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Form **990-PF** Department of the Treasury Internal Revenue Service

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.

▶ Information about Form 990-P F and its separate instructions is at www.irs.gov/form990pf.

OMB No 1545-0052 pen to Public Inspection

For	alen	dar year 2015 or tax year beginning		, and ending		
Nar	ne of	foundation			A Employer identification	number
S	HR:	INERS OF RHODE ISLAND C	HARITIES TRUS	ST	22-3191072	
Nun	ber ar	nd street (or P O box number if mail is not delivered to street	address)	Room/suite	B Telephone number	
0	NE	RHODES PLACE			(401)467-7	101
		own, state or province, country, and ZIP or foreign p	ostal code		C if exemption application is p	ending, check here
		NSTON, RI 02905				•
		all that apply: Initial return	Initial return of a fo	rmer public charity	D 1. Foreign organizations	check here
		Final return	Amended return			,
		Address change	Name change		Foreign organizations me check here and attach co	eting the 85% test,
H C	heck	type of organization: X Section 501(c)(3) ex			E If private foundation stat	
	_		Other taxable private founda	tion	under section 507(b)(1)	
I Fa		rket value of all assets at end of year J Accounti			F If the foundation is in a 6	
		· /	her (specify)		under section 507(b)(1)	
•		26,754,543. (Part I, colu	mn (d) must be on cash b	asis.)		(-),
	rt I	Analysis of Revenue and Expenses	(a) Revenue and	(b) Net investment	(c) Adjusted net	(d) Disbursements
		(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a))	expenses per books	income	income	for charitable purposes (cash basis only)
	1	Contributions, gifts, grants, etc., received	148,817.		N/A	
	2	Check if the foundation is not required to attach Sch B				
	3	Interest on savings and temporary cash investments				
	4	Dividends and interest from securities	1,494,505.	1,494,505.		STATEMENT 1
		Gross rents		-//		
	٠.	Net rental income or (loss)				
	_ `	Net gain or (loss) from sale of assets not on line 10	<70,820.	· >		
Jue	Ь	Gross sales price for all assets on line 8a 5,643,296.	110,0200		RECE!	/FD
Revenue	7	Capital gain net income (from Part IV, line 2)		0.	NEO-	
æ	-	Net short-term capital gain			0	l W
	9	Income modifications			(B) MAY 2 3	2016
	-	Gross sales less returns and allowances			63	X
		Less Cost of goods sold			OGDEN	LIT
		Gross profit or (loss)				
	11	Other income				
	12	Total, Add lines 1 through 11	1,572,502.	1,494,505.	•	
	13	Compensation of officers, directors, trustees, etc	0.	0.		0.
	14	Other employee salaries and wages				
es	162	Legal fees STMT 2	5,000.	0.		5,000.
ėŭ.	h	Accounting fees STMT 3	18,001.	1,800.		16,201.
Ϋ́C X	c	Other professional fees	20,70020			
- e	17	Interest				
\$₹	18	Taxes STMT 4	25,581.	0.		3,130.
<u> </u>	19	Depreciation and depletion	18,686.	0.		
Ę	20	Occupancy				
Ā	21	Travel, conferences, and meetings				
25	22	Printing and publications				
₹. p	23	Other expenses STMT 5	177,574.	0.		177,574.
## <u>*</u>	24	Total operating and administrative			1	
ر آرگو	- '	Pension plans, employee benefits Legal fees STMT 2 Accounting fees STMT 3 Other professional fees Interest Taxes STMT 4 Depreciation and depletion Occupancy Travel, conferences, and meetings Printing and publications Other expenses STMT 5 Total operating and administrative expenses. Add lines 13 through 23 Contributions, gifts, grants paid	244,842.	1,800.		201,905.
ŏ	25	Contributions, gifts, grants paid	1,590,535.			1,590,535.
	26	Total expenses and disbursements				
	-~	Add lines 24 and 25	1,835,377.	1,800.		1,792,440.
	27	Subtract line 26 from line 12:				
	i	Excess of revenue over expenses and disbursements	<262,875.	>		
	!	Net investment income (if negative, enter -0-)	1=0=,010	1,492,705.		
	1	Adjusted net income (if negative, enter -0-)			N/A	

Form **990-PF** (2015)

