Department of the Treasury

# 2949114619218

## **Return of Private Foundation**

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

OMB No 1545-0052

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.

201

Open to Public Inspection Internal Revenue Service For calendar year 2017 or tax year beginning and ending A Employer identification number Name of foundation BENNERS A FBO ZOOLOGIC SOC 4947 TR U Number and street (or P O box number if mail is not delivered to street address) Room/suite 23-6427062 B Telephone number (see instructions) Wells Fargo Bank N A Trust Tax Dept - 6325 S RAINBOW BLVD STE 300 City or town, state or province, country, and ZIP or foreign postal code LAS VEGAS 89118 888-730-4933 Foreign country name Foreign postal code Foreign province/state/county C If exemption application is pending, check here G Check all that apply 🔲 Initial return D 1. Foreign organizations, check here Initial return of a former public charity Final return Amended return 2. Foreign organizations meeting the 85% test, X Address change check here and attach computation □ Name change Check type of organization Section 501(c)(3) exempt private foundation E If private foundation status was terminated under section 507(b)(1)(A), check here Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation

<u> </u>	F_n_m 990-PF (2017)	_RENNERS A FRO ZOOLOGIC	SOC 4947 TR II	 <u> </u>	Parama ?
	F=4 .				
i					
- —					!
-					
)ı					
<u>.</u>		ii I			
ı					
I					
<del></del>					
<b>I</b> ,					
•.					

Form 990-PF (2017)

BENNERS A FBO ZOOLOGIC SOC 4947 TR U

23-6427062

Page 3

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 )

(b) How acquired P—Purchase D—Donation

(c) Date acquired (mo , day, yr )

(d) Date sold (mo , day, yr )

Page 4

Part \	Excise Tax Based on Investment Income (Section 4940(a), 494	0(b), 4	<del>1940(e), or 4948—see</del>	instruct	tions)		
1a	Exempt operating foundations described in section 4940(d)(2), check here   a a	and en	ter "N/A" on line 1				
	Date of ruling or determination letter (attach copy of letter if nec	essary	-see instructions)				
b	Domestic foundations that meet the section 4940(e) requirements in Par	t V, ch	neck	1		287	
	here ▶ 🔯 and enter 1% of Part I, line 27b			1 1		ļ	
С	All other domestic foundations enter 2% of line 27b Exempt foreign orga	anızatı	ons, enter 4% of				
	Part I, line 12, col (b)			1 1			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundation	ns only	, others, enter -0-)	2		9	
3	Add lines 1 and 2			3		287	
	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundation			4			
5	Tax based on investment income. Subtract line 4 from line 3 If zero o	r less,	enter -0-	5		287	
6	Credits/Payments	1 .	11	1 1			i i
_	2017 estimated tax payments and 2016 overpayment credited to 2017	6a	136	4 [			
b	Exempt foreign organizations—tax withheld at source	6b	<del>  -</del>	-			1
C	Tax paid with application for extension of time to file (Form 8868)	6c	<del> </del>	-			,
_d	Backup withholding erroneously withheld	6d	<u> </u>	-  <u>-</u> - -		426	
7	Total credits and payments Add lines 6a through 6d			7		136	
8	Enter any penalty for underpayment of estimated tax. Check here		2220 is attached	8		151	
9 10	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount of		mt avannaid	9 10		151 0	
11	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the Enter the amount of line 10 to be Credited to 2018 estimated tax	amou	Refunded >	111		0	
Part			itelaliaca P	<del>ــــــــــــــــــــــــــــــــــــ</del>			
	During the tax year, did the foundation attempt to influence any national,	state	or local legislation or o	did it		Yes	No
••	participate or intervene in any political campaign?	Sidio	, or local logiciation or	3.G 10	1a	1.00	X
b	Did it spend more than \$100 during the year (either directly or indirectly)	for po	olitical purposes? See t	he	1		
-	instructions for the definition	. С. р			1b		Х
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the ac	tivities	and copies of any mat	terials			
	published or distributed by the foundation in connection with the activitie				<u> </u>	l !	
С	Did the foundation file Form 1120-POL for this year?				1c		_X_
d	Enter the amount (if any) of tax on political expenditures (section 4955) i	mpose	ed during the year				
	(1) On the foundation $\blacktriangleright$ \$ (2) On foundation ma	anagei	rs ▶\$				
е	Enter the reimbursement (if any) paid by the foundation during the year	for pol	itical expenditure tax in	nposed		Ì	
	on foundation managers    \$				_		
2	Has the foundation engaged in any activities that have not previously be If "Yes," attach a detailed description of the activities	en rep	oorted to the IRS?		2	-	X
3	Has the foundation made any changes, not previously reported to the IRS, in its	novern	ing instrument, articles				
•	of incorporation, or bylaws, or other similar instruments? If "Yes," attach a confor	-	<del>-</del>		3		X
4a	Did the foundation have unrelated business gross income of \$1,000 or n				4a		X
b	If "Yes," has it filed a tax return on <b>Form 990-T</b> for this year?		armig and your		4b	N/A	
5	Was there a liquidation, termination, dissolution, or substantial contraction	on dur	ing the year?		5		X
	If "Yes," attach the statement required by General Instruction T		, , , , , , , , , , , , , , , , , , , ,				
6	Are the requirements of section 508(e) (relating to sections 4941 through	h 4945	5) satisfied either		- (	ļ	
	By language in the governing instrument, or		•		ļ		1
	By state legislation that effectively amends the governing instrument s	o that	no mandatory direction	ns that			1
	conflict with the state law remain in the governing instrument?		•		6	_ X_	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," of	complet	e Part II, col (c), and Part X	V	7	Х	
8a	Enter the states to which the foundation reports or with which it is registed	ered S	See instructions			i	
	PA						,
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Fo			Seneral			-
	(or designate) of each state as required by $\it  General  Instruction   G^{2}   If  "N$				8b	X	
9	Is the foundation claiming status as a private operating foundation within						
	or 4942(j)(5) for calendar year 2017 or the tax year beginning in 2017?	See th	e instructions for Part)	(IV If		]	
	"Yes," complete Part XIV				9	<u> </u>	<u>X</u>
10	Did any persons become substantial contributors during the tax year? If	"Yes,	' attach a schedule listi	ng their	1	1	
	names and addresses				10		<u> </u>
			<del></del>	_	Form 99	0-PF	(2017)

