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

OMB No 1545-0052
2015
Open to Public Inspection

For calendar year 2015, or tax year beginning 01-01-2015 , and ending 12-31-2015

Name of foundation THE BUCCINO FOUNDATION C/O GERALD P BUCCINO		A Employer identification number 36-3743267
Number and street (or P O box number if mail is not delivered to street address) 14483 MARSALA WAY	Room/suite	B Telephone number (see instructions) (917) 991-3410
City or town, state or province, country, and ZIP or foreign postal code NAPLES, FL 34109		C If exemption application is pending, check here <input type="checkbox"/>
G Check all that apply <input type="checkbox"/> Initial return <input type="checkbox"/> Initial return of a former public charity <input type="checkbox"/> Final return <input type="checkbox"/> Amended return <input type="checkbox"/> Address change <input type="checkbox"/> Name change		D 1. Foreign organizations, check here <input type="checkbox"/> 2. Foreign organizations meeting the 85% test, check here and attach computation <input type="checkbox"/>
H Check type of organization <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		E If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/>
I Fair market value of all assets at end of year (from Part II, col (c), line 16) ▶ \$ 963,623	J Accounting method <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____ (Part I, column (d) must be on cash basis)	F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/>

Part I Analysis of Revenue and Expenses <i>(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions))</i>		Revenue and expenses per books (a)	Net investment income (b)	Adjusted net income (c)	Disbursements for charitable purposes (d) (cash basis only)
Revenue	1 Contributions, gifts, grants, etc , received (attach schedule)	61,388			
	2 Check <input type="checkbox"/> if the foundation is not required to attach Sch B				
	3 Interest on savings and temporary cash investments				
	4 Dividends and interest from securities	7,599	7,599		
	5a Gross rents				
	b Net rental income or (loss) _____				
	6a Net gain or (loss) from sale of assets not on line 10	27,963			
	b Gross sales price for all assets on line 6a 219,464				
	7 Capital gain net income (from Part IV, line 2)				
	8 Net short-term capital gain				
	9 Income modifications				
	10a Gross sales less returns and allowances				
b Less Cost of goods sold					
c Gross profit or (loss) (attach schedule)					
11 Other income (attach schedule)	5,447	5,447			
12 Total. Add lines 1 through 11	102,397	13,046			
Operating and Administrative Expenses	13 Compensation of officers, directors, trustees, etc				
	14 Other employee salaries and wages				
	15 Pension plans, employee benefits				
	16a Legal fees (attach schedule).	1,824	1,824		
	b Accounting fees (attach schedule).	22	22		
	c Other professional fees (attach schedule)	8,040	8,040		
	17 Interest				
	18 Taxes (attach schedule) (see instructions)				
	19 Depreciation (attach schedule) and depletion				
	20 Occupancy				
	21 Travel, conferences, and meetings	24,736	24,736		
	22 Printing and publications				
23 Other expenses (attach schedule).	1,895	1,895			
24 Total operating and administrative expenses. Add lines 13 through 23	36,517	36,517		0	
25 Contributions, gifts, grants paid	122,488			122,488	
26 Total expenses and disbursements. Add lines 24 and 25	159,005	36,517		122,488	
27 Subtract line 26 from line 12					
a Excess of revenue over expenses and disbursements	-56,608				
b Net investment income (if negative, enter -0-)		0			
c Adjusted net income (if negative, enter -0-)					

