

Return of Private Foundation

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 ▶ 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. Department of the Treasury Internal Revenue Service

For	calend	dar year 2017 or tax year beginning , a	and ending	_		_ <del></del>	
	me of fou				A Emplo	yer identification number	
		IE FAMILY CHARITABLE TRUST 1				477.00.40	
_		AEL N. NEWMARK, CO-TRUSTEE	_ <del></del>			-1776840	
		d street (or PO box number if mail is not delivered to street address)  NORTH BROADWAY, SUITE 3600	Ro	om/suite		none number (see instructions 4-259-2000	5)
		n, state or province, country, and ZIP or foreign postal code			31.	2 239 2000	
		LOUIS MO 63102			C if exer	nption application is pending,	check here
G	Check	all that apply   Initial return   Initial return	rn of a former public ch	narity	D 1. Fo	reign organizations, check he	re 🕨 📗
		Final return Amended	return		2 Fo	reign organizations meeting t	he
		Address change Name cha	inge			% test, check here and attach	
Н	Check	type of organization X Section 501(c)(3) exempt private	foundation	าน	E If priva	ate foundation status was tern	nnated under
$\ddot{\Box}$			le private foundation			n 507(b)(1)(A), check here	<b>▶</b> □
l F		rket value of all assets at J Accounting method	X Cash Acc	rual	F If the f	oundation is in a 60-month te	rmination
e	nd of y	rear (from Part II, col (c), Other (specify)			under	section 507(b)(1)(B), check h	ere 🕨 📙
	ne 16)	100 001	be on cash basis )				
P	art i	Analysis of Revenue and Expenses (The total of	(a) Revenue and	(b) Net inv	estment	(a) Adverted not	(d) Disbursements for charitable
		amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions))	expenses per books	(b) Net inv	-	(c) Adjusted net income	purposes
_	1 4			_		,	(cash basis only)
	1 1	Contributions, gifts, grants, etc., received (attach schedule)					
	2	Check X if the foundation is not required to attach Sch B	16		16		
	3 4	Interest on savings and temporary cash investments  Dividends and interest from securities	1,644	-	1,644		
9	1 _	Gross rents	1,044		1,011		
>	5a b	Net rental income or (loss)				<del></del>	
nue	6a	Net gain or (loss) from sale of assets not on line 10	-345			,	
투행	b	Gross sales price for all assets on line 6a 23, 980					
Carelle Revenue	7	Capital gain net income (from Part IV, line 2)			0		
¬ —	8	Net short-term capital gain				0	
3	9	Income modifications					
9	10a	Gross sales less returns and allowances					
73	ь	Less Cost of goods sold					
၁ ၁	C	Gross profit or (loss) (attach schedule)					
) (1)	11	Other income (attach schedule)					
	12	Total. Add lines 1 through 11	1,315		1,660	0	
S	13	Compensation of officers, directors, trustees, etc	0				
enses	14	Other employee salaries and wages					
en	15	Pension plans, employee benefits					
Х	16a	Legal fees (attach schedule)					
and Administrative Ex	b	Accounting fees (attach schedule) Stmt 1	825				825
Ę	С	Other professional fees (attach schedule)					
tra	17	Interest DECEIVED					<u> </u>
nis	18	Taxes (attach schedule) (see instruellers   VED					
Ē	19	Depreciation (attach schedule) and depletion		_ <del>-</del>			
Ad	20	Occupancy   NOV 1 4 2018   3					<del></del>
ַק	21						
a	22	Printing and publications OGDEN, UT					
Operating	23	Other expenses (att scn )			_		
ati	24	Total operating and administrative expenses.	905			^	025
Jer	25	Add lines 13 through 23	825 12,650		0	0	825 12,650
Ö	25	Contributions, gifts, grants paid	13,475	<u></u>	0	0	13,475
	26 27	Total expenses and disbursements. Add lines 24 and 25 Subtract line 26 from line 12	13,4/3			<u> </u>	13,4/3
	}	Excess of revenue over expenses and disbursements	-12,160				
	a b	Net investment income (if negative, enter -0-)	12,100		1,660		
	6	Adjusted net income (if negative, enter -0-)				0	