Form 990-PF (2017)

Par	VII-A Statements Regarding Activities (continued)				
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule. See instructions	n the	11	Yes	No X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a dis	squalified			
	person had advisory privileges? If "Yes," attach statement. See instructions	•	12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption appli	ication?	13	Х	
	Website address ► N/A				
14		no ► 888-730-	4933		
		P+4 ► <u>89118</u>	<del>-</del>		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of <b>Form 1041</b> —check and enter the amount of tax-exempt interest received or accrued during the year	▶ 15 N/A			<b>▶</b> ∐
16	At any time during calendar year 2017, did the foundation have an interest in or a signature or of	ther authority		Yes	No
	over a bank, securities, or other financial account in a foreign country?		16		X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter	the			i
Dar	name of the foreign country ►  VII-B Statements Regarding Activities for Which Form 4720 May Be Required		<u> </u>		
Ган				Yes	No
4.	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		-	163	140
1a	During the year, did the foundation (either directly or indirectly)	L			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	Yes X No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?	Yes X No	ŀ		
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	Yes X No			
		X Yes No	1		
	(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)?	Yes X No			
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after				:
	termination of government service, if terminating within 90 days)	Yes X No			
b	If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions describ				
	Regulations section 53 4941(d)-3 or in a current notice regarding disaster assistance? See instru Organizations relying on a current notice regarding disaster assistance, check here	uctions	1b		X
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted were not corrected before the first day of the tax year beginning in 2017?	acts, that	1c		
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was operating foundation defined in section 4942(j)(3) or 4942(j)(5))	s a private			
а	At the end of tax year 2017, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2017?	Yes X No			
	If "Yes," list the years  20, , 20,				
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section				
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section	4942(a)(2) to			
	all years listed, answer "No" and attach statement—see instructions )		2b	N/A	<u> </u>
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the y	ears here			
0-	<b>2</b> 0, 20, 20		1		
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?	Yes X No			
L			}		
b	If "Yes," did it have excess business holdings in 2017 as a result of (1) any purchase by the four disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approximately persons).				
	Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (		l		ĺ
	of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine	, ,			
	foundation had excess business holdings in 2017)	o a uio	3b	N/A	
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purpo	ises?	4a		Х
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize		<b>—</b>		<del>  ``</del>
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in		4b		×