Part II Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)		Beginning of year	End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value
Assets	1 Cash—non-interest-bearing	14,890	8,295	
	2 Savings and temporary cash investments	7,592	2,256	
	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 (attach schedule) (see instructions).			
	7 Other notes and loans receivable (attach schedule) ▶ _____ 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 (attach schedule)			
	b Investments—corporate stock (attach schedule)	574,144	528,676	963,623
	c Investments—corporate bonds (attach schedule)			
	11 Investments—land, buildings, and equipment basis ▶ _____ Less accumulated depreciation (attach schedule) ▶ _____			
	12 Investments—mortgage loans			
	13 Investments—other (attach schedule)			
	14 Land, buildings, and equipment basis ▶ _____ Less accumulated depreciation (attach schedule) ▶ _____			
15 Other assets (describe ▶ _____)				
16 Total assets (to be completed by all filers—see the instructions Also, see page 1, item I)	596,626	539,227	963,623	
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 (attach schedule).			
	22 Other liabilities (describe ▶ _____)			
	23 Total liabilities (add lines 17 through 22)		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				
28 Paid-in or capital surplus, or land, bldg, and equipment fund				
29 Retained earnings, accumulated income, endowment, or other funds	596,626	539,227		
30 Total net assets or fund balances (see instructions)	596,626	539,227		
31 Total liabilities and net assets/fund balances (see instructions)	596,626	539,227		

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	596,626
2	Enter amount from Part I, line 27a	2	-56,608
3	Other increases not included in line 2 (itemize) ▶ _____	3	
4	Add lines 1, 2, and 3	4	540,018
5	Decreases not included in line 2 (itemize) ▶ _____	5	791
6	Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30	6	539,227

Part IV Capital Gains and Losses for Tax on Investment Income

(a) List and describe the kind(s) of property sold (e.g., 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			
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) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	(l) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
a			
b			
c			
d			
e			

2 Capital gain net income or (net capital loss)	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) (see instructions) 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 does not qualify under section 4940(e) Do not complete this part

1 Enter the appropriate amount in each column for each year, see 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))
2014	96,691	1,043,133	0.092693
2013	61,714	930,434	0.066328
2012	38,600	779,002	0.049551
2011	25,750	770,509	0.033419
2010	35,725	752,875	0.047451

2 Total of line 1, column (d).	2 0.289442
3 Average distribution ratio for the 5-year base period—divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years	3 0.057888
4 Enter the net value of noncharitable-use assets for 2015 from Part X, line 5.	4 1,021,977
5 Multiply line 4 by line 3.	5 59,160
6 Enter 1% of net investment income (1% of Part I, line 27b).	6
7 Add lines 5 and 6.	7 59,160
8 Enter qualifying distributions from Part XII, line 4.	8 122,488

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 page 18 of the instructions)

Table with 11 rows for excise tax calculation. Includes sections 1a through 11 with descriptions of tax components and a grid for credits/payments (6a-6d).

Part VII-A Statements Regarding Activities

Table with 10 rows for activity statements. Includes questions 1a through 10 regarding political activities, tax returns, and substantial contributors.

Part VII-A Statements Regarding Activities (continued)

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		No
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		No
13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ▶N/A	13	Yes	
14 The books are in care of ▶GERALD P BUCCINO Telephone no ▶(917) 991-3410 Located at ▶14483 MARSALA WAY NAPLES FL ZIP+4 ▶34109			
15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 —Check here ▶ <input type="checkbox"/>	15		
16 At any time during calendar year 2015, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? See instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) If "Yes", enter the name of the foreign country ▶	16	Yes	No

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.

		Yes	No
1a During the year did the foundation (either directly or indirectly) (1) Engage in the sale or exchange, or leasing of property with a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (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). <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
b If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)? <input type="checkbox"/> Organizations relying on a current notice regarding disaster assistance check here. ▶ <input type="checkbox"/>	1b		
c Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2015?	1c		
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)) a At the end of tax year 2015, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2015? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "Yes," list the years ▶ 20____, 20____, 20____, 20____ b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (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). c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here ▶ 20____, 20____, 20____, 20____			
3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No b If "Yes," did it have excess business holdings in 2015 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (<i>Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2015</i>).	3b		
4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		No
b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2015?	4b		No

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

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))? Yes No

(2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive? Yes No

(3) Provide a grant to an individual for travel, study, or other similar purposes? Yes No

(4) Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? (see instructions). Yes 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? Yes 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)? Yes No **5b**

Organizations relying on a current notice regarding disaster assistance check here.

