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

OMB No 1545-0052

Department of the Treasury Internal Revenue Service

▶ 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.

Open to Public Inspection

For	calen	dar year 2017 or tax year beginning	, 2	017, and	ending		, 20
Name of foundation  A Employer identification number							er
RI	FKIN	FAMILY FOUNDATION			31-1	192429	
Nui	mber an	d street (or P O box number if mail is not delivered to street address)	Ro	om/suite	<b>B</b> Telephor	ne number (see instructi	ons)
56	42 C	OVENTRY LANE			(260	) 432-2233	
City	y or tow	n, state or province, country, and ZIP or foreign postal code			C If exemp	tion application is pend	ıng, check here ▶ 🗌
FO	RT W	AYNE IN 46804					
G	Check	all that apply:  Initial return Initial return Initial return	n of a former put	lic charity	D 1. Foreig	n organizations, check	here ▶□
		☐ Final return ☐ Amended	return		2 Foreig	n organizations meeting	the 85% test.
		Address change Name cha	nge		check	here and attach compu	itation ▶ 🗌
		type of organization: X Section 501(c)(3) exempt p				foundation status was 07(b)(1)(A), check here	terminated under
	Sectio	n 4947(a)(1) nonexempt charitable trust 🔲 Other tax	xable private fou	undation\		(b)(1)(1)(1), one on the le	
		narket value of all assets at $\mid \mathbf{J} \mid$ Accounting method	I. 🗵 Cash 🔲	Accrual	F If the fou	ndation is in a 60-mont	h termination
		f year (from Part II, col. (c), Other (specify)			under se	ction 507(b)(1)(B), checl	k here ►
	line 16	(Part I, column (d) must be 7,194,578.	on cash basis.)	_ ,		<u> </u>	
.Pa	art I	Analysis of Revenue and Expenses (The total of	(a) Revenue and	(b) Ne	t investment	(c) Adjusted net	(d) Disbursements for charitable
		amounts in columns (b), (c), and (d) may not necessarily equal	expenses per books		ncome	income	purposes
	·	the amounts in column (a) (see instructions).)				MPLE. T NO. 17 F	(cash basis only)
	1	Contributions, gifts, grants, etc., received (attach schedule)	100,000		1,7 2,7 (	13. 13 - 18.14 ·	了。近 但 "是想是里
	2	Check ► ☐ If the foundation is <b>not</b> required to attach Sch. B	Print Tist.	<u> </u>	int white	m - De Sallen	25.00 mm 1 m
	3	Interest on savings and temporary cash investments					智慧是原始的一個
	4	Dividends and interest from securities	231,551	2	220,436.	<u> </u>	最小のは 八郎
	5a	Gross rents	A	1 (2)	4. 4 6	7 3 9993	Military 1
_	ь	Net rental income or (loss)				The Carles	PARTIE RESTOR
Ĕ	6a	Net gain or (loss) from sale of assets not on line 10	53, 769	7. 11	<b>門往日</b>	表版 二二十	
Je.	_b	Gross sales price for all assets on line 6a 3,563,680.	AFLILLIE			大学 · · · · · · · · · · · · · · · · · · ·	ALERT ME SUM
2(Ri§venue	7	Capital gain net income (from Part IV, line 2)	of the transfer of the se			62,204.	CALCARACTE OF LENGTH
20	8	Net short-term capital gain	The state of the s	9471 . 77	2000年 (1)	02,204.	\$17565 265745CT74
2	10a	Gross sales less returns and allowances	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	3. 2 275,70	1 技术设计师	江西城 汗孔 江北。	<b>你不知识是</b>
83	b	Less: Cost of goods sold			To A TO A POST	THE PARTY	杨川"五湖湖區
FEB	c	Gross profit or (loss) (attach schedule)			, r r		Willy of the Sil
正	11	Other income (attach schedule) See. Stmt	313		8,967.		WELLS STATE
Ω	12	Total. Add lines 1 through 11	385,633		91,607.	62,204.	DECEMBER 1
Z	13	Compensation of officers, directors, trustees, etc.					
Zig	14	Other employee salaries and wages					
(a)	15	Pension plans, employee benefits					
œ	16a	Pension plans, employee benefits Legal fees (attach schedule) ECEIVED					
EL CO	b	Accounting fees (attach schedule)					
Ě	С	Accounting fees (attach schedule)	26,314	1.	23,186.		
tra	17	interest			797.		
Jis	18	Taxes (attach schedule) (see instructions) Sea. Stmt	2,764	1.	1,967.		1223 segue of Caracasa
Ē	19	Depreciation (attach schedule) and depletion					HE: MERCHUM
Ad	20	Occupancy		_			
ק	21	Travel, conferences, and meetings			<u> </u>		<del> </del>
ä	22	Printing and publications	-	-	1 510		
ng	23 24	Other expenses (attach schedule) See Stmt.  Total operating and administrative expenses.	30	<del>/ •  </del>	1,518.		
ati	24	Add lines 13 through 23	20.22	_	27 460		
Operating and Administrative EXPEASMED	25	Contributions, gifts, grants paid	29,385	la Mari	27,468.	Martin Translation	190 011
Ō	26 26	Total expenses and disbursements. Add lines 24 and 25	519,229		27,468.	S.M. SELL STREET, TO	489,844. 489,844.
	27	Subtract line 26 from line 12:	17513 317	7 ·	21,400.	11.50	1 7 1 4 4 4 4
	a	Excess of revenue over expenses and disbursements	-133,590	2 P 3 4	237		Constitution for
	b	Net investment income (if negative, enter -0-) .	10431 117A	(36)	264,139.	1 (2)	W. halles and
	c	Adjusted net income (if negative, enter -0-)	THE THE PARTY			62,204.	La Allera

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For Paperwork Reduction Act Notice, see instructions.