Page 5

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

_	_	
<b>&gt;</b>		0
	F	orm <b>990-PF</b> (2017)

3 Five highest-paid independent contractors for professional services. See instructions. If none, enter "NON  (a) Name and address of each person paid more than \$50,000  (b) Type of service  (c)  NONE	NE." (c) Compensation
(a) Name and address of each person paid more than \$50,000 (b) Type of service (	
NONE	
Total number of others receiving over \$50,000 for professional services ▶	
Part IX-A Summary of Direct Charitable Activities	
List the foundation's four largest direct chantable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1 NONE	
2	
_ <del></del>	
3	
4	<del></del>
Part IX-B Summary of Program-Related Investments (see instructions)	
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1 NONE	
2	
All other program-related investments. See instructions	
3 NONE	
Total. Add lines 1 through 3	0

Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations,

Form 990-PF (2017)

Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation

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

23-6427062

Page 8

Part XIII Undistributed Income (see instructions)  1 Distributable	4947 TR U			
- Otable amount			23-64	27062
line 7	(a) Corpus	(b)		
2 Undistributed income, if any, as of the end of 2017  b Total fee		Years prior to 2016	(c) 2016	(d)
a Enter amount for 2016 only b Total for prior years 20		-	2016	2017
				28,20
3 Excess distributions carryover, if any, to 2017			2,810	
- 1011 2013			2,010	
c From 2014	- 1	1		-
d From 2015 e From 2016	1			
f Total of the	1		1	,
f Total of lines 3a through e	_			i
Qualifying distributions for 2017 from Part XII,	0	1		i
Applied to 2010	9		1	
b Applied to undistributed more than line 2a	1			
(Election require				
realed as distributed and clions)	T		2,810	j
required—see instructions)  d Applied to 2017		_		
" 'PPIIEG to 2017 '				į
e Remaining amount distributed out of corpus  Excess distributions carryover and				
I'll an amount				
amount must be at a solution (0) the com-				27,754
The life hat take the second (d)				
indicated halous of each column as	-			
COIDUS Add I			1	7
b Prior years' undistributed income Subtract line 5 line 4b from line 2b		1	1	ŧ
The 4D from line of			1	
c Enter the amount of prior years' undistributed	1			
peeli (SSI) ed o		0		1
lax has been not the section 4942(a)	1			-
Gubtract line 60 to	1	1	1	. ]
amount—see instructions  e Undistributed				~
				į
4a from line 2a Taxable amount—see				
Instructions  f Underters				ſ
f Undistributed income for 2017 Subtract lines 4d and 5 from line 1. This amount	1			
distributed in 2010			_[	
Amounts treated	1		0	
to satisfy requirements imposed by section				
1,0(D)(T)(F) or 40.40.				
required—see incl.	1			452
EXCESS dietrib	1	1		3 4
applied on line 5 or line 7 (see instructions)  Excess distributions carrocard		_	1	1
Excess distributions carryover to 2018.				1
Analysis of line o				
Excess from 2013	_			
Excess from 2014				
Excess from 2015				
Excess from 2010	1	1		1
Excess from 2017	1	1	1	1
	i	Ī	ſ	i

