Form **990-PF** Department of the Treasury Internal Revenue Service

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

▶ Do not enter social security numbers on this form as it may be made public. ➤ Go to www.irs.gov/Form990PF for instructions and the latest information.

For calendar year 2017 or tax year beginning		, and ending					
Name of foundation		-	A Employer identification	number			
TOLEO FOUNDATION			58-1496345				
Number and street (or P O box number if mail is not delivered to street	address)	Room/suite	B Telephone number	0.5			
123 SOUTH ELM STREET			336-273-44				
City or town, state or province, country, and ZIP or foreign p GREENSBORO, NC 27401	iostai code		C If exemption application is p	ending, check here			
G Check all that apply: Initial return	Initial return of a fo	rmer public charity	D 1. Foreign organizations	s, check here			
Final return	Amended return		2 5	and an about the OFOV test			
Address change	Name change		Foreign organizations me check here and attach co	omputation Lest,			
H Check type of organization: X Section 501(c)(3) expected Section 4947(a)(1) nonexempt charitable trust	kempt private foundation Other taxable private founda	tion	E If private foundation sta under section 507(b)(1)				
I Fair market value of all assets at end of year J Account		X Accrual	F If the foundation is in a				
(from Part II, col. (c), line 16)	ther (specify)		under section 507(b)(1)				
▶\$ 9,751,100. (Part I, colur	nn (d) must be on cash basis	3.)					
Part 1 Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a))	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)			
1 Contributions, gifts, grants, etc., received	6,778,744.		N/A				
2 Check In the foundation is not required to attach Sch. B. Interest on savings and temporary							
cash investments Dividends and interest from securities	158,004.	158,004.					
5a Gross rents	130,0041	20070020					
b Net rental income or (loss)							
6a Net gain or (loss) from sale of assets not on line 10 Gross sales price for all	243,192.						
b Gross sales price for all 2,774,527. Capital gain net income (from Part IV, line 2)		243,192.					
8 Net short-term capital gain		243,132.					
9 Income modifications							
10a Gross sales less returns and allowances							
b Less Cost of goods sold							
c Gross profit or (loss)				<u> </u>			
12 Total. Add lines 1 through 11	7,179,940.	401,196.					
13 Compensation of officers, directors, trustees, etc	0.	0.		0.			
14 Other employee salaries and wages							
p 15 Pension plans, employee benefits STMT 1	10,884.	0.		0.			
b Accounting fees c Other professional fees							
c Other professional fees							
17 Interest	150	1 5 0	Pio				
17 Interest 18 Taxes STMT 2 19 Depreciation and depletion 20 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications 23 Other expenses STMT 3 24 Total operating and administrative expenses. Add lines 13 through 23	158.	158.	8	0.			
E 20 Occupancy			MAY 25	2019			
21 Travel, conferences, and meetings			Ш	S			
22 Printing and publications	22.462	22 462	L OGDEN	113-			
23 Other expenses STMT 3	32,462.	32,462.	V.	<u>U. j. o.</u>			
expenses. Add lines 13 through 23	43,504.	32,620.		0.			
25 Contributions, gifts, grants paid	470,000.			470,000.			
26 Total expenses and disbursements.	p	20.55		450 000			
Add lines 24 and 25	513,504.	32,620.		470,000.			
27 Subtract line 26 from line 12: a Excess of revenue over expenses and disbursements	6,666,436.						
b Net investment income (if negative, enter -0-)		368,576.					
c Adjusted net income (if negative, enter -0-)			N/A				
723501 01-03-18 LHA For Paperwork Reduction Act Notice	e, see instructions.		922.	Form 990-PF (2017)			

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) 2 Enter amount from Part I, line 27a 3 Other increases not included in line 2 (itemize) ▶ 4 Add lines 1, 2, and 3 5 Decreases not included in line 2 (itemize) ▶ 5 Oc. 6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30 6 8, 441, 703.

