

Form 990-PF

Department of the Treasury
Internal Revenue Service

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 instructions is at www.irs.gov/form990pf.

2017

**Open to Public
Inspection**

For calendar year 2017, or tax year beginning 01-01-2017 , and ending 12-31-2017

Name of foundation THE SHARPE FAMILY FOUNDATION		A Employer identification number 13-6208422			
Number and street (or P O box number if mail is not delivered to street address) C/O KLR 951 NORTH MAIN STREET		B Telephone number (see instructions) (401) 274-2001			
City or town, state or province, country, and ZIP or foreign postal code PROVIDENCE, RI 02904		C If exemption application is pending, check here ► <input type="checkbox"/>			
G Check all that apply <input type="checkbox"/> Initial return <input type="checkbox"/> Initial return of a former public charity <input type="checkbox"/> Final return <input type="checkbox"/> Amended return <input type="checkbox"/> Address change <input type="checkbox"/> Name change		D 1. Foreign organizations, check here ► <input type="checkbox"/> 2 Foreign organizations meeting the 85% test, check here and attach computation ► <input type="checkbox"/>			
H Check type of organization <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		E If private foundation status was terminated under section 507(b)(1)(A), check here ► <input type="checkbox"/>			
I Fair market value of all assets at end of year (from Part II, col. (c), line 16) ► \$ 23,369,319	J Accounting method <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) <i>(Part I, column (d) must be on cash basis)</i>	F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here ► <input type="checkbox"/>			
Part I Analysis of Revenue and Expenses <i>(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions))</i>		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
Revenue					
1 Contributions, gifts, grants, etc., received (attach schedule)					
2 Check ► <input checked="" type="checkbox"/> if the foundation is not required to attach Sch B					
3 Interest on savings and temporary cash investments		138	138		
4 Dividends and interest from securities		393,556	393,556		
5a Gross rents					
b Net rental income or (loss)					
6a Net gain or (loss) from sale of assets not on line 10		795,176			
b Gross sales price for all assets on line 6a	4,758,214				
7 Capital gain net income (from Part IV, line 2)			795,176		
8 Net short-term capital gain					
9 Income modifications					
10a Gross sales less returns and allowances					
b Less Cost of goods sold					
c Gross profit or (loss) (attach schedule)					
11 Other income (attach schedule)		-127,411	-110,621		
12 Total. Add lines 1 through 11		1,061,459	1,078,249		
Operating and Administrative Expenses					0
13 Compensation of officers, directors, trustees, etc		0	0		0
14 Other employee salaries and wages					
15 Pension plans, employee benefits					
16a Legal fees (attach schedule)					
b Accounting fees (attach schedule)		15,280	7,640		7,640
c Other professional fees (attach schedule)		97,532	67,083		30,452
17 Interest					
18 Taxes (attach schedule) (see instructions)		1,477	1,477		0
19 Depreciation (attach schedule) and depletion					
20 Occupancy					
21 Travel, conferences, and meetings		3,830	0		3,830
22 Printing and publications					
23 Other expenses (attach schedule)		230	0		230
24 Total operating and administrative expenses.					
Add lines 13 through 23		118,349	76,200		42,152
25 Contributions, gifts, grants paid		1,465,500			1,465,500
26 Total expenses and disbursements. Add lines 24 and 25		1,583,849	76,200		1,507,652
27 Subtract line 26 from line 12					
a Excess of revenue over expenses and disbursements		-522,390			
b Net investment income (if negative, enter -0-)			1,002,049		
c Adjusted net income (if negative, enter -0-)					

	Part II Balance Sheets	Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)	Beginning of year	End of year	
			(a) Book Value	(b) Book Value	(c) Fair Market Value
Assets	1 Cash—non-interest-bearing				
	2 Savings and temporary cash investments		676,982	791,322	791,322
	3 Accounts receivable ►				
	Less allowance for doubtful accounts ►				
	4 Pledges receivable ►				
	Less allowance for doubtful accounts ►				
	5 Grants receivable				
	6 Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions)				
	7 Other notes and loans receivable (attach schedule) ►				
	Less allowance for doubtful accounts ►				
	8 Inventories for sale or use				
	9 Prepaid expenses and deferred charges				
	10a Investments—U S and state government obligations (attach schedule)				
	b Investments—corporate stock (attach schedule)		11,383,430	11,895,148	15,536,149
	c Investments—corporate bonds (attach schedule)		2,248,180	2,540,649	2,420,898
	11 Investments—land, buildings, and equipment basis ►				
	Less accumulated depreciation (attach schedule) ►				
	12 Investments—mortgage loans				
	13 Investments—other (attach schedule)		4,821,845	3,331,536	4,620,950
	14 Land, buildings, and equipment basis ►				
	Less accumulated depreciation (attach schedule) ►				
	15 Other assets (describe ► _____)				
	16 Total assets (to be completed by all filers—see the instructions Also, see page 1, item I)		19,130,437	18,558,655	23,369,319
Liabilities	17 Accounts payable and accrued expenses				
	18 Grants payable				
	19 Deferred revenue				
	20 Loans from officers, directors, trustees, and other disqualified persons				
	21 Mortgages and other notes payable (attach schedule)				
	22 Other liabilities (describe ► _____)				
	23 Total liabilities (add lines 17 through 22)		0	0	
Net Assets or Fund Balances	Foundations that follow SFAS 117, check here ► <input type="checkbox"/> and complete lines 24 through 26 and lines 30 and 31.				
	24 Unrestricted				
	25 Temporarily restricted				
	26 Permanently restricted				
	Foundations that do not follow SFAS 117, check here ► <input checked="" type="checkbox"/> and complete lines 27 through 31.				
	27 Capital stock, trust principal, or current funds		21,512,369	21,512,369	
	28 Paid-in or capital surplus, or land, bldg , and equipment fund		0	0	
	29 Retained earnings, accumulated income, endowment, or other funds		-2,381,932	-2,953,714	
	30 Total net assets or fund balances (see instructions)		19,130,437	18,558,655	
	31 Total liabilities and net assets/fund balances (see instructions)		19,130,437	18,558,655	

