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

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

OMB No 1545-0052 2016

Open to Public Inspection

Department of the Treasury Internal Revenue Service

F	or cal	endar year 2016 or tax year beginning	, 2016	, and ending	,	
_		THE STATE OF THE S			•	
		CHARLES & CHRISTINE SHIVERY		E	52-2274 633 Telephone number (see instructions)	
_		OATION LONGBOAT CLUB RD UNIT 29A	941-993-1184			
		SOAT KEY, FL 34228		-	741 773 1104	
1	101101	OAI REI, III 34220) (If exemption application is pending, check here	
G	Che	ck all that apply Initial return	Initial return of a forr	ner public charity	1 Foreign organizations, check here	\Box
		Final return	Amended return		Foreign organizations, theth here	\Box
		X Address change	Name change		2 Foreign organizations meeting the 85% test, check	г
H	Che	ck type of organization X Section 50	1(c)(3) exempt private f	oundation	here and attach computation	Ш
	Γ	Section 4947(a)(1) nonexempt charitable		orivate foundation	If private foundation status was terminated	$\overline{}$
ī	Fair	market value of all assets at end of year J Ac	counting method X C	ash Accrual	under section 507(b)(1)(A), check here	Ш
	(fron	Part II, column (c), line 16)	Other (specify)	_F	If the foundation is in a 60-month termination	_
	▶\$	2,297,904(Part i	, column (d) must be oi	r cash basis)	under section 507(b)(1)(B), check here	且
	Part I		(a) Revenue and	(b) Net investment	(c) Adjusted net (d) Disbursement	ts
		Expenses (The total of amounts in	expenses per books	income	income for charitable	
		columns (b), (c), and (d) may not neces- sarily equal the amounts in column (a))	purposes (cash basis only	')
_		(see instructions))			(see in see in see	
5)		1 Contributions, gifts, grants, etc., received (attach schedule)	151,453.			<u> </u>
Í		2 Check ► if the foundation is not required to attach Sch. f				<u>\$.1</u>
>		3 Interest on savings and temporary cash investments	68.	68	. N/A	
3		4 Dividends and interest from securities	55,691.	55,691		78.
		5 a Gross rents.	ļ ————————————————————————————————————			
J		D Net rental income or (loss)			为一种,我们的一种,我们的一种,我们们的一种,我们们们们们们的一种,我们们们们们们们们们们们们们们们们们们们们们们们们们们们们们们们们们们们们	Ŕ.¶
-	R	6 a Net gain or (loss) from sale of assets not on line 10	21,966.			
	E	b Gross sales price for all assets on line 6a 263, 495.	《多谷》《 《卷》			
•	Ė	7 Capital gain net income (from Part IV, line 2)	V V X X X X X X	21,966		
	N	Net short-term capital gain Income modifications			PECHIVED	. 1
•	Ē	10 a Gross sales less				700
		allowances			14 19	
		b Less Cost of goods sold	** * * * * * * * * * * * * * * * * * *	., 4 Y 2 Y X	9 MAY 1 2 2017 8	* %
		C Gross profit or (loss) (attach schedule)		*		* 1
		11 Other income (attach schedule)			OGDEN UT	¥
		SEE STATEMENT 1	838.		OGDEN, S.	*
		12 Total Add lines 1 through 11	230,016.	77,725		
		13 Compensation of officers, directors, trustees, etc.	0.			
		14 Other employee salaries and wages	<u></u>	<u> </u>		
		15 Pension plans, employee benefits				
	A	16 a Legal fees (attach schedule) b Accounting fees (attach sch) SEE ST 2	1 200			90.
	M	c Other professional fees (attach sch)	1,380.	690		, 0 .
	N	17 Interest				
	O S T R	18 Taxes (attach scheduleXsee instrs) SEE STM 3	5,472.	285		
ĺ	RR	19 Depreciation (attach	5,12.			
7	A A	schedule) and depletion.				
į	N V	20 Occupancy				
		Travel, conferences, and meetingsPrinting and publications			 	
j	A E X	22 Printing and publications 23 Other expenses (attach sch "dule)			 	
,	E E	SEE TATEMENT 4	10,285.	10,285		
	N S	24 Total operating and administ, Yive				
	E S	expenses Add lines 13 through 73	17,137.	11,260	69	90.
		25 Contributions, gifts, grants paid PART XV	102,500.		102,50	00.
		26 Total expenses and disbursemer. Add lines 24 and 25.	110 627	11 200	102.10	٥.
_		27 Subtract line 26 from line 12:	119,637.	11,260	103,19	· U ·
		a Excess of revenue over expenses				}
		and disbursements.	110,379.			
		b Net investment income (if negative, en. ^)		66, 465]
_		C Adjusted net income (if negative, enter -u	<u></u>			
_	A A .	u Danamusul, Daduction Act Notice 'n	-tructions		cuc Earm 990 DE /201	

