EXTENDED TO NOVEMBER 15, 2 Return of Private Foundation 2018

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

▶ Do not enter social security numbers on this form as it may be made public.

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

For	calen	ndar year 2017 or tax year beginning		, and ending		
Na	me of	foundation			A Employer identificatio	n number
					•	
		INERS OF RHODE ISLAND C		ST	22-3191072	2
		and street (or P O box number if mail is not delivered to street	address)	Room/suite	B Telephone number	
		RHODES PLACE			(401)467-	
		own, state or province, country, and ZIP or foreign p	ostal code		C If exemption application is	pending, check here
		NSTON, RI 02905				
G	опеск	call that apply: Initial return	Initial return of a fo	rmer public charity	D 1. Foreign organization	is, check here
		Final return	Amended return		Foreign organizations m check here and attach c	eeting the 85% test,
<u> </u>		Address change type of organization. X Section 501(c)(3) ex	Name change			
			Other taxable private founda		E If private foundation sta under section 507(b)(1	
1 F		arket value of all assets at end of year J Accounting				
		· ,	ther (specify)		F If the foundation is in a under section 507(b)(1	
	▶\$	29,998,007. (Part I, colur		5)	2.120, 00011011 001 (D)(1	//s// ccomc.
P	art I	Analysis of Revenue and Expenses	(a) Revenue and	(b) Net investment	(c) Adjusted net	(d) Disbursements
		(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a))	expenses per books	income	income	for charitable purposes (cash basis only)
7	1	Contributions, gifts, grants, etc., received	179,485.		N/A	
	2	Check I if the foundation is not required to attach Sch. B				
l	3	Interest on savings and temporary cash investments				
	4	Dividends and interest from securities	1,104,475.	1,104,475.		STATEMENT 1
	5a	Gross rents	-			
	I	Net rental income or (loss)	000 (1-9			
e	6a	Net gain or (loss) from sale of assets not on line 10 Gross sales price for all	890,613			
e C	٥, ا	assets on line 8a	RECEIVE	Q890,613.		
(å	'	Capital gain net income (from Part IV, line 2) Net short-term capital gain	10 NIG 21 20	8 131		
DANNED	٥	Income modifications	OF AUG 2			
Ź	10a	Gross sales less returns and allowances		ليبال		
¥.	b	Less Cost of goods sold	OGUEN			
Ö	C	Gross profit or (loss)				
0C1	11	Other income				
<u> </u>	12	Total Add lines 1 through 11	2,174,573.	1,995,088.		
~	13	Compensation of officers, directors, trustees, etc	0.	0.		0.
)	14	Other employee salaries and wages				
S S		Pension plans, employee benefits	44 584			10 414
se c	16a	Legal fees STMT 2	11,571.			10,414.
Expense	- b	Accounting fees STMT 3	16,000.	0.		14,400.
Ü.	17	Other professional fees Interest				
atív	17	Taxes STMT 4	20,160.	0.		0.
ST.	19	Depreciation and depletion	10,193.	0.		
Ē	20	Occupancy	20/2500			
Ad	21	Travel, conferences, and meetings				
þ	22	Printing and publications				
Operating and Administrative	23	Other expenses STMT 5	320,923.	0.		320,923.
i i	24	Total operating and administrative				
jo G		expenses Add lines 13 through 23	378,847.	0.		345,737.
Ü	25	Contributions, gifts, grants paid	1,565,056.			1,565,056.
	26	Total expenses and disbursements.	4 649 665	•		1 010 500
	 	Add lines 24 and 25	1,943,903.	0.		1,910,793.
	ı	Subtract line 26 from line 12:	220 670]	
		Excess of revenue over expenses and disbursements	230,670.	1,995,088.		
		Net investment income (if negative, enter -0-) Adjusted net income (if negative, enter -0-)	 	1,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	N/A	
_	٣_٠	valance net meente hinogense, eura -e-)	<u> </u>			5 OOO DE (0017)

