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Return of Private Foundation or Section 4947(a)(1) Trust Treated as Private Foundation

OMB No 1545-0052

▶ Do not enter social security numbers on this form as it may be made public.

		Information about Form 990-PF and its s					to Public Inspection
		dar year 2015 or tax year beginning way	, 201	5, and 6	ending 🕰		, 2016
Name of foundation Silver Foundation Tuc. A Employed identification number SY-1556341							
Nu		d street (or PO box number if mail is not delivered to street address))	/surte		ne number (see instruct	
Cit	or tow	n, state or province, country, and ZIP or foreign postal code	.40(,				
•		redericks burg VA	シスペのノ		C ir exemp	tion application is pend	ang, cneck here ▶ ∐
G			n of a former public	chanty	D 1 Corosa		h
_	Ç. 100.	Final return Amended		Charty	D 1. Foreig	n organizations, check	here . ▶ [
		☐ Address change ☐ Name cha		Ì		n organizations meeting	
H	Check	type of organization: Section 501(c)(3) exempt p				here and attach computed foundation status was	
		in 4947(a)(1) nonexempt charitable trust Other tax		fation	section 5	07(b)(1)(A), check here	▶□
		parket value of all assets at J Accounting method					
		f year (from Part II, col. (c), Other (specify)		00.00.		ndation is in a 60-mont ction 507(b)(1)(B), chec	
	line 16		on cash basis.)				
	art I	Analysis of Revenue and Expenses (The total of	T				(d) Disbursements
		amounts in columns (b), (c), and (d) may not necessarily equal	(a) Revenue and expenses per		investment	(c) Adjusted net	for charitable
		the amounts in column (a) (see instructions).)	books	"	come	income	purposes (cash basis only)
	1	Contributions, gifts, grants, etc., received (attach schedule)	447,703	<u> </u>			
	2	Check ▶ ☐ if the foundation is not required to attach Sch. B					- ,
	3	Interest on savings and temporary cash investments					7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7
	4	Dividends and interest from securities					
	5a	Gross rents		ļ			
	ь	Net rental income or (loss) RECEIV	ED				
<u>e</u>	6a	Net gain or (loss) from sale of assets not on line-10					
Revenue	ь	Gross sales price for all assets on line 6	S				
ě	7	Capital gain net income (from Part V line) P. 2.6	1016				
æ	8	Net short-term capital gain	RS				
	9	Income modifications OGDEN.	LIT	_			
	10a	Gross sales less returns and allowances	0,				
	b	Less: Cost of goods sold					
	C	Gross profit or (loss) (attach schedule)					
	11	Other income (attach schedule)					
	12	Total. Add lines 1 through 11	447,703				
g	13	Compensation of officers, directors, trustees, etc.					
35	14	Other employee salaries and wages					
Expenses	15	Pension plans, employee benefits					
X	16a	Legal fees (attach schedule)	1,000	 		 	
é	b	Accounting fees (attach schedule) Other professional fees (attach schedule)					
Operating and Administrative	17	Interest		 			
str	18	Taxes (attach schedule) (see instructions)		 			
Ë	19	Depreciation (attach schedule) and depletion		 			
Ĕ	20	Occupancy		 			-
Ă	21	Travel, conferences, and meetings		 			
5	22	Printing and publications					
e E	23	Other expenses (attach schedule)	97				
ij	24	Total operating and administrative expenses.	•				
<u> </u>		Add lines 13 through 23					
þe	25	Contributions, gifts, grants paid	505.113				
0	26	Total expenses and disbursements. Add lines 24 and 25	506,210]			
	27	Subtract line 26 from line 12:	1				
	a	Excess of revenue over expenses and disbursements	C58 507	 			
	ь	Net investment income (if negative, enter -0-)			0		
		Adjusted net income (if negative, enter -0-)				6	
							000 DE

For Paperwork Reduction Act Notice, see instructions.

Cat No 11289X

Form **990-PF** (2015)