74

Parl	11	Balance Sheets	Attached schedules and amounts in the description column should be for end-of year amounts only (See instructions)	Beginning of year			tyear
		•		(a) Book Value	(b) Book Valu	e	(c) Fair Market Value
	1	Cash – non-interest	•				
	,2		ary cash investments	76,228.	114,9	38.	114,938.
	3	Accounts receivable					
	١.	Less allowance for	doubtful accounts				
	4	Pledges receivable	daubikil assault b	-			***
	5	Less allowance for	doubtful accounts =				<u> </u>
	_	Grants receivable	and other books and allow	<u> </u>			
	6	disqualified persons (atta	cers, directors, trustees, and other ch schedule) (see instructions)				
	7	Other notes and loans rec	, ,	*		.63	737 % \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$
A	-	Less allowance for	doubtful accounts	-		XXA	
S	8	Inventories for sale	or use				
A S E T	9	Prepaid expenses a	nd deferred charges.				
Ś	10	a Investments – US obligations (attach s	and state government chedule)				
] 1	${f b}$ Investments — corporate	stock (attach schedule)	1,531,839.	1,544,0	07.	2,015,552.
	۱ ،	c Investments — corporate	bonds (attach schedule).	139,669.	173,2	95.	167,414.
	11	Investments – land, equipment basis	buildings, and				
	 	Less accumulated deprec (attach schedule)	iation •				
	12	Investments - morte	gage loans				
	13	Investments - other	r (attach schedule)				
	14	3.,			o-1919.泰夫 49.		
		Less. accumulated deprec (attach schedule)	•				
	15 16	Total assets (to be	be ► completed by all filers = Also, see page 1, item I)	1,747,736.	1,832,2	40.	2,297,904.
Ė	17	Accounts payable ar	nd accrued expenses				
Å	18	Grants payable					
В	19	Deferred revenue					
Ľ.	20	•	tors, trustees, & other disqualified persons				
T.	21	• •	s payable (attach schedule)				
ı	22	Other liabilities (des	cribe •)			
E S	23	Total liabilities (add	lines 17 through 22)	0.		0.	
		Foundations that fo and complete lines	llow SFAS 117, check here 24 through 26 and lines 30 and 31.				Section of the sectio
ΝF	24	Unrestricted					<i>,</i>
N F E U T N	25	Temporarily restricte	ed				
D	26	Permanently restrict	ed				
A B S A E L A		Foundations that do and complete lines	o not follow SFAS 117, check here X 27 through 31.				
EL	27	Capital stock, trust p	orincipal, or current funds.	19,470.	19,4	70.	
SN	28	Paid-in or capital surplus,	, or land, bldg , and equipment fund				
OE	29	Retained earnings, accum	ulated income, endowment, or other funds	1,728,266.	1,812,7	70.	
Ř S	30	Total net assets or f	fund balances (see instructions)	1,747,736.	1,832,2		
	31	Total liabilities and (see instructions)	net assets/fund balances	1,747,736.	1,832,2	40.	
Parl	EIII		ges in Net Assets or Fund Balance		2,002,2		<u> </u>
			alances at beginning of year — Part II, col		ree with		
•	end-	of-year figure reported	d on prior year's return)	(0), 00 (, - · · · · · · · · · · · · · · · · · ·	1	1,747,736.
		er amount from Part I,				2	110,379.
		increases not included in li	ne 2 (itemize)			3	
		lines 1, 2, and 3			ļ	4	1,858,115.
		ases not included in line 2 (5	25,875.
_ 6_	Iota	net assets or fund b	alances at end of year (line 4 minus line 5	o) — Part II, column (b), li	ne 30 .	6	1,832,240.

Far	CIV Capital Gains and L	losses for rax on investmen	it income			
	(a) List and describe 2-story brick wareh	the kind(s) of property sold (e.g., ouse, or common stock, 200 shares	real estate, s MLC Company)	b) How acquire P — Purchase D — Donation	(mo , day, yr)	(d) Date sold (mo , day, yr)
1 a	US TRUST SEE ATTACH	ED		P	11/18/15	7/13/16
b	US TRUST SEE ATTACH	ED		P	10/16/15	11/10/16
C	MORGAN STANLEY SEE	ATTACHED		P	12/04/14	9/28/16
d	MORGAN STANTLEY SEE	ATTACHED		P	12/04/14	5/31/16
е	US TRUST CAPITAL GA	IN DISTRIBUTIONS		P	12/30/14	12/30/16
_	(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other base plus expense of sale		(h) Gain or (e) plus (f) m	
a	145,419.		148	,367.		-2,948.
b	97,381.		87	,371.		10,010.
С	733.		1	,036.		-303.
d			4	,755.		14,672.
e	535.		<u> </u>			535.
	Complete only for assets show	ing gain in column (h) and owned	by the foundation on 12/31/6	9	(I) Gains (Col	
	(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		gain minus col (k), t than -0-) or Losses (fi	
a						-2,948.
b						10,010.
С						-303.
d						14,672.
е						535.
2	Capital gain net income or (ne		enter in Part I, line 7 iter -0- in Part I, line 7	. 2	:	21,966.
3	Net short-term capital gain or	(loss) as defined in sections 1222(5	5) and (6)			
	If gain, also enter in Part I, line in Part I, line 8	e 8, column (c) (see instructions)	f (loss), enter -0-	3		-2,948.
Par		Section 4940(e) for Reduce	ed Tax on Net Investme			2,310.
Was If 'Ye	es,' the foundation does not qua	ction 4942 tax on the distributable a	complete this part		Yes	X No
<u>'</u>		each column for each year; see the in		ntries	(-1)	
	(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use asse	ets	(d) Distribution (col. (b) divided	
	2015	70,094.	1,758	,882.		0.039851
	2014	37,778.	667	,608.		0.056587
	2013	10,771.	367	,344.		0.029321
	2012	7,131.	222	,441.		0.032058
	2011	5,450.	148	,047.		0.036813
2	Total of line 1, column (d)		,	2		0.194630
3	Average distribution ratio for the number of years the foundation	ne 5-year base period — divide the n has been in existence if less thar	total on line 2 by 5, or by the of 5 years	3	3	0.038926
4	Enter the net value of nonchar	itable-use assets for 2016 from Pa	rt X, line 5	4	2	2,144,575.
5	Multiply line 4 by line 3	, ,		5		83,480.
6	Enter 1% of net investment in	come (1% of Part I, line 27b) .		. 6	<u> </u>	665.
7	Add lines 5 and 6			. 7	,	84,145.
8	Enter qualifying distributions fr	om Part XII, line 4		8		103,190.
	If line 8 is equal to or greater that Part VI instructions	in line 7, check the box in Part VI, line	e 1b, and complete that part us	ing a 1% tax	rate. See the	