For	m 99	0-PF (2017) SHRINERS OF RHODE ISLAND			3191072 Page 2
P	art	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year	End of	
<u>.</u>		column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing	25,819.	44,455.	44,455.
	2	Savings and temporary cash investments	753,955.	1,529,968.	1,529,968.
	3	Accounts receivable ►			
		Less: allowance for doubtful accounts ▶			
	4	Pledges receivable ▶			
	ļ	Less: allowance for doubtful accounts ▶			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
	İ	disqualified persons			
	7	Other notes and loans receivable			
		Less: allowance for doubtful accounts ▶	-1.		
Ş	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			
<	10a	Investments - U.S. and state government obligations			
	b	Investments - corporate stock STMT 6	15,076,027.	13,982,163.	18,608,942.
	C	Investments - corporate bonds STMT 7	5,811,823.	4,949,078.	5,928,979.
	11	Investments - land, buildings, and equipment basis			
		Less accumulated depreciation			
	12	Investments - mortgage loans			
	13	Investments - other STMT 8	2,278,299.	3,778,122.	2,323,178.
	14	Land, buildings, and equipment: basis ► 177,752.			
		Less accumulated depreciation STMT 9 127,452.	60,493.	50,300.	50,300.
	l .	Other assets (describe STATEMENT 10)	1,467,803.	1,370,803.	1,512,185.
	16	Total assets (to be completed by all filers - see the			
_		Instructions. Also, see page 1, item I)	25,474,219.	25,704,889.	<u> 29,998,007.</u>
	I	Accounts payable and accrued expenses			
	l	Grants payable			
ies	19	Deferred revenue			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
<u>Lia</u>	21	Mortgages and other notes payable			
_	22	Other liabilities (describe)			
		Tatal liabilities (add inco 17 through 22)	0.	0.	
_	23	Total liabilities (add lines 17 through 22)			
		Foundations that follow SFAS 117, check here and complete lines 24 through 26, and lines 30 and 31			
es	24	Unrestricted			
auc	25	Temporarily restricted			
3al	26	Permanently restricted	· 		
or Fund Balances	-	Foundations that do not follow SFAS 117, check here			
F		and complete lines 27 through 31			
ŏ	27	Capital stock, trust principal, or current funds	0.	0.	
sets	28	Paid-in or capital surplus, or land, bldg , and equipment fund	0.	0.	
Net Assets	29	Retained earnings, accumulated income, endowment, or other funds	25,474,219.	25,704,889.	
ē	30	Total net assets or fund balances	25,474,219.	25,704,889.	
_					
	31	Total liabilities and net assets/fund balances	25,474,219.	25,704,889.	
	art	Analysis of Changes in Net Assets or Fund Ba	lances		
_					
1		net assets or fund balances at beginning of year - Part II, column (a), line 30)		05 454 010
	-	st agree with end-of-year figure reported on prior year's return)		1	25,474,219.
		r amount from Part I, line 27a		2	230,670.
		r increases not included in line 2 (itemize)		3	<u> </u>
		lines 1, 2, and 3		5	<u>25,704,869.</u> 0.
		eases not included in line 2 (itemize) inet assets or fund balances at end of year (line 4 minus line 5) - Part II, colu	ımn (b) line 30	6	25,704,889.
<u>6</u>	· Uld	the appear of futing parameter at the or year time 4 fillings line of 11 art in tole	(0),		Form 990-PF (2017)

Part IV Capital Gains a	NERS OF RHODE I	.SLAND nvestment	CHARTTIE Lincome	S	TRU.	ST	2	2-319.	1072	Page 3
			(b)	(b) How acquired P - Purchase D - Donation		(c) Date acquired (d) Date (mo., day, yr.) (mo., day		te sold ay, yr.)		
1a SALE OF INVESTM	 			1 -	- Dulla	ition		-		
b										
C										
<u>d</u>		***								
е		,		L.,						
(e) Gross sales price	(f) Depreciation allowed (or allowable)		st or other basis expense of sale			(in or (loss) (f) minus (j))	
a 9,306,232.			8,415,61	9.					890	<u>,613.</u>
b										
С		ļ								
d										
e		<u> </u>								
Complete only for assets showing	······································							ol. (h) gain r		
(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69		cess of col. (i) col. (j), if any					ot less than (from col (h		
a									<u>890</u>	,613.
b										
С										
d										 .
e										
2 Capital gain net income or (net cap	If gain, also ente If (loss), enter -C	r ın Part I, line)- ın Part I, line	7 7	}	2				890	,613.
3 Net short-term capital gain or (loss	•									
If gain, also enter in Part I, line 8, could felloss), enter -0- in Part I, line 8		(0).			3			N/A		
Part V Qualification Un	der Section 4940(e) for	r Reduced	Tax on Net	Inv	estm	ent Inco	me	-17 ++		
If section 4940(d)(2) applies, leave this Was the foundation liable for the section If "Yes," the foundation doesn't qualify Tenter the appropriate amount in each	on 4942 tax on the distributable ar under section 4940(e) Do not coi	mplete this par	t		•				Yes	X No
(a)		nou uchono de	iore making any c				<u> </u>		(d)	
Base period years Calendar year (or tax year beginning			Net value of no		rıtable-ı			Distribi (col. (b) divi		
2016		4,299.				8,639.			- 0	75928
2015		77,513.				<u>2,251.</u>				65153
2014		0,091.				2,619.				61124
2013		4,908.				0,990.				57793
2012	1,51	5,109.		26	, T 2	<u>2,162.</u>			. 0	<u>57934</u>
2 Total of line 1, column (d)							2_		. 3	17932
3 Average distribution ratio for the 5- the foundation has been in existence		on line 2 by 5.	0, or by the numb	er of	years		3		.0	63586
4 Enter the net value of noncharitable	e-use assets for 2017 from Part X,	line 5					4	_28	3,519	,621.
5 Multiply line 4 by line 3							5	<u> </u>	1,813	,449.
6 Enter 1% of net investment income	(1% of Part I, line 27b)						6		19	,9 <u>51.</u>
7 Add lines 5 and 6							7		1,833	,400.
8 Enter qualifying distributions from	Part XII, line 4						8			,793.
If line 8 is equal to or greater than I See the Part VI instructions.	•	e 1b, and comp	olete that part usin	ng a 1	% tax r	ate.				
723521 01-03-18								F	orm 990-	PF (2017