Part	Balance Sheets Attached schedules and amounts in the description of should be for end-of-year amounts only. (See instructions)	tions beginning of year		or year
			(b) Book Value	(c) Fair Market Value
- 1	1 Cash—non-interest-bearing		Z19,163	19,163
	2 Savings and temporary cash investments		<u> </u>	
(3 Accounts receivable ►			
- 1	Less: allowance for doubtful accounts ▶	25,000	-0-	- 0 -
4	4 Pledges receivable ▶			<u>.</u> .
	Less: allowance for doubtful accounts ▶			
1 '	5 Grants receivable		<u> </u>	<u> </u>
•	6 Receivables due from officers, directors, trustees, and o	I		
	disqualified persons (attach schedule) (see instructions) .		<u></u>	
7	7 Other notes and loans receivable (attach schedule) ▶			
	Less: allowance for doubtful accounts ▶			
र्घ ह	8 Inventories for sale or use			
Assets	9 Prepaid expenses and deferred charges			
4 10	Oa Investments - U.S. and state government obligations (attach sched	dule)		
	b Investments—corporate stock (attach schedule)			
	c Investments—corporate bonds (attach schedule)			
11				
	Less: accumulated depreciation (attach schedule) ▶			
12				
13			-	
14				
	Less: accumulated depreciation (attach schedule) ▶			
15				·
16		the	1.	
]	ınstructions. Also, see page 1, item l)	. 39,345	19:163	X19,163>
17				
15	• •			7
9 19	· •			-
∄ 20			 	-
Liabilities 51				1
تا ₂₂				1
23		- B-	-0 -	┪
	Foundations that follow SFAS 117, check here			-
Balances 25	and complete lines 24 through 26 and lines 30 and 31.			
<u>2</u> 24	· · · · · · · · · · · · · · · · · · ·		}	1
B 25				-{
26	· · · · · · · · · · · · · · · · · · ·			-
2	Foundations that do not follow SFAS 117, check here ▶			-
₫	and complete lines 27 through 31.			
Ö 27				
ي ا ي			 	-
25				4
8 30			 	-
Net Assets or		(see		
ž "	instructions)		(19,163)	>
			C. 11.02	
Part			et carea with	
	Total net assets or fund balances at beginning of year—Part II,			39 140
	end-of-year figure reported on prior year's return)			3 (1373
	Enter amount from Part I, line 27a		-	7 28 20]
	Other increases not included in line 2 (itemize)		3	
	Add lines 1 2 and 3		4	1
4 A	Add lines 1, 2, and 5		 	·
4 A	Add lines 1, 2, and 3. Decreases not included in line 2 (itemize) Record to the first serious serious line 4 minus line	<u>q</u>	5 ine 30 6	219,163

		e kind(s) of property sold (e.g., real estate, 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)
<u> 1a</u>						
<u>b</u>		Jone				
C				 		
<u>d</u>				ļ-		
е				<u>L</u>		<u> </u>
	(e) Gross sales price	(f) Depreciation allowed (or allowable)		other basis ense of sale		n or (loss) f) minus (g)
а						
b						
f c						
<u>d</u>						
е			L	·		·
	Complete only for assets show	wing gain in column (h) and owned	by the foundation	on 12/31/69		(h) gain minus
	(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69		s of col. (i) . (j), if any		t less than -0-) or rom col (h))
а						
b		**				
С						
d						<u> </u>
е						
2	Capital gain net income or		also enter in Pa , enter -0- in Pa		2	
3		or (loss) as defined in sections	s 1222(5) and (6)) :		
		, line 8, column (c) (see instru-		, enter -0- in }	3	
Part	V Qualification Unde	er Section 4940(e) for Redu	uced Tax on N	let Investment		
Vas t		section 4942 tax on the distribution and section 4940 (e). Equalify under section 4940(e).			base period?	☐ Yes ☐ N
1		unt in each column for each ye		<u> </u>	akıng any entries	
<u> </u>	(a)		ar, see the man		aking any entries.	(d)
Cale	Base period years indar year (or tax year beginning in)	(b) Adjusted qualifying distribution	s Net value o	(c) f nonchantable-use a 		ribution ratio divided by col (c))
	2014					
	2013					
	2012					
	2011					
	2010					
2	Total of line 1, column (d)				2	
3		or the 5-year base period—div				
	number of years the found	ation has been in existence if le	ess than 5 years		· 3	_ <u>_</u>
4	Enter the net value of nonc	charitable-use assets for 2015 f	rom Part X, line	5	. 4	
_					_	<u> </u>
5	Multiply line 4 by line 3 .				. 5	
6	Enter 1% of net investmen	t income (1% of Part I, line 27b)		. 6	
7	Add lines 5 and 6				. 7	
8	Enter qualifying distribution	ns from Part XII, line 4			. 8	
	If line 8 is equal to or great Part VI instructions.	ter than line 7, check the box	n Part VI, line 1t	o, and complete	that part using a 1	% tax rate. See t

Part	366	instr	uctio	ns)
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)	is Jan	المُرْسِينِ ا	理()
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check	رن	ne	-
	here ▶ □ and enter 1% of Part I, line 27b	1	<u> </u>	,2
С	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b).	! \ \ . ? -	پ ت ځړ 	-,
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)			ĺ
3	Add lines 1 and 2			
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)			
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0	JOV	14	
6	Credits/Payments:		(* *-	,
a	2015 estimated tax payments and 2014 overpayment credited to 2015 6a	; ; ; ;	4= "	ž
b	Exempt foreign organizations—tax withheld at source 6b			٠.
ď	Tax paid with application for extension of time to file (Form 8868) . 6c Backup withholding erroneously withheld 6d			
7	Total gradita and payments Add lines Catherents Cd	-		
8	Follower was the death of the second			
9		Jou	. 2	
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid > 10	<u> </u>		
11	Enter the amount of line 10 to be: Credited to 2016 estimated tax ▶ Refunded ▶ 11			
Part '	VII-A Statements Regarding Activities			<u> </u>
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?	1a	Yes	No
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for the definition)?			×
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials	1b		
_	published or distributed by the foundation in connection with the activities.			· ·
	Did the foundation file Form 1120-POL for this year?	1c		<u> </u>
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: (1) On the foundation. ▶ \$ (2) On foundation managers. ▶ \$			
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. ▶ \$			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		X
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	1	X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		X
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	_	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:			
	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 levy remain in the government and the government of the conflict with the state levy remain in the government of the conflict with the state levy remain in the government of the conflict with the state levy remain in the government of the conflict with the state levy remain in the government of the conflict with the state levy remain in the government of the conflict with the state levy remain in the government of the conflict with the state levy remain in the government of the conflict with the state levy remain in the government of the conflict with the state levy remain in the government of the conflict with the state levy remain in the government of the conflict with the state levy remain in the government of the conflict with the state levy remain in the government of the go			
_	conflict with the state law remain in the governing instrument?	6	X	
7 80	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV	7	X	
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)			
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General		ļ	
-	(or designate) of each state as required by General Instruction G? If "No," attach explanation	8b	X	
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 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)? If "Yes," complete Part XIV	_		>
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their	9		_
	names and addresses	10	X	
		m 99	0-PF	(2015)
	FL.	····		,