Part III Analysis of Changes in Net Assets or Fund Balances

1	Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)	1	19,130,437
2	Enter amount from Part I, line 27a	2	-522,390
3	Other increases not included in line 2 (itemize) ►	3	16,790
4	Add lines 1, 2, and 3	4	18,624,837
5	Decreases not included in line 2 (itemize) ►	5	66,182
6	Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30	6	18,558,655

Part IV Capital Gains and Losses for Tax on Investment Income

(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse, or common stock, 200 shs MLC Co.)			(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1 a BNY MELLON SALES OF SECURITIES			P		
b FLOW THRU FROM PARTNERSHIPS			P		
c FLOW THRU FROM PARTNERSHIPS			P		
d					
e					
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)		
a 4,758,214		4,089,129	669,085		
b			120,795		
c			5,296		
d					
e					
Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69					
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	(l) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))		
a			669,085		
b			120,795		
c			5,296		
d					
e					
2 Capital gain net income or (net capital loss)			If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7	2	795,176
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6) If gain, also enter in Part I, line 8, column (c) (see instructions) If (loss), enter -0- in Part I, line 8					

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

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

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

 Yes No

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period?

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

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

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col (b) divided by col (c))
2016	1,447,634	22,065,490	0 065606
2015	1,397,491	23,253,211	0 060099
2014	1,396,195	24,618,725	0 056713
2013	1,391,731	25,126,442	0 055389
2012	1,442,747	24,318,871	0 059326
2 Total of line 1, column (d)			0 297133
3 Average distribution ratio for the 5-year base period—divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years			0 059427
4 Enter the net value of noncharitable-use assets for 2017 from Part X, line 5			22,875,668
5 Multiply line 4 by line 3			1,359,432
6 Enter 1% of net investment income (1% of Part I, line 27b)			10,020
7 Add lines 5 and 6			1,369,452
8 Enter qualifying distributions from Part XIII, line 4			1,507,652

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

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

1a	Exempt operating foundations described in section 4940(d)(2), check here ► <input type="checkbox"/> and enter "N/A" on line 1 Date of ruling or determination letter _____ (attach copy of letter if necessary—see instructions)	1	10,020
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here ► <input checked="" type="checkbox"/> 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	0
3	Add lines 1 and 2.	3	10,020
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)	4	0
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-	5	10,020
6	Credits/Payments		
a	2017 estimated tax payments and 2016 overpayment credited to 2017	6a	5,702
b	Exempt foreign organizations—tax withheld at source	6b	
c	Tax paid with application for extension of time to file (Form 8868)	6c	
d	Backup withholding erroneously withheld	6d	0
7	Total credits and payments Add lines 6a through 6d.	7	40,702
8	Enter any penalty for underpayment of estimated tax Check here <input checked="" type="checkbox"/> if Form 2220 is attached	8	0
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9	
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10	30,682
11	Enter the amount of line 10 to be Credited to 2018 estimated tax ►	30,682	Refunded ►
		11	0

Part 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 participate or intervene in any political campaign?	1a	Yes	No
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for definition)?	1b	Yes	No
	<i>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</i>			
c	Did the foundation file Form 1120-POL for this year?	1c	Yes	No
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year			
(1)	On the foundation ► \$ _____ 0	(2)	On foundation managers ► \$ _____ 0	
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers ► \$ _____ 0			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2	Yes	No
	<i>If "Yes," attach a detailed description of the activities</i>			
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? <i>If "Yes," attach a conformed copy of the changes</i>	3	Yes	No
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a	Yes	No
b	If "Yes," has it filed a tax return on Form 990-T for this year?	4b	Yes	No
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5	Yes	No
	<i>If "Yes," attach the statement required by General Instruction T</i>			
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either <ul style="list-style-type: none"> By language in the governing instrument, or By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument? 	6	Yes	
7	Did the foundation have at least \$5,000 in assets at any time during the year? <i>If "Yes," complete Part II, col (c), and Part XV</i>	7	Yes	
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)			
	►RI			
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? <i>If "No," attach explanation</i>	8b	Yes	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2017 or the taxable year beginning in 2017 (see instructions for Part XIV)? <i>If "Yes," complete Part XIV</i>	9	Yes	No
10	Did any persons become substantial contributors during the tax year? <i>If "Yes," attach a schedule listing their names and addresses</i>	10	Yes	No

Part 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	No
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement (see instructions)	12	No
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ►N/A	13	Yes
14	The books are in care of ►KAHN LITWIN RENZA CO LTD	Telephone no ►(401) 274-2001	
Located at ►951 NORTH MAIN STREET PROVIDENCE RI			ZIP+4 ►02904
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 —Check here and enter the amount of tax-exempt interest received or accrued during the year.	► 15	
16	At any time during calendar year 2017, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? See instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) If "Yes", enter the name of the foreign country ►	16	Yes No