SHRINERS OF RHODE ISLAND CHÂRITIES TRUST Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see instructions) 1a Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1. Date of ruling or determination letter: (attach copy of letter if necessary-see instructions) b Domestic foundations that meet the section 4940(e) requirements in Part V, check here X and enter 1% 19,951. 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 4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-) Tax based on investment income Subtract line 4 from line 3. If zero or less, enter -0-5 6 Credits/Payments: a 2017 estimated tax payments and 2016 overpayment credited to 2017 9,780 **b** Exempt foreign organizations - tax withheld at source 6b 3,682. c Tax paid with application for extension of time to file (Form 8868) 6c d Backup withholding erroneously withheld 7 Total credits and payments. Add lines 6a through 6d 13,462. 8 Enter any penalty for underpayment of estimated tax. Check here X if Form 2220 is attached 126. 8 9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed 6,615 9 10 Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 10 11 Enter the amount of line 10 to be: Credited to 2018 estimated tax Refunded > 11 Part VII-A Statements Regarding Activities Yes No 1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in X any political campaign? 1a X b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition 1b 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. X c Did the foundation file Form 1120-PQL for this year? 1c d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: 0 • (2) On foundation managers. ▶ \$ (1) On the foundation. > \$ e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. > \$ X 2 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? 4a b If "Yes," has it filed a tax return on Form 990-T for this year? N/A 4b 5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? 5 If "Yes," attach the statement required by General Instruction T. 6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: By language in the governing instrument, or By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument? 7 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

Form 990-PF (2017)

8b

10

8a Enter the states to which the foundation reports or with which it is registered. See instructions.

year 2017 or the tax year beginning in 2017? 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 address

of each state as required by General Instruction G? If "No," attach explanation

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)

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

4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?

• Did the foundation make any investment in a grick way (but after December 31, 1969) that could jeopardize its ch

c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.

3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time

Form 4720, to determine if the foundation had excess business holdings in 2017.)

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?

valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach

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 **990-PF** (2017)

X

N/A

N/A

Yes X No

2b

3b

4a

statement - see instructions.)

during the year?

· ·						
Part VII-B. Statements Regarding Activities for Which F	CHARITIES TR	RUST Required (contin	22-3191(72	F	² age 6
5a During the year, did the foundation pay or incur any amount to:	<u> </u>	1040110		ŀ	Yes	No
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	4045(a)\2	[] v,	8 X No		100	
(2) Influence the outcome of any specific public election (see section 4955); or	* **		18 LAL 180	ł	ł	
any voter registration drive?	to carry on, unecting or mone		es X No			
· · · · · · ·	•		es X No		ł	
(3) Provide a grant to an individual for travel, study, or other similar purposes?		L Y6	S LALINO		İ	
(4) Provide a grant to an organization other than a charitable, etc., organization	described in Section		. [1]	- 1	- 1	
4945(d)(4)(A)? See instructions			s X No	1		
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or t		(
the prevention of cruelty to children or animals?			es X No			
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und		in Regulations		_		
section 53.4945 or in a current notice regarding disaster assistance? See instru			N/A	5b		
Organizations relying on a current notice regarding disaster assistance, check h	ere		▶∟」│		- 1	
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption from						
expenditure responsibility for the grant?	ν	I/A	8 No			
If "Yes," attach the statement required by Regulations section 53.4945-5(d).			1	1		
6a Did the foundation, during the year, receive any funds, directly or indirectly, to p	ay premiums on					
a personal benefit contract?		Ye	s X No			
b Did the foundation, during the year, pay premiums, directly or indirectly, on a pe	ersonal benefit contract?		1	6b		\mathbf{X}
If "Yes" to 6b, file Form 8870.			Γ			
7a At any time during the tax year, was the foundation a party to a prohibited tax sf	nelter transaction?	☐ Y€	s X No		1	
b If "Yes," did the foundation receive any proceeds or have any net income attribut			N/A	7b		
Part VIII Information About Officers, Directors, Truste		nagers, Highly				
Paid Employees, and Contractors	,	,				
List all officers, directors, trustees, and foundation managers and the	neir compensation.					
	(b) Title, and average	(c) Compensation	(d) Contributions to employee benefit plans	(e) Expe	enșe
(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	and deferred compensation	ac	count, Illowan	other
A SHEFFIELD REYNOLDS	TREASURER	enter o'j	Compensation	 `		
425 MESHANTICUT VALLEY PARKWAY APT 10	TIMESOUTH			ļ		
CRANSTON, RI 02920	0.00	0.	0.	1		0.
	TRUSTEE			' -	-	
·	IKODIEE		1			
348 PLAINFIELD PIKE	0.00	0.	0.			Λ
GREENE, RI 02827		· · ·	<u> </u>	' -		<u>0.</u>
	TRUSTEE			1		
12 HYBRID DR	0.00					_
CRANSTON, RI 02920	0.00	0.	0.	-		0.
	TRUSTEE					
109 FRANCIS AVE			_			_
PAWTUCKET, RI 02860	0.00	0.	0,	<u>.l</u>		<u>0.</u>
2 Compensation of five highest-paid employees (other than those inc		enter "NONE."	(d) Contributions to	1 .	-1 Evn	
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week	(c) Compensation	(d) Contributions to employee benefit plans and deferred	ac	e) Expe count,	other
	devoted to position		compensation	-6	illowan	ices
NONE						
		<u> </u>		↓		
				1		
				<u> </u>		
				1		
		<u> </u>		 		
		<u> </u>				
				1		
Total number of other employees paid over \$50,000						0
			Forn	990	-PF	(2017)

