Form **990-PF** 

#### **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

OMB No. 1545-0052

Department of the Treasury Internal Revenue Service ► Go to www irs gov/Form990PF for instructions and the latest information For calendar year 2017 or tax year beginning , and ending A Employer identification number Name of foundation 20-4716839 OROSZ FAMILY FOUNDATION, INC. Number and street (or P O box number if mail is not delivered to street address) Boom/suite B Telephone number 605 COMMONWEALTH AVENUE 407-232-5930 City or town, state or province, country, and ZIP or foreign postal code C If exemption application is pending, check here 32803 ORLANDO, FL G Check all that apply Initial return Initial return of a former public charity D 1 Foreign organizations, check here Final return Amended return 2 Foreign organizations meeting the 85% test, check here and attach computation Address change Name change H Check type of organization: X Section 501(c)(3) exempt private foundation Elf private foundation status was terminated under section 507(b)(1)(A), check here Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation I Fair market value of all assets at end of year J Accounting method: Accrual If the foundation is in a 60-month termination Other (specify) (from Part II, col. (c), line 16) under section 507(b)(1)(B), check here 435, 339 . (Part I, column (d) must be on cash basis ) ▶\$ Partil Analysis of Revenue and Expenses (d) Disbursements for charitable purposes (cash basis only) (b) Net investment (c) Adjusted net (a) Revenue and (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) ) expenses per books income income 164,500. N/A TERRETARIE Contributions, gifts, grants, etc., received GRETON'S DETROITED Check I if the foundation is not required to attach Sch. B Interest on savings and temporary cash investments 109 109 STATEMENT 1 3 STATEMENT 10,286. 10,286. 4 Dividends and interest from securities 5a Gross rents Karatan Bangan Bang b Net rental income or (loss) 60,507. 6a Net gain or (loss) from sale of assets not on line 10 b Gross sales price for all assets on line 6a 205,244. 60,507. 7 Capital gain net income (from Part IV, line 2) 8 Net short-term capital gain Income modifications 10a Gross sales less returns and allowances TO SECURE OF THE PARTY OF b Less Cost of goods sold c Gross profit or (loss) 11 Other income 12 Total, Add lines 1 through 235,402. 70,902 Compensation of officers 14 Other employee salaries and wages 15 Pension plans, empre belyant 1 3 2018 16a Legal fees OCTION,3L **b** Accounting fees 1,211. 1,211 0. c Other professional lees 17 Interest 333. 0. STMT 4 333. 18 Taxes 19 Depreciation and depletion 20 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications 23 Other expenses STMT 5 311. 311. 0. 24 Total operating and administrative 1,855 1,855 0. expenses Add lines 13 through 23 472,500. 472,500. 美国公会会 25 Contributions, gifts, grants paid 26 Total expenses and disbursements. 1,855 474,355 472,500. Add lines 24 and 25 750 BEXX 27 Subtract line 26 from line 12: -238,953 a Excess of revenue over expenses and disbursements webalite eers 69,047 b Net investment income (if negative, enter -0-) N/A Partition at c Adjusted net income (if negative, enter -0-) 

723501 01-03-18 LHA For Paperwork Reduction Act Notice, see instructions

Form 990-PF (2017)

435,339.

Form **990-PF** (2017)

