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.
 ▶ Go to www.irs.gov/Form990PF for instructions and the latest information.

OMB No 1545-0052

		of the Treasury enue Service Do not enter social secu Go to www.irs.gov/Fort	urity numbers on this m990PF for instructio	form as it mans and the la	ay be ma	de public.	Open to Public Inspection
			and ending	110 4110 10			Open to t abite mapes non
N	ame of fou	undation		Т Т	A Emplo	yer identification number	
		OLIVER R. GRACE CHARITABLE					
		DATION			11	-3105739	
		d street (or P O box number if mail is not delivered to street address)	Ro	om/suite		none number (see instructions)
		BRADLEY PALCE n. state or province, country, and ZIP or foreign postal code			56.	1-459-2770	
		BEACH FL 33480			C If exer	mption application is pending,	check here
			irn of a former public ch	arity	D 1 Fo	reign organizations, check he	• n
	0.1001(Final return Amended	•	lailly			<u></u>
\mathcal{M}		Address change Name cha				reign organizations meeting th % test, check here and attach	
	Chack t	type of organization X Section 501(c)(3) exempt private					
$\ddot{\Box}$			e loundation	04 I	-	ate foundation status was term n 507(b)(1)(A), check here	inated under
<u>_</u> _		ket value of all assets at J Accounting method		ruol /			
		ear (from Part II, col (c), Other (specify)	X Cash Acc	iuaii		oundation is in a 60-month ter section 507(b)(1)(B), check h	. 1 1
	ine 16)		he on cash hasis \			- C-N-N N	
****	art I	Analysis of Revenue and Expenses (The total of	(a) Revenue and	···			(d) Disbursements
٦	, . 	amounts in columns (b), (c), and (d) may not necessarily equal	expenses per	(b) Net inve		(c) Adjusted net income	for charitable purposes
	1	the amounts in column (a) (see instructions))	books				(cash basis only)
	1	Contributions, gifts, grants, etc , received (attach schedule)	617,158				
	2	Check ▶ if the foundation is not required to attach Sch B			4 4 5 =		
	3	Interest on savings and temporary cash investments	4,848		4,467	4,848	······································
	4	Dividends and interest from securities	7,146		7,146	7,146	
	5a	Gross rents					
Revenue	b	Net rental income or (loss)	300 373				· · · · · · · · · · · · · · · · · · ·
	6a	Net gain or (loss) from sale of assets not on line 10 Gross sales price for all assets on line 6a 689,190	309,372				
	7		/	30	9,372		
u.	8	Capital gain net income (from Part IV, line 2) Net short-term capital gain		30	9,312	935	
	9	Income modifications					
	10a	Gross sales less returns and allowances					
	b	Less Cost of goods sold		*******************************			
	С	Gross profit or (loss) (attach schedule)					
	11	Other income (attach schedule) Stmt 1	4,275		4,275	4,275	
_	12	Total. Add lines 1 through 11	942,799	32	5,260	17,204	
ັ ດາ (ເ	13	Compensation of officers, directors, trustees, etc	0				
Ses A	14	Other employee salaries and wages					
; <u>e</u>	15	Pension plans, employee benefits					
i X	16a	Legal fees (attach schedule) FIVED					
و آ	b	Accounting fees (attach schedule)					
: :≩	C	Other professional fees (attach schedule)		·			
: E	17	Interest 180; Miles					
7 :E	18	Taxes (attach schedule) (see instructions) Stimt 2	1,043				······································
Ξ	19	Depreciation (attach schedule) and depletion					
P A	20	Occupancy					
and Administrative Expen	21	Travel, conferences, and meetings					
ā	22	Printing and publications Other expenses (att sch) Stmt 3	E73		573	F73	
Operating	23	Other expenses (att sch) Stmt 3 Total operating and administrative expenses.	573		573	573	
rati	24	Add lines 13 through 23	1,616		573	573	0
bel	25	Contributions, gifts, grants paid	20,000		3,3	573	20,000
Ō	26	Total expenses and disbursements. Add lines 24 and 25	21,616		573	573	20,000
_	27	Subtract line 26 from line 12	21,010	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	3,3	573	20,000
	a	Excess of revenue over expenses and disbursements	_921,183				
	Ь	Net investment income (if negative, enter -0-)		32	4,687		
	C	Adjusted net income (if negative, enter -0-)			-,	16.631	***************************************

For Paperwork Reduction Act Notice, see instructions.