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For	m 99	0-PF (2015) SHRINERS OF RHODE ISLANI	CHARITIES TR	RUST 22-3	3191072 Page 2
Г	art	Balance Sheets Attached schedules and amounts in the description	Beginning of year	End of	
<u>.</u>	ui t	column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing	214,161.	140,217.	140,217.
	2	Savings and temporary cash investments	13,438.		
	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			
ş	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			
4	10a	Investments - U.S. and state government obligations			
	b	Investments - corporate stock STMT 6		15,992,526.	
	C	Investments - corporate bonds STMT 7	7,432,921.	6,237,274.	6,417,642.
	11	Investments - land, buildings, and equipment basis			
		Less accumulated depreciation			
	12	Investments - mortgage loans			
	13	Investments - other STMT 8	2,563,051.	2,462,291.	1,996,193.
	14	Land, buildings, and equipment: basis ► 177, 752.			
		Less accumulated depreciation STMT 9 103,537.	92,901.	74,215.	74,215.
	15	Other assets (describe ► INVESTMENT-ANNUITY)	100,000.	100,000.	74,215. 225,551.
	16	Total assets (to be completed by all filers - see the			
		instructions. Also, see page 1, item I)	25,269,398.	25,006,523.	26,754,543.
	17	Accounts payable and accrued expenses			
	18	Grants payable			
ģ	19	Deferred revenue			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
abi	21	Mortgages and other notes payable			
Ï	22	Other liabilities (describe ▶)			
	23	Total liabilities (add lines 17 through 22)	0.	0.	
*		Foundations that follow SFAS 117, check here			
	İ	and complete lines 24 through 26 and lines 30 and 31.			
ès	24	Unrestricted			
or Fund Balances	25	Temporarily restricted			
Bal	26	Permanently restricted			
pu		Foundations that do not follow SFAS 117, check here			
Ē		and complete lines 27 through 31.			
	27	Capital stock, trust principal, or current funds	0.	0.	
sets	28	Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.	
Net Assets	29	Retained earnings, accumulated income, endowment, or other funds	25,269,398.	25,006,523.	
let	30	Total net assets or fund balances	25,269,398.	25,006,523.	
_					
	31	Total liabilities and net assets/fund balances	25,269,398.	25,006,523.	
L	art	III Analysis of Changes in Net Assets of Fund Ba	aldi 1005		
1	Tota	inet assets or fund balances at beginning of year - Part II, column (a), line 3	30		
		st agree with end-of-year figure reported on prior year's return)		1	25,269,398.
2	•	r amount from Part I, line 27a		2	<262,875.>
		r increases not included in line 2 (itemize)	·	3	0.
		lines 1, 2, and 3		4	25,006,523.
5	Decr	eases not included in line 2 (itemize)	·	5	0.
		net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	lumn (b), line 30	6	25,006,523.
					Form 990-PF (2015)

	NERS OF RHODE I			S	TRU	ST '	2	2-319	1072	Page 3
(a) List and descri	be the kind(s) of property sold (e.gehouse; or common stock, 200 shs	.,real estate,		(b)	How ac - Purcl - Dona	Hase I ') Date a	acquired ay, yr.)	(d) Date (mo., da	
1a INVESTMENTS						P		·	•	
b				<u> </u>					<u> </u>	
<u>c</u>	· · · · · · · · · · · · · · · · · · ·			_						
<u>d</u>										
(e) Gross sales price	(f) Depreciation allowed (or allowable)		t or other basis xpense of sale			I		ain or (loss) (f) minus (
a 5,643,296.			5,714,11	6.					<70	820.
b										
С										
d									•	
Complete only for assets showing	gain in column (h) and owned by	the foundation	on 12/31/69			(1) (Paine /C	ol. (h) gaın	minue	
(i) F.M.V.as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Ex	cess of col. (i) col. (j), if any			còl. (i	c), but n	ot less thar (from col. (I	1 -0-) or	
a									<70	820.
b							·			
C										
d										
<u>e</u>				$\overline{}$						
2 Capital gain net income or (net cap	. (,,,		7 7	}	2				<70	. 820 ·
3 Net short-term capital gain or (loss If gain, also enter in Part I, line 8, c If (loss), enter -0- in Part I, line 8		ıd (6):		}	q			N/A		
Part V Qualification Un	der Section 4940(e) for	Reduced	Tax on Net	Inv	estm	nent Inco	me	14/11		
For optional use by domestic private for section 4940(d)(2) applies, leave this was the foundation liable for the section for the section for the section for the foundation does not qualify	s part blank. on 4942 tax on the distributable amy y under section 4940(e). Do not co	nount of any ye	ear in the base per	od?					Yes	X No
(a) Base period years	(b)			(c)				Dietrib	(d) ution ratio	
Calendar year (or tax year beginning		tributions	Net value of no			use assets	((col. (b) div	ided by col.	(c))
2014		0,091.				2,619.				51124
2013		4,908.				0,990.				57793
2012		5,109. 0,258.				<u>2,162.</u>				5793 <u>4</u> 58047
2011 2010		3,252.				<u>6,385.</u> 6,238.				57796
2010		7,2320		<u> </u>	, 10	0,230.	 			,,,,,
2 Total of line 1, column (d)							2		.29	2694
3 Average distribution ratio for the 5-	year base period - divide the total o	on line 2 by 5,	or by the number	of ye	ars					
the foundation has been in existence	ce if less than 5 years .						3		.05	<u> 8539</u>
4 Enter the net value of noncharitable	e-use assets for 2015 from Part X,	line 5					4	2	7,282	251.
5 Multiply line 4 by line 3							5		1,597	076.
6 Enter 1% of net investment income	e (1% of Part I, line 27b)						6		14	927.
7 Add lines 5 and 6							7		1,612	,003.
8 Enter qualifying distributions from							8		1,792	440.
If line 8 is equal to or greater than I See the Part VI instructions.	ine 7, check the box in Part VI, line	1b, and comp	lete that part usin	g a 1	% tax r	ate.				