Form 990-PF (2016) THE CHARLES & CHRISTINE SHIVERY 52-227463	
Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see instruction	ons)
1 a 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,	665.
check here. X and enter 1% of Part I, line 27b	
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 3 Add lines 1 and 2	<u> </u>
	665.
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) 5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	0.
5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0- 6 Credits/Payments	665.
a 2016 estimated tax pmts and 2015 overpayment credited to 20166 a6 bb Exempt foreign organizations — tax withheld at source6 b	
c Tax paid with application for extension of time to file (Form 8868)	
d Backup withholding erroneously withheld 6 d	
	
	0.
	20.
	685.
11 Enter the amount of line 10 to be Credited to 2017 estimated tax Refunded 11 Rart VIII-A Statements Regarding Activities	
	Voc No
1 a 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?	Yes No
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 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	
	<u> </u>
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?	2 X
If 'Yes,' attach a detailed description of the activities	
3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If 'Yes,' attach a conformed copy of the changes.	3 X
4 a Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a X
b If 'Yes,' has it filed a tax return on Form 990-T for this year?	4b N/A
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5 X
If 'Yes,' attach the statement required by General Instruction T	
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either	
By language in the governing instrument, or	
 By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument? 	
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	6 X 7 X
8a Enter the states to which the foundation reports or with which it is registered (see instructions)	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
CT	
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 <i>General Instruction G</i> ? 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)(6) for calendar year 2016 or the taxable year beginning in 2016 (see instructions for Part XIV)? If 'Yes,' complete Part XIV	5) 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
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Par	t 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 advisory privileges? If 'Yes,' attach statement (see instructions)	on had		12		Х
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption Website address N/A	applicat	ion?	13	X	
14	The books are in care of CHARLES SHIVERY Telephone	no 🟲	941-99	3-1	 184	
	Located at 675 LONGBOAT CLUB UNIT 29A LONGBOAT KEY FL ZIP + 4 >	3422				
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 — Check here			N/Ā		
	and enter the amount of tax-exempt interest received or accrued during the year	► 1	15			N/A
16	At any time during calendar year 2016, did the foundation have an interest in or a signature or other authority obank, securities, or other financial account in a foreign country?	over a		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					
Par	tVII-B Statements Regarding Activities for Which Form 4720 May Be Required			<u>*</u> l		
<u> </u>	File Form 4720 if any item is checked in the 'Yes' column, unless an exception applies.			Jan 1	Yes	No
1 a	During the year did the foundation (either directly or indirectly)				70	18
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	Yes	X No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?	Yes	XNo			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	Yes	X No		4	
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	Yes	X 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	XNo			
	(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	XNo			
t	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)	7 .		1 b	N	^^_/ /A
	Organizations relying on a current notice regarding disaster assistance check here	•			. Š.	7%,]
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?			1 c		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))				3,	1111/2
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	ΧNο	*,		
	If 'Yes,' list the years ► 20 , 20 , 20 , 20					
ŧ	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942i (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942i)					
	all years listed, answer 'No' and attach statement – see instructions)		ļ	2 b	N	/ <u>A</u>
•	of the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years have	iere				
	► 20 , 20 , 20 , 20					
3 a	a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?	Yes	X No			
t	of 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	i	ļ			
_	determine if the foundation had excess business holdings in 2016.)		Į	3 b	N.	/A_
4 a	a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?			4 a		X
t	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?			4 b		· ·
BAA		<u>:</u>				X X

Form 990-PF (2016) THE CHARLES & CHRI		4700 11 - 5 - 5	52-22	74633 Page 6
Part VII-B Statements Regarding Activiti		1 4/20 May Be Req	uired (continued)	
5 a During the year did the foundation pay or incu(1) Carry on propaganda, or otherwise attempt	•	n (section 4945(e))?	Yes X	No
(2) Influence the outcome of any specific pub on, directly or indirectly, any voter registra	No			
(3) Provide a grant to an individual for travel,	No			
(4) Provide a grant to an organization other than in section 4945(d)(4)(A)? (see instructions	No			
(5) Provide for any purpose other than religio educational purposes, or for the preventio			Yes X	No (
b If any answer is 'Yes' to 5a(1)—(5), did any of described in Regulations section 53 4945 or in (see instructions)?	a current notice regard	ding disaster assistance	ptions	5 b N/A
Organizations relying on a current notice rega	rding disaster assistant	се спеск пеге		
c If the answer is 'Yes' to question 5a(4), does tax because it maintained expenditure respon	sibility for the grant?	·	N/A Yes	No
If 'Yes,' attach the statement required by Regi				
6 a Did the foundation, during the year, receive ar on a personal benefit contract?b Did the foundation, during the year, pay premise			Yes X	No 6b X
If 'Yes' to 6b, file Form 8870	diris, directly of indirec	try, on a personal bene	in contract	2 1.3 A
7 a At any time during the tax year, was the found	dation a party to a prohi	ibited tax shelter transa	oction? Yes X	No
b If 'Yes,' did the foundation receive any procee	ds or have any net inco	ome attributable to the t		1/A 7b
Part VIII Information About Officers, D	irectors, Trustees,	Foundation Manag	gers, Highly Paid E	mployees,
and Contractors				
1 List all officers, directors, trustees, foundation		.		T
(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
CHARLES SHIVERY	DIRECTOR	0.	0.	0.
675 LONGBOAT CLUB RD, UNIT 29A	0.25			
LONGBOAT KEY, FL 34228				
CHRISTINE SHIVERY 675 LONGBOAT CLUB RD, UNIT 29A LONGBOAT KEY, FL 34228	DIRECTOR 0.25	0.	0.	0.
EUNGDORI REI, FE 34228				
				e
				<u> </u>
2 Compensation of five highest-paid employees (or		on line 1 – see instructio		T
(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	<u>. </u>		-	0
BAA	TEEA0306L 12	2/16/16		Form 990-PF (2016)