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

File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		
		Yes No
1a	During the year did the foundation (either directly or indirectly)	
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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)?.	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days).	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
b	If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)? Organizations relying on a current notice regarding disaster assistance check here.	► <input type="checkbox"/>
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 2017?	1c <input type="checkbox"/> No
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5))	
a	At the end of tax year 2017, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2017? If "Yes," list the years ► 20____, 20____, 20____, 20____	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement—see instructions) ►	2b <input type="checkbox"/>
c	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here ► 20____, 20____, 20____, 20____	
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
b	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 foundation had excess business holdings in 2017).	3b <input type="checkbox"/>
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a <input type="checkbox"/> No
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2017?	4b <input type="checkbox"/> No

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

5a	During the year did the foundation pay or incur any amount to			
	(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
	(2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
	(3) Provide a grant to an individual for travel, study, or other similar purposes?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
	(4) Provide a grant to an organization other than a charitable, etc , organization described in section 4945(d)(4)(A)? (see instructions).	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
	(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
b	If any answer is "Yes" to 5a(1)–(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53 4945 or in a current notice regarding disaster assistance (see instructions)? Organizations relying on a current notice regarding disaster assistance check here. ►	<input type="checkbox"/>		5b
c	If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
	<i>If "Yes," attach the statement required by Regulations section 53 4945-5(d)</i>			
6a	Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
b	Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	6b
	<i>If "Yes" to 6b, file Form 8870</i>			No
7a	At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
b	If yes, did the foundation receive any proceeds or have any net income attributable to the transaction?	<input type="checkbox"/>		7b

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

1 List all officers, directors, trustees, foundation managers and their compensation (see instructions).

(a) Name and address	Title, and average hours per week (b) devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	Expense account, (e) other allowances
See Additional Data Table				

2 Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, enter "NONE."

(a) Name and address of each employee paid more than \$50,000	Title, and average hours per week (b) devoted to position	(c) Compensation	Contributions to employee benefit plans and deferred (d) compensation	Expense account, (e) other allowances
NONE				

Total number of other employees paid over \$50,000.

3 Five highest-paid independent contractors for professional services (see instructions). 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

Part IX-A Summary of Direct Charitable Activities

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

organizations and other beneficiaries served, conferences convened, research papers produced, etc	
1	
2	
3	
4	

Part IX-B **Summary of Program-Related Investments** (see instructions)

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2		Amount
1	_____	_____
	_____	_____
2	_____	_____
	_____	_____
All other program-related investments See instructions		
3	_____	_____

A

Total Add lines 1 through 3

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

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc , purposes		
a	Average monthly fair market value of securities.	1a	22,322,905
b	Average of monthly cash balances.	1b	901,123
c	Fair market value of all other assets (see instructions).	1c	0
d	Total (add lines 1a, b, and c).	1d	23,224,028
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	23,224,028
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see instructions).	4	348,360
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	22,875,668
6	Minimum investment return. Enter 5% of line 5.	6	1,143,783

Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign

Part XI organizations check here ► and do not complete this part)

1	Minimum investment return from Part X, line 6.	1	1,143,783
2a	Tax on investment income for 2017 from Part VI, line 5.	2a	10,020
b	Income tax for 2017 (This does not include the tax from Part VI).	2b	
c	Add lines 2a and 2b.	2c	10,020
3	Distributable amount before adjustments Subtract line 2c from line 1.	3	1,133,763
4	Recoveries of amounts treated as qualifying distributions.	4	0
5	Add lines 3 and 4.	5	1,133,763
6	Deduction from distributable amount (see instructions).	6	0
7	Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1.	7	1,133,763

Part XII Qualifying Distributions (see instructions)

1	Amounts paid (including administrative expenses) to accomplish charitable, etc , purposes		
a	Expenses, contributions, gifts, etc —total from Part I, column (d), line 26.	1a	1,507,652
b	Program-related investments—total from Part IX-B.	1b	0
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc , purposes.	2	
3	Amounts set aside for specific charitable projects that satisfy the		
a	Suitability test (prior IRS approval required).	3a	
b	Cash distribution test (attach the required schedule).	3b	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	1,507,652
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	10,020
6	Adjusted qualifying distributions. Subtract line 5 from line 4.	6	1,497,632
Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years			

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2016	(c) 2016	(d) 2017
1 Distributable amount for 2017 from Part XI, line 7				1,133,763
2 Undistributed income, if any, as of the end of 2017			0	
a Enter amount for 2016 only.			0	
b Total for prior years 20____, 20____, 20____		0		
3 Excess distributions carryover, if any, to 2017				
a From 2012.	92,879			
b From 2013.	140,891			
c From 2014.	179,879			
d From 2015.	248,440			
e From 2016.	346,635			
f Total of lines 3a through e.	1,008,724			
4 Qualifying distributions for 2017 from Part XII, line 4 ► \$ 1,507,652			0	
a Applied to 2016, but not more than line 2a			0	
b Applied to undistributed income of prior years (Election required—see instructions).		0		
c Treated as distributions out of corpus (Election required—see instructions).	0			
d Applied to 2017 distributable amount.				1,133,763
e Remaining amount distributed out of corpus	373,889			
5 Excess distributions carryover applied to 2017 (If an amount appears in column (d), the same amount must be shown in column (a))	0			0
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	1,382,613			
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 2016 Subtract line 4a from line 2a Taxable amount—see instructions			0	
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)	0			
8 Excess distributions carryover from 2012 not applied on line 5 or line 7 (see instructions)	92,879			
9 Excess distributions carryover to 2018. Subtract lines 7 and 8 from line 6a	1,289,734			
10 Analysis of line 9				
a Excess from 2013.	140,891			
b Excess from 2014.	179,879			
c Excess from 2015.	248,440			
d Excess from 2016.	346,635			
e Excess from 2017.	373,889			