Par	VII-A Statements Regarding Activities (continued)			
			Yes	No
111	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)			<u>.</u>
10	meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		
12	person had advisory privileges? If "Yes," attach statement (see instructions)	40		入
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	12	X	
				L
14	Website address ► The books are in care of ► The Foundation Telephone no. ► 540 - Located at ► 1201 Central Park Blad. Fied. VA ZIP+4 ► 224	789	5-3	386
	Located at > 1201 Contral Parts Blod, Fred, VA ZIP+4 > 224	01		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 – Check here			▶ □
	and enter the amount of tax-exempt interest received or accrued during the year			
16	At any time during calendar year 2015, did the foundation have an interest in or a signature or other authority	· 	Yes	No
	over a bank, securities, or other financial account in a foreign country?	16		×
	the foreign country			
Pari	VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1a	During the year did the foundation (either directly or indirectly):			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes XNo			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a			
• •	disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes (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.)			
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)?	1b		
_	Organizations relying on a current notice regarding disaster assistance check here			
·	were not corrected before the first day of the tax year beginning in 2015?	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 2015, did the foundation have any undistributed income (lines 6d and			
	6e, Part XIII) for tax year(s) beginning before 2015?			
	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.)	2b		
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?			
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? (Use Schedule C, Form 4720, to determine if the	ļ		ĺ
	foundation had excess business holdings in 2015.)	3ь	1	
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		X
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its			Ţ
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2015?	4b	<u> </u>	X
	Fo	rm 9 9	0-PF	(2015)

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Part	VII-B Statements Regarding Activities	s for Which Form	1 4720 May Be R	lequired (continued)	1	
5a	During the year did the foundation pay or incur a (1) Carry on propaganda, or otherwise attempt t (2) Influence the outcome of any specific public	to influence legislati c election (see sect			0	
	directly or indirectly, any voter registration dr (3) Provide a grant to an individual for travel, stu (4) Provide a grant to an organization other than	ıdy, or other simılar		☐ Yes 🛣 N		\$
	section 4945(d)(4)(A)? (see instructions) (5) Provide for any purpose other than religious purposes, or for the prevention of cruelty to a		fic, literary, or educ	· · · 🗌 Yes 🕍 N cational		5 A. A. C.
b	If any answer is "Yes" to 5a(1)-(5), did any of the Regulations section 53.4945 or in a current notice	e transactions fail to regarding disaster a	qualify under the ssistance (see instr	exceptions described i uctions)?		
c	Organizations relying on a current notice regards if the answer is "Yes" to question 5a(4), does to because it maintained expenditure responsibility	the foundation clair	n exemption from	the tax	_	
6a	If "Yes," attach the statement required by Regulation Did the foundation, during the year, receive any on a personal benefit contract?		idirectly, to pay pre	emiums · · · □ Yes 🛣Ñ		
	Did the foundation, during the year, pay premiur If "Yes" to 6b, file Form 8870.				6b	×
b	At any time during the tax year, was the foundation If "Yes," did the foundation receive any proceed	s or have any net in	come attributable	to the transaction? .	7b	
Par	Information About Officers, Direct and Contractors	tors, irustees, F	oundation Mana	agers, Highly Paid I	Employ	ees,
1	List all officers, directors, trustees, foundation	n managers and th	eir compensation	(see instructions).		
	(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	- ather	ense account, allowances
1001	East Telecon Dr. Boca Noton A	President	-0-	-0-		<u>e - </u>
1301 1301	central Park Blad, Fred, VA	1.0	-6-	~0~	_ (<u> </u>
1001	Bast Telecon A. Buca Raton FL Edda, Handat Tr	Director-	-0-	~6*	-	<u>e ~ </u>
2	Compensation of five highest-paid employed "NONE."	es (other than tho	se included on li	ne 1—see instruction	ns). If n	O ~ one, ente
	a) Name and address of each employee paid more than \$50,00	(b) Title, and hours per	week (c) Comper	(d) Contributions to employee benefit plans and deferred	(e) Expe	ense account,

(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) Controlutions of employee benefit plans and deferred compensation