Form 9	90-PF (2017) BENNERS A FBO ZO	OLOGIC SOC 49	47 TR U		23-642	27062 Page <b>1</b> (
Part	XIV Private Operating Foundation	on <b>š</b> (see instruc	tions and Part VI	I-A, question 9)		N/A
1a	If the foundation has received a ruling of	or determination le	etter that it is a priv	ate operating		
	foundation, and the ruling is effective fo	or 2017, egter the	date of the ruling	•		
b	Check box to indicate whether the foundation			ribed in section	4942(j)(	(3) or 4942(j)(5)
	Enter the lesser of the adjusted net	Tax year	Ţ <del></del>	Prior 3 years		
	income from Part I or the minimum	(a) 2017	(b) 2016	(c) 2015	(d) 2014	(é) Total
	investment return from Part X for	(4) 2011	15/ 2010	(0) 2010	(4) 2014	<u> </u>
	each year listed		+	<del> </del>	<del> </del>	/
	85% of line 2a	<del></del>		ļ	//-	
С	Qualifying distributions from Part XII, line 4 for each year listed					
d	Amounts included in line 2c not used directly for active conduct of exempt activities					
е	Qualifying distributions made directly		1		J'	}
	for active conduct of exempt activities				ľ	}
	Subtract line 2d from line 2c		1			}
2			<del> </del>		<del> </del>	<del> </del>
3	Complete 3a, b, or c for the			\ \\ \\		ļ
	alternative test relied upon				{	l
а	"Assets" alternative test—enter				{	l
	(1) Value of all assets	 				<u> </u>
	(2) Value of assets qualifying under section 4942(j)(3)(B)(i)			·		
b	"Endowment" alternative test—enter 2/3		T - 1	<del> </del>		
	of minimum investment return shown in Part X, line 6 for each year listed	 				
С	"Support" alternative test—enter					ì
	(1) Total support other than gross			i		1
	investment income (interest,		<b> </b>	ł		j
	dividends, rents, payments on securities loans (section			}	`	
	512(a)(5)), or royalties)		1		}	
	(2) Support from general public		<del> </del>	<del> </del>		1
	and 5 or more exempt		[			
	organizations as provided in section 4942(j)(3)(B)(iii)					
	(3) Largest amount of support from		Į	Į.		
	an exempt organization		ļ	Į	ł	
	(4) Gross investment income			1		(
Part		(Complete thi	s part only if the	foundation ha	d \$5,000 or mor	re in assets at
	any time during the year—			o roundation na	u 40,000 or mo.	ic iii assow at
			3.)	<del></del>		
1	Information Regarding Foundation M					
а	List any managers of the foundation wh					ine foundation
	before the close of any tax year (but or	ily if they have co	ntributed more thai	n \$5,000) (See se	ction 507(d)(2))	
NON	<b>E</b>					
b	List any managers of the foundation wh					rtion of the
	ownership of a partnership or other ent	ity) of which the fo	oundation has a 10	)% or greater intere	est	
NON	<b>=</b>					
2	Information Regarding Contribution	Grant. Gift. Loa	n. Scholarship, et	c Programs:	<del></del>	
	Check here ► 🖾 if the foundation or				each bne anothesi	not accent
	unsolicited requests for funds. If the fou	indation makes o	ifts grants etc. to	individuals or orga	anizations under o	ther
	conditions, complete items 2a, b, c, and			marradalo or orge	211120110110 011001 0	(1101
				<del></del>		<del> </del>
а	The name, address, and telephone nur	nber or email add	lress of the person	to whom application	ons should be add	fressed
b	The form in which applications should l	oe submitted and	information and ma	aterials they should	d include	
-	approaries stibula					
С	Any submission deadlines	<del></del>	<del></del>		<del></del>	
	·					
d	Any restrictions or limitations on award	s, such as by geo	graphical areas, ch	naritable fields, kin	ds of institutions, o	or other
	factors					

Form 990-PF (2017)

Part XV Supplementary Information (contin	ued)			
3 Grants and Contributions Paid During	the Year or Approve	ed for Fut	ure Payment	
Recipient	If recipient is an individual,	Foundation		1
<del></del>	show any relationship to any foundation manager	status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		
a Paid during the year	<b>\</b>	ł	ļ	,
See Attached Statement		ļ		
	-			
	}	ļ		
		}		
			{	
	1	}		1
	1			
	†	}	1	1
			ĺ	1
	1			
	1	}		}
	İ	}		}
	Ì			
	Ì			
	1		į –	
			į	
			į	,
			ł	
		}	{	
	1		-	-
	}			
				•
		İ		
	1	1		}
	<u> </u>		1	1
	İ	ł		}
	<u> </u>	<u> </u>	<u> </u>	<u> </u>
Total			▶ 3.	a 28,800
b Approved for future payment NONE		1		
	1		)	
		l		
	1	Į		
		Į.		
		ł		
	1	{		1
		{	}	} `
	}		}	1
		}	}	}
		1	}	}
	}	1	}	}
	}	}	}	}
		1	1	}
Total	<del></del>	<u> </u>	▶ 3	h (
i VIAI			- 3	131 L