F	or <u>m 99</u> (	O-PF (2017) MASSIE FAMILY CHARITABLE TRUST	1	26-1776840	)	Page
	Marak F	Ralance Shoots Attached schedules and amounts in the description column		Beginning of year	End	of year
	Part I	Altached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)		(a) Book Value	(b) Book Value	(c) Fair Market Value
_	1	-Cash - non-interest-bearing		4,277	3,28	6 3,28
	2	Savings and temporary cash investments				
	3	Accounts receivable ▶				
	ł	Less' allowance for doubtful accounts		Ì		{
	4	Pledges receivable ▶				
		Less allowance for doubtful accounts			•	İ
	5	Grants receivable				
	6	Receivables due from officers, directors, trustees, and other				
		disqualified persons (attach schedule) (see				
		instructions)				
	7	Other notes and loans receivable (att schedule)				
		Less allowance for doubtful accounts ▶	0			
Ś	8	Inventories for sale or use				<del></del>
ssets	9	Prepaid expenses and deferred charges				<del></del>
ğ	10a	Investments – U.S. and state government obligations (attach schedule)		··	·· <del>·</del>	<del></del>
`	b	Investments – corporate stock (attach schedule)  See Stmt 2		71,561	60,39	2 104,91
	c	Investments – corporate bonds (attach schedule)		72/00-		
	11	Investments – land, buildings, and equipment basis				
	''	Less accumulated depreciation (attach sch.)				
	12	Investments – mortgage loans				
	13	Investments – other (attach schedule)			<del>.</del>	-
	14	Land, buildings, and equipment basis				
	'-	Less accumulated depreciation (attach sch.)			•	
	15	Other assets (describe	,			
	16	Total assets (to be completed by all filers – see the	)		<del></del>	<del></del>
	''	instructions Also, see page 1, item I)		75,838	63,67	108,20
_	17	Accounts payable and accrued expenses		75,035	03,07	100,20
	18	Grants payable		<del></del>	·	┪
Š	19	Deferred revenue			<del></del>	
<u>labilities</u>	20 -	Loans from officers, directors, trustees, and other disqualified persons		<del></del>		
ā	21	Mortgages and other notes payable (attach schedule)		<del></del>	<del></del>	-{
ű	22	Other liabilities (describe	,	<del></del>		-{
	l	Total liabilities (add lines 17 through 22)	)	o	<del></del>	o
┥	_23	Foundations that follow SFAS 117, check here	X		<del></del>	4
S		and complete lines 24 through 26 and lines 30 and 31.	A			
S	24	Unrestricted		75,838	_63,67	
an	25			75,838	03,07	4
Ба	26	Temporarily restricted Permanently restricted				┪ `
힏	20	•	<u></u>	<del></del>		
Net Assets or Fund Balances		Foundations that do not follow SFAS 117, check here and complete lines 27 through 31.				
ō	27	Capital stock, trust principal, or current funds				
	28	Paid-in or capital surplus, or land, bldg, and equipment fund				7
155	29	Retained earnings, accumulated income, endowment, or other funds				7
ایز	30	Total net assets or fund balances (see instructions)		75,838	63,67	8
ž١	31	Total liabilities and net assets/fund balances (see				7
		instructions)		75,838	63,67	8
	Part I	<del></del>	 }		<u> </u>	
		net assets or fund balances at beginning of year - Part II, column (a), line 30		st agree with		
		of-year figure reported on prior year's return)			1	75,83
2		amount from Part I, line 27a			2	-12,16
		Increases not included in line 2 (itemize) ▶			3	T
		• •				

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6

63,678

63,678

4 Add lines 1, 2, and 3

5 Decreases not included in line 2 (itemize) ▶

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

Part IV Capital Gains a	nd Losses for Tax on Investme	ent Income				
	the kind(s) of property sold (for example, real estate, arehouse, or common stock, 200 shs MLC Co )	-	(b) How acquired P - Purchase D - Donation	(c) Date ac (mo , day		(d) Date sold (mo , day, yr )
1a JOHNSON CTLS IN	ITL PLC		P	09/06	/16	06/26/17
b PENTAIR PLC			P	05/08	/13	05/02/17
С						
ď'						
e						
(e) Gross sales price	(f) Depreciation allowed (or allowable)	,,,,	r other basis ense of sale		(h) Gain ((e) plus (f	or (loss) ) minus (g))
a 12,923			14,301		_	-1,378
ь 11,057			10,024			1,033
С						
d						
e	<u> </u>	·				· · ·
Complete only for assets showin	g gain in column (h) and owned by the fo	oundation on 12/31/	69	(1) (	Gains (Col	(h) gain minus
(ı) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69		ss of col (i)			less than -0-) or om col (h))
a						-1,378
b						1,033
c						
d						
e						
2 Capital gain net income or (net c	apital loss)  If gain, also enter in If (loss), enter -0- in	<b>.</b>	,	2		-345
3 Net short-term capital gain or (los	ss) as defined in sections 1222(5) and (6	_	ļ			
If gain, also enter in Part I, line 8 Part I, line 8	, column (c) See instructions If (loss), e	nter -0- ın		3		
	nder Section 4940(e) for Reduc	ed Tax on Net	Investment Inco			
	foundations subject to the section 4940		· — — — —			
,	·	(a) tak on not moo	inone incomo ,			
If section 4940(d)(2) applies, leave the	nis part blank					
Was the foundation liable for the sec	tion 4942 tax on the distributable amoun	t of any year in the l	base period?			Yes X No
If "Yes," the foundation does not qua	lify under section 4940(e) Do not comple	ete this part				
1 Enter the appropriate amount in	each column for each year, see the instr	uctions before maki	ng any entries			
(a)	(b)		(c)			(d)
Base period years Calendar year (or tax year beginning in	A distribution of the contract	Net value	e of noncharitable-use assets	s		ribution ratio livided by col. (c))
2016	20	,125	86,0	089		0.233770
2015	30	,132	122,9	983		0.245009
2014	33	,000	153,5	579		0.214873
2013	23	,300	161,2	236		0.144509
2012	68	,000	160,5	577		0.423473
						_
2 Total of line 1, column (d)				2		1.261634
3 Average distribution ratio for the	5-year base period – divide the total on I	ne 2 by 5.0, or by tl	he			
number of years the foundation h	nas been in existence if less than 5 years	•		3		0.252327
4 Enter the net value of noncharita	ble-use assets for 2017 from Part X, line	5		4		101,916
5 Multiply line 4 by line 3				5		25,716
6 Enter 1% of net investment incor	ne (1% of Part I, line 27b)			6		17
7 Add lines 5 and 6				7		25,733
8 Enter qualifying distributions from				8		13,475
	n line 7, check the box in Part VI, line 1b	, and complete that	part using a 1% tax ra	ate See the	<b>:</b>	
Part VI instructions						