Accounts receivable ► Less: allowance for doubtful accounts ►  Pledges receivable ► Less: allowance for doubtful accounts ►  Receivables due from officers, directors, trustees, and other disqualified persons datach schedule) (see instructions)  7 Other notes and loans receivable (attach schedule) ► Less. allowance for doubtful accounts ► Less. accumulated seprement obligations (attach schedule) Less. allowance for doubtful accounts ► Less. accumulated seprement basis ► Less. accumulated seprement basis ► Less. accumulated seprement basis ► Less. accumulated depreciation (fattach schedule) ► Less. accumulated feet for fattach schedule) ► Less. accumulated feet for fattach schedule) ► Less. accumulated feet for fattach schedule Fattach sched	Dá	Seek III	Attached schedules and amounts in the description column	Beginning of year			t year
1	Pá	irt II	should be for end-of-year amounts only. (See instructions)	(a) Book Value	(b) Book Valu	ie	(c) Fair Market Value
2 Savings and temporary cash investments  3 Accounts receivable ▶ Less: allowance for doubtful accounts ▶ 4 Plodges receivable Less: allowance for doubtful accounts ▶ 5 Grants receivable 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 Inventiories for sale or use 9 Prepaid expenses and deferred charges 10a Investments—Corporate bonds (attach schedule) ▶ Investments—Corporate bonds (attach schedule) ↑ Investments—Corporate bonds (a		1		·			
Less allowance for doubtful accounts ►  Less allowance for doubtful accounts ►  Plodges receivable Less: allowance for doubtful accounts ►  Grants receivable Sub- Less: allowance for doubtful accounts ►  Grants receivable Grants receivable (altach schedule) For the standard of the sta		2	<u> </u>	2,418,997.	303,8	87.	303,887.
Less: allowance for doubtful accounts ▶  4 Pledges receivable    5 Grants receivable    6 Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions)  7 Other notes and loars receivable (attach schedule)    10a Investments — U.S. and state government obligations (attach schedule)    1 Investments — U.S. and state government obligations (attach schedule)    1 Investments — U.S. and state government obligations (attach schedule)    1 Investments — U.S. and state government obligations (attach schedule)    1 Investments — Orgonate stock (attach schedule)    1 Investments — Corporate bonds (attach schedule)    1 Investments — I.S. and state schedule)    1 Investments — I.S. and state schedule    2 Investments — I.S. and state schedule    2 Investments — I.S. and state schedule    3 Investments — I.S. and state schedule    4 Investments — I.S. and state schedule    5 Investments — I.S. and state schedule    5 Investments — I.S. and state schedule    6 Investments — I.S. and state schedule    6 Investments — I.S. and state schedule    7 Investments — I.S. and state schedule    8 Investments — I.S. and state schedule    9 Investments — I.S. and state schedule    1 Corporate assets (to be completed by all filers—see the instructions Also, see page 1, item 1)  1 Accounts payable and accrued expenses  1 Total assets (to be completed by all filers—see the instructions Also, see page 1, item 1)  1 Total liabilities (add lines 17 through 22)  2 Investricted  1 Total net assets of trund balances (see instructions)  1 Total net assets of fund balances (see instructions)  1 Total net assets or fund balances (see instructions)  1		3			, Pag		River Company
4 Pledges receivable ► Less: allowance for doubtful accounts ▶ 5 Grants receivable (a from officers, directors, trustees, and other disqualified persons (attach schedule)   ► 10 Place (a fine persons) (attach schedule)   ► 11 Place (a fine persons) (attach schedule)   ► 12 Place (a fine persons) (attach schedule)   ► 13 Investments—U.S. and state government obligations (attach schedule)   14 Investments—Lorporate stock (attach schedule)   15 Investments—corporate stock (attach schedule)   16 Investments—corporate stock (attach schedule)   17 Investments—and, buildings, and equipment basis ▶ Less accumulated depreciation (attach schedule)   18 Investments—other (attach schedule)   19 Investments—and, buildings, and equipment basis ▶ Less accumulated depreciation (attach schedule)   19 Investments—other (attach schedule)   10 Investments—other (attach schedule)   11 Investments—and (attach schedule)   12 Investments—other (attach schedule)   13 Investments—other (attach schedule)   14 Land, buildings, and equipment basis ▶ Less accumulated depreciation (attach schedule)   15 Other assets (to be completed by all filers—see the instructions. Also, see page 1, item 1)   16 Total assets (to be completed by all filers—see the instructions. Also, see page 1, item 1)   17 Accounts payable and accrued expenses   18 Grants payable   19 Deferred revenue   20 Loans from officers, directors, frustees, and other disqualified persons   21 Mortgages and other notes payable (attach schedule)   22 Deferred revenue   23 Total liabilities (admines 17 tirrough 22)   24 Deferred revenue   25 Temporanly restricted   26 Permanently restricted   27 Capital stock, frust principal, or current funds   28 Paid-nor capital surplus, or land, bdg, and equipment fund   29 Retained earnings, accumulated income, endowment, or other funds   20 Total net assets or fund balances (see instructions)   21 Total liabilities (and lines 17 tirrough 28   22 Paid-nor capital surplus, or land, bdg, and equipment fund   23 Total net assets or fund balances (			Less: allowance for doubtful accounts ▶				
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disqualified persons (attach schedule)   See instructions   7 Other notes and loans receivable (attach schedule)    Less. allowance for doubtful accounts ▶   8 Inventories for sale or use   9 Preparal expenses and deferred charges   9 Preparal expenses and deferred charges   10a Investments — corporate stock (attach schedule)   1 Investments — corporate stock (attach schedule)   1 Investments — corporate bonds (attach schedule)   1 Investments — corporate bonds (attach schedule)   1 Investments — and, buildings, and equipment basis ▶   1 Less. accumulated depreciation (attach schedule)   1 Investments — mortgage loans   1 Investments — mortgage loans   1 Investments — mortgage loans   1 Investments — other (attach schedule) ▶   1 Investments — other assets (for be completed by all filers — see the instructions Also, see page 1, item 1)   1 Investments — other assets (for be completed by all filers — see the instructions Also, see page 1, item 1)   1 Investments — other disqualified persons   1 Investments — other other payable and accrued expenses   1 Investments — other other payable (attach schedule)   1 Investments — other oth		5					
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Less, allowance for doubtful accounts ▶							
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12   Investments—mortgage loans   13   Investments—other (attach schedule)   L-13   Stmt   5,005,776   7,020,135   6,890,691     14   Land, buildings, and equipment basis   Less. accumulated depreciation (attach schedule)   15   Other assets (describe   16   Total assets (to be completed by all filers—see the instructions. Also, see page 1, item  )   7,424,773   7,324,022   7,194,578     17   Accounts payable and accrued expenses   18   Grants payable   19   Deferred revenue   20   Loans from officers, directors, trustees, and other disqualified persons   21   Mortgages and other notes payable (attach schedule)   22   Other liabilities (describe   23   Total liabilities (add lines 17 through 22)   23   Total liabilities (add lines 17 through 26, and lines 30 and 31   24   Unrestricted   25   Temporanly restricted   26   Permanently restricted   27   Permanently restricted   28   Paid-in or capital surplus, or land, bldg., and equipment fund   2,050,945   2,104,714   7,324,022   29   Retained earnings, accumulated income, endowment, or other funds   2,050,945   2,104,714   7,324,022   7,424,773   7,324,022   7,424,		''	Loss assumulated depresisting (attach schodule)				
13   Investments—other (attach schedule)   1-13   1.0   1		12	Investments - mortgage leans				
Less. accumulated depercation (attach schedule) ▶  15 Other assets (describe ▶  16 Total assets (to be completed by all filers—see the instructions. Also, see page 1, item 1)		1	Investments other (attach schodule) I,-13 Stmt	5 005 776	7 020 1	35	6 990 691
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Total assets (describe ► Total assets (to be completed by all filers—see the instructions. Also, see page 1, item i)  7, 424,773. 7,324,022. 7,194,578.  7,		14	Land, buildings, and equipment: basis		. 1 * 4		
16 Total assets (to be completed by all filers—see the instructions. Also, see page 1, item l)		45					<del></del>
Instructions. Also, see page 1, item i)			Total assets (to be completed by all filers—see the				
17 Accounts payable and accrued expenses		10	instructions Also see page 1 item 1)	2 404 772	7 204 0	^^	7 104 570
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19 Deferred revenue 20 Loans from officers, directors, trustees, and other disqualified persons 21 Mortgages and other notes payable (attach schedule) 22 Other liabilities (add lines 17 through 22)  7 Total liabilities (add lines 17 through 22)  8 Foundations that follow SFAS 117, check here and complete lines 24 through 26, and lines 30 and 31.  24 Unrestricted 25 Permanently restricted 26 Permanently restricted 27 Capital stock, trust principal, or current funds 28 Paid-in or capital surplus, or land, bldg., and equipment fund 29 Retained earnings, accumulated income, endowment, or other funds 30 Total net assets or fund balances (see instructions) 31 Total liabilities and net assets/fund balances (see instructions) 4 Total net assets or fund balances (see instructions) 5 Total net assets or fund balances (see instructions) 7 Total net assets or fund balances (see instruction							
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Total liabilities (add lines 17 through 22)  Foundations that follow SFAS 117, check here and complete lines 24 through 26, and lines 30 and 31.  Unrestricted  Temporarily restricted  Foundations that do not follow SFAS 117, check here  Permanently restricted  Foundations that do not follow SFAS 117, check here  Foundations that do not follow SFAS 117, check here  Permanently restricted  Foundations that do not follow SFAS 117, check here  Pand complete lines 27 through 31.  Total liabilities and net assets or fund balances (see instructions)  Total liabilities and net assets/fund balances  Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)  Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)  Enter amount from Part I, line 27a  Other increases not included in line 2 (itemize)  See Statement  Add lines 1, 2, and 3  Total liabilities and net assets or fund balances  Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)  Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)  Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)  Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)  Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)  Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)  Total net assets or fund balances at beg	Ë						
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Part III Analysis of Changes in Net Assets or Fund Balances  1 Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)	ō	27	Capital stock, trust principal, or current funds	834,789.	397,1	84.	10 12 W
Part III Analysis of Changes in Net Assets or Fund Balances  1 Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)	ţ	l					Ji (1, 2, 3)
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Part III Analysis of Changes in Net Assets or Fund Balances  1 Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)	et		· · · · · · · · · · · · · · · · · · ·	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
Part III       Analysis of Changes in Net Assets or Fund Balances         1 Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)       1 7,424,773.         2 Enter amount from Part I, line 27a       2 -133,596.         3 Other increases not included in line 2 (itemize)       See Statement       3 32,845.         4 Add lines 1, 2, and 3       4 7,324,022.	Z		· ·	7.424.773	7.324.0	22.	
1 Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)       1 7,424,773.         2 Enter amount from Part I, line 27a       2 -133,596.         3 Other increases not included in line 2 (itemize)       See Statement       3 32,845.         4 Add lines 1, 2, and 3       4 7,324,022.	Pa	rt III			.,52.,0	<del></del>	,
end-of-year figure reported on prior year's return)       1       7,424,773.         2 Enter amount from Part I, line 27a       2       -133,596.         3 Other increases not included in line 2 (itemize)       See Statement       3       32,845.         4 Add lines 1, 2, and 3       4       7,324,022.				mn (a), line 30 (mus	t agree with		
2 Enter amount from Part I, line 27a       2       -133,596         3 Other increases not included in line 2 (itemize) ► See Statement       3       32,845         4 Add lines 1, 2, and 3       4       7,324,022	•				•	1	7,424,773.
3 Other increases not included in line 2 (itemize) ► See Statement       3 32,845.         4 Add lines 1, 2, and 3	2						<del></del>
4 Add lines 1, 2, and 3	_						
5.5	_						
	_					5	
, , , , , , , , , , , , , , , , , , , ,	6	Tota	al net assets or fund balances at end of year (line 4 minus line 5)—	Part II, column (b). lii	ne 30		7,324,022.

