EXTENDED TO NOVEMBER 15, 2017

Form **990-PF**	**Return of Private Foundation**	OMB No 1545-0052
Department of the Treasury Internal Revenue Service	or Section 4947(a)(1) Trust Treated as Private Foundation ▶ Do not enter social security numbers on this form as it may be made public. ▶ Information about Form 990-PF and its separate instructions is at *www.irs.gov/form990pf*.	**2016** Open to Public Inspection

For calendar year 2016 or tax year beginning , and ending

Name of foundation SHRINERS OF RHODE ISLAND CHARITIES TRUST	**A Employer identification number** 22-3191072
Number and street (or P O box number if mail is not delivered to street address) Room/suite ONE RHODES PLACE	**B** Telephone number (401)467-7101
City or town, state or province, country, and ZIP or foreign postal code CRANSTON, RI 02905	**C** If exemption application is pending, check here ▶ ☐
G Check all that apply: ☐ Initial return ☐ Initial return of a former public charity ☐ Final return ☐ Amended return ☐ Address change ☐ Name change	**D** 1 Foreign organizations, check here ▶ ☐ 2. Foreign organizations meeting the 85% test, check here and attach computation ▶ ☐
H Check type of organization: ☒ Section 501(c)(3) exempt private foundation ☐ Section 4947(a)(1) nonexempt charitable trust ☐ Other taxable private foundation	**E** If private foundation status was terminated under section 507(b)(1)(A), check here ▶ ☐
I Fair market value of all assets at end of year *(from Part II, col (c), line 16)* ▶$ 29,492,008. **J** Accounting method: ☒ Cash ☐ Accrual ☐ Other (specify) *(Part I, column (d) must be on cash basis)*	**F** If the foundation is in a 60-month termination under section 507(b)(1)(B), check here ▶ ☐

Part I **Analysis of Revenue and Expenses** (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a))

		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
Revenue	1 Contributions, gifts, grants, etc., received	162,079.		N/A	
	2 Check ▶ ☐ if the foundation is not required to attach Sch B				
	3 Interest on savings and temporary cash investments				
	4 Dividends and interest from securities	1,300,566.	1,300,566.		STATEMENT 1
	5a Gross rents				
	b Net rental income or (loss)				
	6a Net gain or (loss) from sale of assets not on line 10	<547,248.>			
	b Gross sales price for all assets on line 6a 5,325,126.				
	7 Capital gain net income (from Part IV, line 2)		0.		
	8 Net short-term capital gain				
	9 Income modifications				
	10a Gross sales less returns and allowances				
	b Less Cost of goods sold				
	c Gross profit or (loss)				
	11 Other income				
	12 **Total** Add lines 1 through 11	915,397.	1,300,566.		
Operating and Administrative Expenses	13 Compensation of officers, directors, trustees, etc	0.	0.		0.
	14 Other employee salaries and wages				
	15 Pension plans, employee benefits				
	16a Legal fees STMT 2	5,000.	0.		5,000.
	b Accounting fees STMT 3	2,700.	270.		2,430.
	c Other professional fees				
	17 Interest				
	18 Taxes STMT 4	4,109.	0.		4,109.
	19 Depreciation and depletion	13,722.	0.		
	20 Occupancy				
	21 Travel, conferences, and meetings				
	22 Printing and publications				
	23 Other expenses STMT 5	297,829.	0.		297,826.
	24 **Total operating and administrative expenses** Add lines 13 through 23	323,360.	270.		309,365.
	25 Contributions, gifts, grants paid	1,597,937.			1,597,937.
	26 **Total expenses and disbursements.** Add lines 24 and 25	1,921,297.	270.		1,907,302.
	27 Subtract line 26 from line 12:				
	a Excess of revenue over expenses and disbursements	<1,005,900.>			
	b **Net investment income** (if negative, enter -0-)		1,300,296.		
	c **Adjusted net income** (if negative, enter -0-)			N/A	

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10060710 800939 PAL1072 2016.03040 SHRINERS OF RHODE ISLAND CH PAL10721

Part II Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only

		Beginning of year	End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value
Assets	1 Cash - non-interest-bearing	140,217.	779,774.	779,774.
	2 Savings and temporary cash investments			
	3 Accounts receivable ▶			
	Less: allowance for doubtful accounts ▶			
	4 Pledges receivable ▶			
	Less: allowance for doubtful accounts ▶			
	5 Grants receivable			
	6 Receivables due from officers, directors, trustees, and other disqualified persons			
	7 Other notes and loans receivable ▶			
	Less allowance for doubtful accounts ▶			
	8 Inventories for sale or use			
	9 Prepaid expenses and deferred charges			
	10a Investments - U S. and state government obligations			
	b Investments - corporate stock STMT 7	15,992,526.	15,076,027.	19,178,390.
	c Investments - corporate bonds STMT 8	6,237,274.	5,811,823.	5,881,262.
	11 Investments - land, buildings, and equipment basis ▶			
	Less accumulated depreciation ▶			
	12 Investments - mortgage loans			
	13 Investments - other STMT 9	2,462,291.	2,278,299.	1,990,955.
	14 Land, buildings, and equipment: basis ▶ 177,752.			
	Less accumulated depreciation STMT 10 ▶ 117,259.	74,215.	60,493.	60,492.
	15 Other assets (describe ▶ STATEMENT 11)	100,000.	1,467,803.	1,601,135.
	16 Total assets (to be completed by all filers - see the instructions. Also, see page 1, item I)	25,006,523.	25,474,219.	29,492,008.
Liabilities	17 Accounts payable and accrued expenses			
	18 Grants payable			
	19 Deferred revenue			
	20 Loans from officers, directors, trustees, and other disqualified persons			
	21 Mortgages and other notes payable			
	22 Other liabilities (describe ▶)			
	23 Total liabilities (add lines 17 through 22)	0.	0.	
Net Assets or Fund Balances	Foundations that follow SFAS 117, check here ▶ ☐ and complete lines 24 through 26 and lines 30 and 31			
	24 Unrestricted			
	25 Temporarily restricted			
	26 Permanently restricted			
	Foundations that do not follow SFAS 117, check here ▶ ☒ and complete lines 27 through 31			
	27 Capital stock, trust principal, or current funds	0.	0.	
	28 Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.	
	29 Retained earnings, accumulated income, endowment, or other funds	25,006,523.	25,474,219.	
	30 Total net assets or fund balances	25,006,523.	25,474,219.	
	31 Total liabilities and net assets/fund balances	25,006,523.	25,474,219.	