Part VIII Information About Officers, Directors, Trustees, Foundation Paid Employees, and Contractors (continued)		3191072 Page 7
3 Five highest-paid independent contractors for professional services. If none, enter "h	NONE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
		Ì
Total number of others receiving over \$50,000 for professional services		<u>▶</u> 0
Part IX-A Summary of Direct Charitable Activities	· · · · · · · · · · · · · · · · · · ·	
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistica number of organizations and other beneficiaries served, conferences convened, research papers produce	I information such as the ed, etc.	Expenses
1 N/A		
2		
3		
Part IX-B Summary of Program-Related Investments		
Describe the two largest program-related investments made by the foundation during the tax year on line	es 1 and 2.	Amount
1 N/A		
1		
2		
		
All other program-related investments. See instructions.		
3		
Total Addition 4 Abranch O		0.
Total. Add lines 1 through 3		Form 990-PF (2017)

P	art 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:	$\neg \neg \neg \neg$	
a		1a	27,776,831.
b	Average of monthly cash balances	1b	35,137.
C	Fair market value of all other assets	1c	1,141,962.
d	Total (add lines 1a, b, and c)	1d	28,953,930.
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	28,953,930.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	434,309.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	28,519,621.
6_	Minimum investment return Enter 5% of line 5	6	1,425,981.
P	art XI Distributable Amount (see instructions) (Section 4942(1)(3) and (1)(5) private operating foundation	ns and certain	
	foreign organizations, check here 🕨 🔙 and do not complete this part.)		
1	Minimum investment return from Part X, line 6	1	1,425,981.
2a	Tax on investment income for 2017 from Part VI, line 5	1.	
b	Income tax for 2017. (This does not include the tax from Part VI.)		
C	Add lines 2a and 2b	2c	19,951.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	1,406,030.
4	Recoveries of amounts treated as qualifying distributions	4	<u> </u>
5	Add lines 3 and 4	5	1,406,030.
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 7	1,406,030.
P	art 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	1,910,793.
b		16	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	1,910,793.
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	19,951.
6	Adjusted qualifying distributions Subtract line 5 from line 4	6	1,890,842.
-	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the founda	tion qualifies for	
	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				1,406,030.
2 Undistributed income, if any, as of the end of 2017				
a Enter amount for 2016 only			0.	
b Total for prior years:				,
3 Excess distributions carryover, if any, to 2017:		0.		
1 2 2				
a From 2012 245,721. b From 2013 254,726.			Ì	
c From 2014 371,018.				
dFrom 2015 443, 254.		į	1	
e From 2016 672,873.			ł.	
f Total of lines 3a through e	1,987,592.	}		
4 Qualifying distributions for 2017 from	1			
Part XII, line 4: ►\$ 1,910,793.		ļ	ļ	
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				1,406,030.
e Remaining amount distributed out of corpus	504,763.			0.
5 Excess distributions carryover applied to 2017 (If an amount appears in column (d), the same amount must be shown in column (a))	0.			<u> </u>
6 Enter the net total of each column as indicated below:				
& Corpus Add lines 3f, 4c, and 4e Subtract line 5	2,492,355.			
b Prior years' undistributed income Subtract	}		Ì	
line 4b from line 2b		0.		
c Enter the amount of prior years'	ļ	}	ļ	
undistributed income for which a notice of deficiency has been issued, or on which		}	}	
the section 4942(a) tax has been previously	1		1	
assessed		0.		
d Subtract line 6c from line 6b Taxable	}	0.		
amount - see instructions 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		}		
be distributed in 2018				0.
7 Amounts treated as distributions out of		ļ		
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	0.45 501			
not applied on line 5 or line 7	245,721.			
9 Excess distributions carryover to 2018.	2,246,634.			
Subtract lines 7 and 8 from line 6a	2,240,034.			
10 Analysis of line 9: a Excess from 2013 254,726.				
b Excess from 2014 371,018.				
c Excess from 2015 443, 254.				
d Excess from 2016 672,873.				
e Excess from 2017 504, 763.				
				Form 990-PF (2017)

