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2017

OMB No 1545-0052

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

Form 990-PF

Department of the Treasury

Internal Revenue Service

Do not enter social security numbers on this form as it may be made public.
 Information about Form 990-PF and its instructions is at www.irs.gov/form990pf.

Open to Public Inspection

For	caler	ndar year 2017, or tax year beginning 01-0	1-20	17	, aı	nd er	nding 12-31-	2017	
CA	PRICOR	indation RN FOUNDATION CHARITABLE TRU N STEINBOCK					A Employer Id 31-1096396	entification numbe	r
			1	I p	. /		31-1090390		
	Der and D BOX 1	I street (or P O box number if mail is not delivered to street ac 17183	iaress)	Room	n/suite		B Telephone nu (502) 637-1451	mber (see instruction	ns)
		, state or province, country, and ZIP or foreign postal code						application is pendin	n check here
LOU	ISVILLE	, KY 40217					C II exemption	application is penalii	> L
G Cł	neck al	l that apply	ofat	former	public charity		D 1. Foreign or	ganızatıons, check he	ere 🕨 🗌
		☐ Final return ☐ Amended r						ganizations meeting k here and attach co	
		☐ Address change ☐ Name chan	-				E If private fou	undation status was t	erminated \Box
		pe of organization $oldsymbol{oldsymbol{arphi}}$ Section 501(c)(3) exempt properties $oldsymbol{\Box}$ Other to					under sectio	n 507(b)(1)(A), chec	k here 🕨 🗀
		ket value of all assets at end J Accounting methods		Ca priva		ادر	F If the founds	ation is in a 60-month	termination -
of	year <i>(f</i>	From Part II, col (c), \$ 1,576,260 ☐ Other (specific (Part I, column (d))	y) _			la i		n 507(b)(1)(B), chec	
Pa	rt I	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions)		(a)	Revenue and expenses per books	(b)	Net investment income	(c) Adjusted net	(d) Disbursements for charitable purposes
	1	Contributions, gifts, grants, etc , received (attach			DOOKS				(cash basis only)
	2	schedule) Check ▶ ☑ if the foundation is not required to attace.	:h						
		Sch B	•		105		405	105	
	3 4	Interest on savings and temporary cash investments Dividends and interest from securities			485 17,761		485 17,761	485 17,761	
	5a	Gross rents	•		17,701		17,701	17,761	
	b	Net rental income or (loss)	٠ ١						
e	6a	Net gain or (loss) from sale of assets not on line 10			188,374				
Revenue	ь	Gross sales price for all assets on line 6a			•				
eve		1,1	04,666						
~	7	Capital gain net income (from Part IV, line 2)	.				188,374	10.016	
	8	Net short-term capital gain	.					42,916	
	9 10a	1	.						
	b	Gross sales less returns and allowances Less Cost of goods sold		<u> </u> 					
	c	Gross profit or (loss) (attach schedule)		<u>. </u>					
	11	Other income (attach schedule)	.						
	12	Total. Add lines 1 through 11	.		206,620		206,620	61,162	
	13	Compensation of officers, directors, trustees, etc							
	14	Other employee salaries and wages	.						
Sè	15	Pension plans, employee benefits	.						
nse	16a	Legal fees (attach schedule)	.						
2	ь	Accounting fees (attach schedule)	.	% ∫	5,663		5,663		
e) e)	С	Other professional fees (attach schedule)	.	% ∫	18,194		12,736	5,458	
Ž	17	Interest	.		117		117		
stra	18	Taxes (attach schedule) (see instructions)	. [ارچھ	2,772		795	341	
ੂ	19	Depreciation (attach schedule) and depletion	. [
Ē	20	Occupancy	. [
ַ ק	21	Travel, conferences, and meetings	.						
ä	22	Printing and publications	.	20.1					
ğu:	23	Other expenses (attach schedule)	•	*	813				
Operating and Administrative Expenses	24	Total operating and administrative expenses.			27 552		10.341	F 700	
ă	25	Add lines 13 through 23	•		27,559		19,311	5,799	149,256
_	25		.		149,230				149,250
	26	Total expenses and disbursements. Add lines 24 25	ana		176,815		19,311	5,799	149,256
	27	Subtract line 26 from line 12			20.00				
	а	Excess of revenue over expenses and disbursements			29,805				
	Ь	Net investment income (if negative, enter -0-)					187,309	55.000	
Ee::	C	Adjusted net income(If negative, enter -0-)	•				0 N 4 ====	55,363	000 55 /
or	raper	work Reduction Act Notice, see instructions.				(Cat No 11289>	K For	m 990-PF (2017

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17

18

19

20

21 22

23

24

25

26

28

29

31 Part III

Liabilities

Balances

Fund

ŏ

Assets 27

Net 30

2

instructions Also, see page 1, item I)

Other liabilities (describe -_

Unrestricted . . .

