Form 990-PF

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

OMB No 1545-0052 2016

► Do not enter social security numbers on this form as it may be made public. Department of the Treasury Internal Revenue Service Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf.

BAA For Paperwork Reduction Act Notice, see instructions.

Open to Public Inspection For calendar year 2016 or tax year beginning 2016, and ending Name of foundation Employer identification number RICHARD RIFFEL FOUNDATION INC 20-8113258 Number and street (or P O box number if mail is not delivered to street address) Telephone number (see instructions) Room/suite В PO BOX 177 (813) 645-2669 City or town, state or province, country, and ZIP or foreign postal code C If exemption application is pending, check here . > RUSKIN FL 33575-0177 Initial return G Check all that apply Initial return of a former public charity D 1 Foreign organizations, check here ▶ Final return Amended return 2 Foreign organizations meeting the 85% test, check Address change Name change here and attach computation X Section 501(c)(3) exempt private foundation Check type of organization Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation If private foundation status was terminated under section 507(b)(1)(A), check here Fair market value of all assets at end of year Accounting method X Cash Accrual (from Part II, column (c), line 16) Other (speafy) If the foundation is in a 60-month termination **>** \$ (Part I, column (d) must be on cash basis) under section 507(b)(1)(B), check here 189,462. Part I Analysis of Revenue and (d) Disbursements (a) Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (c) Adjusted net (b) Net investment for charitable expenses per books income income purposes (cash basis only) (see instructions)) Contributions, gifts, grants, etc., received (attach schedule) . 0. 2 Check ► X if the foundation is not required to attach Sch. B Interest on savings and temporary cash investments . . . 3,618 3,618. 3,618. **b** Net rental income or (loss) SCANNET MAY 2 6 at Net gain or (loss) from sale of assets not on line 10 . . . 3,106. L-6a Stmt **b** Gross sales price for all 294,606. Capital gain net income (from Part IV, line 2) . . 3,106 Net short-term capital gain 2,233. Income modifications . . 10 a Gross sales less returns and allowances . . **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. 6,729. 5,856 13 Compensation of officers, directors, trustees, etc -14 Other employee salanes and wages 16a Legal fees (attach schedule). . L-16a Stmt. 70. ADMINISTRATIVE ${f b}$ Accounting fees (attach sch) . L=16b Stmt. 775. c Other professional fees (attach sch) L-16C Strat. 376. OPERATING 18 Taxes (attach schedule)(see instrs) See Line. 18 Stmt 104. 104. 114 19 Depreciation (attach schedule) and depletion Occupancy Travel, conferences and neglings ... 21 Printing and publications · · · · EXPENSES 22 Offer expenses (attach schedule) 23 Total operating and administrative expenses Ad me 13 through 29-<u>3,</u>335 104 104 10,100 10, 100.Total expenses and disbursements. Add lines 24 and 25 104 104 13,435 10,100 Subtract line 26 from line 12: a Excess of revenue over expenses and disbursements -6,706b Net Investment income (if negative, enter -0-). . 6,625 C Adjusted net income (if negative, enter -0-) . . 5,752.

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Form 990-PF (2016)

Page 2

Part	FIL I	Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year	End o	f year
1 all		(See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash non-interest-bearing	155.		
	2	Savings and temporary cash investments	18,318.	32,384.	32,229.
	3	Accounts receivable		· · · · · · · · · · · · · · · · · · ·	
		Less allowance for doubtful accounts			
	4	Pledges receivable	<u> </u>		
		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 sch)			
A S	i	Less allowance for doubtful accounts			
S	8	Inventories for sale or use			
E	9	Prepaid expenses and deferred charges			
s	10 a	Investments – U.S. and state government			
		obligations (attach schedule)			<u></u>
	1	o Investments — corporate stock (attach schedule) . 1,-10,b. Stmt	173,618.	153,001.	157,233.
	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).	192,091.	185,385.	189,462.
Ļ	17	Accounts payable and accrued expenses			
Å	18	Grants payable			
В	19	Deferred revenue			
Ŀ	20	Loans from officers, directors, trustees, & other disqualified persons			ļ
ļ T	21	Mortgages and other notes payable (attach schedule)			
į	22	Other liabilities (describe			
E S	23	Total liabilities (add lines 17 through 22)			
		Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31.			
NF	24	Unrestricted			
ΕU	25	Temporarily restricted			İ
T N D	1	Permanently restricted	 		ļ
A S B		Foundations that do not follow SFAS 117, check here . X and complete lines 27 through 31.			
SAELTA	27	Capital stock, trust principal, or current funds	192,091.	185,385.	
SN	28	Paid-in or capital surplus, or land, bldg, and equipment fund	,		
O E	29	Retained earnings, accumulated income, endowment, or other funds		· · · · · · · · · · · · · · · · · · ·]
RS	30	Total net assets or fund balances (see instructions)	192,091.	185,385.	1
	31	Total liabilities and net assets/fund balances (see instructions)	192,091.	185,385.]
Par	t III	Analysis of Changes in Net Assets or Fund Balance		200,000.	·
		net assets or fund balances at beginning of year — Part II, column (of-year figure reported on prior year's return)		rith	100 001
		or-year rigure reported on prior year's return)			192,091.
2				 -	-6,706.
3		Increases not included in line 2 (itemize)			105 225
4 5		lines 1, 2, and 3 · · · · · · · · · · · · · · · · · ·		 	185, 385.
6	Total	net assets or fund balances at end of year (line 4 minus line 5) — P.	art II, column (b), line 30	6	185,385.

