Form 990-PF Department of the Treasury Internal Revenue Service

Return of Private Foundation

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

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

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

2017

For	rcai	lendar year 2017 or tax year beginning		, and ending		
Na	ame	e of foundation		<u></u>	A Employer identification	number
Ť.	ĮĘ	FEREY GALE & JANE GREENSE	PUN GALE			
_ 1	FA	MILY FOUNDATION			27-0544848	
Nu	ımbe	er and street (or P O box number if mail is not delivered to street a	ddress)	Room/suite	B Telephone number	
_ 2	23	60 CORPORATE CIRCLE		330	702-259-40	23
Cı	ty o	or town, state or province, country, and ZIP or foreign po-	stal code		C If exemption application is p	ending, check here
ŀ	HE	NDERSON, NV 89074				
G	Che	eck all that apply. Initial return	Initial return of a fo	rmer public charity	D 1. Foreign organizations	s, check here
		Final return	Amended return			
		Address change	Name change		Foreign organizations me check here and attach co	eting the 85% test,
H	Che	eck type of organization: X Section 501(c)(3) exe	mpt private foundation	eΨ	E If private foundation sta	tus was terminated
		Section 4947(a)(1) nonexempt charitable trust 0	other taxable private founda	ition	under section 507(b)(1)	
Ī F		market value of all assets at end of year J Accounting		Accrual	F If the foundation is in a	. ,.
		· I	er (specify)		under section 507(b)(1)	
	▶\$			s.)	,	ν
ΓP	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)
$\overline{}$	T	1 Contributions, gifts, grants, etc., received	868,415.		N/A	
1,5] ,	2 Check I if the toundation is not required to attach Sch B				
	1	3 Interest on savings and temporary cash investments	258.	258,	·	STATEMENT 1
)4		4 Dividends and interest from securities				
•		5a Gross rents				
	1	b Net rental income or (foss)				
	1.	6a Net gain or (loss) from sale of assets not on line 10				
ue	: i	Gross sales price for all				
Revenue	<u>.</u>	7 Capital gain net income (from Part IV, line 2)		0.		<u> </u>
ă	2 ;	8 Net short-term capital gain			. <u> </u>	
	13	9 Income modifications				<u> </u>
	1,	Gross sales less returns and allowances				
	'	b Less Cost of goods sold			<u></u>	
		c Gross profit or (loss)			<u> </u>	
	1.	11 Other income			<u> </u>	
	Ι.	12 Total. Add lines 1 through 11	868,673.	258.		
_	_	3 Compensation of officers, directors, trustees, etc	0.00,073.		CENTER	0.
	ı ı	4 Other employee salaries and wages		- RE	UCIVE -	
		15 Pension plans, employee benefits		180	<u> </u>	
ď		16a Legal fees			R 3 0 ZU18	
Sesion	? "	b Accounting fees		ш 7	164	
		c Other professional fees			7581 1 55	
v ø 6010 nistrative Ex		17 Interest			23.0 Va 42 c	
Administrative		o H	50.	0.		0.
9 2	֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓			0.		
	1	· · · · · · · · · · · · · · · · · · ·		<u> </u>	<u> </u>	
JOL Padmi	2	· · ·				
₹	2	· · · · · · · · · · · · · · · · · · ·				
יי קיי		~ · · · · · · · · · · · · · · · · · · ·				
֓֞֝֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓	2	23 Other expenses				
Operation a	2	24 Total operating and administrative	ΕΛ	^		
	<u>.</u>	expenses. Add lines 13 through 23	50.	0.		727,574.
_ ز	12	25 Contributions, gifts, grants paid	727,574.		ļ	141,514.
r)	120	26 Total expenses and disbursements.	777 674	^		727 574
_	+-	Add lines 24 and 25	727,624.	0.		727,574.
	12	27 Subtract line 26 from line 12;	141 040			
		a Excess of revenue over expenses and disbursements	141,049.	050		ļ
		b Net investment income (if negative, enter -0-)		258.	NT / 3	
_		C Adjusted net income (if negative, enter -0-)			N/A	Form 990-PF (2017)
700	E01	01 02 to LUA For Panaguark Paduction Act Notice	eas instructions			Form QUIT_DE /2017