Permanently restricted

and complete lines 27 through 31.

of-year figure reported on prior year's return)

Decreases not included in line 2 (itemize) .

Enter amount from Part I, line 27a

Other increases not included in line 2 (itemize) -

Temporarily restricted

Loans from officers, directors, trustees, and other disqualified persons Mortgages and other notes payable (attach schedule).

Total liabilities(add lines 17 through 22)

Foundations that do not follow SFAS 117, check here ▶ ✓

Paid-in or capital surplus, or land, bldg, and equipment fund

Retained earnings, accumulated income, endowment, or other funds

Total net assets or fund balances (see instructions)

Total liabilities and net assets/fund balances (see instructions) .

Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-

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

Analysis of Changes in Net Assets or Fund Balances

Foundations that follow SFAS 117, check here ▶

and complete lines 24 through 26 and lines 30 and 31.

Less allowance for doubtful accounts ▶ 4 Pledges receivable Less allowance for doubtful accounts ▶ 5 6 Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions) 7 Other notes and loans receivable (attach schedule) ▶ Less allowance for doubtful accounts ▶ 8 Assets 9 Prepaid expenses and deferred charges Investments—U S and state government obligations (attach schedule) 10a b C Investments—land, buildings, and equipment basis ▶ _ 11 Less accumulated depreciation (attach schedule) 12 1,474,014 1.533,109 13 14 Land, buildings, and equipment basis Less accumulated depreciation (attach schedule) 15 Other assets (describe > _ Total assets (to be completed by all filers—see the 16

1,521,173

943,689

577,484

1,521,173

1,521,173

1,550,978

943,689

607,289

1,550,978

1,550,978

2

3

4

5

6

1,521,173

1,550,978

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29,805

1.558,391

1,576,260

Page **3**

	(a) the kınd(s) of property sold (e g , re ehouse, or common stock, 200 shs		(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
1 a SEE ATTACHED			Р		2017-12-31
b SEE ATTACHED			Р		2017-12-31
c					
d					
	(f)		(g)	1	h)
(e) Gross sales price	Depreciation allowed		other basis		or (loss)
	(or allowable)	plus exp	ense of sale) minus (g)
a 68	1,316		638,400		42,916
b 39	7,854		277,892		119,962
С					
d					
e					
Complete only for assets	s showing gain in column (h) and ow	ned by the foundation	on 12/31/69		(1)
(i) F M V as of 12/31/69	(j)	Excess	(k) of col (ı) (j), ıf any	Gains (Col (col (k), but not	h) gain minus less than -0-) or om col (h))
a					42,916
b					119,962
c					
d					
e					
•	e or (net capital loss) gain or (loss) as defined in sections : rt I, line 8, column (c) (see instructi	. , . , .	· ,	3	188,374 42,916
(For optional use by domestic p If section 4940(d)(2) applies, le Was the foundation liable for th	Jnder Section 4940(e) for Reprivate foundations subject to the section this part blank e section 4942 tax on the distributate of qualify under section 4940(e).	ction 4940(a) tax on ne	et investment incom	ne)	es 🗹 No
	nount in each column for each year,			c	
(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitab		(d) Distribution rat (col (b) divided by o	
2016	180,367		1,807,133		0 099808
2015	116,350		2,044,563		0 056907
2014	128,683		2,033,743		0 063274
2013	101,100		1,807,011		0 055949
2012	67,600		1,550,485		0 043599
2 Total of line 1, column (d)		2		0 319537
number of years the four 4 Enter the net value of no	o for the 5-year base period—divide indation has been in existence if less incharitable-use assets for 2017 from	than 5 years n Part X, line 5	3 4		0 063907 1,640,569
5 Multiply line 4 by line 3			5		104,844
	ent income (1% of Part I, line 27b)		6		1,873
			7		106,717
If line 8 is equal to or gre	ons from Part XII, line 4 , . . Pater than line 7, check the box in Pa		<u>8</u> nplete that part usin	 ng a 1% tax rate Se	149,256 e the Part VI
instructions				F	orm 990-PF (2017

If yes, did the foundation receive any proceeds or have any net income attributable to the transaction?.