Part	V Capital Gains and	Losses for Tax on Investme	ent Income			
	(a) List and describe the kin	id(s) of property sold (for example, real esta se, or common stock, 200 shs MLC Co)		(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr )
1a	WFA ACCT XXXX-2815	ST COVERED		P	Various	12/31/2017
b	WFA ACCT XXXX-2815	ST NONCOVERED		P	Various	12/31/2017
c	WFA ACCT XXXX-2815	LT COVERED		P	Various	12/31/2017
d	WFA ACCT XXXX-9964	LT NONCOVERED		P	Various	12/31/2017
е	See Statement					<u> </u>
	(e) Gross sales price	(f) Depreciation allowed (or allowable)		r other basis ense of sale		ain or (loss) s (f) minus (g))
a	223,392.			224,010.		-618.
<u>b</u>	24,307.			26,080.		-1,773.
С	24,515.			25,259.		-744.
<u>d</u>	83,241.			79,874.		3,367.
е	3,216,660.		. 45 - 6	3,154,688.		61,972.
	(i) FMV as of 12/31/69	wing gain in column (h) and owned by (j) Adjusted basis as of 12/31/69	(k) Exces	ss of col (i) I (j), if any	col (k), but n	tol (h) gain minus not less than -0-) <b>or</b> (from col (h))
а						-618.
b						
c						-744.
<u>d</u>	0.	0.		0.		3,367.
е	0.	0.		0.		61,972.
2	Capital gain net income or		lso enter in Pa enter -0- in Pa		2	62,204.
3 Part	If gain, also enter in Part Part I, line 8	n or (loss) as defined in sections 1 I, line 8, column (c). See instruct	tions. If (loss	), enter -0- in }	3 Income	62,204.
		section 4942 tax on the distributa ualify under section 4940(e). Do r			pase period?	☐ Yes 🗷 No
1	Enter the appropriate amo	unt in each column for each year	; see the instr	uctions before m	akıng any entries	<b>5.</b>
Cale	(a) Base period years endar year (or tax year beginning in)	(b) Adjusted qualifying distributions	Net value o	(c) of nonchantable-use a		(d) istribution ratio ) divided by col (c))
	2016	744,97	6.	6,747,2	255.	0.110412
	2015	407,83	6.	7,069,9	92.	0.057686
	2014	670,53	6.	8,095,3	95.	0.082829
	2013	417,29	6.	8,217,2	28.	0.050783
	2012	318,75	0.	8,412,6	577.	0.037889
2	Total of line 1, column (d)				. 2	0.339599
3		for the 5-year base period—dividual bundation has been in existence if				0.067920
4	Enter the net value of none	charitable-use assets for 2017 fro	om Part X, line	5	. 4	7,276,528.
5	Multiply line 4 by line 3				. 5	494,222.
6		nt income (1% of Part I, line 27b)			. 6	2,641.
7					. 7	496,863.
8		ns from Part XII, line 4				489,844.
J		ter than line 7, check the box in				

Part '		-see in	structi	ons)			
1a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1.	1 1.	Ν/A,				
	Date of ruling or determination letter: (attach copy of letter if necessary—see instructions)						
b	Bomeste foundations that most the section 4040(b) requirements in Fact 1, shoots						
_	here \bigsigma and enter 1% of Part I, line 27b	1.7.2					
С	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations, enter 4% of Part I, line 12, col. (b).			15-35			
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		<u>5,283.</u>				
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	<del></del>	5,283.	<del></del>			
6	Credits/Payments:	11					
а	2017 estimated tax payments and 2016 overpayment credited to 2017 6a 2,999.	,,,,,,		1 4			
b	Exempt foreign organizations—tax withheld at source 6b			1 1			
C	Tax paid with application for extension of time to file (Form 8868) . 6c	' [ , <b>`</b> ·	1 - 5-1	]]: ']			
_d	Backup withholding erroneously withheld		12	اسفسا			
7	Total credits and payments. Add lines 6a through 6d		2,999.	<del>'  </del>			
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached		2 204	<del> </del>			
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	_	2,284.				
10			0.	· <del> </del>			
11 Post							
1a	VII-A Statements Regarding Activities  During the tax year, did the foundation attempt to influence any national, state, or local legislation or	did it	77 Ye	s No			
Ia	participate or intervene in any political campaign?	-	1a	×			
ь	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? Se	e the	-14	<del>  ^-</del>			
b	instructions for the definition		1b	×			
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any mat	ļ <u>.</u>	52 1 7 1				
	published or distributed by the foundation in connection with the activities.		1 4				
С	Did the foundation file Form 1120-POL for this year?		1c	×			
ď	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:			1, 7			
_	(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 impo	sed		'   ' . <b>!</b>			
	on foundation managers. ▶ \$	Ĺ		<u> </u>			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	[	2	×			
	If "Yes," attach a detailed description of the activities.		, , 51				
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles	les of					
	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	[	3	×			
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?		4a	×			
b	If "Yes," has it filed a tax return on Form 990-T for this year?	L	4b				
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?		5	X			
	If "Yes," attach the statement required by General Instruction T.	-		.   4			
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:		~   ' ;				
	By language in the governing instrument, or	a 4h -4	1	30.3			
	By state legislation that effectively amends the governing instrument so that no mandatory directions     anglish with the state law remain in the governing instrument?	s that		لننا			
_	conflict with the state law remain in the governing instrument?		6 ×				
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 III, col. (c), and part	aπ XV	7 ×	1			
8a	Enter the states to which the foundation reports or with which it is registered. See instructions.		, · ·	45.4			
	IN  If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney Ge			1.13			
b		eneral	<u> </u>	لئا			
	(or designate) of each state as required by General Instruction G? If "No," attach explanation		8b ×				
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j						
	4942(j)(5) for calendar year 2017 or the tax year beginning in 2017? See the instructions for Part XIV. If "complete Part XIV	res,"					
	complete Part XIV		9	X			
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing	, <sub>*ba:-</sub>	<del></del>	+^			

Pari	VII-A Statements Regarding Activities (continued)			
		٠٠,	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		×
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		×
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	×	<del>  ^-</del>
13	Website address ► N/A			<u> </u>
14	The books are in care of ► JENNIFER L. WILSON Telephone no. ► (260)	432-	2233	}
	Located at ▶ 5642 COVENTRY LANE FORT WAYNE IN ZIP+4 ▶ 46804	-714	0	
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		r	1
16	At any time during calendar year 2017, did the foundation have an interest in or a signature or other authority		Yes	No
	over a bank, securities, or other financial account in a foreign country?	16	L	×
	See the instructions for exceptions and filling requirements for FinCEN Form 114. If "Yes," enter the name of the foreign country ▶	'[: `	٠.	
Dari	VII-B Statements Regarding Activities for Which Form 4720 May Be Required	1	<u> </u>	<u>'                                    </u>
rail	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.	7,	Yes	No
1a	During the year, did the foundation (either directly or indirectly):	1 1		
ıa	(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	7	,	-
	disqualified person?	-	١,	, '
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes 🗵 No	1.	- '	۱, ۱
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	Ι,	- ,	
	(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)?	l.		· 41
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the			٠,٠
	foundation agreed to make a grant to or to employ the official for a period after		1	
L	termination of government service, if terminating within 90 days.)	ļ,		. ;
b	If any answer is "Yes" to 1a(1)–(6), did <b>any</b> 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	10		
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that	1 '		
	were not corrected before the first day of the tax year beginning in 2017?	1c		×
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private	• •€	1.	75
	operating foundation defined in section 4942(j)(3) or 4942(j)(5)):		14.	7
а	At the end of tax year 2017, did the foundation have any undistributed income (lines 6d and	1.	۱ ۱	1. 1
	6e, Part XIII) for tax year(s) beginning before 2017?		٠,	. 1
	If "Yes," list the years ▶ 20, 20, 20, 20		1	: ]
b	Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2)	•	١.	' -
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement—see instructions.)	2b		
_	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.	1	r	
С	► 20 , 20 , 20 , 20, 20	7,1		
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise	al.		ļ, ļ
	at any time during the year?	1 .	i .	
ь	If "Yes," did it have excess business holdings in 2017 as a result of (1) any purchase by the foundation or	1		
-	disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the		] ,	١
	Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of		٦,	• ^ *
	the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the			نــــا
	foundation had excess business holdings in 2017.)	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	ļ	×
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2017?		سنا	1
	-cognigore concose mai naci noi deen removed nom recoandy dendre me mist day of me fax year decisiond in 2017 (	1 AP		. Y