	FOUNDATION				<u>58-149</u>	6345 Page
(a) List and describe the ki	Losses for Tax on Investmen		(b) How acquired P - Purchase		te acquired , day, yr.)	(d) Date sold (mo., day, yr.)
	use; or common stock, 200 shs. MLC Co.)		D - Donation	(1110.	, uay, yı.)	(1110., uay, y1.)
b PUBLICLY TRADED S				+		
c PUBLICLY TRADED S				1		•
d						
(e) Gross sales price		ost or other basis expense of sale			Gain or (loss) lus (f) minus (
a 14,328.						14,328
b 468,248.		415,23				53,014
c 2,291,951.		2,116,10	1.			175,850
d						
e		40/04/00			/ A A 41 A	
Complete only for assets snowing gail	n in column (h) and owned by the foundation				(Col. (h) gain it not less thar	
(i) FMV as of 12/31/69		xcess of col. (i) r col. (j), if any		Losse	es (from col. (h))
a						14,328
b						53,014
С						175,850
d						
e						
 2 Capital gain net income or (net capital I 3 Net short-term capital gain or (loss) as If gain, also enter in Part I, line 8, column (March 2012) and Part I line 8. 	defined in sections 1222(5) and (6):	e 7 e 7	} 2		N/A	243,192
If (loss), enter -0- in Part I, line 8 Part V Qualification Unde	r Section 4940(e) for Reduce	d Tax on Net	Investment	ncome	IV/A	
If section 4940(d)(2) applies, leave this pa Was the foundation liable for the section 4 If "Yes," the foundation doesn't qualify und	dations subject to the section 4940(a) tax or the blank. 942 tax on the distributable amount of any year section 4940(e). Do not complete this particulum for each year, see the instructions by	vear in the base peri	od?			Yes X No
(a)	(b)	Elore making any cr	(c)			(d)
Base periód years Calendar year (or tax year beginning in)	Adjusted qualifying distributions		ncharitable-use ass	-	Distrib	ution ratio ided by col. (c))
2016	265,000.		411,6			.64373
2015	13,000.		52,8			.24607
2014	698,077. 403,090.		192,2 318,3			3.63139 1.26635
2013 2012	6,625		58,5			.11322
2 Total of line 1, column (d)		<u> </u>				5.90077
• • • • • •	r base period - divide the total on line 2 by 5	.0. or by the numbe	r of years	2		
the foundation has been in existence if	•	o, or by the hambe	. 01) 04. 0	3		1.18015
4 Enter the net value of noncharitable-use	e assets for 2017 from Part X, line 5			4		8,334,934
5 Multiply line 4 by line 3				_ 5		9,836,514
6 Enter 1% of net investment income (19	% of Part I, line 27b)			6	ļ	3,686
7 Add lines 5 and 6				7	-	9,840,200
8 Enter qualifying distributions from Part	•			_ 8		470,000
If line 8 is equal to or greater than line 7. See the Part VI instructions.	7, check the box in Part VI, line 1b, and com	piete that part using	ja 1% tax rate.			