	the kind(s) of property sold (e.g., real e		b) How acquired	(c) Date acquired	(d) Date sold
2-story brick wareho	use, or common stock, 200 shares ML		P — Purchase D — Donation	(mo , day, yr)	(mo , day, yr)
1a PUBLIC TRADED SECUR	RITIES		<u> </u>	01/01/16	12/30/16
b PUBLIC TRADED SECUR	ITIES	F	· . 	11/01/13	12/30/16
C				ļ	-
d				<u> </u>	
<u>e</u>	T			<u> </u>	<u> </u>
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		(h) Gain or (e) plus (f) m	
a 252,984.		250	,751.		2,233.
b 41,622.		40	,749.		873.
<u> </u>					
d					
<u>e</u>	<u></u>				
Complete only for assets showing	ng gain in column (h) and owned by the	foundation on 12/31/69		(I) Gains (Co	
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	ti	gain minus col (k), b nan -0-) or Losses (f	ut not less rom col (h))
a					2,233.
b					873.
С					
d					
е				·	
2 Capital gain net income or (net o	capital loss) If gain, also e	nter in Part I, line 7	2		3,106.
3 Net short-term capital gain or (lo	oss) as defined in sections 1222(5) and		-		5,100.
If gain, also enter in Part I, line 8	3, column (c) (see instructions) If (loss)), enter -0-] 3		2,233.
	r Section 4940(e) for Reduced			<u> </u>	
	foundations subject to the section 4940			<u></u> _	
(i or optional use by domestic private	ioundations subject to the section 4040	And the off field investment in	come j		
If section 4940(d)(2) applies, leave thi	s part blank				
Was the foundation liable for the secti	on 4942 tax on the distributable amour	at of any year in the base no	riod?	∏Yes	X No
	v under section 4940(e) Do not complete		nou ,		V 140
	each column for each year, see the in:		u entrice	·	
	(b)		yenthes	(d)	
(a) Base period years Calendar year (or tax year beginning in)	Adjusted qualifying distributions	(c) Net value of noncharitable-use asse	ts	Distribution (col (b) divided	
2015	12,140.	188	,646.		0.064353
2014	13,033.		,155.		0.064470
2013	8,850.		,115.		0.045127
2012	9,600.		,139.		0.049449
2011	9,600.		,944.		0.053055
2 Total of line 1, column (d)					0.276454
3 Average distribution ratio for the	5-year base period — divide the total of has been in existence if less than 5 ye	on line 2 by 5, or by the			
number of years the foundation	nad been in existence it less than 5 ye	uig	· · · · · -3	 	0.055291
4 Enter the net value of noncharit	able-use assets for 2016 from Part X, I	ne 5	4		186,620.
5 Multiply line 4 by line 3			5		10,318.
6 Enter 1% of net investment inco	ome (1% of Part I, line 27b) · · · · ·		· · · · · <u>6</u>		66.
7 Add lines 5 and 6					10,384.
8 Enter qualifying distributions fro	m Part XII, line 4		8		10,100.
	an line 7, check the box in Part VI, line			rate See the	

Par	t VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see instructions	5)		
1 a	Exempt operating foundations described in section 4940(d)(2), check here · · · · • and enter +VA-on line 1			
	Date of ruling or determination letter (attach copy of letter if necessary – see instructions)			
b	Domestic foundations that meet the section 4940(e) requirements in Part V,		1	133.
	check here . F and enter 1% of Part I, line 27b			
С	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, col (b)			
•	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable			
2	foundations only Others enter -0-)			0.
3	Add lines 1 and 2			133.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)			0.
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0			133.
6	Credits/Payments	<u></u>	=	.001
_	2016 estimated tax pmts and 2015 overpayment credited to 2016 6 a			
	Exempt foreign organizations — tax withheld at source			
	Tax paid with application for extension of time to file (Form 8868) 6 c			
	Backup withholding erroneously withheld			
	Total credits and payments Add lines 6a through 6d			
8				
9	Tax due If the total of lines 5 and 8 is more than line 7, enter amount owed			<u> 133.</u>
10	Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			0.
11	Enter the amount of line 10 to be Credited to 2017 estimated tax Refunded 11			
Par	t VII-A Statements Regarding Activities			
1 a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it		Yes	No
	participate or intervene in any political campaign?	1 a		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes			
	(see Instructions for the definition)?	1 b		X
	if the answer is 'Yes' to 1a or 1b, attach a detailed description of the activities and copies of any materials published	Ī		1
	or distributed by the foundation in connection with the activities			ļ <u>.</u>
	Did the foundation file Form 1120-POL for this year?	1 c		X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year			
	(1) On the foundation \(\bigsis \) \(\bigsis \) (2) On foundation managers \(\bigsis \) \(\bigsis \) Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on			
·	foundation managers • \$	- 1		
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		X
_	If 'Yes,' attach a detailed description of the activities			 ^-
_	· · · · · · · · · · · · · · · · · · ·			1
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		
4 a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4 a		X
	of Yes, has it filed a tax return on Form 990-T for this year?	4 b		 ^ -
	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		
•	If 'Yes,' attach the statement required by General Instruction T	 -		X_
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either	1		}
U	By language in the governing instrument, or	-		ļ
	by language in the governing instrument, or	l		[
	By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?	6	X	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If 'Yes,' complete Part II, col. (c), and Part XV	7	X	
8 a	Enter the states to which the foundation reports or with which it is registered (see instructions)			
	FLORIDA]
b	of the answer is Yes+to line 7, has the foundation furnished a coop of Form 990-PF to the Attorney General	l		
	(or designate) of each state as required by General Instruction G? If 'No,' attach explanation	8 b		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 2016 or the taxable year beginning in 2016 (see instructions for Part XIV)? If 'Yes,' complete Part XIV	9		Х
10	<u> </u>			
	and addresses	10		X