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Pa	rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 – see instructions)				
1a	Exempt operating foundations described in section 4940(d)(2), check here ▶ ☐ 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				<u>33</u>
	here ▶ and enter 1% of Part I, line 27b				
С	All other domestic foundations enter 2% of line 27b Exempt foreign organizations, enter 4% of				
	Part I, line 12, col (b)				
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-)				0
3	Add lines 1 and 2				33
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-)				_ 0
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-				33
6	Credits/Payments				
а	2017 estimated tax payments and 2016 overpayment credited to 2017				
b	Exempt foreign organizations – tax withheld at source 6b				
С	Tax paid with application for extension of time to file (Form 8868)				
d	Backup withholding erroneously withheld 6d				
7	Total credits and payments Add lines 6a through 6d	1			
8	Enter any penalty for underpayment of estimated tax. Check here				
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed				33
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				
Pa	rt VII-A Statements Regarding Activities				
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it			Yes	No
	participate or intervene in 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	ŀ	X
	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				
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) imposed during the year.				
	(1) On the foundation ▶ \$ (2) On foundation managers. ▶ \$				
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed				
	on foundation managers > \$				
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?		2		X
	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		3	_	<u>X</u>
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?		4a		X
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		<u>X</u>
	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?		6	Х	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV		7	X	
8a	Enter the states to which the foundation reports or with which it is registered. See instructions <b>&gt; CA</b>	1			_
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General				
		N/A	86	İ	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or	•			
	4942(j)(5) for calendar year 2017 or the taxable year beginning in 2017? See instructions for Part XIV. If "Yes,"		[ ]	į	/
	complete Part XIV		9		x /
	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their				<u> </u>
	names and addresses		10	ļ	X
		F	orm 99	0-PF	

522,9	•					
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P	art VII-A 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>	X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified					
	person had advisory privileges? If "Yes," attach statement. See instructions			_12	L _	X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?			13	X	
	Website address ► N/A					
14	The books are in care of ▶ MICHAEL NEWMARK Telephone	no 🕨	314	-259-	-250	6
	211 NORTH BROADWAY, SUITE 3600					
	Located at ▶ ST. LOUIS MO ZIP	9+4 ▶	631	02		_
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 – check here					▶ [
	and enter the amount of tax-exempt interest received or accrued during the year	<b>▶</b>	15			
16	At any time during calendar year 2017, did the foundation have an interest in or a signature or other authority			<del></del>	Yes	No
	over a bank, securities, or other financial account in a foreign country?			16	<u> </u>	X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of					
	the foreign country >					
P	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.		,		Yes	No
1a			<u></u>	, i		
	3, 3, 1, 2, 2, 2, 2, 2, 2, 2, 2, 2, 2, 2, 2, 2,	Yes	X No	)		
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a					
		Yes	X No	i i		
		Yes	X No			
		Yes	X No	<b>)</b>		
	(5) Transfer any income or assets to a disqualified person (or make any of either available for		(TE)			
	. , , ,	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		₹			
ı.		Yes	X No	<b>'</b>		
b	If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in Regulations		N/I	A .	ĺ	1
	section 53 4941(d)-3 or in a current notice regarding disaster assistance? See instructions		11/1	A 1b	-	<del> </del>
	Organizations relying on a current notice regarding disaster assistance, check here			1 1	3	£

a At the end of tax year 2017, did the foundation have any undistributed income (lines 6d and X No Yes 6e, Part XIII) for tax year(s) beginning before 2017? If "Yes," list the years ▶ 20 , 20 , 20 b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to A/N2b all years listed, answer "No" and attach statement - see instructions ) If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here ▶ 20 , 20 , 20 , 20 3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? Yes X No 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

foundation had excess business holdings in 2017) 4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?

the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the

Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that

Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private

were not corrected before the first day of the tax year beginning in 2017?

operating foundation defined in section 4942(j)(3) or 4942(j)(5))

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?