	99UPF (2017) TOLEO FOUNDATION	240	0345		age 4
_	rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4940(c)	948 - See	Instruc	τιοπ	(S)
1a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1.				
	Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)		_		
þ	Domestic foundations that meet the section 4940(e) requirements in Part V, check here and enter 1%	_1		<u>, 3°</u>	12.
	of Part I, line 27b	1			
	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations, enter 4% of Part I, line 12, col. (b).	1			^
	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)	2			0.
	Add lines 1 and 2	3		, 3°	
	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)	4			0.
	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5		, 3'	<u> 12.</u>
	Credits/Payments:				
	2017 estimated tax payments and 2016 overpayment credited to 2017 6a 0.				
	Exempt foreign organizations - tax withheld at source 6b 0.				
C	Tax paid with application for extension of time to file (Form 8868) 6c 6c				
đ	Backup withholding erroneously withheld 6d 0.				_
7	Total credits and payments. Add lines 6a through 6d	7			0.
	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	8			8.
	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9	7	, 38	30.
10	Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10			
	Enter the amount of line 10 to be: Credited to 2018 estimated tax	11			
	rt VII-A Statements Regarding Activities			- T	
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene	n		/es	
	any political campaign?		1a		X
þ	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition	tion	1b		<u>X</u> _
	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	
	Did the foundation file Form 1120-POL for this year?		1c		<u>X</u>
đ	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:			ĺ	
	(1) On the foundation. \blacktriangleright \$ 0. (2) On foundation managers. \blacktriangleright \$ 0.]	}	
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation				
	managers. ► \$0.			ł	
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?		2		<u>X</u>
	If "Yes," attach a detailed description of the activities.			}	
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or	•	1 1	ļ	
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes		3		<u>X</u>
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?		4a		<u>X</u>
	If "Yes," has it filed a tax return on Form 990-T for this year?	N/A	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?		5		<u>X</u>
	If "Yes," attach the statement required by General Instruction T		1 1		
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:			- 1	
	By language in the governing instrument, or			Į	
	• By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state	iaw		_ [
	remain in the governing instrument?			X	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV		7	X.	
				ŀ	
8a	Enter the states to which the foundation reports or with which it is registered. See instructions.		-		
	NC		-	ł	
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)				
	of each state as required by General Instruction G? If "No," attach explanation		8b	X	
9	Is the foundation claiming status as a private operating foundation within the meaning of section $4942(j)(3)$ or $4942(j)(5)$ for caler	ıdar		ļ	~ 0
	year 2017 or the tax year beginning in 2017? See the instructions for Part XIV. If "Yes," complete Part XIV		9		<u>x</u> /
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses		10		<u>X</u> _
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Pa	rt VII-A Statements Regarding Activities (continued)			
			Yes	No
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of			
	section 512(b)(13)? If "Yes," attach schedule. See instructions	11		X_
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges?			
	If "Yes," attach statement. See instructions	12		_X_
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	
	Website address ► N/A			
14	The books are in care of ► RANDALL KAPLAN Telephone no. ► 336-27	3-4	425	
	Located at ▶ 123 SOUTH ELM STREET, GREENSBORO, NC ZIP+4 ▶27	401		
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		/A	
16	At any time during calendar year 2017, did the foundation have an interest in or a signature or other authority over a bank,		Yes	No
	securities, or other financial account in a foreign country?	16		<u>X</u>
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the			
	foreign country			
Pa	rt VII-B Statements Regarding Activities for Which Form 4720 May Be Required	·		
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1a	During the year, did the foundation (either directly or indirectly):			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
	a disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?			
	(5) Transfer any income or assets to a disqualified person (or make any of either available			
	for the benefit or use of a disqualified person)?			
	(6) Agree to pay money or property to a government official? (Exception. Check "No"			
	if the foundation agreed to make a grant to or to employ the official for a period after			
	termination of government service, if terminating within 90 days.)			
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	1b		
	Organizations relying on a current notice regarding disaster assistance, check here			
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	1.		X
_	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 operating foundation			
_	defined in section 4942(j)(3) or 4942(j)(5)): At the and of true year 2017, did the foundation being any undistributed income (lines 6d and 6s. Part XIII) for tax year(s) beginning			
ě	At the end of tax year 2017, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2017? Yes X No			
	Mark the same of t			
	If "Yes," list the years \(\bigsim \)			
٠	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach			
	statement - see instructions.) N/A	2b		
,	of the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			
٠				
3.	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			
96	during the year?			
,	of "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.) N/A	3b		
4:	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		Х
	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that			
Ī	had not been removed from jeopardy before the first day of the tax year beginning in 2017?	4b		X
		001	\ <u>D</u>	

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Part VII-B Statements Regarding Activities for Which I	Form 4720 May Be I	Required (contin	ued)		
5a During the year, did the foundation pay or incur any amount to:				Yes	No
(1) Carry on propaganda, or otherwise attempt to influence legislation (section			es X No		
(2) Influence the outcome of any specific public election (see section 4955); of					
any voter registration drive?			es X No		
(3) Provide a grant to an individual for travel, study, or other similar purposes	?	Ye	s X No		
(4) Provide a grant to an organization other than a charitable, etc., organization	n described in section				
4945(d)(4)(A)? See instructions		Ye	es 🗶 No		
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or				
the prevention of cruelty to children or animals?			es X No		
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify unit	der the exceptions described	ın Regulations			
section 53.4945 or in a current notice regarding disaster assistance? See instr	uctions		N/A _	5b	<u> </u>
Organizations relying on a current notice regarding disaster assistance, check	here				
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption for					
expenditure responsibility for the grant?	Ŋ	I/A ∟ Y€	es L No		
If "Yes," attach the statement required by Regulations section 53.4945-5(d).					
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums on				
a personal benefit contract?		Ye	es X No		
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal benefit contract?		_	6b	_X_
If "Yes" to 6b, file Form 8870.					
7a At any time during the tax year, was the foundation a party to a prohibited tax s	shelter transaction?	Ye	es 🗶 No 📙		
b If "Yes," did the foundation receive any proceeds or have any net income attribu				7b	<u> </u>
Part VIII Information About Officers, Directors, Trust	ees, Foundation Ma	anagers, Highly	У		
Paid Employees, and Contractors					
1 List all officers, directors, trustees, and foundation managers and t		1	(-No		
(a) Name and address	(b) Title, and average hours per week devoted	(c) Compensation (If not paid,	(d) Contributions to employee benefit plans and deferred	(e) Exp account	ense other
(a) Name and address	to position	enter -0-)	compensation	allowa	nces
RANDALL KAPLAN	PRES/TREAS				
123 SOUTH ELM STREET					
GREENSBORO, NC 27401	5.00	0.	0.		0.
LYN CHASEN	SECRETARY				
123 SOUTH ELM STREET			•		
GREENSBORO, NC 27401	0.00	0.	0.		0.
SCOTT KAPLAN	VP				
123 SOUTH ELM STREET					
GREENSBORO, NC 27401	0.00	0.	0.		0.
2 Compensation of five highest-paid employees (other than those inc	,	enter "NONE."			
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week	(c) Compensation	(d) Contributions to employee benefit plans	(e) Exp account	ense other
(a) name and address of each employee paid more than \$60,000	devoted to position	(c) compensation	and deferred compensation	allowa	
NONE					
					_
Total number of other employees paid over \$50,000					0
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Part VIII Information About Officers, Directors, Trustees, Fo Paid Employees, and Contractors (continued)	undation Managers, Highly	
3 Five highest-paid independent contractors for professional services. If none	, enter "NONE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
7		
		
