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Form 990-PF

Department of the Treasury
Internal Revenue Service

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

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

OMB No 1545-0052

2017

Open to Public Inspection

For calendar year 2017, or tax year beginning 01-01-2017, and ending 12-31-2017

Name of foundation
HOLTZ CHARITABLE FOUNDATION INC

A Employer identification number
35-2042978

Number and street (or P O box number if mail is not delivered to street address)
9209 CROMWELL PARK PLACE

Room/suite

B Telephone number (see instructions)
(407) 857-6811

City or town, state or province, country, and ZIP or foreign postal code
ORLANDO, FL 32827

C If exemption application is pending, check here

G Check all that apply

☐ Initial return

☐ Initial return of a former public charity

☐ Final return

☐ Amended return

☐ Address change

☐ Name change

D 1. Foreign organizations, check here

D 2. Foreign organizations meeting the 85% test, check here and attach computation

H Check type of organization

☒ Section 501(c)(3) exempt private foundation

☐ Section 4947(a)(1) nonexempt charitable trust

☐ Other taxable private foundation

E If private foundation status was terminated under section 507(b)(1)(A), check here

I Fair market value of all assets at end of year (from Part II, col (c), line 16) \$ 5,750,495

J Accounting method

☐ Cash

☒ Accrual

☐ Other (specify)

(Part I, column (d) must be on cash basis)

F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here

Part 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 income	(d) Disbursements for charitable purposes (cash basis only)
Revenue	1 Contributions, gifts, grants, etc , received (attach schedule)	875,000		
	2 Check If the foundation is not required to attach Sch B			
	3 Interest on savings and temporary cash investments	1,479	1,479	1,479
	4 Dividends and interest from securities	98,303	98,303	98,303
	5a Gross rents			
	b Net rental income or (loss)			
	6a Net gain or (loss) from sale of assets not on line 10	1,400,156		
	b Gross sales price for all assets on line 6a			
	7 Capital gain net income (from Part IV, line 2)		1,400,156	
	8 Net short-term capital gain			125
	9 Income modifications			
	10a Gross sales less returns and allowances			
b Less Cost of goods sold				
c Gross profit or (loss) (attach schedule)				
11 Other income (attach schedule)	-972	755	-972	
12 Total. Add lines 1 through 11	2,373,966	1,500,693	98,935	
Operating and Administrative Expenses	13 Compensation of officers, directors, trustees, etc	80,000	80,000	
	14 Other employee salaries and wages			
	15 Pension plans, employee benefits			
	16a Legal fees (attach schedule)			
	b Accounting fees (attach schedule)	8,500	8,500	
	c Other professional fees (attach schedule)	33,769	33,769	
	17 Interest			
	18 Taxes (attach schedule) (see instructions)			
	19 Depreciation (attach schedule) and depletion			
	20 Occupancy			
	21 Travel, conferences, and meetings			
	22 Printing and publications			
	23 Other expenses (attach schedule)	109	109	
	24 Total operating and administrative expenses. Add lines 13 through 23	122,378	122,378	0
	25 Contributions, gifts, grants paid	468,850		468,850
	26 Total expenses and disbursements. Add lines 24 and 25	591,228	122,378	468,850
	27 Subtract line 26 from line 12			
	a Excess of revenue over expenses and disbursements	1,782,738		
	b Net investment income (if negative, enter -0-)		1,378,315	
c Adjusted net income(if negative, enter -0-)			98,935	

For Paperwork Reduction Act Notice, see instructions.

Cat No 11289X

Form 990-PF (2017)

Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)			
		Beginning of year (a) Book Value	End of year (b) Book Value (c) Fair Market Value		
Assets	1	Cash—non-interest-bearing	132,485	451,950	451,950
	2	Savings and temporary cash investments	152,643	36,728	36,728
	3	Accounts receivable ▶ _____ Less allowance for doubtful accounts ▶ _____			
	4	Pledges 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	Inventories for sale or use			
	9	Prepaid expenses and deferred charges			
	10a	Investments—U S and state government obligations (attach schedule)			
	b	Investments—corporate stock (attach schedule)	2,676,720	3,742,630	4,229,510
	c	Investments—corporate bonds (attach schedule)			
	11	Investments—land, buildings, and equipment basis ▶ _____ Less accumulated depreciation (attach schedule) ▶ _____			
	12	Investments—mortgage loans			
	13	Investments—other (attach schedule)	404,896	1,019,896	1,032,307
	14	Land, buildings, and equipment basis ▶ _____ Less accumulated depreciation (attach schedule) ▶ _____			
15	Other assets (describe ▶ _____)	19,900	18,378		
16	Total assets (to be completed by all filers—see the instructions Also, see page 1, item I)	3,386,644	5,269,582	5,750,495	
Liabilities	17	Accounts payable and accrued expenses		100,200	
	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)		100,200	
	Net Assets or Fund Balances	Foundations that follow SFAS 117, check here ▶ <input type="checkbox"/> and complete lines 24 through 26 and lines 30 and 31.			
24		Unrestricted			
25		Temporarily restricted			
26		Permanently restricted			
Foundations that do not follow SFAS 117, check here ▶ <input checked="" type="checkbox"/> and complete lines 27 through 31.					
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	3,386,644	5,169,382	
30		Total net assets or fund balances (see instructions)	3,386,644	5,169,382	
31		Total liabilities and net assets/fund balances (see instructions) .	3,386,644	5,269,582	