Form 990-PF (2017) SHRINERS Part XIV Private Operating Fo		ISLAND CHAP			191072 Page 10
			II-A, question 9)	N/A	
1 a If the foundation has received a ruling or					
foundation, and the ruling is effective for b Check box to indicate whether the foundate		•	un continu	14042(1)(2) ps []	4040(₁)(E)
2 a Enter the lesser of the adjusted net	Tax year	ig journation described	Prior 3 years	4942(j)(3) or	4942(j)(5)
income from Part I or the minimum	(a) 2017	(b) 2016	(c) 2015	(d) 2014	(e) Total
investment return from Part X for		(0)20.0	(0)20.0		1 (0) (0)
each year listed			<u> </u>		
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			†	<u> </u>	
for active conduct of exempt activities.		<u> </u>			
Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the					
alternative test relied upon: a "Assets" alternative test - enter:		}	1		
(1) Value of all assets		}			
(2) Value of assets qualifying					
under section 4942(j)(3)(B)(i)]		1	
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:			d		1
(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			<u> </u>		
(4) Gross investment income		<u> </u>	<u> </u>		
Part XV Supplementary Infor			if the foundatio	n had \$5,000 or r	nore in assets
at any time during th		ructions.j			
1 Information Regarding Foundation				e la la la la desar de la la	
a List any managers of the foundation who year (but only if they have contributed me			tributions received by tr	ie foundation before the c	lose of any tax
, , , ,	ne man wo,ooo, (occ a	000000000000000000000000000000000000000			
NONE b List any managers of the foundation who	own 100/ or more of th	a atack of a corporation	(or an aqually large por	tion of the ownership of a	nartnarchin or
other entity) of which the foundation has	a 10% or greater intere	ie stock of a corporation st.	(or an equally large por	non of the ownership of a	partitership of
NONE					
2 Information Regarding Contribution	n Grant Gift Loan	Scholarship etc. P	rograms.		
Check here \(\bigcup_{\text{in}}\) if the foundation on the foundation makes gifts, grants, etc., t	ly makes contributions	to preselected charitable	organizations and does		quests for funds. If
a The name, address, and telephone numb					
ם דוום וומווס, מטטופסס, מווט ופופטווטוופ ווטוווט	ur or email audi 855 Ut li	по регоси то многи арри	iogannio orionia de adule		
SEE STATEMENT 11					
b The form in which applications should be	submitted and informa	ition and materials they s	should include:		
c Any submission deadlines:					
d Any restrictions or limitations on awards,	, such as by geographic	al areas, charitable fields	, kınds of ınstitutions, o	r other factors:	
723801 01-03-18					Form 990-PF (20 17

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated.	Unrelated business income		Exclu	ded by section 512, 513, or 514	(e)	
1 Program service revenue:	(a) Business code	(b) Amount	Exclu- sion code	(d) Amount	Related or exempt function income	
	code		1000			
å			 	ļ		
b			 	ļ		
c			 			
d			├			
e			 			
g Fees and contracts from government agencies						
2 Membership dues and assessments		ļ 	 	 		
3 Interest on savings and temporary cash			1	{		
investments			1	4.04.455		
4 Dividends and interest from securities			14	1,104,475.		
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			<u> </u>			
7 Other investment income			<u> </u>			
8 Gain or (loss) from sales of assets other			}	}		
than inventory			18	890,613.		
9 Net income or (loss) from special events			<u> </u>			
10 Gross profit or (loss) from sales of inventory			<u> </u>			
11 Other revenue:	}		}			
a		} L				
b			<u> </u>			
C						
d						
e			<u> </u>			
12 Subtotal Add columns (b), (d), and (e)	<u> </u>	0.		1,995,088.	0.	
13 Total. Add line 12, columns (b), (d), and (e)				13	1,995,088.	
(See worksheet in line 13 instructions to verify calculations.)						
Part XVI-B Relationship of Activities to	the Acc	omplishment of Ex	xemp	t Purposes		
Line No. Explain below how each activity for which incor	ne is reported	in column (e) of Part XVI-A	A contrit	buted importantly to the accord	nplishment of	
▼ the foundation's exempt purposes (other than t						
						