Pa	rt X	VI-A Analysis of Income-Producing Ac	tivities				
		oss amounts unless otherwise indicated		isiness income	Excluded by sect	ion 512, 513, or 514	, , , , , , , , , , , , , , , , , , ,
			(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	(e) Related or exempt function income (See instructions)
1		ogram service revenue			<u> </u>		(Occ mandenens)
	a	<del></del>			<del></del>	<del></del>	
	b	·	<del></del>	<del></del>	<del></del>	<del></del>	<b></b>
	c d				<del> </del>	<del></del>	
	e				-	<del></del>	
	f		<del> </del>		<del> </del>		
	g	Fees and contracts from government agencies	<del></del>		<del> </del>	<del></del>	
2	_	embership dues and assessments	<del></del>	<del> </del>	<del> </del>	<del></del>	ļ. <u>.                                   </u>
3		erest on savings and temporary cash investments			<del> </del>		
4		vidends and interest from securities			14	10,292	
5		t rental income or (loss) from real estate			1		
	а	Debt-financed property			1		
	b	Not debt-financed property			1		
6	Ne	t rental income or (loss) from personal property					
7	Oth	ner investment income					
8	Ga	n or (loss) from sales of assets other than inventory			18	26,494	
9	Ne	t income or (loss) from special events					
10		oss profit or (loss) from sales of inventory			<u> </u>		
11	Oth	ner revenue a	<u> </u>		<u> </u>		
	b		<u></u>		<del></del>		
	С		<b> </b>	ļ	<b>↓</b>	<b></b>	<b>}</b>
	d		<b></b>		<del> </del>	ļ	<b> </b>
40	e			<u> </u>	<del> </del>		ļ
		btotal Add columns (b), (d), and (e)	L	(c	1	36,786	
		tal. Add line 12, columns (b), (d), and (e)	\			13	36,786
		rksheet in line 13 instructions to verify calculation  VI-B Relationship of Activities to the A		ent of Everent	Durnaga		
	ie No						
	▼	<ul> <li>Explain below how each activity for which incon accomplishment of the foundation's exempt pur</li> </ul>	ne is reported in c poses (other thar	olumn (e) of Part by providing fund	XVI-A contributed Is for such purpo:	ses) (See instruct	ons)
		Not Applicable					<del></del>
		Not Applicable					
			<del> </del>				
			·				
						<del> </del>	
			· · · · · · · · · · · · · · · · · · ·				
				· · · · · · · · · · · · · · · · · · ·			
			<u></u>		<del></del> _		
		<del></del>					
		<del></del>			<del></del>		<del> </del>
		<del></del>					
		<del></del>					
		<del></del>					
		+	<del></del>				
		<del></del>	<del></del>	<del></del>	· · · · · · · · · · · · · · · · · · ·		
		<del> </del>				<del></del>	
		<del> </del>	<del></del>				

Part	XVII	Information Exempt Org		fers to and Transa	ctions and R	elationship	s With Nonchari	table		<del></del>
1		he organization d	rectly or indirectly e	ngage in any of the fo					Yes	No
	_	nizations?							į.	
а			orting foundation to	a noncharitable exem	pt organization	of				
	(1) (	Cash Other assets						1a(1)	├	X
b		er transactions						1a(2)		<del>  ^-</del> -
U			a noncharitable exe	mot organization				1b(1)		X
				ble exempt organizati	on			1b(2)		X
			equipment, or other		•			1b(3)		X
		Reimbursement ar						1b(4)		X
	(5) L	oans or loan guar	rantees					1b(5)		X
				ıp or fundraısıng solici				1b(6)	<u> </u>	X
C				ts, other assets, or pa				1c	<u> </u>	<u>_x</u> _
d				iplete the following sche iven by the reporting fou						
	value	e in any transaction	or sharing arrangeme	nt, show in column (d) t	ne value of the o	oods, other as	eu less than fair mai sets, or services recei	ved		
(a) Lin		(b) Amount involved	<del></del>	haritable exempt organization			fers, transactions, and sh		angeme	ents
			<u> </u>	· · · · · · · · · · · · · · · · · · ·		<del></del>				
	-+									
				<del></del>						
			<del> </del>	<del></del> -						
			<del></del>	<del></del>						
							····			
		- <del></del>								
				<del></del>						
			<del></del>							
2a b	desc	cribed in section 5	ctly or indirectly affilia 01(c) (other than see following schedule	ated with, or related to ction 501(c)(3)) or in s	, one or more t ection 527?	ax-exempt or	ganizations	] Yes	X N	lo
		(a) Name of organ		(b) Type of orga	anization		(c) Description of relati	onship		
		<del> </del>		<del></del>		<del> </del>				
		<del></del>		<del></del>		<del>}</del>				
				<del></del>		<del>}</del>				
			<del></del>			1				
				turn, including accompanying scho			knowledge and belief, it is true	;		
Sìgn	сопе	ect, and complete Declaration	on of preparer (other than taxpa	yer) is based on all information of	which preparer has any	knowledge		RS discuss		
Here		A.A.V s		4/17/2018		Fargo Bank I	With the pr	reparer sho ictions	wn belo X Yes	_
	Sig	nature of officer or trus		Date	Title				٠,٠٠٥	
Paid		Print/Type preparer's		Preparer's signature		Date	Check X if	PTIN		
Prepa	arer	JOSEPH J CAS				4/17/20		P0125	1603	
Use (			PricewaterhouseCo		45040 0555			08324	<u> </u>	
		Firm's address	OUU GRANT STREE	T, PITTSBURGH, PA	15219-2777			355-600 Form <b>99</b>		/2017
							· ·	-orm <b>33</b>	ט-רר	(2017)