and Contractors (continued)		. , ,
3 Five highest-paid independent contractors for professional services (see i	nstructions). 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 As Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistic organizations and other beneficiaries served, conferences convened, research papers produced, etc.	al information such as the number of	Expenses
1 N/A		
2		
3		
4		
DENIMARI C		
Partixes Summary of Program-Related Investments (see Instru- Describe the two largest program-related investments made by the foundation during the		Amount
1	le tax year off liftes i ariu 2	Amount
·		
N/A		
2		
All other program-related investments See instructions		
3		
Total. Add lines 1 through 3	. •	0.
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	see instructions.)		<u>, </u>
 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	1 a	2,081,875.
t	Average of monthly cash balances	1 b	95,359.
C	Fair market value of all other assets (see instructions)	1 c	
C	Total (add lines 1a, b, and c)	1 d	2,177,234.
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	2,177,234.
4	Cash deemed held for charitable activities Enter 1-1/2% of line 3 (for greater amount, see instructions).	4	32,659.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	2,144,575.
6	Minimum investment return. Enter 5% of line 5	6	107,229.
Par	Tixi 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.)	ting f	oundations
1	Minimum investment return from Part X, line 6	1	107,229.
2 a	Tax on investment income for 2016 from Part VI, line 5	119	
t	Income tax for 2016 (This does not include the tax from Part VI)		
C	Add lines 2a and 2b	2 c	665.
3	Distributable amount before adjustments Subtract line 2c from line 1	3	106,564.
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	106,564.
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	106,564.
Par	t XIII Qualifying Distributions (see instructions)	4,000	
	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes Expenses, contributions, gifts, etc. — total from Part I, column (d), line 26	1 a	103,190.
ŧ	Program-related investments – total from Part IX-B	1 b	
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 Suitability test (prior IRS approval required)	3 a	
t	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	103,190.
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	665.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	102,525.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the four qualifies for the section 4940(e) reduction of tax in those years	ndatior	1
DAA			Farm 000 DE (2016)

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2015	(c) 2015	(d) 2016
Distributable amount for 2016 from Part XI,				100 504
line 7	,	<u> </u>		106,564.
2 Undistributed income, if any, as of the end of 2016			15.500	
a Enter amount for 2015 only			17,729.	
b Total for prior years 20, 20, 20		0.		
Excess distributions carryover, if any, to 2016				
a From 2011				
b From 2012				,
c From 2013				
d From 2014	-			,
e From 2015	ļ			
f Total of lines 3a through e	0.		,	<u> </u>
4 Qualifying distributions for 2016 from Part	\$ °		, ;	, 3
XII, line 4 \(\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	9		<u> </u>	
a Applied to 2015, but not more than line 2a		· · · · · · · · · · · · · · · · · · ·	17,729.	<u> </u>
b Applied to undistributed income of prior years	28 × 21 1 1			
(Election required – see instructions).		0.		<u>-</u>
c Treated as distributions out of corpus		`**		
(Election required – see instructions).	0.		<u>* </u>	
d Applied to 2016 distributable amount	** · · · · · · · · · · · · · · · · · ·		1 1	85,461.
e Remaining amount distributed out of corpus	0.			
5 Excess distributions carryover applied to 2016 (If an amount appears in column (d), the	0.			0.
same amount must be shown in column (a))				
6 Enter the net total of each column as				\$ 7 \$ 4 xxx
indicated below:			***** ***	
a Corpus Add lines 3f, 4c, and 4e. Subtract line 5	0.	A . 1 34 2 3 3 1		
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 instructions			0.	
f Undistributed income for 2016 Subtract lines 4d and 5 from line 1. This amount must be				
distributed in 2017				21,103.
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 (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				
b Excess from 2013				
c Excess from 2014]			
d Excess from 2015				
e Excess from 2016				

Form 990-PF (2016) THE CHARLES &				52-2274633	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 determination letter that it is a private operating foundation, and the ruling							
is effective for 2016, enter the date	of the ruling	,		. •	4042(1)(5)		
b Check box to indicate whether the formal based on the adjusted net		erating foundation of		4942(j)(3) or	4942(J)(5)		
income from Part I or the minimum	Tax year (a) 2016	(b) 2015	Prior 3 years (c) 2014	(d) 2013	(e) Total		
investment return from Part X for each year listed	(a) 2010	(6) 2013	(6) 2014	(a) 2013			
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					··		
 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			
(1) Value of all assets.	<u> </u>						
(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 assets at any time during			foundation had	\$5,000 or more	in		
1 Information Regarding Foundation		structions.)					
a List any managers of the foundation who close of any tax year (but only if the NONE	no have contributed more the	nan 2% of the total c than \$5,000) (See	ontributions received b section 507(d)(2))	y the foundation befo	ore the		
b List any managers of the foundation wh	no own 10% or more of the	stock of a corporation	on (or an equally large	nortion of the owners	ship of		
a partnership or other entity) of which NONE	th the foundation has a 1	0% or greater inter	est equally large	portion of the Owners	inip oi		
2 Information Regarding Contribution, G	irant, Gift, Loan, Scholars	nip. etc Programs:					
Check here ► X if the foundation o requests for funds. If the foundation ma	nly makes contributions to	preselected charitab					
a The name, address, and telephone num	nber or e-mail address of t	he person to whom a	innlications should be	addressed			
			,,,				
b The form in which applications shou	ld be submitted and info	rmation and materia	als they should include	de			
c Any submission deadlines							
•							
d Any restrictions or limitations on awa	ards, such as by geograp	phical areas, charita	able fields, kinds of in	nstitutions, or other	factors		
BAA		EA02101 100000			orm 990-PF (2016)		
unn	16	EA0310L 12/16/16		F	JIII JJU-FF (2010)		