723821 01-03-18

Form 990-PF (2017) SHRINERS OF RHODE ISLAND CHARITIES TRUST 22-3191072 Page 13

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

Circlion directly or indirectly engage in any of the following with any other organization described in section 501(c) Did the organization directly or indirectly engage

i Dia the of	gamzation directly or indi	rectly engage in any	of the followin	g with any other organiza	tion described in sec	tion 501(c)	1 1	Tes No
(other tha	n section 501(c)(3) organ	uzations) or in sectio	on 527, relating	to political organizations	?			
a Transfers	from the reporting found	ation to a noncharita	ble exempt org	ganization of:				j
(1) Cash	1						1a(1)	X
(2) Other	r assets						1a(2)	X X
b Other tran	isactions.							
(1) Sales	s of assets to a noncharita	ible exempt organizat	tion				16(1)	X
	hases of assets from a no	_					1b(2)	X X
	al of facilities, equipment,	· · · · · · · · · · · · · · · · · · ·	-				1b(3)	Х
	bursement arrangements						1b(4)	X
	s or loan guarantees						1b(5)	X
	rmance of services or me	embership or fundrai	sına solıcıtatıo	ns			16(6)	X
	f facilities, equipment, ma						1c	X
	wer to any of the above is	=		· ·	always show the fair	market value of the good		
	s given by the reporting f		-	• •				010,
	i) the value of the goods,			ou 1900 than tan market ve	noo in any nanoaono	in or onaring arrangemen	,	
Line no	(b) Amount involved			exempt organization	(d) Description	n of transfers, transactions,	and sharing arr	angements
,		RHODE ISL				ATEMENT 12		
.c		A.A.O.N.M		KTMEKD	DEE OIL	AIBMBHI IZ		
	1/1,003.	A.A.O.N.M	1.5.					
								
		 				 		
								
		ļ			 			
								
	. 	 						
		<u> </u>						
2a Is the fou	ndation directly or indirec	tly affiliated with, or	related to, one	or more tax-exempt orga	nizations described			
	501(c) (other than section	-					X Yes	□ No
	omplete the following sch		,01,01, 0Z1					
<u></u>	(a) Name of org			(b) Type of organization		(c) Description of relati	onship	
HODE	SLAND SHRIN			.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		TEMENT 13		
.A.O.N				501(C)10	- DZZ DZM			
A.U.I	N.11.13.			201/0/10	+			
				 	 			
				 				
Tue c	r penalties of perjury, I declare	that I have commend to	n return re-lui-	a accompanying achadular a	od statements, and to the	a hast of my knowledge		
طامما أ	r penalties of perjury, i declare relief, it is true, correct, and cor	mplete Declaration of pr	eparer (other that	n taxpayer) is based on all info	rmation of which prepare	er has any knowledge	May the IRS return with th	
Sign ***********************************	1200	Ch		18/10/18	N		shown below	/? See instr
	Wyben	M	<u> </u>		TRUST	EE	LXJ Yes	s ∟l No
Sig	nature of officer or trustee		,	Date	Title	1 100-11 1 100		
	Print/Type preparer's na		Preparer's s	ignature	Date	Check if P7	IN	
	GREGORY PC	•				self- employed		
Paid		<u>IST</u>		Y PORCARO,	07/10/18		<u> 200633</u>	
Preparer	Firm's name ► OTR	ANDO, POP	CARO &	ASSOCIATES	, LTD.	Firm's EIN ► 05-	-04055	576
Use Only								
	Firm's address ► 22	58 POST F	ROAD			1		
		RWICK, RI				Phone no. (401	L)739-	9250
								0-PF (2017
								•

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

Department of the Treasury Internal Revenue Service

Schedule of Contributors

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

OMB No 1545-0047

2017

Name of the organization

Employer identification number

	SHRINERS OF RHODE ISLAND CHARITIES TRUST	22-3191072
Organization type (chec	k one).	
Filers of:	Section:	
Form 990 or 990-EZ	501(c)() (enter number) organization	
	4947(a)(1) nonexempt charitable trust not treated as a private foundation	
	527 political organization	
Form 990-PF	X 501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a private foundation	
	501(c)(3) taxable private foundation	
	on is covered by the General Rule or a Special Rule. (c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Ru	ile See instructions
General Rule		
	tion filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling any one contributor. Complete Parts I and II. See instructions for determining a contributor	
Special Rules		
sections 509(a)(any one contrib	tion described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support (1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, outor, during the year, total contributions of the greater of (1) \$5,000, or (2) 2% of the amount EZ, line 1 Complete Parts I and II	or 16b, and that received from
year, total contr	ation described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from ributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or education of cruelty to children or animals. Complete Parts I, II, and III	
year, contribution is checked, ento purpose Don't	tion described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from ons exclusively for religious, charitable, etc., purposes, but no such contributions totaled mer here the total contributions that were received during the year for an exclusively religious complete any of the parts unless the General Rule applies to this organization because it able, etc., contributions totaling \$5,000 or more during the year	ore than \$1,000 If this box s, charitable, etc,
but it must answer "No" certify that it doesn't me	on that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Forn Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Feet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).	orm 990-PF, Part I, line 2, to
LHA For Paperwork Re	eduction 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