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X

3b

4a

N/A

N/A

1c

Forn	n 990-PF (2017) MASSIE FAMILY	CHARITABLE TRUS	r 1 26-1	<u> 1776840                                     </u>		`	Page 6
P	art VII-B Statements Regarding	Activities for Which Form	n 4720 May Be F	Required (cont	inued)		
5a	During the year did the foundation pay or in	cur any amount to					
	(1) Carry on propaganda, or otherwise atte	mpt to influence legislation (section	on 4945(e))?	י 🔲 י	res 🗓 No		`
	(2) Influence the outcome of any specific p	ublic election (see section 4955),	or to carry on,	_			
	directly or indirectly, any voter registrati	on drive?			res 🗓 No		
	(3) Provide a grant to an individual for trave	el, study, or other similar purposes	۶۶	۱ 🗌	res 🗓 No		
	(4) Provide a grant to an organization other	than a charitable, etc , organizati	on described in				
	section 4945(d)(4)(A)? See instructions			\rightarrow \bar{\bar{\bar{\bar{\bar{\bar{\bar{\bar	res 🛛 No		
	(5) Provide for any purpose other than relig	nous, charitable, scientific, literary	, or educational				
	purposes, or for the prevention of cruell	y to children or animals?		_ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	res 🛚 X No		
b	If any answer is "Yes" to 5a(1)-(5), did any	of the transactions fail to qualify u	inder the exceptions of	lescribed in			
	Regulations section 53 4945 or in a current	notice regarding disaster assistar	nce? See instructions		N/A	5b	
	Organizations relying on a current notice re-	garding disaster assistance, chec	k here		▶ 🔲		
С	If the answer is "Yes" to question 5a(4), does	s the foundation claim exemption	from the tax				
	because it maintained expenditure responsi	bility for the grant?		N/A 🗍	res 🗌 No		
	If "Yes," attach the statement required by R	egulations section 53 4945-5(d)		_	_		
6a	Did the foundation, during the year, receive	any funds, directly or indirectly, to	pay premiums				
	on a personal benefit contract?			[ \ \	res 🛚 X No		
b	Did the foundation, during the year, pay pre	miums, directly or indirectly, on a	personal benefit cont	ract?		6b	X
	If "Yes" to 6b, file Form 8870						
7a	At any time during the tax year, was the fou	ndation a party to a prohibited tax	shelter transaction?		res 🗓 No		
<u>b</u>	If "Yes," did the foundation receive any production	eeds or have any net income attr	butable to the transac	ction?	N/A	7b	
P	art VIII Information About Offic	ers, Directors, Trustees, I	Foundation Man	agers, Highly	Paid Employe	es,	
	and Contractors		· · · · · · · · · · · · · · · · · · ·				
1 1	List all officers, directors, trustees, and for	undation managers and their co	mpensation. See in	structions.			
	•		(b) Title, and average	(c) Compensation	(d) Contributions to		
	(a) Name and addre	?SS	hours per week	(If not paid,	employee benefit plans and deferred		ense account, allowances
			devoted to position	enter -0-)	compensation	<u> </u>	
MI	CHAEL N. NEWMARK	ST. LOUIS	TRUSTEE	[			
21	.1 NORTH BROADWAY, SUITE 3600	MO 63101	0.00	0	0		0
HE	ENRY MASSIE	BERKELEY	TRUSTEE	1		ì	
29	956 PIEDMONT	CA 94705	0.00	0	0	<u> </u>	0
						1	
				<u></u>		<u> </u>	
2	Compensation of five highest-paid emplo	yees (other than those include	d on line 1 – see ins	tructions). If non	e, enter		
	"NONE."		<del></del>		<del></del>		
			(b) Title, and average		(d) Contributions to employee benefit	(e) Exns	ense account.
	(a) Name and address of each employee paid	more than \$50,000	hours per week devoted to position	(c) Compensation	plans and deferred		allowances
			COTOLOGICO PODILIGIA		compensation		<del></del>
NC	NE			}			ž.
						<u> </u>	
						1	
			<del></del>			⊢—	
			<del></del>			<u> </u>	
				}		İ	
						<u> </u>	<del> </del>
						1	
				]	<u></u>	<u> </u>	
ota	I number of other employees paid over \$50,0	00			<b>•</b>	l	0