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

1a	If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2017, enter the date of the ruling. ►			
b	Check box to indicate whether the organization is a private operating foundation described in section <input type="checkbox"/> 4942(j)(3) or <input type="checkbox"/> 4942(j)(5)			
2a	Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed.			
b	85% of line 2a.			
c	Qualifying distributions from Part XII, line 4 for each year listed.			
d	Amounts included in line 2c not used directly for active conduct of exempt activities.			
e	Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c.			
3	Complete 3a, b, or c for the alternative test relied upon			
a	"Assets" alternative test—enter			
(1)	Value of all assets.			
(2)	Value of assets qualifying under section 4942(j)(3)(B)(i)			
b	"Endowment" alternative test—enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed.			
c	"Support" alternative test—enter			
(1)	Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties).			
(2)	Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii).			
(3)	Largest amount of support from an exempt organization			
(4)	Gross investment income			

Part XV Supplementary Information (Complete this part only if the organization had \$5,000 or more in assets at any time during the year—see instructions.)**1 Information Regarding Foundation Managers:**

- a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000) (See section 507(d)(2))
- b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest

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

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

- a The name, address, and telephone number or email address of the person to whom applications should be addressed
- b The form in which applications should be submitted and information and materials they should include
- c Any submission deadlines
- d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors

Part XV Supplementary Information (continued)

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

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated

	Unrelated business income		Excluded by section 512, 513, or 514		(e) Related or exempt function income (See instructions)
	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	
1 Program service revenue					
a					
b					
c					
d					
e					
f					
g Fees and contracts from government agencies					
2 Membership dues and assessments.					
3 Interest on savings and temporary cash investments			14	138	
4 Dividends and interest from securities.			14	393,556	
5 Net rental income or (loss) from real estate					
a Debt-financed property.					
b Not debt-financed property.					
6 Net rental income or (loss) from personal property					
7 Other investment income.					
8 Gain or (loss) from sales of assets other than inventory			18	795,176	
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue					
a FLOW THRU FROM LPS	531390	-16,790	14	-122,734	
b CLASS ACTION SUIT			18	3,068	
c SECTION 965(A) INCOME INCLUSION					9,045
d					
e					
12 Subtotal Add columns (b), (d), and (e).		-16,790		1,069,204	9,045
13 Total. Add line 12, columns (b), (d), and (e).					1,061,459

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

Line No. ▼	Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes) (See instructions)
11C	SECTION 965(A) INCOME INCLUSION

Part XVII

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

- 1 Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?

	Yes	No
1a(1)		No
1a(2)		No
1b(1)		No
1b(2)		No
1b(3)		No
1b(4)		No
1b(5)		No
1b(6)		No
1c		No

- a Transfers from the reporting foundation to a noncharitable exempt organization of

- ### **b Other transactions**

- | | | |
|---|-------|----|
| (1) Sales of assets to a noncharitable exempt organization. | 1b(1) | No |
| (2) Purchases of assets from a noncharitable exempt organization. | 1b(2) | No |
| (3) Rental of facilities, equipment, or other assets. | 1b(3) | No |
| (4) Reimbursement arrangements. | 1b(4) | No |
| (5) Loans or loan guarantees. | 1b(5) | No |
| (6) Performance of services or membership or fundraising solicitations. | 1b(6) | No |

- c Sharing of facilities, equipment, mailing lists, other assets, or paid employees.

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

- 2a** Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations

described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? Yes No

- b** If "Yes," complete the following schedule

(a) Name of organization	(b) Type of organization	(c) Description of relationship

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

* * * * *

2018-11-09

* * * * *

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

Signature of officer or trustee

Date

✓ Title

**Sign
Here**

**Paid
Preparer
Use Only**

Additional Data

Software ID:

Software Version:

EIN: 13-6208422

Name: THE SHARPE FAMILY FOUNDATION

Form 990PF - Special Condition Description:

Special Condition Description

965 TAX

Form 990PF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation

(a) Name and address	(b) Title, and average hours per week (c) devoted to position	(d) Compensation (If not paid, enter -0-)	(e) Contributions to employee benefit plans and deferred compensation	Expense account, (f) other allowances
HENRY D SHARPE JR	TRUSTEE 1 00	0	0	0
POJAC POINT ROAD NORTH KINGSTOWN, RI 02852	TRUSTEE 1 00	0	0	0
PEGGY B SHARPE	TRUSTEE 1 00	0	0	0
POJAC POINT ROAD NORTH KINGSTOWN, RI 02852	TRUSTEE 1 00	0	0	0
HENRY D SHARPE III	TRUSTEE 1 00	0	0	0
PO BOX 202 SAUNDERSTOWN, RI 02874	TRUSTEE 1 00	0	0	0
DOUGLAS B SHARPE	TRUSTEE 1 00	0	0	0
401 SILVER HILL ROAD CONCORD, MA 01742	TRUSTEE 1 00	0	0	0
SARAH A SHARPE	TRUSTEE 1 00	0	0	0
680 SUDBURY ROAD CONCORD, MA 01742				