Page 11

Part XV Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, oundation Recipient show any relationship to Purpose of grant or contribution **Amount** status of any foundation manager or substantial contributor recipient Name and address (home or business) a Paid during the year NONE PC GENERAL SUPPORT THE BUSHNELL 25,000. 166 CAPITOL AVENUE HARTFORD CT 06106 CT CHILDRENS MEDICAL CENTER NONE PC GENERAL SUPPORT 37,500. 282 WASHINGTON STREET HARTFORD CT 06106 NONE PC CT SCIENCE CENTER GENERAL SUPPORT 25,000. 250 COLUMBUS BLVD HARTFORD CT 06103 FIDELCO GUIDE DOG FOUNDATION PC NONE GENERAL SUPPORT 15,000. 103 OLD IRON ORE RD BLOOMFIELD CT 06002 Total ▶ 3a 102,500. b Approved for future payment Total ► 3b

	-A Analysis of Income-Producing		od business income	Evoludos	hy cochan 512 513 or 514	
Enter gross	s amounts unless otherwise indicated .	(a) Business	d business income (b) Amount	(c) Exclu-	(d) Amount	(e) Related or exempt function income (See instructions)
1 Progr	ram service revenue:	code		code		(See Instructions)
a						
b				- -		
c						
d				-		
e						
f	- 					
-	and contracts from government agencies					
	bership dues and assessments			 		
	st on savings and temporary cash investments ends and interest from securities			14	68.	
	ental income or (loss) from real estate			14	55,691.	
	-financed property	\$ 3° x 4°		3		*
	lebt-financed property				<u></u>	
	ntal income or (loss) from personal property		<u> </u>	 	<u> </u>	
	r investment income			14	838.	
	r (loss) from sales of assets other than inventory			18	21,966.	
	ncome or (loss) from special events			1 10	21, 900.	
-	s profit or (loss) from sales of inventory	-				
	r revenue			14 1/4		
а		***************************************	***************************************			
b				—		
c						
ď						
е						
12 Subto	otal Add columns (b), (d), and (e)			" 3 50 .	78,563.	
	. Add line 12, columns (b), (d), and (e)				13	78,563.
	sheet in line 13 instructions to verify calcula					
Part XVI	-B Relationship of Activities to th	.	·	<u> </u>		
Line No. ▼	Explain below how each activity for which accomplishment of the foundation's exemp	income is rep pt purposes (o	orted in column (e) of ther than by providing	Part XVI- funds for	A contributed important such purposes) (See i	tly to the nstructions)
N/A						
	ļ					
	1					
						
						
						
	 					
						
	<u> </u>	 				
	 		·- <u>-</u> ·- ·			

Form 990-PF (2016) THE CHARLES & CHRISTINE SHIVERY 52-2274633 Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

											1	Yes	No
d	escribe	organization directly d in section 501(c) o to political organizat	of the Code (o	ingage ther tha	in any of t in section	the following 501(c)(3) o	g with any rganization	other organizations) or in section	ation on 527,				
	9	s from the reporting		a nonc	haritable	exempt ora	anization c	ıf					}
) Cash	, ,									1 a (1)		X
•	•	er assets									1 a (2)		X
	•	ensactions									1 - (-)		$\ddot{-}$
(1) Sale	s of assets to a non	charitable exe	empt or	anızatıon	1					1 b (1)		X
•	•	hases of assets fror									1 b (2)		X
	•	al of facilities, equip									1 b (3)		X
(4) Reim	nbursement arrange	ments								1 b (4)		X
(5) Loan	ns or loan guarantee	es.								1 b (5)		X
(6) Perfo	ormance of services	or membersh	up or fu	ndraising	solicitations					1 b (6)		X
c S	haring i	of facilities, equipme	ent, mailing lis	sts, othe	er assets,	or paid emp	oloyees				1 c		X
							-				L	·	
d If th a	the an: e goods ny trans	swer to any of the a s, other assets, or ser saction or sharing a	ibove is 'Yes,' vices given by rrangement, s	comple the repo how in	te the foll orting found column (d	lowing sched dation If the I) the value	dule Colur foundation of the goo	nn (b) should received less t ds. other asse	always show han fair mark ts. or servic	v the fair i ket value in es receive	market val o d	ue of	
a) Line		(b) Amount involved				pt organization		d) Description of	_ :			ngement	s
I/A		· · · · · · · · · · · · · · · · · · ·				<u>. </u>	 `	<u> </u>					
							<u> </u>						
												_	
									<u></u>				
d-	escribe	indation directly or inc d in section 501(c) o	of the Code (o	d with, o ther tha	or related to on section	o, one or mo 501(c)(3)) (re tax-exen or in section	npt organization on 527?	าร		Yes	- X	No
b if		complete the follows		 -	(h) Tura	of ourse			(-) D	1. a. a. f. a. l.			
1/3	(a)	Name of organizati	on	ļ	(b) Type	of organiza	tion	 	(c) Descrip	tion of rei	ationship		
I/A								 					
				 				- 					
								 					
				 				 					
	Under or	enalties of perjury, I declar	e that I have exam	uned this i	eturn includi	IUU SCCOMUSUVII	no schedules .	and statements ar	nd to the hest of	my knowledo	e and helief	t is true	
•	correct,	and complete Declaration	of preparer (other	than taxp	ayer) is base	d on all informa	tion of which i	preparer has any k	nowledge	my knomedy	o una sener, i	. 13 000,	
ign		, , /	1)			-/-	/				May the this retur	RS disci	ıss
lere		partos in	1 / her	ary		3/8/	17	DIRECTOR			preparer (see ipst	shown b	elow i
	Signat	ture of officer or trustee		1		Date		Title				Yes	No
		Print/Type preparer's nam	ne		Preparer's s	ignature 1		Date	Check	ı	PTIN		
aid		LOUIS B. OBE	ERMEIER, O	CPA.	Louis	B.Ore	nece	5/5/	self-er	nployed	P00113	<u>36</u> 79	
repa	rer	Firm's name	HEIN, COL	HEN,	PALMER	& CO.,	LLC	77	Firm's EIN	▶ 06-1	386717		
lse C			O TOWER I										
				6001	· - <u>-</u> - · ·				Phone no	(860) 677-	1000	
AA								····			Form 99		2016)

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, 990-PF) and its instructions is at www.irs.gov/form990.