Part III Analysis of Changes in Net Assets or Fund Balances

1	Total net assets or fund balances at beginning of year - Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)	1	25,006,523.
2	Enter amount from Part I, line 27a	2	<1,005,900.>
3	Other increases not included in line 2 (itemize) ▶ SEE STATEMENT 6	3	1,473,596.
4	Add lines 1, 2, and 3	4	25,474,219.
5	Decreases not included in line 2 (itemize) ▶	5	0.
6	Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30	6	25,474,219.

Part IV Capital Gains and Losses for Tax on Investment Income

	(a) List and describe the kind(s) of property sold (e.g , real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.)	(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo , day, yr.)	(d) Date sold (mo., day, yr.)
1a	INVESTMENTS	P		
b				
c				
d				
e				

	(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
a	5,325,126.		5,872,374.	<547,248.>
b				
c				
d				
e				

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69

	(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	(l) Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col. (h))
a				<547,248.>
b				
c				
d				
e				

2 Capital gain net income or (net capital loss) { If gain, also enter in Part I, line 7 / If (loss), enter -0- in Part I, line 7 } 2 <547,248.>

3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6):
If gain, also enter in Part I, line 8, column (c)
If (loss), enter -0- in Part I, line 8 } 3 N/A

Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income.)

If section 4940(d)(2) applies, leave this part blank.

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? ☐ Yes ☒ No

If "Yes," the foundation does not qualify under section 4940(e) Do not complete this part.

1 Enter the appropriate amount in each column for each year, see the instructions before making any entries.

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col. (b) divided by col. (c))
2015	1,777,513.	27,282,251.	.065153
2014	1,780,091.	29,122,619.	.061124
2013	1,574,908.	27,250,990.	.057793
2012	1,515,109.	26,152,162.	.057934
2011	1,460,258.	25,156,385.	.058047

2	**Total** of line 1, column (d)	2	.300051
3	Average distribution ratio for the 5-year base period - divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years	3	.060010
4	Enter the net value of noncharitable-use assets for 2016 from Part X, line 5	4	24,948,639.
5	Multiply line 4 by line 3	5	1,497,168.
6	Enter 1% of net investment income (1% of Part I, line 27b)	6	13,003.
7	Add lines 5 and 6	7	1,510,171.
8	Enter qualifying distributions from Part XII, line 4	8	1,907,302.

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the Part VI instructions.

Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see instructions)

1a	Exempt operating foundations described in section 4940(d)(2), check here ▶ ☐ and enter "N/A" on line 1. Date of ruling or determination letter: ______ (attach copy of letter if necessary-see instructions)			
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here ▶ ☒ and enter 1% of Part I, line 27b		1	13,003.
c	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b).			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)		2	0.
3	Add lines 1 and 2		3	13,003.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)		4	0.
5	**Tax based on investment income.** Subtract line 4 from line 3. If zero or less, enter -0-		5	13,003.
6	Credits/Payments:			
a	2016 estimated tax payments and 2015 overpayment credited to 2016	6a 7,524.		
b	Exempt foreign organizations - tax withheld at source	6b		
c	Tax paid with application for extension of time to file (Form 8868)	6c 6,000.		
d	Backup withholding erroneously withheld	6d		
7	Total credits and payments. Add lines 6a through 6d		7	13,524.
8	Enter any **penalty** for underpayment of estimated tax. Check here ☒ if Form 2220 is attached		8	113.
9	**Tax due.** If the total of lines 5 and 8 is more than line 7, enter **amount owed** ▶		9	
10	**Overpayment** If line 7 is more than the total of lines 5 and 8, enter the **amount overpaid** ▶		10	408.
11	Enter the amount of line 10 to be: **Credited to 2017 estimated tax** ▶ 408. **Refunded** ▶		11	0.

Part VII-A Statements Regarding Activities

		Line	Yes	No
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		X
b	Did it spend more than $100 during the year (either directly or indirectly) for political purposes (see instructions for the definition)?	1b		X
	*If the answer is "Yes" to **1a** or **1b**, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities*			
c	Did the foundation file **Form 1120-POL** for this year?	1c		X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: **(1)** On the foundation. ▶ $ 0. **(2)** On foundation managers. ▶ $ 0.			
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. ▶ $ 0.			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS? *If "Yes," attach a detailed description of the activities*	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		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? N/A	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year? *If "Yes," attach the statement required by General Instruction T*	5		X
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 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	
8a	Enter the states to which the foundation reports or with which it is registered (see instructions) ▶ RI			
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (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 2016 or the taxable year beginning in 2016 (see instructions for Part XIV)? *If "Yes," complete Part XIV*	9		X
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses	10		X

Part VII-A Statements Regarding Activities *(continued)*

			Yes	No
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement (see instructions)	12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	

Website address ▶ NONE

14 The books are in care of ▶ A SHEFFIELD REYNOLDS Telephone no. ▶ 401 467 7100

Located at ▶ ONE RHODES PLACE, CRANSTON, RI ZIP+4 ▶ 02905

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 ▶ 15 N/A

			Yes	No
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		X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the foreign country ▶			

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

File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.