7b

	Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employe	es,
Part VIII	and Contractors	-

1 List all officers, directors, trustee	es, f	oundation managers ar	d their compensation	(see instructions).	
(a) Name and address	(Title, and average hours per week b) devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	Expense account, (e) other allowances
ALLEN F STEINBOCK	TRU:	STEE	0	0	1 0
1700 CHEROKEE ROAD	1 00		, and the second se	_	
LOUISVILLE, KY 40205					
DAVID J STEINBOCK		STEE	0	0	C
2332 BROOKSIDE DRIVE	1 00				
LOUISVILLE, KY 40205					
E ANDREW STEINBOCK III	TRU:	STEE	0	0	· C
PO BOX 17183 LOUISVILLE, KY 40217	1 00				
2 Compensation of five highest-pa	id or	mployees (other than t	nose included on line 1	—see instructions) If no	ne enter "NONE "
2 compensation of five highest-par	ia ei	The state of the s		Contributions to	ne, enter NONE.
(a) Name and address of each employee pa more than \$50,000	nd	Title, and average hours per week (b) devoted to position	(c) Compensation	employee benefit plans and deferred (d) compensation	Expense account, (e) other allowances
NONE					
]			
		†			
		-			
		1			
Total number of other employees paid over	er \$5	50,000			
3 Five highest-paid independent co					E".
(a) Name and address of each person				e of service	(c) Compensation
NONE					
			1		
			†		
			-		
			4		
Total number of others receiving over \$50	,000	for professional services			
Part IX-A Summary of Direct (Chai	ritable Activities		·	
List the foundation's four largest direct charitable	activ	rities during the tax year Incl	ude relevant statistical inform	nation such as the number of	Evpenses
organizations and other beneficiaries served, con	feren	ces convened, research paper	s produced, etc		Expenses
1					
2					
2					
.					
4					_
Part IX-B Summary of Program	n-₽	elated Investments	(see instructions)		
•			·	and 2	Amaunt
Describe the two largest program-related inve	scme	into made by the foundation d	uring the tax year on lines 1	anu Z	Amount
1 N/A					
2					
All other program-related investments	See	instructions			
3					
Total. Add lines 1 through 3 .	_				
	- '				F 000 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

Amounts set aside for specific charitable projects that satisfy the

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

Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4

Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment

Adjusted qualifying distributions. Subtract line 5 from line 4.

3

4

5

2

3a 3h

4

5

149.256

1.873

147.383

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b Total for prior years

a From 2012.

b From 2013. . . . c From 2014. . .

d From 2015.

e From 2016.

Part

80,155

80,155

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(d)

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1	_	•	٠.	٠-	 _	•	/						
	X	ij	Ī	I		ι	Jı	n	d	is	tı	ri	Ì

-PF (20	017)	
4 1 1 4	Undistributed Income	(see instructions)

a Enter amount for 2016 only.

Excess distributions carryover, if any, to 2017

f Total of lines 3a through e.

d Applied to 2017 distributable amount. . . . e Remaining amount distributed out of corpus

same amount must be shown in column (a))

5 Excess distributions carryover applied to 2017 (If an amount appears in column (d), the

a Corpus Add lines 3f, 4c, and 4e Subtract line 5 b Prior years' undistributed income Subtract line 4b from line 2b 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 assessed. d Subtract line 6c from line 6b Taxable amount e Undistributed income for 2016 Subtract line 4a from line 2a Taxable amount—see instructions f Undistributed income for 2017 Subtract lines 4d and 5 from line 1. This amount must be distributed in 2018 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) . . .

9 Excess distributions carryover to 2018.

10 Analysis of line 9

a Excess from 2013. . .

c Excess from 2015. . . .

d Excess from 2016. . .

e Excess from 2017. . .

b Excess from 2014. .