14

15

16

17 18

19

20

21

22

23

Land, buildings, and equipment basis Less accumulated depreciation (attach sch.)

instructions Also, see page 1, item I) Accounts payable and accrued expenses

Total assets (to be completed by all filers - see the

Mortgages and other notes payable (attach schedule)

Total liabilities (add lines 17 through 22)

Loans from officers, directors, trustees, and other disqualified persons

Other assets (describe ▶

Other liabilities (describe

Grants payable

Deferred revenue

ORGCHARTR 04/18/2018 5 08 PM 11-3105739 Form 990-PF (2017) THE OLIVER R. GRACE CHARITABLE End of year Beginning of year Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions) Part II (b) Book Value (a) Book Value (c) Fair Market Value 22,781 1,614 1,613 1 Cash - non-interest-bearing 58,711 131,430 58,711 2 Savings and temporary cash investments Accounts receivable ▶ Less allowance for doubtful accounts Pledges receivable ▶ Less allowance for doubtful accounts > 5 Grants receivable Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions) 7 Other notes and loans receivable (att. schedule) 0 Less allowance for doubtful accounts 8 Inventories for sale or use Prepaid expenses and deferred charges 99,916 10a Investments – U S and state government obligations (attach schedule) See Stmt 5 866,779 3,176,347 297,146 b Investments – corporate stock (attach schedule) C Investments - corporate bonds (attach schedule) 11 Investments - land, buildings, and equipment basis Less accumulated depreciation (attach sch.) 12 Investments - mortgage loans Investments - other (attach schedule) 13

)

)

551,273

0

927,104

Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31. or Fund Balances 24 Unrestricted Temporarily restricted 25 26 Permanently restricted X Foundations that do not follow SFAS 117, check here and complete lines 27 through 31. 27 Capital stock, trust principal, or current funds Net Assets 28 Paid-in or capital surplus, or land, bldg, and equipment fund 551,273 927,104 29 Retained earnings, accumulated income, endowment, or other funds 927,104 30 Total net assets or fund balances (see instructions) 551,273 31 Total liabilities and net assets/fund balances (see 551,273 927,104 instructions) **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 551,273 end-of-year figure reported on prior year's return) 921,183 2 2 Enter amount from Part I, line 27a 3 Other increases not included in line 2 (itemize) ▶ 3 1,472,456 4 4 Add lines 1, 2, and 3 5 Decreases not included in line 2 (itemize) ▶ See Statement 6 545,352 5 927,104 6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30 6