	1990-PF (2015) SHRINERS OF RHODE ISLAND CHARITIES TRUST 22-3191			Page 4
	rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see i	nsuu	Cuo	15)
1a	Exempt operating foundations described in section 4940(d)(2), check here and enter "WA" on line 1.			
	Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)	1	4 0	27
þ	Domestic foundations that meet the section 4940(e) requirements in Part V, check here X and enter 1%	T	4,9	<u>27.</u>
	of Part I, line 27b			
	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-)	- 1	4 0	0.
3	Add lines 1 and 2	<u> </u>	4,9	
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)		4 0	0.
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-		4,9	<u>27.</u>
6	Credits/Payments:			
	2015 estimated tax payments and 2014 overpayment credited to 2015 6a 22,451.			
	Exempt foreign organizations - tax withheld at source 6b			
	Tax paid with application for extension of time to file (Form 8868)			
	Backup withholding erroneously withheld	_		
7	Total credits and payments. Add lines 6a through 6d	2	<u>2,4</u>	<u>51.</u>
8	Enter any penalty for underpayment of estimated tax. Check here X if Form 2220 is attached			
	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed			
10			<u>7,5</u>	<u>24.</u>
	Enter the amount of line 10 to be: Credited to 2016 estimated tax > 7,524 • Refunded > 11			0.
	rt VII-A Statements Regarding Activities		T	
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in	<u> </u>	Yes	
	any political campaign?	1a		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definition)?	1b		_X_
	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		
C	Did the foundation file Form 1120-POL for this year?	1c		X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:			
	(1) On the foundation. \triangleright \$ 0. (2) On foundation managers. \triangleright \$ 0.			
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation			
	managers.▶\$ 0.			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		X
	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		X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		X
	If "Yes," has it filed a tax return on Form 990-T for this year?	4b		
	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		X
•	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:			
٠	By language in the governing instrument, or			
	By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law			
	remain in the governing instrument?	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	Х	
'	bid the foundation have at least \$0,000 in assets at any time during the year? If I conplete I are II, con (c), and I are NV	'		
g a	Enter the states to which the foundation reports or with which it is registered (see instructions)			
υa	RI			
h	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)			
Ü	of each state as required by General Instruction G? If "No," attach explanation	8b	х	
n	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar	- 00	- 43	<u> </u>
9	year 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)? If "Yes," complete Part XIV	9		X
40	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses	10		X
<u> 10</u>	DID ONLY PERSONS DECOMINE SUDSTAINTIAL CONTINUATION OF THE LAX YEAR ! IT "YES," attach a schedule listing their names and addresses	ΙU		

			<u>22-31910</u> ued)	72 Page 6	
 Part VII-B Statements Regarding Activities for Which F 5a During the year did the foundation pay or incur any amount to: Carry on propaganda, or otherwise attempt to influence legislation (section 2) Influence the outcome of any specific public election (see section 4955); of any voter registration drive? Provide a grant to an individual for travel, study, or other similar purposes? Provide a grant to an organization other than a charitable, etc., organization 4945(d)(4)(A)? (see instructions) Provide for any purpose other than religious, charitable, scientific, literary, the prevention of cruelty to children or animals? If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und section 53.4945 or in a current notice regarding disaster assistance (see instruorganizations relying on a current notice regarding disaster assistance check here the answer is "Yes" to question 5a(4), does the foundation claim exemption for expenditure responsibility for the grant? 	4945(e))? If to carry on, directly or indirectly or indire	ectly, Ye Ye Ye Ye Ye Ye Ye Ye Tor Regulations	s X No	72 Page 6	
 If "Yes," attach the statement required by Regulations section 53.4948 6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay personal benefit contract? b Did the foundation, during the year, pay premiums, directly or indirectly, on a page of "Yes" to 6b, file Form 8870. 	pay premiums on	☐ Ye	s X No	6b X	
7a At any time during the tax year, was the foundation a party to a prohibited tax s b If "Yss," did the foundation receive any proceeds or have any net income attributed the foundation of th	table to the transaction?			7b . ,	
Paid Employees, and Contractors 1 List all officers, directors, trustees, foundation managers and their	nomponention				
(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	
A SHEFFIELD REYNOLDS	TREASURER				
425 MESHANTICUT VALLEY PARKWAY APT 10 CRANSTON, RI 02920	0.00	0.	0.	0.	
LEON KNUDSEN	TRUSTEE				
348 PLAINFIELD PIKE GREENE, RI 02827	0.00	0.	0.	0.	
	TRUSTEE	0.	0.	•	
12 HYBRID DR	INODILL	,			
CRANSTON, RI 02920	0.00	0.	0.	0.	
	TRUSTEE				
109 FRANCIS AVE					
PAWTUCKET, RI 02860	0.00	0.	0.	0.	
2 Compensation of five highest-paid employees (other than those inc		enter "NONE."	(-7 n -		,
(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			Form	990-PF (2015)	-

