Form 990-PF

Return of Private Foundation

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

OMB No 1545-0052

2017

Department of the Treasur Internal Revenue Service ▶ Do not enter social security numbers on this form as it may be made public.

Open to Public Increation

1116	· ilai nevel	Go to www.irs.gov/Forms9UPF	or instructions and the lat	test information.	
		ndar year 2017 or tax year beginning	, 2017, and		_
		undation		A Employer identification number	-
S	.c	+ S.T. BUTLER CHARITABLE TR id street (or P.O. box number if mail is not delivered to street address)	UST Wald 12/19/8	5 13-6870361	
Ni	umber an	d street (or P.O box number if mail is not delivered to street address)	Room/suite	B Telephone number (see instructions)	_
	8:	AS EIGHTH AVENUE	3850	212-474-1550	
Ci		n, state or province, country, and ZIP or foreign postal code		C If exemption application is pending, check here ▶	$\exists \{$
		EW YORK NY 10019-74	75	a in exemption application to pending, oneon fields	_
G			n of a former public charit	ty D 1. Foreign organizations, check here	_
u	Olicci	Final return Amended		ty D 1. Foreign organizations, check here	
		Address change Name cha		2. Foreign organizations meeting the 85% test,	_
	Charl			check here and attach computation	_
		type of organization: Section 501(c)(3) exempt p		section 507(h)(1)(A) check here	
무		on 4947(a)(1) nonexempt charitable trust Other ta			
ı		· · · · · · · · · · · · · · · · · · ·	d: 🛛 Cash 🗌 Accrua	F II the louisdation's in a 60-month termination	_
	end o	f year (from Part II, col. (c), Other (specify)		under section 507(b)(1)(B), check here ►	
		6) > \$1,384,78L (Part I, column (d) must b	e on cash basis)		
ني!	art	Analysis of Revenue and Expenses (The total of	(a) Revenue and	let investment (c) Adjusted net for chantable	S
		amounts in columns (b), (c), and (d) may not necessarily equal	expenses per books	income purposes	
		the amounts in column (a) (see instructions).)		(cash basis only)	_
02	1	Contributions, gifts, grants, etc., received (attach schedule)	135,060		2
	2	Check ► ☐ if the foundation is not required to attach Sch. B			
14	3	Interest on savings and temporary cash investments	48	48 48	
√	4	Dividends and interest from securities	24.742	4742 24.742	
	5a	Gross rents	-0-	- 0-	2
~~	b	Net rental income or (loss)			7
<u></u>	6a	Net gain or (loss) from sale of assets not on line 10	-0-		
% © 2018 Revenue	b	Gross sales price for all assets on line 6a			
€ેફ્ર	7	Capital gain net income (from Part IV, line 2)		707	麗
ĕ.₩	8	Net short-term capital gain		-0_	Ħ
œ	9	Income modifications			
APR	10a	Gross sales less returns and allowances		C C C C C C C C C C C C C C C C C C C	<u>公</u>
	ь.	Less: Cost of goods sold			
	C	Gross profit or (loss) (attach schedule)			超
7	11	Other income (attach schedule)	-0-	-00-	豐
	12	Total. Add lines 1 through 11	159.850	The second of th	431 154
	13	Compensation of officers, directors, trustees, etc.	127,630	24,790 24,790	<u> </u>
©© Expenses	14	Other employee salaries and wages	 		_
S	15	• •	 		_
ð	16a	Pension plans, employee benefits Legal fees (attach schedule)	ECCIVICA !		_
Щ	10a	_ , , , , , , , , , , , , , , , , , , ,			_
ð	1	Accounting fees (attach schedule)	AP 0 6 2019 10		_
ŧ	17 C		AR 0 6 2018 - 19		_
Operating and Administrative	17	Interest	\(\frac{1}{10}\)		_
nj:	18	Taxes (attach schedule) (see instructions)		Statistical cool-pictory, "I structure of the	7
Ë	19	Depreciation (attach schedule) and depletion	PUEN. UI		4
Þ	20	Occupancy	ļ		_
ğ	21	Travel, conferences, and meetings	 		_
an	22	Printing and publications			_
වු	23	Other expenses (attach schedule) ADR+ Baches Fa	م ١٦٥	170 170 170	<u>)</u>
Ξţ	24	Total operating and administrative expenses.			
520	1	Add lines 13 through 23	170	170 170 170	<u> </u>
ğ	25	Contributions, gifts, grants paid	- 0- 統制	~ O-	_
	26	Total expenses and disbursements. Add lines 24 and 25	170	170 \$70 170	_
	27	Subtract line 26 from line 12:			ā
	а	Excess of revenue over expenses and disbursements	159,180		
	b	Net investment income (if negative, enter -0-)		24 6 10 PM 2 2 4 PM	9
_	С	Adjusted net income (if negative, enter -0-)	***************************************	24610	H
For	Paperv	work Reduction Act Notice, see instructions.	Cat No 11289	THE RESERVE OF THE PARTY OF THE	ביב מ