Subtract lines 7 and 8 from line 6a

6 Enter the net total of each column as

indicated below:

4 Qualifying distributions for 2017 from Part XII, line 4 ▶ \$ a Applied to 2016, but not more than line 2a **b** Applied to undistributed income of prior years (Election required—see instructions). c Treated as distributions out of corpus (Election

Distributable amount for 2017 from Part XI, line 7	_

Undistributed income, if any, as of the end of 2017

15,690

32 266

15.422 93,628

15.690 32,266

15.422

93.628

69.101

Corpus

157.006

69.101

226,107

226,107

(a)

(b)

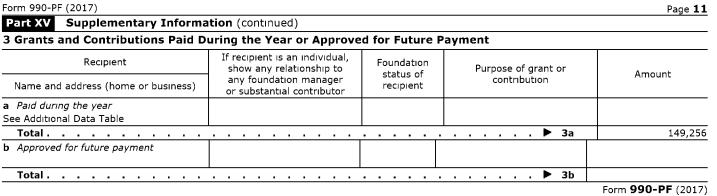
Years prior to 2016

2016

(c)

d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other

factors NONE



gross	amounts unless otherwise indicated	Unrelated bu	isiness income	Excluded by section	512, 513, or 514	(e) Related or exen
ogram	service revenue	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	function incom (See instruction
						
	and contracts from government agencies ship dues and assessments.					
nteres	st on savings and temporary cash			14	485	
	ds and interest from securities			14	17,761	
	tal income or (loss) from real estate					
	inanced property					
	ntal income or (loss) from personal property					
ther in	vestment income					
	r (loss) from sales of assets other than			4.0	100 274	
	ory			18	188,374	
	rofit or (loss) from sales of inventory					
ther r	evenue a					
ubtota otal. A	Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) rksheet in line 13 instructions to verify calcul B Relationship of Activities to th	ations) e Accomplish	ment of Exem	pt Purposes	206,620	
ubtota otal. A see wo t XVII	Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) rksheet in line 13 instructions to verify calculationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex	ations) e Accomplish income is reporte	ment of Exem	pt Purposes If Part XVI-A contribut	ted importantly to	
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ubtota otal. A see wo : XVII	Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) rksheet in line 13 instructions to verify calculationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex	ations) e Accomplish income is reporte	ment of Exem	pt Purposes If Part XVI-A contribut	ted importantly to	
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ubtota otal. A	Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) rksheet in line 13 instructions to verify calculationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex	ations) e Accomplish income is reporte	ment of Exem	pt Purposes If Part XVI-A contribut	ted importantly to	

orm 99	90-PF (2	017)							Pa	ge 13
Part	XVII	Information Re Exempt Organi		ansfers To a	and Transactio	ns and Relatio	onships With Nonchai	itable		
		anization directly or in ode (other than sectio					on described in section 50: organizations?		Yes	No
a Tran	nsfers fr	om the reporting foun	dation to a no	oncharitable ex	empt organization	of				
(1)	Cash.							1a(1)		No
(2)	Other	assets						1a(2)		No
b Oth	er trans	actions								
		of assets to a nonchari	•	-				1b(1)	1	No
		ises of assets from a n						1b(2)		No
		of facilities, equipmer	•					1b(3)	 	No
		ursement arrangemen						1b(4)	 	No
٠.		or loan guarantees.						1b(5)	 	No
٠.,		nance of services or m	•	-				1b(6) 1c		No No
	-	acilities, equipment, n					lways show the fair market			NO
(a) Line		(b) Amount involved	(c) Nume of the	noncharitable exe		(d) Description o	f transfers, transactions, and sl	and the second	ngemer	
des	cribed in	dation directly or indire in section 501(c) of the implete the following so (a) Name of organization	Code (other	than section 50		ion 527?		Yes	V	No
Sign	of my which	knowledge and belief preparer has any kno	, it is true, co		plete Declaration	of preparer (other	ring schedules and statemer than taxpayer) is based o		rmatioi	n of
Here	-	***** 	rustee		2018-05-24 Date)	ret. with belo	rn the prepa w	rer shov	wn
		ignature of officer of the	1			Tide	(see	ınstr)?	✓ Yes	□No
Paid		Print/Type preparer's BARBARA LASKY	name	Preparer's Sigr	nature	Date 2018-05-24	Check if self- employed ▶ ☐	P0001	5280	
Prep.	arer	Firm's name ▶ BALD	OWIN CPAS PI	LLC		1	<u> </u>			