		
Total number of others receiving over \$50,000 for professional services		▶ 0
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevan	at statistical information such as the	
number of organizations and other beneficiaries served, conferences convened, research paper	ers produced, etc.	Expenses
1 N/A		
2		
3		
		-
Part IX-B Summary of Program-Related Investments		
Describe the two largest program-related investments made by the foundation during the tax y	ear on lines 1 and 2.	Amount
N/A		
All other program-related investments. See instructions.		
)		-
The state of the s		
		\dashv
		\dashv
		\dashv
Fotal. Add lines 1 through 3	•	0.

P	art X Minimum Investment Return (All domestic foundations m	ust co	mplete this pa	t Foreign four	ndations, s	ee instructions)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable	e, etc., p	purposes:			
а	Average monthly fair market value of securities				1a	7,906,519.
b	Average of monthly cash balances				1b	555,343.
C	Fair market value of all other assets				1c	
d	Total (add lines 1a, b, and c)				1d	8,461,862.
е	Reduction claimed for blockage or other factors reported on lines 1a and					
	1c (attach detailed explanation)	1e		0.		
2	Acquisition indebtedness applicable to line 1 assets				2	<u> </u>
3	Subtract line 2 from line 1d				3	8,461,862.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount,	see ins	structions)		4	126,928.
5	Net value of noncharitable-use assets Subtract line 4 from line 3. Enter here and on	Part V,	, line 4		5	8,334,934.
6_	Minimum investment return. Enter 5% of line 5				6	416,747.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) an	ıd (j)(5)	private operating	g foundations an	ıd certaın	
	foreign organizations, check here 🕨 🔲 and do not complete this part.)					
1	Minimum investment return from Part X, line 6				1	416,747.
2a	Tax on investment income for 2017 from Part VI, line 5	2a		7,372.		
b	Income tax for 2017. (This does not include the tax from Part VI.)	2b				
C	Add lines 2a and 2b				2c	7,372.
3	Distributable amount before adjustments. Subtract line 2c from line 1				3	409,375.
4	Recoveries of amounts treated as qualifying distributions				4	0.
5	Add lines 3 and 4				5	409,375.
6	Deduction from distributable amount (see instructions)				6	0.
7_	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part	XIII, line	e 1		7	409,375.
P 1	art XII Qualifying Distributions (see instructions) Amounts paid (including administrative expenses) to accomplish charitable, etc., purp	2000				
	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	JUSES.			1a	470,000.
a b	Program-related investments - total from Part IX-B				1b	470,000.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitab	la oto	nurnacac		2	
3	Amounts set aside for specific charitable projects that satisfy the:	116, 616.,	, purposes			
_	Suitability test (prior IRS approval required)				3a	
a	•				3b	
b	Cash distribution test (attach the required schedule)	nd Dort	VIII. line 4		4	470,000.
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8; an		AIII, IIIIE 4			4/0,000.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investinceme. Enter 1% of Part I, line 27b	SHIIGHL			5	Λ
c	•				6	470,000.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	han aal	oulating whether	the foundation		
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years wide 4940(e) reduction of tax in those years.	nen cal		uie iouiiualion (qualilles ivi	ING SECTION