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	3,386,644
2	Enter amount from Part I, line 27a	2	1,782,738
3	Other increases not included in line 2 (itemize) ▶ _____	3	
4	Add lines 1, 2, and 3	4	5,169,382
5	Decreases not included in line 2 (itemize) ▶ _____	5	
6	Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30 .	6	5,169,382

Part IV Capital Gains and Losses for Tax on Investment Income

(a) List and describe the kind(s) of property sold (e g , real estate, 2-story brick warehouse, or common stock, 200 shs MLC Co)	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
1a See Additional Data Table			
b			
c			
d			
e			

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
a See Additional Data Table			
b			
c			
d			
e			

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	
a See Additional Data Table			
b			
c			
d			
e			

2 Capital gain net income or (net capital loss)	<div> <div>If gain, also enter in Part I, line 7</div> <div>If (loss), enter -0- in Part I, line 7</div> </div>	2	1,400,156
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6) If gain, also enter in Part I, line 8, column (c) (see instructions) If (loss), enter -0- in Part I, line 8		3	125

Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income)

If section 4940(d)(2) applies, leave this part blank

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period?



Yes



No

If "Yes," the foundation does not qualify under section 4940(e) Do not complete this part

1 Enter the appropriate amount in each column for each year, see instructions before making any entries

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col (b) divided by col (c))
2016	226,552	4,197,269	0 053976
2015	251,450	4,018,530	0 062573
2014	592,876	4,082,790	0 145213
2013	160,400	3,544,257	0 045256
2012	201,400	3,115,894	0 064636
2 Total of line 1, column (d)			2 0 371654
3 Average distribution ratio for the 5-year base period—divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years			3 0 074331
4 Enter the net value of noncharitable-use assets for 2017 from Part X, line 5			4 5,231,213
5 Multiply line 4 by line 3			5 388,841
6 Enter 1% of net investment income (1% of Part I, line 27b)			6 13,783
7 Add lines 5 and 6			7 402,624
8 Enter qualifying distributions from Part XII, line 4			8 468,850

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate See the Part VI instructions

Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see instructions)

1a	Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter "N/A" on line 1 Date of ruling or determination letter _____ (attach copy of letter if necessary—see instructions)		
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here <input checked="" type="checkbox"/> and enter 1% of Part I, line 27b	1	13,783
c	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col (b)		
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2	
3	Add lines 1 and 2.	3	13,783
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4	
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5	13,783
6	Credits/Payments		
a	2017 estimated tax payments and 2016 overpayment credited to 2017	6a	722
b	Exempt foreign organizations—tax withheld at source	6b	
c	Tax paid with application for extension of time to file (Form 8868)	6c	
d	Backup withholding erroneously withheld	6d	
7	Total credits and payments. Add lines 6a through 6d.	7	722
8	Enter any penalty for underpayment of estimated tax. Check here <input type="checkbox"/> if Form 2220 is attached	8	
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9	13,061
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10	
11	Enter the amount of line 10 to be Credited to 2018 estimated tax <input type="checkbox"/> Refunded <input type="checkbox"/>	11	

Part VII-A Statements Regarding Activities

	Yes	No
1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?	1a	No
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for definition)? <i>If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities</i>	1b	No
c Did the foundation file Form 1120-POL for this year?	1c	No
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year (1) On the foundation ► \$ _____ (2) On foundation managers ► \$ _____		
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers ► \$ _____		
2 Has the foundation engaged in any activities that have not previously been reported to the IRS? <i>If "Yes," attach a detailed description of the activities</i>	2	No
3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? <i>If "Yes," attach a conformed copy of the changes</i>	3	No
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a	No
b If "Yes," has it filed a tax return on Form 990-T for this year?	4b	
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? <i>If "Yes," attach the statement required by General Instruction T</i>	5	No
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?	6	Yes
7 Did the foundation have at least \$5,000 in assets at any time during the year? <i>If "Yes," complete Part II, col (c), and Part XV</i>	7	Yes
8a Enter the states to which the foundation reports or with which it is registered (see instructions) ► IN _____		
b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? <i>If "No," attach explanation</i> .	8b	Yes
9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2017 or the taxable year beginning in 2017 (see instructions for Part XIV)? <i>If "Yes," complete Part XIV</i>	9	No
10 Did any persons become substantial contributors during the tax year? <i>If "Yes," attach a schedule listing their names and addresses</i>	10	No

Part VII-A Statements Regarding Activities (continued)

11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions).	11		No
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		No
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address N/A	13	Yes	
14	The books are in care of BETH B HOLTZ Telephone no (407) 857-6811			

Located at **9209 CROMWELL PARK PLACE ORLANDO FL** ZIP+4 **32827**

15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 —Check here <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the year 15			
16	At any time during calendar year 2017, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? See instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). If "Yes," enter the name of the foreign country ▶	16	Yes	No

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required

File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.