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Form 990-PF (2016)

Pa	rt 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	Yes	No X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If 'Yes,' attach statement (see instructions)	12		х
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Х	
	Website address · · · · · · · · · · · · · · · N/A			
14	Website address N/A The books are in care of RICHARD A. RIFFEL, PRESIDENT Telephone no (813) Located at PO BOX 177 RUSKIN FL ZIP+4 33570-0	3) 645 177	-266	9
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 — Check here		. •	
16	At any time during calendar year 2016, 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?	. 16	Yes	No X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If 'Yes,' enter the name of the foreign country			
Pa	rt 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
1	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 XN	>		
	(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?			1
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes XNo.	•		1
	(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)?	11		
	Organizations relying on a current notice regarding disaster assistance check here			
	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 2016?	10		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))			
	a At the end of tax year 2016, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2016?	•		
	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)	21		
	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			
3	a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?	0		
	b If 'Yes,' did it have excess business holdings in 2016 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 foundation had excess business holdings in 2016.)	· · 3 t	1	
4	a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4 6	ļ	x
	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 2016?	41		

Part VIH-8 Statements Regarding Activities for Which Form 4720 May Be Required (Continued)	Form 990-PF (2016) RICHARD RIFFEL FOU		4500	20-811	13258	Page 6			
(1) Carry on prospeganda, or otherwise attempt to mittence legislation (section 4945(g)[7].			1 4720 May Be Req	uired (continued)		, - , .			
(3) Provide a grant to an individual for travel, study, or other similar purposes? (3) Provide a grant to an individual for travel, study, or other similar purposes? (4) Provide a grant to an individual for travel, study, or other similar purposes? (5) Provide for any purpose other than religious, chambles, scientific, literary, or escubinaria purposes, or for the prevention of revent shocking and a machinary study. (6) Provide for any purpose other than religious, chambles, scientific, literary, or escubinaria purposes, or for the prevention of receipts to differen or animals? (7) Provide for any purpose other than religious, chambles, scientific, literary, or escubinaria purposes, or for the prevention of receipts to differen or animals? (8) Provide for any purpose other than religious, chambles, scientific, literary, or escubinaria purposes, or for the prevention of receipts to different or animals? (9) Provide for any purpose other than religious, chambles, scientific, literary, or escubinaria purposes, or for the prevention of receipts of the prevention of animals. (9) Provide for any purpose other than religious, chambles, scientific, literary, or escubinaria purposes, or for the prevention of the scientific responsibility for the grant? (1) Provide any animals of scientific responsibility for the grant? (2) Brown and scientific responsibility for the grant? (3) A Diet the foundation, during the squer, receive any funds, directly or indirectly, on a personal benefit contract? (4) Previous to the foundation receive any proceeds of have any religious mental provided to contract? (5) Diet the foundation, during the squer, pay premiums, directly or indirectly, on a personal benefit contract? (8) A Diet to 60, file Form 8870 (9) A List all officers, pitterostry, tractices, Foundation Managers, Highly Paid Employees, and Contractors (1) List all officers, give took, structure, provided the contract of the scientific depondation receive any provided the scientific depondation and provided the sci		•	ection 4945(e))?	TYes 🛛	No				
(3) Provide a grant to an origanization other than a chartable, et, origanization described macketion 4946(5)(4)(4) (see instructions). (5) Provide of any purpose other than religious, charable, etc. origanization of control of control of any purpose of the three instructions of cuelly to children or annata's control of any purpose of the prevention of cuelly to children or annata's control of annata's control of the grant of annata's control of the grant of annata's control of an	(2) Influence the outcome of any specific public								
in section 4945(4)(4)(4)(4)(4)(4)(4)(4)(4)(4)(4) (see instructions). (5) Provide for any purpose other than relapous, chartable, scentific, literary, or educational purposes, or for the prevention of cruelty to enideren or animals? bit pay aswee en "les" to 58(1-6), did any of the transactions fall to qualify under the exceptions described in Regulations section 53 4945 or in a current notice regarding disaster assistance (see instructions)? Organizations relying on a current notice regarding disaster assistance check here if the same or "Yes" to excent 54(4) does the foundation at me remplace from the table-because it maintained superiorities responsibility for the grain? If Yes (attach the statement required by Regulations section 53 4945-5(d) Sa Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? Sa Did the foundation, during the year, any premiums, directly or indirectly, on a personal benefit contract? Yes (No) 1 Yes (not the statement required by Regulations section 53 4945-5(d) Sa Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? Yes (No) 1 Yes (No) 8 Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? Yes (No) 1 Yes (No) 8 Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? Yes (No) 8 Did the foundation decrease any proceeds on have any net income attributable to the transaction? Yes (No) 8 Did the foundation during the tax year, was the foundation a party to a prohibited tax sheller transaction? Yes (No) 8 Did the foundation during the year, proceeds on have any net income attributable to the transaction? Yes (No) 8 Did the foundation during the year, proceeds on have any net income attributable to the transaction? Yes (No) 8 Did the foundation during the year, proceeds on have any net income attributable to the transaction? (Part Yill i		l l							
educational purposes, or for the prevention of cruelty to children or animals? If any answer is "Set 15 63.1-6.], did any of the transactions fall to quality under the exceptions described in Regulations section 53 4945 or in a current notice regarding disaster assistance (see instructions)? Organizations relying on a current notice regarding disaster assistance check here If the names is "Nes' to question 53.4.9.4 does the foundation dame exemption from the tax because it maintained expenditure responsibility for the grant? If "Yes a contained in the statement required by Regulations section 53.4945-5(d) 8a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? If "Yes 10.6. (in Form 8870) 7a At any time during the tax year, was the foundation a party to a prohibited tax sheller transaction? 1 Ves No bit "Yes," do the foundation increave any proceeds or have any net income attributable to the transaction? 1 List all officers, directors, trustees, foundation managers and their compensation (See instructions). (a) Name and address (b) Title, and sverage flourises, directors, trustees, foundation managers and their compensation (See instructions). RICHARD, A., RIFFEL Q. FORMAND, A., RIFFEL Q. Compensation of five highest-paid employees (other than those included on line 1— see instructions). If none, enter NONE. (c) Compensation of five highest-paid employees (other than those included on line 1— see instructions). If none, enter NONE. (d) Contributions (education and address of each employee paid over \$50,000). O.	(4) Provide a grant to an organization other than a charitable, etc., organization described								