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Pá	art II	Balance Sheets	Attached schedules and amounts in the description column	Beginning of year	End	of year
			Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash—non-interest-	· · · · · · · · · · · · · · · · · · ·	-0-	-0-	-0-
	2	Savings and tempora	ary cash investments	64.247	88,868	88.868
	3	Accounts receivable	-6-			
	ł	Less: allowance for o	doubtful accounts ►			
	4	Pledges receivable ▶	→ O → O → O → O → O → O → O → O → O → O			
		Less: allowance for o	doubtful accounts ►		_	
	5	Grants receivable.		-0-	0	-0-
	6		om officers, directors, trustees, and other			
	}		(attach schedule) (see instructions) .	-0-	- 0 -	-0-
	7	Other notes and loans re	eceivable (attach schedule) ► O -			
	{	Less. allowance for do		-0-		
Assets	8	Inventories for sale of	or use	-0-		
SS	9	Prepaid expenses ar	<u> </u>	-0-		
Ž	10a	Investments—U.S. and	state government obligations (attach schedule)	-0-		
	Ь	Investments—corpor	rate stock (attach schedule) Schedule A	154,944	190,660	1295 918
	С		rate bonds (attach schedule)	-0=		
	_11	_Investments-land, build	dings, and equipment: basis ► O -			
		Less: accumulated depre	eciation (attach schedule)			
	12	Investments—mortga	age loans	-0-	• • -	-0-
	13	Investments—other ((attach schedule)	-0-	-0-	-0-
	14	Land, buildings, and ed	quipment. basis ►			
		Less: accumulated dep	reciation (attach schedule)			
	15	Other assets (describ	pe ▶)	-0-	-6-	70-
	16	Total assets (to	be completed by all filers-see the	340 101		
	<u> </u>	instructions. Also, se	ee page 1, item l)	219,191	279,529	8 1,384,786
i	17		nd accrued expenses			
S	18					
Liabilities	19					_
Ē	20		ectors, trustees, and other disqualified persons		·	·
Ľį	21		r notes payable (attach schedule)			, , , .
	22	Other liabilities (desc	pribe >			
—	23		lines 17 through 22)	-0-		
S		Foundations that fo	ollow SFAS 117, check here >]		
ည္	04		24 through 26, and lines 30 and 31.			
Balances	24	Unrestricted				_
Ba	25 26	Temporarily restricte		ļ		i
פ	20	Permanently restricted	_			
Net Assets or Fund		and complete lines	o not follow SFAS 117, check here ► 🗹			
7	27	<u>=</u>	principal, or current funds	2/9/191	279.528	
13	28	•	plus, or land, bldg., and equipment fund		7 (7,770	<u>-</u>
se	29		cumulated income, endowment, or other funds	-0-	~~~	
As	30		fund balances (see instructions)	-0-		
e	31		ind net assets/fund balances (see	249,191	279,528	' '
Z	٠.		· · · · · · · · · · · · · · · · · · ·			
Pa	rt III		nges in Net Assets or Fund Balances			_ !
1			palances at beginning of year—Part II, column	mn (a) line 30 (mus	t agree with	
•			d on prior year's return)	(u), mie 50 (mus		2 19 191
2		r amount from Part I, I	,		2	
3			led in line 2 (itemize) ► Cost of Cut	ilutia	2	
4		lines 1, 2, and 3.			4	
5			line 2 (itemize) > Fair Market Vo	due of Cat.	lautions 5	
	Tota	I net assets or fund ba	alances at end of year (line 4 minus line 5)—I	Part II, column (b). Iir	ie 30 6	
						Form 990-PF (2017)