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		Balance Sheets Attached schedules and amounts in the description	Beginning of year	End o	End of year			
L	art	column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value			
_	1	Cash - non-interest-bearing	26,194.	152,217.	152,217.			
	2	Savings and temporary cash investments						
		Accounts receivable ► 16,376.						
		Less; allowance for doubtful accounts	1,350.	16,376.	16,376.			
	4	Pledges receivable ►						
		Less; allowance for doubtful accounts						
	5	Grants receivable						
	6	Receivables due from officers, directors, trustees, and other	_					
	1	disqualified persons						
	7	Other notes and loans receivable			,			
		Less; allowance for doubtful accounts						
S	8	Inventories for sale or use						
Assets	9	Prepaid expenses and deferred charges						
As	10a	Investments - U.S. and state government obligations						
	1	Investments - corporate stock						
		Investments - corporate bonds						
		Investments - land, buildings, and equipment basis						
	İ	Less accumulated depreciation						
	12	Investments - mortgage loans						
	13	Investments - other		- <u>-</u> -				
	14	Land, buildings, and equipment: basis	-					
		Less accumulated depreciation	İ					
	15	Other assets (describe >						
	16	Total assets (to be completed by all filers - see the						
		instructions. Also, see page 1, item I)	27,544.	168,593.	168,593.			
_	17	Accounts payable and accrued expenses						
	18	Grants payable						
Ş	19	Deferred revenue						
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons						
abi	21	Mortgages and other notes payable						
=	22	Other liabilities (describe)						
				-				
	23	Total liabilities (add lines 17 through 22)	0.	0.				
		Foundations that follow SFAS 117, check here						
S	ŀ	and complete lines 24 through 26, and lines 30 and 31.						
ances	24	Unrestricted						
alar		Temporarily restricted						
Ä	26	Permanently restricted						
Ĕ	ľ	Foundations that do not follow SFAS 117, check here	1					
F	Ì	and complete lines 27 through 31.		_				
ts (27	Capital stock, trust principal, or current funds	0.	0.				
SSe	28	Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.				
Net Assets or Fund Bala	29	Retained earnings, accumulated income, endowment, or other funds	27,544.	168,593.				
ž	30	Total net assets or fund balances	27,544.	168,593.				
		~	27 544	160 503				
_	31	Total liabilities and net assets/fund balances	27,544.	168,593.				
P	art	Analysis of Changes in Net Assets or Fund B	alances					
1	Tota	net assets or fund balances at beginning of year - Part II, column (a), line	30					
		st agree with end-of-year figure reported on prior year's return)		1	27,544.			
		r amount from Part I, line 27a		2	141,049.			
		r increases not included in line 2 (itemize)		3	0.			
		lines 1, 2, and 3		4	168,593.			
		eases not included in line 2 (itemize)		5	0.			
6	rota	net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	olumn (b), line 30	6	168,593.			

Part IV Capital Gains a	nd Losses 1	for Tax on Ir	vestment	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.)			I, b	low acquired - Purchase - Donation		acquired day, yr.)	(d) Date sold (mo., day, yr.)	
1a				-					
b NON	E			<u>.</u>	\vdash	_			<u> </u>
d d					\vdash				<u> </u>
e			-	 	┢				<u> </u>
(e) Gross sales price	(e) Gross sales price (f) Depreciation allowed (g) Cost or other basis plus expense of sale ((6)					Gain or (loss is (f) minus			
a									
<u>b</u>				····	_				
d									
e							-		
Complete only for assets showing	gain in column (h) and owned by	the foundation	on 12/31/69.	\neg		(I) Gains (Col. (h) gain	minus
(i) FMV as of 12/31/69	(j) Adjust as of 12			cess of col. (ı) col. (ı), ıf any		С	ol. (k), but Losses	not less tha (from col.	n -0-) or (h))
a									
b	<u></u>								
c d					\dashv				
e	·-		<u> </u>						
Capital gain net income or (net capi	tal loss)	If gain, also enter If (loss), enter -0-			}	2			
, ,	, (,	ا ′				
Net short-term capital gain or (loss) If gain, also enter in Part I, line 8, co If (loss), enter -0- in Part I, line 8		CTIONS 1222(5) an	10 (6):		}	3			
Part V Qualification Un	der Section	1 4940(e) for	Reduced	Tax on Net	Inv	estment Ir	come		_
section 4940(d)(2) applies, leave this Vas the foundation liable for the section "Yes," the foundation doesn't qualify Enter the appropriate amount in ea	n 4942 tax on th under section 49	40(e). Do not con	nplete this part	i.					Yes X No
(a)	CII COIUITIII IOI EA		istructions ber	ore making any e					(d)
Base periód years Calendar year (or tax year beginning	ın) Adjus	(b) sted qualifying dis		Net value of no	(c) incha	rıtable-use asse		Distri (col. (b) di	(d) bution ratio vided by col. (c))
2016 2015			1,300. 0,925.			25,53 26,34			13.75597
2013			0,325. $0,285.$		_	$\frac{20,34}{16,11}$			9.32636
2013			4,046.			73,51			3.86378
2012			3,284.			238,07			.60184
2 Total of line 1, column (d)				_			2		41.25050
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		8.25010
Enter the net value of noncharitable	-use assets for 2	017 from Part X,	lıne 5				4	ļ	307,022
Multiply line 4 by line 3							5	<u> </u>	2,532,963
Enter 1% of net investment income	(1% of Part I, lin	ne 27b)					6		3
Add lines 5 and 6							7	<u> </u>	2,532,966
Enter qualifying distributions from I	Part XII, line 4						8		727,574
If line 8 is equal to or greater than I See the Part VI instructions.	ine 7, check the t	oox in Part VI, line	1b, and comp	lete that part usin	ng a 1	% tax rate.			
23521 01-03-18									Form 990-PF (201