Dana	f
rage	

Part	VII-B Statements Regarding Activities	for W	/hich Form	4720	May Be R	equire	d (contii	nued)			
5a	During the year, did the foundation pay or incur a								' '	Yes	No
	(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))? . $\square$ Yes $\square$ No									, "#	
	(2) Influence the outcome of any specific public election (see section 4955); or to carry on,									3	1
	directly or indirectly, any voter registration drive?									ţ.	. 34
	(3) Provide a grant to an individual for travel, study, or other similar purposes? Yes 🗵 No										
	(4) Provide a grant to an organization other than			-		ribed in	_	(C)			3 🖫
	section 4945(d)(4)(A)? See instructions									111	3
										57.4	1
b										3.5	
	Regulations section 53.4945 or in a current notice regarding disaster assistance? See instructions							5b	-		
	Organizations relying on a current notice regarding	-	-					▶□			11 1
С	If the answer is "Yes" to question 5a(4), does the	_				the tax		٠ ـ	12	79	4
	because it maintained expenditure responsibility						☐Yes	□No	1.		
	If "Yes," attach the statement required by Regula	tions s	ection 53.49	45–5(d)	l <u>.</u>			_			
6a	Did the foundation, during the year, receive any f					emiums					
	on a personal benefit contract?						☐ Yes	⊠ No			, i
b	Did the foundation, during the year, pay premium	s, dire	ctly or indired	ctly, on	a personal	benefit	contract	? .	6b		×
	If "Yes" to 6b, file Form 8870.								1 .	14,	
	At any time during the tax year, was the foundation a						Yes Yes	⊠ No	2		471
	If "Yes," did the foundation receive any proceeds								7b		
Pan	Information About Officers, Direct and Contractors	ors, i	rustees, F	ounda	tion mana	agers,	rignly i	'ald E	mpioy	ees,	
1	List all officers, directors, trustees, and found	ation r	nanagers an	d their	compens	ation. S	See instru	ıctions			
		(b) Title	e, and average	(c) Co	mpensation	(d) (	Contribution	s to	(e) Expe	nse acc	ount.
	(a) Name and address		rs per week ed to position		not paid, ter -0-)		yee benefit erred compe			allowan	
RIC	HARD S. RIFKIN	TRUS	ree								
	2 COVENTRY LANE FORT WAYNE IN 46804		0.50		0.			0.			0.
<b></b>											
2	Compensation of five highest-paid employee	s (oth	er than thos	se incl	uded on li	ne 1—	see instr	uction:	s). If n	one. e	enter
	"NONE."	(								,	
			(b) Title, and a	verage			(d) Contribu	utions to			
4	(a) Name and address of each employee paid more than \$50,000	0	hours per v	veek	(c) Comper	nsation	employee plans and	deferred	(e) Expe	nse acc allowan	
			devoted to p	JSILION			compen	sation			
NONE	·										
		-									
							i				
<del>-</del>											
ıotal	number of other employees paid over \$50,000 .	• •						. 🟲	0		

D 1 1/411	I A LOCK TO THE TOTAL STATE OF THE PARTY OF	- Ulable Daid Fa					
Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employ and Contractors (continued)							
3 Five I	nighest-paid independent contractors for professional services. See instruction	s. If none, enter "NON	E."				
<u>.                                      </u>	(a) Name and address of each person paid more than \$50,000 (b)	Type of service	(c) Compensation				
NONE			-				
<del></del>		· · · · · · · · · · · · · · · · · · ·	<del>                                     </del>				
			<del>                                     </del>				
		<u> </u>					
otal numbe	er of others receiving over \$50,000 for professional services	<u> ▶</u>	0				
Part IX-A	Summary of Direct Charitable Activities						
ait ix-A	Summary of Direct Offantable Activities	<u></u>	_				
	idation's four largest direct charitable activities during the tax year. Include relevant statistical informat s and other beneficiaries served, conferences convened, research papers produced, etc.	ion such as the number of	Expenses				
1							
'							
			<del></del>				
2							
3							
	- · · · · · · · · · · · · · · · · ·						
4							
Part IX-B	Summary of Program-Related Investments (see instructions)						
Describe the	two largest program-related investments made by the foundation during the tax year on lines 1 and 2		Amount				
1							
2							
All other pro	gram-related investments. See instructions						
3							
-							
			1				
otal. Add li	nes 1 through 3						
			Form <b>990-PF</b> (201				
			1 Onn 330-F1 (20)				

Part	X Minimum Investment Return (All domestic foundations must complete this part. Foreign	gn fo	undations,
	see instructions.)		
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purposes.		
а	Average monthly fair market value of securities	1a	6,228,163.
b	Average of monthly cash balances	1b	1,159,175.
C	Fair market value of all other assets (see instructions)	1c	
d	<b>Total</b> (add lines 1a, b, and c)	1d	7,387,338.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	7,387,338.
4	Cash deemed held for charitable activities. Enter 11/2% of line 3 (for greater amount, see		
	instructions)	4	110,810.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	7,276,528.
6	Minimum investment return. Enter 5% of line 5	6	363,826.
Part		ounda	ations
	and certain foreign organizations, check here ▶ ☐ and do not complete this part.)		
1	Minimum investment return from Part X, line 6	1	363,826.
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.)		
С	Add lines 2a and 2b	2c	5,283.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	358,543.
4	Recoveries of amounts treated as qualifying distributions	4	<u> </u>
5	Add lines 3 and 4	5	358,543.
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII,		
	line 1	7	358,543.
Part	XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:	40	400 044
a	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26	1a	489,844.
ь	Program-related investments—total from Part IX-B	1b	
2	purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
_	Suitability test (prior IRS approval required)	3a	
a 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	489,844.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income.		403,044.
•	Enter 1% of Part I, line 27b. See instructions	5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	489,844.
J	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating	لــتــا	<u></u>
	qualifies for the section 4940(e) reduction of tax in those years.	y wile	uner the louridation

Part	VIII Undistributed Income (see instruction	ons)			
1	Distributable amount for 2017 from Part XI,	(a) Corpus	(b) Years prior to 2016	(c) 2016	<b>(d)</b> 2017
	line 7				358,543.
2	Undistributed income, if any, as of the end of 2017:				
а	Enter amount for 2016 only			0.	
b	Total for prior years: 20,20,20				
3	Excess distributions carryover, if any, to 2017:				
а	From 2012 0.				
b	From 2013 0.	╡			
C	From 2014	-			
d	From 2015 0.	-			
e	From 2016				
f	Total of lines 3a through e	454,194.			
4	Qualifying distributions for 2017 from Part XII, line 4: ► \$ 489,844.				
_	Inne 4: ► \$ 489,844.  Applied to 2016, but not more than line 2a.				
a h	Applied to 2016, but not more than line 2a .  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				
e	Remaining amount distributed out of corpus	489,844.			
5	Excess distributions carryover applied to 2017	358,543.			358,543.
	(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:				
а	Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	585,495.			
b	Prior years' undistributed income. Subtract				
	line 4b from line 2b		0.		
С	Enter the amount of prior years' undistributed				
	income for which a notice of deficiency has				1
	been issued, or on which the section 4942(a) tax has been previously assessed				
	Subtract line 6c from line 6b. Taxable		···		
d	amount—see instructions		0.		
_	Undistributed income for 2016. Subtract line				
е	4a from line 2a. Taxable amount—see				
	instructions			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		<del></del>		
	to satisfy requirements imposed by section		ı		
	170(b)(1)(F) or 4942(g)(3) (Election may be			1	
	required—see instructions)				
8	Excess distributions carryover from 2012 not				
	applied on line 5 or line 7 (see instructions).	0.			
9	Excess distributions carryover to 2018.				ł
	Subtract lines 7 and 8 from line 6a	585,495.			
10	Analysis of line 9:			,	
а	Excess from 2013	4			
b	Excess from 2014 0.	4			l
C	Excess from 2015 0.	_			
d	Excess from 2016 95, 651.	4			
е	Excess from 2017 489, 844.				