3,236,671

Part IV Capital Gains at	nd Losses for Tax on Investmen	t Income				
(a) List and describe t	the kind(s) of property sold (for example, real estate, rehouse, or common stock, 200 shs MLC Co)		(b) How acquired P – Purchase D – Donation	(c) Date (mo , d		(d) Date sold (mo , day, yr)
1a See Worksheet				_		
b						
С						
d						
(e) Gross sales price	(f) Depreciation allowed (or allowable)		other basis inse of sale			or (loss)) minus (g))
a						
_b						
С						
d						
е						
Complete only for assets showing	gain in column (h) and owned by the foun	dation on 12/31/69	9	(I) Gains (Col	(h) gain minus
(I) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69		ss of col (ı) (j), ıf any	co		less than -0-) or om col (h))
a						
b						
С						
d						
e						
2 Capital gain net income or (net ca	If gain, also enter in Pa if (loss), enter -0- in Pa			2		309,372
3 Net short-term capital gain or (los	s) as defined in sections 1222(5) and (6)	,				
If gain, also enter in Part I, line 8,	column (c) See instructions If (loss), ente	r -0- ın				
Part I, line 8				3		935
Part V Qualification Ur	nder Section 4940(e) for Reduce	d Tax on Net	Investment Inco	me		
(For optional use by domestic private	foundations subject to the section 4940(a)	tax on net investn	nent income)			
If section 4940(d)(2) applies, leave th	ıs part blank					
Was the foundation liable for the sect	ion 4942 tax on the distributable amount of	f any year in the ba	ase period?			Yes X No
	fy under section 4940(e) Do not complete					
	each column for each year, see the instruct	ions before makin	g any entries			(4)
(a) Base period years	(b)	Net usly	(c)	_		(d) tribution ratio
Calendar year (or tax year beginning in	· . ·		e of noncharitable-use asset		(col (b)	divided by col (c))
2016		500	465,1			0.080502
2015	50,		401,8			0.124414 0.107815
2014		000	463,			
2013		500	486,			0.077141
2012	50,	500	497,	291		0.101550
2 Total of line 1, column (d)				2		0.491422
· · · · · · · · · · · · · · · · · · ·	5-year base period – divide the total on line	2 by 5.0 or by the	.	_ -		
	as been in existence if less than 5 years	. 2 by 0 0, 01 by iii.	·	3		0.098284
4 Enter the net value of noncharital	ole-use assets for 2017 from Part X, line 5			4		2,445,909
E. Minkey L. Land A. harding 2						240,394
5 Multiply line 4 by line 3				5		240,394
6 Enter 1% of net investment incom	ne (1% of Part I, line 27b)			6		3,247
7 Add lines 5 and 6				7		243,641
8 Enter qualifying distributions from	Part XII, line 4			8		20,000
	n line 7, check the box in Part VI, line 1b, a	nd complete that n	oart using a 1% tay rat			
Part VI instructions	, enden are earlier are en morte, and	danish and mark	and desired and tention		-	

	990-PF (2017) THE OLIVER R. GRACE CHARITABLE 11-3105/39			Pa	age 4	
	rt 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			6,4	194	
	here ▶					
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-)			_	-0	
3	Add lines 1 and 2			6,4	494	
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-)			_	- 0	
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-			6,4	494	
6	Credits/Payments					
а	2017 estimated tax payments and 2016 overpayment credited to 2017					
þ	Exempt foreign organizations – tax withheld at source 6b 398					
С	Tax paid with application for extension of time to file (Form 8868)					
d	Backup withholding erroneously withheld 6d					
7	Total credits and payments Add lines 6a through 6d				398	
8	Enter any penalty for underpayment of estimated tax. Check here X if Form 2220 is attached				202	
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed			6,2	<u> 298</u>	
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid					
<u> 11_</u>	Enter the amount of line 10 to be Credited to 2018 estimated tax ▶ Refunded ▶ 11					
Pa	rt VII-A Statements Regarding Activities					
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it	<u> </u>		Yes	No	
	participate or intervene in any political campaign?	-	1a		<u> </u>	
þ	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the]	1	•	
	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	1				
С	Did the foundation file Form 1120-POL for this year?	L	1c		<u> </u>	
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year	1	1			
	(1) On the foundation ▶ \$ (2) On foundation managers ▶ \$					
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed					
	on foundation managers > \$	ļ	- 1	- 1		
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	ļ	2		<u>X</u>	
	If "Yes," attach a detailed description of the activities	- 1				
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of					
	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	-	3		<u>X</u>	
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	-	<u>4a</u>		_X_	
þ	If "Yes," has it filed a tax return on Form 990-T for this year?	A	4b			
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	<u> </u>	5		<u>X</u>	
	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 	- {	- 1	1		
	conflict with the state law remain in the governing instrument?	<u> </u>	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.	-				
	None	- 1		1		
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	L	8b	X	*******	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or		Ì			
	4942(j)(5) for calendar year 2017 or the taxable year beginning in 2017? See instructions for Part XIV If "Yes,"					
	complete Part XIV	L	9		<u>X</u>	
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their		Ì			
	names and addresses		10		X	
			00	0-PF	(2017)	