JEFFREY GALE & JANE GREENSPUN GALE

Form 990-PF (2017) FAMILY FOUNDATION		27-05			age 4
Part VI Excise Tax Based on Investment Income (Section		4948 - se	e instru	ction	1S)
1a Exempt operating foundations described in section 4940(d)(2), check here	,] [
	f necessary-see instructions)				_
b Domestic foundations that meet the section 4940(e) requirements in Part V, check here	e ▶ 🔛 and enter 1%	1			<u>5.</u>
of Part I, line 27b					
c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations, ent	er 4% of Part I, line 12, col. (b).				_
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations on	ly; others, enter -0-)	2			<u>0.</u>
3 Add lines 1 and 2		3			5.
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations or	ily; others, enter -0-)	4			0.
5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-		5			5.
6 Credits/Payments:					
a 2017 estimated tax payments and 2016 overpayment credited to 2017	6a 0				
b Exempt foreign organizations - tax withheld at source	6b O				
c Tax paid with application for extension of time to file (Form 8868)	6c 0				
d Backup withholding erroneously withheld	6d O	<u>.</u>			
7 Total credits and payments. Add lines 6a through 6d		7			0.
8 Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is	attached	8			0.
9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	•	9			5.
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpa	id 🔻	10			
11 Enter the amount of line 10 to be: Credited to 2018 estimated tax	Refunded ▶	11			
Part 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 participate or intervei	ne in		Yes	No
any political campaign?			1a		X
b Did it spend more than \$100 during the year (either directly or indirectly) for political p	urposes? See the instructions for the de	inition	1b		X
If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and cop	ies of any materials published or				
distributed by the foundation in connection with the activities.			1		
c Did the foundation file Form 1120-POL for this year?			_1c		<u> </u>
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed durin					
(1) On the foundation. ► \$ 0 . (2) On foundation mana	ngers. ► \$0	<u>•</u>			
e Enter the reimbursement (if any) paid by the foundation during the year for political exp	penditure tax imposed on foundation				
managers. ► \$ 0.					
2 Has the foundation engaged in any activities that have not previously been reported to	the IRS?		2		<u>X</u>
If "Yes," attach a detailed description of the activities.					
3 Has the foundation made any changes, not previously reported to the IRS, in its govern	ning instrument, articles of incorporation	, or			
bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes			_ 3		_X_
4a Did the foundation have unrelated business gross income of \$1,000 or more during th	e 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	/ear?		5		X
If "Yes," attach the statement required by General Instruction ${\mathcal T}$					
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisf	ed either:		i	1	
 By language in the governing instrument, or 			ĺ		
 By state legislation that effectively amends the governing instrument so that no man 	datory directions that conflict with the st	ate 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,"	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 instr	uctions. >		_		
NV			_		
b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to	the Attorney General (or designate)		-		
of each state as required by General Instruction G? If "No," attach explanation			_8b	X	م
9 Is the foundation claiming status as a private operating foundation within the meaning	of section 4942(j)(3) or 4942(j)(5) for c	alendar			
year 2017 or the tax year beginning in 2017? See the instructions for Part XIV. If "Yes,	complete Part XIV		9		_X_
10 Did any persons become substantial contributors during the tax year? If "Yes," attach a s	chedule listing their names and addresses	STMT 3	10	X	
			Form 99	0-PF	(2017)

Pai	rt 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		X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges?			
	If "Yes," attach statement. See instructions	12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	
	Website address ► N/A			
	The books are in care of ► THE GREENSPUN CORPORATION Telephone no. ► 702-2		023	
	Located at ≥ 2360 CORPORATE CIRCLE, STE 330, HENDERSON, NV ZIP+4 ≥85	9074		
	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here		, ▶	· L
	and enter the amount of tax-exempt interest received or accrued during the year		/A	N1 -
	At any time during calendar year 2017, did the foundation have an interest in or a signature or other authority over a bank,		Yes	No X
	securities, or other financial account in a foreign country?	16		
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the			
	foreign country ► 1 VII-B Statements Regarding Activities for Which Form 4720 May Be Required			<u> </u>
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
	During the year, did the foundation (either directly or indirectly):			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)]		
	a disqualified person?	1 '		
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?			
	(5) Transfer any income or assets to a disqualified person (or make any of either available			
	for the benefit or use of a disqualified person)?			
	(6) Agree to pay money or property to a government official? (Exception. Check "No"			
	If the foundation agreed to make a grant to or to employ the official for a period after			
	termination of government service, if terminating within 90 days.)			
	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations			
	section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions	1b		
	Organizations relying on a current notice regarding disaster assistance, check here			
	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected			\ •
	before the first day of the tax year beginning in 2017?	1c		X
	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)):			
a	At the end of tax year 2017, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning			
	before 2017? Yes X No	1		
	If "Yes," list the years ▶,,,,,,			
	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect	1		
	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach			
	statement - see instructions.) N/A	2b		<u> </u>
	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.	1		1
	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time	1		
	during the year?			
	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	1		[
	of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C,			
	Form 4720, to determine if the foundation had excess business holdings in 2017.) N/A	3ь		
	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	_	X
	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that			
	had not been removed from jeopardy before the first day of the tax year beginning in 2017?	4b		X
	F	orm 99 0)-PF	(2017)