1a	During the year did the foundation (either directly or indirectly)		Yes	No
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(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)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days). <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
b	If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)? <input type="checkbox"/> 1b			
c	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2017? <input type="checkbox"/> 1c			
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5))			
a	At the end of tax year 2017, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2017? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "Yes," list the years ▶ 20____, 20____, 20____, 20____			
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement—see instructions). <input type="checkbox"/> 2b			
c	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here ▶ 20____, 20____, 20____, 20____			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
b	If "Yes," did it have excess business holdings in 2017 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2017). <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No 3b			
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? 4a			No
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? 4b			No

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required (Continued)

5a	During the year did the foundation pay or incur any amount to				
	(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(3) Provide a grant to an individual for travel, study, or other similar purposes?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(4) Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? (see instructions).	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
b	If any answer is "Yes" to 5a(1)–(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)?		5b		
	Organizations relying on a current notice regarding disaster assistance check here.	<input type="checkbox"/>			
c	If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?	<input type="checkbox"/> Yes <input type="checkbox"/> No			
	<i>If "Yes," attach the statement required by Regulations section 53.4945–5(d)</i>				
6a	Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
b	Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		6b	No	
	<i>If "Yes" to 6b, file Form 8870</i>				
7a	At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
b	If yes, did the foundation receive any proceeds or have any net income attributable to the transaction?		7b		

Part VIII

Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors

1

List all officers, directors, trustees, foundation managers and 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
See Additional Data Table				

2

Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, enter "NONE."

(a) Name and address of each employee paid more than \$50,000	Title, and average hours per week (b) devoted to position	(c) Compensation	Contributions to employee benefit plans and deferred compensation (d)	Expense account, (e) other allowances
NONE				

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

▶

3

Five highest-paid independent contractors for professional services (see instructions). If none, enter "NONE".

(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		

Total number of others receiving over \$50,000 for professional services.

▶

Part IX-A

Summary of Direct Charitable Activities

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc	Expenses
1	
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 N/A	
2	
All other program-related investments. See instructions	
3	

Total. Add lines 1 through 3

▶

Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.)

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes		
a	Average monthly fair market value of securities.	1a	4,662,644
b	Average of monthly cash balances.	1b	648,232
c	Fair market value of all other assets (see instructions).	1c	0
d	Total (add lines 1a, b, and c).	1d	5,310,876
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation).	1e	
2	Acquisition indebtedness applicable to line 1 assets.	2	
3	Subtract line 2 from line 1d.	3	5,310,876
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions).	4	79,663
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4.	5	5,231,213
6	Minimum investment return. Enter 5% of line 5.	6	261,561

Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here ☐ and do not complete this part.)

1	Minimum investment return from Part X, line 6.	1	261,561
2a	Tax on investment income for 2017 from Part VI, line 5.	2a	13,783
b	Income tax for 2017 (This does not include the tax from Part VI).	2b	
c	Add lines 2a and 2b.	2c	13,783
3	Distributable amount before adjustments. Subtract line 2c from line 1.	3	247,778
4	Recoveries of amounts treated as qualifying distributions.	4	
5	Add lines 3 and 4.	5	247,778
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	247,778

Part XII Qualifying Distributions (see instructions)

1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
a	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26.	1a	468,850
b	Program-related investments—total from Part IX-B.	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes.	2	
3	Amounts set aside for specific charitable projects that satisfy the		
a	Suitability test (prior IRS approval required).	3a	
b	Cash distribution test (attach the required schedule).	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4.	4	468,850
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b (see instructions).	5	13,783
6	Adjusted qualifying distributions. Subtract line 5 from line 4.	6	455,067

Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years.

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2016	(c) 2016	(d) 2017
1 Distributable amount for 2017 from Part XI, line 7				247,778
2 Undistributed income, if any, as of the end of 2017				
a Enter amount for 2016 only.				
b Total for prior years 20____, 20____, 20____				
3 Excess distributions carryover, if any, to 2017				
a From 2012. 45,962				
b From 2013.				
c From 2014. 390,834				
d From 2015. 51,444				
e From 2016. 16,967				
f Total of lines 3a through e.	505,207			
4 Qualifying distributions for 2017 from Part XII, line 4 ▶ \$ 468,850				
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 required—see instructions).				
d Applied to 2017 distributable amount.				247,778
e Remaining amount distributed out of corpus	221,072			
5 Excess distributions carryover applied to 2017 (If an amount appears in column (d), the same amount must be shown in column (a))				
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	726,279			
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—see instructions				
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				0
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions).				
8 Excess distributions carryover from 2012 not applied on line 5 or line 7 (see instructions).	45,962			
9 Excess distributions carryover to 2018. Subtract lines 7 and 8 from line 6a	680,317			
10 Analysis of line 9				
a Excess from 2013.				
b Excess from 2014. 390,834				
c Excess from 2015. 51,444				
d Excess from 2016. 16,967				
e Excess from 2017. 221,072				

b Check box to indicate whether the organization is a private operating foundation described in section ☐ 4942(j)(3) or ☐ 4942(j)(5)

Part XV **Supplementary Information** (Complete this part only if the organization had \$5,000 or more in assets at any time during the year—see instructions.)

a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000) (See section 507(d)(2))

b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest

Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:

Check here ☒ if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d.