SHRINERS OF RHODE ISLAND CHARITIES TRUST

22-3191072

Part I	Contributors (see instructions) Use duplicate copies of Part I if addit	tional space is needed	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	ABBEY FRANCIS LAWTON ONE CITIZENS PLAZA PROVIDENCE, RI 02903	\$\$.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	HENRY STONE & AF PRESTON 225 FRANKLIN STREET BOSTON, MA 02110	\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3	PAULINE PATT 225 FRANKLIN STREET BOSTON, MA 02110		Person X Payroll
(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
		\$	Person Payroll Noncash Complete Part II for noncash contributions)

Employer identification number

SHRINERS OF RHODE ISLAND CHARITIES TRUST

22-3191072

art II Nonc	ash Property (see instructions) Use duplicate copies of F	Part 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. om art I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. om art I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. rom art I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		*	
(a) No. rom art I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		*	
(a) No. rom eart I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		s	

Name of orga	anization		Employer identification number				
CHRINE	ERS OF RHODE ISLAND CHAR	וחדשם הסוומה	22-3191072				
Part III	Exclusively religious, charitable, etc., contribute year from any one contributor. Complete coll. completing Part III, enter the total of exclusively religious, completing Part III, enter the total of exclusively religious, completing Part III, enter the total of exclusively religious.	utions to organizations described imns (a) through (e) and the follo haritable, etc., contributions of \$1,000 o	I in section 501(c)(7), (8), or (10) that total more than \$1,000 for				
(a) No.	Use duplicate copies of Part III if additional s	space is needed					
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held				
		(e) Transfer of gif	ft				
		.,					
-	Transferee's name, address, and	ZIP + 4	Relationship of transferor to transferee				
(5) \$1-	· · · · · · · · · · · · · · · · · · ·						
(a) No. from	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held				
Part I							
-		(a) Transfer of air					
	(e) Transfer of gift						
	Transferee's name, address, and	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	(a) turpos of g.i.t	(0) 000 0. g	(c, zee a past e met gitte a past e met				
_							
		(e) Transfer of git	ft .				
1	Transferee's name, address, and	ZIP + 4	Relationship of transferor to transferee				
(a) No. from	(h) Dumana of sife	(c) Use of gift	(d) Description of how gift is held				
Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of now girt is need				
-		(e) Transfer of git	ft				
	Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee						
-	ir districe a maille, address, and						
			Sehadula P /Form 000, 000 E7, or 000 PE\/0017				

FORM 990-PF 1	DIVIDENDS	AND INTER	EST FROM SECUR	ITIES ST	TATEMENT 1	
SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDEND	REVENUE	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	
NOTE RECEIVABLE UBS FINANCIAL	41,034.		0. 41,034.	41,034.		
	,063,441.		0. 1,063,441.	1,063,441.		
TO PART I, LINE 4 1	,104,475.		0. 1,104,475.	1,104,475.		
FORM 990-PF		LEGAL	FEES	Si	PATEMENT 2	
DESCRIPTION		(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
LEGAL TO FM 990-PF, PG 1, LN 16A		11,571.	0.		10,414.	
		11,571. 0.			10,414.	
	=			 		
FORM 990-PF		ACCOUNTI	NG FEES	Si	PATEMENT 3	
FORM 990-PF DESCRIPTION		ACCOUNTI (A) EXPENSES PER BOOKS	NG FEES (B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
		(A) EXPENSES	(B) NET INVEST-	(C) ADJUSTED	(D) CHARITABLE	
DESCRIPTION		(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED	(D) CHARITABLE PURPOSES	
DESCRIPTION ACCOUNTING		(A) EXPENSES PER BOOKS 16,000.	(B) NET INVEST- MENT INCOME 0.	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES 14,400.	
DESCRIPTION ACCOUNTING TO FORM 990-PF, PG 1,	LN 16B	(A) EXPENSES PER BOOKS 16,000.	(B) NET INVEST- MENT INCOME 0.	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES 14,400.	
DESCRIPTION ACCOUNTING TO FORM 990-PF, PG 1, FORM 990-PF	LN 16B	(A) EXPENSES PER BOOKS 16,000. 16,000. TAX (A) EXPENSES	(B) NET INVEST- MENT INCOME 0. 0. (B) NET INVEST-	(C) ADJUSTED NET INCOME ST (C) ADJUSTED	(D) CHARITABLE PURPOSES 14,400. 14,400. TATEMENT 4 (D) CHARITABLE	