6

20-4716839

50	Rational Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only		Beginning of year	End o	End of year				
15			(a) Book Value	(b) Book Value	(c) Fair Market Value				
	1	Cash - non-interest-bearing	640,037.	10,820.	10,820.				
	į.	Savings and temporary cash investments							
	I	Accounts receivable >	Mark de Brackers.	THE WALL TO SHE WITH THE	HERY MANY AND THE WAY				
	`	Less: allowance for doubtful accounts							
	۱ ۵	Pledges receivable ►	MALKALONE EXIST.	RESIDUA AT RIVER	STEEN AND THE SECOND				
	'	Less: allowance for doubtful accounts			200000000000000000000000000000000000000				
	٦	Grants receivable							
		Receivables due from officers, directors, trustees, and other							
	ľ	disqualified persons							
	7		次元建2人位3000公元公司2000公元2000	\$					
	′	Less; allowance for doubtful accounts							
		Inventories for sale or use							
ë									
Assets	100	-,							
	1	Investments - U.S and state government obligations Investments - corporate stock STMT 6	0.	423,445.	423,445.				
	ļ		0.	423,443.	423,443.				
		Investments - corporate bonds	3.50.000.000 (*) (577.000.000.000.000.000.000.000.000.000.	OPPORTUNATION ACTOMORY VOICE	Print Preschagger States (1986)				
	111	Investments - land, buildings, and equipment basis							
	١	Less accumulated depreciation							
		Investments - mortgage loans							
	L	Investments - other	JOHNSON SOMMUNING FOR TO ANNOUNT FOR A SOME DRAWN AND AND AND AND AND AND AND AND AND AN	THE SERVICE RESERVE AND SERVICE REPORT OF THE	144.				
	14	Land, buildings, and equipment basis							
		Less accumulated depreciation	1 000	4 054	1 074				
		Other assets (describe DIVIDEND RECEIVABLE)	1,268.	1,074.	1,074.				
	16	Total assets (to be completed by all filers - see the	544 005	105 000	425 222				
_	_	instructions. Also, see page 1, item I)	641,305.	435,339.	435,339.				
	17	Accounts payable and accrued expenses	,						
	18	Grants payable							
es	19	Deferred revenue							
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons							
jab	21	Mortgages and other notes payable							
_	22	Other liabilities (describe >)							
			_						
	23	Total liabilities (add lines 17 through 22)	0.	0.					
		Foundations that follow SFAS 117, check here	,						
(A		and complete lines 24 through 26, and lines 30 and 31.							
ĕ	24	Unrestricted							
Balances	25	Temporarily restricted							
ä	26	Permanently restricted							
핕		Foundations that do not follow SFAS 117, check here							
Ę		and complete lines 27 through 31	,						
S	27	Capital stock, trust principal, or current funds	0.	0.					
set	28	Paid-in or capital surplus, or land, bldg , and equipment fund	0.	0.					
As	29	Retained earnings, accumulated income, endowment, or other funds	641,305.	435,339.					
Net Assets or Fund	30	Total net assets or fund balances	641,305.	435,339.					
	31	Total liabilities and net assets/fund balances ~	641,305.	435,339.					
P	ärt	Analysis of Changes in Net Assets or Fund E	Balances						
1	Total	net assets or fund balances at beginning of year - Part II, column (a), line	30	T.	I				
		st agree with end-of-year figure reported on prior year's return)		, l <sub>1</sub>	641,305.				
		r amount from Part I, line 27a		2	-238,953.				
		r increases not included in line 2 (itemize) <b>UNREALIZED</b>	GAIN	3	32,987.				
		lines 1, 2, and 3		4	435,339.				
		eases not included in line 2 (itemize)	5	0.					

6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30

Form 990-PF (2017) OROSZ FAMILY FOUNDATION, INC.

Part IV Capital Gains and Losses for Tax on Investment Income

(a) List and describe the kind(s) of property sold (for example, real estate, 2-story brick warehouse; or common stock, 200 shs MLC Co.)						low ac - Purc - Dona	nase	(c) Date a (mo , d	acquired ay, yr.)	(d) Date sold (mo., day, yr.)
1a										
b SEE ATTACHED	STA	TEMENT								
C					<u> </u>					
<u>d</u>										
<u>e</u>					Ц,		L			
(e) Gross sales price	(f)	Depreciation allowed (or allowable)		st or other basis expense of sale					ain or (loss s (f) minus	
a										
b			L							
C										<u> </u>
d				144 55						CO FOT
e 205,244.			<u> </u>	144,73	7.					60,507.
Complete only for assets show	<del></del>	<del> </del>	,				(I)	Gains (C	ol (h) gain not less tha	minus n -0-) or
(i) FMV as of 12/31/69 (j) Adjusted basis as of 12/31/69				cess of col. (i) col (j), if any					(from col. (	
a										
b										
С						_				
đ										
е			<u> </u>							60,507.
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	_			60,507.	
3 Net short-term capital gain or (lo	iss) as def	•								
If gain, also enter in Part I, line 8			iiu (0).		ال					
If (loss), enter -0- in Part I, line 8	3				IJ	3			N/A	
Part V   Qualification l	Jnder S	Section 4940(e) for	r Reduced	Tax on Net	Inv	estn	nent Inc	ome		
If section 4940(d)(2) applies, leave  Was the foundation liable for the se  If "Yes," the foundation doesn't qual  Enter the appropriate amount in	ction 4942 ify under s	tax on the distributable an ection 4940(e). Do not cor	mplete this par	t,						Yes X No
(a)	Caon cold	(b)		l	(c)			T		(d) oution ratio
Base periód years Calendar year (or tax year beginn	una in)	Adjusted qualifying dis	stributions	Net value of no		ıtable-	use assets		Distrit (col. (b.) div	outión ratio rided by col. (c))
2016	iiig iiij		9,000.			70	4,260		(001. (0) 011	.580751
2015			7,355.				9,818			.230190
2014			6,485				7,892		<del></del>	1.863032
2013			5,817.				7,572			1.565989
2012			5,939.			15	4,896			.554817
2012				L						
2 Total of line 1, column (d)								2		4.794779
3 Average distribution ratio for the	5-vear ha	se neriod - divide the total	on line 2 hy 5 i	O or by the numb	er of v	/ears		H	_	
the foundation has been in existing	•	•	011 11110 Z DJ O	o, or by the name	· · · · ·	,00.0		3		.958956
the reducation has been in exist		, than o yours						<b>—</b>	_	
4 Enter the net value of noncharita	ible-use as	sets for 2017 from Part X,	line 5					4		1,060,529
5 Multiply line 4 by line 3								5		1,017,001
6 Enter 1% of net investment inco	me / 1% oi	Part I line 27h)						6		690.
	ine (176 U	. i aiti, iiii6 270j								
7 Add lines 5 and 6								7		1,017,691.
8 Enter qualifying distributions fro	m Part XII	, line 4						8		472,500
If line 8 is equal to or greater tha See the Part VI instructions.	ın line 7, ci	heck the box in Part VI, line	e 1b, and comp	olete that part usin	ng a 19	% tax ı	rate.			