Tomigas	70-11 (2011)	~				Tage 10
Part	XIV Private Operating Foundar	<b>tions</b> (see instru	ctions and Part	VII-A, question 9	)	N/A
1a	If the foundation has received a ruling					
	foundation, and the ruling is effective for	•	_		. <u> </u>	
b	Check box to indicate whether the four		operating foundat		ction 4942(j)(	3) or 🔲 4942(j)(5)
2a	Enter the lesser of the adjusted net	Tax year		Prior 3 years		(e) Total
	income from Part I or the minimum investment return from Part X for	(a) 2017	<b>(b)</b> 2016	(c) 2015	(d) 2014	
	each year listed					
b	85% of line 2a					/
C	Qualifying distributions from Part XII,					<b>y</b>
	line 4 for each year listed					<u></u> _
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.		•	<b>\</b>		
	Subtract line 2d from line 2c				/	
3	Complete 3a, b, or c for the alternative test relied upon:					
а	"Assets" alternative test-enter:			X		
	(1) Value of all assets					
	(2) Value of assets qualifying under					_
	section 4942(j)(3)(B)(i)				•	
b	"Endowment" alternative test—enter 2/3		j	/		
	of minimum investment return shown in Part X, line 6 for each year listed					
c	"Support" alternative test-enter:					
	(1) Total support other than gross					
	investment income (interest,					
	dividends, rents, payments on securities loans (section					
	512(a)(5)), or royalties)					
	(2) Support from general public				-	
	and 5 or more exempt organizations as provided in a					
	section 4942(j)(3)(B)(III)					
	(3) Largest amount of support from					\
	an exempt organization					
	(4) Gross investment income	/				
Part		-	-	ne foundation h	ad \$5,000 or mo	ore in assets at
	any time during the year-		s.)			
1	Information Regarding Foundation I					
а	List any managers of the foundation v					by the foundation
	before the close of any tax year (but o			an \$5,000). (See s	ection 507(d)(2).)	
	See Managers Contributed Mo					
b	List any managers of the foundation					rge portion of the
	ownership of a partnership or other er	itity) of which the	ioungation has a	10% or greater inte	erest.	
	N/A	0 10:01	0 1 1 11			
2	Information Regarding Contribution					<b></b>
	Check here ▶ 🖾 if the foundation unsolicited requests for funds. If the fo					
	complete items 2a, b, c, and d. See in		giris, grains, etc.,	to individuals of o	rgariizations under	other conditions,
	The name, address, and telephone nu		trace of the person	a to whom applica	tions should be ac	Idrassad:
а	me name, address, and telephone nu	mber or email auc	mess of the heisor	T to whom applica	aona anoulu de ac	1G1 G33GG.
	Saa Sunnlamantary Informati	ion Statemen	+			
	See Supplementary Informat. The form in which applications should			materials they sho	uld include:	
U	THE TOTAL III WITHOUT APPRICATIONS SHOULD	De Submitted diff	a milomitation and i	materials tries sile	aia moluut.	
	Any submission deadlines:					
·	, ary cubiniosion deadines.					
d	Any restrictions or limitations on aw	ards, such as b	y geographical ar	eas, charitable fie	elds, kinds of inst	titutions, or other
	factors:	,			•	-

Part XV Supplementary Information (continued)

3 Grants and Contributions Paid During the Year or Approved for Future Payment								
Recipient  If recipient is an individual, show any relationship to any foundation manager  Purpose of grant or status of contribution								
Name and address (home or business)	or substantial contributor	recipient	CONTRIBUTION					
a Paid during the year								
BLESSINGS IN A BACK PACK			ASSISTS IN					
111 EAST WAYNE ST STE 555			NUTRITIONAL NEEDS					
FORT WAYNE IN 46802		501 (C) 3	FOR CHILDREN	10,800.				
CONGREGATION ACHDUTH VESHOLOM								
5200 OLD MILL ROAD								
FORT WAYNE IN 46807		501 (C) 3	RELIGIOUS	8,500.				
FORT WAYNE CENTER FOR LEARNING			EDUCATION					
3310 MALLARD COVE LANE			LEARNING DISADVANTAGED					
FORT WAYNE IN 46804		501 (C) 3	CHILDREN	10,000.				
FRANCINE'S FRIENDS			MAMMOGRAPHY					
709 CLAY ST #300			SCREENING					
FORT WAYNE IN 46802		501 (C) 3		3,000.				
INDIANA UNIVERSITY FOUNDATION								
P O BOX 2298								
BLOOMINGTON IN 47402		501 (C) 3	EDUCATION	25,000.				
THE LITERACY ALLIANCE								
709 CLAY ST STE 100			ACADEMIC					
FORT WAYNE IN 46802		501 (C) 3	SERVICES	21,220.				
AVON FOUNDATION FOR WOMEN								
P.O. BOX 1073			SUPPORTS RESEARCH					
RYE NY 10580-1073		501 (C) 3	BREAST CANCER CURE	300.				
CLEVELAND CLINIC FLORIDA		, ,						
525 OKEECHOBEE BLVD STE 1400		1						
WEST PALM BEACH FL 33401		501 (C) 3	MEDICAL RESEARCH	4,000.				
INDIANA GOLF FOUNDATION			PROVIDES SUPPORT	·				
2625 HURRICANE RD			FOR YOUTH GOLF					
FRANKLIN IN 46131		501 (C) 3	PROGRAMS	25,000.				
See Statement			1					
				382,024.				
	<u> </u>							
Total	<u> </u>	<del></del>	▶ 3a	489,844.				
<b>b</b> Approved for future payment								
		1						
	<u></u>	<u> </u>						
Total			▶ 3b					