(e) Expense account, other allowances

(h) Title, and average hours per week devoted to position

(c) Compensation

(d) Controlutions (e) Expense account, other allowances

(e) Expense account, other allowances

(a) Compensation

(b) Title, and average hours per week devoted to position

(c) Compensation

(d) Controlutions (e) Expense account, other allowances

(e) Expense account, other allowances

(f) Compensation

(h) Title, and average hours per week devoted to position

(e) Expense account, other allowances

(f) Compensation

(h) Title, and average hours per week devoted to position

(h) Title, and average hours per week devoted to position

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(h) Title, and average hours per week devoted to position

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Form **990-PF** (2015)

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid En and Contractors (continued)	nployees,
3 Five highest-paid independent contractors for professional services (see instructions). If none, enter "NON	IE."
(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 beneficianes served, conferences convened, research papers produced, etc	Expenses
American Israel Education Foundation	125,000
2 Towish Federation of South Palm Brach County	100,00
3 12appahamack 12ahage, Inc Lossann's Hope House	77/03
4 Eller Johnson Charlitable Funding	77,600
Ethe rough chairman inches	38,77
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	
2	
4	
All other program-related investments. See instructions.	
3	
Total. Add lines 1 through 3	
	Form 990-PF (2015)

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Part	Minimum Investment Heturn (All domestic foundations must complete this part. Foreit see instructions.)	ign fo	undations,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:	٠,.	
а	Average monthly fair market value of securities	1a	
b	Average of monthly cash balances	1b	
С	Fair market value of all other assets (see instructions)	1c	
d	Total (add lines 1a, b, and c)	1d	Lone
е	Reduction claimed for blockage or other factors reported on lines 1a and	1	
	1c (attach detailed explanation)	.	
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	
4	Cash deemed held for charitable activities. Enter 11/2% of line 3 (for greater amount, see		
	instructions)	4	
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	\c-e
6	Minimum investment return. Enter 5% of line 5	6	None
Part	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating f and certain foreign organizations check here ▶ ☐ and do not complete this part.)	ound	ations
1	Minimum investment return from Part X, line 6	1	Mone
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.) 2b]	
C	Add lines 2a and 2b	2c	
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	
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	None
Part	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	506,210
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:		
а	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	SEP. 40
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	506,210
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating qualifies for the section 4940(e) reduction of tax in those years.	g whe	ther the foundation

Part	Undistributed income (see instruction	ons)			
1	Distributable amount for 2015 from Part XI, line 7	(a) Corpus	(b) Years prior to 2014	(c) 2014	(d) 2015
_				·	<u>-0-</u>
2	Undistributed income, if any, as of the end of 2015:			,	
а	Enter amount for 2014 only		•	<u> -の~</u>	n*,
b	Total for prior years: 20,20,20		-0-	-	
3	Excess distributions carryover, if any, to 2015:				-
а	From 2010		- '		
b	From 2011		`.		
C	From 2012		,		
d	From 2013	Ţ,			
е	From 2014			er y see - z s	
f	Total of lines 3a through e			, , , , ,	
4	Qualifying distributions for 2015 from Part XII,			,	
	line 4: ► \$ 500, 210			-	
а	Applied to 2014, but not more than line 2a .	!		-0-	
b	Applied to undistributed income of prior years		-		
	(Election required—see instructions)		-0-		
С					<u> </u>
-	required—see instructions)	-0-			
ď	Applied to 2015 distributable amount				
e	Remaining amount distributed out of corpus	50(>10			
5	Excess distributions carryover applied to 2015	206'510			····
•	(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				
U	indicated below:]	
_		~ >10		i	
a	Corpus. Add lines 3f, 4c, and 4e. Subtract line 5 Prior years' undistributed income. Subtract	506,210			
D	line 4b from line 2b				
					 . ·
С	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 ~		
_	· · · · · · · · · · · · · · · · · · ·				
a	Subtract line 6c from line 6b. Taxable		~0~		
	amount—see instructions				
е	Undistributed income for 2014. Subtract line				
	4a from line 2a. Taxable amount—see			<u> </u>	
_	instructions				
f	Undistributed income for 2015. Subtract lines				
	4d and 5 from line 1. This amount must be				- -
_	distributed in 2016				
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	-O-			
_	required—see instructions)				
8	Excess distributions carryover from 2010 not	£ ~			
	applied on line 5 or line 7 (see instructions) .	_8^			·
9	Excess distributions carryover to 2016.	_0~			
	Subtract lines 7 and 8 from line 6a				
10	Analysis of line 9:				
а	Excess from 2011				
b	Excess from 2012				
C	Excess from 2013		ļ		
d	Excess from 2014				
e					

Form	990-PF	(2015)