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? Yes No

If "Yes," attach the statement required by Regulations section 53.4945-5(d)

6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? Yes No

b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? Yes No **6b** **No**

If "Yes" to 6b, file Form 8870

7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? Yes No

b If yes, did the foundation receive any proceeds or have any net income attributable to the transaction? Yes No **7b**

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors

1 List all officers, directors, trustees, foundation managers and their compensation (see instructions).

(a) Name and address	Title, and average hours per week (b) devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	Expense account, (e) other allowances
GERALD P BUCCINO 14483 MARSALA WAY NAPLES, FL 34109	PRESIDENT 1 00	0	0	0

2 Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, enter "NONE."

(a) Name and address of each employee paid more than \$50,000	Title, and average hours per week (b) devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	Expense account, (e) other allowances
NONE				

Total number of other employees paid over \$50,000.

Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)

Part VIII

3 Five highest-paid independent contractors for professional services (see instructions). If none, enter "NONE".

(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		

Total number of others receiving over \$50,000 for professional services. ▶

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.	Expenses
1	
2	
3	
4	

Part IX-B Summary of Program-Related Investments (see instructions)

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1 N/A	
2	
All other program-related investments. See instructions.	
3	

Total. Add lines 1 through 3 ▶

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	1,001,384
b	Average of monthly cash balances.	1b	36,156
c	Fair market value of all other assets (see instructions).	1c	0
d	Total (add lines 1a, b, and c).	1d	1,037,540
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation).	1e	
2	Acquisition indebtedness applicable to line 1 assets.	2	
3	Subtract line 2 from line 1d.	3	1,037,540
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see instructions).	4	15,563
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	1,021,977
6	Minimum investment return. Enter 5% of line 5.	6	51,099

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	51,099
2a	Tax on investment income for 2015 from Part VI, line 5.	2a	
b	Income tax for 2015 (This does not include the tax from Part VI).	2b	
c	Add lines 2a and 2b.	2c	
3	Distributable amount before adjustments Subtract line 2c from line 1.	3	51,099
4	Recoveries of amounts treated as qualifying distributions.	4	
5	Add lines 3 and 4.	5	51,099
6	Deduction from distributable amount (see instructions).	6	
7	Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1.	7	51,099

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	122,488
b	Program-related investments—total from Part IX-B.	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc , purposes.	2	
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	122,488
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	
6	Adjusted qualifying distributions. Subtract line 5 from line 4.	6	122,488

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 2014	(c) 2014	(d) 2015
1 Distributable amount for 2015 from Part XI, line 7				51,099
2 Undistributed income, if any, as of the end of 2015				
a Enter amount for 2014 only.				
b Total for prior years 20___, 20___, 20___				
3 Excess distributions carryover, if any, to 2015				
a From 2010.				
b From 2011.				
c From 2012.				
d From 2013.				
e From 2014.				37,442
f Total of lines 3a through e.	37,442			
4 Qualifying distributions for 2015 from Part XII, line 4 ► \$ <u>122,488</u>				
a Applied to 2014, but not more than line 2a				
b Applied to undistributed income of prior years (Election required—see instructions).				
c Treated as distributions out of corpus (Election required—see instructions).				
d Applied to 2015 distributable amount.				51,099
e Remaining amount distributed out of corpus	71,389			
5 Excess distributions carryover applied to 2015 (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:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	108,831			
b Prior years' undistributed income Subtract line 4b from line 2b.				
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.				
d Subtract line 6c from line 6b Taxable amount—see instructions.				
e Undistributed income for 2014 Subtract line 4a from line 2a Taxable amount—see instructions.				
f Undistributed income for 2016 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2015.				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).				
8 Excess distributions carryover from 2010 not applied on line 5 or line 7 (see instructions).				
9 Excess distributions carryover to 2016. Subtract lines 7 and 8 from line 6a.	108,831			
10 Analysis of line 9				
a Excess from 2011.				
b Excess from 2012.				
c Excess from 2013.				
d Excess from 2014.				37,442
e Excess from 2015.				71,389

Part XIV Private Operating Foundations (see instructions and Part VII-A, question 9)

1a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2015, enter the date of the ruling.

b Check box to indicate whether the organization is a private operating foundation described in section 4942(j)(3) or 4942(j)(5)

2a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed.