				Yes	No
1a	During the year did the foundation (either directly or indirectly):				
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	☐ Yes ☒ No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?	☐ Yes ☒ No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	☐ Yes ☒ No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	☐ Yes ☒ No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)?	☐ Yes ☒ No			
	(6) Agree to pay money or property to a government official? (**Exception** Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days)	☐ Yes ☒ No			
b	If any answer is "Yes" to 1a(1)-(6), did **any** of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	N/A	1b		
	Organizations relying on a current notice regarding disaster assistance check here	▶ ☐			
c	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2016?		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)):				
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?	☐ Yes ☒ No			
	If "Yes," list the years ▶ ____, ____, ____, ____				
b	Are there any years listed in 2a for which the foundation is **not** applying the provisions of section 4942(a)(2) (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.)	N/A	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. ▶ ____, ____, ____, ____				
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?	☐ Yes ☒ No			
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.)*	N/A	3b		
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 charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2016?		4b		X

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

			Yes	No
5a During the year did the foundation pay or incur any amount to:				
(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?	☐ Yes ☒ No			
(2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, any voter registration drive?	☐ Yes ☒ No			
(3) Provide a grant to an individual for travel, study, or other similar purposes?	☐ Yes ☒ No			
(4) Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? (see instructions)	☐ Yes ☒ No			
(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?	☐ Yes ☒ No			
b If any answer is "Yes" to 5a(1)-(5), did **any** of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)?	N/A	5b		
Organizations relying on a current notice regarding disaster assistance check here	▶ ☐			
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? N/A	☐ Yes ☐ No			
If "Yes," attach the statement required by Regulations section 53.4945-5(d)				
6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	☐ Yes ☒ No			
b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		6b		X
If "Yes" to 6b, file Form 8870				
7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?	☐ Yes ☒ No			
b If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction?	N/A	7b		

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

1 List all officers, directors, trustees, foundation managers and their compensation.

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
A SHEFFIELD REYNOLDS 425 MESHANTICUT VALLEY PARKWAY APT 10 CRANSTON, RI 02920	TREASURER 0.00	0.	0.	0.
LEON KNUDSEN 348 PLAINFIELD PIKE GREENE, RI 02827	TRUSTEE 0.00	0.	0.	0.
JOHN TAKIAN JR 12 HYBRID DR CRANSTON, RI 02920	TRUSTEE 0.00	0.	0.	0.
ROBERT H WILLIAMS 109 FRANCIS AVE PAWTUCKET, RI 02860	TRUSTEE 0.00	0.	0.	0.

2 Compensation of five highest-paid employees (other than those included on line 1). 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
NONE				

Total number of other employees paid over $50,000 ▶ 0

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

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

(a) Name and address of each person paid more than $50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over $50,000 for professional services ▶		0

Part IX-A Summary of Direct Charitable Activities

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1 N/A	
2	
3	
4	

Part IX-B Summary of Program-Related Investments

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.	Amount
1 N/A	
2	
All other program-related investments. See instructions. 3	
Total. Add lines 1 through 3 ▶	0.

Part X Minimum Investment Return (All domestic foundations must complete this part Foreign foundations, see instructions)

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc , purposes:			
a	Average monthly fair market value of securities		1a	24,689,010.
b	Average of monthly cash balances		1b	639,558.
c	Fair market value of all other assets		1c	
d	**Total** (add lines 1a, b, and c)		1d	25,328,568.
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation)	1e 0.		
2	Acquisition indebtedness applicable to line 1 assets		2	0.
3	Subtract line 2 from line 1d		3	25,328,568.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)		4	379,929.
5	**Net value of noncharitable-use assets** Subtract line 4 from line 3. Enter here and on Part V, line 4		5	24,948,639.
6	**Minimum investment return** Enter 5% of line 5		6	1,247,432.

Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here ▶ ☐ and do not complete this part.)

1	Minimum investment return from Part X, line 6		1	1,247,432.
2a	Tax on investment income for 2016 from Part VI, line 5	2a 13,003.		
b	Income tax for 2016 (This does not include the tax from Part VI.)	2b		
c	Add lines 2a and 2b		2c	13,003.
3	Distributable amount before adjustments. Subtract line 2c from line 1		3	1,234,429.
4	Recoveries of amounts treated as qualifying distributions		4	0.
5	Add lines 3 and 4		5	1,234,429.
6	Deduction from distributable amount (see instructions)		6	0.
7	**Distributable amount** as adjusted. Subtract line 6 from line 5 Enter here and on Part XIII, line 1		7	1,234,429.

Part XII Qualifying Distributions (see instructions)

1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
a	Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26	1a	1,907,302.
b	Program-related investments - total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
a	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	**Qualifying distributions** Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	1,907,302.
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	5	13,003.
6	**Adjusted qualifying distributions** Subtract line 5 from line 4	6	1,894,299.

Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years.