- a** The name, address, and telephone number or email address of the person to whom applications should be addressed

- b** The form in which applications should be submitted and information and materials they should include

- c** Any submission deadlines

- d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, 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 or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i> See Additional Data Table				
Total			3a	468,850
b <i>Approved for future payment</i>				
Total			3b	

Enter gross amounts unless otherwise indicated

Enter gross amounts unless otherwise indicated		Unrelated business income		Excluded by section 512, 513, or 514		(e) Related or exempt function income (See instructions)
	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount		
1 Program service revenue						
a _____						
b _____						
c _____						
d _____						
e _____						
f _____						
g Fees and contracts from government agencies						
2 Membership dues and assessments. . . .						
3 Interest on savings and temporary cash investments			14	1,479		
4 Dividends and interest from securities. . . .			14	98,303		
5 Net rental income or (loss) from real estate						
a Debt-financed property.						
b Not debt-financed property.						
6 Net rental income or (loss) from personal property						
7 Other investment income.			15	755		
8 Gain or (loss) from sales of assets other than inventory			18	131,739		1,268,417
9 Net income or (loss) from special events						
10 Gross profit or (loss) from sales of inventory						
11 Other revenue <u>aSee Additional Data Table</u>						
b _____						
c _____						
d _____						
e _____						
12 Subtotal Add columns (b), (d), and (e). .				230,549		1,268,417
13 Total. Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify calculations)			13			1,498,966

Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes

[illegible]

Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

1 Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?		Yes	No
a Transfers from the reporting foundation to a noncharitable exempt organization of			
(1) Cash.	1a(1)		No
(2) Other assets.	1a(2)		No
b Other transactions			
(1) Sales of assets to a noncharitable exempt organization.	1b(1)		No
(2) Purchases of assets from a noncharitable exempt organization.	1b(2)		No
(3) Rental of facilities, equipment, or other assets.	1b(3)		No
(4) Reimbursement arrangements.	1b(4)		No
(5) Loans or loan guarantees.	1b(5)		No
(6) Performance of services or membership or fundraising solicitations.	1b(6)		No
c Sharing of facilities, equipment, mailing lists, other assets, or paid employees.	1c		No
d If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received.			

(a) Line No	(b) Amount involved	(c) Name of noncharitable exempt organization	(d) Description of transfers, transactions, and sharing arrangements

2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? ☐ Yes ☒ No

b If "Yes," complete the following schedule

(a) Name of organization	(b) Type of organization	(c) Description of relationship

Sign Here	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.		
	***** Signature of officer or trustee	2018-11-12 Date	***** Title

May the IRS discuss this return with the preparer shown below (see instr)? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
--

Paid Preparer Use Only	Print/Type preparer's name	Preparer's Signature	Date	Check if self-employed <input type="checkbox"/>	PTIN
	LINDA J NEUMAN CPA CVA		2018-11-12		P00298330
	Firm's name ▶ NEUMAN & COMPANY PA				Firm's EIN ▶ 59-3476071
	Firm's address ▶ 280 WEKIVA SPRINGS RD STE 3030 LONGWOOD, FL 32779				Phone no (407) 862-7557

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d			
List and describe the kind(s) of property sold (e g , real estate, (a) 2-story brick warehouse, or common stock, 200 shs MLC Co)	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
835 SH ABBOTT LABORATORIES	P	2015-11-16	2017-12-07
115 SH FIDELITY SMALL CAP DISCOVERY	P	2017-06-12	2017-10-31
24274 SH FEDERATED STRATEGIC VALUE	P	2010-08-18	2017-12-07
367 SH FEDERATED STRATEGIC VALUE	P	2011-11-01	2017-12-07
822 SH ALIGN TECHNOLOGY	P	2015-11-16	2017-12-07
55 SH FORTIVE CORP	P	2009-03-02	2017-12-07
701 SH FEDERATED STRATEGIC VALUE	P	2010-08-31	2017-12-07
342 SH FEDERATED STRATEGIC VALUE	P	2011-12-01	2017-12-07
90 SH AMPHENOL CORP	P	2009-03-02	2017-12-07
305 SH FORTIVE CORP	P	2009-04-13	2017-12-07

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h

(e) Gross sales price	Depreciation allowed (f) (or allowable)	Cost or other basis (g) plus expense of sale	Gain or (loss) (h) (e) plus (f) minus (g)
45,637		37,201	8,436
3,735		3,610	125
148,070		100,000	48,070
2,241		1,757	484
195,937		53,284	142,653
4,048		657	3,391
4,275		2,831	1,444
2,084		1,572	512
7,907		1,096	6,811
22,450		4,094	18,356

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - l

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(I) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
(i) F M V as of 12/31/69	Adjusted basis (j) as of 12/31/69	Excess of col (i) (k) over col (j), if any	
			8,436
			125
			48,070
			484
			142,653
			3,391
			1,444
			512
			6,811
			18,356