Total. Add lines 1 through 3

SHRINERS OF RHODE ISLAND CHARITIES TRUST 22-3191072 Page 8 Form 990-PF (2015) Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions) Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes: 27,513,808. a Average monthly fair market value of securities 1a 1b 183,909. b Average of monthly cash balances c Fair market value of all other assets 1c 27,697,717. 1đ d Total (add lines 1a, b, and c) e Reduction claimed for blockage or other factors reported on lines 1a and 0. 1c (attach detailed explanation) 1e Acquisition indebtedness applicable to line 1 assets 697 Subtract line 2 from line 1d 3 3 Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions) 4 Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4 5 282,251 Minimum investment return. Enter 5% of line 5 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.) 364,113. Minimum investment return from Part X, line 6 14,927. 2a Tax on investment income for 2015 from Part VI, line 5 b Income tax for 2015. (This does not include the tax from Part VI.) 14.927. 2c c Add lines 2a and 2b 349,186. Distributable amount before adjustments. Subtract line 2c from line 1 3 3 4 0. Recoveries of amounts treated as qualifying distributions 186. 5 5 Add lines 3 and 4 0. 6 Deduction from distributable amount (see instructions) 349 186. Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1 Part XII Qualifying Distributions (see instructions) Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes: 1,792,440. a Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26 1a 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 Amounts set aside for specific charitable projects that satisfy the: 3 a Suitability test (prior IRS approval required) 3a b Cash distribution test (attach the required schedule) 3b 792,440. Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4 4

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

Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment

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income. Enter 1% of Part I, line 27b

Adjusted qualifying distributions Subtract line 5 from line 4

4940(e) reduction of tax in those years.

Page 9

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2014	(c) 2014	(d) 2015
1 Distributable amount for 2015 from Part XI, line 7				1,349,186.
2 Undistributed income, if any, as of the end of 2015				1,343,100.
a Enter amount for 2014 only			0.	
b Total for prior years:				
y rotal for prior yours,		0.		
3 Excess distributions carryover, if any, to 2015:		0.		
a From 2010 213, 340.				
b From 2011 236, 339.				
c From 2012 245, 721.				
d From 2013 254, 726.				
e From 2014 371, 018.				
f Total of lines 3a through e	1,321,144.			
4 Qualifying distributions for 2015 from	1,521,144			
Part XII, line 4: ▶\$ 1,792,440.				
a Applied to 2014, 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		<u> </u>		
(Election required - see instructions)	0.			
d Applied to 2015 distributable amount	0.			1,349,186.
e Remaining amount distributed out of corpus	443,254.			1,343,100.
_ ' '	0.			0.
Excess distributions carryover applied to 2015 (If an amount appears in column (d), the same amount must be shown in column (a))	0.			
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	1,764,398.			
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	······································	0.		
amount - see instructions		0.		
e Undistributed income for 2014. Subtract line				
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2015. Subtract		<u> </u>	0.	
lines 4d and 5 from line 1. This amount must				
be distributed in 2016				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 2010	0.			
not applied on line 5 or line 7	213,340.			
· ·	213,340.			
9 Excess distributions carryover to 2016.	1,551,058.			
Subtract lines 7 and 8 from line 6a	T,331,030.			
10 Analysis of line 9:				
a Excess from 2011 236, 339.			1	
b Excess from 2012 245,721.				
c Excess from 2013 254,726.				
d Excess from 2014 371, 018.				
e Excess from 2015 443, 254.			I	L