	4	_
Pane	1	o

	VIV. Britant American	45		V (1)		Page IU
art						
1a	If the foundation has received a ruling	g or determination	n letter that it is a	private operating		
	foundation, and the ruling is effective fo					
b	Check box to indicate whether the four		te operating founda		section 4942	(j)(3) or 4942(j)(5)
2a	Enter the lesser of the adjusted net income from Part I or the minimum	Tax year	- 	Prior 3 years		(e) Total
	investment return from Part X for each year listed	(a) 2015	(b) 2014	(c) 2013	(d) 2012	
b	85% of line 2a			 	 	
С	Qualifying distributions from Part XII, line 4 for each year listed					
d	Amounts included in line 2c not used directly for active conduct of exempt activities					
е	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:					
а	"Assets" alternative test-enter:					
	(1) Value of all assets					
	(2) Value of assets qualifying under section 4942(j)(3)(B)(j)					
b	"Endowment" alternative test—enter ² / ₃ of minimum investment return shown in Part X, line 6 for each year listed		77.			
С	"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)	· <u>-</u>		-	-	-
	(3) Largest amount of support from an exempt organization					
	(4) Gross investment income		- 			
ırt.	XV Supplementary Information	n (Complete t	his part only if t	he foundation	had \$5,000 or i	nore in assets at
	any time during the year-				,.,	
	Information Regarding Foundation				 	
а	List any managers of the foundation v	who have contrib	uted more than 29	% of the total con	tributions receive	d by the foundation
	before the close of any tax year (but o	nly if they have o	ontributed more th	nan \$5,000). (See	section 507(d)(2).)
		-		, ,	· //-/-	
b	List any managers of the foundation	who own 10% d	or more of the sto	ck of a corporation	on (or an equally	large portion of the
	ownership of a partnership or other er					ango portion of the
		-		-		
	Information Regarding Contribution	, Grant, Gift. Lo	an, Scholarship.	etc., Programs:		· -
	Check here ▶ ☐ if the foundation				organizations ar	nd does not accept
	unsolicited requests for funds. If the f					
	other conditions, complete items 2a, I	o, c, and d.		·		
а	The name, address, and telephone nu	mber or e-mail a	ddress of the pers	on to whom apple	cations should be	addressed:
•			•	_	•	
\ b	The form in which applications should	be submitted an	eccu Dr.	materials they sh	ould include:	561-997-
	writte rowert	uta 1	_			
С	Any submission deadlines:	<u> </u>				
d	Any restrictions or limitations on aw		ov geographical a	reas, charitable f	ields, kinds of ir	stitutions, or other
-	factors:		, goog, apinoar a	. cao, chamable i		ontonorio, or onior
	None					

Form **990-PF** (2015)