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				409,375.
2 Undistributed income, if any, as of the end of 2017				1 00,575.
a Enter amount for 2016 only			0.	
b Total for prior years:				
		0.		
3 Excess distributions carryover, if any, to 2017:				
a From 2012 3,713.	ļ			
b From 2013 389, 346.				
c From 2014 688,839.				
d From 2015 10,365.				
e From 2016 244,675.	1 226 020			
f Total of lines 3a through e	1,336,938.			<u> </u>
4 Qualifying distributions for 2017 from				
Part XII, line 4: ► \$ 470,000.			0.	
a Applied to 2016, but not more than line 2a			<u> </u>	
b Applied to undistributed income of prior	!	0.		
years (Election required - see instructions)				
c Treated as distributions out of corpus	0.	•		1
(Election required - see instructions)	<u>U•</u>			409,375.
d Applied to 2017 distributable amount e Remaining amount distributed out of corpus	60,625.			409,373.
_ ' '	00,023.			0.
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:		ļ		
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	1,397,563.			
b Prior years' undistributed income. Subtract			*	
line 4b from line 2b		0.		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0.	,	
d Subtract line 6c from line 6b. Taxable				
amount - see instructions		0.		
e Undistributed income for 2016. Subtract line				,
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2017. Subtract		į		
lines 4d and 5 from line 1. This amount must				
be distributed in 2018				0.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3) (Election	_			
may be required - see instructions)	0.			ļ
8 Excess distributions carryover from 2012	[
not applied on line 5 or line 7	3,713.			 -
9 Excess distributions carryover to 2018.	4 000 000	1		
Subtract lines 7 and 8 from line 6a	1,393,850.			
10 Analysis of line 9:				
a Excess from 2013 389, 346.	ĺ			
b Excess from 2014 688,839.		Ì		
c Excess from 2015 10,365.				}
d Excess from 2016 244, 675.	}	ļ		
e Excess from 2017 60,625.				Form 000 DE (0017)

	FOUNDATION				196345/ Page 10
Part XIV Private Operating			-A, question 9)	N/A	
1 a If the foundation has received a ruling					
foundation, and the ruling is effective t		•	▶	, 	
b Check box to indicate whether the four		ng foundation described i		4942(j)(3) or/4	942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years		
income from Part I or the minimum	(a) 2017	(b) 2016	(c) 2015	(d) 2014	(e) Total
investment return from Part X for					
each year listed					
b 85% of line 2a				/	
c Qualifying distributions from Part XII,					
line 4 for each year listed			/	1	
d Amounts included in line 2c not			/		
used directly for active conduct of		ļ	/		
exempt activities			/		
e Qualifying distributions made directly			/		
for active conduct of exempt activities.					
Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the			/		
alternative test relied upon:		/			
a "Assets" alternative test - enter:					
(1) Value of all assets		/			
(2) Value of assets qualifying					
under section 4942(j)(3)(B)(i)		/			
b "Endowment" alternative test - enter 2/3 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		ľ			
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 section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from	1				
an exempt organization					1
(4) Gross investment income	- /				
Part XV Supplementary Info	ormation (Comple	te this part only	if the foundation	had \$5,000 or me	ore in assets
at any time during	the year-see instr	ructions.)	.,		
1 Information Regarding Foundati	· · · · · · · · · · · · · · · · · · ·				
a List any managers of the foundation w	-	than 2% of the total contr	ributions received by the	foundation before the clo	ca of any tay
year (but only if they have contributed			ibutions received by the	s loundation before the clo	se of any lax
RANDALL KAPLAN	 				
	ha awa 100/ ar mara of th	a stack of a paracration (or on aqually large ports	an of the ownership of a n	
 List any managers of the foundation w other entity) of which the foundation has 	as a 10% or oreater interes	e stock of a corporation (et	or an equally large porti	on of the ownership of a p	arthership or
-,	as a reve or ground miles of				
NONE		2		*******	
2 Information Regarding Contribu					
Check here X if the foundation the foundation makes gifts, grants, etc	only makes contributions to	to preselected charitable (organizations and does	not accept unsolicited requ	jests for funds. If
a The name, address, and telephone num	nber or email address of th	ie person to whom applic	ations should be addres	ssed:	
b The form in which applications should	be submitted and informat	tion and materials they sh	ould include:		
10 1	***				
c Any submission deadlines:					
d Any restrictions or limitations on award	is, such as by geographica	ii areas, charitable fields,	kinds of institutions, or	otner factors:	