1a b c	2-story brick warehouse,	s) of property sold (for example, real e or common stock, 200 shs MLC Co)		(b) How acquired P-Purchase D-Donation	(c) Date accommodition (mo , day		(d) Date sold (mo , day, yr)
c				 			
				 			
_ <u>d</u> _				 			
е		(f) Depreciation allowed	(a) Cost o	r other basis		(h) Cou	n or (loss)
	(e) Gross sales price	(or allowable)		ense of sale			(f) minus (g))
_ <u>a</u>							
c							
d							
e							
	Complete only for assets showi	ng gain in column (h) and owned	by the foundation	on 12/31/69.	(I) G	ains (Co	I (h) gain minus
	6) EMV == of 10/01/60	(j) Adjusted basis	(k) Exce	ss of col (i)	col (k	k), but no	t less than -0-) or
	(i) FMV as of 12/31/69	as of 12/31/69	over co	i (j), if any		Losses (f	rom col (h))
a_						_	
b							
С							
d							
е							
2	Capital gain net income or (also enter in Pa				
_	Capital gain het income of (l (loss)	, enter -0- in Pa	art I, line 7 ∫	2		
3	Net short-term capital gain	or (loss) as defined in sections	1222(5) and (6	s)·			
	If gain, also enter in Part I,	line 8, column (c). See ınstru	ctions. If (loss), enter -0- ın (
	Part I, line 8	<u> </u>	<u>.</u>	∫_	3		
Part '	V Qualification Under	Section 4940(e) for Redu	iced Tax on I	Net Investment	Income		
secti	on 4940(d)(2) applies leave t		section 4940(a)	tax on net invest	ment incor	ne.)	
Vas th			table amount o	of any year in the I		•	☐ Yes 🔀 N
Vas th	e foundation liable for the se " the foundation doesn't qua	this part blank. ection 4942 tax on the distribu	table amount o	of any year in the this part.	oase period	1?	☐ Yes [X] N
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Part \		<u>nstruct</u>	ions)			
, 1a	Exempt operating foundations described in section 4940(d)(2), check here ▶ ☐ and enter "N/A" on line 1.	4 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	- }- }-			
b						
	here ► □ and enter 1% of Part I, line 27b					
С	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations, enter 4% of Part I, line 12, col (b).					
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	99.	2			
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	49	<u> </u>			
6	Credits/Payments:					
a	2017 estimated tax payments and 2016 overpayment credited to 2017 6a					
b	Exempt foreign organizations—tax withheld at source 6b	-				
C	Tax paid with application for extension of time to file (Form 8868) . 6c 6c	12	- [
_d	Backup withholding erroneously withheld		زـــاـــا			
7	Total credits and payments Add lines 6a through 6d	-0-				
8	Enter any penalty for underpayment of estimated tax. Check here 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	492	\			
10 11	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid > 10					
Part	Enter the amount of line 10 to be: Credited to 2018 estimated tax Refunded 11		ш			
1a	VII-A Statements Regarding Activities During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it	TV	es No			
ıa	participate or intervene in any political campaign?					
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the	1a	<u> </u>			
U	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		1			
	published or distributed by the foundation in connection with the activities.		اسوسا			
C	Did the foundation file Form 1120-POL for this year?	1c	<u> </u>			
d	d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year. (1) On the foundation. ▶ \$					
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. ▶ \$	_ _	_]			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS? If "Yes," attach a detailed description of the activities.	2	×			
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				
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a	*			
b	If "Yes," has it filed a tax return on Form 990-T for this year?	4b	X			
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5	X			
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:	(
	By language in the governing instrument, or	[[
	• By state legislation that effectively amends the governing instrument so that no mandatory directions that	[į į			
	conflict with the state law remain in the governing instrument?		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. ► NEW YOR'K					
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General					
	(or designate) of each state as required by General Instruction G? If "No," attach explanation	8b '	X			
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or					
-	4942(j)(5) for calendar year 2017 or the tax year beginning in 2017? See the instructions for Part XIV. If "Yes,"					
	complete Part XIV	9	X			
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their					
	names and addresses	10	<u> </u>			

Part	VII-A Statements Regarding Activities (continued)		1	
,			Yes	No
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule. See instructions	11		X_
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement. See instructions	12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	
	Website address ▶	 -	. .	
14	The books are in care of ▶ Telephone no. ▶		-	
	Located at ► ZIP+4 ►			
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			
16	At any time during calendar year 2017, did the foundation have an interest in or a signature or other authority		Yes	
	over a bank, securities, or other financial account in a foreign country?	16		X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the foreign country ▶			
				
