					
6 Net rental income or (loss) from personal property					
7 Other investment income			1.0		
8 Gain or (loss) from sales of assets other than inventory	-		18	66,491.	
9 Net income or (loss) from special events $\cdot\cdot\cdot$	 				·
10 Gross profit or (loss) from sales of inventory	-				
11 Other revenue a	ļ <u>.</u>				
b	<u> </u>		0		
c	<u> </u>				
d					
e					
12 Subtotal Add columns (b), (d), and (e)				113,739.	
13 Total Add line 12, columns (b), (d), and (e)				13	113,739.
See worksheet in line 13 instructions to verify calcu					
Part XVI-B Relationship of Activities	to the Ac	complishment of c	xempt Furt	Joses	
Line No Explain below how each activit	•				
▼ accomplishment of the foundation	on's exempt	purposes (other than	by providing	funds for such purposes) (See instructions)
					
	·				
					
					
			·		*** ***********************************
		NOW ADDITIONE			
	·	NOT APPLICABL	<u>. E</u>		
				######################################	
	•••				
	<u>-</u>				
				· · · · · · · · · · · · · · · · · · ·	

Part	XVII	Informa Exempt		egarding Tr izations	ansfers	to and	Transacti	ons a	nd Relatio	nships W	ith Nonc	harit	able	
		e organization	directly	or indirectly than section									Yes	No
	•	zations?												
			_	foundation to			_					1a(1)		Х
												1a(1)	-	X
		transactions												
				haritable exer								1b(1)		X
				a noncharital		-						1b(2) 1b(3)		X
				ment, or other nents								1b(4)		X
			-									1b(5)		Х
	(6) Per	formance of s	services	or membersh	ip or fund	raising sol	icitations .							Х
				ent, mailing lis										X
				e above is "Ye ssets, or serv										
				ssets, or serv sharing arran										
(a) Lu		(b) Amount inv				le exempt org			Description of tra					
						,								
						-			<u> </u>					
														
								ļ			-			
			- 1											
		***************************************		************					······································					
						···								
								ļ						
				***************************************				ļ						
		<u> </u>						 						
22	le the	foundation di	rectly 0	r indirectly af	ffiliated w	uth or rela	eted to on	A OF M	ore tay-ever	nnt organiza	etions			
				other than se								Ye	s X	No
		" complete_th							·					
		(a) Name of or	ganization	***************************************		(b) Type of c	rganization			(c) Descripti	on of relations	hip		
											·			
			·	•• ••••••						***************************************		•		
					-				 					
	Under			that I have exam						nd to the best o	f my knowledg	e and b	elief, it	is tru
Sign	Correct	17/1/	laration of p	oreparer (other than		0-5-1	A	preparer ii	as any knowledge	9	May the IRS	discuss	thic	cotuco
lere		1 W			<u> </u>	0.2.7	<u> </u>		rus co	<u></u>	with the pre	parer s	hown _t	
	Sign	ature of office or	trustee		D	ate		Title			See instruction	: <u>X</u>	Yes	
		Print/Type prep	arer's nam		Prenar	re j és signature	<u> </u>		Date		ءار ا	TIN		
aid		KAREN J			(A)	any nature	His	i		Che 2/2018 self	· · · · · · · · · · · · · · · · · · ·	2001	4641	7
rep	arer	Firm's name		K OF AMER	RICA	ver-1			109/07	Firm's EIN		687		. /
-	Only	Firm's address		BOX 1802				-		3 5 114	<u> </u>			
				VIDENCE,	RI		02	901-1	.802	Phone no	888-86	6-3	275	

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/Form990for the latest information OMB No 1545-0047

2017

Name of the organization		Employer identification number				
SUGAR FAMILY FOUNDAT	TION	47-3980241				
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 priva	ate foundation				
	527 political organization					
Form 990-PF	X 501(c)(3) exempt private foundation					
	4947(a)(1) nonexempt charitable trust treated as a private for	oundation				
	501(c)(3) taxable private foundation					
Note: Only a section 501(c)(7), instructions General Rule	, (8), or (10) organization can check boxes for both the General Rule a	and a Special Rule See				
	filing Form 990, 990-EZ, or 990-PF that received, during the year, con or property) from any one contributor. Complete Parts I and II. See inst ontributions					
Special Rules						
regulations under se 13, 16a, or 16b, and	described in section 501(c)(3) filing Form 990 or 990-EZ that met the ections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form distributor, during the year, total contributor, during the year, total contributor fithe amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line	990 or 990-EZ), Part II, line outions of the greater of (1)				
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						
990-EZ, or 990-PF), but it mus	isn't covered by the General Rule and/or the Special Rules doesn't file at answer "No" on Part IV, line 2, of its Form 990, or check the box on certify that it doesn't meet the filing requirements of Schedule B (Forn	line H of its Form 990-EZ or on its				