Form 990-PF (2017) TOLEO FOUNDATION

Part XV Supplementary Information (continued)

3 Grants and Contributions Paid During		Payment		
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	or substantial contributor	100,510.11		
a , and darling the year			j	
A WIDER CIRCLE	NONE	PC	PROGRAM SUPPORT	
9159 BROOKVILLE ROAD #C	·			r 000
SILVER SPRING, MD 20910		 		5,000
		!		
ACTION GREENSBORO	NONE	PC	PROGRAM SUPPORT	
203 SOUTH CHRUCH STREET			į	
GREENSBORO NC 27401			_	50,000
ARTS GREENSBORO	NONE	PC	PROGRAM SUPPORT	
200 NOTH DAVIE STREET				
GREENSBORO NC 27401				10,000
CAMP RAMAH DAROM	NONE	PC	PROGRAM SUPPORT	
70 CAMP DAROM				
CLAYTON, GA 30525				20,000
HILLEL INTERNATIONAL	NONE	PC	PROGRAM SUPPORT	
800 EIGHTH STREET NW	NONE	"	r ROGRAM DOLLOKI	
WASHINGTON DC 20001				55,000
Total SEE	CONTINUATION SHEE	T(S)	▶ 3a	470,000
b Approved for future payment				
NONE				
110212				
		}		
·				
Total	1		▶ 3b	0

Part XVI-A **Analysis of Income-Producing Activities**

Enter gross amounts unless otherwise indicated.	Unrelate	Unrelated business income		ded by section 512, 513, or 514	(e)		
1 Program service revenue:	(a) Business code	(b) Amount	(C) Exclu- sion code	(d) Amount	Related or exempt function income		
	Code		1000				
a			+				
			+-				
c			+				
			+				
f							
g Fees and contracts from government agencies			-				
2 Membership dues and assessments							
3 Interest on savings and temporary cash							
investments			 	150 004			
4 Dividends and interest from securities			14	158,004.			
5 Net rental income or (loss) from real estate:							
a Debt-financed property			 				
b Not debt-financed property			—-	<u> </u>			
6 Net rental income or (loss) from personal)						
property			┿				
7 Other investment income	<u> </u>		 				
8 Gain or (loss) from sales of assets other			1 10	042 100			
than inventory			18	243,192.			
9 Net income or (loss) from special events			+				
10 Gross profit or (loss) from sales of inventory	-		+				
11 Other revenue:			1				
ab			 				
	i 1		 				
	_ I		 				
de	-		+				
12 Subtotal. Add columns (b), (d), and (e)	-	0	_	401,196.	0.		
13 Total. Add line 12, columns (b), (d), and (e)	<u> </u>		<u></u>		401,196.		
(See worksheet in line 13 instructions to verify calculations.)							
Part XVI-B Relationship of Activities	to the Acco	mplishment of E	xemp	t Purposes			
Line No Explain below how each activity for which inc					nlichment of		
the foundation's exempt purposes (other tha			CONTIN	nated importantly to the accom	phoninont of		
V	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	,					
				····	. 		
							
							
							
				 _			
							

Part X	VII	Information Re Exempt Organ		sfers to a	nd Transactions	and Relation	onships With Nonc	haritable	!	
l Did t	he orna			of the followin	g with any other organiz	ation described in	section 501(c)		Yes	No
		•			g to political organization		30011011 30 1(0)	•		
		om the reporting founda	•			3.				
	Cash	on the reporting founds	ilion to a nonchanta	ole evelliht oli	ganization of.			1a(1)		X
		casta								X
	Other as							1a(2)		
b Othe								45/43		v
` '		assets to a noncharital	, ,					1b(1)		X
` '		ses of assets from a nor	•	organization				1b(2)	\vdash	<u>X</u>
٠.		of facilities, equipment,	or other assets					1b(3)		X
٠,		rsement arrangements						1b(4)		X
٠,		r loan guarantees						1b(5)	L	<u> </u>
		nance of services or me	•	•				<u>1b(6)</u>		X
		icilities, equipment, mai			-			1c		X
or se	ervices (oundation. If the four	ndation receive	• •		fair market value of the goo action or sharing arrangeme		sets,	
Line no	(b) Amount involved	(c) Name of	noncharitable	exempt organization	(d) Desc	ription of transfers, transactions,	and sharing ar	rangeme	nts
		·	<u>``</u> *	N/A			··			
								 		