523581 11-24-15

			RITIES TRUST		.91072 Page 10
Part XIV Private Operating F	oundations (see in	structions and Part V	II-A, question 9)	N/A	
1 a If the foundation has received a ruling o	r determination letter tha	t it is a private operating			
foundation, and the ruling is effective fo	r 2015, enter the date of	the ruling	▶		
b Check box to indicate whether the found	ation is a private operati	ng foundation described	in section	4942(j)(3) or 4	942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years		
income from Part I or the minimum	(a) 2015	(b) 2014	(c) 2013	(d) 2012	(e) Total
investment return from Part X for					
each year listed					1
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				1	
•					
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:				İ	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 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 Info	rmation (Comple	ete this part only	if the foundation	had \$5,000 or m	ore in assets
at any time during t	•	•		•	
1 Information Regarding Foundation	n Managers:				
a List any managers of the foundation wh	=	than 2% of the total cor	itributions received by the	foundation before the clo	ice of any tay
year (but only if they have contributed in			ithibutions received by the	Houngation before the cit	se of any tax
NONE		h			
 b List any managers of the foundation who other entity) of which the foundation has 			(or an equally large porti	on of the ownership of a p	earthership or
	s a 1070 or greater intere				
NONE					
2 Information Regarding Contributi		·	-		
Check here ▶ 📖 if the foundation o					
the foundation makes gifts, grants, etc.	(see instructions) to indi	viduals or organizations	under other conditions, c	omplete items 2a, b, c, an	d d.
a The name, address, and telephone num	ber or e-mail address of	the person to whom app	lications should be addre	ssed:	
SEE STATEMENT 10					
b The form in which applications should b	e submitted and informa	ation and materials they	should include:		
c Any submission deadlines:					
o Any submission deaunities.					
d Any rectrictions or limitations on averd	cuch as by assersable	al areae charitable fields	kinde of inctitutions or	other factors:	
d Any restrictions or limitations on awards	o, out it as by yeograpilio	ai ai cas, ciidi kayic ilcius	o, kiilus oi ilistitutioiis, Vi	טנווטו ומטנטוס.	
					5 000 DE (0045)

SHRINERS OF RHODE ISLAND CHARITIES TRUST 22-3191072 Page 11 Form 990-PF (2015) Part XV Supplementary Information (continued) Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Purpose of grant or contribution Foundation show any relationship to status of Amount any foundation manager Name and address (home or business) recipient or substantial contributor a Paid during the year NONE NONE SEE ATTACHED LIST ONE RHODES PLACE CRANSTON, RI 02905 5,179. PATIENT TRANSPORT NONE NONE SEE ATTACHED LIST ONE RHODES PLACE MEDICAL EXPENSES 684,241, CRANSTON, RI 02905 SEE ATTACHED LIST NONE NONE CHARITABLE CONTRIBUTIONS ONE RHODES PLACE CRANSTON, RI 02905 901,115. ▶ 3a 1,590,535. Total **b** Approved for future payment NONE

523611 11-24-15 Form **990-PF** (2015)

▶ 3b

Total

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated.	Unrelated	business income		ed by section 512, 513, or 514	(e)
	(a) Business	(b) Amount	(C) Exclu- sion	(d) Amount	Related or exempt function income
1 Program service revenue:	code	7 WII OUIT	code	Amount	Tunction meetic
<u>a</u>	-				
b					
<u> </u>					
0	·				
e					
g Fees and contracts from government agencies					
g Fees and contracts from government agencies 2 Membership dues and assessments					
3 Interest on savings and temporary cash					
investments	1				
4 Dividends and interest from securities			14	1,494,505.	
5 Net rental income or (loss) from real estate:				1,454,3031	
a Debt-financed property					
b Not debt-financed property			+		
6 Net rental income or (loss) from personal					
property					
7 Other investment income					
8 Gain or (loss) from sales of assets other					
than inventory			18	<70,820.	_
9 Net income or (loss) from special events			1 1 1	<70,020.	
10 Gross profit or (loss) from sales of inventory	 		1		
11 Other revenue:					
	1 1				
	-				
b	-		 		
d	-				
d					
12 Subtotal. Add columns (b), (d), and (e)	_		. 	1,423,685.	0
13 Total. Add line 12, columns (b), (d), and (e)	<u> </u>		<u> </u>	13	
(See worksheet in line 13 instructions to verify calculations.	1			10	1/423/003

Part XVI-B	Relationship	of Activities	to the Accom	plishment o	of Exempt	Purposes
------------	--------------	---------------	--------------	-------------	-----------	----------

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).