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Part VII-B Statements Regarding Activities for Which F	Form 4720 May Be F	Required (contin	ued)	IV	T XI -			
5a During the year, did the foundation pay or incur any amount to:		—	- C	Yes	No			
(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?								
(2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly,								
any voter registration drive?								
	(3) Provide a grant to an individual for travel, study, or other similar purposes?							
(4) Provide a grant to an organization other than a charitable, etc., organization	n described in section		es X No		l			
4945(d)(4)(A)? See instructions			S LAL NO		l			
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or r		es X No					
the prevention of cruelty to children or animals?	for the executions described i		S LAL NO]]			
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und section 53.4945 or in a current notice regarding disaster assistance? See instri		ii negulations	N/A	5b				
Organizations relying on a current notice regarding disaster assistance, check h				- -	 			
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fr		ned		1				
expenditure responsibility for the grant?		/A 🗀 Ye	s No	ł				
If "Yes," attach the statement required by Regulations section 53.4945-5(d).		.,						
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	nav nremilims on].	1				
a personal benefit contract?	pay promising on		es X No	ŀ				
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal benefit contract?			6ь	x			
If "Yes" to 6b, file Form 8870.			Į-		_			
7a At any time during the tax year, was the foundation a party to a prohibited tax s	helter transaction?	Ye	es X No					
b If "Yes," did the foundation receive any proceeds or have any net income attribu	table to the transaction?		N/A	7b				
Part VIII Information About Officers, Directors, Trusto		nagers, Highly	/					
Paid Employees, and Contractors								
1 List all officers, directors, trustees, and foundation managers and t		L (-) Componentian	(d) 0	1 1 2 5 5 11				
(a) Name and address	(b) Title, and average hours per week devoted	(c) Compensation (If not paid,	(d) Contributions to employee benefit plans and deferred	(e) Exp account	pense t, other			
(a) name and accorded	to position	`enter -0-)'	compensation	allowa	ances			
				1				
SEE STATEMENT 4		0.	0.	1	0.			
SEE STATEMENT 4			<u>_</u>	'				
				Ì				
								
		 		 				
2 Compensation of five highest-paid employees (other than those inc		enter "NONE."						
(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	(e) Ex accoun	pense t other			
	devoted to position	(C) compensation	and deferred compensation	allowa	ances			
NONE								
				ļ				
				ľ				
				ļ				
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				<u> </u>				
			1					
		ļ	ļ					
	1			1				
=	<u> </u>		<u> </u>		0			
Total number of other employees paid over \$50,000			<u> </u>	- 000 PF				
			Forn	9 90-PF	(2017)			

JEFFREY GALE & JANE GREENSPUN GALE

Form 990-PF (2017) FAMILY FOUNDATION 27-0544848 Page 7 Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued) 3 Five highest-paid independent contractors for professional services. 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 Part IX-A | Summary of Direct Charitable Activities List the foundation's four largest direct charitable 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 0. Part IX-B Summary of Program-Related Investments Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 Amount 1 NONE 0. All other program-related investments. See instructions

Total. Add lines 1 through 3

P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign four	ndation	s, see instructions)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
a	Average monthly fair market value of securities	1a	0.
b	Average of monthly cash balances	1b	311,697.
C	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	311,697.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 1e 0 •		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	311,697.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	4,675.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	307,022.
6	Minimum investment return. Enter 5% of line 5	6	15,351.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations an foreign organizations, check here ▶ ☐ and do not complete this part.)	d certaii	
1	Minimum investment return from Part X, line 6	1	15,351.
2a	Tax on investment income for 2017 from Part VI, line 5		
b	Income tax for 2017. (This does not include the tax from Part VI.)		
C	Add lines 2a and 2b	2c	<u>5.</u>
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	15,346.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	15,346.
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	15,346.
P	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes.	.	707 [74
	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	727,574.
b	Program-related investments - total from Part IX-B	1b	<u>U.</u>
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	3 - 11 - 12 - 12	3a	
b	Cash distribution test (attach the required schedule)	3b	707 574
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8; and Part XIII, line 4	4	727,574.
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	707 574
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	727,574.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation (4940(e) reduction of tax in those years.	qualifies	for the section

Form **990-PF** (2017)