State Zip Code

**Foundation Status** 

Foreign Country

Amount

City

Relationship

Purpose of grant/contribution

#### **Supplemental Information:**

<u>Part VIII: Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors.</u>

Wells Fargo Bank N.A 6325 S Rainbow Blvd STE 300 Las Vegas, NV 89118

The compensation reported in column (c) is calculated based on periodic market values and/or the applicable fee agreement. It is not determined solely on an hourly basis. Corporate Trustee services include, but are not limited to, administrative services such as fiduciary accounting, custody of assets, complying with tax filing requirements, complying with distribution provisions, and complying with federal and state laws applicable to private foundations, plus asset management services such as creating asset allocation strategies, investment reporting and reallocating and rebalancing of portfolios as necessary.

_
ntory
Inve
Than
Other Than Inve
Assets
ō
m Sale
s fro
Los
3aın
ĭ
990-PF) - G
66

(990-PF) - Gain/Le	oss from Sale	of Assets	(990-PF) - Gain/Loss from Sale of Assets Other Than Inventory										. 101	Not October
	Amount							lota/s	Gross		Cost or Other basis Expenses Depreciation and Adjustments	asis Expenses nd Adjustments		
Term CG Distributions	14,146						Cap	Capital Gains/Losses Other sales		178,170		151,676		26,494
	1 2 2			Check "X If Purchaser IS a	Acquisition	Date	Date Second	Gross Sales	Cost or	Valuation	Expense of Sale and Cost of Improvements	Depreciation	Adjustments	Net Gain or Loss
Description	-	in Parl IV	Furchaser	Business	Method		1/18/2017	5.758	5,700	Political			1	85
ENT SMALL CAP GRV	025083320	(×				7/24/2015	1/18/2017	1,532	1,559				0	-27
R CAPITAL APRCTION	1 1	×				+	7/25/2017	1,472	1,264					208
3 CAPITAL APRCTION		×			1	+	5725/2017	0 190	1,310 8,724					466
ENT SMALL CAP GRY	025083320	×				7/24/2015	7/25/2017	386	345	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			0	41
& COX INT! STOCK!		< ×				╀	7/25/2017	971	701				0	270
& COX INT'L STOCK	1	×					7/25/2017	527	330				0	197
& COX INTL STOCK	1					Н	10/23/2017	563	8				0	222
& COX INCOME FD C							4/20/2017	2,931	2,954					57-
& COX INCOME FD C		×					4/20/2017	280	5 250					72
VANCE GLOBAL MAC	277923728	\ \ \	V		<del> </del>	8/25/2016	10/23/2017	11.902	11,790				0	112
VANCE GLOBAL MAC		×					10/23/2017	412	410				٥	7
GAN MID CAP VALUE		×					7/25/2017	552	531					21
R CAPITAL APRCTION		×					1/18/2017	1,223	1,372					148
3 CAPITAL APRCTION	411511504	×		† 		. !	1/18/2017	69/	858					148
3 CAPITAL APRCTION		× ;			+		1/18/2017	797.0	2 75.1					16
SCAPITAL APRCTION	- 1	× ,					1/18/2017	2,101	1001					8