										
										
	\dagger									
	+									
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	+									
	┼									
	<u> </u>		<u> </u>							
ın se	ction 50	ation directly or indirect 01(c) (other than section iplete the following sch	n 501(c)(3)) or in se	· ·	or more tax-exempt org	anizations descrit	oed	Yes	X] No
<u></u>		(a) Name of org		··	(b) Type of organizatio	n	(c) Description of relat	ionship		
		N/A			· · · · · · · · · · · · · · · · · · ·			· .		
										
		·····								
					-	-		.—		
	and belie	f, it is true, correct, and con			g accompanying schedules an taxpayer) is based on all inf	ormation of which pr		May the IRS return with the shown below	e prepare ? Se <u>e ins</u>	er
	Signat	ure of officer or trustee			Date	Title				
] F	'rınt/Type preparer's na	ime	Preparer's s	ignature	Date	, — ,	TIN		
Paid		FREDDY H.	ROBINSON	FREDDY	H. ROBINSO	05/14/	self- employed	P00174	761	
Prepa Use O	rer 👍				COMPANY, I		Firm's EIN ► 56			
	·	irm's address PO							40.1	
	1	GR	EENSBORO,	NC 27	419-9608		Phone no. 336	-294-4	494	

3 Grants and Contributions Paid During the	ear (Continuation)			
Recipient Name and address (home as humanes)	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		
INTERFAITH CONFERENCE OF METROPOLITAN	NONE	PC	PROGRAM SUPPORT	
WASHINGTON THE GATEHOUSE	1012	**	I HOGILIA DOLTONI	
100 ALLYSON STREET SE				
WASHINGTON DC 20011	<u> </u>			2,50
TRUI GU GOGIN, GRRUNGI NGRUNGU MUR IN	l.		DECOUNT GUDDODE	
JEWISH SOCIAL SERVICE AGENCY THE INA	NONE	PC	PROGRAM SUPPORT	
XAY BUILDING 200 WOOD HILL ROAD		ì	·	
ROCKVILLE MD 20850				15,00
JEWISH WOMEN INTERNATIONAL	NONE	PC	PROGRAM SUPPORT	ļ
1129 20TH STREET SUITE 801	NONE) PC	FROGRAM SUFFORT	
WASHINGTON DC 20036				10,00
LEVELING THE PLAYING FIELD	NONE	PC	PROGRAM SUPPORT	
9170 BROOKVILLE ROAD	NONE	PC	PROGRAM SUPPORT	
SILVER SPRING, MD 20910		1		5.00
SIDVEN OF RING, IND 20310				
NC HILLEL	NONE	PC	PROGRAM SUPPORT	
210 WEST CAMERON AVENUE			ļ	5,00
CHAPEL HILL, NC 27516		f		3,00
				į.
REPAIR THE WORLD	NONE	PC	PROGRAM SUPPORT	[
1460 BROADWAY		1	1	
NEW YORK, NY 10036	 			150,00
		}		
SO OTHERS MAY EAT	NONE	PC	PROGRAM SUPPORT	
60 O STREET NW				
WASHINGTON, DC 20001				10,00
TEMPLE EMANUEL	NONE	PC	PROGRAM SUPPORT	
1129 JEFFERSON ROAD		1		(
GREENSBORO, NC 27410	 			20,00
THE JEWISH JOIN DISTRIBUTION	NONE	PC	PROGRAM SUPPORT	
COMMITTEE, INC.	,			
P.O. BOX 4124			ļ	
NEW YORK, NY 10163		<u></u>		10.00
DUD INITADO WAY OR MUR MARTONAL	NONE	PC PC	DDOCDAM SUDDODM	
THE UNITED WAY OF THE NATIONAL CAPITAL AREA	NONE	PC	PROGRAM SUPPORT	
1577 SPRING HILL RD SUITE 420				
VIENNA, VA 22182				40,00
Total from continuation sheets				330 00