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d			
List and describe the kind(s) of property sold (e g , real estate, (a) 2-story brick warehouse, or common stock, 200 shs MLC Co)	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
531 SH FEDERATED STRATEGIC VALUE	P	2010-09-30	2017-12-07
115 SH VMWARE INC	P	2011-11-03	2017-12-07
971 SH AMPHENOL CORP	P	2009-04-13	2017-12-07
210 SH FORTIVE CORP	P	2011-05-13	2017-12-07
503 SH FEDERATED STRATEGIC VALUE	P	2010-10-29	2017-12-07
647 SH VERISIGN INC	P	2012-06-27	2017-12-07
1586 SH ARAMARK	P	2016-04-26	2017-12-07
1810 SH HARTFORD FINANCIAL SERVICES	P	2014-06-25	2017-12-07
1104 SH FEDERATED STRATEGIC VALUE	P	2010-12-01	2017-12-07
1210 SH ZIONS BANCORP	P	2015-11-16	2017-12-07

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
3,237		2,271	966
13,472		11,342	2,130
85,310		14,326	70,984
15,458		5,487	9,971
3,071		2,205	866
73,011		28,212	44,799
67,426		53,678	13,748
99,105		65,060	34,045
6,734		4,681	2,053
60,934		35,481	25,453

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - l

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(I) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	
			966
			2,130
			70,984
			9,971
			866
			44,799
			13,748
			34,045
			2,053
			25,453

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d			
List and describe the kind(s) of property sold (e g , real estate, (a) 2-story brick warehouse, or common stock, 200 shs MLC Co)	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
1870 SH ACTIVISION BLIZZARD	P	2014-10-10	2017-12-07
1085 SH IHS MARKIT LTD	P	2016-07-13	2017-12-07
758 SH FEDERATED STRATEGIC VALUE	P	2011-01-03	2017-12-07
145 SH EQUINIX	P	2012-06-27	2017-12-07
967 SH ACTIVISION BLIZZARD	P	2015-08-06	2017-12-07
588 SH IHS MARKIT LTD	P	2016-07-13	2017-12-07
411 SH FEDERATED STRATEGIC VALUE	P	2011-02-01	2017-12-07
261 SH COSTCO	P	2010-09-13	2017-12-07
2081 SH INTERPUBLIC GROUP	P	2010-06-17	2017-12-07
1087 SH FEDERATED STRATEGIC VALUE	P	2011-03-01	2017-12-07

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
114,378		36,315	78,063
49,346		35,621	13,725
4,622		3,342	1,280
66,082		23,580	42,502
59,146		27,717	31,429
26,765		19,321	7,444
2,507		1,796	711
48,751		15,671	33,080
41,869		16,949	24,920
6,629		4,870	1,759

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - l

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(I) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	
			78,063
			13,725
			1,280
			42,502
			31,429
			7,444
			711
			33,080
			24,920
			1,759

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d

List and describe the kind(s) of property sold (e g , real estate, (a) 2-story brick warehouse, or common stock, 200 shs MLC Co)	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
722 SH SALESFORCE COM	P	2013-10-16	2017-12-07
973 SH MARRIOTT INTERNATIONAL	P	2012-12-18	2017-12-07
467 SH FEDERATED STRATEGIC VALUE	P	2011-04-01	2017-12-07
118 SH CONCHO RESOURCES	P	2012-06-27	2017-12-07
179 SH MOHAWK INDUSTRIES	P	2014-10-10	2017-12-07
390 SH FEDERATED STRATEGIC VALUE	P	2011-05-02	2017-12-07
110 SH DANAHER CORP	P	2009-03-02	2017-12-07
480 SH MARATHON PETROLEUM	P	2012-06-27	2017-12-07
1089 SH FEDERATED STRATEGIC VALUE	P	2011-06-01	2017-12-07
610 SH DANAHER CORP	P	2009-04-13	2017-12-07

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
74,963		38,088	36,875
123,919		36,371	87,548
2,849		2,145	704
16,300		9,731	6,569
50,176		23,214	26,962
2,376		1,859	517
10,187		2,056	8,131
30,652		10,256	20,396
6,643		5,176	1,467
56,491		12,818	43,673

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - l

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	
			36,875
			87,548
			704
			6,569
			26,962
			517
			8,131
			20,396
			1,467
			43,673

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d			
List and describe the kind(s) of property sold (e g , real estate, (a) 2-story brick warehouse, or common stock, 200 shs MLC Co)	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
210 SH PRAXAIR	P	2009-04-13	2017-12-07
1031 SH FEDERATED STRATEGIC VALUE	P	2011-07-01	2017-12-07
97 SH DANAHER CORP	P	2011-05-13	2017-12-07
34 SH PRAXAIR	P	2011-05-13	2017-12-07
333 SH FEDERATED STRATEGIC VALUE	P	2011-08-01	2017-12-07
1898 SH FIDELITY SMALL CAP DISCOVERY	P	2011-01-13	2017-10-31
135257 SH FEDERATED STRATEGIC VALUE	P	2010-07-01	2017-12-07
603 SH FEDERATED STRATEGIC VALUE	P	2011-09-01	2017-12-07
645 SH FIDELITY SMALL CAP DISCOVERY	P	2015-10-29	2017-10-31
594 SH FEDERATED STRATEGIC VALUE	P	2010-07-30	2017-12-07