Table with 5 columns: Tax year (a) 2015, (b) 2014, (c) 2013, (d) 2012, (e) Total. Rows include 85% of line 2a, Qualifying distributions from Part XII, Amounts included in line 2c not used directly for active conduct of exempt activities, Qualifying distributions made directly for active conduct of exempt activities, and alternative tests (Assets, Endowment, Support).

Part XV Supplementary Information (Complete this part only if the organization 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))

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

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 (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d

a The name, address, and telephone number or e-mail address of the person to whom applications should be addressed: GERALD P BUCCINO, 14483 MARSALA WAY, NAPLES, FL 34109, (917) 991-3410

b The form in which applications should be submitted and information and materials they should include: APPLICATIONS MUST BE SUBMITTED IN WRITING

c Any submission deadlines: NONE

d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors: NONE

Part XV Supplementary Information(continued)

3 Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	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
Name and address (home or business)				
a <i>Paid during the year</i> See Additional Data Table				
Total			▶ 3a	122,488
b <i>Approved for future payment</i>				
Total			▶ 3b	

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated

Table with 5 main columns: (a) Business code, (b) Amount, (c) Exclusion code, (d) Amount, and (e) Related or exempt function income. Rows include categories like Program service revenue, Fees and contracts from government agencies, Membership dues, Interest on savings, Dividends, Net rental income, and Subtotal.

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

Table with 2 columns: Line No. and description. Line 4: THOSE ACTIVITIES PROVIDE CAPITAL THAT IS USED FOR DISTRIBUTIONS BY THE FOUNDATION. Line 7: THOSE ACTIVITIES PROVIDE CAPITAL THAT IS USED FOR DISTRIBUTIONS BY THE FOUNDATION. Line 8: THOSE ACTIVITIES PROVIDE CAPITAL THAT IS USED FOR DISTRIBUTIONS BY THE FOUNDATION.

Form 990PF Part XV Line 3 - Grants and Contributions Made During the Year or Approved for Future Payment

Recipient	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
Name and address (home or business)				
a <i>Paid during the year</i>				
202020 420 FIFTH AVE 27TH FLOOR NEW YORK, NY 10018		PUBLIC	GENERAL FUND	100
ALZHEIMER'S ASSOC 8430 W BRYN MAWR AVE CHICAGO, IL 60631		PUBLIC	GENERAL FUND	100
AMERICAN CANCER SOCIETY 250 WILLIAMS ST NW ATLANTA, GA 30303		PUBLIC	GENERAL FUND	100
AMERICAN DIABETES ASSOC 55 E MONROE ST CHICAGO, IL 60603		PUBLIC	GENERAL FUND	100
AMERICAN FOUNDATION FOR THE BLIND 2 PENN PLAZA SUITE 1102 NEW YORK, NY 10121		PUBLIC	GENERAL FUND	300
AMERICAN HEART ASSOC 208 S LASALLE ST CHICAGO, IL 60604		PUBLIC	GENERAL FUND	300
BLINDED VETERANS ASSOC 477 H STREET NW WASHINGTON, DC 20001		PUBLIC	GENERAL FUND	300
BOYS TOWN 14100 CRAWFORD ST BOYS TOWN, NE 68010		PUBLIC	GENERAL FUND	100
CARE 151 ELLIS ST NE ATLANTA, GA 30303		PUBLIC	GENERAL FUND	100
CATHOLIC CHARITIES 2050 BALLENGER AVE SUITE 400 ALEXANDRIA, VA 22314		PUBLIC	GENERAL FUND	200
CHILDREN'S MEDICAL CENTER PO BOX 650473 DALLAS, TX 75265		PUBLIC	GENERAL FUND	200
CHRISTOPHER DANA REEVES FOUND 636 MORRIS TURNPIKE SHORT HILLS, NJ 07078		PUBLIC	GENERAL FUND	100
COALITION FOR THE HOMELESS 129 FULTON ST NEW YORK, NY 10038		PUBLIC	GENERAL FUND	200
COVENANT HOUSE 461 EIGHTH AVE NEW YORK, NY 10001		PUBLIC	GENERAL FUND	100
CYSTIC FIBROSIS FOUNDATION 6931 ARLINGTON RD 2ND FLOOR BETHESDA, MD 20814		PUBLIC	GENERAL FUND	100
Total			3a	122,488