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2015	(c) 2015	(d) 2016
1 Distributable amount for 2016 from Part XI, line 7				1,234,429.
2 Undistributed income, if any, as of the end of 2016				
a Enter amount for 2015 only			0.	
b Total for prior years: ____ , ____ , ____		0.		
3 Excess distributions carryover, if any, to 2016				
a From 2011 236,339.				
b From 2012 245,721.				
c From 2013 254,726.				
d From 2014 371,018.				
e From 2015 443,254.				
f **Total** of lines 3a through e	1,551,058.			
4 Qualifying distributions for 2016 from Part XII, line 4: ▶ $ 1,907,302.				
a Applied to 2015, but not more than line 2a			0.	
b Applied to undistributed income of prior years (Election required - see instructions)		0.		
c Treated as distributions out of corpus (Election required - see instructions)	0.			
d Applied to 2016 distributable amount				1,234,429.
e Remaining amount distributed out of corpus	672,873.			
5 Excess distributions carryover applied to 2016 (If an amount appears in column (d), the same amount must be shown in column (a).)	0.			0.
6 **Enter the net total of each column as indicated below:**				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	2,223,931.			
b Prior years' undistributed income. Subtract line 4b from line 2b		0.		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b. Taxable amount - see instructions		0.		
e Undistributed income for 2015. Subtract line 4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2016. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2017				0.
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions)	0.			
8 Excess distributions carryover from 2011 not applied on line 5 or line 7	236,339.			
9 **Excess distributions carryover to 2017** Subtract lines 7 and 8 from line 6a	1,987,592.			
10 Analysis of line 9:				
a Excess from 2012 245,721.				
b Excess from 2013 254,726.				
c Excess from 2014 371,018.				
d Excess from 2015 443,254.				
e Excess from 2016 672,873.				

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

1 a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2016, enter the date of the ruling ▶

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

	Tax year	Prior 3 years			
	(a) 2016	(b) 2015	(c) 2014	(d) 2013	(e) Total
2 a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed					
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					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test - enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed					
c "Support" alternative test - enter: (1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from an exempt organization					
(4) Gross investment income					

Part XV Supplementary Information (Complete this part only if the foundation had $5,000 or more in assets at any time during the year-see instructions.)

1 **Information Regarding Foundation Managers:**

a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than $5,000). (See section 507(d)(2).)

NONE

b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest.

NONE

2 **Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:**

Check here ▶ ☐ if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d.

a The name, address, and telephone number or e-mail address of the person to whom applications should be addressed:

SEE STATEMENT 12

b The form in which applications should be submitted and information and materials they should include:

c Any submission deadlines:

d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors:

Part XV Supplementary Information (continued)

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

Recipient: Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a Paid during the year				
SEE ATTACHED LIST ONE RHODES PLACE CRANSTON, RI 02905	NONE	NONE	CHARITABLE CONTRIBUTIONS	515,531.
SEE ATTACHED LIST ONE RHODES PLACE CRANSTON, RI 02905	NONE	NONE	HOSPITAL EXPENSE HOSPITAL EXPENSE	1,076,858.
SEE ATTACHED LIST ONE RHODES PLACE CRANSTON, RI 02905	NONE	NONE	PATIENT TRANSPORT	5,548.
Total			▶ 3a	1,597,937.
b Approved for future payment				
NONE				
Total			▶ 3b	0.

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated.	Unrelated business income		Excluded by section 512, 513, or 514		(e)
	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income
1 Program service revenue:					
a					
b					
c					
d					
e					
f					
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash investments					
4 Dividends and interest from securities			14	1,300,566.	
5 Net rental income or (loss) from real estate:					
a Debt-financed property					
b Not debt-financed property					
6 Net rental income or (loss) from personal property					
7 Other investment income					
8 Gain or (loss) from sales of assets other than inventory			18	<547,248.>	
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue:					
a					
b					
c					
d					
e					
12 Subtotal. Add columns (b), (d), and (e)		0.		753,318.	0.

13 Total. Add line 12, columns (b), (d), and (e) 13 753,318.

(See worksheet in line 13 instructions to verify calculations.)

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

Line No ▼	Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes).

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

			Yes	No
1	Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?			
a	Transfers from the reporting foundation to a noncharitable exempt organization of:			
	(1) Cash	1a(1)		X
	(2) Other assets	1a(2)		X
b	Other transactions:			
	(1) Sales of assets to a noncharitable exempt organization	1b(1)		X
	(2) Purchases of assets from a noncharitable exempt organization	1b(2)		X
	(3) Rental of facilities, equipment, or other assets	1b(3)		X
	(4) Reimbursement arrangements	1b(4)		X
	(5) Loans or loan guarantees	1b(5)		X
	(6) Performance of services or membership or fundraising solicitations	1b(6)		X
c	Sharing of facilities, equipment, mailing lists, other assets, or paid employees	1c		X

d If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received.

(a) Line no	(b) Amount involved	(c) Name of noncharitable exempt organization	(d) Description of transfers, transactions, and sharing arrangements
		RHODE ISLAND SHRINERS	SEE STATEMENT 13
1C	161,949.	A.A.O.N.M.S.	

2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? [X] Yes [ ] No

b If "Yes," complete the following schedule

(a) Name of organization	(b) Type of organization	(c) Description of relationship
RHODE ISLAND SHRINERS		SEE STATEMENT 14
A.A.O.N.M.S.	501(C)10	

Sign Here

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge

Paul W. Beatty | 8/31/2017 | TRUSTEE

Signature of officer or trustee | Date | Title

May the IRS discuss this return with the preparer shown below (see instr)? [X] Yes [ ] No

Paid Preparer Use Only

Print/Type preparer's name	Preparer's signature	Date	Check [ ] if self-employed	PTIN
GREGORY PORCARO, CPA/ABV MST	GREGORY PORCARO,	07/10/17		P00633303
Firm's name ▶ OTRANDO, PORCARO & ASSOCIATES, LTD.			Firm's EIN ▶ 05-0405576	
Firm's address ▶ 2258 POST ROAD WARWICK, RI 02886			Phone no (401)739-9250	