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<i>a Paid during the year</i>				
ABBE MUSEUM26 MOUNT DESERT ST BAR HARBOR, ME 04609	NONE	PUBLIC CHARITY	CHARITABLE	36,500
APPALACHIAN MOUNTAIN CLUB 5 JOY STREET BOSTON, MA 02108	NONE	PUBLIC CHARITY	CHARITABLE	1,500
AUDUBON SOCIETY OF RI 12 SANDERSON ROAD SMITHFIELD, RI 02917	NONE	PUBLIC CHARITY	CHARITABLE	30,000
Total				1,465,500
3a				

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year				
BOYS AND GIRLS CLUBS OF PROVIDENCE 550 WICKENDEN STREET PROVIDENCE, RI 02903	NONE	PUBLIC CHARITY	CHARITABLE	1,000
BROWN UNIVERSITY OFFICE OF DEVELOPMENT BOX 1893 PROVIDENCE, RI 02912	NONE	PUBLIC CHARITY	EDUCATION	70,000
BUTLER HOSPITAL 345 BLACKSTONE BOULEVARD PROVIDENCE, RI 02906	NONE	PUBLIC CHARITY	CHARITABLE	1,000
Total				1,465,500
3a				

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year				
CAPITAL GOOD FUND 26 7TH STREET PROVIDENCE, RI 02906	NONE	PUBLIC CHARITY	CHARITABLE	1,000
CERES 99 CHAUNCY STREET 6TH FL BOSTON, MA 02111	NONE	PUBLIC CHARITY	CHARITABLE	46,500
CITY YEAR OF RHODE ISLAND 77 EDDY STREET FL 2 PROVIDENCE, RI 02903	NONE	PUBLIC CHARITY	CHARITABLE	500
Total				1,465,500
3a				

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<i>a Paid during the year</i>				
COLLEGE OF THE ATLANTIC 105 EDEN STREET BAR HARBOR, ME 04609	NONE	PUBLIC CHARITY	EDUCATION	35,000
COMMON CAUSE RHODE ISLAND 245 WATERMAN STREET PROVIDENCE, RI 02906	NONE	PUBLIC CHARITY	CHARITABLE	20,000
COMMUNITY PREPARATORY SCHOOL 126 SOMERSET STREET PROVIDENCE, RI 02907	NONE	PUBLIC CHARITY	EDUCATION	1,000
Total				1,465,500
3a				

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year				
COMMUNITY SERVINGS 18 MARBURY TER JAMAICA PLAIN, MA 02130	NONE	PUBLIC CHARITY	CHARITABLE	100,000
COMMUNITY WORKS 25 WEST STREET BOSTON, MA 02111	NONE	PUBLIC CHARITY	CHARITABLE	2,500
CONCORD ACADEMY 166 MAIN STREET CONCORD, MA 01742	NONE	PUBLIC CHARITY	EDUCATION	60,000
Total				1,465,500
3a				

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<i>a Paid during the year</i>				
CONCORD COMMUNITY CHEST 111 OLD ROAD TO NINE ACRE CORNER CONCORD, MA 01742	NONE	PUBLIC CHARITY	TTHOMPSON1 - 03/04/14 10 45AM WORKSHEET GRANTS AND CONTRIBUTIONS PA	4,000
CONCORD LAND CONSERVATION TRUST PO BOX 141 CONCORD, MA 01742	NONE	PUBLIC CHARITY	CHARITABLE	6,000
CONCORD LIBRARY 129 MAIN STREET CONCORD, MA 01742	NONE	PUBLIC CHARITY	CHARITABLE	1,000
Total			►	1,465,500
3a				

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year				
CONCORD MUSEUM 200 LEXINGTON ROAD PO BOX 146 CONCORD, MA 01742	NONE	PUBLIC CHARITY	CHARITABLE	6,200
CONSERVATION LAW FOUNDATION 55 DORRANCE STREET PROVIDENCE, RI 02903	NONE	PUBLIC CHARITY	CHARITABLE	36,000
CROSSROADS RHODE ISLAND 160 BROAD STREET PROVIDENCE, RI 02903	NONE	PUBLIC CHARITY	CHARITABLE	5,000
Total				1,465,500
3a				

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year				
DORCAS INTERNATIONAL INSTITUTE OF RHODE ISLAND 220 ELMWOOD AVENUE PROVIDENCE, RI 02907	NONE	PUBLIC CHARITY	EDUCATION	5,000
EARTHWATCH INSTITUTE 3 CLOCK TOWER PLACE SUITE 100 MAYNARD, MA 01754	NONE	PUBLIC CHARITY	CHARITABLE	3,000
EMERSON HEALTH CARE FOUNDATION 133 OLD ROAD TO NINEACRE CORNER CONCORD, MA 01742	NONE	PUBLIC CHARITY	CHARITABLE	2,000
Total				1,465,500
3a				