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	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
Name and address (home or business)				
a <i>Paid during the year</i>				
FIDELCO GUIDE DOG FOUNDATION FOR TH 103 OLD IRON ORE RD BLOOMFIELD,CT 06002		PUBLIC	GENERAL FUND	200
FIRST CEREBRAL PALSY OF NEW JERSEY 7 SANFORD AVE BELLEVILLE,NJ 07109		PUBLIC	GENERAL FUND	200
FREEDOM FROM HUNGER 1644 DAVINCI COURT DAVIS,CA 95618		PUBLIC	GENERAL FUND	100
GREATER CHICAGO FOOD DEPOSITORY 4100 WEST ANN LURIE PLACE CHICAGO,IL 60632		PUBLIC	GENERAL FUND	100
GUIDING EYES FOR THE BLIND 611 GRANITE SPRINGS RD YORKTOWN HEIGHTS,NY 10598		PUBLIC	GENERAL FUND	100
HEALING HA FUND 4827 43RD ST SOUTH SEATTLE,WA 98118		PUBLIC	GENERAL FUND	50
LEUKEMIA LYMPHOMA SOCIETY 651 W WASHINGTON BLVD CHICAGO,IL 60661		PUBLIC	GENERAL FUND	100
MACULAR DEGENERATION RESEARCH 22512 GATEWAY CTR DR CLARKSBURG,MD 20871		PUBLIC	GENERAL FUND	100
MAKE A WISH FOUNDATION PO BOX 29119 PHOENIX,AZ 85038		PUBLIC	GENERAL FUND	500
MARCH OF DIMES 1275 MAMARONECK AVE WHITE PLAINS,NY 10605		PUBLIC	GENERAL FUND	100
MARINE TOYS FOR TOTS 18251 QUANTICO GATEWAY DR TRIANGLE,VA 22172		PUBLIC	GENERAL FUND	100
MEALS - ON - WHEELS 355 LEXINGTON AVE NEW YORK,NY 10017		PUBLIC	GENERAL FUND	100
MISERICORDIA 6300 NORTH RIDGE AVE CHICAGO,IL 60660		PUBLIC	GENERAL FUND	750
MULTIPLE SCLEROSIS ASSOCIATION 706 HADDONFIELD RD CHERRY HILL,NJ 08002		PUBLIC	GENERAL FUND	100
NATIONAL FOUNDATION FOR CANCER RESE 4600 EAST WEST HIGHWAY BETHESDA,MD 20814		PUBLIC	GENERAL FUND	100
Total				122,488