OMB No 1545 0047

2016

Name of the organization THE CHARLES & CH	RISTINE SHIVERY	Employer identification number
FOUNDATION		52-2274633
Organization type (check one)		
Filers of:	Section:	
Form 990 or 990-EZ	501(c)() (enter number) organiza	ation
	4947(a)(1) nonexempt charitable trust i	not treated as a private foundation
	527 political organization	
	3	
Form 990-PF	X 501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust t	treated as a private foundation
	501(c)(3) taxable private foundation	
Check if your organization is covered by the Gener	al Rule or a Special Rule.	
Note. Only a section 501(c)(7), (8), or (10) or	ganization can check boxes for both the Gene	eral Rule and a Special Rule. See instructions
General Rule		
X For an organization filing Form 990, 990-E property) from any one contributor Comp	Z, or 990-PF that received, during the year, or lete Parts I and II. See instructions for determ	contributions totaling \$5,000 or more (in money or nining a contributor's total contributions
Special Rules		
under sections 509(a)(1) and 170(b)(1)(A)(vi)	601(c)(3) filing Form 990 or 990-EZ that met the part of the checked Schedule A (Form 990 or 990-EZ) the year, total contributions of the greater of 190-EZ, line 1 Complete Parts I and II	, Part II, line 13, 16a, or 16b, and that
For an organization described in section 5 during the year, total contributions of more purposes, or for the prevention of cruelty	i01(c)(7), (8), or (10) filing Form 990 or 990-E e than \$1,000 <i>exclusively</i> for religious, charita to children or animals Complete Parts I, II, a	Z that received from any one contributor, able, scientific, literary, or educational nd III
during the year, contributions exclusively \$1,000 If this box is checked, enter here charitable, etc., purpose. Don't complete a	io1(c)(7), (8), or (10) filing Form 990 or 990-E for religious, charitable, etc., purposes, but no the total contributions that were received duri any of the parts unless the General Rule appl able, etc., contributions totaling \$5,000 or more	o such contributions totaled more than ing the year for an <i>exclusively</i> religious, lies to this organization because
Caution. An organization that isn't covered by 990-PF), but it must answer 'No' on Part IV, I Part I, line 2, to certify that it doesn't meet the BAA For Paperwork Reduction Act Notice, see the Inst	ine 2, of its Form 990, or check the box on lire e filing requirements of Schedule B (Form 990)	ne H of its Form 990-EZ or on its Form 990-PF,

Schedule B	(Form 99	90. 990-EZ.	or 990-PF)	(2016)

Page 1 of Employer identification number

Name of organization

THE CHARLES & CHRISTINE SHIVERY

52-2274633

Partil	Contributors (see instructions) Use duplicate copies of Part I if additional space	is needed	
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	CHARLES AND CHRISTINE SHIVERY 675 LONGBOAT CLUB RD UNIT 29A LONGBOAT KEY, FL 34228	\$44,886.	Person Payroll Complete Part II for noncash contributions)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	CHARLES AND CHRISTINE SHIVERY 675 LONGBOAT CLUB RD UNIT 29A LONGBOAT KEY, FL 34228	\$106,567.	Person X Payroll Noncash (Complete Part II for noncash contributions)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Complete Part II for noncash contributions)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Complete Part II for noncash contributions)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Complete Part II for noncash contributions)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Complete Part II for noncash contributions)

Page

1 to

Schedule B (Form 990, 990-EZ, or 990-PF) (2016)

of Part II

Name of organization

BAA

THE CHARLES & CHRISTINE SHIVERY

Employer identification number 52-2274633

Partill Noncash Property (see instructions) Use duplicate copies of Part II if additional space is needed (a) No. from Part I (c) FMV (or estimate) (see instructions) (d) Date received Description of noncash property given 600 SHS OF XCEL ENERGY IN 500 SHS OF CMS ENERGY CORP 44,886. 9/29/16 (a) No. from Part I (b)
Description of noncash property given (d) Date received (c) FMV (or estimate) (see instructions) (a) No. from (b) Description of noncash property given (c) FMV (or estimate) (d) Date received Part I (see instructions) (a) No. from (b)
Description of noncash property given (c) FMV (or estimate) (see instructions) (d) Date received Part I (a) No. from Part I (b)
Description of noncash property given (d) Date received (c)
FMV (or estimate)
(see instructions) (a) No. from (b) Description of noncash property given (c) FMV (or estimate) (see instructions) (d) Date received Part I