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<i>a Paid during the year</i>				
EMERSON UMBRELLA CENTER FOR THE ARTS 40 STOW STREET CONCORD, MA 01742	NONE	PUBLIC CHARITY	CHARITABLE	1,000
FAMILY SERVICE OF RHODE ISLAND PO BOX 6688 PROVIDENCE, RI 02940	NONE	PUBLIC CHARITY	CHARITABLE	500
FENN SCHOOL 516 MONUMENT STREET CONCORD, MA 01742	NONE	PUBLIC CHARITY	EDUCATION	57,500
Total				1,465,500
3a				

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year				
FILMMAKERS COLLABORATIVE SF 145 NINTH STREET 101 SAN FRANCISCO, CA 94103	NONE	PUBLIC CHARITY	CHARITABLE	10,000
FOREST SOCIETY OF MAINE 115 FRANKLIN ST 3RD FLOOR BANGOR, ME 04401	NONE	PUBLIC CHARITY	CHARITABLE	1,000
FRENCHMAN BAY CONSERVANCY 71 TIDAL FALLS ROAD PO BOX 150 HANCOCK, ME 04640	NONE	PUBLIC CHARITY	CHARITABLE	77,500
Total				1,465,500
3a				

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year				
GAINING GROUNDPO BOX 374 CONCORD, MA 01742	NONE	PUBLIC CHARITY	CHARITABLE	1,000
GROW SMART RHODE ISLAND 235 PROMENADE STREET SUITE 550 PROVIDENCE, RI 02908	NONE	PUBLIC CHARITY	CHARITABLE	5,000
HISTORIC NEW ENGLAND 141 CAMBRIDGE STREET BOSTON, MA 02114	NONE	PUBLIC CHARITY	EDUCATION	2,000
Total				1,465,500
3a				

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<i>a Paid during the year</i>				
KENT COUNTY HOSPITAL 455 TOLL GATE ROAD WARWICK, RI 02886	NONE	PUBLIC CHARITY	CHARITABLE	5,000
LAND TRUST ALLIANCE 1331 H ST NW SUITE 400 WASHINGTON, DC 20005	NONE	PUBLIC CHARITY	CHARITABLE	35,000
LOWELL COMMUNITY HEALTH CENTER 585-597 MERRIMACK STREET LOWELL, MA 01854	NONE	PUBLIC CHARITY	CHARITABLE	71,000
Total				1,465,500
3a				

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year				
MADEIRA SCHOOL 8328 GEORGETOWN PIKE MCLEAN, VA 22102	NONE	PUBLIC CHARITY	EDUCATION	2,000
MAINE COAST HERITAGE TRUST BOWDOIN MILL 1 MAIN STREET STE 201 TOPSHAM, ME 04086	NONE	PUBLIC CHARITY	CHARITABLE	27,000
MAINE COAST MEMORIAL HOSPITAL 1 GREENHOUSE RD ELLSWORTH, ME 04605	NONE	PUBLIC CHARITY	CHARITABLE	2,000
Total				1,465,500
3a				

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year				
MAINE ORGANIC FARMERS & GARDENERS ASSOCIATION PO BOX 170 UNITY, ME 04988	NONE	PUBLIC CHARITY	CHARITABLE	500
MAINE SEACOAST MISSION 127 WEST STREET BAR HARBOR, ME 04609	NONE	PUBLIC CHARITY	CHARITABLE	500
MASSACHUSETTS AUDUBON SOCIETY 208 SOUTH GREAT ROAD LINCOLN, RI 01773	NONE	PUBLIC CHARITY	CHARITABLE	1,000
Total				1,465,500
3a				

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year				
METCALF INSTITUTE FOR MARINE AND ENVIRONMENTAL REPORTING 218 SOUTH FERRY ROAD NARRAGANSETT, RI 02874	NONE	PUBLIC CHARITY	CHARITABLE	5,000
MINUTE MAN ARC 35 FOREST RIDGE RD STE 110 CONCORD, MA 01742	NONE	PUBLIC CHARITY	CHARITABLE	50,000
MOSES BROWN SCHOOL 250 LLOYD AVENUE PROVIDENCE, RI 02906	NONE	PUBLIC CHARITY	EDUCATION	1,000
Total				1,465,500
3a				

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year				
MOUNT DESERT ISLAND BIOLOGICAL LABORATORY OLD BAR HARBOR ROAD PO BOX 35 SALISBURY COVE, ME 04672	NONE	PUBLIC CHARITY	CHARITABLE	6,000
NARROW RIVER LAND TRUST PO BOX 641 SOUTH KINGSTOWN, RI 02880	NONE	PUBLIC CHARITY	CHARITABLE	10,000
NATURESERVE 1101 WILSON BOULEVARD 15TH FLOOR ARLINGTON, VA 22209	NONE	PUBLIC CHARITY	CHARITABLE	1,000
Total	►			1,465,500
3a				

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year				
PARTNERS IN HEALTH 888 COMMONWEALTH AVE 3RD FLOOR BOSTON, MA 02115	NONE	PUBLIC CHARITY	CHARITABLE	10,000
PHILLIPS EXETER ACADEMY 20 MAIN STREET EXETER, NH 03833	NONE	PUBLIC CHARITY	EDUCATION	5,000
PLANNED PARENTHOOD FEDERATION OF AMERICA 434 WEST 33RD STREET NEW YORK, NY 10001	NONE	PUBLIC CHARITY	CHARITABLE	21,000
Total	►			1,465,500
3a				