		/I-A Analysis of Income-Producing Ac	<del></del>		1=		· - · · · · · · · · · · · · · · · · · ·
Ente	r gro	ss amounts unless otherwise indicated.	Unrelated bu	isiness income	Excluded by sect	on 512, 513, or 514	{ (e)
1	Pro	gram service revenue:	(a) Business code	<b>(b)</b> Amount	(c) Exclusion code	(d) Amount	Related or exempt function income (See instructions)
٠	a	gram service revenue.	-				
	b						
	C						
	d			•			
	е			-			
	f					<del></del>	
	g	Fees and contracts from government agencies		· · · · · · · · · · · · · · · · · · ·	<u> </u>		
2	•	mbership dues and assessments					
3		rest on savings and temporary cash investments					
4		dends and interest from securities			14	231,551.	
5	Net	rental income or (loss) from real estate:		4			والمراز والمرازو
		Debt-financed property					
		Not debt-financed property					
6		rental income or (loss) from personal property					
7		er investment income					
8		n or (loss) from sales of assets other than inventory			18	53,769.	
9	Net	income or (loss) from special events					
10	Gro	ss profit or (loss) from sales of inventory					
11	Oth	er revenue: a					
	b						
	C						<u></u>
	d		-				<u></u>
	е						
12	Sut	ototal. Add columns (b), (d), and (e)			24 9	285,320.	
12	Our	notal. Add columns (b), (d), and (c)			J		L
13	Tot	al. Add line 12, columns (b), (d), and (e)				13	285,320.
<b>13</b> (See	<b>Tot</b> wor	<b>al.</b> Add line 12, columns (b), (d), and (e) ksheet in line 13 instructions to verify calculation	 ns.)				285,320.
13 (See Pa	Tot wor	al. Add line 12, columns (b), (d), and (e) ksheet in line 13 instructions to verify calculation  /I-B Relationship of Activities to the A	 ns.) Accomplishm	ent of Exemp	t Purposes	13	
13 (See Pal Lin	<b>Tot</b> wor	al. Add line 12, columns (b), (d), and (e) ksheet in line 13 instructions to verify calculation  /I-B Relationship of Activities to the A	 ns.) Accomplishm	ent of Exemp	t Purposes	13	
13 (See Pal Lin	Tot wor it X e No	al. Add line 12, columns (b), (d), and (e)	 ns.) Accomplishm	ent of Exemp	t Purposes	13	
13 (See Pal Lin	Tot wor it X e No	al. Add line 12, columns (b), (d), and (e) ksheet in line 13 instructions to verify calculation  /I-B Relationship of Activities to the A	 ns.) Accomplishm	ent of Exemp	t Purposes	13	
13 (See Pal Lin	Tot wor it X e No	al. Add line 12, columns (b), (d), and (e) ksheet in line 13 instructions to verify calculation  /I-B Relationship of Activities to the A	 ns.) Accomplishm	ent of Exemp	t Purposes	13	
13 (See Pal Lin	Tot wor it X e No	al. Add line 12, columns (b), (d), and (e) ksheet in line 13 instructions to verify calculation  /I-B Relationship of Activities to the A	 ns.) Accomplishm	ent of Exemp	t Purposes	13	
13 (See Pal Lin	Tot wor it X e No	al. Add line 12, columns (b), (d), and (e) ksheet in line 13 instructions to verify calculation  /I-B Relationship of Activities to the A	 ns.) Accomplishm	ent of Exemp	t Purposes	13	
13 (See Pal Lin	Tot wor it X e No	al. Add line 12, columns (b), (d), and (e) ksheet in line 13 instructions to verify calculation  /I-B Relationship of Activities to the A	 ns.) Accomplishm	ent of Exemp	t Purposes	13	
13 (See Pal Lin	Tot wor it X e No	al. Add line 12, columns (b), (d), and (e) ksheet in line 13 instructions to verify calculation  /I-B Relationship of Activities to the A	 ns.) Accomplishm	ent of Exemp	t Purposes	13	
13 (See Pal Lin	Tot wor it X e No	al. Add line 12, columns (b), (d), and (e) ksheet in line 13 instructions to verify calculation  /I-B Relationship of Activities to the A	 ns.) Accomplishm	ent of Exemp	t Purposes	13	
13 (See Pal Lin	Tot wor it X e No	al. Add line 12, columns (b), (d), and (e) ksheet in line 13 instructions to verify calculation  /I-B Relationship of Activities to the A	 ns.) Accomplishm	ent of Exemp	t Purposes	13	
13 (See Pal Lin	Tot wor it X e No	al. Add line 12, columns (b), (d), and (e) ksheet in line 13 instructions to verify calculation  /I-B Relationship of Activities to the A	 ns.) Accomplishm	ent of Exemp	t Purposes	13	
13 (See Pal Lin	Tot wor it X e No	al. Add line 12, columns (b), (d), and (e) ksheet in line 13 instructions to verify calculation  /I-B Relationship of Activities to the A	 ns.) Accomplishm	ent of Exemp	t Purposes	13	
13 (See Pal Lin	Tot wor it X e No	al. Add line 12, columns (b), (d), and (e) ksheet in line 13 instructions to verify calculation  /I-B Relationship of Activities to the A	 ns.) Accomplishm	ent of Exemp	t Purposes	13	
13 (See Pal Lin	Tot wor it X e No	al. Add line 12, columns (b), (d), and (e) ksheet in line 13 instructions to verify calculation  /I-B Relationship of Activities to the A	 ns.) Accomplishm	ent of Exemp	t Purposes	13	
13 (See Pal Lin	Tot wor it X e No	al. Add line 12, columns (b), (d), and (e) ksheet in line 13 instructions to verify calculation  /I-B Relationship of Activities to the A	 ns.) Accomplishm	ent of Exemp	t Purposes	13	
13 (See Pal Lin	Tot wor it X e No	al. Add line 12, columns (b), (d), and (e) ksheet in line 13 instructions to verify calculation  /I-B Relationship of Activities to the A	 ns.) Accomplishm	ent of Exemp	t Purposes	13	
13 (See Pal Lin	Tot wor it X e No	al. Add line 12, columns (b), (d), and (e) ksheet in line 13 instructions to verify calculation  /I-B Relationship of Activities to the A	 ns.) Accomplishm	ent of Exemp	t Purposes	13	
13 (See Pal Lin	Tot wor it X e No	al. Add line 12, columns (b), (d), and (e) ksheet in line 13 instructions to verify calculation  /I-B Relationship of Activities to the A	 ns.) Accomplishm	ent of Exemp	t Purposes	13	
13 (See Pal Lin	Tot wor it X e No	al. Add line 12, columns (b), (d), and (e) ksheet in line 13 instructions to verify calculation  /I-B Relationship of Activities to the A	 ns.) Accomplishm	ent of Exemp	t Purposes	13	
13 (See Pal Lin	Tot wor it X e No	al. Add line 12, columns (b), (d), and (e) ksheet in line 13 instructions to verify calculation  /I-B Relationship of Activities to the A	 ns.) Accomplishm	ent of Exemp	t Purposes	13	
13 (See Pal Lin	Tot wor it X e No	al. Add line 12, columns (b), (d), and (e) ksheet in line 13 instructions to verify calculation  /I-B Relationship of Activities to the A	 ns.) Accomplishm	ent of Exemp	t Purposes	13	
13 (See Pal Lin	Tot wor it X e No	al. Add line 12, columns (b), (d), and (e) ksheet in line 13 instructions to verify calculation  /I-B Relationship of Activities to the A	 ns.) Accomplishm	ent of Exemp	t Purposes	13	
13 (See Pal Lin	Tot wor it X e No	al. Add line 12, columns (b), (d), and (e) ksheet in line 13 instructions to verify calculation  /I-B Relationship of Activities to the A	 ns.) Accomplishm	ent of Exemp	t Purposes	13	
13 (See Pal Lin	Tot wor it X e No	al. Add line 12, columns (b), (d), and (e) ksheet in line 13 instructions to verify calculation  /I-B Relationship of Activities to the A	 ns.) Accomplishm	ent of Exemp	t Purposes	13	

Part 2	XVIÌ	Information		ing Trans	sfers to	and Trans	saction	s and R	elationsh	ips W	ith N	onchar	itable	Exe	mpt
	in sec	Organization of tion 501(c) (or tations?	directly or in											Yes	No
	(1) Cas	ers from the repsh sh er assets .	_		a noncha	ıritable exei	mpt org	anization	of: 				1a(1) 1a(2)		×
b	Other t	ransactions: es of assets to											1b(1)		×
	(3) Rer	chases of asse ntal of facilities, mbursement ar	, equipmen	nt, or other	assets					· · · · · · · · · · · · · · · · · · ·			1b(2) 1b(3) 1b(4)		×
	(6) Per	ins or loan guar formance of se g of facilities, ed	ervices or n	nembershi	p or fund	_	citations						1b(5) 1b(6) 1c		×
d	If the a	nswer to any of the goods, ot any transaction	of the above ther assets	ve is "Yes s, or servic	," comple es given	ete the follo	wing so	hedule. ( undation.	Column (b) If the foun	should dation	d alwa	ays show ved less	the f	air m	arket
(a) Line		Amount involved				npt organization			ption of trans						
				· · · · ·											
												<del></del>			
	describ	oundation dire led in section 5 complete the	501(c) (othe	er than sec						npt org	ganiza		Yes	×	No
		(a) Name of organi	<u> </u>		(	b) Type of orga	anization		_	(c) Des	scription	of relation	ship		
														_	
	Under p	enalties of perjury, I	declare that I i	nave examined	d this return, i	ncluding accom	npanying s	chedules and	statements, ar	nd to the I	best of	ny knowled	ge and b	elief, it	ıs true,
Sign Here	correct,	and complete. Declar	aration of pr <del>ope</del>		n taxpayer) is		formation o				_	May the IR with the pro	S discus	s this	return elow?
Paid Prepa	F	onnt/Type preparer		Ų	Preparer's	signature			Date		Check self-e	t f	TIN		
Use C	)nly  -	irm's name ►	-		- -	-		<u> </u>		Firm's	e no		m <b>99</b> (	)-PF	(2017)

#### Schedule B

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

Department of the Treasury Internal Revenue Service

Name of the organization

### **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

**Employer identification number** 

RIFK	IN FAMILY FOU	NDATION	31-1192429						
Organiz	zation type (check o	ne):							
Filers o	illers of: Section:								
Form 99	90 or 990-EZ	☐ 501(c)( ) (enter number) organization							
		4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private for	undation						
		☐ 527 political organization							
Form 99	00-PF	■ 501(c)(3) exempt private foundation							
		4947(a)(1) nonexempt charitable trust treated as a private foundate	ation						
		☐ 501(c)(3) taxable private foundation							
	nly a section 501(c)	s covered by the <b>General Rule</b> or a <b>Special Rule.</b> 7), (8), or (10) organization can check boxes for both the General Rule a	and a Special Rule. See						
Genera	l Rule								
×	•	of filing Form 990, 990-EZ, or 990-PF that received, during the year, con or property) from any one contributor. Complete Parts I and II. See inst contributions.	<del>-</del>						
Special	Rules								
	regulations under s 13, 16a, or 16b, an	described in section 501(c)(3) filing Form 990 or 990-EZ that met the 3 sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 9 d that received from any one contributor, during the year, total contribut of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line	90 or 990-EZ), Part II, line utions of the greater of (1)						
	contributor, during	described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that the year, total contributions of more than \$1,000 exclusively for religious nal purposes, or for the prevention of cruelty to children or animals. Con	s, charitable, scientific,						
	contributor, during contributions totale during the year for General Rule appl	described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ the the year, contributions exclusively for religious, charitable, etc., purposed more than \$1,000. If this box is checked, enter here the total contributions exclusively religious, charitable, etc., purpose. Don't complete any class to this organization because it received nonexclusively religious, charitable, etc., purpose in the year in the control of the year in the year i	es, but no such utions that were received of the parts unless the aritable, etc., contributions						