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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				15,346.
2 Undistributed income, if any, as of the end of 2017				
a Enter amount for 2016 only			0.	
b Total for prior years:				
, ,	ĺ	0.		
3 Excess distributions carryover, if any, to 2017:	=			
a From 2012 131, 386.				
b From 2013 280,372.				
c From 2014 149,479.	}			
dFrom 2015 359,608.				
eFrom 2016 350,023.				
f Total of lines 3a through e	1,270,868.		<u> </u>	
4 Qualifying distributions for 2017 from				
Part XII, line 4. ►\$ 727,574.			•	
a Applied to 2016, but not more than line 2a			0.	
b Applied to undistributed income of prior	}	0		
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus	,]			
(Election required - see instructions)	0.			15,346.
d Applied to 2017 distributable amount	712,228.			15,340.
e Remaining amount distributed out of corpus	712,228.		· 	0.
5 Excess distributions carryover applied to 2017 (If an amount appears in column (d), the same amount must be shown in column (a))		····		<u> </u>
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	1,983,096.			
b Prior years' undistributed income, Subtract				
line 4b from line 2b		0.		
c Enter the amount of prior years'				
undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously		0.		
assessed d Subtract line 6c from line 6b. Taxable		<u> </u>		
amount - see instructions		0.		
e Undistributed income for 2016. Subtract line				
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2017. Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2018				0.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3) (Election				
may be required - see instructions)	0.			
8 Excess distributions carryover from 2012				
not applied on line 5 or line 7	131,386.			
9 Excess distributions carryover to 2018.	4 054 545			
Subtract lines 7 and 8 from line 6a	1,851,710.			
10 Analysis of line 9:				
a Excess from 2013 280, 372.				
b Excess from 2014 149, 479.				
c Excess from 2015 359,608. d Excess from 2016 350,023.				
d Excess from 2016 350,023. e Excess from 2017 712,228.				
722581 01 02 18	 		L	Form 990-PF (2017)

JEFFREY GALE & JANE GREENSPUN GALE

Form 990-PF (2017) FAMILY	FOUNDATION	_		27-054	14848 Page 10
Part XIV Private Operating F	oundations (see in	structions and Part VII	l-A, question 9)	N/A	
1 a If the foundation has received a ruling of	or determination letter tha	t it is a private operating			
foundation, and the ruling is effective fo			▶		
b Check box to indicate whether the found	dation is a private operati	ng foundation described i	n section	4942(j)(3) or 494	12(1)(5)
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years		,
income from Part I or the minimum	(a) 2017	(b) 2016	(c) 2015	(d) 2014	(e) Total
investment return from Part X for				/	
each year listed					
b 85% of line 2a				/ /	
c Qualifying distributions from Part XII,				/	
line 4 for each year listed		ļ	1		
d Amounts included in line 2c not		 			
used directly for active conduct of				/	
exempt activities			}	1/	
e Qualifying distributions made directly			/	/ 	
for active conduct of exempt activities.				1	
Subtract line 2d from line 2c			/	1	
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)		ł		1	
b "Endowment" alternative test - enter			//	 	
2/3 of minimum investment return					
shown in Part X, line 6 for each year listed			1	{	
c "Support" alternative test - enter.		1	-	 	
(1) Total support other than gross	1		1	}	
investment income (interest,	!				
dividends, rents, payments on					
securities loans (section 512(a)(5)), or royalties)	1		l	1	
(2) Support from general public				-	
and 5 or more exempt					
organizations as provided in section 4942(j)(3)(B)(iii)				1	
(3) Largest amount of support from	-		-	 	
an exempt organization			ļ	}	
(4) Gross investment income	<u> </u>		 	 	
Part XV Supplementary Info	rmation (Comple	ete this part only	if the foundation	had \$5,000 or mo	re in assets
at any time during t				, , , , , , , , , , , , , , , , , , ,	
1 Information Regarding Foundation					
a List any managers of the foundation wh	_	than 2% of the total cont	ributions received by the	foundation before the clos	e of any tax
year (but only if they have contributed r					
SEE STATEMENT 5					
b List any managers of the foundation wh	10 own 10% or more of th	ne stock of a corporation	(or an equally large ports	on of the ownership of a pa	rtnership or
other entity) of which the foundation ha			(or an equally large ports	on or the ormeromp or a pa	and only of
NONE					
2 Information Regarding Contribut	ion Grant Gift Loan	Scholarshin etc. Pr	rograms:		
				not accept unsolicited reque	ests for funds. If
the foundation makes gifts, grants, etc.					
a The name, address, and telephone num	ber or email address of t	he person to whom applic	cations should be addres	sed.	
		no porden to minom appin			
SEE STATEMENT 6					
b The form in which applications should t	be submitted and informa	ation and materials they s	hould include:		
c Any submission deadlines;					-
e mily submission deadilles.					
d Any restrictions or limitations on award	s, such as by geographic	al areas, charitable fields,	kınds of institutions, or	other factors:	

Form **990-PF** (2017)