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year				
PROVIDENCE COMMUNITY LIBRARY 441 PRAIRIE AVENUE PROVIDENCE, RI 02905	NONE	PUBLIC CHARITY	EDUCATION	4,000
PROVIDENCE PRESERVATION SOCIETY 21 MEETING STREET PROVIDENCE, RI 02903	NONE	PUBLIC CHARITY	CHARITABLE	2,500
PROVIDENCE PUBLIC LIBRARY 225 WASHINGTON STREET PROVIDENCE, RI 02903	NONE	PUBLIC CHARITY	EDUCATION	1,000
Total				1,465,500
3a				

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year				
RHODE ISLAND COMMUNITY FOOD BANK 200 NIANTIC AVENUE PROVIDENCE, RI 02907	NONE	PUBLIC CHARITY	CHARITABLE	15,000
RHODE ISLAND FREE CLINIC 655 BROAD STREET PROVIDENCE, RI 02903	NONE	PUBLIC CHARITY	CHARITABLE	5,000
RHODE ISLAND HOSPITAL FOUNDATION ONE UNION STATION PROVIDENCE, RI 02903	NONE	PUBLIC CHARITY	CHARITABLE	5,000
Total	►			1,465,500
3a				

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year				
RHODE ISLAND INTERFAITH POWER AND LIGHT PO BOX 8815 WARWICK, RI 02888	NONE	PUBLIC CHARITY	CHARITABLE	1,000
RHODE ISLAND LAND TRUST COUNCIL PO BOX 633 SAUNDERSTOWN, RI 02874	NONE	PUBLIC CHARITY	CHARITABLE	7,000
RHODE ISLAND NATURAL HISTORY SURVEY 1 GREENHOUSE RD KINGSTON, RI 02881	NONE	PUBLIC CHARITY	CHARITABLE	10,000
Total				1,465,500
3a				

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<i>a Paid during the year</i>				
RHODE ISLAND PHILHARMONIC ORCHESTRA 667 WATERMAN AVE EAST PROVIDENCE, RI 02914	NONE	PUBLIC CHARITY	CHARITABLE	1,000
RHODE ISLAND PUBLIC EXPENDITURE COUNCIL 300 RICHMOND STREET SUITE 200 PROVIDENCE, RI 02903	NONE	PUBLIC CHARITY	CHARITABLE	5,000
RHODE ISLAND PUBLIC RADIO ONE UNION STATION PROVIDENCE, RI 02903	NONE	PUBLIC CHARITY	CHARITABLE	70,000
Total			►	1,465,500
3a				

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year				
RHODE ISLAND SCHOOL OF DESIGN PO BOX 242 PROVIDENCE, RI 02903	NONE	PUBLIC CHARITY	EDUCATION	5,000
RHODE ISLANDERS SPONSORING EDUCATION 17 GORDON AVENUE PROVIDENCE, RI 02905	NONE	PUBLIC CHARITY	EDUCATION	4,000
SANDRA FEINSTEIN GAMM THEATRE 172 EXCHANGE STREET PAWTUCKET, RI 02860	NONE	PUBLIC CHARITY	CHARITABLE	500
Total	►			1,465,500
3a				

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<i>a Paid during the year</i>				
SARAH LAWRENCE COLLEGE 1 MEAD WAY BRONXVILLE, NY 10708	NONE	PUBLIC CHARITY	EDUCATION	5,000
SAVE THE BAY INC 100 SAVE THE BAY DRIVE PROVIDENCE, RI 02905	NONE	PUBLIC CHARITY	CHARITABLE	27,000
SOUTH COUNTY HOSPITAL 100 KENYON AVENUE WAKEFIELD, RI 02879	NONE	PUBLIC CHARITY	CHARITABLE	5,000
Total				1,465,500
3a				

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<i>a Paid during the year</i>				
SOUTH KENT SCHOOL 40 BULLS BRIDGE ROAD SOUTH KENT, CT 06785	NONE	PUBLIC CHARITY	EDUCATION	20,000
SOUTHSIDE COMMUNITY LAND TRUST 109 SOMERSET STREET PROVIDENCE, RI 02907	NONE	PUBLIC CHARITY	CHARITABLE	1,000
THE BOSTON FOUNDATION 75 ARLINGTON STREET 1000 BOSTON, MA 02116	NONE	PUBLIC CHARITY	CHARITABLE	300
Total				1,465,500
3a				

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year				
THE FOUNDATION FOR FREE FLIGHT PO BOX 518 DUNLAP, CA 93621	NONE	PUBLIC CHARITY	CHARITABLE	20,000
THE INDEPENDENT DAY SCHOOL 115 LAUREL BROOK ROAD MIDDLEFIELD, CT 06455	NONE	PUBLIC CHARITY	THE ED & ELIZABETH WALLACE SCHOLARSHIP FUND	9,000
THE MIRIAM HOSPITAL FOUNDATION 164 SUMMIT AVENUE PROVIDENCE, RI 02906	NONE	PUBLIC CHARITY	CHARITABLE	5,000
Total				1,465,500
3a				

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year				
THE NATURE CONSERVANCY- MAINE CHAPTER 14 MAINE STREET SUITE 401 BRUNSWICK, ME 04011	NONE	PUBLIC CHARITY	CHARITABLE	10,000
THE NATURE CONSERVANCY- MASSACHUSETTS CHAPTER 205 PORTLAND STREET SUITE 400 BOSTON, MA 02114	NONE	PUBLIC CHARITY	CHARITABLE	55,000
THE NATURE CONSERVANCY- RHODE ISLAND FIELD OFFICE 159 WATERMAN STREET PROVIDENCE, RI 02906	NONE	PUBLIC CHARITY	CHARITABLE	30,000
Total			►	1,465,500
3a				