Form 990-PF (2017) THE OLIVER R. GRACE CHARITABLE Page 5 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 X meaning of section 512(b)(13)? If "Yes," attach schedule See instructions 11 Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified 12 X 12 person had advisory privileges? If "Yes," attach statement See instructions X 13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application? 13 Website address ► N/A Telephone no ▶ 561-459-2770 OLIVER R. GRACE, JR. The books are in care of 14 241 BRADLEY PLACE 7IP+4 ▶ 33480 Located at ▶ PALM BEACH FL Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here 15 and enter the amount of tax-exempt interest received or accrued during the year At any time during calendar year 2017, did the foundation have an interest in or a signature or other authority Yes No 16 16 X over a bank, securities, or other financial account in a foreign country? 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) X No Yes (1) Engage in the sale or exchange, or leasing of property with a disqualified person? (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a X Yes No disqualified person? X No Yes (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? X No Yes (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? (5) Transfer any income or assets to a disqualified person (or make any of either available for X No Yes the benefit or use of a disqualified person)? (6) Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after X No Yes termination of government service, if terminating within 90 days.) If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53 4941(d)-3 or in a current notice regarding disaster assistance? See instructions 1b Organizations relying on a current notice regarding disaster assistance, check here Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that N/A 1c were not corrected before the first day of the tax year beginning in 2017? Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private 2 operating foundation defined in section 4942(j)(3) or 4942(j)(5)) At the end of tax year 2017, did the foundation have any undistributed income (lines 6d and X No Yes 6e, Part XIII) for tax year(s) beginning before 2017? , 20 , 20 If "Yes," list the years ▶ 20 , 20 b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to N/A2b all years listed, answer "No" and attach statement - see instructions) If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here ▶ 20 , 20 Did the foundation hold more than a 2% direct or indirect interest in any business enterprise X No Yes at any time during the year? If "Yes," did it have excess business holdings in 2017 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 N/A foundation had excess business holdings in 2017) 3b X 4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its X charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2017? Form 990-PF (2017)

	n 990-PF (2017) THE OLIVER R. GRACE			105739	inal)		Page	6
<u>. Г.</u> 5а			1/20 Iviay Be R	equirea (conu	riuea)		····	
od	During the year did the foundation pay or incur any amo		454-330		[V]			
	(1) Carry on propaganda, or otherwise attempt to influe	=		T	es 🗓 No			
	(2) Influence the outcome of any specific public election	1 (see section 4955), or to	carry on,		es 🗓 No			
	directly or indirectly, any voter registration drive?			 				
	(3) Provide a grant to an individual for travel, study, or o			Y	es 🗓 No			
	(4) Provide a grant to an organization other than a char	itable, etc., organization d	escribed in	г.	. 😼			
	section 4945(d)(4)(A)? See instructions			Y	es 🗓 No			
	(5) Provide for any purpose other than religious, charita		educational		. 52			
	purposes, or for the prevention of cruelty to children				es 🗓 No			
b	If any answer is "Yes" to 5a(1)–(5), did any of the transa			scribed in	37/3		1	
	Regulations section 53 4945 or in a current notice regar	•			N/A	5b		
	Organizations relying on a current notice regarding disa	*			▶ 📙			
С	If the answer is "Yes" to question 5a(4), does the foundation	·	the tax	/				
	because it maintained expenditure responsibility for the	•		N/A 🗌 Y	es 💹 No			
	If "Yes," attach the statement required by Regulations se							
6a	Did the foundation, during the year, receive any funds, of	lirectly or indirectly, to pay	premiums					
	on a personal benefit contract?				es 🛚 X No		1_	_
b	Did the foundation, during the year, pay premiums, direct	ctly or indirectly, on a perso	onal benefit contra	ct?		6b	<u> </u>	
	If "Yes" to 6b, file Form 8870							
7a	At any time during the tax year, was the foundation a pa	rty to a prohibited tax shel	ter transaction?	Y	es X No			
	If "Yes," did the foundation receive any proceeds or have				N/A	7b		_
P	art VIII Information About Officers, Dire	ctors, Trustees, Fou	undation Mana	agers, Highly	Paid Employe	ees,		
	and Contractors							
1 !	ist all officers, directors, trustees, and foundation m	anagers and their comp	ensation. See ins	structions.				
	(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		ense accour allowances	nt,
OT	IVER R. GRACE, JR. PALM	BEACH	TTEE		Compensation			_
	1 BRADLEY PLACE FL 3		0.00	اه	0			0
		5400	0.00	ď				-
	· · · · · · · · · · · · · · · · · · ·							_
			•					
2	Compensation of five highest-paid employees (other "NONE."	er than those included or	n line 1 – see ins	tructions). If none	e, enter			
	(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		ense accour allowances	
NC	NE					-		
								_
								—
				-			-	
ota	I number of other employees paid over \$50,000					l		0