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3 Grants and Contributions Paid During the		Payment	·	
Recipient	If recipient is an individual, show any relationship to	Foundation	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	status of recipient	Contribution	
a Paid during the year				
NWI DEELWARTON LENGUE		E01/01/21	DOWNERTOWN	
ANTI-DEFAMATION LEAGUE 605 THIRD AVENUE		501(C)(3) NONPROFIT ORG.	DONATIONS	
NEW YORK, NY 10158-3560				2,500
CHOATE ROSEMARY HALL		501(C)(3)	DONATIONS	
333 CHRISTIAN STREET		NONPROFIT ORG.		
WALLINGFORD, CT 06492			-	25,000
CONG WER SINTE		E01/G)/2)	DOWNERLOWS	
CONG NER TAMID 55 NORTH VALLE VERDE DRIVE		501(C)(3) NONPROFIT ORG.	DONATIONS	
HENDERSON, NV 89074				7,300
CONSERVATION INTERNATIONAL		501(C)(3)	DONATIONS	
2011 CRYSTAL DRIVE, SUITE 500		NONPROFIT ORG.		
ARLINGTON, VA 22202	 	 	1	273,77
GEORGETOWN UNIVERSITY		501(C)(3)	DONATIONS	
PO BOX 0734 WASHINGTON, DC 20073-0734		NONPROFIT ORG.		10,00
	NTINUATION SHE	ET(S)	▶_3a	727,57
b Approved for future payment				
NONE				
	-			
			}	
Total		1	▶ 3b	

Form 990-PF (2017) Part XVI-A

FAMILY FOUNDATION

Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated.	Unrelated	business income		ded by section 512, 513, or 514	(e)
This groot amounts amous strict most material.	(a) Business	(b)	(C) Exclu-	(d)	Related or exempt
1 Program service revenue:	Business code	Amount	sion	Amount	function income
	Code				
· · - · · · · · · · · · · · · · · · · ·	 - -		┼┈		
			├		
<u> </u>			 		
d	 				
e			↓		
f <u> </u>	<u> </u>	<u> </u>			
g Fees and contracts from government agencies					
2 Membership dues and assessments			<u> </u>	L	
3 Interest on savings and temporary cash					
investments			14	258.	
4 Dividends and interest from securities					
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	1			' 	
7 Other investment income					
8 Gain or (loss) from sales of assets other					
than inventory	1				
9 Net income or (loss) from special events	f				
10 Gross profit or (loss) from sales of inventory	 				
11 Other revenue:	 		-		
	1				
	 		 		
· 			-	 .	
c			-		
d	 		-		
6		0.	├	258.	0.
12 Subtotal. Add columns (b), (d), and (e)			<u> </u>		258.
13 Total. Add line 12, columns (b), (d), and (e)				13	
(See worksheet in line 13 instructions to verify calculations.)					
Part XVI-B Relationship of Activities t	o the Accor	nplishment of Ex	cemp	t Purposes	
Line No. Freedom halous house and the feat that have					
Line No. Explain below how each activity for which inco the foundation's exempt purposes (other than			contri	outed importantly to the accor	nplisament of
the foundation's exempt purposes (other than	by providing fund	15 101 Sucii purposes).			
				 	
		· · · · · · · · · · · · · · · · · · ·			

Part XVII	Information Re Exempt Organ		sfers to a	nd Transactions a	nd Relation	ships With Nonch	aritable		<u> </u>
1 Did the or			of the followin	g with any other organizati	on described in se	ection 501(c)		Yes	No
	·			g to political organizations?		`,	1 1		
a Transfers	from the reporting found:	ation to a noncharita	ble exempt or	ganization of:					
(1) Cash	ı						1a(1)		_X_
(2) Othe	r assets						1a(2)		X
b Other tran							1 1		
(1) Sales	s of assets to a noncharita	ble exempt organiza	tion				1b(1)		<u> </u>
• ,	hases of assets from a no		organization				1b(2)		X
	al of facilities, equipment,						1b(3)		<u>X</u>
٠,,	bursement arrangements						1b(4)		X
• •	s or loan guarantees						1b(5)		X
	ormance of services or me	•	•				1b(6)		X
=	of facilities, equipment, ma	• ,		•	lugua ahau tha fa	er market value of the acod	lc lc	oto.	
or service		oundation. If the four	ndation receive	dule. Column (b) should al ed less than fair market val				eis,	
(a)Line no	(b) Amount involved			exempt organization	(d) Descript	tion of transfers, transactions, as	nd sharing arr	angeme	ents
- -		1,7_1	N/A		1				
					 		-		
	· · ·		<u> </u>						
						·		_	
						 			
				<u></u>		-			
		-			 				
									
						 			
					 -				
ın section	ndation directly or indirect 501(c) (other than section omplete the following schi	n 501(c)(3)) or in se		or more tax-exempt organ	izations described	ı	Yes	X	No
<u> </u>	(a) Name of org			(b) Type of organization	7	(c) Description of relatio	nship		
	N/A			(-7-7)					
					 				
					<u> </u>			-	
			eparer (other tha	ng accompanying schedules and taxpayer) is based on all infor	mation of which prep	arer has any knowledge	May the IRS or return with the shown below	e prepar ? See in	rer istr
<u> </u>	nature of officer or trustee		7/0	Date 4-16-18	Title	A 6 E-9	└ Yes		J No
1 oigi	Print/Type preparer's na		Preparer's s	Date	Date	Check If PTI	N		
	T Time Type proparer of the		Toparor 3 3	ignaturo	Dutte	self- employed	.,		
Paid			1		1				
Preparer	Firm's name					Firm's EIN ▶		-	
Use Only									
•	Firm's address 🕨			<u>. </u>					
						Phone no			
							Form 99 0)-PF	(2017)