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

2016

Name of the organization	Employer identification number
SHRINERS OF RHODE ISLAND CHARITIES TRUST	22-3191072

Organization type (check one)

Filers of:	**Section:**
Form 990 or 990-EZ	☐ 501(c)( ) (enter number) organization
	☐ 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation
	☐ 527 political organization
Form 990-PF	☒ 501(c)(3) exempt private foundation
	☐ 4947(a)(1) nonexempt charitable trust treated as a private foundation
	☐ 501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule.**
Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See instructions

General Rule

☒ For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling $5,000 or more (in money or property) from any one contributor Complete Parts I and II See instructions for determining a contributor's total contributions

Special Rules

☐ For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of **(1)** $5,000 or **(2)** 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1 Complete Parts I and II

☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than $1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals Complete Parts I, II, and III

☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc , purposes, but no such contributions totaled more than $1,000 If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc , purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc , contributions totaling $5,000 or more during the year ▶ $ ________

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't 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 doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

Name of organization	Employer identification number
SHRINERS OF RHODE ISLAND CHARITIES TRUST	22-3191072

Part I **Contributors** (See instructions). Use duplicate copies of Part I if additional space is needed

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	ABBEY FRANCIS LAWTON ONE CITIZENS PLAZA PROVIDENCE, RI 02903	$ 145,609.	Person [X] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions)
2	HENRY STONE & AF PRESTON 225 FRANKLIN STREET BOSTON, MA 02110	$ 3,469.	Person [X] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions)
3	PAULINE PATT 225 FRANKLIN STREET BOSTON, MA 02110	$ 11,570.	Person [X] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions)
		$	Person [ ] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions)
		$	Person [ ] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions)
		$	Person [ ] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.)

Name of organization	Employer identification number
SHRINERS OF RHODE ISLAND CHARITIES TRUST	22-3191072

Part II Noncash Property (See instructions) Use duplicate copies of Part II if additional space is needed

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		$	

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		$	

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		$	

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		$	

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		$	

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		$	

Name of organization	Employer identification number
SHRINERS OF RHODE ISLAND CHARITIES TRUST	22-3191072

Part III *Exclusively* religious, charitable, etc , contributions to organizations described in section 501(c)(7), (8), or (10) that total more than $1,000 for the year from any one contributor Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc , contributions of $1,000 or less for the year (Enter this info once) ▶ $ ______
Use duplicate copies of Part III if additional space is needed

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift

Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift

Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift

Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift

Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

FORM 990-PF DIVIDENDS AND INTEREST FROM SECURITIES STATEMENT 1

SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDENDS	(A) REVENUE PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME
NOTE RECEIVABLE	44,208.	0.	44,208.	44,208.	
UBS FINANCIAL SERVICES INC	1,256,358.	0.	1,256,358.	1,256,358.	
TO PART I, LINE 4	1,300,566.	0.	1,300,566.	1,300,566.	

FORM 990-PF LEGAL FEES STATEMENT 2

DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
LEGAL	5,000.	0.		5,000.
TO FM 990-PF, PG 1, LN 16A	5,000.	0.		5,000.

FORM 990-PF ACCOUNTING FEES STATEMENT 3

DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
ACCOUNTING	2,700.	270.		2,430.
TO FORM 990-PF, PG 1, LN 16B	2,700.	270.		2,430.

FORM 990-PF TAXES STATEMENT 4

DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
FEDERAL EXCISE TAX	0.	0.		0.
FOREIGN TAX EXPENSE	4,109.	0.		4,109.
TO FORM 990-PF, PG 1, LN 18	4,109.	0.		4,109.

FORM 990-PF OTHER EXPENSES STATEMENT 5

DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
MANAGEMENT FEES	161,951.	0.		161,948.
MEETINGS	5,535.	0.		5,535.
OFFICE EXPENSES	15,773.	0.		15,773.
INVESTMENT FEES	114,570.	0.		114,570.
TO FORM 990-PF, PG 1, LN 23	297,829.	0.		297,826.

FORM 990-PF OTHER INCREASES IN NET ASSETS OR FUND BALANCES STATEMENT 6

DESCRIPTION	AMOUNT
HODGES LAWTON TRUST ASSIGNED RHODES NOTE TO TRUST	1,473,596.
TOTAL TO FORM 990-PF, PART III, LINE 3	1,473,596.

FORM 990-PF CORPORATE STOCK STATEMENT 7

DESCRIPTION	BOOK VALUE	FAIR MARKET VALUE
	15,076,027.	19,178,390.
TOTAL TO FORM 990-PF, PART II, LINE 10B	15,076,027.	19,178,390.

FORM 990-PF CORPORATE BONDS STATEMENT 8

DESCRIPTION	BOOK VALUE	FAIR MARKET VALUE
	5,811,823.	5,881,262.
TOTAL TO FORM 990-PF, PART II, LINE 10C	5,811,823.	5,881,262.

FORM 990-PF OTHER INVESTMENTS STATEMENT 9

DESCRIPTION	VALUATION METHOD	BOOK VALUE	FAIR MARKET VALUE
	COST	2,278,299.	1,990,955.
TOTAL TO FORM 990-PF, PART II, LINE 13		2,278,299.	1,990,955.