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	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
Name and address (home or business)				
a <i>Paid during the year</i>				
PARALYZED VETERANS OF AMERICA 801 EIGHTEENTH STREET NW WASHINGTON,DC 20006		PUBLIC	GENERAL FUND	200
PARKINSON'S DISEASE FOUNDATION 1359 BROADWAY NEWYORK,NY 10018		PUBLIC	GENERAL FUND	100
PAWS FOR PURPLE HEARTS 5860 LABATH AVE STE A ROHNERT PARK,CA 94928		PUBLIC	GENERAL FUND	200
PROJECT HOPE 255 CARTER HALL LANE MILLWOOD,VA 22646		PUBLIC	GENERAL FUND	100
SALVATION ARMY 615 SLATERS LANE ALEXANDRIA,VA 22314		PUBLIC	GENERAL FUND	200
SAVE THE CHILDREN 54 WILTON RD WESTPORT,CT 06880		PUBLIC	GENERAL FUND	100
SEEING EYE INC 10 WASHINGTON VALLEY RD WESTPORT,CT 06880		PUBLIC	GENERAL FUND	200
SETON HALL UNIVERSITY 457 CENTRE STREET SOUTH ORANGE,NJ 07079		PUBLIC	GENERAL FUND	114,838
SHRINERS HOSPITAL FOR CHILDREN 2900 ROCKY POINT DR TAMPA,FL 33607		PUBLIC	GENERAL FUND	200
ST JUDE CHILDREN'S HOSPITAL 501 ST JUDE PLACE MEMPHIS,TN 38105		PUBLIC	GENERAL FUND	200
SUSAN KOMAN BREAST CANCER FOUND 5005 LBJ FREEWAY DALLAS,TX 75244		PUBLIC	GENERAL FUND	350
THE ALS ASSOCIATION 1275 K STREET NW WASHINGTON,DC 20005		PUBLIC	GENERAL FUND	100
THE GLAUCOMA FOUNDATION 80 MAIDEN LANE SUITE 700 NEWYORK,NY 10038		PUBLIC	GENERAL FUND	100
THE SMILE TRAIN 41 MADISON AVE NEWYORK,NY 10010		PUBLIC	GENERAL FUND	100
UNITED CEREBRAL PALSY 1825 K STREET NW WASHINGTON,DC 20006		PUBLIC	GENERAL FUND	100
Total				122,488

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	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
Name and address (home or business)				
a <i>Paid during the year</i>				
USO 2111 WILSON BLVD ARLINGTON, VA 22201		PUBLIC	GENERAL FUND	100
WOUNDED WARRIOR PROJECT 4899 BELFORT RD JACKSONVILLE, FL 32256		PUBLIC	GENERAL FUND	200
Total ▶ 3a				122,488