Form 990-PF (2017) OROSZ FAMILY FOUNDATION, INC.    Part VIII   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
Date of ruling or determination letter:    Domestic foundations that meet the section 4940(e) requirements in Part V, check here
Date of ruling or determination letter:    Domestic foundations that meet the section 4940(e) requirements in Part V, check here
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-) 3 Add lines 1 and 2 4 Subtrile A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-) 5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0- 6 Credits/Payments: a 2017 estimated tax payments and 2016 overpayment credited to 2017 b Exempt foreign organizations - tax withheld at source c Tax paid with application for extension of time to file (Form 8868) d Backup withholding erroneously withheld 7 Total credits and payments Add lines 6a through 6d 8 Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached 8 Tax due If the total of lines 5 and 8 is more than line 7, enter amount owed 9 1,386.  10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 11 Enter the amount of line 10 to be: Credited to 2018 estimated tax Refunded 11 Enter the amount of line 10 to be: Credited to 2018 estimated tax Part VIII-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? b Did it spend more than \$100 during the year (either directly) or indirectly) for political purposes? See the instructions for the definition lf the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or
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-)  3 Add lines 1 and 2  4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)  5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-  6 Credits/Payments: a 2017 estimated tax payments and 2016 overpayment credited to 2017 b Exempt foreign organizations - tax withheld at source c Tax paid with application for extension of time to file (Form 8868) d Backup withholding erroneously withheld 7 Total credits and payments Add lines 6a through 6d 8 Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached 7 Total credits and payments Add lines 5 and 8 is more than line 7, enter amount owed 8 Tax due If the total of lines 5 and 8 is more than line 7, enter amount owed 9 1, 386.  10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 11 Enter the amount of line 10 to be: Credited to 2018 estimated tax Part VIII-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? b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition lif the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or
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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?  b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or
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b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition  If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or
If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or
distributed by the foundation in connection with the activities.
c Did the foundation file Form 1120-POL for this year?
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year.
(1) On the foundation. ► \$ (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. ► \$
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.
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  4a Did the foundation have unrelated business gross income of \$1.000 or more during the year?
b If "Yes," has it filed a tax return on Form 990-T for this year?  N/A  4b  S Was there a liquidation, termination, dissolution, or substantial contraction during the year?
1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
1 103, attach die Statement Todales by General Institution 1
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:
By language in the governing instrument, or
<ul> <li>By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law</li> <li>remain in the governing instrument?</li> </ul>
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
8a Enter the states to which the foundation reports or with which it is registered. See instructions.
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 G2 If "No," attach explanation  8b   X
of each state as required by General Instruction G? If "No," attach explanation  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
vear 2017 or the tax year herinning in 20172 See the instructions for Part XIV. If "Yes" complete Part XIV.

10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses

Form **990-PF** (2017)

Page 5

P	Statements Regarding Activities (continued)			
			Yes	No
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of			
	section 512(b)(13)? If "Yes," attach schedule. See instructions	11		<u> </u>
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		Х
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Х	
	Website address ► N/A			
14	The books are in care of ► STEPHEN OROSZ  Telephone no. ► 407-20			
	Located at ▶ 605 COMMONWEALTH AVENUE, ORLANDO, FL ZIP+4 ▶32	803		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here		<b></b>	
	and enter the amount of tax-exempt interest received or accrued during the year	N	/A	
16	At any time during calendar year 2017, did the foundation have an interest in or a signature or other authority over a bank,		Yes	No
	securities, or other financial account in a foreign country?	16		Х
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the	STATE OF		244
	foreign country >			
Pa	art 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.	100	Yes	No
18	a During the year, did the foundation (either directly or indirectly):	Maria.	400	
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	100 s.		
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
	a disqualified person?			
	(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?			3
	(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"		, v	
	if the foundation agreed to make a grant to or to employ the official for a period after	1000000		
	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  N/A	1b	EXCVA.	2000
	``	Address Co.	FAX.	STATE OF
	Organizations relying on a current notice regarding disaster assistance, check here			
(	c Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected	10	300.23	X
	before the first day of the tax year beginning in 2017?	330000	2002	NO SH
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)):			
6	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?  Yes X No			
	If "Yes," list the years	\$7.35 \$2.35		
ı	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect	200		
	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach			
	statement - see instructions ) N/A	2b	V254 ETA	3517.
(	of the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			4.7
	<u> </u>		E TO	
38	a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time	1	<b>100</b>	
	during the year?			
ı	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	<b>全</b>	Ziż.	SY.
	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,	4		\$ '\d
	Form 4720, to determine if the foundation had excess business holdings in 2017 ) $N/A$	3b		
48	a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		Х
t	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that			
	had not been removed from jeopardy before the first day of the tax year beginning in 2017?	4b	}	Х