SAN HIGH YIELD FUN	4812C0803	××		T :		!_	1/18/2017	10,713	10,959				0	-246
AN HIGH VIELD FLIN	1	×			1		1/18/2017	755	765				0	-10
JAN HIGH VIELD FLIN		×				_	1/18/2017	3,621	3,597					54
3AN HIGH YIELD FUN		×					1/18/2017	386	369				0	17
LUE FUND-CLASS I #		×				ш	1/18/2017	1,206	1,167				0	39
PRICE INST FLOAT I		×					1/18/2017	3,114	3,160					9
PRICE INST FLOAT		×				8/25/2016	1/18/2017	1,768	1,750					91
PRICE INST FLOAT		×		:		+	1/18/2017	326	320					7.6.
J WILSHIRE INTERNA		×			+ !!!	37477011	7/25/2017	1000	2 248				0	454
R CAPITAL APRCTION		× ;				+	10/25/2017	3 162	2,040					554
CAPITAL APROTOR		< <b>&gt;</b>				+	1/18/2017	1,405	1 329				0	
CADITAL STRATT		\ \ \				6/20/2014	5/24/2017	8.287	7,660				0	
I I E EI IND CI ASS I #		<×				8/25/2016	1/18/2017	3,829	3,763				0	
LUE FUND-CLASS I #		×		:		6/20/2014	1/18/2017	2,617	2,501				0	
LUE FUND-CLASS I #1		×				6/20/2014	4/20/2017	451	420				0	
LUE FUND-CLASS I #		×		- 1		6/20/2014	7/25/2017	1,824						
LUE FUND-CLASS 1#		×				6/20/2014	10/23/2017	1,108						163
R FUND-INST #301		×			1	2/11/2013	10/23/2017	4,930						
R FUND-INST #301		×				8/25/2016	10/23/2017	5,442						
R FUND-INST #301		×				5/24/201/	102/82/01	7002						289
OBAL AL IERNATIVES		×,				6/20/2013	1/18/2017	314						4
JEHAND DEVELOPING		\ \ \				5/26/2011	4/20/2017	2.182					0	28
TEIMER DEVELOPING		×				5/26/2011	7/25/2017	2,931					0	318
HEIMER DEVELOPING		×				5/26/2011	10/23/2017	2,035						
HEIMER DEVELOPING		×				7/12/2013	10/23/2017	140						500
V P LNG/SHRT RES-IN		×				7/12/2013	10/23/2017	4,632						
A P LNG/SHRT RES-IN		×				5/24/2017	10/23/2017	4 345						
PR OVERSEAS STO	77956H435	×		- - +	†	4/24/2017	10/25/2017	9/0						
ODICE MICT CLOAT		\ <u>\</u>			+	-	1/18/2017	1,610					0	
N INTERNATIONAL FO		×				6/30/2010	4/20/2017	19,748	12					7,282
N INTERNATIONAL FO		×				┝	4/20/2017	1,022		7			0	
N MID CAP FUND-INS		×				H	7/25/2017	09						
N MID CAP FUND-INS		×				+	7/25/2017	1,469	1,520					10,
N MID CAP FUND-INS		×				+	7/25/2017	220					,	99
N MID CAP FUND-INS		×		-		1002770015	1/25/201/	216						-17
COCK GL L/S CREDIT-		× >				÷	1/18/2017	1,755						
SUISSE COMM REL		< ×				╁╌	1/18/2017	2,903						
SUISSE COMM RET	1	×				1/22/2016	1/18/2017	1,213	1,024			-	0 0	189
& COX INTL STOCK		×			-	6/30/2010	1/18/2017	1,019	-					
& COX INTL STOCK	- 1	×					4/20/2017	452						
NG CAPITAL STRATTO		×			T	Γ ο <u>ι 07/5</u> 2/ο	10/23/2017		7/4					

Part I, Line 16b (990-PF) - Accounting Fees

	899		) 0	899
				Disbursements
	Revenue and			for Charitable
	Expenses per	Net Investment	Adjusted Net	Purposes
Description	Books	Income	Income	(Cash Basis Only)
1 ACCOUNTING FEES	899			899