Part XV Supplementary Information				
3 Grants and Contributions Paid During the				
Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Maine and address (none of business)	or substantial contributor	recipient		
UNLV RADIO		501(C)(3)	DONATIONS	
4505 S. MARYLAND PARKWAY BOX 451006		NONPROFIT ORG.		
LAS VEGAS, NV 89106				249.
		501/03/23		
LAST CHANCE FOR ANIMALS		501(C)(3)	DONATIONS	
8033 SUNSET BLVD., #835 LOS ANGELES, CA 90046		NONPROFIT ORG.		5,000.
LOD INCOLUDE, CN 90040		1		3,000.
UNLV FOUNDATION		501(C)(3)	DONATIONS	
4505 S. MARYLAND PARKWAY BOX 451006		NONPROFIT ORG.	BOMITTONS	
LAS VEGAS, NV 89154-1006		noninoriza ono.		250.
THE SMITH CENTER		501(C)(3)	DONATIONS	
361 SYMPHONY PARK DRIVE		NONPROFIT ORG.		ļ
LAS VEGAS, NV 89106		<u> </u>		10,000.
THE ANIMAL FOUNDATION	1	501(C)(3)	DONATIONS	
655 N. MOJAVE ROAD		NONPROFIT ORG.		
LAS VEGAS, NV 89101	 	<u> </u>		20,000.
	i			}
THE HUMANE SOCIETY OF THE US		501(C)(3)	DONATIONS	
2100 L STREET, NW WASHINGTON, DC 20037		NONPROFIT ORG.		247,500.
NEVADA PUBLIC RADIO		501(C)(3)	DONATIONS	
1289 S. TORREY PINES DRIVE		NONPROFIT ORG.		
LAS VEGAS, NV 89146	<u> </u>			1,000.
	1			
OPPORTUNITY VILLAGE		501(C)(3)	DONATIONS	
6300 W. OAKEY BLVD.		NONPROFIT ORG.	ĺ	
LAS VEGAS, NV 89146	<u> </u>	-		1,000.
		T04 (5) (2)		
CASA		501(C)(3)	DONATIONS	
201 CENTRE PLAZA DRIVE, ROOM 1100 MONTEREY PARK, CA 91754		NONPROFIT ORG.		1,000.
KEEP MEMORY ALIVE		501(C)(3)	PONATIONS	
2888 W. BONNEVILLE AVE.		NONPROFIT ORG.		
LAS VEGAS, NV 89106		<u> </u>		122,500.
Total from continuation sheets				408,999.

JEFFREY GALE & JANE GREENSPUN GALE FAMILY FOUNDATION

27-0544848

3 Grants and Contributions Paid During the You	ear (Continuation)			<u> </u>
Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
	or substantial contributor	recipient	-	
LAS VEGAS PHILHARMONIC		501(C)(3)	DONATIONS	
1412 SOUTH JONES BLVD.		NONPROFIT ORG.	DOMATIONS	
LAS VEGAS, NV 89146		MONINOI II ONG.		500
		-		
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				1
	1	1		1
				1
Total from continuation sheets		<u> </u>		

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

JEFFREY GALE & JANE GREENSPUN GALE FAMILY FOUNDATION

Employer identification number

27-0544848

Organization type (check one)						
Filers of	:	Section:				
Form 99	0 or 990-EZ	501(c)() (enter number) organization				
		4947(a)(1) nonexempt charitable trust not treated as a private foundation				
		527 political organization				
Form 99	0-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				
	•	covered by the General Rule or a Special Rule . 7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See instructions				
		7), (o), or (10) diganization can check boxes for both the delicial rule and a Special rule See instructions				
General	Rule					
X		filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or one contributor Complete Parts I and II See instructions for determining a contributor's total contributions				
Special	Rules					
	For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000, or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1 Complete Parts I and II					
	For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III					
	year, contributions is checked, enter h purpose Don't cor	described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box here the total contributions that were received during the year for an exclusively religious, charitable, etc., inplete any of the parts unless the General Rule applies to this organization because it received nonexclusively e, etc., contributions totaling \$5,000 or more during the year.				
but it mi	ust answer "No" on	at isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to he filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)				

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

Name of organization JEFFREY GALE & JANE GREENSPUN GALE Employer identification number

AMIL	Y FOUNDATION	7-0544848	
Part I	Contributors (see instructions) Use duplicate copies of Part I if addition	onal space is needed	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	JEFFREY GALE & JANE GREENSPUN GALE 2360 CORPORATE CIRCLE, SUITE 330 HENDERSON, NV 89074	\$\$848,650.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	JGG HOLDINGS, LP 2360 CORPORATE CIRCLE, SUITE 330 HENDERSON, NV 89074	- \$\$19,765. -	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		- \$	Person Payroll Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		_	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
723452 11-0		_	Person Payroll Noncash (Complete Part II for noncash contributions) 990, 990-EZ, or 990-PF) (20)