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Part VIII	Information About Officers, Directors, Trustees, Foundand Contractors (continued)	dation Managers, Highly Paid I	
3 Five high	est-paid independent contractors for professional services. See instr	ructions. If none, enter "NONE."	
	(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		· · · · · · · · · · · · · · · · · · ·	
Total number of	others receiving over \$50,000 for professional services		<u> </u>
Part IX-A	Summary of Direct Charitable Activities		
organizations and o	s four largest direct charitable activities during the tax year. Include relevant statistical information other beneficiaries served, conferences convened, research papers produced, etc	such as the number of	Expenses
1 N/A			
2			
			<u> </u>
3			
4			
Part IX-B	Summary of Program-Related Investments (see Instru	uctions)	<u> </u>
	rgest program-related investments made by the foundation during the tax year on lines 1 and 2		Amount
1 N/A			
2			
All other program-re	elated investments. See instructions.		
Total, Add lines	1 through 3	•	1

а	Expenses, contributions, gifts, etc - total from Part I, column (d), line 26	1a	13,475
b	Program-related investments – total from Part IX-B	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
	purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	13,475
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income		
	Enter 1% of Part I, line 27b See instructions	5	0
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	13,475

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

Form 990-PF (2017)

		<del></del> _			
5229	•				
	1990-PF (2017) MASSIE FAMILY CHARITA		26-177684	0	Page 9
_P	art XIII Undistributed Income (see instruction	ons)			
	•	(a)	{b}	(c)	(d)
1	Distributable amount for 2017 from Part XI,	Corpus	Years prior to 2016	2016	2017
	line 7			<u></u>	5,063
2	Undistributed income, if any, as of the end of 2017				
а	Enter amount for 2016 only			_ · ·	
þ	Total for prior years. 20 , 20 , 20				
3	Excess distributions carryover, if any, to 2017				
а	From 2012 59,9	<del></del>			
b	From 2013 15,2	<del></del> }			
С	From 2014 25,3	:			
d	From 2015 23,9	83			
е	From 2016 15,9	<del></del>			
f	Total of lines 3a through e	140,512			
4	Qualifying distributions for 2017 from Part XII,				
	line 4 ▶ \$ 13,475	1			
а	Applied to 2016, but not more than line 2a				
b	Applied to undistributed income of prior years				
	(Election required – see instructions)				
С	Treated as distributions out of corpus (Election				
	required – see instructions)				
d	Applied to 2017 distributable amount				5,063
е	Remaining amount distributed out of corpus	8,412			
5	Excess distributions carryover applied to 2017				
	(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:				
2	Cornus Add lines 3f Ac and Ac Subtract line 5	149 924	i		

4	Olidistributed moonie, if arry, as of the end of 2017		į.	1	
а	Enter amount for 2016 only				
b	Total for prior years. 20 , 20 , 20				
3	Excess distributions carryover, if any, to 2017				
а	From 2012 59,97				
b	From 2013 15,23	8			
С	From 2014 25,32	1			
d	From 2015 23,98	3			
e	From 2016 15,99	9			
f	Total of lines 3a through e	140,512			
4	Qualifying distributions for 2017 from Part XII,				
	line 4 ▶ \$13,475	<b>†</b>			
а	Applied to 2016, but not more than line 2a				
b	Applied to undistributed income of prior years				
	(Election required – see instructions)				
С	Treated as distributions out of corpus (Election				
	required – see instructions)				
d	Applied to 2017 distributable amount				5,063
е	Remaining amount distributed out of corpus	8,412			
5	Excess distributions carryover applied to 2017				
	(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:	1			
	Corpus Add lines 3f, 4c, and 4e Subtract line 5	148,924			
b	Prior years' undistributed income Subtract				
	line 4b from line 2b		<u> </u>		
С	Enter the amount of prior years' undistributed				
	income for which a notice of deficiency has				
	been issued, or on which the section 4942(a)				
	tax has been previously assessed				······································
a	Subtract line 6c from line 6b Taxable				
_	amount – see instructions				
е	Undistributed income for 2016 Subtract line				
	4a from line 2a Taxable amount – see	· ·	,		•
£	Instructions Undistributed income for 2017 Subtract lines				
,	4d and 5 from line 1. This amount must be	Ì			
	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)				
8	Excess distributions carryover from 2012 not				
	applied on line 5 or line 7 (see instructions)	59,971			
9	Excess distributions carryover to 2018.			``	***************************************
	Subtract lines 7 and 8 from line 6a	88,953			
10	Analysis of line 9				
а	Excess from 2013 15, 23	8			
b	Excess from 2014 25, 32				
С	Excess from 2015 23,98	<b>—</b>			
d	Excess from 201615,99				
_е_	Excess from 2017 8 , 41				
					Form 990-PF (2017)