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h

(e) Gross sales price	Depreciation allowed (f) (or allowable)	Cost or other basis (g) plus expense of sale	Gain or (loss) (h) (e) plus (f) minus (g)
31,637		14,406	17,231
6,289		4,817	1,472
8,983		3,968	5,015
5,122		3,509	1,613
2,034		1,548	486
61,092		40,000	21,092
825,070		512,368	312,702
3,676		2,773	903
20,668		18,049	2,619
3,622		2,404	1,218

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - l

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(I) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
(i) F M V as of 12/31/69	Adjusted basis (j) as of 12/31/69	Excess of col (i) (k) over col (j), if any	
			17,231
			1,472
			5,015
			1,613
			486
			21,092
			312,702
			903
			2,619
			1,218

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d

List and describe the kind(s) of property sold (e g , real estate, (a) 2-story brick warehouse, or common stock, 200 shs MLC Co)	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
651 SH FEDERATED STRATEGIC VALUE	P	2011-10-03	2017-12-07

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h

(e) Gross sales price	Depreciation allowed (f) (or allowable)	Cost or other basis (g) plus expense of sale	Gain or (loss) (h) (e) plus (f) minus (g)
3,970		2,956	1,014

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - l

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
(i) F M V as of 12/31/69	Adjusted basis (j) as of 12/31/69	Excess of col (i) (k) over col (j), if any	
			1,014

Form 990PF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation

(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
LOUIS L HOLTZ 9209 CROMWELL PARK PLACE ORLANDO, FL 32827	CHAIRMAN/DIR 15 00	0	0	0
BETH B HOLTZ 9209 CROMWELL PARK PLACE ORLANDO, FL 32827				
LUANNE E ALTENBAUMER 4923 GLENMEADOW DRIVE HOUSTON, TX 77096	PRES/DIR 10 00	0	0	0
LOUIS LSKIP HOLTZ 2168 LLANGELER DR RUSTON, LA 71270				
KEVIN R HOLTZ 6223 POPLAR GROVE DR PORT ORANGE, FL 32127	DIRECTOR 5 00	20,000	0	0
ELIZABETH H MASSAGLIA 9453 N STATE ROAD 267 BROWNSBURG, IN 46112				

Form 990PF Part XV Line 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 or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
UPPER VALLEY HALL OF FAME P O BOX 60 EAST LIVERPOOL, OH 43920		PUBLIC CHAR	HIGHER EDUCATION/SCHOLARSHIPS	102,500
UNIVERSITY OF NOTRE DAME 1100 GRACE HALL NOTRE DAME, IN 46566		PUBLIC CHAR	CHARITABLE SUPPORT/SCHOLARSHIPS	250,000
CARE NET PREGNANCY CTR OF CENTR TX 800 W WACO DR WACO, TX 76701		PUBLIC CHAR	CHARITABLE	16,000
Total ► 3a				468,850

Form 990PF Part XV Line 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 or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
BENEDICTINE COLLEGE1020 N 2ND ST ATCHISON, KS 66002		COLLEGE/UNIV	COLLEGE EDUCATION/SCHOLARSHIPS	25,100
TRINE UNIVERSITY ONE UNIVERSITY AVE ANGOLA, IN 46703		PUBLIC CHAR	COLLEGE EDUCATION/SCHOLARSHIPS	11,000
REDISCOVERING GOD IN AMERICA RENEWA PO BOX 540774 ORLANDO, FL 32854		PUBLIC CHAR	CHARITABLE/EDUCATIONAL	100
Total ► 3a				468,850

Form 990PF Part XV Line 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 or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
RIGHT TO LIFE SOUTHWEST INDIANA 20 NW 4TH ST EVANSVILLE, IN 47708		PUBLIC CHAR	CHARITABLE SCHOLARSHIP EDUCATION	10,000
PREGNANCY CENTER EAST INC 3944 EDWARDS RD CINCINNATI, OH 45209		PUBLIC CHAR	CHARITABLE EDUCATION	10,000
FCA OF WEST VIRGINIA 1210 VIRGINIA ST E CHARLESTON, WV 25301		COLLEGE/UNIV	CHARITABLE EDUCATION	1,500
Total ► 3a				468,850

Form 990PF Part XV Line 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 or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
THE CARTER CENTER 453 FREEDOM PARKWAY ATLANTA, GA 30307		PUBLIC CHAR	CHARITABLE	100
THE SALVATION ARMY USA 615 SLATERS LANE ALEXANDRIA, VA 22313		PUBLIC CHAR	CHARITABLE	10,000
BIG SHOULDERS FUND 212 WEST VAN BUREN CHICAGO, IL 60607		PUBLIC CHAR	CHARITABLE	100
Total ▶ 3a				468,850

Form 990PF Part XV Line 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 or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
SOUTH CENTRAL MISSOURI FCA 114 BUSINESS PARK DR BRANSON, MO 65616		PUBLIC CHAR	CHARITABLE	100
GEORGIA CHRISTIAN SCHOOL 4359 DASHER RD VALDOSTA, GA 31601		COLLEGE/UNIV	SCHOLARSHIP/EDUCATION	6,000
COPPERHEAD FOUNDATION 4540 KEITH BRIDGE RD CUMMING, GA 30041		PUBLIC CHAR	CHARITABLE/EDUCATIONAL	5,000
Total ► 3a				468,850