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990,

990-EZ, or 990-PF), but it **must** answer "No" on 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 certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

	5-
Name of organization	Employer identification number
RIFKIN FAMILY FOUNDATION	31-1192429

Part I	Contributors (see instructions). Use duplicate co	pies of Part I if additional space is	needed.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	MARTIN S RIFKIN  211 BEARS CLUB DRIVE  JUPITER FL 33477	\$ 100,000.	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
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		<b>\$</b>	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person

Name of organization
RIFKIN FAMILY FOUNDATION

Employer identification number

31-1192429

Part II	Noncach Property	/ (coo instructions)	\ Llea dublicata	conies of Part II if a	idditional space is needed.
en Lui	Noncasii Fropert	(355 11311 45110113)	J. USE duplicate	copies of raft if it a	idditional space is needed.

(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
<del></del> -		\$	
(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
		\$	

Employer identification number

Schedule B (Form 990, 990-EZ, or 990-PF) (2017)

Name of organization

BAA

RIFKIN	FAMILY FOUNDATION			31-1192429		
Part III	(10) that total more than \$1,000 fo	or the year from any ations completing Pa	one contributor. rt III, enter the tota	escribed in section 501(c)(7), (8), or Complete columns (a) through (e) and all of exclusively religious, charitable, etc. ee instructions.)   \$		
	Use duplicate copies of Part III if ac					
(a) No. from Part I	(b) Purpose of gift (c) Use of gift			(d) Description of how gift is held		
		(e) Trans	fer of gift			
	Transferee's name, address,	and ZIP + 4	Relation	nship of transferor to transferee		
(a) No. from Part I	(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held		
••••••						
	(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		
	(e) Transfer of gift					
	Transferee's name, address,	and ZIP + 4	Relation	nship of transferor to transferee		
(a) No. from Part I	(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held		
		(e) Trans	fer of gift			
	Transferee's name, address,		Relationship of transferor to transferee			

REV 11/13/17 PRO

**Continuation Statement** 

RIFKIN FAMILY FOUNDATION
Form 990-PF: Return of Private Foundation
Part XV, Line 2: Supplementary Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc.

Name and Address Information	Form Information	Submission Information	Restrictions
N/A	N/A	N/A	N/A

#### RIFKIN FAMILY FOUNDATION 311192429

### Form 990-PF: Return of Private Foundation

# Part XV, Line 3a: Grants and Contributions Paid During the Year

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 recipient	Purpose of grant or contribution	Amount
a Paid during the year				
LEADERS IN FURTHERING EDUCATION 6274 LINTON BLVD STE 103 DELRAY BEACH, FL 33484		501 (C) 3	PROGRAMS SUPPORTINGPROGRAM S SUPPORTING ANIMAL RESCUE & ADOPTION	11,650.
ALLIANCE FOR EATING DISORDERS AWARENESS 1649 FORUM STE # 2 WEST PALM BEACH, FL 33401		501 (C) 3	PROMOTES POSITIVE BODYPROMOTES POSITIVE BODY IMAGE AND SELF ESTEEM & AWARENESS OF EATING DISORDERS	117,740.
YWCA 5920 DECATUR ROAD FORT WAYNE, IN 46805		501 (C) 3	DOMESTIC VIOLENCE RECOVERY	8,334.
HOPE FOR THE WARRIORS 5101C BACKLICK RD ANNANDALE, VA 22003		501 (C) 3	PROVIDES SUPPORT FOR MILITARY SERVICE MEMBERS & FAMILIES	5,000.
TRI COUNTY ANIMAL RESCUE 21287 BOCA RIO RD BOCA RATON, FL 33433		501 (C) 3	PROCIDES SAFE HAVEN FOR RESCUED ANIMALS	1,000.
TROY CENTER 4161 NORTH AIRPORT RD COLUMBIA CITY, IN 46725		501 (C) 3	PROVIDES TUITION FOR AT-RISK STUDENTS	1,000.
AUSTIN ATHLETIC SCHOLARSHIP FUND 3801 N. CAPITAL OF TEXAS HWY STE 240-161 AUSTIN, TX 78746		501 (C) 3	PROVIDES FINANCIAL ASSISTANCEPROVIDE S FINANCIAL ASSISTANCE FOR TRAINING & TRAVEL JUNIOR TENNIS	1,000.
CENTER FOR FAMILY SERVICES 4101 PARKER AVENUE West Palm Beach, FL 33405		501 (C) 3	BEHAVIORAL HEALTH, BEHAVIORAL HEALTH, EDUCATION, AND HOMELESS INTERVENTION	2,500.
CONGREGATION B'NAI JACOB 7227 BITTERSWEET MOORS DRIVE Fort Wayne, IN 46814		501 (C) 3	RELIGIOUS	3,600.
FORT WAYNE JEWISH FEDERATION 5200 OLD MILL ROAD Fort Wayne, IN 46807		501 (C) 3	RELIGIOUS	75,000.
FORT WAYNE CHILDREN'S ZOO 3411 SHERMAN ST FORT WAYNE, IN 46808		501 (C) 3	EDUCATIONAL INTERPRETER PROGRAM	30,000.
FORT WAYNE PHILHARMONIC 4901 FULLER DRIVE FORT WAYNE, IN 46835		501 (C) 3	PROVIDES SUPPORT FOR CONCERTS PROGRAM	35,000.
INDIANA UNIVERSITY CHAMPIONSHIP GOLF COURSE 1001 EAST 17TH ST BLOOMINGTON, IN 47408		501 (C) 3	IU GOLF COURSEIU GOLF COURSE CAPITAL PROJECT	50,000.

# Form 990-PF: Return of Private Foundation

# Part XV, Line 3a: Grants and Contributions Paid During the Year

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 recipient	Purpose of grant or contribution	Amount
a Paid duning the year  INTERNATIONAL SOCIETY OF PALM BEACH 44 COCOANUT ROW M207C PALM BEACH, FL 33480		501 (C) 3	PROVIDES GRANTSPROVIDES GRANTS AND SCHOLARSHIPS TO CHARITIES IN PALM BEACH	500.
LUNGEVITY FOUNDATION 228 S WABASH AVENUE STE 700 CHICAGO, IL 60604		501 (C) 3	RESEARCH INTO THERAPIESRESEARCH INTO THERAPIES TO FIGHT LUNG CANCER	2,500.
NICKLAUS CHILDREN'S HEALTH CARE FDN 11770 US HWY ONE STE 308 NORTH PALM BEACH, FL 33408		501 (C) 3	CHILDRENS HEALTH CARE	32,200.
TURNSTONE CENTER FOR DISABLED CHILDREN 3320 NORTH CLINTON STREET FORT WAYNE, IN 46805		501 (C) 3	SERVICES TO DISABLED INDIVIDUALS	5,000.
				382,024.

### Form 990-PF: Return of Private Foundation

# Part IV: Capital Gains and Losses for Tax on Investment Income

(a) List and describe (e.g., real estate, common stoc	(b) How acquired P-Purchase D-Donation	(c) Date	(d) Date sold			
FIDELITY ST COVERED	P	Various	12/31/17			
FIDELITY ST NONCOVERED			P	Various	12/31/17	
FIDELITY LT NONCOVERED			P	Various	12/31/17	
FIDELITY CAPITAL GAIN	DISTRIBUTIONS		P	Various	12/31/17	
WFA ACCT XXXX-2715 CAP	ITAL GAIN DISTRIBUTION:	S	P	Various	12/31/17	
ST CAP GAIN (LOSS) FRO	M K-1'S		P	Various	12/31/17	
LT CAP GAIN (LOSS) FRO	M K-1'S		P	Various	12/31/17	
(e) Gross sales price	(f) Depreciation (g) Cost or other			(h) Gain (e) plus (g	(f) minus	
722,832.			656,629.		66,203.	
1,173,376.			1,208,761.	-35,385.		
1,286,163.			1,289,298.	-3,135.		
26,528.		. 0.		26,528		
170.			0.		170.	
1,030.			0.		1,030.	
6,561.			0.		6,561.	
3,216,660.	0.	1	3,154,688.		61,972.	
	ets showing gain in co e foundation on 12/31/0	69	_ ]	(1) Gains gain minus but not less	col. (k),	
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69		col. (j), if any	or Losses (h)	(from col.	
0.	0.		0.		66,203.	
					-35,385.	
					-3,135.	
0.	0.		0.		26,528.	
0.	0.		0.	·	170.	
0.	0.	<del></del>	0.		1,030.	
0.	0.		0.		6,561.	
0.	0.		0.]		61,972.	