Par	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
10	During the year, did the foundation (either directly or indirectly):			
Ia	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? . Yes No	ئۇ ئۇ	-	£15,7
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a	٠, -	- '	24
	disqualified person?	÷		- 1
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	`		
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Light Yes 📜 No	_		
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)?			
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the	-		
	foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.)		=	-
b	If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions	1b	-	
	Organizations relying on a current notice regarding disaster assistance, check here	* 1	1	·
С	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?			X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)):			
а	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			1
b	11 1 1 2 feet the ferred than to not applying the provisions of section 4942(a)(2)		-	
	all years listed, answer "No" and attach statement – see instructions.)	2b	<u> </u>	X
С	to the vears here	2°	4	
3a	The state of the s		,	-
b	If "Yes," did it have excess business holdings in 2017 as a result of (1) any purchase by the foundation or			
J	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	+ -	+
4a	The state of the s	4a	+	X
b	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2017?	4b	1	X
	F.			F (2017

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raye	•

Part	ⅥI∃∃ Statements Regarding Activities	tor W	hich Form	4720 I	иау ве к	equire	a (contir	nuea)			
. 5а	During the year, did the foundation pay or incur a	iny amo	ount to:							Yes	No
	(1) Carry on propaganda, or otherwise attempt to	influe	nce legislatio	n (sect	ion 4945(e))? .	Yes Yes	X No			
	(2) Influence the outcome of any specific public	election	on (see secti	on 495	5); or to ca	rry on,			-,	1	-
	directly or indirectly, any voter registration dri		· · · · ·		•	•	Yes	X No			
	(3) Provide a grant to an individual for travel, stud	dv oro	ther similar r	urnose	es?		Yes	⊠ No			1
	(4) Provide a grant to an organization other than a charitable, etc., organization described in								1		
	section 4945(d)(4)(A)? See instructions]	Ì	
	(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational								1		1
	purposes, or for the prevention of cruelty to children or animals?								1		
b	If any answer is "Yes" to 5a(1)–(5), did any of the						_	_			
	Regulations section 53 4945 or in a current notice							ibed iii			
		_	-			uctions	,	`.'_	5b	 	 i
_	Organizations relying on a current notice regarding							▶∐)		}
C	If the answer is "Yes" to question 5a(4), does to because it maintained expenditure responsibility			•			_		1		
	•		_				∐ Yes	∐ No	1		1
•	If "Yes," attach the statement required by Regula										
6a	Did the foundation, during the year, receive any on a personal benefit contract?		•	-	to pay pre	emiums	_				-
_	•				· · · ·		Yes	_ X No	====		
b_	_Did_the foundation, during-the-year, pay-premium	is, dire	ctly or indired	ctly, on	a personal	benetit	contract	· ·	6b		*
7-	If "Yes" to 6b, file Form 8870.			عام برمد ا		tion 0	□v	▼ No			
	At any time during the tax year, was the foundation a If "Yes," did the foundation receive any proceeds						Yes ransactio	_	7b		
	VIII Information About Officers, Direct									200	
ı aı	and Contractors	1013, 1	rusiees, r	Juliua	tion wiant	igers,	, nginy i		iipioy	 ,	
1	List all officers, directors, trustees, and found	ation n	nanagers an	d their	compens	ation. S	See instri	uctions			
			, and average		mpensation		Contribution		(e) Expe	nco oc	
	(a) Name and address	hour	rs per week ed to position	(If r	ot paid, ter -0-)		yee benefit erred compe			allowan	
	S.C. BUTLER	Trus			0-	-	- 6-	5,10011011		2 ~~	
	S.T. BUTLER	Tue		_	0 ~		0-		- 6	٥~	
		1 000									
				l							
											