Helping Esteel Full, Inc. Boca Rater synappy March 8 + the Living/KFF Temple Bith Et of 1960 Leisann's Hope Horse Brent CCAI Germanna Comm. College VA Black History mouth Assoc. Misk. Charitable 5,000 Charitable 5,000 Charitable 5,000 Charitable 5,000 Charitable 10,000 Charitable 5,000 Charitable 5,000 Huwanidanian 1,389	3 Grants and Contributions Paid During t	he Year or Approv	ed for Fut	ture Payment	
Name and advises (nome or business) or independent marpert an Paid during the year Tac. A paid during the year Tac. A matrican Tareat Ech Eard Tac. Ether School Ech Eard Tac. Ether School Ech Eard Tac. Ether School Ech Eard Tac. Ether Tareat Scents Slam ALS Slam ALS Bays & chirls Chool Ech Eard Charitable 15,000 Tam for the Care Halping Ested Full, Inc. Bocc Raten (yeargoure Charitable 16,000 March 24 the Living Inct Tample Both Ellor Eard Charitable 5,700 CAI CAI CAI Charitable 5,700 Charitable 5,000 Charitable 5,000	Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or	Amount
Rappichamoct Rates Inc. Amelican Israel Ed. Easel Toulah Edelsteller of Sight Palla Sacch County Eller Dohnson Benefit Find Silver Fernateller Holden Hol. Friends of Israel Society Slam ALS Bays & Ohrls Clabet Rappachamock Region Tour for the Cure Halping Israel Find, Irc. Bocc Rates (ynaggive Warch of the Inventy Kett Tought Bith Et of Obeca Lel'Sani's Hope House Burnt Charling is 6,000 Char	· · · · · · · · · · · · · · · · · · ·		recipient	Contribution	
Ambrican Israel Ed. Fourth Towish Education: of Sith Pala Societ County Ellan Dolman Binefit Find Silver Foundation Holdan Ft. Friends of Israeli Secits Slam ALS Bays & Girls Chaef Region Tom for the Cute Charitable Boca Raten Synagone Whatch 24 the Living/KFT Tamphe Bith Et of 1800 CAT Charitable Signor Charitable S					
Tourish Enderother of Sinth Pollin Search Country Ellan Schauch Brush Hourd Silver Foundation Holden Fro. Erlands of Israeli Society Slam ALS Bays & Girls Club of Rappahament Region Jam for the Cute Charitable Charitable Charitable Charitable Charitable Cooc Rappahament Cute Charitable Charitable Cooc Charitable Soc Chari	Rappahannock Retige the				77,692
Ether School Einelf Find Silver Foundation Holden fte. Friends of Istali Scotts Slam ALS Boys & Girls Clubet Region Ford Inc Booca Rate Cyre Halping Istal Find, Inc Booca Rate Cynagogue Warch of the Living KFF Tomphe Bit Et of Istal Cermanna Comm. College VA Black History Mouth Assoc. Total Total Approved for Nurre payment Clan in Jan 1909 Regions 100,000 15,000 Charitable 15,000 Charitable 15,000 Charitable 16,000 Charitable 5,000 Charitable 6,000 Charit	American Israel Ed. Earch	 		Educational	125,000
Ethen Sohnson Briefit Find 51 har Foundation Holden Fe. 51 har Foundation Holden Fe. Friends of Istan Society Slam ALS Boys & Girls Club of Rappahamock Region Town for the Cure Halphan Istan Find, Inc. Boca Raten Gynaggive Watch of the Living KFT Townsh Bith Et of 18000 Charitable Charitable 10,000 Charitable 10,000 Charitable 5,000 Charitable 5,100 Charitable 5,100 Charitable 5,100 Misc. Total Total Dapproved for Inture payment Approved for Inture payment	Jewish Federation of Suith	-		~ 11.1	
Humilation #6/day fred. Friends of Dotal Scents Slam ALS Bays & Girls Club of Rappahamoet Region Tom for the Cure Halpha Dotal Find, Inc. Boca Rater synagojne Watch of the Living 16th Temple Both of other Color toble Consider Synagojne Watch of the Living 16th Temple Both of other Color toble Color toble Consider Synagojne March of the Living 16th Temple Both of other Color toble Consider Synagojne Charitable Synac Charitable Synac Charitable Synac Charitable Synac Total Total Deproved for luture payment Approved for luture payment				,	1 -
Slam ALS Slam ALS Regist & Girls Close & Charitable Regist & Girls Close & Charitable Tom for the Cite Charitable Charita	Silver Grand of Sheth Ford	•		Humani hatlan	
Slam ALS Buys & Girls Chabet Rapahameck Region Tom for the Cure Halping Israel Fund, Ira Boca Raten (ynaggive Warch & the Living/KFF Temple Bith Et of teleca Leisann's Hope House Elent Charitable Since Charitable Sinc	Friend is to Popul Com) ,		1	•
Buys & Girls Club of Rappahammed Regies Jam for the Cite Halping Istral Fund, Irc. Boca Rater synapopue Whatch & the Living KAFF Temple Bith Et of 19thca Letsann's Hope House Beart CAFI Germanna Comm. College VA Black History smouth Assoc. Total Total D Approved for surve payment Charitable 15,000 Charitable 5,000 Charitable 6,000 Chari		į		l '	
Reparament Region Jam for the Cute Charitable Chari				Charl table	20,630
Sam for the Cire Halping Israel Full, Irc. Boca Rater synago, we March 8t the Living KFF Temple Buth Et of 19tea Let'sam's Hope House Eurot CCAI Germanna Comm. College Whise. Total Total Dalighous 10,000 Charitable Charitable Charitable Since Charitable Since Charitable Since Charitable Since Charitable Since Charitable Since Total Dalighous Charitable Charitable Since Charitable Charitable Since Charitable Charitable Since Charitable Charitable Since Charitable Charitabl	Demontract Reader			4.3611.	160000
Helphy Israel Fund, Inc. Boca Rater synagopue March 26 the Living/KFF Temple Both Et of teleca Let same's tope House Expert CCAI Germanna Comm. College VA Black History mouth Assoc. Total Total Deligious 10,000 Charitable Charitable Charitable Scoc Charitable Scoc Charitable Scoc Charitable Scoc Charitable Scoc Charitable Scoc Total Approved for future payment Assoc. Total Approved for future payment	To want the same of the				1
March 26 the Living/KFT Temple Bith Et of 18tea Leisann's Hope House Ease t CCAI Germanna Comm. College VA Black History mouth Assoc. Total Total Deligious Charitable Charitable Since Charitable Since Charitable Since Charitable Since Charitable Total Total Deligious Charitable Charitable Since Charitable Since Charitable Total Approved for future payment Acon Acon					13,048
March 26 the Living/KFT Temple Bith Et of Beca Loisann's Hope House Event CCAI Germanna Comm. College VA Black History mouth Assoc. Total Total Approved for future payment Charitable Soco Charitable Soco Charitable Soco Charitable Soco Charitable Soco Charitable Soco Total Approved for future payment Assoc.	Halping Steel Find, Inc	-		Charitable	10,000
March 2t the Living 16tt Temple Bith Et of 13teca Loisann's Hope Hore Beart CCAI Germanna Comm. College VA Black History mouth Assoc. Misc. Total Approved for future payment Chafibable 6,000 Chafibable 5,700 Charitable 5,000 Humanidanian 1,3889 Approved for future payment Assoc. Approved for future payment	150ca Bater Synagojue			Deligious	10,000
Comple 15th Et of 15tea Leisann's Hope Hore Event CCAI Germanna Comm. College VA Black History mouth Assoc. Misk. Total Deproved for future payment Total Deproved for future payment Total Deproved for future payment Total	March of the Living/KF	1			•
Leisann's Hope Hase Beart CCAI Germanna Coinn. College VA Black History much Assoc. Miss. Total Approved for future payment Chafidable Since Charitable Since Charitable Since Humanidanian 1,389 Mon	lemple 13ith El of there				_ •
Germanna Coinn. College VA Black History mouth Assoc. Misc. Total b Approved for future payment Charitable Signor Charit	Leisann's Hope House Bu	~ *		Chatitable	6,002
Misc. Charitable 5,000 Misc. Humanidanian 1,300 Total 3a 505,11 Approved for future payment Non	CCAI			Charitable	5,400
Misc. Charitable 5,000 Misc. Humanidanian 1,300 Total 3a 505,11 Approved for future payment Non	Germanna Comm. College			Educational	5.600
Total b Approved for future payment Total Approved for future payment Total Approved for future payment	VA Black History mouth	Assoc		Charltable	1*
Total b Approved for future payment Acon	misc.			Humanidanian	1,389
b Approved for future payment As n					
don	 			> 3a	505,113
Total	b Approved for fature payment				
Total					Lone
Total					
Total An Cane					
Total					
	Total			> 3k	None