Form 990-PF (2017) OROSZ FAMILY FOUNDATION,	INC.	•	20-47168	39 Page 6
Part VII_B Statements Regarding Activities for Which I		Required (continu	ued)	
Statements Regarding Activities for Which Is During the year, did the foundation pay or incur any amount to:  (1) Carry on propaganda, or otherwise attempt to influence legislation (section (2) Influence the outcome of any specific public election (see section 4955), or any voter registration drive?  (3) Provide a grant to an individual for travel, study, or other similar purposes (4) Provide a grant to an organization other than a charitable, etc., organization 4945(d)(4)(A)? See instructions  (5) Provide for any purpose other than religious, charitable, scientific, literary, the prevention of cruelty to children or animals?  b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify unit section 53.4945 or in a current notice regarding disaster assistance? See instructions or elying on a current notice regarding disaster assistance, check is the answer is "Yes" to question 5a(4), does the foundation claim exemption for expenditure responsibility for the grant?  If "Yes," attach the statement required by Regulations section 53 4945-5(d).  6a Did the foundation, during the year, receive any funds, directly or indirectly, to a personal benefit contract?  b Did the foundation, during the year, pay premiums, directly or indirectly, on a pif "Yes" to 6b, file Form 8870.  7a At any timo during the tax year, was the foundation a party to a prohibited tax seems the section of the provided to a party to a prohibited tax seems the foundation and party to a prohibited tax seems the foundation and party to a prohibited tax seems the foundation and party to a prohibited tax seems the foundation and party to a prohibited tax seems the foundation and party to a prohibited tax seems the foundation and party to a prohibited tax seems the foundation and party to a prohibited tax seems the foundation and party to a prohibited tax seems the foundation and party to a prohibited tax seems the foundation and party to a prohibited tax seems the foundation and party to a prohibited tax seems the foundation and	n 4945(e))?  or to carry on, directly or indirectly or educational purposes, or followed the exceptions described in uctions there from the tax because it maintains in No pay premiums on the property of	Yestiy, Yestiy	es X No es X No es X No N/A N/A N/A SS No	Yes No  5b X  6b X
b If "Yes," did the foundation receive any proceeds or have any net income attribu		10	N/A	7b
Paid Employees, and Contractors		nagers, Highly		
1 List all officers, directors, trustees, and foundation managers and t	·		(A)	T
(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
WILLIAM S. OROSZ, JR.	PRESIDENT, VP,	SECRETAR	Ү, Т	
2420 S. LAKEMONT AVENUE, SUITE 450	0.50		,	۱ ,
ORLANDO, FL 32814	0.50	0.	0.	0.
JODY L. OROSZ 2420 S. LAKEMONT AVENUE, SUITE 450 ORLANDO, FL 32814	DIRECTOR 0.50	0.	0.	0.
STEPHEN W. OROSZ	DIRECTOR			
2420 S. LAKEMONT AVENUE, SUITE 450 ORLANDO, FL 32814	0.50	0.	0.	0.
ORDANDO, FE 52014	0.50		<u> </u>	
	Landard and Inc. 40 Mar.			<u> </u>
2 Compensation of five highest-paid employees (other than those inc. (a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE				
	_			
<u> </u>				<del> </del>
	1			1
	1			<u> </u>
			L	<u> </u>
Total number of other employees paid over \$50,000			<u> </u>	0
			Form	990-PF (2017)

Total. Add lines 1 through 3	<b>•</b>		0.
All other program-related investments. See instructions.			
2			
1 N/A			
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.		Amount	
Part IX-B Summary of Program-Related Investments			
3			
2			
1 N/A		<del></del>	
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the	;	Expenses	
Part IX-B   Summary of Program-Related Investments  Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.  N/A  All other program-related investments See instructions.		<u> </u>	0
	-		
NONE			
(a) Name and address of each person paid more than \$50,000 (b) Type of	service	(c) Comper	sation
· · ·			
Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Hi	ghly		