FORM 990-PF DEPRECIATION OF ASSETS NOT HELD FOR INVESTMENT STATEMENT 10

DESCRIPTION	COST OR OTHER BASIS	ACCUMULATED DEPRECIATION	BOOK VALUE
VARIOUS OFFICE EQUIPMENT	4,332.	4,332.	0.
IBM WHEELWRITER 1000	525.	525.	0.
OKIDATA DOT MATRIX	779.	779.	0.
IBM WHEELWRITER 3000	870.	870.	0.
VARIOUS COMPUTERS	19,037.	19,037.	0.
LAND	45,300.	0.	45,300.
LAPTOP	1,750.	1,750.	0.
SOFTWARE	1,100.	1,100.	0.
VARIOUS COMPUTER EQUIPMENT	1,252.	1,252.	0.
LAPTOP COMPUTER FOR RECORDER	1,450.	1,450.	0.
NEW COMPUTER	680.	680.	0.
LAND	5,000.	0.	5,000.
2010 CHRYSLER VAN	27,067.	27,067.	0.
2013 CHRYSLER T&C 2C4RC1BGHDR614124	35,981.	30,583.	5,398.
2013 CHRYSLER T&C 2C4RC1BG2DR632573	31,889.	27,106.	4,783.
COMPUTER AND PRINTER	740.	728.	12.
TOTAL TO FM 990-PF, PART II, LN 14	177,752.	117,259.	60,493.

FORM 990-PF OTHER ASSETS STATEMENT 11

DESCRIPTION	BEGINNING OF YR BOOK VALUE	END OF YEAR BOOK VALUE	FAIR MARKET VALUE
INVESTMENT-ANNUITY	100,000.	100,000.	233,332.
RHODES ON THE PAWTUXET ASSIGNED NOTE REC	0.	1,367,803.	1,367,803.
TO FORM 990-PF, PART II, LINE 15	100,000.	1,467,803.	1,601,135.

FORM 990-PF GRANT APPLICATION SUBMISSION INFORMATION STATEMENT 12
PART XV, LINES 2A THROUGH 2D

NAME AND ADDRESS OF PERSON TO WHOM APPLICATIONS SHOULD BE SUBMITTED

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

TELEPHONE NUMBER	NAME OF GRANT PROGRAM
401 467 7100	NONE

FORM AND CONTENT OF APPLICATIONS

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

ANY SUBMISSION DEADLINES

NONE

RESTRICTIONS AND LIMITATIONS ON AWARDS

CHARITABLE RELIEF IS GRANTED UPON BOARD APPROVAL OF REQUEST

990-PF INVOLVEMENT WITH NONCHARITABLE ORGANIZATIONS STATEMENT 13
PART XVII, LINE 1, COLUMN (D)

NAME OF NONCHARITABLE EXEMPT ORGANIZATION

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

DESCRIPTION OF TRANSFERS, TRANSACTIONS, AND SHARING ARRANGEMENTS

MANAGEMENT FEES/ SHARING OF ASSETS

990-PF AFFILIATION WITH TAX-EXEMPT ORGANIZATIONS STATEMENT 14
PART XVII, LINE 2, COLUMN (C)

NAME OF AFFILIATED OR RELATED ORGANIZATION

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

DESCRIPTION OF RELATIONSHIP WITH AFFILIATED OR RELATED ORGANIZATION

COMMON DIRECTORS

2016 DEPRECIATION AND AMORTIZATION REPORT

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Asset No	Description	Date Acquired	Method	Life	Conv	Line No	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	* Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
	OFFICE EQUIPMENT														
1	VARIOUS OFFICE EQUIPMENT	11/21/94	SL	6.00		16	4,332.				4,332.	4,332.		0.	4,332.
2	IBM WHEELWRITER 1000	02/15/95	SL	5.00		16	525.				525.	525.		0.	525.
3	OKIDATA DOT MATRIX	06/12/95	SL	5.00		16	779.				779.	779.		0.	779.
4	IBM WHEELWRITER 3000	12/19/97	SL	5.00		16	870.				870.	870.		0.	870.
	* 990-PF PG 1 TOTAL - OFFICE EQUIPMENT						6,506.				6,506.	6,506.		0.	6,506.
	COMPUTER EQUIPMENT														
5	VARIOUS COMPUTERS	12/31/91	SL	5.00		16	19,037.				19,037.	19,037.		0.	19,037.
17	LAPTOP	07/01/03	SL	5.00		16	1,750.				1,750.	1,750.		0.	1,750.
18	SOFTWARE	09/15/03	SL	5.00		16	1,100.				1,100.	1,100.		0.	1,100.
20	VARIOUS COMPUTER EQUIPMENT	08/12/05	SL	5.00		16	1,252.				1,252.	1,252.		0.	1,252.
21	LAPTOP COMPUTER FOR RECORDER	02/27/06	SL	5.00		16	1,450.				1,450.	1,450.		0.	1,450.
23	NEW COMPUTER	02/21/07	SL	5.00		16	680.				680.	680.		0.	680.
29	COMPUTER AND PRINTER	02/06/12	SL	5.00		16	740.				740.	580.		148.	728.
	* 990-PF PG 1 TOTAL - COMPUTER EQUIPMENT						26,009.				26,009.	25,849.		148.	25,997.
	MOTOR VEHICLES														
26	2010 CHRYSLER VAN	12/14/10	SL	5.00		16	27,067.				27,067.	27,067.		0.	27,067.
27	2013 CHRYSLER T&C 2C4RC1BGHDR614124	10/03/12	SL	5.00		16	35,981.				35,981.	23,387.		7,196.	30,583.