		Analysis of Income-Producing Ac					
Ente	er gro	ss amounts unless otherwise indicated.	(a)	siness income (b)	(c)	on 512, 513, or 514 (d)	(e) Related or exempt function income
1	Pro	gram service revenue:	Business code	Amount	Exclusion code	Amount	(See instructions.)
•	а	gram corrido reventes.			+		
	b				 		
	C						
	ď				 		
	e .				+		
	f				 		
	~	Fees and contracts from government agencies		- A	 		
2	_		<u> </u>		Jone		
2		mbership dues and assessments rest on savings and temporary cash investments			 		
3 4		dends and interest from securities					
5					 		
3		rental income or (loss) from real estate:			 		
		Debt-financed property	<u> </u>				
^		Not debt-financed property			+		
6		rental income or (loss) from personal property			 		
7		er investment income					
8		or (loss) from sales of assets other than inventory	ļ	<u> </u>	 		
9		income or (loss) from special events			 		
10		ss profit or (loss) from sales of inventory					
11	_	er revenue: a			 		
	b.			_ -	+		
	C .						
	d .				 		
40	e .	A-A-1 A-d-1 (-) (-)			 		
		ototal. Add columns (b), (d), and (e)	L	<u> </u>			<u> </u>
		al. Add line 12, columns (b), (d), and (e)				13	
<u> </u>		7-B Relationship of Activities to the A	<u> </u>	ant of Even	d Dumasaa		
	e No.						
	▼	Explain below how each activity for which accomplishment of the foundation's exempt pur	poses (other than	n by providing fur	nds for such purpo	ses). (See instruc	nportantly to the tions.)
						·	
							
							
							
				<u>-</u> .			
							
-							

Part	XVII		n Regarding Trar ganizations	sfers To and Tra	nsactions and	Relationsh	ips With I	Nonchar	ritable		90 10
1	in se			engage in any of the section 501(c)(3) org					<u> </u>	/es	No
а	Trans	sfers from the rep	porting foundation to	a noncharitable ex	empt organization	of:				1	
	(1) C	ash							1a(1)	İ	X
	(2) O	ther assets .							1a(2)		X
b	Othe	r transactions:									
			a noncharitable exe					[1b(1)	i	X
	(2) P	urchases of asse	ets from a noncharita	able exempt organiz	ation				1b(2)		X
				r assets					1b(3)		X
	(4) R	leimbursement ai	rrangements					[1b(4)		
		oans or Ioan gua							1b(5)		爻
				np or fundraising sol					1b(6)		×
C				sts, other assets, or					1c		_ X
d	If the	answer to any	of the above is "Yes	s," complete the foll	owing schedule.	Column (b)	should alw	ays show	the fa	ir m	arket
	value	of the goods, of	ther assets, or servi	ces given by the rep	orting foundation	. If the found	dation rece	ived less	than fa	ur ma	arket
				ement, show in colu						_	
(a) Line	no.	(b) Amount involved	(c) Name of nonch	nantable exempt organizat	ion (d) Desc	nption of transfe	rs, transaction	ns, and shar	ng arran	geme	nts
									_		
						. =					
											
	-			<u>. </u>		<u>-</u>					
			 				··				
	-										
											
			· · · · · · · · · · · · · · · · · · ·								
											
									——		
	-			·							
									——		
	le the	foundation dire	ectly or indirectly aff	filiated with, or relate	ed to one or mo	re tay-evern	nt organiza	etions			
Za				ther than section 50					Voc		No.
b			following schedule.		. (0)(0)) 01 000			٠	165	~ '	10
		(a) Name of organi		(b) Type of or	anization		(c) Descriptio	n of relation	ship		
				(1)		- .					
					· -						
				····							
	Unde	er penalties of perjury, I	declare that I have examine	ed this return, including acco	mpanying schedules and	d statements, and	to the best of	my knowledg	ge and be	lief, it	ıs true,
Sign	сопе	correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge May the IRS									
Here) d (-61-6	9/13/1	9x (9			with the pr (see instruct			
		nature of officer or trus	stee T	Date	Title			,000 1100 00			
Paid		Print/Type preparer	's name	Preparer's signature		Date	Chec	k ıf Pr	TIN		
Prepa	arer							mployed			
Use (Firm's name ▶					Firm's EIN	<u> </u>			
		Firm's address ▶					Phone no				

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.irs.gov/form990.