described in Regulations section 53 4495 or in a current notice regarding disaster assistance (see instructions)? Organizations relying on a current notice regarding disaster assistance check here of if the answers it we's to question 53(4), does the foundation claim exemption from the tax because it mentions 54(4), does the foundation claim exemption from the tax because it mentions for the grant? if Yes, attach the statement required by Regulations section 53 4945–5(d) Sa Did the foundation, during the year, recover any funds, directly or indirectly, to pay premiums on a personal benefit contract? So Did the foundation during the year, pay premiums, directly or indirectly, on a personal benefit contract? Yes So 86, file Form 8870 7 At All any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? Yes SNo To Bratt VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors 1 List all officers, directors, fusities, foundation managers and their compensation (see instructions). (b) Title, and average hours per week devoted to position (c) Compensation of five highest-paid employees (other than those included on line 1 – see instructions). If none, enter 'NONE'. 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 and evolved to position (b) Title, and average hours per week devoted to position (c) Compensation (d) Compensation (d) Contributions to employee benefit plants and defense or employee benefit plants and defense or employee benefit plants and defense or employees and over \$50,000. None.	(5) Provide for any purpose other than religious educational purposes, or for the prevention of	No							
Crganizations 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 immainance expenditure responsibility for the grant? if Yes, attach the statement required by Regulations section 53 4946–5(d) 8 a Dat the foundation, during the year, receiver any funds, directly, or indirectly, to pay premiums on a personal benefit contract? b Dat the foundation during the year, appreniums, directly or indirectly, on a personal benefit contract? 7 b Dat the foundation during the year, appreniums, directly or indirectly, on a personal benefit contract? 7 a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? 7 b If Yes; did the foundation iscore any proceeds or have any net income attributable to the transaction? 7 b If Yes; did the foundation approach of the transaction? 1 List all officers, directors, trustees, foundation managers and their compensation (see instructions). (a) Name and address (b) Title, and average hours per week devoted to position (if not paid, enter -0.) 2 Compensation of five highest-paid employees (other than those included on line 1 – see instructions). If none, enter 'NONE.' (e) Expense account, other allowances of employee benefit plans and defense of each employee and the compensation of the relation of t	described in Regulations section 53 4945 or in a	current notice regarding	disaster assistance		5t				
tax because it maintained expenditure responsibility for the grant? Yes No If Yes Yes Yes No Sandard the statement required by Regulations sections \$3.4945-5(d)									
8 a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	- 15 th	formulation along account			,)				
b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	If 'Yes,' attach the statement required by Regula	tions section 53 4945–5((d)		'				
7 to Al any time dump the tax year, was the foundation a party to a prohibited tax shelter transaction? Yes \(\times \) No bit Yes; did the foundation receive any proceeds or have any net income attributable to the transaction? Yes \(\times \) No bit Yes; did the foundation receive any proceeds or have any net income attributable to the transaction? Yes \(\times \) No and Contractors 1 List all officers, directors, trustees, foundation managers and their compensation (see instructions). (a) Name and address (b) Title, and average hours per week devoted to position (e) Expense account, other allowances (fit not paid, enter-0-) PRESIDENT PRESIDENT PRESIDENT 2.00 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0.					, ,				
7 at any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?		ns, directly or indirectly, o	on a personal benefit con	tract?	· · · 6 b	<u> </u>			
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). Compensation (a) Name and address Compensation (in the paid, enter -0-) Compensation (in t		ion a party to a prohibited	d tax shelter transaction?	· · · · · Yes X	No				
1 List all officers, directors, trustees, foundation managers and their compensation (see instructions). (a) Name and address (b) Title, and average hours per week devoted to position RICHARD A. RIFFEL PO BOX 177 RUSKIN FL 33575 PRESIDENT 2.00 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0.	b if 'Yes,' did the foundation receive any proceeds	or have any net income	attributable to the transa	ction?	7 b	<u> </u>			
(a) Name and address (b) Title, and average hours per week devoted to position (fl not paid, enter-0-). RICHARD A. RIFFEL PO BOX 177 PRESIDENT RUSKIN FL 33575 2.00 0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.	Part VIII Information About Officers, D and Contractors	irectors, Trustees,	Foundation Manag	gers, Highly Paid E	Employee	ıs,			
Compensation of five highest-paid employee paid more than \$50,000 Compensation Compensatio	1 List all officers, directors, trustees, foundation	on managers and their o	compensation (see inst	ructions).					
RICHARD A. RIFFEL PO BOX 177 RUSKIN FL 33575 PRESIDENT 2.00 0. 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 (b) Title, and average hours per week devoted to position NONE (c) Compensation (d) Contributions to employee benefit plans and deferred compensation (e) Expense account, other allowances NONE NONE None		(b) Title, and average hours per week	(c)Compensation (If not paid,	(d)Contributions to employee benefit plans and deferred	(e) Expens	se account, allowances			
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 hours per week devoted to position NONE Total number of other employees paid over \$50,000 O.		DDECIDENT							
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 (b) Title, and average hours per week devoted to position (c) Compensation (d) Contributions to employee benefit plans and deferred compensation (e) Expense account, other allowances (o) Compensation Total number of other employees paid over \$50,000	RUSKIN FL 33575	2.00	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 hours per week devoted to position NONE (c) Compensation (d) Contributions to employee benefit plans and deferred compensation other allowances (e) Expense account, other allowances (find the included on line 1 – see instructions). If none, enter 'NONE.' (g) Expense account, other allowances (hours per week devoted to position) (hours per week devote									
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 (b) Tritle, and average hours per week devoted to position (c) Compensation (c) Compensation (e) Expense account, other allowances other all				L					
(a) Name and address of each employee paid more than \$50,000 NONE			n ·						
(a) Name and address of each employee paid more than \$50,000 NONE			<u> </u>						
(a) Name and address of each employee paid more than \$50,000 NONE					ł				
(a) Name and address of each employee paid more than \$50,000 NONE									
(a) Name and address of each employee paid more than \$50,000 NONE NONE Total number of other employees paid over \$50,000 (c) Compensation (c) Compensation (c) Compensation (d) Compensation (e) Expense account, other allowances (f) Compensation (hours per week devoted to position (hours per week devoted to position) (hours per week devoted to position) (c) Compensation (d) Compensation (e) Expense account, other allowances (f) Compensation (hours per week devoted to position) (c) Compensation (d) Expense account, other allowances (e) Expense account, other allowances (f) Compensation (hours per week devoted to position) (hours per week devoted to p	2 Compensation of five highest-paid employed	es (other than those inc	luded on line 1 – see ir	nstructions). If none, e	nter 'NONE				
Total number of other employees paid over \$50,000	' (a) Name and address of each employee paid more than \$50,000	hours per week	(c) Compensation	employee benefit plans and deferred	(e) Expense other a	se account, allowances			
	NONE								
					ļ				
					i				
					├				
	Table and the second se		<u> </u>		 				
				<u>, , , , , , , , , , , , , , , , , , , </u>					