628111 04-01-16

(D) - Asset disposed

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

2016 DEPRECIATION AND AMORTIZATION REPORT

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Asset No	Description	Date Acquired	Method	Life	Conv	Line No	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	* Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
28	2013 CHRYSLER T&C 2C4RC1BG2DR632573	10/13/12	SL	5.00		16	31,889.				31,889.	20,728.		6,378.	27,106.
	* 990-PF PG 1 TOTAL - MOTOR VEHICLES						94,937.				94,937.	71,182.		13,574.	84,756.
	LAND														
14	LAND	01/01/88	L				45,300.				45,300.			0.	
25	LAND	11/01/09	L				5,000.				5,000.			0.	
	* 990-PF PG 1 TOTAL - LAND						50,300.				50,300.	0.		0.	0.
	* GRAND TOTAL 990-PF PG 1 DEPR						177,752.				177,752.	103,537.		13,722.	117,259.

628111 04-01-16

(D) - Asset disposed

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

11:16 AM
10/20/16
Cash Basis

Shriners of Rhode Island Charities Trust
Contributions
As of December 31, 2016

Date	Num	Name	Memo	Paid Amount	Balance
05/19/2016	11316	Amy Quinn	Camp	899	899
09/07/2016	11762	Apple Store	13 Itunes Gift cards	1,300	2,199
05/19/2016	11312	Atlantic Furniture	Furniture - Rodriquez	640	2,839
05/05/2016	11306	Autism Project	Parillo - Camp	475	3,314
05/05/2016	11307	Bayside YMCA	Souza - YMCA	936	4,250
12/08/2016	11811	Big Brothers Big Sisters		3,500	7,750
06/09/2016	11349	Brown University	Comella - camp 2 kids	560	8,310
04/19/2016	11481	Camp Ruggles		3,000	11,310
06/22/2016	11396	Cellucci's Martial Arts & Fitness	Gardiner - Camp	225	11,535
06/27/2016	11400	Cellucci's Martial Arts & Fitness	Magnelli - Camp	225	11,760
01/07/2016	11712	Children's Dyslexia Center of RI	1st Qtr Donation	11,550	23,310
04/01/2016	11598	Children's Dyslexia Center of RI	2nd Qtr Donation	11,550	34,860
06/30/2016	11360	Children's Dyslexia Center of RI	3rd Qtr Donation	11,550	46,410
10/04/2016	11791	Children's Dyslexia Center of RI	4th Qtr Donation	11,550	57,960
09/07/2016	11766	Christina M. Cossa		400	58,360
01/07/2016	11715	Citizens Bank / MasterCard	GiveDirect.Org - Donation	1,500	59,860
03/30/2016	11556	Citizens Bank / MasterCard	Astronaut Boards LLC	272	60,132
08/03/2016	11450	Citizens Bank / MasterCard	WIKE - Bike Trailer	1,028	61,160
08/03/2016	11450	Citizens Bank / MasterCard	Big Surf - Surf Board for PT	500	61,660
09/07/2016	11761	Citizens Bank / MasterCard	Sensoryedge	176	61,836
09/07/2016	11761	Citizens Bank / MasterCard	Fun N Function	275	62,111
09/07/2016	11761	Citizens Bank / MasterCard	Zchair LLC	1,155	63,266
04/19/2016	11630	Connecticut Burns Camp	Grant	5,000	68,266
04/19/2016	11485	Cranston YMCA	Camp - Gbehan	900	69,166
04/19/2016	11488	Cranston YMCA	Camp - Rivera	760	69,926
05/05/2016	11305	Cranston YMCA	Nunez - Camp	850	70,776
06/09/2016	11356	Cranston YMCA	Rosario - camp 2 kids	1,140	71,916
10/24/2016	12157	Cranston YMCA	Santana Family Membership	402	72,318
01/04/2016	11659	Dana Farber		40,000	112,318
12/08/2016	11812	Day One		10,000	122,318

Shriners of Rhode Island Charities Trust
Contributions
As of December 31, 2016

Date	Num	Name	Memo	Paid Amount	Balance
07/06/2016	11402	Dreamland Learning Center	Rosario - Camp 2 kids	1,180	123,498
06/22/2016	11395	East Bay Head Start	Nesbit - Camp	810	124,308
05/05/2016	11645	East Providence Boys & Girls Club	Ross, Lindsey - Camp	540	124,848
01/31/2016	11250-adj	East Side YMCA	void check in 2015 - cleared in 2016	732	125,580
12/08/2016	11816	Foster Forward		2,000	127,580
05/05/2016	11642	Gallaudet University	Silva - Camp	750	128,330
11/14/2016	240674	Greater Providence YMCA	Refund Camp - overpaymt	(383)	127,947
01/04/2016	11663	Hasbro Children's Hospital		25,000	152,947
04/19/2016	11483	Hasbro Children's Hospital	Asthma Camp	5,000	157,947
05/05/2016	11643	Heritage Park YMCA	Ross, Jillian - Camp	840	158,787
04/19/2016	11482	Horses Bring Hope	Camp/HLC Kids	4,750	163,537
12/08/2016	11814	Insight		5,000	168,537
05/05/2016	11641	Jewish Alliance of RI	Reynolds	891	169,428
06/09/2016	11353	John Hope Settlement House	Ayala - camp 1 kid	690	170,118
08/03/2016	11446	John Hope Settlement House	Annstazzi Corpening - camp	800	170,918
08/03/2016	11447	John Hope Settlement House	Nicholas Gabriel - camp	270	171,188
08/23/2016	11755	Johnny Cake Center of Westerly	Pawucket Red Sox Charity	5,000	176,188
04/19/2016	11487	Kent County YMCA	Camp - Morin	1,995	178,183
04/19/2016	11489	Kent County YMCA	Camp - Jones	1,716	179,899
04/19/2016	11490	Kent County YMCA	Camp - Knowles	3,400	183,299
05/05/2016	11644	Kent County YMCA	Sutherland - Camp	705	184,004
05/05/2016	11308	Kent County YMCA	Foster - Camp	1,540	185,544
05/19/2016	11313	Kent County YMCA	Camp - Hobbs	510	186,054
06/09/2016	11348	Kent County YMCA	Feeney - camp 2 kids	1,410	187,464
06/09/2016	11351	Kent County YMCA	Schaeffer - camp 1 kid	825	188,289
06/09/2016	11352	Kent County YMCA	Crosby - camp 2 kids	1,025	189,314
06/09/2016	11354	Kent County YMCA	Iannotti - camp 1 kid	704	190,018
06/09/2016	11355	Kent County YMCA	Khan - camp 2 kids	1,410	191,428
06/22/2016	11397	Kent County YMCA	Mudge - Camp	784	192,212
06/22/2016	11393	Kent County YMCA	Finneran - Camp	1,200	193,412