TY 2015 Accounting Fees Schedule**Name:** THE BUCCINO FOUNDATION

C/O GERALD P BUCCINO

EIN: 36-3743267

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
ACCOUNTING FEES	22	22		

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

TY 2015 Gain/Loss from Sale of Other Assets Schedule

Name: THE BUCCINO FOUNDATION

C/O GERALD P BUCCINO

EIN: 36-3743267

Name	Date Acquired	How Acquired	Date Sold	Purchaser Name	Gross Sales Price	Basis	Basis Method	Sales Expenses	Total (net)	Accumulated Depreciation
200 SHS ARM HOLDIDNGS PLC	2014-03	PURCHASE	2015-02		10,296	9,769			527	
400 SHS CATAMARAN CORP COM	2013-09	PURCHASE	2015-05		24,016	19,411			4,605	
150 SHS CATERPILLAR INC	2011-10	PURCHASE	2015-07		11,511	13,769			-2,258	
200 SHS SALESFORCE COM	2007-06	PURCHASE	2015-06		14,798	2,125			12,673	
50 SHS COSTAR GROUP INC	2007-03	PURCHASE	2015-06		10,264	2,254			8,010	
300 SHS CITRIX SYSTEMS INC	2013-03	PURCHASE	2015-05		19,642	21,251			-1,609	
350 SHS DEXCOM INC	2007-03	PURCHASE	2015-06		26,247	2,566			23,681	
100 SHS DEXCOM INC	2007-03	PURCHASE	2015-06		7,983	733			7,250	
300 SHS EXACT SCIENCES CORP	2014-12	PURCHASE	2015-12		2,442	8,294			-5,852	
250 SHS EXACT SCIENCES CORP	2014-12	PURCHASE	2015-12		2,035	6,588			-4,553	
200 SHS EXACT SCIENCES CORP	2014-09	PURCHASE	2015-12		1,628	3,819			-2,191	
100 SHS HMS HOLDINGS	2015-03	PURCHASE	2015-10		913	1,690			-777	
400 SHS HMS HOLDINGS CORP	2014-12	PURCHASE	2015-10		3,652	8,237			-4,585	
300 SHS HMS HOLDINGS CORP	2009-11	PURCHASE	2015-10		2,739	4,510			-1,771	
70 SHS NORTHERN TRUST CORP	2014-12	PURCHASE	2015-12		5,104	4,771			333	
400 SHS ARATANA THERAPEUTICS	2014-10	PURCHASE	2015-10		2,804	4,191			-1,387	
500 SHS POLYPORE INTERNATIONAL	2013-08	PURCHASE	2015-02		29,689	21,350			8,339	
300 SHS RACKSPACE HOSTING	2010-09	PURCHASE	2015-09		8,229	7,816			413	
300 SHS ZULILY INC	2014-12	PURCHASE	2015-03		3,878	7,248			-3,370	
300 SHS ZULILY INC	2013-12	PURCHASE	2015-03		3,878	12,063			-8,185	
100 SHS ZULILY INC	2015-01	PURCHASE	2015-08		1,849	2,012			-163	
600 SHS ZULILY INC	2015-02	PURCHASE	2015-08		11,097	8,675			2,422	
200 SHS LULULEMON ATHLETICA	2013-06	PURCHASE	2015-01		11,265	13,027			-1,762	
500 SHS ARATNA	2014-10	PURCHASE	2015-10		3,505	5,332			-1,827	

TY 2015 Investments Corporate Stock Schedule**Name:** THE BUCCINO FOUNDATION

C/O GERALD P BUCCINO

EIN: 36-3743267

Name of Stock	End of Year Book Value	End of Year Fair Market Value
150 SHS CATERPILLAR		
300 SHS CITRIX		
250 SHS POLYPORT INTL		
300 SHS RACKSPACE HOSTING		
300 SHS ZULILY INC		
300 SHS ZULILY INC		
400 SHS CATAMARAN CORP		
ROUNDING		
145 SHS AFFILIATED MGRS GROUP INC (6	7,878	23,165
400 SHS ADVISORY BOARD CO	19,142	19,844
500 SHS ALLSTATE CORP	23,458	31,045
900 SHS ARATANA THERAPEUTICS INC (02	5,144	5,022
800 SHS ARM HOLDINGS PLC	25,600	27,144
500 SHS BOTTOMLINE TECHNOLOGIES INC	9,402	14,865
150 SHS COSTAR GROUP (2007)	6,762	31,004
400 SHS DENTSPLY INT'L INC (12/21/09	15,879	24,340
400 SHS DEMANDWARE INC	10,414	21,588
450 SHS DEXCOM (3/8/07)	3,299	36,855
180 SHS DYNAVAX TECHNOLOGIES CORP (1	5,655	4,349
260 SHS ECOLAB (3/26/07)	11,226	29,739
1300 SHS EXACT SCIENCES CORP.	11,591	11,999
150 SHS GOLDMAN SACHS GROUP INC (11/	9,589	27,035
590 SHS HFF INC CL A (03/04/11)	7,703	18,331
1700 SHS HMS HOLDINGS CORP (200-11/2	20,347	20,978
750 SHS HEALTHCARE SERVICES GROUP IN	11,466	26,153
300 SHS HARLEY DAVIDSON INC	14,239	13,617
260 SHS IHS INC (6/25/08)	21,099	30,792
500 SHS INOGEN INC	9,705	20,045
500 SHS LULULEMON ATHLETICA INC	35,006	26,235
500 SHS MEDNAX INC	19,021	35,830