THE CHARLES & CHRISTINE SHIVERY

1 to 1 of Part III
Employer identification number
52-2274633

<u>Partilli</u>	Exclusively religious, charitable, e	tc., contributions to organiz	ations descri	ibed in section 501(c)(7), (8),
	or (10) that total more than \$1,000 for t the following line entry. For organizations c	he year from any one contribute	or. Complete colur	nns (a) through (e) and
	contributions of \$1,000 or less for the year	(Enter this information once See	instructions)	\$N/A
	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
	N/A			
		<u> </u>		
		(e) Transfer of gift		
	Transferee's name, addres	s, and ZIP + 4	Relationsh	nip of transferor to transferee
				_
	(6)			
(a) No. from	(b) Purpose of gift	(c) Use of gift	}	(d) Description of how gift is held
Part I				
	<u></u>	}		
		(e) Transfer of gift		
	Transferee's name, addres	Transfer of gift	Dolotionsk	nip of transferor to transferee
	Transièree's fiame, addres	55, aliq ZIF + 4	Relations	iip of transferor to transferee
(a) No. from	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held
Part I	Turpose or girt	Ose of gift	1	bescription of now gire is need
·				
		(0)		
		(e) Transfer of gift		
	Transferee's name, addres	s, and ZIP + 4	Relationsh	nip of transferor to transferee
	<u> </u>			
(a)	(b)	(c)		(d)
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held
Faiti				
- -				
		(e) Transfer of gift		
	Transferee's name, addres	i ranster of gift ss. and ZIP + 4	Relationsh	nip of transferor to transferee
	F	·		

••	••	••
2016	FEDERAL STATEMENTS THE CHARLES & CHRISTINE SHIVERY FOUNDATION	PAGE 1 52-2274633
5/04/17	reditation	09 16AM
STATEMENT 1 FORM 990-PF, PART I, LINE 11 OTHER INCOME		
	(A) (B) NET REVENUE INVESTMENT PER BOOKS INCOME	(C) ADJUSTED NET INCOME
OTHER INVESTMENT INCOME	TOTAL \$ 838. \$ 0.	\$0.
STATEMENT 2 FORM 990-PF, PART I, LINE 16B ACCOUNTING FEES		
TAX PREPARATION	(A) (B) NET (C) EXPENSES INVESTMENT ADJUSTED PER BOOKS INCOME NET INCOME \$ 1,380. \$ 690. TOTAL \$ 1,380. \$ 690.	(D) CHARITABLE PURPOSES \$ 690. \$ 690.
STATEMENT 3 FORM 990-PF, PART I, LINE 18 TAXES		
EXCISE TAXES FOREIGN TAXES	(A) (B) NET (C) EXPENSES INVESTMENT ADJUSTED PER BOOKS INCOME NET INCOME \$ 5,187.	(D) CHARITABLE PURPOSES \$ 0.
STATEMENT 4 FORM 990-PF, PART I, LINE 23 OTHER EXPENSES		
INVESTMENT EXPENSE	(A) (B) NET (C) EXPENSES INVESTMENT ADJUSTED PER BOOKS INCOME NET INCOME \$ 10,285. \$ 10,285. TOTAL \$ 10,285. \$ 10,285.	

2016

FEDERAL STATEMENTS

THE CHARLES & CHRISTINE SHIVERY FOUNDATION

PAGE 2

52-2274633

5/04/17

09.16AM

STATEMENT 5 FORM 990-PF, PART III, LINE 5 OTHER DECREASES

FMV OVER COST OF DONATED SECURITIES

TOTAL \$ 25,875. 25,875.

2016 FEDERAL SUPPORTING DETAIL PAGE 1 THE CHARLES & CHRISTINE SHIVERY FOUNDATION 52-2274633 5/04/17 09 16AM OTHER INCOME PRODUCING ACTIVITIES OTHER INVESTMENT INCOME [O] 838. 838. NON DIVIDEND DISTRIBUTION TOTAL \$

Page 4



Bank of America Private Wealth Management IM CHARLES&CHRISTINE SHIVERY FDN

Income for 2016

applicable, we have included the portion subject to Section 988 translation gains and losses in the column titled "Portion subject to Ordinary Rates including A schedule of your current year sales is shown below. The following items are provided to you to assist in the preparation of your tax returns. Typically, collectibles are taxed at 28% rates, which is shown in the column titled "Portion Subject to 28% Rates (included in Net G/L)". For your convenience, if Section 988 (included in Net G/L)"

Please note that if you have sold an asset for which the cost basis information is unknown it is shown separately in the section entitled Transactions with Unknown Cost Basis. Please review these carefully when preparing your return. We suggest that you consult your tax advisor.

Certain sales will be indicated with the following symbols, where applicable, see below for an explanation.

† - Can not take a loss on your tax return based on gross proceeds

from a reportable change in control or capital structure

* - Tax Cost has been adjusted for current year's return of capital

Section 988 translation gains or losses

Short Term Transactions

	s s		00 O\$		\$0 00		\$0.00
	Portion Subject to 28% Rates (included in Net G/L)						
	Portion Subject to Ordinary Rates including Section 988 (included in		00 0\$		00 0\$		00 0\$
	Wash sale		00 0\$		\$0 00		00 0\$
	Accrued market discount		00 0\$		20 00		00 0\$
	Net Gain/Loss		\$5,479 51		\$-5,168 92		\$15 83
	Cost or		\$30,445 75		\$24,405 75		\$22 42
	Proceeds		\$35,925 26		\$19,236 83		\$38 25
CUSIP	Units	02079K107	20 00	126650100	250 00	13057Q107	18 72
	Date acquired		08/24/2015	V DEL	07/13/2016	URCES CORP	08/24/2015
DESCRIPTION	Date sold or disposed	ALPHABET INC	07/13/2016	CVS CORPORATION DEL	11/10/2016	CALIFORNIA RESOURCES CORP	04/21/2016

2016 Tax Information Letter

Account Number 161002926756

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U.S. TRUST (A Park of America Private Wealth Management IM CHARLES&CHRISTINE SHIVERY FDN