SHRINERS OF RHODE ISLAND CHARITIES TRUST Form 990-PF (2015) 22-3191072 Information Regarding Transfers To and Transactions and Relationships With Noncharitable **Exempt Organizations** Yes No Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations? Transfers from the reporting foundation to a noncharitable exempt organization of: X (1) Cash 1a(1) Х (2) Other assets 1a(2) b Other transactions: X (1) Sales of assets to a noncharitable exempt organization 1b(1) Х 1b(2) (2) Purchases of assets from a noncharitable exempt organization X (3) Rental of facilities, equipment, or other assets 1b(3) X 1b(4) (4) Reimbursement arrangements X 1b(5) (5) Loans or loan guarantees X (6) Performance of services or membership or fundraising solicitations 1b(6) c Sharing of facilities, equipment, mailing lists, other assets, or paid employees 1c 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. (b) Amount involved (c) Name of noncharitable exempt organization (a) Line no (d) Description of transfers, transactions, and sharing arrangements SEE STATEMENT 11 RHODE ISLAND SHRINERS 1C 149,348.A.A.O.N.M.S. 2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described X Yes in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? b If "Yes," complete the following schedule. (c) Description of relationship (b) Type of organization (a) Name of organization RHODE ISLAND SHRINERS SEE STATEMENT 12 501(C)10 A.A.O.N.M.S. Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge May the IRS discuss this return with the preparer shown below (see instr.)? ation of preparer (other than taxpayer) is based on all information of which preparer has any knowledge Sign Here and TRUSTEE X Yes No Signature of officer or trustee Title Date PTIN Check [Date Print/Type preparer's name Preparer's signature self-employed GREGORY PORCARO,

Form 990-PF (2015)

P00633303

(401)739-9250

Firm's EIN $\triangleright 05 - 0405576$

Paid

Preparer

Use Only

GREGORY PORCARO,

Firm's name ► OTRANDO, PORCARO & ASSOCIATES, LTD.

WARWICK, RI 02886

04/22/16

CPA/ABV

MST

Firm's address ▶ 2258 POST ROAD

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. Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at www.lrs.gov/form990 .

OMB No 1545-0047

Name of the organization

Employer identification number

	SHRINERS OF RHODE ISLAND CHARITIES TRUST	22-3191072					
Organization type (chec	ck 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	X 501(c)(3) exempt private foundation						
	4947(a)(1) nonexempt charitable trust treated as a private foundation						
	501(c)(3) taxable private foundation						
Note. Only a section 50 General Rule X For an organiza	on is covered by the General Rule or a Special Rule . 11(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Ru ation filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling	g \$5,000 or more (in money or					
	any one contributor Complete Parts I and II. See instructions for determining a contributor	's total contributions.					
Special Rules							
sections 509(a) any one contrib	ation described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support (1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a butor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amout PEZ, line 1. Complete Parts I and II.	, or 16b, and that received from					
year, total cont	ation described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from tributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or eductor of cruelty to children or animals. Complete Parts I, II, and III	-					
year, contributi is checked, eni purpose Do no	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 Do not 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						
but it must answer "No	on that is not covered by the General Rule and/or the Special Rules does not file Schedule " on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its F neet 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) (2015)

Name of organization

Employer identification number

SHRINERS OF RHODE ISLAND CHARITIES TRUST

22-3191072

Part I Con	tributors (see instructions	. Use duplicate copies of Part I if additional space is needed.
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(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
1	ABBEY FRANCIS LAWTON ONE CITIZENS PLAZA PROVIDENCE, RI 02903	\$133,702.	Person X Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	HENRY STONE & AF PRESTON 225 FRANKLIN STREET BOSTON, MA 02110	\$ 3,108.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3	PAULINE PATT 225 FRANKLIN STREET BOSTON, MA 02110	\$ <u>10,224.</u>	Person X 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)

Name of organization

Employer identification number

SHRINERS OF RHODE ISLAND CHARITIES TRUST

22-3191072

(a) No. (b) The scription of noncash properties of the sc	
No. from Part I (a) No. from Part I (a) No. from Part I (a) No. from Description of noncash properties and properties are a second properties and properties are a second properties and properties are a second properties and properties are a second properties and properties are a second prop	
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No. (b) from Description of noncash pr	
No. (b) from Description of noncash pr	\$
	\$
(a) No. (b) from Description of noncash pr	

FORM 990-PF	DIVIDENDS	AND INTER	EST FROM SECUF	RITIES ST	PATEMENT 1	
SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDENDS	(A) REVENUE S PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	
UBS FINANCIAL SERVICES INC	1,494,505.	, (0. 1,494,505.	1,494,505.		
TO PART I, LINE 4	1,494,505.		1,494,505.	1,494,505.		
FORM 990-PF		LEGAL	FEES	នា	PATEMENT 2	
DESCRIPTION		(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
LEGAL	_	5,000.	0.		5,000.	
TO FM 990-PF, PG 1,	LN 16A	5,000.	0.		5,000.	
FORM 990-PF		ACCOUNTI	NG FEES	Sī	PATEMENT 3	
DESCRIPTION		(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
ACCOUNTING	_	18,001.	1,800.		16,201.	
TO FORM 990-PF, PG	1, LN 16B	18,001.	1,800.		16,201.	
FORM 990-PF		TAX	ES	SI	CATEMENT 4	
DESCRIPTION		(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
FEDERAL EXCISE TAX FOREIGN TAX EXPENSE		22,451. 3,130.	0.		0. 3,130.	
TO FORM 990-PF, PG	1, LN 18	25,581.	0.		3,130.	