								1			
2	Compensation of five highest-paid employee	s (oth	er than thos	se incl	uded on li	ne 1—:	see instr	uctions	s). If n	one,	enter
•	"NONE."	•									
			(b) Title, and a	werse.			(d) Contrib				
	(a) Name and address of each employee paid more than \$50,00	10	hours per v	veek	(c) Compe	nsation	employee		(e) Expe	ense ace allowar	
			devoted to p	osition			compen				
	None										
										_	
					}						
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			<u> </u>		L		<u> </u>		L		
Total	number of other employees paid over \$50,000 .	<u> </u>	<u> </u>	<u></u>	<u>···</u>	<u>· · ·</u>	<u> </u>		L		
									Form 99	m-PF	(2017)

	contractors for professional services. See instructions. If none person paid more than \$50,000 (b) Type of ser	
		(5) 5011,001
		
		
	i	
		
otal number of others receiving over	550,000 for professional services	
		
Part IX-A Summary of Direct	Charitable Activities	
List the foundation's four largest direct charit	able activities during the tax year. Include relevant statistical information such a	s the number of
	onferences convened, research papers produced, etc	s trie humber of Expenses
1 ~~~	`	
2		
3		
	 	
4		
	m-Related Investments (see instructions)	
	stments made by the foundation during the tax year on lines 1 and 2	Amount
1 Non	Flag.	
2		
All other program-related investments See ins	tructions	
· -	Ma	
, , , , , , , , , , , , , , , , , , ,	, y.e.,	
otal. Add lines 1 through 3	 	•
The same of the desired of the same of the	`````````````````````````````````	Form 990-PF (20

rart	see instructions.)	gn to	undations,
1	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	1.140.047
b	Average of monthly cash balances	1b	77 939
С	Fair market value of all other assets (see instructions)	1c	-0-
d	Total (add lines 1a, b, and c)	1d	1217979
е	Reduction claimed for blockage or other factors reported on lines 1a and		21000 3000
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	-0-
3	Subtract line 2 from line 1d	3	1,217,979
4	Cash deemed held for charitable activities Enter 11/2% of line 3 (for greater amount, see		
	instructions)	4	18, 270
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	1,199 709
6	Minimum investment return. Enter 5% of line 5	6	59.985
Part	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.)	ound	ations /
1_	Minimum-investment-return from Part X, line 6	1	59 985
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.) 2b		1100
C	Add lines 2a and 2b	2c	447
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	59.493
4	Recoveries of amounts treated as qualifying distributions	4	- 0 -
5	Add lines 3 and 4	5	59. 493
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	59.443
Part	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	
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	107
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	
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating		ther the foundation
	qualifies for the section 4940(e) reduction of tax in those years		
			Form 990-PF (2017)

rart	XIII Undistributed Income (see instruction	ons)			
1	Distributable amount for 2017 from Part XI,	(a) Corpus	(b) Years prior to 2016	(c) 2016	(d) 2017
	line 7				59,493
2	Undistributed income, if any, as of the end of 2017:				7-
а	Enter amount for 2016 only			-0-	
b	Total for prior years: 20,20,20		- 0-		
3	Excess distributions carryover, if any, to 2017:				
а	From 2012				
b	From 2013				
С	From 2014	.`			
d	From 2015	•			
e	From 2016				i
f 4	Total of lines 3a through e	57,680			
4	Qualifying distributions for 2017 from Part XII, line 4. ► \$ - •	•			
_	Applied to 2016, but not more than line 2a			 0 -	
a b	Applied to undistributed income of prior years				
	(Election required—see instructions)		-0-		,
	Treated as distributions out of corpus (Election				
•	required—see instructions)	-0-			
d	Applied to 2017 distributable amount .				-0-
е	Remaining amount distributed out of corpus	- 0 -			
5	Excess distributions carryover applied to 2017	0 0			0
	(If an amount appears in column (d), the same				-
_	amount must be shown in column (a).)				
6	Enter the net total of each column as indicated below:				
а	Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	57,680			
b	Prior years' undistributed income. Subtract	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			,
	line 4b from line 2b		0		- 1. - 1.
C	Enter the amount of prior years' undistributed				1
	income for which a notice of deficiency has	;			
	been issued, or on which the section 4942(a)		-0-		
	tax has been previously assessed				
d	Subtract line 6c from line 6b. Taxable amount—see instructions		-0-		{
_	Undistributed income for 2016. Subtract line		- 0		, , , , , , , , , , , , , , , , , , ,
e	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				<i>C</i> 0
	distributed in 2018				59,493
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	-01			Í
	required—see instructions)	~0'			
8	Excess distributions carryover from 2012 not	r- 000			
_	applied on line 5 or line 7 (see instructions) .	55, 809			
9	Excess distributions carryover to 2018. Subtract lines 7 and 8 from line 6a	1,871			
10	Analysis of line 9:	1011			
10					
a b	Excess from 2013				
C	Excess from 2015	,			
d	Excess from 2016				
e	Excess from 2017				