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year				
THE PROVIDENCE ATHENAEUM 251 BENEFIT STREET PROVIDENCE, RI 02903	NONE	PUBLIC CHARITY	EDUCATION	2,000
THE RHODE ISLAND FOUNDATION ONE UNION STATION PROVIDENCE, RI 02903	NONE	PUBLIC CHARITY	CHARITABLE	105,000
THE RHODE ISLAND HISTORICAL SOCIETY 110 BENEVOLENT STREET PROVIDENCE, RI 02906	NONE	PUBLIC CHARITY	EDUCATION	2,000
Total	►			1,465,500
3a				

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year				
TRINITY REPERTORY THEATRE 201 WASHINGTON STREET PROVIDENCE, RI 02903	NONE	PUBLIC CHARITY	CHARITABLE	1,500
UNITARIAN UNIVERSALIST ASSOCIATION 25 BEACON ST BOSTON, MA 02108	NONE	PUBLIC CHARITY	RELIGIOUS	2,000
UNITED WAY OF RHODE ISLAND 50 VALLEY STREET PROVIDENCE, RI 02909	NONE	PUBLIC CHARITY	CHARITABLE	75,000
Total	►			1,465,500
3a				

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<i>a Paid during the year</i>				
URI FOUNDATION 79 UPPER COLLEGE ROAD KINGSTON, RI 02881	NONE	PUBLIC CHARITY	EDUCATION	2,000
UTEC-LOWELL 35 WARREN STREET LOWELL, MA 01852	NONE	PUBLIC CHARITY	CHARITABLE	32,000
WATERFIRE PROVIDENCE 101 REGENT AVENUE PROVIDENCE, RI 02908	NONE	PUBLIC CHARITY	CHARITABLE	5,000
Total				1,465,500
3a				

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<i>a Paid during the year</i>				
WESTMINSTER UNITARIAN CHURCH 119 KENYON AVENUE EAST GREENWICH, RI 02818	NONE	PUBLIC CHARITY	RELIGIOUS	25,000
WGBH EDUCATIONAL FOUNDATION 9 WALNUT TER ARLINGTON, MA 02476	NONE	PUBLIC CHARITY	CHARITABLE	1,500
WOMEN & INFANTS HOSPITAL 101 DUDLEY STREET PROVIDENCE, RI 02905	NONE	PUBLIC CHARITY	CHARITABLE	5,000
Total				1,465,500
3a				

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<i>a Paid during the year</i>				
YOUTH IN ACTION 672 BROAD STREET PROVIDENCE, RI 02907	NONE	PUBLIC CHARITY	CHARITABLE	1,000
Total			►	1,465,500
3a				

TY 2017 Accounting Fees Schedule

Name: THE SHARPE FAMILY FOUNDATION

EIN: 13-6208422

Accounting Fees Schedule

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
ACCOUNTING FEES	15,280	7,640		7,640

TY 2017 Investments Corporate Bonds Schedule

Name: THE SHARPE FAMILY FOUNDATION

EIN: 13-6208422

Investments Corporate Bonds Schedule

Name of Bond	End of Year Book Value	End of Year Fair Market Value
FIXED INCOME	2,540,649	2,420,898

TY 2017 Investments Corporate Stock Schedule**Name:** THE SHARPE FAMILY FOUNDATION**EIN:** 13-6208422

Name of Stock	End of Year Book Value	End of Year Fair Market Value
COMMON STOCK	11,895,148	15,536,149

TY 2017 Investments - Other Schedule

Name: THE SHARPE FAMILY FOUNDATION

EIN: 13-6208422

Investments Other Schedule 2

Category/ Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value
ALTERNATIVE INVESTMENTS	FMV	3,331,536	4,620,950

TY 2017 Other Decreases Schedule

Name: THE SHARPE FAMILY FOUNDATION

EIN: 13-6208422

Description	Amount
PARTNERSHIP TIMING DIFFERENCES	66,182

TY 2017 Other Expenses Schedule

Name: THE SHARPE FAMILY FOUNDATION**EIN:** 13-6208422**Other Expenses Schedule**

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
BANK SERVICE FEES	180	0		180
FILING FEES	50	0		50

TY 2017 Other Income Schedule

Name: THE SHARPE FAMILY FOUNDATION**EIN:** 13-6208422**Other Income Schedule**

Description	Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income
FLOW THRU FROM LPS	-139,524	-122,734	-139,524
CLASS ACTION SUIT	3,068	3,068	3,068
SECTION 965(A) INCOME INCLUSION	9,045	9,045	9,045

TY 2017 Other Increases Schedule

Name: THE SHARPE FAMILY FOUNDATION

EIN: 13-6208422

Description	Amount
UBIT FROM PARTNERSHIPS	16,790

TY 2017 Other Professional Fees Schedule

Name: THE SHARPE FAMILY FOUNDATION**EIN:** 13-6208422

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
INVESTMENT MGT FEES	67,080	67,083		0
CONSULTING	30,452	0		30,452

TY 2017 Taxes Schedule

Name: THE SHARPE FAMILY FOUNDATION

EIN: 13-6208422

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
FOREIGN TAX	1,477	1,477		0