orm 990-PF (20		11-3105739	Page 7
Part VIII	Information About Officers, Directors, Trustees, Foundand Contractors (continued)	dation Managers, Highly Paid E	imployees,
3 Five high	est-paid independent contractors for professional services. See instr	ructions, If none, enter "NONE."	
	(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE			
		}	
otal number of	others receiving over \$50,000 for professional services		•
Part IX-A	Summary of Direct Charitable Activities		
List the foundation organizations and	s four largest direct charitable activities during the tax year. Include relevant statistical information other beneficiaries served, conferences convened, research papers produced, etc.	such as the number of	Expenses
1 N/A			
, 51, 15			
2			
3			
4			
Part IX-B	Summary of Program-Related Investments (see instru	uctions)	
Describe the two la	rgest program-related investments made by the foundation during the tax year on lines 1 and 2		Amount
1 N/A			
2			
All other programs	elated investments. See instructions		
3	and a second resident of the second s		
-			

Total. Add lines 1 through 3

qualifies for the section 4940(e) reduction of tax in those years

Pa	Minimum Investment Return (All domestic foundations must complete this part. Foreign	n fou	ndations,
1	see instructions) Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.		
'	purposes		
а	Average monthly fair market value of securities	1a	2,264,708
b	Average of monthly cash balances	1b	218,448
c	Fair market value of all other assets (see instructions)	1c	0
d	Total (add lines 1a, b, and c)	1d	2,483,156
e	Reduction claimed for blockage or other factors reported on lines 1a and	•••	
•	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	0
3	Subtract line 2 from line 1d	3	2,483,156
4	Cash deemed held for charitable activities Enter 1½% of line 3 (for greater amount, see		
•	instructions)	4	37,247
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	2,445,909
6	Minimum investment return. Enter 5% of line 5	6	122,295
	rft XI Distributable Amount (see instructions) (Section 4942(J)(3) and (J)(5) private operating f	•	
	and certain foreign organizations check here ▶ □ and do not complete this part.)	-	
1	Minimum investment return from Part X, line 6	1	122,295
2a	Tax on investment income for 2017 from Part VI, line 5		
b	Income tax for 2017 (This does not include the tax from Part VI)		
С	Add lines 2a and 2b	2c	6,494
3	Distributable amount before adjustments Subtract line 2c from line 1	3	115,801
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	115,801
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.	Ť	
	line 1	7	115,801
Pa	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
а	Expenses, contributions, gifts, etc - total from Part I, column (d), line 26	1a	20,000
b	Program-related investments – total from Part IX-B	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
	purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the		
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	20,000
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income		
	Enter 1% of Part I, line 27b See instructions	5	0
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	20,000
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundat	ion	

Form **990-PF** (2017)