	990-PF (2017) MASSIE FAMIL			26-17768		Page 10
	rt XIV Private Operating Fou				9)	/
1a	If the foundation has received a ruling or	1	•	ting		
	foundation, and the ruling is effective for			_		
b	Check box to indicate whether the foundation		ating foundation descri		942(j)(3) or 494	12(j)(5)
2a	Enter the lesser of the adjusted net	Tax year		Prior 3 years		(e) Total
	income from Part I or the minimum	(a) 2017	(b) 2016	(c) 2015	(d) 2014	
	investment return from Part X for					
	each year listed			·		·
b	85% of line 2a					
C	Qualifying distributions from Part XII,					İ
	line 4 for each year listed			<b>,</b>		
d	Amounts included in line 2c not used directly					
	for active conduct of exempt activities					
е	Qualifying distributions made directly				/	
_	for active conduct of exempt activities					
	Subtract line 2d from line 2c					i
3	Complete 3a, b, or c for the					
3	alternative test relied upon					
_	"Assets" alternative test – enter					
а	i				1	
	(1) Value of all assets		<del> </del>			
	(2) Value of assets qualifying under					
	section 4942(j)(3)(B)(i)		<del> </del>	/	<del>\</del>	<del> </del>
b	"Endowment" alternative test – enter 2/3		/			
	of minimum investment return shown in			ļ		Į
	Part X, line 6 for each year listed					
C	"Support" alternative test – enter					
	(1) Total support other than gross			į	`	
	investment income (interest,		/			
	dividends, rents, payments on					
	securities loans (section 512(a)(5)), or royalties)			{		
	(2) Support from general public			<del></del>		· /
	and 5 or more exempt				1	
	organizations as provided in					
	section 4942(j)(3)(B)(iii)					
	(3) Largest amount of support from					
	an exempt organization			ĺ		Ì
	(4) Gross investment income	7				
Pa	art XV Supplementary Inform	nation (Complete	this part only if	the foundation ha	ad \$5,000 or mor	e in assets at
	any time during the ye	•	•		•	
1	Information Regarding Foundation Ma					
а	List any managers of the foundation who	-	e than 2% of the total	contributions received	by the foundation	
_	before the close of any tax year (but only				•	
	N/A	,		(000 000	,	
	List any managers of the foundation who	own 10% or more of	the stock of a corporat	on (or an equally large	portion of the	
~	ownership of a partnership or other entity					
	N/A	) or writer the louridat	non has a 10 % of grea	ter interest		
	<del></del>	Crant Ciff Loon Sal	aclarabin etc. Broom		<del></del>	
2	Information Regarding Contribution, G					
	Check here ▶ ☐ If the foundation only			*	· ·	
	unsolicited requests for funds If the found		ants, etc., to individua	is or organizations und	er otner conditions,	
	complete items 2a, b, c, and d. See instru		<del></del>		<del></del>	
а	The name, address, and telephone numb	er or email address o	of the person to whom	applications should be	addressed	
	N/A					
b	The form in which applications should be	submitted and inform	ation and materials th	ey should include		
	N/A					
C	Any submission deadlines			- <del></del>		
	N/A					
d	Any restrictions or limitations on awards,	such as by geographi	ical areas, charitable fi	elds, kinds of institution	ns, or other	
	factors:					
	N/A					
DAA						Form 990-PF (2017

10111 330-11 (2011)				
Part XV Supplementary Information (co	ontinued)	, _		
3 Grants and Contributions Paid During the	If recipient is an individual,		T	
Recipient	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		
a Paid dunng the year See Statement 3				
see statement s		}	}	
				12,650
			1	
			į	
		[		
			}	
		ì .	]	
			}	
			1	
			1	
			[	
			}	•
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,				
		}	)	
		}		
Total		<u> </u>	▶ 3a	12,650
b Approved for future payment				
N/A				
			(	
,				
Total			▶ 3b	

	(2017) INIDOTH TIMITHE CIMACETI			1770030	<u></u>	raye_12
Part XVI-				_,	<del></del>	<del></del>
Enter gross a	mounts unless otherwise indicated	Unrelate	d business income	Excluded by	section 512, 513, or 514	(e)
•		(a) Business code	(b) Amount	(c) Exclusion	(d) Amount	Related or exempt function income
1 Program	service revenue			code		(See instructions )
a						
		_				
		_		_		
f		_				<del></del>
g Fees	and contracts from government agencies					
2 Members	hip dues and assessments					
3 Interest of	n savings and temporary cash investments			14	16	
4 Dividends	and interest from securities			14	1,644	······································
5 Net rental	I income or (loss) from real estate.					
a Debt-	financed property					
b Not de	ebt-financed property					
6 Net rental	Income or (loss) from personal property					
7 Other inve	estment income					
8 Gain or (le	oss) from sales of assets other than inventory			18	-345	
9 Net incom	ne or (loss) from special events					
10 Gross pro	ofit or (loss) from sales of inventory					
11 Other revo	enue a					
е						
12 Subtotal	Add columns (b), (d), and (e)			0	1,315	0
•	d line 12, columns (b), (d), and (e)				13	1,315
	et in line 13 instructions to verify calculations)				_	
Part XVI-		Accomplishm	ent of Exempt	Purposes		
Line No.	Explain below how each activity for which incom	ne is reported in co	olumn (e) of Part X	VI-A contribute	ed importantly to the	
	accomplishment of the foundation's exempt pur	poses (other than	by providing funds	for such purpo	oses) (See instruction	ons )
N/A						
				_		
				<del> </del>		
			-			
			-			
				<u>-</u>		
					<del></del>	
						<del></del>
					<u> </u>	
		<del></del>	<del> </del>		<del></del>	<del> </del>
			<del></del>		<del></del>	
				<del></del> -		
					<u>-</u>	