Use Only Firm's EIN ▶20-1416603 Firm's address ▶ 943 S 1ST STREET Phone no (502) 584-9793 LOUISVILLE, KY 40203 Form **990-PF** (2017)

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager recipient Name and address (home or business) or substantial contributor

a Paid during the year			
BLUEGRASS CENTER FOR AUTISM 1250 BARDSTOWN ROAD 15 LOUISVILLE, KY 40204	501(C)(3)	DONATION	1,000

BOY SCOUTS OF AMERICA PO BOX 152079 IRVING, TX 75015	501(C)(3)	DONATION	35,000
LOUISVILLE, KY 40204			

PO BOX 152079 IRVING, TX 75015			
BOYS HAVEN2301 GOLDSMITH LANE LOUISVILLE, KY 40218	501(C)(3)	DONATION	1,000
BOYS & GIRLS CLUB OF KENTUCKIANA	501(C)(3)	DONATION	1 000

BOYS HAVEN2301 GOLDSMITH LANE LOUISVILLE, KY 40218	501(C)(3)	DONATION	1,000
BOYS & GIRLS CLUB OF KENTUCKIANA 3900 CRITTENDEN DRIVE LOUISVILLE, KY 40209	501(C)(3)	DONATION	1,000

DADE TO CAREEON FERNANCE EV. BOAR	E04(0)(0)	DOMETICAL	2.000
BOYS & GIRLS CLUB OF KENTUCKIANA 3900 CRITTENDEN DRIVE LOUISVILLE, KY 40209	501(C)(3)	DONATION	1,000
E0015 VILLE, R1 +0210			

3900 CRITTENDEN DRIVE LOUISVILLE, KY 40209	301(0)(0)		1,000
DARE TO CARE5804 FERN VALLEY ROAD LOUISVILLE, KY 40228	501(C)(3)	DONATION	3,000

20015 VILLE, KT 40205			I
DARE TO CARE5804 FERN VALLEY ROAD LOUISVILLE, KY 40228	501(C)(3)	DONATION	3,

DARE TO CARE5804 FERN VALLEY ROAD LOUISVILLE, KY 40228	501(C)(3)	DONATION	3,
Total	 		149,256

За

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year DENTAL FOUNDATION OF NO. 501(C)(3) DONATION 6.000 CAMPUS BOX 7450 CHAPEL HILL, NC 27599 DTA FOUNDATION4350 FAIRFAX DR 501(C)(3) DONATION 4,000 STF 220 ARLINGTON, VA 22203 FALLS OF THE OHIO DONATION 500 501(C)(3) 201 W RIVERSIDE DR CLARKSVILLE, IN 47129 **FAMILY & CHILDRENS PLACE** 501(C)(3) DONATION 1,000 525 ZANE ST LOUISVILLE, KY 40203 FDTN FOR DENTAL LABORATORY DONATION 1,000 501(C)(3) TECHNOL

325 JOHN KNOX ROAD NO L-1

TALLAHASSEE, FL 32303

Total 149,256 За

If recipient is an individual, Foundation Purpose of grant or Amount Recipient show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year 4,000

FUND FOR THE ARTS 501(C)(3) DONATION 623 W MAIN STREET LOUISVILLE, KY 40202 HEALING PLACE1020 W MARKET ST 501(C)(3) DONATION

LOUISVILLE, KY 40202 501(C)(3) DONATION

HILDGARD HOUSE114 ADAMS STREET 800 LOUISVILLE, KY 40206 HOLY SPIRIT CHURCH 501(C)(3) DONATION 500 3345 LEXINGTON ROAD

2,000

LOUISVILLE, KY 40206 501(C)(3) DONATION 500

HOLY TRINTIY CHURCH 501 CHERRYWOOD ROAD LOUISVILLE, KY 40207

Total 149,256

3a

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager recipient Name and address (home or business)

or substantial contributor

Total .