Pa	rt XIII Undistributed Income (see instructions)				
	,	(a)	(b)	(c)	(d)
1	Distributable amount for 2017 from Part XI,	Corpus	Years prior to 2016	2016	2017
	line 7				115,801
2	Undistributed income, if any, as of the end of 2017				
	Enter amount for 2016 only				
	Total for prior years 20 , 20 , 20				
3	Excess distributions carryover, if any, to 2017				······································
	From 2012 25,139				
	From 2013 13,951				
	From 2014 27,524				
	From 2015 30,143				
	From 2016 15,651				
	Total of lines 3a through e	112,408			
4	Qualifying distributions for 2017 from Part XII,	222/400			
	line 4 ▶ \$ 20,000				
а	Applied to 2016, but not more than line 2a			i	
	Applied to undistributed income of prior years				
~	(Election required – see instructions)				
r	Treated as distributions out of corpus (Election				
·	required – see instructions)				
ч	Applied to 2017 distributable amount				20,000
	Remaining amount distributed out of corpus				20,000
5	Excess distributions carryover applied to 2017	95,801			95,801
•	(If an amount appears in column (d), the same	33,001			33,601
	amount must be shown in column (a))				
6	Enter the net total of each column as	1			
٠	indicated below:				
	Corpus Add lines 3f, 4c, and 4e Subtract line 5	16,607			
	Prior years' undistributed income Subtract	10,007			
U	line 4b from line 2b				
^	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				
ч	Subtract line 6c from line 6b Taxable				
u	amount – see instructions				
۵	Undistributed income for 2016 Subtract line				
٠	4a from line 2a Taxable amount – see				
	Instructions				
f	Undistributed income for 2017 Subtract lines				
•	4d and 5 from line 1. This amount must be				
	distributed in 2018				0
7	Amounts treated as distributions out of corpus				
•	to satisfy requirements imposed by section				
	170(b)(1)(F) or 4942(g)(3) (Election may be				
	required—see instructions)				
8	Excess distributions carryover from 2012 not				
•	applied on line 5 or line 7 (see instructions)				
9	Excess distributions carryover to 2018.				
•	Subtract lines 7 and 8 from line 6a	16,607			
10	Analysis of line 9	10,007			
	Excess from 2013				
a	Excess from 2013 Excess from 2014	l			
b	Excess from 2014 Excess from 2015 956	1			
ч С	Excess from 2016 15, 651				
d	Excess from 2016 Excess from 2017	1			
e	LAGGGG HUIII ZUTT		L		000 DF

Part XV Supplementary Information (co	ontinued)			
3 Grants and Contributions Paid During the	Year or Approved for F	uture Payment		
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient	351,117,241,011	
a Paid during the year American Enterprise Institu 1789 Massachusetts Ave Washington DC 20036	te		Civic	20,000
			1	
			1	
			}	
			1	
			ļ	
	<u> </u>			20,000
Total b Approved for future payment		1	▶ 3a	20,000
N/A				
			1	
Total	<u> </u>	<u></u>	▶ 3b	

F	art XVI-A	Analysis of Income-Producing Acti	vities				
		unts unless otherwise indicated	i – –	ed business income	Exclude	d by section 512, 513, or 514	
			(a) Business code	(b) Amount	(c) Exclusion	(d) Amount	(e) Related or exempt function income
1	Program ser	vice revenue			code		(See instructions)
	a	·		ļ <u>.</u>	<u> </u>		
	b						
					 		
			L		-		
					 		
	f			<u> </u>			
_		d contracts from government agencies			ļ		
		dues and assessments	ļ		 -		4 040
_		avings and temporary cash investments	ļ		 		4,848
4		nd interest from securities			 		7,146
5		come or (loss) from real estate	ļ				
		anced property					
6		-financed property					
	Other investi	come or (loss) from personal property			 		4,275
		i) from sales of assets other than inventory	<u> </u>		 		309,372
		or (loss) from special events	ļ		+		309,372
		or (loss) from sales of inventory			+		
		De a			 		
••	h				-		
							
					<u> </u>		 -
	е			· · · · · · · · · · · · · · · · · · ·	1		
12		d columns (b), (d), and (e)		(5	0	325,641
		ne 12, columns (b), (d), and (e)				13	325,641
		n line 13 instructions to verify calculations)					
F	art XVI-B	Relationship of Activities to the Ac	complishm	ent of Exempt P	urpose	es	
	Line No. ▼	Explain below how each activity for which income is accomplishment of the foundation's exempt purpos					ns)
	N/A						
—			<u></u>				
_							
			· _ · · · · · · · · · · · · · · · · · ·				
_							
			 .				
					-		
							
_							

7	atr VAII	Exempt Organiz	_	isters to an	a i ransactio	ons and Relationships wi	ith Noncharitat	не		
1	Did the ord			in any of the follow	owing with any o	ther organization described		T	Yes	No
		501(c) (other than secti			-	-				
	organizatio			,		5 .				İ
а	Transfers t	from the reporting found	ation to a nonc	haritable exemp	ot organization of					l
	(1) Cash							1a(1)		_X_
	(2) Other	assets						1a(2)		X
b	Other trans	sactions								l
	(1) Sales	of assets to a noncharita	able exempt orç	ganızatıon				1b(1)		X
		ases of assets from a no			on			1b(2)		X
		of facilities, equipment,		s				1b(3)		X
		ursement arrangements	\$					1b(4)		X
		or loan guarantees						1b(5)		X
_		mance of services or me		-				1b(6)	ļ	X
		facilities, equipment, m	-		-	nn (b) should always show the fai	e markat	1c		
u						he foundation received less than				
		=	-	-	•	the goods, other assets, or service				
_	(a) Line no	(b) Amount involved		f noncharitable exem		(d) Description of transfers, tr		rrangeme	nts	
N/	A									
										