P	art X Minimum Investment Return (All domestic foundations must complete the	nis part Foreign four	ndations, s	see instructions )
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	555,248.
	Average of monthly cash balances		1b	96,912.
	Fair market value of all other assets	j	1c	424,519.
d	Total (add lines 1a, b, and c)		1d	1,076,679.
е	Reduction claimed for blockage or other factors reported on lines 1a and			
	1c (attach detailed explanation)	0.		
2	Acquisition indebtedness applicable to line 1 assets		2	0.
3	Subtract line 2 from line 1d		3	1,076,679.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)		4	16,150.
5	Net value of noncharitable-use assets Subtract line 4 from line 3. Enter here and on Part V, line 4		5	1,060,529.
6	Minimum investment return. Enter 5% of line 5		6	53,026.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private of foreign organizations, check here ▶ and do not complete this part.)	perating foundations an	d certain	
1	Minimum investment return from Part X, line 6		1	53,026.
2a	Tax on investment income for 2017 from Part VI, line 5	1,381.		
b	Income tax for 2017. (This does not include the tax from Part VI.)			
c	Add lines 2a and 2b		2c	1,381.
3	Distributable amount before adjustments. Subtract line 2c from line 1		3	51,645.
4	Recoveries of amounts treated as qualifying distributions		4	0.
5	Add lines 3 and 4		5	51,645.
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	51,645.
P	art XII Qualifying Distributions (see instructions)			
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:			4=0 =00
a	Expenses, contributions, gifts, etc total from Part I, column (d), line 26		1a	472,500. 0.
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:			
a	Suitability test (prior IRS approval required)		3a	
þ	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	472,500.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment			
	income. Enter 1% of Part I, line 27b		5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4		6	472,500.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating w	hether the foundation of	ualifies for	the section

Form **990-PF** (2017)

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				51,645.
2 Undistributed income, if any, as of the end of 2017				
a Enter amount for 2016 only			0.	
b Total for prior years:		_		1
,,		0.		
3 Excess distributions carryover, if any, to 2017				
a From 2012 78,316.				
bFrom 2013 102,704.				
c From 2014 123, 120.				
dFrom 2015 91,864. eFrom 2016 423,947.				
	819,951.			i I
f Total of lines 3a through e	019,931.			
4 Qualifying distributions for 2017 from Part XII, line 4: ▶\$ 472,500.				
Part XII, line 4: >\$ 472,500.  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.			į
d Applied to 2017 distributable amount			<del>-</del>	51,645.
e Remaining amount distributed out of corpus	420,855.			
5 Excess distributions carryover applied to 2017	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:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	1,240,806.			
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				į
the section 4942(a) tax has been previously				
assessed		0.		
dSubtract line 6c from line 6b Taxable	' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' '	•		<u> </u>
amount - see instructions		0.		
e Undistributed income for 2016. Subtract line				
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2017. Subtract				
lines 4d and 5 from line 1. This amount must				0.
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	- 0.			1
not applied on line 5 or line 7	78,316.			
9 Excess distributions carryover to 2018.	7070200			
Subtract lines 7 and 8 from line 6a	1,162,490.			
10 Analysis of line 9				
a Excess from 2013   102,704.				
b Excess from 2014 123,120.				
c Excess from 2015 91,864.				
dExcess from 2016 423, 947.				
e Excess from 2017 420,855.				<u> </u>
723581 01-03-18			·	Form <b>990-PF</b> (2017)

THE BOARD OF DIRECTORS WILL REQUIRE A LETTER AND/OR REPORT FROM A RECIPIENT

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)

Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, show any relationship to Foundation Purpose of grant or Amount any foundation manager status of contribution Name and address (home or business) or substantial contributor recipient a Paid during the year 501(C)(3) TO BENEFIT THE AUGUSTINE INSTITUTE 6160 S SYRACUSE WAY ORGANIZATION 100,000. GREENWOOD VILLAGE CO 80111 DR. PHILLIPS CENTER FOR THE 501(C)(3) TO BENEFIT THE PERFORMING ARTS ORGANIZATION 455 S. ORANGE AVENUE, SUITE 700 ORLANDO, FL 32801 50,000. 501(C)(3) TO BENEFIT THE FLORIDA HOSPITAL FOUNDATION ORGANIZATION 550 EAST ROLLINS STREET, 6TH FLOOR 50,000. ORLANDO, FL 32803 501(C)(3) TO BENEFIT THE ST. MARGARET MARY CHURCH DRGANIZATION 526 N PARK AVENUE 1,000. WINTER PARK, FL 32789 TO BENEFIT THE SACRED HEART CATHOLIC CHURCH 501(C)(3) 20 SUMMIT ST DRGANIZATION 5,000. BURNSVILLE, NC 28714 SEE CONTINUATION SHEET(S) 472,500. ▶ 3a b Approved for future payment NONE Total **▶** 3b 0.