3 Five highest-paid independent contractors for professional services (see inst		
(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		None
Part IX-A Summary of Direct Charitable Activities		
		
List the foundations four largest direct chantable activities during the tax year. Include relevant statistical infor organizations and other beneficiaries served, conferences convened, research papers produced, etc.	mation such as the number of	Expenses
1 Provide assistance to charitable organizations wh	lose	
purpose and goals are family planning, the reduct		
elimination of uncontrolled population growth and prote		0.
2		
3	-	
4		
Part IX-B Summary of Program-Related Investments (see instruction	ons)	
Describe the two largest program-related investments made by the foundation during the		Amount
1 N/A		
		0.
2		
All other program-related investments. See instructions		
3		
Total Add lines 1 through 2		
Total. Add lines 1 through 3		None Form 990-PF (2016)
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Page 8

Form 990-PF (2016)

<u>ra</u>	see instructions)		
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes		
	Average monthly fair market value of securities	1 a	164,033.
	Average of monthly cash balances	1 b	25,429.
	Fair market value of all other assets (see instructions)	1 c	
	Total (add lines 1a, b, and c)	1 d	189,462.
•	Reduction claimed for blockage or other factors reported on lines 1a and	.	
_	1c (attach detailed explanation)		
	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	189,462.
4	Cash deemed held for charitable activities Enter 1-1/2% of line 3 (for greater amount, see instructions)	4	2,842.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	186,620.
6	Minimum investment return. Enter 5% of line 5	6	9,331.
Pai	t XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating and certain foreign organizations check here □ and do not complete this part)	founda	tions
1	Minimum investment return from Part X, line 6	1	9,331.
2 a	Tax on investment income for 2016 from Part VI, line 5 · · · · · · · · · ·		
ı	Income tax for 2016 (This does not include the tax from Part VI)		
(Add lines 2a and 2b · · · · · · · · · · · · · · · · · ·	2 c	133.
3	Distributable amount before adjustments Subtract line 2c from line 1 · · · · · · · · · · · · · · · · · ·	3	9,198.
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	9,198.
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	9,198.
Pa	t XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes Expenses, contributions, gifts, etc. — total from Part I, column (d), line 26 · · · · · · · · · · · · · · · · · ·		10,100.
	Program-related investments — total from Part IX-B	1 b	0.
	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	<u>-</u> -
3	Amounts set aside for specific charitable projects that satisfy the	3 a	
	Cash distribution test (attach the required schedule)	3 b	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	10,100.
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	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4 · · · · · · · · · · · · · · · · · ·	6	10,100.
•	•		10,100.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the fo qualifies for the section 4940(e) reduction of tax in those years	undation	