OMB No. 1545-0047

2015

Name of t	the organization	S: luer	Foundation	Ivc.	Employer identification number
Organiza	ation type (check	one):		7	
Filers of:	:	Section:			
Form 990	0 or 990-EZ	501(c)() (enter number) organi:	zation	
		☐ 4947(a)(1) r	nonexempt charitable trust i	not treated as a private f	oundation
		☐ 527 politica	al organization		
Form 990)-PF	501(c)(3) ex	xempt private foundation		
		4947(a)(1) r	nonexempt charitable trust t	reated as a private found	dation
		☐ 501(c)(3) ta	xable private foundation		
, ,	For an organization for more (in mone) contributor's total	or property) from	990-EZ, or 990-PF that rece any one contributor. Compl	elved, during the year, co ete Parts I and II. See in	ontributions totaling \$5,000 structions for determining a
Зрооіа і і	10103				
1	regulations under 13, 16a, or 16b, a	sections 509(a)(1) and that received from	and 170(b)(1)(A)(vi), that che om any one contributor, dur	cked Schedule A (Form ing the year, total contril	
•	contributor, during	g the year, total cor	tion 501(c)(7), (8), or (10) filin ntributions of more than \$1, for the prevention of cruelty	000 exclusively for religio	us, charitable, scientific,
(contributor, during contributions tota during the year fo General Rule app	g the year, contributed more than \$1,0 Ied more than \$1,0 Ir an exclusively reliables to this organiz	etion 501(c)(7), (8), or (10) film utions exclusively for religion 000. If this box is checked, e igious, charitable, etc., purp zation because it received no ear	us, charitable, etc., purpo enter here the total contri ose. Do not complete ar conexclusively religious, c	oses, but no such abutions that were received
Caution.	An organization t	hat is not covered	by the General Rule and/or	the Special Rules does i	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 990-PF, 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 c	organization Silver Eoundation	Inc.	Employer identification number SY-1556311
Part I	Contributors (see instructions). Use duplicate copies of	Part I if additional space	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	Maxive L. Silver 5542 Vintage Oaks Terrace Delray Beach, FL 33484	\$ 437,303	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	Larry D. Silver 1001 East Recom Dr. Boca Raton, FL 33431	\$ 5,700	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	Silver Admin Services Co. 1001 East Telecon Dr. Boca Raton, FL 33431	\$ 5,000	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person

Name of o	rganization	Silver	Foundation	. Inc.	Employer identification number 54-155634
Part II	Noncasi	Property (see in	structions). Use duplicate co	pies of Part II if additiona	
(a) No. from Part I		Description of no	(b) ncash property given	(c) FMV (or estimate (see instructions)	(d) Date received
			Vone	 \$	
(a) No. from Part I		Description of no	(b) ncash property given	(c) FMV (or estimate (see instructions)	(d) Date received
				\$	
(a) No. from Part I		Description of no	(b) ncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
				s	
(a) No. from Part I		Description of no	(b) ncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
				s	
(a) No. from Part I		Description of no	(b) ncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
				\$	
(a) No. from Part I		Description of no	(b) ncash property given	(c) FMV (or estimate (see instructions)	(d) Date received
				 \$	
1				Ψ	

Schedule B (Form 990, 990-EZ, or 990-PF) (2015
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Name of or	ganization	51/0	er Found	ation	Inc.	Employer identification number
Part III	Exclusively religious, of (10) that total more that	charitable, an \$1,000 t For organi: or less for	etc., contributions of the year from any zations completing Part the year. (Enter this i	o organization one contributed in the contributed i	ons described utor. Complete e total of exclus	in section 501(c)(7), (8), or columns (a) through (e) and sively religious, charitable, etc
(a) No. from Part !	(b) Purpose of gi		(c) Use		(d) De	escription of how gift is held
- uit						
			(e) Trans	fer of gift		
	Transferee's name	e, address,	and ZIP + 4	Re	elationship of tra	ansferor to transferee
(a) No. from Part I	(b) Purpose of gi	ft	(c) Use	of gift	(d) De	escription of how gift is held
-						
	Transferee's name	e, address,		fer of gift	elationship of tra	ansferor to transferee
(a) No. from Part I	(b) Purpose of git	ft	(c) Use	of gift	(d) De	scription of how gift is held
			(e) Trans	fer of gift		
-	Transferee's name	e, address,			elationship of tra	ansferor to transferee
(a) No.	(b) Purpose of git		(c) Use	of aift	(d) Do	againtian of how sift in hold
from Part I	(b) Furpose or gi		(c) Use		(d) De	scription of how gift is held
			(a) Trong	fer of gift		
	Transferee's name	e, address,			elationship of tra	insferor to transferee
╽.						

			<u> </u>
	<u> </u>		<u> </u>
	SILVER FOUNDATION, INC).	
	54-1556341		
 	STATEMENT 1		
<u> </u>			<u> </u>
			<u> </u>
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1, PART 1, L	INE 23:		
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