Name of organization JEFFREY GALE & JANE GREENSPUN GALE FAMILY FOUNDATION

Employer identification number

27-0544848

art II	Noncash Property (see instructions) Use duplicate copies of P	art II if additional space is needed	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		 s	
(a) No. rom Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
 - -		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
· ·		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received

Name of org TRRRRR	panization EY GALE & JANE GREENSPU	N CALE	Employer identification number					
	Y FOUNDATION		27-0544848					
Part III	Exclusively religious, charitable, etc., cont the year from any one contributor. Complete of completing Part III, enter the total of exclusively religious	olumns (a) through (e) and the follo	ed in section 501(c)(7), (8), or (10) that total more than \$1,000 for lowing line entry. For organizations					
	Use duplicate copies of Part III if additional	s, chantable, etc., contributions of \$1,000 c al space is needed	or less for the year (Enterthis into once)					
(a) No. from Part I	(b) Purpose of gift (c) Use of gift		(d) Description of how gift is held					
		(e) Transfer of gi	ift					
-	Transferee's name, address, ar	nd ZIP + 4	Relationship of transferor to transferee					
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held					
<u> </u>	(e) Transfer of gift							
-	Transferee's name, address, and ZIP + 4 Relationship of transferor to tr							
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held					
j								
	(e) Transfer of gift							
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee					
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held					
<u> </u>	(e) Transfer of gift							
	Transferee's name, address, ar	nd ZIP + 4	Relationship of transferor to transferee					
_								

FORM 990-PF INTEREST ON SAV	INGS AND TEM	PORARY	CASH I	NVESTMENTS	STATEMENT	1
SOURCE	REVE	(A) REVENUE NE PER BOOKS 258.		(B) NVESTMENT NCOME	(C) ADJUSTED NET INCOME	
INTEREST INCOME	-			258.		
TOTAL TO PART I, LINE 3				258.		
FORM 990-PF	TAX	ES			STATEMENT	2
DESCRIPTION	(A) EXPENSES PER BOOKS	NET IN	WEST-	(C) ADJUSTED NET INCOM	CHARITA	
OTHER TAXES	50.		0.	·		0.
TO FORM 990-PF, PG 1, LN 18	50.		0.			0.
	F SUBSTANTIA PART VII-A,			S	STATEMENT	3
NAME OF CONTRIBUTOR	ADDR	ESS				
JEFFREY GALE & JANE GREENSPU		CORPOR		RCLE SUITE	330	
JGG HOLDINGS, LP		CORPOR		RCLE SUITE	330	

	T OF OFFICERS, D FOUNDATION MANA		STATI	EMENT 4
NAME AND ADDRESS	TITLE AND AVRG HRS/WK		EMPLOYEE BEN PLAN CONTRIB	
JEFFREY GALE 2360 CORPORATE CIRCLE SUITE 330 HENDERSON, NV 89074	TRUSTEE 0.50	0.	0.	0.
JANE GREENSPUN GALE 2360 CORPORATE CIRCLE SUITE 330 HENDERSON, NV 89074	TRUSTEE 0.50	0.	0.	0.
HARRISON GALE 2360 CORPORATE CIRCLE SUITE 330 HENDERSON, NV 89074	TRUSTEE 0.50	0.	0.	0.
ARIEL GREENSPUN GALE 2360 CORPORATE CIRCLE SUITE 330 HENDERSON, NV 89074	TRUSTEE 0.50	0.	0.	0.
JESSE GREENSPUN GALE 2360 CORPORATE CIRCLE SUITE 330 HENDERSON, NV 89074	TRUSTEE 0.50	0.	0.	0.
TOTALS INCLUDED ON 990-PF, PAGE 6	, PART VIII	0.	0.	0.
	XV - LINE 1A OUNDATION MANAGE	ERS	STAT	EMENT 5

NAME OF MANAGER

JEFFREY GALE JANE GREENSPUN GALE FORM 990-PF

GRANT APPLICATION SUBMISSION INFORMATION PART XV, LINES 2A THROUGH 2D

STATEMENT

NAME AND ADDRESS OF PERSON TO WHOM APPLICATIONS SHOULD BE SUBMITTED

SCREENING COMMITTEE, JANE GREENSPUN GALE SAME AS ON PAGE 1

TELEPHONE NUMBER

702-259-4023

FORM AND CONTENT OF APPLICATIONS

NO PRESCRIBED FORM

ANY SUBMISSION DEADLINES

NONE

RESTRICTIONS AND LIMITATIONS ON AWARDS

THE NONPROFIT CORPORATION WAS ORGANIZED FOR THE PUBLIC BENEFIT SOLEY FOR GENERAL ELEEMOSYNARY PURPOSES, MORE SPECIFICALLY FOR THE PURPOSE OF DONATING FUNDS PRIMARILY TO OTHER ESTABLISHED 501(C)(3) ORGANIZATIONS WHICH BENEFIT EDUCATIONAL AND CHARTIBLE OPPORTUNITIES FOR THE ADVANCEMENT OF RELIGION, SCIENCE, AND THE ARTS.