			<u> </u>	 						
							<u> </u>		_	
			 							
		 	 							
			 							—
			 		 				-	
			 	-				·····		
		- 	 	·						
			 							—
										
			 		·-·					
2a	Is the foun	dation directly or indirec	tly affiliated wit	h, or related to,	one or more tax-	exempt organizations			_	
	described	in section 501(c) (other	than section 50	01(c)(3)) or in se	ection 527?			Y	es X	No
b	If "Yes," co	emplete the following scl	hedule							
		(a) Name of organization		(b) Type of	organization	(c) Descri	ption of relationship			
	N/A									
										
										
	Under p	enalties of perjury, I declare the	at I have examined	this return, including	accompanying sched	lules and statements, and to the best of my	knowledge and belief, it	is true,	-	
	correct,	and complete Declaration of p	reparer (other than	taxpayer) is based	on all information of w	hich preparer has any knowledge	May the IRS dis	cuss this r	etum	$\neg \neg$
Sig	n	1		ί	<i>i</i>		with the prepare	r shown be	elow?	¬
ler			<i>R</i> />		, •	1 0 1 0	See instructions	X	Yes	No
		en	m		4	//8//8 L TTER	E			
_	Sig	nature of officer or trustee		\overline{C}	Date	Title				
	Print/	Type preparer's name			Preparer's signatu	ire A. I Lim	Date		Check	- d
Paid	. 1					///swy the	\mathcal{O}		self-em	
	ROBI	ERT S. FIELD,				FIELD, JR.		8/18		
•	Only Firm's			SERVICE	INC.		PTIN PO	1226	713	<u> </u>
J 3 6	Firm's	s address ► 241	BRADLEY		20		Firm's EIN ▶			770
		PALM	BEACH,	FL 334	<u> </u>			1-45		
								Form 99	ソレーピト	* (2017)

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.

Go to www.irs.gov/Form990 for the latest information.

OMB No 1545-0047

2017

Name of the organization **Employer identification number** THE OLIVER R. GRACE CHARITABLE FOUNDATION 11-3105739 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 331/3% 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

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)

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

For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF.

totaling \$5,000 or more during the year

Schedule B (Form 990, 990-EZ, or 990-PF) (2017)

S ≤

Page 1 of 1

Name of organization THE OLIVER R. GRACE CHARITABLE

Employer identification number 11-3105739

Part I	Contributors (see instructions) Use duplicate copies	of Part I if additional space is ne	eded
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	JOHN IRWIN 201 TRESSER BLVD STAMFORD CT 06901	\$ 200,418	Person Payroll Noncash (Complete Part If for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	OLIVER R. GRACE, JR. 241 BRADLEY PLACE PALM BEACH FL 33480	\$ 416,740	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroli Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroli Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)

Page 1 of 1

ane 3

Name of organization
THE OLIVER R GRACE CHARTTABLE

Employer identification number 11-3105739

THE OLIVER R. GRACE CHARITABLE 11

Part II	Noncash Property (see instructions) Use duplication	te copies of Part II if additional sp	ace is needed.
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
1	848 SHS DANAHER CORP		
		\$ 67,592	01/26/17
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
1	1191 SHS ABIOMED INC		
		s 132,826	01/26/17
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
2	40,000 SHS ORYX INTERNATIONAL		
		\$ 416,740	12/27/17
(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
		\$	