inter gross amounts unless otherwise indicated.	Unrelated business income			ded by section 512, 513, or 514	(e)		
	(a) Business	(b) Amount	Exclu- sion code	(d) Amount	Related or exempt function income		
1 Program service revenue:	code		Loue				
ab	-		+		<del></del>		
			<del>- </del>		·····		
c			<del>-   ·</del>				
<u> </u>	•		+				
f	-		-				
g Fees and contracts from government agencies	•						
2 Membership dues and assessments							
3 Interest on savings and temporary cash							
investments			14	109.			
4 Dividends and interest from securities			14	10,286.			
5 Net rental income or (loss) from real estate:	,	'1		, ,	,		
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	60,507.			
9 Net income or (loss) from special events			.				
O Gross profit or (loss) from sales of inventory							
1 Other revenue:	ŀ						
a	.						
b	.						
C	-						
d	-				<del></del>		
e	- <del> </del>	-0		70,902.			
2 Subtotal Add columns (b), (d), and (e)			• [		70,90		
3 Total. Add line 12, columns (b), (d), and (e)				13	10,30		
See worksheet in line 13 instructions to verify calculations.)	<u> </u>						

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

Lille No. ■	the foundation's exempt purposes (other than by providing funds for such purposes).						
-							

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

	e organization directly or indir				iii described iii seci	11011 30 1(0)	1 1	103	-10
(other	than section 501(c)(3) organ	lizations) or in sectio	ın 527, relatıng	to political organizations?					
a Transf	ers from the reporting founda	ation to a noncharita	ble exempt orç	ganization of:					
(1) Ca	ish						1a(1)		X
(2) 01	her assets						1a(2)		X
<b>b</b> Other 1	ransactions;								
(1) Sa	iles of assets to a noncharital	ble exempt organiza	tion				1b(1)		X
(2) Pi	irchases of assets from a noi	ncharitable exempt (	organization				1b(2)		X
	ental of facilities, equipment,		-				1b(3)		X
٠,٠	eimbursement arrangements						1b(4)		X
• •	oans or loan guarantees						1b(5)		X
	erformance of services or me	mbership or fundra	sino solicitatio	ns			1b(6)		X
	g of facilities, equipment, ma						1c		Х
	nswer to any of the above is	-			ways show the fair	market value of the goods of	other ass	ets	
	rices given by the reporting fo							0.0,	
	n (d) the value of the goods,			ou 1000 than ian thanket valu	io in any mandadio	or onaring arrangement, o			
a)Line no	(b) Amount involved			exempt organization	(d) Description	n of transfers, transactions, and	Sharing an	angeme	ents
u/cine no	(b) Amount involved	(0) (10)	N/A		(2) 2000.0.0				
			IV/A						
		<del></del>							
Ī									
T I									_
	· ·			.,					
1				<del></del>	•				
2a is the t	oundation directly or indirect	tly affiliated with or	related to one	or more tax-exempt organi	zations described				
	ion 501(c) (other than sectio	-		or more an example organic		Г	Yes	X	No
	" complete the following sch		CHOH JZ7			_			_ ,,,
D II TES	(a) Name of org			(b) Type of organization	<u> </u>	(c) Description of relations	hiα		
	N/A	<u>,umzuuon</u>		(b) type of digamenton		(0) 2000. p			
	N/A								
<del></del>									
					<u> </u>				
									<del></del>
					<u> </u>				
lan	nder penalties of perury I declare d belief, it is true, correct and too	that I have examined the	is return, includin enarer (other thai	ig accompanying schedules and n taxoaver) is based on all inform	statements, and to the nation of which orepare		y the IHS o	discuss	this
Sign	X		opa a (oma ma	11/1/1/1/1/1/1/1/1/1/1/1/1/1/1/1/1/1/1/1		sho	wn below	? Se <u>e in</u>	str
Here				11/6/18	PRESI	DENT	X Yes		J No Ì
3	Signature of officer or trustee			Date /	Title				
	Print/Type preparer's na	ame	Preparer's	gnature	Date	Check if PTIN			
			1	~ Me N	1, 1, 1,0	self- employed			
Paid	GEORGE K.	MCNEMAR	Lan	K. 11/2//2	11/6/18	P0	1775	038	
Prepare			Z			Firm's EIN ▶ 59-3			
Use On		,					_		
	- 1	60 ORANGE	AVENII	E, SUITE 600		+			
	l l	NTER PARK		·		Phone no. 407-9	98-9	000	
	I AAT	MIDK EWE	.,	2.05	<del></del>		orm <b>99</b> 0		
						r.	<b>၁</b> ૩(	J-1-1"	(2011)

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

Department of the Treasury Internal Revenue Service

## **Schedule of Contributors**

➤ Attach to Form 990, Form 990-EZ, or Form 990-PF.