Name of Stock	End of Year Book Value	End of Year Fair Market Value
900 SHS MARCUS & MILLICHAP INC	12,731	26,226
250 SHS MEAD JOHNSON NUTRITION CO. (21,017	19,738
1000 SHS NEKTAR THERAPEUTICS	6,245	16,850
130 SHS NORTHERN TRUST CORP (05/25/1	8,860	9,372
1000 SHS NXSTAGE MEDICAL (3/8/07)	12,364	21,910
250 SHS PROTO LABS	17,149	15,923
285 SHS QUALCOMM (8/20/96)(2.74/SH)	782	24,243
200 SHS QUALCOMM (34.21/SH)	6,842	
350 SHS RESMED (2/9/07)	8,673	18,792
400 SHS SALESFORCE.COM (6/27/07)	4,249	31,360
730 SHS STARBUCKS (2/27/07)	11,294	43,822
250 SHS ULTIMATE SOFTWARE GROUP INC	12,183	48,878
400 SHS VISA INC CL A COMMON STOCK	7,334	31,020
800 SHS WAGeworks INC	13,314	36,296
400 SHS WALGREEN (9/23/98)	9,163	34,062
190 SHS WATSCO INC (10/20/10)	10,570	22,255
250 SHS CAVIUM	18,138	16,428
400 SHS KORNIT DIGITAL	5,821	4,372
400 SHS MOBILEYE	15,662	16,912
1,000 SHS NEOGENOMICS INC	5,827	7,870
300 SHS PRESS GANEY HOLDINGS INC	9,300	9,465
600 SHS SQUARE INC CLASS A	7,533	7,854

TY 2015 Legal Fees Schedule**Name:** THE BUCCINO FOUNDATION

C/O GERALD P BUCCINO

EIN: 36-3743267

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
LEGAL FEES	1,824	1,824		

TY 2015 Other Decreases Schedule**Name:** THE BUCCINO FOUNDATION

C/O GERALD P BUCCINO

EIN: 36-3743267

Description	Amount
FEDERAL INCOME TAX	791

TY 2015 Other Expenses Schedule**Name:** THE BUCCINO FOUNDATION

C/O GERALD P BUCCINO

EIN: 36-3743267

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
EXPENSES				
LICENSE & FEES	38	38		
MISC EXPENSES	157	157		
INSURANCE	1,700	1,700		

TY 2015 Other Income Schedule

Name: THE BUCCINO FOUNDATION
C/O GERALD P BUCCINO

EIN: 36-3743267

Description	Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income
MISC INCOME	5,447	5,447	

TY 2015 Other Professional Fees Schedule**Name:** THE BUCCINO FOUNDATION

C/O GERALD P BUCCINO

EIN: 36-3743267

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
INVESTMENT MANAGEMENT FEES	8,040	8,040		

Schedule B

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Schedule of Contributors

OMB No 1545-0047

2015

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

Name of the organization THE BUCCINO FOUNDATION C/O GERALD P BUCCINO

Employer identification number 36-3743267

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 [x] 501(c)(3) exempt private foundation [] 4947(a)(1) nonexempt charitable trust treated as a private foundation [] 501(c)(3) taxable private foundation

Check 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

- [x] 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 other 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 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 [] \$ _____

Caution. An organization that is not covered by the General Rule and/or the Special Rules does not 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 990PF, Part I, line 2, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

Name of organization
 THE BUCCINO FOUNDATION
 C/O GERALD P BUCCINO

Employer identification number
 36-3743267

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	GERALD BUCCINO 14483 MARSALA WAY NAPLES, FL 34109	\$ 61,388	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 THE BUCCINO FOUNDATION C/O GERALD P BUCCINO	Employer identification number 36-3743267
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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 THE BUCCINO FOUNDATION C/O GERALD P BUCCINO	Employer identification number 36-3743267
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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 information once. See instructions.) ► \$ _____

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	
_____		_____	
--		_____	