Form 990PF Part XV Line 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 or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
CROHNS & COLITIS FOUNDATION 120 BROADWAY STE 1050A NEW YORK, NY 10271		PUBLIC CHAR	CHARITABLE	100
2ND BAPTIST SCHOOL 6410 WOODWAY DR HOUSTON, TX 77057		PUBLIC CHAR	CHARITABLE/EDUCATION SCHOLARSHIP	10,000
THE HUNDRED CLUB OF KANKAKEE COUNTY PO BOX 352 KANKAKEE, IL 60901		PUBLIC CHAR	CHARITABLE	5,000
Total ► 3a				468,850

Form 990PF Part XV Line 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 or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
SHRINERS HOSPITALS FOR CHILDREN 2900 ROCKY POINT DR TAMPA, FL 33607		PUBLIC CHAR	CHARITABLE	5,000
CAMPUS CRUSADE FOR CHRIST 100 LAKE HART DR ORLANDO, FL 32832		PUBLIC CHAR	CHARITABLE SCHOLARSHIP EDUCATION	1,000
SPORTS WORLD MINISTRIES 1919 SOUTH POST RD INDIANAPOLIS, IN 46239		PUBLIC CHAR	CHARITABLE SPORTS EDUCATIONAL	250
Total ▶ 3a				468,850

Form 990PF Part XVI-A Line 11 - Other revenue:

Enter gross amounts unless otherwise indicated	Unrelated business income		Excluded by section 512, 513, or 514		(e) Related or exempt function income (See the instructions)
11 Other revenue	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	
a ISAM SEC 1256 GAIN/(LOSS)			14	-9,638	
b ISAM ORDINARY BUSINESS LOSS			14	-16,225	
c ISAM SEC 988 (LOSS)			14	-15,621	
d ISAM OTHER DEDUCTIONS			14	-420	
e ISAM UNREALIZED INCOME			14	10,099	
f ISAM ST CAPITAL GAIN			14	30,078	

TY 2017 Accounting Fees Schedule**Name:** HOLTZ CHARITABLE FOUNDATION INC**EIN:** 35-2042978**Accounting Fees Schedule**

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
ACCOUNTING AND TAX PREP SERVICES	8,500	8,500		

TY 2017 Investments Corporate Stock Schedule**Name:** HOLTZ CHARITABLE FOUNDATION INC**EIN:** 35-2042978

Name of Stock	End of Year Book Value	End of Year Fair Market Value
DETAILED SCHEDULES MAINTAINED	3,742,630	4,229,510

TY 2017 Investments - Other Schedule

Name: HOLTZ CHARITABLE FOUNDATION INC

EIN: 35-2042978

Investments Other Schedule 2

Category/ Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value
INVESTMENT IN STEPHENS (276665635)	AT COST	1,019,896	1,032,307

TY 2017 Other Assets Schedule**Name:** HOLTZ CHARITABLE FOUNDATION INC**EIN:** 35-2042978**Other Assets Schedule**

Description	Beginning of Year - Book Value	End of Year - Book Value	End of Year - Fair Market Value
PARTNERSHIP K-1 ACTIVITY	19,900	18,378	

TY 2017 Other Expenses Schedule**Name:** HOLTZ CHARITABLE FOUNDATION INC**EIN:** 35-2042978**Other Expenses Schedule**

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
EXPENSES				
BANK CHARGES	109	109		

TY 2017 Other Income Schedule**Name:** HOLTZ CHARITABLE FOUNDATION INC**EIN:** 35-2042978**Other Income Schedule**

Description	Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income
AVE MARIA PRESS	755	755	755
ISAM SEC 1256 GAIN/(LOSS)	-9,638		-9,638
ISAM ORDINARY BUSINESS LOSS	-16,225		-16,225
ISAM SEC 988 (LOSS)	-15,621		-15,621
ISAM OTHER DEDUCTIONS	-420		-420
ISAM UNREALIZED INCOME	10,099		10,099
ISAM ST CAPITAL GAIN	30,078		30,078

TY 2017 Other Professional Fees Schedule**Name:** HOLTZ CHARITABLE FOUNDATION INC**EIN:** 35-2042978

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
INVESTMENT ADVISORY FEES	33,769	33,769		

Schedule B (Form 990, 990-EZ, or 990-PF) <small>Department of the Treasury Internal Revenue Service</small>	Schedule of Contributors ▶ Attach to Form 990, 990-EZ, or 990-PF ▶ Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at www.irs.gov/form990	OMB No 1545-0047 2017
	Name of the organization HOLTZ CHARITABLE FOUNDATION INC	Employer identification number 35-2042978

Organization type (check one)

Filers of:	Section:
Form 990 or 990-EZ	<input type="checkbox"/> 501(c)() (enter number) organization
	<input type="checkbox"/> 4947(a)(1) nonexempt charitable trust not treated as a private foundation
	<input type="checkbox"/> 527 political organization
Form 990-PF	<input checked="" type="checkbox"/> 501(c)(3) exempt private foundation
	<input type="checkbox"/> 4947(a)(1) nonexempt charitable trust treated as a private foundation
	<input type="checkbox"/> 501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.
Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions

General Rule

☒ For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or other property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

☐ For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33¹/₃% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.

☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.

☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year. . . . ▶ \$ _____

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 990PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization HOLTZ CHARITABLE FOUNDATION INC	Employer identification number 35-2042978
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Part I **Contributors** (See Instructions) Use duplicate copies of Part I if additional space is needed

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
—	See Additional Data Table _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contribution)
—	_____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contribution)
—	_____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contribution)
—	_____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contribution)
—	_____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contribution)
—	_____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contribution)
—	_____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contribution)
—	_____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contribution)

Part II **Noncash Property** (See instructions) Use duplicate copies of Part II if additional space is needed

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

Name of organization HOLTZ CHARITABLE FOUNDATION INC	Employer identification number 35-2042978
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Part III	Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once. See instructions.) ► \$ _____ Use duplicate copies of Part III if additional space is needed
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(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	
	_____	_____	_____
	_____	_____	_____
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4	Relationship of transferor to transferee	
	_____	_____	_____
	_____	_____	_____
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4	Relationship of transferor to transferee	
	_____	_____	_____
	_____	_____	_____
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4	Relationship of transferor to transferee	
	_____	_____	_____
	_____	_____	_____
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4	Relationship of transferor to transferee	
	_____	_____	_____
	_____	_____	_____
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4	Relationship of transferor to transferee	

Additional Data

Software ID:
Software Version:
EIN: 35-2042978
Name: HOLTZ CHARITABLE FOUNDATION INC

Form 990 Schedule B, Part I - Contributors (see Instructions) Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>1</u>	KELLY CARES FOUNDATION	\$ 10,000	Person <input checked="" type="checkbox"/>
	1251 N EDDY ST SUITE 200		Payroll <input type="checkbox"/>
	SOUTH BEND, IN46617		Noncash <input type="checkbox"/> (Complete Part II for noncash contribution)
<u>7</u>	PROMEDICA	\$ 10,000	Person <input checked="" type="checkbox"/>
	2142 N COVE BLVD		Payroll <input type="checkbox"/>
	TOLEDO, OH43606		Noncash <input type="checkbox"/> (Complete Part II for noncash contribution)
<u>2</u>	LOUIS BETH HOLTZ	\$ 100,000	Person <input checked="" type="checkbox"/>
	9209 CROMWELL PARK PL		Payroll <input type="checkbox"/>
	ORLANDO, FL32827		Noncash <input type="checkbox"/> (Complete Part II for noncash contribution)
<u>8</u>	TOM GALLAGHER	\$ 500,000	Person <input checked="" type="checkbox"/>
	9020 SW 137TH AVE		Payroll <input type="checkbox"/>
	MIAMI, FL33186		Noncash <input type="checkbox"/> (Complete Part II for noncash contribution)
<u>3</u>	THOMAS GRIER	\$ 30,000	Person <input checked="" type="checkbox"/>
	57 E 93RD ST		Payroll <input type="checkbox"/>
	NEW YORK, NY10126		Noncash <input type="checkbox"/> (Complete Part II for noncash contribution)
<u>9</u>	MARK DEHNERT	\$ 50,000	Person <input checked="" type="checkbox"/>
	40 BOND ST APT 7C		Payroll <input type="checkbox"/>
	NEW YORK, NY10012		Noncash <input type="checkbox"/> (Complete Part II for noncash contribution)

Form 990 Schedule B, Part I - Contributors (see Instructions) Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>4</u>	<div>ROBERT GRAND</div> <div>730 WILLIAMS COVE</div> <div>INDIANAPOLIS, IN46260</div>	<div>\$ 5,000</div>	<div> Person <input checked="" type="checkbox"/> </div> <div> Payroll <input type="checkbox"/> </div> <div> Noncash <input type="checkbox"/> </div> <div> (Complete Part II for noncash contribution) </div>
<u>10</u>	<div>THE COPPERHEAD FOUNDATION</div> <div>4540 KEITH BRIDGE RD</div> <div>CUMMING, GA30041</div>	<div>\$ 10,000</div>	<div> Person <input checked="" type="checkbox"/> </div> <div> Payroll <input type="checkbox"/> </div> <div> Noncash <input type="checkbox"/> </div> <div> (Complete Part II for noncash contribution) </div>
<u>5</u>	<div>DAN WHITNEY</div> <div>15623 E MAJESTIC ST</div> <div>WICHITA, KS67230</div>	<div>\$ 55,000</div>	<div> Person <input checked="" type="checkbox"/> </div> <div> Payroll <input type="checkbox"/> </div> <div> Noncash <input type="checkbox"/> </div> <div> (Complete Part II for noncash contribution) </div>
<u>6</u>	<div>WILLIAM & MARY ROSS FOUNDATION INC</div> <div>ONE NORTH JEFFERSON</div> <div>ST LOUIS, MO63103</div>	<div>\$ 100,000</div>	<div> Person <input checked="" type="checkbox"/> </div> <div> Payroll <input type="checkbox"/> </div> <div> Noncash <input type="checkbox"/> </div> <div> (Complete Part II for noncash contribution) </div>