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

OMB No 1545-0047

2017

Name of the organization		Employer identification number
OI	20-4716839	
Organization type (check of	ROSZ FAMILY FOUNDATION, INC.	
Filers of:	Section:	
Form 990 or 990-EZ	501(c)( ) (enter number) organization	
	4947(a)(1) nonexempt charitable trust not treated as a private foundation	
	527 political organization	
Form 990-PF	X 501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a private foundation	
	501(c)(3) taxable private foundation	
, .	s covered by the <b>General Rul</b> e or a <b>Special Rule.</b> (7), (8), or (10) organization can check boxes for both the General Rule and a Special R	ule See instructions
General Rule		
_	n filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling one contributor. Complete Parts I and II. See instructions for determining a contributo	
Special Rules		
sections 509(a)(1) any one contribute	n described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% supportant 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a or, during the year, total contributions of the greater of (1) \$5,000, or (2) 2% of the amount 1 Complete Parts I and II	a, or 16b, and that received from
year, total contribi	n described in section 501(c)(7), (8), or (10) filing Form 990 or 990·EZ that received from utions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educinelty to children or animals. Complete Parts I, II, and III	
year, contributions is checked, enter purpose Don't co	n described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from sections exclusively for religious, charitable, etc., purposes, but no such contributions totaled in the total contributions that were received during the year for an exclusively religious implete any of the parts unless the General Rule applies to this organization because it e, etc., contributions totaling \$5,000 or more during the year	nore than \$1,000 If this box is, charitable, etc,
but it must answer "No" or	nat isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B ( Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its f the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)	

LHA For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2017)

Name of organization

Employer identification number

OROSZ FAMILY	FOUNDATION,	INC.
--------------	-------------	------

20-4716839

011000	TABLET TOURDATION, INC.		
Part I	Contributors (see instructions) Use duplicate copies of Part I	f additional space is needed	
(a) No.	(b) Name, address, and ZIP + 4	- (c) Total contributions	(d) Type of contribution
1	WILLIAM AND JODY OROSZ  605 COMMONWEALTH AVENUE  ORLANDO, FL 32803	\$ 164,500.	Person X Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash Complete Part II for noncash contributions )
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
723452 11-0		\$Schedule B / Form	Person Payroll Noncash (Complete Part II for noncash contributions) 990, 990-EZ, or 990-PF) (2017)

Employer identification number

### OROSZ FAMILY FOUNDATION, INC.

20-4716839

Part II	Noncash Property (see instructions) Use duplicate copies of P	art II if additional space is needed	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		s	
(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
_		s	
453 11-01-	17		990, 990-EZ, or 990-PF) (2

Schedule B	3 (Form 990, 990-EZ, or 990-PF) (2017)		Pag				
Name of org			Employer identification number				
	FAMILY FOUNDATION, INC	•	20-4716839				
Part III	the year from any one contributor. Complete of completing Part III, enter the total of exclusively religious	columns (a) through (e) and the follow s, charitable, etc , contributions of \$1,000 or					
(a) No	Use duplicate copies of Part III if addition	al space is needed					
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held				
		(a) Transfer of set					
	Transferee's name, address, a	(e) Transfer of gif	Relationship of transferor to transferee				
	Hallsteree 5 harrie, address, at	10217 7 4	netationship of transfer of to transfer co				
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held				
		(e) Transfer of gif					
-	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee				
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held				
		(e) Transfer of gif	4				
		(e) Hallster of gil					
}	Transferee's name, address, at	nd ZIP + 4	Relationship of transferor to transferee				
(a) No. from	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held				
Part I		(1,7222)					
}	(e) Transfer of gift						
	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee				
į							
ł		i					

_	(a) List and 2-story b	d describe the kind(s) of property sol rick warehouse, or common stock, 2	d, e.g , real estate, 00 shs. MLC Co.	(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo , day, yr.)	(d) Date sold (mo., day, yr)
1a ISHARES MSCI EAFE					01/15/16	11/14/17
_	ISHARES TR RUS			P	01/15/16	
	ISHARES S&P SM			P	01/15/16	
		G MARKETS EQUITY	ETF	P	01/15/16	
		G MARKETS EQUITY		P	06/20/16	
f			-	P		11/14/17
g	···					
h						
	· · · · · · · · · · · · · · · · · · ·					
-						
k						
	-					
m	1					
n						
0						
	(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(e) (	) Gain or (loss) plus (f) minus (g)	
	40,890.		31,749.			9,141.
b	40,977.		28,054.			12,923.
c	41,640.		27,773.			13,867.
ď	31,551.		20,100.			11,451.
e	9,275.		7,185.			2,090.
f	40,911.		29,876.			11,035.
g						
h	<del></del>					
1						-
$\overline{}$						
ķ			- "			
1						
m						
n						
0						
_	Complete only for assets shown	ng gain in column (h) and owned by	the foundation on 12/31/69	(I) Lo	sses (from col (h))	1
	(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	Gains (excess	of col (h) gain ove not less than "-0-")	r col. (k),
a	· · · ·			, =	-	9,141.
b	<del></del>			•		12,923.
c	<del></del>					13,867.
d						11,451.
e						2,090.
f				<del></del>		11,035.
g						
h						
T						
I						
k	<u> </u>				-	
T						
m						
n						
0						
2	Capital gain net income or (net ca	apital loss) { If gain, also ente	r in Part I, line 7 )-" in Part I, line 7	2		60,507.
3	Net short-term capital pain or (lo:	ss) as defined in sections 1222(5) ar	- i			
•	If gain, also enter in Part I, line 8, If (loss), enter "-0-" in Part I, line	, column (c).	}	3	N/A	