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
SUGAR FAMILY FOUNDATION

Employer identification number 47-3980241

Part I	Contributors (see instructions). Use duplicate copies of	Part I if additional space is n	eeded
(a) No	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1_	RONALD AND VALERIE SUGAR 228 COPA DE ORO RD LOS ANGELES, CA 90077-3804	\$\$ 500,085.	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	RONALD AND VALERIE SUGAR 228 COPA DE ORO RD LOS ANGELES, CA 90077-3804	\$ <u>498,879.</u>	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No	(b) Name, address, and ZIP + 4	(c) Total contributions	' (d) Type of contribution
3_	RONALD AND VALERIE SUGAR 228 COPA DE ORO RD LOS ANGELES, CA 90077-3804	\$44,231.	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4	RONALD AND VALERIE SUGAR 228 COPA DE ORO RD LOS ANGELES, CA 90077-3804	10,816.	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5	RONALD AND VALERIE SUGAR 228 COPA DE ORO RD LOS ANGELES, CA 90077-3804	\$62,049.	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
6_	RONALD AND VALERIE SUGAR 228 COPA DE ORO RD LOS ANGELES, CA 90077-3804	\$56,411.	Person Payroll Noncash (Complete Part II for noncash contributions)

Name of organization Employer identification number 47-3980<u>241</u> SUGAR FAMILY FOUNDATION

Part I Contributors (see instructions) Use duplicate copies of Part I if additional space is needed. (a) (b) (d) **Total contributions** Type of contribution No. Name, address, and ZIP + 4 7 RONALD AND VALERIE SUGAR Person **Payroll** 228 COPA DE ORO RD 28,813. Noncash (Complete Part II for LOS ANGELES, CA 90077-3804 noncash contributions) (a) (b) (c) (d) **Total contributions** No Name, address, and ZIP + 4 Type of contribution 8 RONALD AND VALERIE SUGAR Person **Payroll** 228 COPA DE ORO RD 63,396. Noncash (Complete Part II for LOS ANGELES, CA 90077-3804 noncash contributions) (c) (a) No Name, address, and ZIP + 4 **Total contributions** Type of contribution 9 RONALD AND VALERIE SUGAR Person **Payroll** 228 COPA DE ORO RD 40,253. Χ Noncash (Complete Part II for LOS ANGELES, CA 90077-3804 noncash contributions) (a) (b) **Total contributions** No Name, address, and ZIP + 4 Type of contribution 10 RONALD AND VALERIE SUGAR Person **Payroll** 228 COPA DE ORO RD 34.247. Noncash (Complete Part II for LOS ANGELES, CA 90077-3804 noncash contributions) (c) (a) (d) **Total contributions** Type of contribution No Name, address, and ZIP + 4 RONALD AND VALERIE SUGAR 11 Person **Payroll** 228 COPA DE ORO RD 52,955. Noncash (Complete Part II for LOS ANGELES, CA 90077-3804 noncash contributions) (a) **Total contributions** No Name, address, and ZIP + 4 Type of contribution RONALD AND VALERIE SUGAR 12 Person Payroll 228 COPA DE ORO RD 37,024 Noncash (Complete Part II for LOS ANGELES, CA 90077-3804 noncash contributions)

Name of organization Employer identification number SUGAR FAMILY FOUNDATION 47-3980241

Part I	Contributors (see instructions) Use duplicate cop	ies of Part I if additional space is n	eeded
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
13	RONALD AND VALERIE SUGAR 228 COPA DE ORO RD LOS ANGELES, CA 90077-3804	\$ \$ 42,211.	Person Payroti Noncash (Complete Part II for noncash contributions)
(a) No	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
14	RONALD AND VALERIE SUGAR 228 COPA DE ORO RD LOS ANGELES, CA 90077-3804	\$ \$ 41,412.	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)

Schedule B (Form 990, 990-EZ, or 990-PF) (2017) Name of organization Employer identification number SUGAR FAMILY FOUNDATION