Page	10	
Page	10	

Part	XIV Private Operating Founda	tions (see instru	ctions and Part	VII-A, question 9)	
. 1а	If the foundation has received a ruling foundation, and the ruling is effective for				N/A	
b	Check box to indicate whether the four		-			(3) or 4942(j)(5)
	Enter the lesser of the adjusted net	Tax year	<u> </u>	Prior 3 years		
	income from Part I or the minimum investment return from Part X for	(a) 2017	(b) 2016	(c) 2015	(d) 2014	(é) Total
	each year listed					/
b	85% of line 2a					
С	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					
е	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:					
а	"Assets" alternative test-enter:	•				
	_(1)_Value_of all assets			Z		
	(2) Value of assets qualifying under		/			
b	section 4942(j)(3)(B)(i) "Endowment" alternative test—enter ² / ₃		//_			
	of minimum investment return shown in					
С	Part X, line 6 for each year listed		/·			
C	(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				he foundation h	ad \$5,000 or m	ore in assets at
	any time during the year-		<u> </u>			
1	Information Regarding Foundation					to all a fee maletane.
а	List any managers of the foundation before the close of any tax year (but o		ontributed more th	nan \$5,000). (See s		by the foundation
b	List any managers of the foundation	who own 10% or	r more of the stor	ck of a corporation	n (or an equally la	rge portion of the
	ownership of a partnership or other e					age person or and
2	Information Regarding Contribution	n, Grant, Gift, Loa	n, Scholarship, e	etc., Programs:		
	Check here ▶ ✓ if the foundation unsolicited requests for funds. If the f complete items 2a, b, c, and d. See it	only makes controundation makes	ributions to prese	elected charitable		
а	The name, address, and telephone no	umber or email add	dress of the perso	n to whom applica	ations should be a	ddressed:
b	The form in which applications should	d be submitted and	d information and	materials they sho	ould include:	
C	Any submission deadlines:					
d	Any restrictions or limitations on av	wards, such as b	y geographical a	reas, charitable fi	elds, kinds of ins	titutions, or other

	3 Grants and Contributions Paid During the Year or Approved for Future Payment					
•	Recipient	If recipient is an individual,	Foundation	Purpose of grant or		
	Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	status of recipient	contribution	Amount	
а	Paid during the year	or substantial contributor			 	
	None					
			ı.			
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	None					
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	Total		L	<u> </u>	ıh .	

Pai	T XVI-A Analysis of Income-Producing Ac	tivities				
Ente	r gross amounts unless otherwise indicated.	Unrelated bu	isiness income	Excluded by section	on 512, 513, or 514	(0)
•			"		/-n	{ (e) Related or exempt
		(a)	(b)	(c)	(d)	function income
1	Program service revenue:	Business code	Amount	Exclusion code	Amount	(See instructions.)
	a			1		
	b			 		
	<u> </u>			 		
	<u> </u>			1		
	d					
	e					
	f					
	g Fees and contracts from government agencies	'	_			
2	Membership dues and assessments					
3	Interest on savings and temporary cash investments			514	48	
4	Dividends and interest from securities			514	24742	
5	Net rental income or (loss) from real estate:	**************************************				
Ŭ					Maria de Maria de Caracteria d	2.1 1.72 Sept. 10 Translation Was
	· · · · ·			 		
_	b Not debt-financed property	<u> </u>				
_	Net rental income or (loss) from personal property			 		
7	Other investment income					
8	Gain or (loss) from sales of assets other than inventory					
9	Net income or (loss) from special events					
10	Gross profit or (loss) from sales of inventory .					
11	Other revenue. a					
	h					
				 		