Part I, Line 18 (990-PF) - Taxes

		319	172		0 0
	Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
1	Foreign Tax Withheld	172	172		
2	PY Excise Tax Due	11			
3	Estimated Excise Payments	136			

k Value Book Value FMV of Year End of Year Of Year End of Year O 23,251 23,585 0 36,949 0 36,949 0 37,717 0 33,322 34,781 0 33,322 34,781 0 0 12,527 20,438 0 0 12,527 20,438 0 0 12,401 27,110 0 12,194 12,405 0 0 19,975 18,405 0 0 19,975 18,405 0 0 19,975 18,405 0 0 19,975 18,405 0 0 20,289 20,484 0 0 20,289 20,484 0 0 17,757 11,1829 0 17,360 18,463 0 17,360 18,463 0 17,360 18,463 0 17,360 18,463 0 18,405 0 0 26,662 35,855 0 0 17,360 18,463 0 0 28,284 30,497

Fie

- ) <del>-</del> 11

# Part III (990-PF) - Changes in Net Assets or Fund Balances

### Line 5 - Decreases not included in Part III, Line 2

1	ROUNDING	1	2
2	PY RETURN OF CAPITAL	2	256
_3	Total	3	258



Part VIII, Line 1 (990-PF) - Compensation of Officers, Directors, Trustees and Foundation Managers

Check "X"   Street   Check "X"   Street   City   State   Zp Code   Foreign Country   Title   Per Week   Compensation   Benefitis   Account   Acc			se	0
Check "X"         Street         Carry         Street         Avg Hrs         Responsation           f Business         X         6325 S RAINBOW BLVD STE 300         LAS VEGAS         NV         89118         Foreign Country         Title         Per Week         Compensation           X         6325 S RAINBOW BLVD STE 300         LAS VEGAS         NV         89118         8652		Accor	uedxg	
Check "X"         Street         City         State         Zip Code         Foreign Country         Title         Per Week         Compensation           X         6325 S RAINBOW BLVD STE 300         LAS VEGAS         NV         89118         NV         89118         TRUSTEE         SEE ATTAQ         8		Benefits		0
Check "X"         Street         City         State         Zip Code         Foreign Country         Title         Per V           f Business         X         6325 S RAINBOW BLVD STE 300         LAS VEGAS         NV         89118         TRUSTEE         SEE A	8 652	Compensation		8,652
Check "X"         Street         City         State         Zp Code         Foreign Co           f Business         X         6325 S RAINBOW BLVD STE 300         LAS VEGAS         NV         89118         Foreign Co	 SEE ATTAC	Per Week	Avg Hrs	
Check "X"         Street         City         State         Zp Code         Foreign Co           f Business         X         6325 S RAINBOW BLVD STE 300         LAS VEGAS         NV         89118         Foreign Co	TRUSTEE	Title		
Check "X"   Street   City   State   Zp   Xp   Xp   Xp   Xp   Xp   Xp   Xp		Foreign Country		
Check "X" Street 1f Business A 6325 S RAINBOW BLVD STE 300 LAS VEGA	 9118	Zip Code	   	
Check "X" Street 1f Business A 6325 S RAINBOW BLVD STE 300 LAS VEGA	 N.	State		
Check "X" if Business X 6325 S RAINBOW BLV	LAS VEGAS	Cuty		
Check "X" if Business X	 RAINBOW BLV	Street		
Name Dank NA Trust Tax D	×	if Business	Check "X"	
Wells Fargo	 Wells Fargo Bank N A Trust Tax D	Name		

Part VI, Line 6a (990-PF) - Estimated Tax Payments

		Date	Amount
1	Credit from prior year return		1 0
2	First quarter estimated tax payment	5/10/2017	2 136
3	Second quarter estimated tax payment		3
4	Third quarter estimated tax payment		4
5	Fourth quarter estimated tax payment		5
6	Other payments		60
_ 7	<u>Total</u>		7 136

Part XIII, Line 2a, Column C (990-PF) - Prior Year Undistrib  1 Distributable amounts for 2016 that remained undistributed at the beginning of	the 2017 tax year	1 2,810
3		3
4		4
6		6
7 8		7
9		9
1		
·		
A STATE OF THE STA		_
	•	
		]=
•		
· <u></u>		
- <del></del>		
<del></del>		