3a

a Paid during the year			
IU-PUI SCHOOL OF DENTISTRY 402 NORTH BLACKFORD INDIANAPOLIS, IN 46202	501(C)(3)	DONATION	2,000

JUNIOR ACHIEVEMENT 1401 W MUHAMMAD ALI BLVD LOUISVILLE, KY 40203	501(C)(3)	DONATION	4,000
LIBRARY FOUNDATION	501(C)(3)	DONATION	10,000

LOUISVILLE, RY 40203			
LIBRARY FOUNDATION 301 YORK STREET LOUISVILLE, KY 40203	501(C)(3)	DONATION	10,000
LICHT HOUSE PROMISE INC	E01/C\/2\	DONATION	2 000

301 YORK STREET LOUISVILLE, KY 40203			
LIGHT HOUSE PROMISE INC 5312 SHEPHERDSVILLE ROAD LOUISVILLE, KY 40228	501(C)(3)	DONATION	2,000

LIGHT HOUSE PROMISE INC 5312 SHEPHERDSVILLE ROAD LOUISVILLE, KY 40228	501(C)(3)	DONATION	2,000
METRO UNITED WAY334 E BROADWAY	501(C)(3)	DONATION	20,256

LOUISVILLE, KY 40228			
METRO UNITED WAY334 E BROADWAY LOUISVILLE, KY 40202	501(C)(3)	DONATION	20,25

149,256

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year NATURE CONSERVANCY 501(C)(3) DONATION 10,000 5885 WULFMAN RD SE LACONIA, IN 47135

NEW DIRECTION HOUSING CORP 1029 1000 E LIBERTY ST LOUISVILLE, KY 40204	501(C)(3)	DONATION	10,000
NORTHEASTERN GNATHOLOGICAL SOCIETY	501(C)(3)	DONATION	1,000

DRI HEASTERN GNATHOLOGICAL DCIETY 26 HUDSON ST ACKENSACK, NJ 07601	501(C)(3)	DONATION	
RAL HEALTH AMERICA 80 N MICHIGAN AVE JITE 1150	501(C)(3)	DONATION	

3a

HACKENSACK, NJ 07601			
ORAL HEALTH AMERICA 180 N MICHIGAN AVE SUITE 1150 CHICAGO, IL 60601	501(C)(3)	DONATION	4,000
PLANNED PARENTHOOD OF INKY	501(C)(3)	DONATION	900

ORAL HEALTH AMERICA 180 N MICHIGAN AVE SUITE 1150 CHICAGO, IL 60601	501(C)(3)	DONATION	4,000
PLANNED PARENTHOOD OF INKY 200 SOUTH MERIDIAN STREET PO BOX 397	501(C)(3)	DONATION	900

Total	 		149,256
PLANNED PARENTHOOD OF INKY 200 SOUTH MERIDIAN STREET PO BOX 397 INDIANAPOLIS, IN 46206	501(C)(3)	DONATION	900
CHICAGO, IL 60601			

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business)

	or substantial contributor			
a Paid during the year				
SPEED ART MUSEUM 2035 S 3RD STREET		501(C)(3)	DONATION	5,000

SPEED ART MUSEUM 2035 S 3RD STREET COUISVILLE, KY 40208	501(C)(3)	DONATION	5,0
ST FRANCIS OF ASSISI CHURCH	501(C)(3)	DONATION	5

LOUISVILLE, KY 40208			
ST FRANCIS OF ASSISI CHURCH 1960 BARDSTOWN ROAD LOUISVILLE, KY 40205	501(C)(3)	DONATION	500
ST XAVIER HIGH SCHOOL	501(C)(3)	DONATION	1 000

1960 BARDSTOWN ROAD LOUISVILLE, KY 40205			
ST XAVIER HIGH SCHOOL 1609 POPLAR LEVEL RD LOUISVILLE, KY 40217	501(C)(3)	DONATION	1,000

*			
ST XAVIER HIGH SCHOOL 1609 POPLAR LEVEL RD LOUISVILLE, KY 40217	501(C)(3)	DONATION	1,000
TREES LOUISVILLE	501(C)(3)	DONATION	2,000

LOUISVILLE, KY 40217			
TREES LOUISVILLE 3110 LEXINGTON ROAD LOUISVILLE, KY 40206	501(C)(3)	DONATION	2,000

TREES LOUISVILLE 3110 LEXINGTON ROAD LOUISVILLE, KY 40206	501(C)(3)	DONATION	2,000
THE PANKEY INSTITUTE	501(C)(3)	DONATION	1,800

LOUISVILLE, KY 40206			
THE PANKEY INSTITUTE 1 CRANDON BLVD KEY BISCAYNE, FL 33149	501(C)(3)	DONATION	1,800

149,256

Total .