	d	·		 		
				 		
			1	1		
40	e	TOTAL PROPERTY AND ADDRESS.		THE RESERVE AND ADDRESS OF THE PARTY OF THE	- 1700	
	Subtotal. Add columns (b), (d), and (e)				24,790	_0-
13	Total. Add line 12, columns (b), (d), and (e)		<u> </u>		34,790	24,790
13 See	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation	is.)				24,790
13 See Pa	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation t XVI-B Relationship of Activities to the A	ns.) Accomplishm	ent of Exemp		13	
13 See Pa Lin	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation t XVI-B Relationship of Activities to the A	ns.) Accomplishm	ent of Exemp		13	
13 See Pa Lin	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation t XVI-B Relationship of Activities to the A	ns.) Accomplishm	ent of Exemp		13	
13 See Pa Lin	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation t XVI-B Relationship of Activities to the A	ns.) Accomplishm	ent of Exemp		13	
13 See Pa Lin	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation t XVI-B Relationship of Activities to the A	ns.) Accomplishm	ent of Exemp		13	
13 See Pa Lin	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation t XVI-B Relationship of Activities to the A	ns.) Accomplishm	ent of Exemp		13	
13 See Pa Lin	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation t XVI-B Relationship of Activities to the A	ns.) Accomplishm	ent of Exemp		13	
13 See Pa Lin	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation t XVI-B Relationship of Activities to the A	ns.) Accomplishm	ent of Exemp		13	
13 See Pa Lin	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation t XVI-B Relationship of Activities to the A	ns.) Accomplishm	ent of Exemp		13	
13 See Pa Lin	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation t XVI-B Relationship of Activities to the A	ns.) Accomplishm	ent of Exemp		13	
13 See Pa Lin	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation t XVI-B Relationship of Activities to the A	ns.) Accomplishm	ent of Exemp		13	
13 See Pa Lin	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation t XVI-B Relationship of Activities to the A	ns.) Accomplishm	ent of Exemp		13	
13 See Pa Lin	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation t XVI-B Relationship of Activities to the A	ns.) Accomplishm	ent of Exemp		13	
13 See Pa Lin	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation t XVI-B Relationship of Activities to the A	ns.) Accomplishm	ent of Exemp		13	
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13 See Pa Lin	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation t XVI-B Relationship of Activities to the A	ns.) Accomplishm	ent of Exemp		13	

Form 99	0-PF (2017)							Pa	age 13
Part	XVII	Information Organization		sfers to and Transaction	ns and Re	elationship	s With Noncha	aritabl		
1	ın s	the organization of section 501(c) (o	directly or indirectly e	engage in any of the followin 501(c)(3) organizations) or					Yes	No
2	_	inizations?	norting foundation to	a nanaharitahla ayamat ara	onization (~ f				
а		osers ironi the rep Cash	orting foundation to	a noncharitable exempt org	janization ()I. 		1a(1)		X
		Other assets .						1a(2		X
b		er transactions:								
			a noncharitable exer					1b(1		X
				ble exempt organization .				1b(2		入人
			• •	assets				1b(3 1b(4		7
		oans or loan gua	-					1b(5	_	X
		_		ip or fundraising solicitation				1b(6	+	X
С		_	• •	ts, other assets, or paid.em	-			1c		X
d 	valu	e of the goods, o	ther assets, or service on or sharing arrange	 complete the following sees given by the reporting forment, show in column (d) to 	oundation.	If the founda	tion received les	s than	fair m	narket
(a) Line	e no	(b) Amount involved	(c) Name of nonch	aritable exempt organization	(d) Descri	otion of transfers	, transactions, and s	haring ar	rangem	ents
				<u>/^ </u>	ļ					
			-	μα	<u> </u>					
	$\neg \neg$	_								
			<u> </u>		<u> </u>					
		<u> </u>			 		<u> </u>			
										
					ļ					
			ļ							
2a				iliated with, or related to, oction 501(c)(3)) or in section				☐ Ye	s (23)	No
b	If "Y		e following schedule.				, - , - , -			
		(a) Name of organ	ization	(b) Type of organization		((Description of relat	ionship		
				\sim \sim \sim \sim \sim \sim						
										
Sion		der penalties of perjury, li rect, and complete Dec	i declare that I have examine laration of preparer (other tha	d this return, including accompanying in taxpayer) is based on all information	schedules and of which prepa	statements, and t arer has any know	ledge			_
Sign Here		gnature of officer or tru	& C Butler	2/26/18) Date Title	True	_	May the	RS disc preparer ructions	shown I	below?
		Print/Type prepare		Preparer's signature		Date		PTIN	==	
Paid		1 . , .					Check if self-employed			
Prep Use							Firm's EIN 🕨			
		Firm's address ▶					Phone no		\ <u>-</u>	
								Form 9	90-PF	(2017)

Schedule B

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service Name of the organization

Schedule of Contributors

▶ Attach to Form 990, Form 990-EZ, or Form 990-PF. ▶ Go to www.irs.gov/Form990 for the latest information.