Short Term Transactions	ransactions								
DESCRIPTION		CUSIP						Portion Subject to Ordinary Rates	Portion Subject
Date sold or disposed	Date acquired	Units	Proceeds	Cost or other basis	Net Gam/Loss	Accrued market discount	Wash sale loss disallowed	including Section 988 (included in Net G/L)	to 28% Rates (included in Net G/L)
ISHARES TR RUSSELL MIDCAP GROWTH	ELL MIDCAP	464287481							
07/13/2016	11/18/2015	144 00	\$13,853 93	\$13,372 56	\$481 37	00 0\$	00 0\$	00 0\$	00 0\$
ISHARES TR RUSSI	ISHARES TR RUSSELL 2000 INDEX FD	464287655							
07/13/2016	10/22/2015	85 00	\$10,135 89	\$9,683 38	\$452.51	\$0.00	00 0\$	00 0\$	00 0\$
07/13/2016	11/18/2015	125 00	\$14,905.72	\$14,435 63	\$470 09	\$0.00	00 0\$	00 0\$	00 0\$
JOHNSON CONTROLS INC	OLS INC	478366107							
07/13/2016	08/24/2015	200 00	\$8,818 24	\$8,321 00	\$497.24	00 0\$	00 0\$	00 0\$	00 0\$
WISDOMTREE EUROPE HEDGED EQUITY	ROPE HEDGED	97717X701							
07/13/2016	10/16/2015	825 00	\$42,504 97	\$47,680.72	\$-5,17575	00 0\$	00 0\$	00 0\$	00 0\$
Total Shon Term Gaur/Loss	/Loss		\$145,419.09	\$148,367.21	\$-2,948 12	\$0.00	\$0.00	00 0\$	\$0.00
Long Term Transactions	ransactions								
DESCRIPTION		CUSIP						Portion Subject to	
Date sold or disposed	Date acquired	Units	Proceeds	Cost or other basis	Net Gain/Loss	Accrued market discount	Wash sale loss disallowed	Ordinary Kates including Section 988 (included in Net G/L)	Fortion Subject to 28% Rates (included in
ADVANSEX INC		00773T101							
11/10/2016	10/16/2015	10	\$157.14	\$127 84	\$29 30	\$0.00	00 0\$	\$0.00	\$0.00
CALIFORNIA RESOURCES CORP	OURCES CORP	13057Q107							
04/20/2016	01/07/2015	0 17	\$0.32	\$0 23	\$0.09	00 0\$	00 08 0	00 0\$	\$0.00

2016 Tax Information Letter

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Bank of America	Bank of America Private Wealth Management	lanagement I	IM CHARLES&CHRISTINE SHIVERY FDN	S&CHRIST	INE SHIVER	Y FDN			Page 6
Long Term Transactions	<u>ansactions</u>								
DESCRIPTION		CUSIP							
						Accrued		Portion Subject to Ordinary Rates including Section	Portion Subject to 28% Rates
or disposed	Date acquired	Units	Proceeds	Cost or other basis	Net Gam/Loss	market discount	Wash sale loss disallowed	988 (included in Net G/L)	(included in Net G/L)
CALIFORNIA RESOURCES CORP	URCES CORP	13057Q107							
04/21/2016	01/07/2015	37 28	\$76 16	\$50 57	\$25.59	\$0.00	00 0\$	\$0.00	\$0.00
CHEVRONTEXACO CORP	CORP	166764100							
07/13/2016	01/07/2015	150	\$15,975 66	\$16,181 90	\$-206 24	00 0\$	00 0\$	\$0 00	\$0.00
DOW CHEMICAL		260543103							
07/13/2016	01/07/2015	200	\$10,231 27	\$8,687 80	\$1,543 47	00 0\$	\$0 00	00 0\$	\$0.00
GILEAD SCIENCES INC	NC	375558103							
11/10/2016	02/21/2013	100	\$7,707 33	\$4,134 20	\$3,573.13	00 0\$	00 0\$	00 0\$	80 00
ISHARES TR RUSSELL 2000 INDEX FD	L 2000 INDEX FD	464287655							
07/13/2016	05/02/2013	21	\$2,504 16	\$1,960 25	\$543 91	\$0.00	\$0.00	00 0\$	00 0\$
11/10/2016	05/02/2013	67	\$8,343 32	\$6,254 11	\$2,089 21	00 0\$	00 0\$	\$0 00	\$0.00
JOHNSON CONTROLS INC	S INC	478366107							
07/13/2016	04/02/2015	250	\$11,022 81	\$12,468 25	\$-1,445.44	00 0\$	00 0\$	00 0\$	\$0.00
NOVO-NORDISK A S ADR	ADR	670100205							
11/10/2016	10/16/2015	400	\$13,575.22	\$22,262 00	\$-8,68678	\$0.00	00 0\$	00 0\$	\$0.00
OCCIDENTAL PETROLEUM CORP	OLEUM CORP	674599105							
07/13/2016	01/07/2015	150	\$11,49499	\$11,476 58	\$1841	00 0\$	00 0\$	00 0\$	\$0.00

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Account Number 161002926756

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Long Term Transactions

Bank of America Private Wealth Management IM CHARLES&CHRISTINE SHIVERY FDN

U.S. TRUST

DESCRIPTION

CUSIP

\$0.00	00 0\$	\$0.00	\$0.00	\$10,009 98	\$87,370 53	\$97,380 51		Loss.	Total Long Term Gam/Loss.
\$0.00	80.00	\$0 00	\$0.00	\$6,509 66	\$1,883 40	\$8,393 06	20	062722013	11/10/2016
00 0\$	\$0 00	\$0 00	\$0 00	\$6,015 67	\$1,883.40	\$7,899.07	50	06/27/2013	07/13/2016
							Y09827109		BROADCOM LTD
Portion Subject to 28% Rates (included in Net G/L)	Portion Subject to Ordinary Rates including Section 988 (included in Net G/L)	Wash sale loss disallowed	Accrued market discount	Net Gan/Loss	Cost or other basis	Proceeds	Units	Date acquired	Date sold or disposed
							CUSIL		DESCRIPTION