Form 9				CHARITABLE TR			-1776840		Pag	je 1
Par		_	_	ansfers To and Trai	nsactions	and Rela	ationships With N	oncharitable		
		Exempt Organiz		6.0 C.B		<del></del>		<del></del>	1,1	
•	_	•		ge in any of the following v	•	•			Yes	No
			ion 501(c)(3)	organizations) or in secti	on 527, relat	ting to politic	cal			:
	organization									;
		om the reporting found	tation to a no	oncharitable exempt organ	lization of				1 1	37
	(1) Cash	1-						1 <u>a(1)</u>		X
	(2) Other as							1a(2)		X
	Other transa								1	37
	• •	f assets to a noncharit	•	•				1b(1)		X
	• •	ses of assets from a no		. •				1b(2)	$\vdash$	X
		of facilities, equipment		sets				1b(3)	├	X
	-	rsement arrangements	5					1b(4)	$\vdash$	X
	-	r loan guarantees		- <b>6</b>				1b(5)	$\vdash$	
	• •		•	r fundraising solicitations				1b(6)		X
	•		•	ther assets, or paid emplo	•			<u> 1c</u>		_^
				plete the following sched			· · · · · ·			
		-	_	iven by the reporting foun						
				nt, show in column (d) the						
N/A	) Line no	(b) Amount involved	(c) Nam	e of noncharitable exempt organiz	ation	(a) De	scription of transfers, transacti	ons, and sharing arrangeme	ents	
N/A			<del> </del>	<del></del>	<del></del>					
			<del> </del> -		<del></del>					
			<del> </del>		<del></del>					
			<del> </del>	<del></del>	<del></del>					
					<del></del>			<del> </del>		
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		<del></del>								
		<del></del>	<del> </del>							
			<del> </del>		+					
								<del></del>		
		<del></del> _								
			<del> </del>							—
			<del>                                     </del>							
		<del></del>	<u> </u>				<del></del>			
			<u> </u>							
		· ·	-	with, or related to, one or		empt organi	zations	┌	<b>(</b> 7)	
				501(c)(3)) or in section 5	27?			Y₁	es X	No
<u> b 1</u>		nplete the following sc	hedule		<del></del>		<del></del>	<del></del>		
		) Name of organization		(b) Type of organizatio	<u>n</u>		(c) Description of	relationship		
	/A							<del></del>		
			<del></del>	<del></del>	+		<del></del>			
				<del></del>	$\longrightarrow$					
					<del></del>					
	Lindor non	alting of parium. I declare th	at I have evame	and thus roturn, uncluding accomp	anisan nahadidi		ata and to the best of my less	underland and bolish due to un		
	correct, an	auces of perjury, I declare the d complete Declaration of p	oreparer (other t	ned this return, including accomp han taxpayer) is based on all info	anying schedule irmation of whic	es and stateme th preparer has	ins, and to the best of my kno any knowledge			
<b>~:</b>	1							May the IRS discuss this re with the preparer shown b		
Sign	1 \ /	'a D.	P		,	,		See instructions	Yes	No
lere	$\downarrow$ $\downarrow$		(		1 11/2	-/18				
		ture of officer or trustee			! <u>'</u>		TRUSTE	<u>.                                    </u>		
	, ought				Date		Title			

Preparer's signature

MASSIE, FUDEMBERG, GOLDBERG L.L.

1015 LOCUST STREET, SUITE 425 ST. LOUIS, MO 63101

314-231-5105 Form 990-PF (2017)

P00952148

43-0669220

PTIN

Fırm's EIN ▶

Phone no

Check if self-employed

Paid

Preparer

Use Only

Print/Type preparer's name

PEGGY ARNETT

Firm's name

Firm's address ▶

5229 MASSIE FAMILY CHARITABLE TRUST 1	26-1776840	FYE: 12/31/2017

## Federal Statements

	Charitable Purpose	\$ 825	\$ 825
unting Fees	Adjusted Net	\$	\$
rm 990-PF, Part I, Line 16b - Accounting F	Net Investment	\$	\$
Statement 1 - Form 990-PF, I	Total	\$ 825	\$ 825
Stal	Description	Indirect Accounting Fees	Total