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2015	(c) 2015	(d) 2016
Distributable amount for 2016 from Part XI, line 7				0 100
2 Undistributed income, if any, as of the end of 2016				9,198.
a Enter amount for 2015 only			1,840.	
b Total for prior years 20, 20, 20			1,040.	
3 Excess distributions carryover, if any, to 2016				
- · · · · · · · · · · · · · · · · · · ·				
d From 2014				
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2016 from Part XII, line 4 ► \$ 10,100.	·			
XII, line 4 \$ 10,100. a Applied to 2015, but not more than line 2a			1 040	
a Applied to 2013, but not more than line 2a			1,840.	
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 2016 distributable amount	•			8,260.
${f e}$ Remaining amount distributed out of corpus $ \cdot $	0.			
5 Excess distributions carryover applied to 2016				
(If an amount appears in column (d), the same amount must be shown in column (a))				
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 · · · ·	0.			
b Prior years' undistributed income Subtract line 4b from line 2b · · · · · · · · · · · · · · · · · ·		0.		
c Enter the amount of prior years' undistributed				
income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed				
d Subtract line 6c from line 6b Taxable amount — see instructions		0.		
e Undistributed income for 2015 Subtract line 4a from				
line 2a. Taxable amount — see instructions			0.	
f Undistributed income for 2016 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2017				020
7 Amounts treated as distributions out of				938.
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 2011 not applied on line 5 or line 7 (see instructions)	0.			
9 Excess distributions carryover to 2017. Subtract lines 7 and 8 from line 6a	0.			
10 Analysis of line 9	· · · · · · · · · · · · · · · · · · ·			
· •				
a Excess from 2012 0. b Excess from 2013 0.	1			
© Excess from 2014 0.	1			
d Excess from 2015 0.	1			
e Excess from 2016 . 0.	1			
e Excess IIoIII 2010 · · U.	L	L		

Form 990-PF (2016) RICHARD RIFFEL F				20-8113258	Page 10	
Part XIV Private Operating Foundations (see instructions and Part VII-A, question 9)						
1 a If the foundation has received a ruling or de is effective for 2016, enter the date of the ru	termination letter tha ling	t it is a private opera	iting foundation, and	the ruling		
b Check box to indicate whether the foundation	•			4942(j)(3) or	4942(j)(5)	
2 a Enter the lesser of the adjusted net	Tax year	Ť	Prior 3 years		(e) Total	
income from Part I or the minimum investment return from Part X for each year listed	(a) 2016	(b) 2015	(c) 2014	(d) 2013	(e) 10tai	
b 85% of line 2a						
c Qualifying distributions from Part XII, line 4 for each year listed						
d Amounts included in line 2c not used directly for active conduct of exempt activities						
e Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c						
3 Complete 3a, b, or c for the alternative test relied upon						
a 'Assets' alternative test — enter						
(1) Value of all assets	ļ		 	 		
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)						
 Endowment-alternative test — enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed 						
c 'Support' alternative test — enter						
(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)						
(2) Support from general public and 5 or more exempt organizations as provided			 			
in section 4942(j)(3)(B)(iii)		-				
an exempt organization			 	 		
Pan XV Supplementary Information	(Complete this	nart only if the	foundation ha	d \$5 000 or more	in	
assets at any time during the	ne year — see ir	structions.)	, roundation na	a 40,000 or more		
1 Information Regarding Foundation Mana						
a List any managers of the foundation who hat close of any tax year (but only if they have of	ive contributed more contributed more that	than 2% of the total n \$5,000) (See sect	contributions receiv ion 507(d)(2))	ed by the foundation b	etore the	
Richard A. Riffel			.,,,,			
h list and a second of the foundation who are	un 400/ na nana af th					
b List any managers of the foundation who ov a partnership or other entity) of which the fo	undation has a 10%	or greater interest	tion (or an equally la	irge portion of the own	ersnip of	
2 Information Regarding Contribution, Gra Check here X if the foundation only m requests for funds If the foundation makes	akes contributions to	preselected charita	ble organizations an	nd does not accept uns	solicited	
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		
b The form in which applications should be su	ibmitted and informa	tion and materials th	ey should include			
c Any submission deadlines						
d Any restrictions or limitations on awards, su	cn as by geographic	aı areas, charıtable f	ields, kinds of institu	itions, or other factors:		
						

Part XV | Supplementary Information (continued)