3 Grants and Contributions Paid During the Ye		Τ.	<del></del>	
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		
FIRST UNITED METHODIST CHURCH		501(C)(3)	TO BENEFIT THE	
125 N. INTERLACHEN AVE			ORGANIZATION	0.5
WINTER PARK, FL 32789				2,50
		F01/C)/2)	no priverte eur	
MEAD BOTANICAL GARDENS 1300 S DENNING DR		501(C)(3)	TO BENEFIT THE ORGANIZATION	
WINTER PARK, FL 32789			DRGANIZATION	5,00
11112K 17MK, 12 32703				
SAMARITANS VILLAGE		501(C)(3)	TO BENEFIT THE	
PO BOX 149599			ORGANIZATION	
ORLANDO, FL 32814				1,00
BISHOP MOORE CATHOLIC SCHOOL		501(C)(3)	TO BENEFIT THE	
3901 EDGEWATER DR			ORGANIZATION	
ORLANDO, FL 32804				7,50
COMMUNITY FOUNDATION OF WESTERN NORTH		501(C)(3)	TO BENEFIT THE	
CAROLINA DONATION			ORGANIZATION	
4 VANDERBILT PARK DR STE 300				-
ASHEVILLE, NC 28803			<u> </u>	50
CAMBOATO A DARBOUATO TANGMAMINE		501(C)(3)	TO BENEFIT THE	
CATHOLIC LEADERSHIP INSTITUTE 440 EAST SWEDESFORD RD STE 3040		501(0)(3)	ORGANIZATION	
WAYNE, PA 19087				250,00
			·	
		<u> </u>		_,
Total from continuation sheets	L		<u> </u>	266,50

FORM 990-PF INTERE	ST ON SAVI	NGS AND TEM	IPORARY	CASH IN	VESTMENTS	STATEMENT	1
SOURCE	REVE			(B) VESTMENT COME	(C) ADJUSTED NET INCOME		
MERILL LYNCH - INTE	REST		109.				
TOTAL TO PART I, LI	NE 3		109.		109.		_
FORM 990-PF	DIVIDEND	S AND INTER	EST FRO	M SECUR	ITIES	STATEMENT	2
SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDEND	RE	(A) EVENUE BOOKS	(B) NET INVES MENT INCO		
MERRILL LYNCH-DIVIDENDS	10,286	•	0.	10,286.	10,28	6.	
TO PART I, LINE 4	10,286		0.	10,286.	10,28	6.	_
FORM 990-PF		ACCOUNTI	NG FEES	}		STATEMENT	3
DESCRIPTION		(A) EXPENSES PER BOOKS	(E NET IN MENT I	WEST-	(C) ADJUSTED NET INCOM		
ACCOUNTING FEES AND PROFESSIONAL SERVIC	E FEES	1,211.		1,211.		0	ο.
TO FORM 990-PF, PG	1, LN 16B	1,211.		1,211.		C	) <b>.</b>
FORM 990-PF		TAX	ES			STATEMENT	4
DESCRIPTION		(A) EXPENSES PER BOOKS	(E NET IN MENT I	WEST-	(C) ADJUSTED NET INCOM		
TAXES		333.		333.		C	).
TO FORM 990-PF, PG	1, LN 18	333.		333.		0	).
	==						

FORM 990-PF	OTHER E	XPENSES	. <u></u>	STATEMENT 5		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME				
BANK FEES BUSINESS LICENSES	150. 161.	150. 161.		0.		
TO FORM 990-PF, PG 1, LN 23	311.	311.		0.		
FORM 990-PF	CORPORAT	E STOCK		STATEMENT 6		
DESCRIPTION	во	OK VALUE	FAIR MARKET VALUE			
MERRILL LYNCH - MUTUAL FUNDS	, ETF		423,445.	423,445.		
TOTAL TO FORM 990-PF, PART II, LINE 10B			423,445. 423			
FORM 990-PF PART XV - LINE 1A LIST OF FOUNDATION MANAGE				STATEMENT 7		

### NAME OF MANAGER

WILLIAM S. OROSZ, JR. JODY L. OROSZ