Shriners of Rhode Island Charities Trust
Contributions
As of December 31, 2016

Date	Num	Name	Memo	Paid Amount	Balance
06/22/2016	11394	Kent County YMCA	Sarit - Camp	735	194,147
06/27/2016	11399	Kent County YMCA	Bliss - Camp	705	194,852
05/05/2016	11637	Kingston Camp	Elles	490	195,342
08/24/2016	11757	Masonic Youth Foundation Inc	Insurance donation	7,482	202,824
06/09/2016	11350	Mastery Martial Arts	Comella	610	203,434
09/07/2016	11763	Mr & Mrs Michael Hebert	Grant towards a handicapped accessible vehicl	4,000	207,434
04/19/2016	11484	Narragansett Council BSA-001	Grant	2,500	209,934
05/19/2016	11315	Narragansett Council BSA-001	Camp - Quinn	560	210,494
05/19/2016	11311	Narragansett Parks & Recreation	Camp - Unzeta	840	211,334
05/19/2016	11314	Newman YMCA	Camp - Nascimento	390	211,724
06/22/2016	11392	Newport County YMCA	Ferreira - Camp	480	212,204
04/19/2016	11505	Pawtucket RED SOX	Invoice No. 715 - 2015 Sponsorship Agreement	8,900	221,104
05/05/2016	11640	Pawtucket YMCA	Bracewell	840	221,944
06/09/2016	11357	Pawtucket YMCA	Ribeiro - Y Membrship	720	222,664
06/27/2016	11398	Pawtucket YMCA	Bass - Camp	366	223,030
08/03/2016	11448	Pawtucket YMCA	Godinez - Membership	552	223,582
12/08/2016	11807	Providence Center		16,000	239,582
10/19/2016	12237	Rhode Island Shriner's Ladies	Children's Christmas Breakfast with Santa	3,000	242,582
04/01/2016	11595	RI Masonic Youth Foundation, Inc.	2016 Donation Buttonwoods	64,672	307,254
04/19/2016	11629	Ride-Away Corporation	for - Mr. David Harris - Handicap Van Lift	4,000	311,254
01/04/2016	11660	Ronald McDonald House		25,000	336,254
12/08/2016	11817	Rhode Island Food Bank		3,500	339,754
12/08/2016	11809	Salvation Army		5,000	344,754
01/04/2016	11665	Shriners Hospital for Children		25,000	369,754
05/05/2016	11638	Shriners Hospital for Children		50,000	419,754
05/05/2016	11639	Shriners Hospital/Springfield		25,000	444,754
11/14/2016	12187	Steven Colantuono	funding towards a handicapped accessible veh	4,000	448,754
12/08/2016	11844	St Mary's Home for Children		55,000	503,754
12/08/2016	11815	Tech Access		5,000	508,754
12/08/2016	11813	Trudeau Center		5,500	514,254

Shriners of Rhode Island Charities Trust
Contributions
As of December 31, 2016

Date	Num	Name	Memo	Paid Amount	Balance
06/22/2016	11391	Warwick Boys & Girls Camp	Chadronet - Camp	700	514,954
06/27/2016	11401	West Bay YMCA	Magnelli - Camp	88	515,041
12/08/2016	11818	Woonsocket Head Start		1,000	516,041
10/04/2016	239770	YMCA	Refund - Campership	(510)	515,531
				515,531	515,531
				515,531	515,531
				515,531	515,531

Shriners of Rhode Island Charities Trust
Hospital Expense
As of December 31, 2016

	12/31/2016
5010-00 · Hospital Expenses:5009-20 · Hosp Exp - Horse Back Riding	96,790
5010-00 · Hospital Expenses:5010-20 · Hospital Expense -Bike-Adaptiv	21,984
5010-00 · Hospital Expenses:5011-20 · Hospital Expense - Dental	3,080
5010-00 · Hospital Expenses:5012-20 · Hospital Expense -Home Medical	23,695
5010-00 · Hospital Expenses:5013-20 · Hospital Expense - P/T	12,697
5010-00 · Hospital Expenses:5014-20 · Hospital Expense - Speech and Occ Therapy	733,204
5010-00 · Hospital Expenses:5015-20 · Hospital Expense - Other	117,967
Total Other Providers Hospital Expense	1,009,416
5016-00 · Rhode Island Hospital Expense:5016-20 · RI Hospital Expense - Hearing	38,988
5016-00 · Rhode Island Hospital Expense:5017-20 · RI Hospital Expense - P/T	530
5016-00 · Rhode Island Hospital Expense:5018-20 · RI Hospital Expense -Speech-Occ.	30,212
5016-00 · Rhode Island Hospital Expense:5019-20 · RI Hospital Expense - Other	(2,288)
Total Rhode Island Hospital Provider Expense	67,442
Total Other and Rhode Island Hospital Providers Expense	1,076,858