3 Grants and Contributions Pai		If recipient is an individual,			
Recipient		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 b	usiness)	or substantial contributor	· · · · ·		
a Paid during the year	+	21 2 / 2		Hanashui akad	
Planned Parenthood of Int 2055 Wood St Ste 110				Unrestricted	
Sarasota USO	FL 342	37 n/a	Public	Unrestricted	3,000
2111 Wilson Blvd Ste 1	200	, , <u>, , , , , , , , , , , , , , , , , </u>		0255222553	
Arlington	VA 222	01	Public		750
Salvation Army		n/a		Unrestricted	
PO Box 2839					
Tampa	FL 336		Public		750
Environmnetal Defense 1875 Connecticut Ave	Fund	n/a		Unrestricted	
Washington	DC 200)	Public		0
NRDC		n/a		Unrestricted	
40 West 20th Street	100				
New York	NY 100		Public		1,000
Nature Conservancy 4245 N. Fairfax Dr Ste	100	n/a		Unrestricted	
Arlington	VA 222	13	Public		1,000
Pro English	VII 222	n/a		Unrestricted	1,000
1601 N. Kent St		,			
Arlington	VA 222)9	Public		1,000
FL Wildlıfe Federation		n/a		Unrestricted	
PO Box 6870					
Talahassee	FL 323		Public		600
Life Path Hospice 3723 Upper Creek Drive		n/a			
Ruskın	FL 335	73	Public	Unrestricted	2,000
			<u></u>		
b Approved for future payment		· · · · · · · · · · · · · · · · · · ·			10,100
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,					
Total					

Enter gross amounts unless otherwise indicated			husiness income	Eveluded by	contrar 512 512 or 514			
0	ram service revenue	(a) Business code	(b) Amount	(c) Exclu- sion code	section 512, 513, or 514 (d) Amount	(e) Related or exempt function income (See instructions)		
a			_	 "" -		·		
ъ		 		+				
		 						
ď		 		- 				
e						-		
f		 						
g Fees	and contracts from government agencies	t t		- -				
_	bership dues and assessments							
	at on savings and temporary cash investments			14	5.			
4 Divide	ends and interest from securities			14	3,618.			
5 Net re	ental income or (loss) from real estate		·					
a Debt-	financed property							
b Not d	ebt-financed property							
	ntal income or (loss) from personal property							
	r investment income							
8 Gain d	or (loss) from sales of assets other than inventory			18		3,106.		
9 Net in	ncome or (loss) from special events							
10 Gross	s profit or (loss) from sales of inventory							
11 Other	rrevenue			T				
а								
b								
С								
ď								
е		l						
	otal Add columns (b), (d), and (e)				3,623.	3,106.		
	l. Add line 12, columns (b), (d), and (e)				13	6,729.		
	heet in line 13 instructions to verify calculations							
Part XV	-B Relationship of Activities to the	Accompli	shment of Exen	npt Purpos	es			
Line No. ▼	Explain below how each activity for which inco- accomplishment of the foundation's exempt p	ome is reported urposes (other	d in column (e) of Pa than by providing fu	art XVI-A contr ands for such p	buted importantly to urposes) (See instru	the ctions)		
8	EXEMPT FUNCTION INCOME							
	 							
	 							
	 							
	 							
	 							
	 							
	 							
	 							
	 							
								
	 							
	 	 -						
	L	_						

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

								· · · · · · · · · · · · · · · · · · ·		7.4	
d	escribed	ganization directly in section 501(c) political organizat	of the Code (othe	age in any of the r than section to	e following with an 501(c)(3) organizat	y other or lions) or in	ganization section 527,			Yes	No
a Ti	ransfers	from the reporting	foundation to a r	noncharitable e	xempt organization	n of				. 1	
(1) Cash							[1 a (1)		X
									1 a (2)		X
	•	rassets								\vdash	
_			acharitable evemi	st organization					1 b (1)		X
•	•		•	-					1 b (2)	\vdash	X
•	•							•	1 b (3)	\vdash	
	-	•								\vdash	<u>X</u>
	•	-							1 b (4)		<u>X</u>
	-	-							1 b (5)	\vdash	<u>X</u>
									1 b (6)		<u>X</u>
c S	haring o	f facilities, equipm	ent, mailing lists,	other assets, o	r paid employees.				1 c		<u>X</u>
th	e goods	other assets, or	services given by irrangement, show	the reporting for the reportin	oundation If the fo the value of the g	undation i	received less that	ow the fair market van fair market value vices received	alue of in		
(a) Line	eno 📗	(b) Amount involved	(c) Name o	of nonchantable ex	empt organization	(d)	Description of trans	fers, transactions, and sh	naring arrang	jements	
						,					
						1					
-				•		1					
					•						
	i										
			-			+					
	<u> </u>					 					
						-					
				_				<u>. </u>			
											
_						<u> </u>					
d	escribed	indation directly or in section 501(c) omplete the follow	of the Code (other	er than section		tax-exem ction 527?			<u> </u>	s X	No
	(a)	Name of organiza	tion	(b) Ty	pe of organization		(c) Description of relat	ionship		
Sign Here	Under pe correct, j	enalties of perjury, I decl	are that I have examine on of preparer cother that	ed this return, include an talpayer) is base	ing accompanying sched d on all information of w	hich preparer	r has any knowledge	est of my knowledge and b	May the this retur	IRS disci	e l
	Signal	ture of officer or trustee	hel of To	THE	11/ky 5,20		RESIDENT		(see ≀nst	puctions)	~
	Signat	·		VV I S	Dater 1	11				Yes	No
		Print/Type preparer's r	namė	Prepare	's signature	-	Date 5- 2-/7	Checkf	PTIN		
Paid		SHELDON L.	BARAT, CPA	A SHEL	DON IS BARA	T, CPA	3-2-1	self-employed	P0008	<u> 1941</u>	
Prepa	arer	Firm's name	BARAT AND	BARAT CP	A'S			Firm's EIN - 59-3	<u>613518</u>		
Use (Firm's address	550 N REO								
(- · · · · y	1	TAMPA	<u> </u>	 	FL 33	609	Phone no (813) 289-	1111	
BAA			TURIE IZ	-		<u>.u .s</u>	555	, (013	Form 99		
									COLUMN TO THE PARTY		