# Additional information from your Form 990-PF: Return of Private Foundation

#### Form 990-PF: Return of Private Foundation

#### Other Income

#### **Continuation Statement**

Description	Revenue and Expense per Book	Net Investment Income	Adjusted Net Income
SEC 1231 GAIN (LOSS)		-280.	
ROYALTY INCOME		9,187.	
OTHER INCOME	313.	60.	
Tot	al 313.	8,967.	

#### Form 990-PF: Return of Private Foundation

#### **Taxes**

#### **Continuation Statement**

Description	Revenue and Expense per Book	Net Investment Income	Adjusted Net Income	Disbursement for charitable purpose
FOREIGN TAX PAID	764.	1,967.		
EXCISE TAX	2,000.			•
Total	2,764.	1,967.		

#### Form 990-PF: Return of Private Foundation

#### **Other Expenses**

#### **Continuation Statement**

Description	Revenue and Expense per Book	Net Investment Income	Adjusted Net Income	Disbursement for charitable purpose	
MISC/OTHER EXPENSES	307.	613.			
ROYALTY EXPENSES		905.			
Total	307.	1,518.			

#### Form 990-PF: Return of Private Foundation

#### Other Increases

#### **Continuation Statement**

Description	Amount
ADJUSTMENT TO COST BASIS	-18,689.
PARTNERSHIP DISTRIBUTIONS	51,534.
To	otal 32,845.

# Form 990-PF: Return of Private Foundation

### **Managers Contributed More than 2%**

	List	
DANIEL M. RIFKIN		
RICHARD S. RIFKIN		
MARTIN S. RIFKIN		

# **Net Gain or Loss From Sale of Assets**

'Form 990-PF Part I, Line 6a

Name	Employer Identification No
RIFKIN FAMILY FOUNDATION	31-1192429

Asset Information:  Description of Property WFA ACCT XXXX-2815 ST COVERED  Business Code Exclusion Code 18  Date Acquired Various How Acquired . Purchased  Date Sold 12/31/17 Name of Buyer
Business CodeExclusion Code 18  Date AcquiredVarious How Acquired . Purchased  Date Sold12/31/17 Name of Buyer
Date Sold 12/31/17 Name of Buyer .
Date Sold 12/31/17 Name of Buyer
Date Sold 12/31/17 Name of Buyer
Check Box, if Buyer is a Business
Sales Price 223, 392. Cost or other basis (do not reduce by depreciation) 224, 010.
Sales Expense Valuation Method
Total Gain (Loss)618. Accumulated Depreciation
Description of Property WFA ACCT_XXXX-2815_ST_NONCOVERED
Business Code Exclusion Code 18
Date Acquired . Various How Acquired . Purchased
Date Sold12/31/17 Name of Buyer
Check Box, if Buyer is a Business
Sales Price24, 307. Cost or other basis (do not reduce by depreciation)26, 080.
Sales Expense Valuation Method
Total Gain (Loss)1,773. Accumulated Depreciation
Description of Property WFA ACCT XXXX-2815 LT COVERED
Business Code Exclusion Code 18
Date Acquired Various How Acquired . Purchased
Date Sold12/31/17 Name of Buyer
Check Box, If Buyer is a Business
Sales Price 24, 515. Cost or other basis (do not reduce by depreciation) 25, 259.
Sales Expense Valuation Method Valuation Valua
Total Gain (Loss)744. Accumulated Depreciation
Description of Property WFA ACCT_XXXX-9964_LT_NONCOVERED
Business Code Exclusion Code 18
Date AcquiredVarious How Acquired . Purchased
Date Sold12/31/17 Name of Buyer
Check Box, if Buyer is a Business
Sales Price83, 241. Cost or other basis (do not reduce by depreciation)79, 874.
Sales Expense Valuation Method
Total Gain (Loss) 3, 367. Accumulated Depreciation
Description of Property See Net Gain or Loss from Sale of Assets
Business Code Exclusion Code
Date Acquired How Acquired
Date Sold Name of Buyer
Check Box, if Buyer is a Business
Sales Price Cost or other basis (do not reduce by depreciation)
Sales Expense Valuation Method
Total Gain (Loss) Accumulated Depreciation
Total Call (2003)
Totals:
Total Gain (Loss) of all assets 53,769.
Gross Sales Price of all assets 3,563,680.
Unrelated Business Income Business Code
Excluded by section 512, 513, 514 53, 769. Exclusion Code . 18
Related/Exempt Function Income
Related/Exempt Function income
QuickZoom here to Form 990-PF, Page 1
QuickZoom here to Form 990-PF, Page 12
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# Additional information from your Form 990-PF Part I Line 6a Net Gain or Loss From Sale of Assets

## Form 990-PF Part I Line 6a Net Gain or Loss From Sale of Assets Net Gain or Loss from Sale of Assets

Description of Property	Bu sin es s Co de	Excl usio n Cod e	e Acq	How Acquired	Dat e Sol d	Name of Buyer	BuyeraBusiness	Sale s Pric e	or other	Sale s Exp ense	Valuation Method	Total Gain or Loss	Accu mulat ed Depre ciatio n
FIDELITY ST COVERED		18	Variou s	Purchased	12/31/1 7	_		722,832	656,629			66,203	
FIDELITY ST NONCOVERED		18	Variou s	Purchased	12/31/1 7			1,173,376	1,208,751	•		- 35,385.	
FIDELITY CAPITAL GAINS DISTRIBUTIONS		18	Variou s	Purchased	12/31/1 7			25,684				25,684	
WFA ACCT XXXX- 2815 CAPITAL GAINS DISTRIBUTIONS		18	Variou s	Purchased	12/31/1 7			170.				170.	
FIDELITY LT NONCOVERED		18	Variou s	Purchased	12/31/1 7			1,285,163	1,285,298			3,135.	

Form 990-PF Part I, Lines 16a - 16c

Name	Employer Identification No
RIFKIN FAMILY FOUNDATION	31-1192429

### Line 16a - Legal Fees

Name of Provider	Type of Service Provided	Amount Paid Per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
otal to Form 990-P	F, Part I, Line 16a				

### Line 16b - Accounting Fees

Name of Provider	Type of Service Provided	Amount Paid Per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
					-
	DE D. 41 Live 40h				
Total to Form 990-	PF, Part I, Line 16b				

### **Line 16c - Other Professional Fees**

Name of Provider	Type of Service Provided	Amount Paid Per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
WELLS FARGO A	INVESTMENT FUN	26,314.	23,186.		
Total to Form 990-	PF, Part I, Line 16c	26,314.	23,186.		

Name RIFKIN FAMILY FOUNDATION				Employer Identification No 31-1192429	
Line 10a - Investments - US and State Government Obligations:	End o State and Local Obligations Book Value	f Year State and Local Obligations FMV	End of US Government Obligations Book Value		of Year US Government Obligations FMV
T-44- 5 000 DF D4 II I - 40-					
Tot to Fm 990-PF, Pt II, Ln 10a  Line 10b - Investme	ents - Corporate	Stock:	Bool		of Year
			Value	•	Value
Totals to Form 990-PF, Part II, I	Line 10b				
Line 10c - Investme	ents - Corporate l	Bonds:	End o Book Value		of Year Fair Market Value
Totals to Form 990-PF, Part II, I	Line 10c				
Line 12 - Investmo	ents - Mortgage I	oans:	Bool Value	<b>K</b>	f Year Fair Market Value
Totals to Form 990-PF, Part II, I	Line 12				
Line 13 - Inv	estments - Other	:	Bool Valu	k	of Year Fair Market Value
FIDELITY INVESTMENTS A	/C XXX-XX8369		7,020	,135.	6,890,691.
Totals to Form 990-PF. Part II.	 Line 13		7,020	.135.	6,890,691.

# Additional information from your 2017 Federal Exempt Tax Return

### Form 990-PF: Return of Private Foundation

Line 1(a)

<b>Itemizat</b>	ion St	atement
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Description		Amount
MARTIN S. RIFKIN		100,000.
	Total	100,000.