FORM 990-PF	OTHER E	XPENSES			STATEMENT	5
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVE MENT INC		(C) ADJUSTEI NET INCOM	-	
MANAGEMENT FEES MEETINGS OFFICE EXPENSES INVESTMENT FEES	149,348. 5,832. 21,202. 1,192.		0. 0. 0.		149,3 5,8 21,2 1,1	32. 02.
TO FORM 990-PF, PG 1, LN 23	177,574.		0.		177,5	74.
FORM 990-PF	CORPORAT	E STOCK			STATEMENT	6
DESCRIPTION			вос	K VALUE	FAIR MARKE VALUE	T
		-	15	,992,526.	17,900,7	25.
TOTAL TO FORM 990-PF, PART II	, LINE 10B	=	15	,992,526.	17,900,7	25.
FORM 990-PF	CORPORAT	E BONDS			STATEMENT	7
DESCRIPTION			вос	K VALUE	FAIR MARKE	т
		-	6	5,237,274.	6,417,6	42.
TOTAL TO FORM 990-PF, PART II	, LINE 10C	=	6	5,237,274.	6,417,6	42.
FORM 990-PF	OTHER INV	ESTMENTS			STATEMENT	8
DESCRIPTION		LUATION ETHOD	вос	K VALUE	FAIR MARKE	т
	_	COST	2	2,462,291.	1,996,1	93.
TOTAL TO FORM 990-PF, PART II	I, LINE 13	-	2	2,462,291.	1,996,1	93.

FORM 990-PF DEPRECIATION OF	ASSETS NOT HELD FOR	INVESTMENT	STATEMENT 9
DESCRIPTION	COST OR OTHER BASIS	ACCUMULATED DEPRECIATION	BOOK VALUE
VARIOUS OFFICE EQUIPMENT	4,332.	4,332.	0.
IBM WHEELWRITER 1000	525.	525.	0.
OKIDATA DOT MATRIX	779.	779.	0.
IBM WHEELWRITER 3000	870.	870.	0.
VARIOUS COMPUTERS	19,037.	19,037.	0.
LAND	45,300.	0.	45,300.
LAPTOP	1,750.	1,750.	0.
SOFTWARE	1,100.	1,100.	0.
VARIOUS COMPUTER EQUIPMENT	1,252.	1,252.	0.
LAPTOP COMPUTER FOR RECORDER	1,450.	1,450.	0.
NEW COMPUTER	680.	680.	0.
LAND	5,000.	0.	5,000.
2010 CHRYSLER VAN	27,067.	27,067.	0.
2013 CHRYSLER T&C	•	•	
2C4RC1BGHDR614124	35,981.	23,387.	12,594.
2013 CHRYSLER T&C		• • • •	,
2C4RC1BG2DR632573	31,889.	20,728.	11,161.
COMPUTER AND PRINTER	740.	580.	160.
TOTAL TO FM 990-PF, PART II, I	LN 14 177,752.	103,537.	74,215.

FORM 990-PF GRANT APPLICATION SUBMISSION INFORMATION STATEMENT 10 PART XV, LINES 2A THROUGH 2D

NAME AND ADDRESS OF PERSON TO WHOM APPLICATIONS SHOULD BE SUBMITTED

A SHEFFIELD REYNOLDS TREASURER C/O PALESTINE TEMPLE CHARITIES TRUST ONE RHODES PLACE CRANSTON, RI 02905

TELEPHONE NUMBER NAME OF GRANT PROGRAM

401 467 7100

NONE

FORM AND CONTENT OF APPLICATIONS

A WRITTEN REQUEST FROM THE INDIVIDUAL OR ORG. TO THE BOARD WITH MED INFO

ANY SUBMISSION DEADLINES

NONE

RESTRICTIONS AND LIMITATIONS ON AWARDS

CHARITABLE RELIEF IS GRANTED UPON BOARD APPROVAL OF REQUEST

990-PF INVOLVEMENT WITH NONCHARITABLE ORGANIZATIONS STATEMENT 11 PART XVII, LINE 1, COLUMN (D)

NAME OF NONCHARITABLE EXEMPT ORGANIZATION

RHODE ISLAND SHRINERS A.A.O.N.M.S.