47-3980241

a) No from Part I	(b) Description of noncash property given		(c) FMV (or estimate) (See instructions)	(d) Date received
1_	1,619 SHS NORTHROP GRUMMAN CORP			
		\$_	500,085.	12/18/2017
a) No from Part I	(b) Description of noncash property given		(c) FMV (or estimate) (See instructions)	(d) Date received
2	1670 SHS NORTHROP GRUMMAN CORP		 	
		\$_	498,879.	11/10/2017
a) No from Part I	(b) Description of noncash property given		(c) FMV (or estimate) (See instructions)	(d) Date received
3_	527 SHS MICROSOFT CORP COM		<u> </u>	
		\$ _	44,231.	11/30/2017
a) No from Part I	(b) Description of noncash property given		(c) FMV (or estimate) (See instructions)	(d) Date received
4	116 SHS HASBRO INC COM			
		\$	10,816.	11/30/2017
a) No from Part I	(b) Description of noncash property given		(c) FMV (or estimate) (See instructions.)	(d) Date received
5_	451 SHS NORFOLK SOUTHERN CORP COM		<u> </u>	
		\$	62,049.	11/30/2017
a) No from Part I	(b) Description of noncash property given		(c) FMV (or estimate) (See instructions)	(d) Date received
6_	866 SHS CARNIVAL CORP PAIRED CTF			
		\$_	56,411.	11/30/2017

Name of organization SUGAR FAMILY FOUNDATION Employer identification number 47-3980241

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
7	150 SHS BERKSHIRE HATHAWAY CO DEL	_	
		\$\$.	11/30/2017
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
8_	308 SHS GENERAL DYNAMICS CORP COM	_	
		\$ 63,396.	_11/30/2017
(a) No from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
9_	538 SHS CINNCINATI FINANCIAL CORP COM		
		\$ 40,253.	_11/30/2017
(a) No from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
10	510 SHS PAYCHEX INC COM		
		\$\$.	11/30/2017
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
	105 SHS BLACKROCK INC COM		-
		\$\$52,955.	11/30/2017
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
12_	986 SHS CISCO SYS INC COM	_	
		\$ 37,024.	_11/30/2017
	<u></u>	Sahadula B /Farm 01	00 000 E7 or 000 PE\ (2017

Name of organization
SUGAR FAMILY FOUNDATION
Employer identification number
47-3980241

Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed (a) No (d) FMV (or estimate) from Description of noncash property given Date received Part I (See instructions) 943 SHS INTEL CORP COM 13 42,211. 11/30/2017 (a) No (c) (b) FMV (or estimate) from Description of noncash property given Date received Part I (See instructions) 298 SHS DIAGEO PLC SPON ADR NEW 14 41,412. 11/30/2017 (a) No. (c) (b) (d) FMV (or estimate) from Description of noncash property given Date received Part I (See instructions) (a) No. (c) (d) (b) FMV (or estimate) from Description of noncash property given Date received (See instructions) Part I (c) (a) No. (b) (d) FMV (or estimate) from Description of noncash property given Date received Part I (See instructions) (a) No (c) (d) (b) FMV (or estimate) from Description of noncash property given Date received (See instructions) Part I

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

NET INVESTMENT INCOME	2,157	6,345.		12,217.	124.			11.			46,302.	
REVENUE AND EXPENSES PER BOOKS	2,157	6,345.	946.	12,217.	124.		12.	11.	3,023.	22,413.	47,248.	
DESCRIPTION	ISCT BEDORTED &S NONOHALTETED OFFICE	FOREIGN DIVIDENDS	NONDIVIDEND DISTRIBUTIONS	DOMESTIC DIVIDENDS	OTHER INTEREST	⊣	OID INCOME ON USGI	US GOVERNMENT INTEREST REPORTED AS QUALI	NONQUALIFIED FOREIGN DIVIDENDS	NONQUALIFIED DOMESTIC DIVIDENDS	TOTAL	

FORM 990PF, PART I - ACCOUNTING FEES

CHARITABLE PURPOSES	3,500.
ADJUSTED NET INCOME	NONE
NET INVESTMENT INCOME	NONE:===================================
REVENUE AND EXPENSES PER BOOKS	3,500.
	TOTALS
DESCRIPTION	TAX PREPARATION FEE

7

FORM 990PF, PART I - OTHER PROFESSIONAL FEES

CHARITABLE PURPOSES	3,054. 3,054.
NET INVESTMENT INCOME	4,581. 4,581. 9,162.
REVENUE AND EXPENSES PER BOOKS	7,636. 7,636.
NO.	FEES AS AGENT FEES AS AGENT TCTALS
DESCRIPTION	UST-MLT F UST-MLT F