11/a/2 \$12/6/05

OMB No 1545-0047

2017

Employer identification number

5.C. + S.T. CHARITABLE PRUST UQL \$12/195 13-6870361				
Organization type (check one):				
Filers of: Section:				
Form 99	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 99	90-PF	501(c)(3) exempt private foundation		
☐ 4947(a)(1) nonexempt charitable trust treated as a private foundation		4947(a)(1) nonexempt charitable trust treated as a private foundation		
		501(c)(3) taxable private foundation		
	only a section 501(c)(7	covered by the General Rule or a Special Rule . 7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See		
Genera	i Nuie			
×	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.				

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).

Employer identification number Name of organization S.C. + S.T. CHARITABLE PRUST u/a/2 12/19/85 Contributors (see instructions). Use duplicate copies of Part I if additional space is needed. Part I (c) (a) Total contributions Type of contribution Νo. Name, address, and ZIP + 4 SALLY T. BUTLER Person Payroll \$ 135,060-1220 PARK AVENUE Noncash (Complete Part II for NEW YORK NY 10128-1733 noncash contributions.) (d) (a) (c) **Total contributions** Type of contribution No. Name, address, and ZIP + 4 Person \Box Payroll Noncash \$ (Complete Part II for noncash contributions.) (a) (c) (d) Type of contribution No. **Total contributions** Name, address, and ZIP + 4 Person Payroll Noncash (Complete Part II for noncash contributions.) (c) (a) (b) Total contributions Type of contribution No. Name, address, and ZIP + 4 Person Payroll \Box Noncash (Complete Part II for noncash contributions) (d) (a) (b) (c) Total contributions No. Name, address, and ZIP + 4 Type of contribution Person **Payroll** Noncash (Complete Part II for noncash contributions.) (d) (a) (b) (c) No. **Total contributions** Type of contribution Name, address, and ZIP + 4 Person **Payroll** Noncash (Complete Part II for noncash contributions.)

Employer identification number

Part II	Noncash Property (see instructions). Use duplicate copies	of Part II if additional spa	ace is needed.
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
	10 shares Alphabet Inc Class C 23 shares Alphabet Inc Class C 140 shares Mohamba Tuntius 60 shares Mohamba Tuntius	9,378- 21,109- 29,162- \$ 141,383-	7/21/17
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
	82 shares O'Railly automative 419 shares TJX Coloranies Inc. 74 shares Waters Cong.	17,715 - 29,783 - \$ 13,530 - 7,741 \$135,060 -	7/21/17
(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
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	

SCHEDULE A

Part II, Line 10b, Investments-Corporate Stock

-	\$ 21,216 473,844 35,470 12,067 12,067 398,320 76,986 10,534 24,067 36,326 16,554 19,724 32,037 14,296 \$1,295,918
\$ 4,278 3,792 46,500 53,685 3,175 41,353 2,161 \$ 154,944	\$ 4,278 3,792 46,500 53,685 3,175 41,353 2,161 2,400 12,979 980 4,312 1,720 5,581 \$190,660
Cost Cost Cost Cost Cost Cost Cost Cost	Cost Cost Cost Cost Cost Cost Cost Cost
at 12/31/16 122 shares Amgen Inc. 2,800 shares Apple Computer Inc. 1,000 shares GlaxoSmithKline PLC 1,038 shares Pepsico Inc. 100 shares Zimmer Biomet Holdings Inc. 6,500 Bristol Myers Squibb Co. 900 shares Microsoft Corp.	at 12/31/17 122 shares Amgen Inc. 2,800 shares Apple Inc. 1,000 shares GlaxoSmithKline PLC 1,038 shares Pepsico Inc. 100 shares Zimmer Biomet Holdings Inc. 6,500 shares Bristol Myers Squibb Co. 900 shares Microsoft Corp. 10 shares Alphabet Inc. Class A 23 shares Alphabet Inc. Class A 60 shares Mohawk Industries 82 shares O'Reilly Automotive 419 shares TJX Companies Inc. 74 shares Waters Corp.