Statement 2 - Form 990-PF, Part II, Line 10b - Corporate Stock Investments	rm 990-PF	Part II, Line	10b - Co	rporate Stock	k Investments		•
Description	ă ~	Beginning of Year		End of Year	Basis of Valuation	Щ	Fair Market Value
COMCAST CORP CLASS A NEW (CMCSA)	w	1,982	\ \ \	~	Cost	· ν·	8,010
CONOCOPHILLIS (COP) DOVER CORP COMMON (DOV)		12,911 4,090		12,911 4,090	Cost		10,978
VERIZON COMMUNICATIONS INC (VZ)		2,944		2,944	Cost		5,293
ISHARES SELECT DIVIDEND ETF		11,871		11,871	Cost		17,248
EXACT SCIENCES CORP		5,112		5,112	Cost		26,270
PENTAIR LTD		10,023			Cost		
RYDER SYSTEM INC		6,883		6,883	Cost		8,417
ADIENT PLC		1,444		1,444	Cost		2,440
JOHNSON CONTROLS INTL PLC		14,301			Cost		
MODINE MANUFACTURING CO				13,155	Cost	{	16,160
Total	ς»	71,561	S.	60,392		ۍ.	104,915

Name	Address	i		
Address	Relationship	Status	Purpose	Amount
KIDS INTERNATIONAL DENTAL SERVICES 1400 22ND	1400 22ND ST			·   · 
SAN FRANCISCO CA 94122 501(c)(3)	501 (0	c) (3)	HEALTH AND WELFARE	1,000
HOLOCAUST MUSEUM & LEARNING CENTER	12 MILLSTONE CAM	IPUS DR		
ST. LOUIS MO 63146	501(c)(3)	c) (3)	HUMAN RIGHTS	3,500
CAZADERO PERFORMING ARTS FAMILY	P.O. BOX 11013			
OAKLAND CA 94611	501 (4	501(c)(3)	PERFORMING ARTS	1,000

Statement 3 - Form 990-PF, Part XV, Line 3a - Grants and Contributions Paid During the Year

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MASSIE	
5229	

## Federal Statements

26-1776840 FYE: 12/31/2017

ent 3 - Form 990-PF, Part XV, Line 3a - Grants and Contributions Paid During the	Voor (continued)
Statement 3 - F	

	Amount	1,000	500	300	1,000	500	003	) ) )	250	000	000	100		500	250	·	250		200	у С		12,650	
1	Purpose	SUPPORTS EDUCATION	SUPPORT WATER CONSERVATION	SUPPORT EDUCATION	508 SUPPORT INDIGENOUS PEOPLE	ANIMAL RIGHTS AND PROTECTION	SUPPORT THE ARTS	1	SUPPORT PERFORMING ARTS	SMITE GREEN SO NOTHOLIGOR SET WE	FINAL FROM CLICK OF TRUBE FIND	PUBLIC TV		ELIMINATE HUNGER IN ALAMEDA COUNTY	PROMOTE A HEALTHY ENVIRONMENT		PROMOTE ONLINE LEARNING		ELDERLY PROGRAMMING	FL HIMAN DICHTS & RNIITBONMENT BBOTECTIO			
Address	Relationship Status	1 BROOKINGS DEIVE 501(c)(3)	501(c)(3)	182 ESTATES DRIVE 501(c)(3)	ADWAY, SUITE 501(c)(3)	170 EAST COTATI AVE 501(c)(3)	2430 BANCROFT WAY 501 (c) (3)	2704 ALCATRAZ AVE	501(c)(3)	339 HOUSTIN AVENUE	PO BOX 7618	501(c)(3)	7900 EDGEWATER DRIVE	501(c)(3)		149 NEW MONTGOMERY ST	501(c)(3)	1414 WALNUT ST	501(c)(3)	201/ MISSION ST., 2ND	(0) (0) 100		
Name	Address	WASHINGTON UNIVERSITY ST. LOUIS MO 63130	GUERNEVILLE CA 95446	MARY SARVIS MEMORIAL FUND PEIDMONT CA 94611	AMAZON WATCH OAKLAND CA 94612	ANIMAL LOCAL DEFENSE FUND COTATI CA 94931	2430 ARTS ALLIANCE BERKELFY CA 94704	SHAWL-ANDERSON DANCE CENTER	BERKELEY CA 94705	HEARTLAND INDEPENDENT FILM FORUM MISSECON MT 40441	KOED ACCINEGON IN ACCIDENT	SAN FRANCISCO CA 94120	ALAMEDA COUNTY FOOD BANK	OAKLAND CA 94614 RUSSTAN RIVER KEEPER	HEALDSBURG CA 95448	WIKIMEDIA FOUNDATION	SAN FRANCISCO CA 94105		BERKELEY CA 94709	GLOBAL EXCHANGE	OTTEC US OSCISSIONIENT NUC	Total	