 \sim

NET INVESTMENT	INCOME	508.		254.	762.
REVENUE AND EXPENSES	FEK BOOKS	508.	11,354.	17,444. 254.	29,560.
	DESCRIPTION	FOREIGN TAXES	EXCISE TAX - PRIOR YEAR	EXCISE IAX ESTIMATES FOREIGN TAXES ON NONQUALIFIED	TCTALS

EXPENSES))
OTHER	11 11 11 11
l	- - - -
Н	11
PART	***************************************
990PF,	
FORM	

CHARITABLE PURPOSES	10.	10.
NET INVESTMENT INCOME	150. 150. 64.	364.
REVENUE AND EXPENSES PER BOOKS	150. 150. 10. 64.	374.
		TOTALS
DESCRIPTION	OTHER INVESTMENT FEE OTHER INVESTMENT FEE STATE FILING FEE INVSTMT EXPENSE	

ហ

53

9

STATEMENT

- U.S. AND STATE OBLIGATIONS FORM 990PF, PART II

DESCRIPTION

BEGBALANCE

BEGINNING BOOK VALUE

44,988.

44,988.

TOTALS

GZW442 T92P 09/07/2018 08:58:21

FORM 990PF, PART II - OTHER INVESTMENTS

DESCRIPTION	COST/ FMV C OR F	BEGINNING BOOK VALUE	ENDING BOOK VALUE	ENDING FMV
921908844 VANGUARD DIVIDEND 7441K503 PRUDENTIAL JENNISON 29875E100 AMERICAN EURO PACIFI 461418287 ARISTOTLE/SAUL GLOBA 44134R834 HOTCHKIS & WILEY VAL 09252M83 BLACKROCK BOND FUND 73937B746 POWERSHARES FRW BANK 73937B746 POWERSHARES FTSE RAF 464286448 SHARES DJ EPAC SEL D 64286525 ISHARES DJ EPAC SEL D 00768D798 POPLAR FOREST PARTNE 00766V299 KOPERNIK GLOBAL ALL 921909768 VANGUARD TOTAL INTL 72201M867 PIMCO ALL ASSET 72201M879 PIMCO INCOME FUND CL 277902573 EATON VANCE RCHRD BR 64128K751 NEUBERGER BERMAN STR 56166Y404 TORTOISE MLP & 543916464 LORD ABBETT SHORT 46434V621 ISH TR CORE DIVID GR 97717X669 WISDOMTREE TR 92647K507 VICTORY MUNDER INTL 744413829 PRUDENTIAL ABSOLUTE 577130867 MATTHEWS ASIA PACIFI 92913L684 VOYA INTERMEDIATE 922908769 VANGUARD INDEX TR VA	${\color{blue} 0} {\color{blue} 0} {b$		61,729. 23,288. 14,778. 20,826. 42,164. 142,871. 22,261. 60,532. 31,402. 40,149. 40,142. 173,606. 23,918. 87,892. 24,796. 106,831. 59,979. 58,301. 19,639. 306,766.	70,226. 25,991. 16,774. 25,681. 49,490. 143,515. 34,231. 47,919. 67,078. 49,520. 226,950. 226,950. 27,538. 176,720. 27,538. 106,050. 70,019. 69,462. 23,421. 88,546. 22,216. 95,515. 368,334.

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	COST/ FMV	BEGINNING	ENDING	ENDING
DESCRIPTION	C OR F	BOOK VALUE	BOOK VALUE	FMV
	1 1 1 1 1 1 1 1	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	1 1 1 1 1 1	!
92189F106 VANECK VECTORS GOLD	υ		23,126.	25,796.
90386H404 LYRICAL US VALUE EOU	ט		29,577.	31,060.
	บ		78,866.	81,653.
	บ		24,248.	26,753.
	บ		15,281.	17,025.
76881N202 RIVERNORTH DOUBLE LI	ບ		131,411.	131,731.
	บ		45,502.	49,777.
BEGBALANCE	U	1,355,133.		
	TOTALS	1,355,133.	2,305,599.	2,504,684
	ii		** ** ** ** ** ** ** ** ** **	

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

COST BASIS ADJUSTMENT 2016 CHECKS CLEARED IN 2017

3,454. 10,000.

TOTAL

13,454. _____