- 00	0-PF	Capital Gains and Losse	es for Tax on Investment In	come	2047
Form 99	\	idar year 2017, or tax year beginning	, and ending		2017
Name		de year so w, or tax year sogg	, and one mg	Employer Idea	ntification Number
		ACE CHARITABLE			
FOUNDA				11-3105	739
	(a) List and descri 2-story brick w	be the kind(s) of property sold, e.g., real estate, arehouse, 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)
(1) 1191				03/18/09	01/25/17
	Danaher Co:		D D	03/09/00	01/25/17
		I Provident	P	07/01/08	01/26/17
(4) 1125	1125 shs Abiomed Inc			03/18/09	02/15/17
		Market Inc Tr	P	05/29/13	02/24/17
(6) 1500	00 US Trea:	sury	P	02/02/17	08/03/17
	00 US Trea	sury	P	05/25/17	08/24/17
(8) (9)					
(10)					
(11)				 	
(12)			·	1	
(13)					
(14)					
<u>(15)</u>	··	***************************************			<u> </u>
		<u></u>			
(e) Gro	oss sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gair	ı or (loss)) minus (g)
(1)	137,073	(er anomable)	6,406		30,667
(2)	68,261	 	6,159		62,102
(3)	1,190		926	 	264
(4)	123,689		6,052	1	17,637
(5)	8,977		11,210	-2,233	
(6)	150,000		149,528	472	
(7)	200,000		199,537		463
(8)				<u> </u>	
(9)		<u> </u>			
(10) (11)		 		 	
(12)				 	
(13)					
(14)					
(15)					
			***************************************	<u></u>	
Complete	only for assets showir	ng gain in column (h) and owned by the	e foundation on 12/31/69	(I) Com (Co	d the government
(i) FMV	as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	(I) Gains (Co col (k), but not les Losses (from	ss than -0-) Or
(1)			ore early, warry		30,667
(2)				† -	62,102
(3)					264
(4)				1	17,637
(5)					-2,233
(6)				<u> </u>	472
(7)		 		+	463
(8)				 	
<u>(9)</u>		 		 	
(10)		 		 	
(11) (12)		 		 	
(13)					
(14)					
(15)		T			

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ORGCHARTR THE OLIVER R. GRACE CHARITABLE 11 2105720

11-3105739 FYE: 12/31/2017

Statement 1 - Form 990-PF, Part I, Line 11 - Other Income

,	Adjusted Net Income \$ 4,275		Charitable Purpose	\$ \$		Charitable Purpose	\$		\$	S)	Fair Market Value	
	Net Investment Income	Taxes	Adjusted Net	0 % %	Expenses	Adjusted Net	১	175 398	\$ 573	ernment Investment	Basis of Valuation	
	Revenue per Books \$ 4,275	Part I, Line 18 -	Net Investment	\$ \$	- Form 990-PF, Part I, Line 23 - Other Expenses	Net Investment	<i>«</i>	175 398	\$ 573	Part II, Line 10a - US and State Government Investments	End of Year	
		Statement 2 - Form 990-PF,	Total	\$ 1,043		Total	٧٠	175 398	\$ 573		Beginning of Year \$ 99,916 \$	
	Description PTP Other Income Total	Stal		US Fed Tax Paid Total	Statement 3	Description	Expenses	Broker and Filing Fees FTW	Total	Statement 4 - Form 990-PF,	Description US Treasury Bonds Total	

ORGCHARTR THE OLIVER R. GRACE CHARITABLE Federal Statements

FYE: 12/31/2017

Statement 5 - Form 990-PF, Part II, Line 10b - Corporate Stock Investments

Fair Market Value	\$ 3,176,347	\$ 3,176,347
Basis of Valuation	Cost	
End of Year	866,779	866,779
	S	ψ
Beginning of Year	297,146	297,146
"	တ	φ.
Description	Corporate Stock	Total

ORGCHARTR THE OLIVER R. GRACE CHARITABLE 4/18/2018 5:07 PM 11-3105739 Federal Statements

FYE: 12/31/2017

Statement 6 - Form 990-PF, Part III, Line 5 - Other Decreases

Description	Amount		
Unrealized appreciation on donated securities	\$	545,352	
Total	\$	545,352	

Statement 7 - Form 990-PF, Part XV, Line 1a - Managers Who Contributed Over 2% or \$5,000

Name of Manager	Amount	Amount		
Lorraine G. Grace Oliver R. Grace, Jr.	\$			
Total	\$	0		