FORM 990-PF	OTHER E	XPENSES		STATEMENT 5
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME		
MANAGEMENT FEES MEETINGS OFFICE EXPENSES INVESTMENT FEES INSURANCE	171,885. 5,884. 11,237. 128,639. 3,278.	0 0 0 0	•	171,885. 5,884. 11,237. 128,639. 3,278.
TO FORM 990-PF, PG 1, LN 23	320,923.	0	•	320,923.
FORM 990-PF	CORPORAT	E STOCK		STATEMENT 6
DESCRIPTION		В	OOK VALUE	FAIR MARKET VALUE
-			13,982,163.	18,608,942.
TOTAL TO FORM 990-PF, PART I	I, LINE 10B		13,982,163.	18,608,942.
FORM 990-PF	CORPORAT	E BONDS		STATEMENT 7
DESCRIPTION		В	OOK VALUE	FAIR MARKET VALUE
			4,949,078.	5,928,979.
TOTAL TO FORM 990-PF, PART I	I, LINE 10C		4,949,078.	5,928,979.
FORM 990-PF	OTHER INV	ESTMENTS		STATEMENT 8
DESCRIPTION		LUATION ETHOD B	OOK VALUE	FAIR MARKET VALUE
		COST	3,778,122.	2,323,178.
TOTAL TO FORM 990-PF, PART I	I, LINE 13		3,778,122.	2,323,178.
				

FORM 990-PF DEPRECIATION OF ASS	ETS NOT HELD FOR	INVESTMENT	STATEMENT 9
	COST OR	ACCUMULATED	
DESCRIPTION	OTHER BASIS	DEPRECIATION	BOOK VALUE
VARIOUS OFFICE EQUIPMENT	4,332.	4,332.	0.
IBM WHEELWRITER 1000	525.	525.	0.
OKIDATA DOT MATRIX	779.	779.	0.
IBM WHEELWRITER 3000	870.	870.	0.
VARIOUS COMPUTERS	19,037.	19,037.	0.
LAND	45,300.	0.	45,300.
LAPTOP	1,750.	1,750.	0.
SOFTWARE	1,100.	1,100.	0.
VARIOUS COMPUTER EQUIPMENT	1,252.	1,252.	0.
LAPTOP COMPUTER FOR RECORDER	1,450.	1,450.	0.
NEW COMPUTER	680.	680.	0.
LAND	5,000.	0.	5,000.
2010 CHRYSLER VAN	27,067.	27,067.	0.
2010 CHRISDER VAN 2013 CHRYSLER T&C	27,007.	21,001.	•
2C4RC1BGHDR614124	35,981.	35,981.	0.
2013 CHRYSLER T&C	33,301.	33,301.	0.
2C4RC1BG2DR632573	31,889.	31,889.	0.
	740.	740.	0.
COMPUTER AND PRINTER	740.	740.	· · · · · · · · · · · · · · · · · · ·
TOTAL TO FM 990-PF, PART II, LN 1	4 177,752.	127,452.	50,300.
FORM 990-PF	OTHER ASSETS		STATEMENT 10
FORM 990-PF	OTHER ASSETS		
	BEGINNING OF	END OF YEAR	FAIR MARKET
DESCRIPTION	YR BOOK VALUE	BOOK VALUE	VALUE
INVESTMENT-ANNUITY RHODES ON THE PAWTUXET ASSIGNED	100,000.	100,000.	241,382.
NOTE REC	1,367,803.	1,270,803.	1,270,803.
TO FORM 990-PF, PART II, LINE 15	1,467,803.	1,370,803.	1,512,185.

FORM 990-PF GRANT APPLICATION SUBMISSION INFORMATION STATEMENT 11 PART XV, LINES 2A THROUGH 2D

NAME AND ADDRESS OF PERSON TO WHOM APPLICATIONS SHOULD BE SUBMITTED

A SHEFFIELD REYNOLDS TREASURER C/O PALESTINE TEMPLE CHARITIES TRUST ONE RHODES PLACE CRANSTON, RI 02905

TELEPHONE NUMBER NAME OF GRANT PROGRAM

401 467 7100 NONE

FORM AND CONTENT OF APPLICATIONS

A WRITTEN REQUEST FROM THE INDIVIDUAL OR ORG. TO THE BOARD WITH MED INFO

ANY SUBMISSION DEADLINES

NONE

RESTRICTIONS AND LIMITATIONS ON AWARDS

CHARITABLE RELIEF IS GRANTED UPON BOARD APPROVAL OF REQUEST

990-PF

INVOLVEMENT WITH NONCHARITABLE ORGANIZATIONS STATEMENT 12 PART XVII, LINE 1, COLUMN (D)

NAME OF NONCHARITABLE EXEMPT ORGANIZATION

RHODE ISLAND SHRINERS A.A.O.N.M.S.

DESCRIPTION OF TRANSFERS, TRANSACTIONS, AND SHARING ARRANGEMENTS

MANAGEMENT FEES/ SHARING OF ASSETS

990-PF

AFFILIATION WITH TAX-EXEMPT ORGANIZATIONS PART XVII, LINE 2, COLUMN (C)

STATEMENT 13

NAME OF AFFILIATED OR RELATED ORGANIZATION

RHODE ISLAND SHRINERS A.A.O.N.M.S.

DESCRIPTION OF RELATIONSHIP WITH AFFILIATED OR RELATED ORGANIZATION

COMMON DIRECTORS