3a

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year THE PARKLANDS OF FLOYDS FORK 501(C)(3) DONATION 1,000 **471 WEST MAIN STREET**

SUITE 202

LOUISVILLE, KY 40202

UK COLLEGE OF DENTISTRY 800 ROSE STREET DENTAL WING LEXINGTON, KY 40536	501(C)(3)	DONATION	
UNITED WAY OF LARIMER COUNTY	501(C)(3)	DONATION	

LEXINGTON, KY 40536			
UNITED WAY OF LARIMER COUNTY 424 PINE ST FORT COLLINS, CO 80524	501(C)(3)	DONATION	2,000
LINIVERSITY OF LOUISVILLE	501(C)(3)	DONATION	500

2,000

UNITED WAY OF LARIMER COUNTY 424 PINE ST FORT COLLINS, CO 80524	501(C)(3)	DONATION	2,000
UNIVERSITY OF LOUISVILLE 2301 S 3RD ST LOUISVILLE, KY 40292	501(C)(3)	DONATION	500

UNIVERSITY OF LOUISVILLE 2301 S 3RD ST LOUISVILLE, KY 40292	501(C)(3)	DONATION	500
U OF L FOUNDATION215 CENTRAL AVE	501(C)(3)	DONATION	8.000

2301 S 3RD ST LOUISVILLE, KY 40292	. ,. ,		
U OF L FOUNDATION215 CENTRAL AVE SUITE 212	501(C)(3)	DONATION	8,000

2001011222,111 10232			
U OF L FOUNDATION215 CENTRAL AVE SUITE 212 LOUISVILLE, KY 40208	501(C)(3)	DONATION	8,000

efile GRAPHIC print - DO NOT PROCESS	As Filed D	ata -	D	LN: 93491144005128
TY 2017 Accounting Fees Sc	hedule			
Name	e: CAPRICC	RN FOUNDATION C	CHARITABLE TRU	
	C/O ALLE	EN STEINBOCK		
EIN	N: 31-1096	396		
Accounting Fees Schedule				
Category A	mount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
INDIRECT ACCOUNTING FEES	5,663	5,663		

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN: 93491144005128
TY 2017 Investments - Other	Schedule		
Name:	CAPRICORN FOUNDAT	ION CHARITABLE TRU	
	C/O ALLEN STEINBOCH	<	
EIN:	31-1096396		
Investments Other Schedule 2			

Investments Other Schedule 2					
Category/ Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value		
SEE ATTACHED SCHEDULE	AT COST	1,533,109	1,558,391		

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DL	N: 93491144005128
TY 2017 Other Expenses School	edule			
Name:	CAPRICORN FO	UNDATION CHAR	ITABLE TRU	
	C/O ALLEN STEINBOCK			
EIN: 31-1096396				
Other Expenses Schedule		i.		
Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
EXPENSES				
BANK SERVICE CHARGES	197			
DUES, MEMBERSHIPS, PUBLICATIO	575			
PORTFOLIO DEDUCTIONS	41			

efile GRAPHIC print - DO NOT PROCE	SS As Filed Data	-	DLN	N: 93491144005128		
TY 2017 Other Professiona	al Fees Schedu	le				
Name: CAPRICORN FOUNDATION CHARITABLE TRU						
	C/O ALLEN STEINBOCK					
E	IN: 31-1096396					
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes		

12,736

5,458

31 1030330					
Category	Amount	Net Investment Income	Adjusted Net Income		

18,194

efile GRAPHIC print - DO NOT PROC	CESS As Filed Data	-	DLN	N: 93491144005128
TY 2017 Taxes Schedule				
Name: CAPRICORN FOUNDATION CHARITABLE TRU				
C/O ALLEN STEINBOCK				
EIN: 31-1096396				
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
FOREIGN TAXES	1,136	795	341	
ESTIMATED TAXES	1,636			