DESCRIPTION OF TRANSFERS, TRANSACTIONS, AND SHARING ARRANGEMENTS

MANAGEMENT FEES/ SHARING OF ASSETS

990-PF AFFILIATION WITH TAX-EXEMPT ORGANIZATIONS PART XVII, LINE 2, COLUMN (C)

STATEMENT 12

NAME OF AFFILIATED OR RELATED ORGANIZATION

RHODE ISLAND SHRINERS A.A.O.N.M.S.

DESCRIPTION OF RELATIONSHIP WITH AFFILIATED OR RELATED ORGANIZATION

COMMON DIRECTORS

2015 DEPRECIATION AND AMORTIZATION REPORT

FO	99 MX	FORM 990-PF PAGE 1				ŀ		990-PF	-		i					٠,
∢ ∵	Asset No	Description	Date Acquired	Method	Lıfe	C Line	Unadjusted Cost Or Basis	Bus Sectio	Section 179 Re Expense	Reduction In Bæis	Bæis For Depreciation	Beginning Accumulated Depreciation	Curent Sec 179 Expense	Curent Year Deduction	Ending Accumulated Depreciation	
		OFFICE EQUIPMENT														<u>' ' '</u>
	-	VARIOUS OFFICE EQUIPMENT	11/21/94	SL	00.9	16	4,332.				4,332.	4,332.		0	4,332.	٠, ۲
	7	IBM WHEELWRITER 1000	02/15/95	SL	5.00	16	525.				525.	525.		0	525.	
	m	OKIDATA DOT MATRIX	06/12/95	SL	5.00	16	779.				779.	779.		0	779.	
	4	IBM WHEELWRITER 3000	12/19/97	SL	5.00	16	870.				870.	870.		0	870.	
		* 990-PF PG 1 TOTAL - OFFICE EQUIPMENT					6,506.				6,506.	6,506.		0	.905,9	
		COMPUTER EQUIPMENT		•												
	Ŋ	VARIOUS COMPUTERS	12/31/91	SL	5.00	16	19,037.				19,037.	19,037.		0	19,037.	
	17	17 LAPTOP	07/01/03	SL	5.00		1,750.				1,750.	1,750.		0	1,750.	
	18	SOFTWARE	09/15/03	SL	5.00	16	1,100.				1,100.	1,100.		0.	1,100.	
	70	VARIOUS COMPUTER EQUIPMENT	08/12/05	SL	5.00	91	1,252.				1,252.	1,252.		0	1,252.	
	21	LAPTOP COMPUTER FOR RECORDER	02/27/06	SL	5.00	19	1,450.				1,450.	1,450.		0	1,450.	
	23	NEW COMPUTER	02/21/07	SL	5.00	16	680.				680.	680.		o	680.	4
	29	ပ္ပ	02/06/12	SL	5.00	16	740.				740.	432.		148.	580.	
		* 990-PF PG 1 TOTAL - COMPUTER EQUIPMENT					26,009.				26,009.	25,701.		148.	25,849.	Ł
		MOTOR VEHICLES										,				
	26	2010 CHRYSLER VAN	12/14/10	SL	5.00	16	27,067.				27,067.	22,103.		4,964.	27,067.	
	27	2013 CHRYSLER T&C 2C4RC1BGHDR614124	10/03/12	SL	5.00		35,981.				35,981.	16,191.		7,196.	23,387.	
528 04-	528111 04-01-15						(D) - Asset disposed	pesoc		*	TC, Salvage,	Bonus, Comm	nercial Revita	* ITC, Salvage, Bonus, Commercial Revitalization Deduction, GO Zone	tion, GO Zone	a -

2015 DEPRECIATION AND AMORTIZATION REPORT

	Ending Accumulated Depreciation	20,728.	71,182.				0	103,537.	
-	Curent Year Deduction	6,378.	18,538.		0	0	0	18,686.	
-	Curent Sec 179 Expense								
	Beginning Accumulated Depreciation	14,350.	52,644.				0	84,851,	
	Bæis For Depreciation	31,889.	94,937.		45,300.	5,000.	50,300.	177,752,	
	Reduction In Basis								
 	Section 179 Expense								
990-PF	Bus % Excl								
	Unadjusted Cost Or Bosis	31,889.	94,937.		45,300.	5,000.	50,300.	177,752.	
-	No c >	176							
f	Life	5.00							
ŀ	Method	SL			ы	ы			7
	Date Acquired N	10/13/12			01/01/88	11/01/09			
FORM 990-PF PAGE 1	Description	2013 CHRYSLER T&C 2C4RC1BG2DR632573	* 990-PF PG 1 TOTAL - MOTOR VEHICLES	LAND	14 LAND	25 LAND	* 990-PF PG 1 TOTAL - LAND	* GRAND TOTAL 990-PF PG 1	
ORM 95	Asset No	28			14	25			

(D) - Asset disposed

* ITC, Salvage, Bonus, Commercial Revitalization Deduction, GO Zone