Form 990-PF Part I, Line 6a

Net Gain or Loss From Sale of Assets

2016

Name		Employer Identification Number
RICHARD RIFFEL FOUNDATION IN	C.	20-8113258
Asset Information:		
Description of Property SEE	ATTACHED BROKERAGE STATEMENT	
Date Acquired · Various	How Acquired Purchased	
Date Sold Various	Name of Buyer	
Sales Price 294, 606.	Cost or other basis (do not reduce by depreciation) 291	,500.
Sales Expense	Valuation Method Fair Market Value	
Total Gain (Loss) 3, 1	06. Accumulation Depreciation	
Description of Property		
Date Acquired	How Acquired	
Date Sold	Name of Buyer	
Sales Price	Cost or other basis (do not reduce by depreciation)	
Sales Expense	Valuation Method	
Total Gain (Loss)	Accumulation Depreciation	
Description of Property		
Date Acquired	How Acquired	
Date Sold	Name of Buyer	
Sales Price	Cost or other basis (do not reduce by depreciation)	
Sales Expense	Valuation Method	
Total Gain (Loss)	Accumulation Depreciation	
Description of Property		
Date Acquired	How Acquired	
Date Sold	Name of Buyer	
Sales Price	Cost or other basis (do not reduce by depreciation)	
Sales Expense	Valuation Method	
Total Gain (Loss)	Accumulation Depreciation	
Description of Property	·	
Date Acquired .	How Acquired	
Date Sold	Name of Buyer	
Sales Price	Cost or other basis (do not reduce by depreciation)	
Sales Expense	Valuation Method	
Total Gain (Loss)	Accumulation Depreciation	
Description of Property		
Date Acquired	How Acquired	
Date Sold	Name of Buyer	
Sales Price	Cost or other basis (do not reduce by depreciation)	
Sales Expense	Valuation Method	
Total Gain (Loss)	Accumulation Depreciation	
Description of Property		
Date Acquired .	How Acquired	
Date Sold	Name of Buyer	· · · · · · · · · · · · · · · · · · ·
Sales Price	Cost or other basis (do not reduce by depreciation)	
Sales Expense	Valuation Method	
Total Gain (Loss)	Accumulation Depreciation	
Description of Property		
Date Acquired .	How Acquired	
Date Sold	Name of Buyer	
Sales Price	Cost or other basis (do not reduce by depreciation)	
Sales Expense	Valuation Method	
Total Gain (Loss)	Accumulation Depreciation	

Additional Information

STATEMENT REGARDING STATE FILING

THE NON PROFIT FOUNDATION IS REGISTERED IN FLORIDA, WHERE THERE IS

NOT A REQUIREMENT TO SEND A COPY TO ITS ATTORNEY GENERAL, OR

DESIGNATE.

'RICHARD RIFFEL FOUNDATION INC	20-8113258 	1
Additional Information		
ATTACHMENT		
BROKERAGE STATEMENT		

Form 990-PF, Page 1, Part I, Line 18 Line 18 Stmt

Taxes	Rev/Exp Book	Net Inv Inc	Adj Net Inc	Charity Disb
FEDERAL TAX ON INVESTMENT INC.	10.			
FOREIGN TAXES	104.	104.	104.	

Total 114. 104. 104.

Form 990-PF, Page 1, Part I Line 16a - Legal Fees

Name of Provider	Type of Service Provided	Amount Paid Per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
FL DEP OF STATE	LICENSE	70.			

Form 990-PF, Page 1, Part I Line 16b - Accounting Fees

Name of Provider	Type of Service Provided	Amount Paid Per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
BARAT & BARAT CPAs	TAX PREPARATION	775.			

Form 990-PF, Page 1, Part I

Line 16c - Other Professional Fees

Name of Provider	Type of Service Provided	Amount Paid Per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
Day Hagan Asset Mgt	Advisory	2 , 376.			

Total <u>2,376.</u>

Form 990-PF, Page 2, Part II, Line 10b L-10b Stmt

	End of Year		
Line 10b - Investments - Corporate Stock:	Book Value	Fair Market Value	
ISHARES INC MSCI 189sH	9,166.	9,234.	
ISHARES MSCI CDS ETF 687sh	18,063.	17,965.	
ISHARES TR CORE US-372sh	40,897.	40,198.	
ISHARES TR MSCI EMERG MKT-291sh	10,402.	10,188.	
ISHARES TR RUS 2000 GRW 17sH	2,570.	2,617.	

20-8113258

2

Form 990-PF, Page 2, Part II, Line 10b L-10b Stmt

Continued

	End of Year	
Line 10b - Investments - Corporate Stock:	Book Value	Fair Market Value
ISHARES TR RUSSELL 1000 GRW-102sh	10,171.	10,700.
ISHARES TR RUSSELL 1000 VAL-384sh	40,013.	43,020.
ISHARES TR RUSSELL 2000 VAL-92sh	9,455.	10,942.
VANGUARD INTL EQUITY INDEX-EUROPE-258h	12,264.	12,369.