TOLEO FOUNDATION

Part XV Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, show any relationship to any foundation manager or substantial contributor Recipient Foundation Purpose of grant or Amount status of contribution Name and address (home or business) recipient PROGRAM SUPPORT UNITED WAY OF GREATER GREENSBORO NONE PC 1500 YANCEYVILLE STREET 25,000. GREENSBORO NC 27405 UNIVERSITY OF MARYLAND, COLLEGE PARK NONE GOV PROGRAM SUPPORT 13,000. COLLEGE PARK, MD 20742 WASHINGTON HEBREW CONGREGATION NONE PC PROGRAM SUPPORT 3935 MACOMB STREET NW 14,500. WASHINGTON, DC 20016 PROGRAM SUPPORT WOMEN FOR WOMEN INTERNATIONAL NONE PC P.O. BOX 9224 CENTRAL ISLIP, NY 11722 10,000. **Total from continuation sheets**

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

TO	DLEO FOUNDATION	58-1496345
Organization type (check o	ne):	
Filers of:	Section:	
Form 990 or 990-EZ	501(c)() (enter number) organization	
	4947(a)(1) nonexempt charitable trust not treated as a private foundation	
	527 political organization	
Form 990-PF	X 501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a private foundation	
	501(c)(3) taxable private foundation	
Note: Only a section 501(c)(s covered by the General Rule or a Special Rule . (7), (8), or (10) organization can check boxes for both the General Rule and a Special	
	n filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions tot one contributor. Complete Parts I and II. See instructions for determining a contribution.	
Special Rules		
sections 509(a)(1) a any one contributo	n described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% suppand 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, or, during the year, total contributions of the greater of (1) \$5,000, or (2) 2% of the all line 1 Complete Parts I and II	16a, or 16b, and that received from
year, total contribu	n described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received fitions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or exclusively to children or animals. Complete Parts I, II, and III.	, ,
year, contributions is checked, enter h purpose Don't con	n described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received frexclusively for religious, charitable, etc., purposes, but no such contributions totale here the total contributions that were received during the year for an exclusively religion plete any of the parts unless the General Rule applies to this organization because, etc., contributions totaling \$5,000 or more during the year	d more than \$1,000 If this box ious, charitable, etc,
but it must answer "No" on	at isn't covered by the General Rule and/or the Special Rules doesn't file Schedule Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on i he filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)	

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

Name of organization

Employer identification number

TOT	ゼヘ	ECTATE A RECAN	1

<u>roleo</u>	FOUNDATION	5	<u>8-1496345 </u>
Part I	Contributors (see instructions) Use duplicate copies of Part I if additional	l space is needed	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	ESTATE OF TOBEE KAPLAN 302 KEMP ROAD WEST GREENSBORO, NC 27410	\$ <u>6,778,744</u> .	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)

Employer identification number

TOLEO FOUNDATION

58-1496345

Part II	Noncash Property (see instructions). Use duplicate copies of F	Part II if additional space is needed.	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
	PUBLICLY TRADED SECURITIES		
1			
		\$ 6,468,498.	02/21/17
(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
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	90. 990-EZ. or 990-PF) (2

Schedule B	Form 990	990-F7	or 990-PF	(2017
ocinculate D	(i Oiiii 990,	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	0,000,1	, , , ,

Page 4

Name of organization

Employer identification number

	FOUNDATION		58-1496345	
rt III	the year from any one contributor. Complete completing Part III, enter the total of exclusively religious	columns (a) through (e) and the follows, charitable, etc., contributions of \$1,000 or	in section 501(c)(7), (8), or (10) that total more than \$1,000 f wing line entry. For organizations less for the year (Enter this into ence) \$	
No.	Use duplicate copies of Part III if addition	al space is needed		
om	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held	
rt I				
_ -				
-				
		(e) Transfer of gif	t	
-	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee	
-				
No. om rt I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held	
-				
		(e) Transfer of gif	t	
	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee	
-				
No. om ort I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held	
$-\mid \overline{\cdot}$				
-		(e) Transfer of gif	it	
-	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
-				
No.				
om irt l	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held	
_ -				
-		(e) Transfer of gif	t	
	Transferee's name, address, a		Relationship of transferor to transferee	
-				

FORM 990-PF	LEGAL	FEES		STATEMENT 1
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOM	
LEGAL FEES	10,884.	0.		0.
TO FM 990-PF, PG 1, LN 16A	10,884.	0.		0.
FORM 990-PF	TAX	ES		STATEMENT 2
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOM	
FEDERAL TAX	158.	158.		0.
TO FORM 990-PF, PG 1, LN 18	158.	158.		0.
FORM 990-PF	OTHER E	XPENSES		STATEMENT 3
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOM	
INVESTMENT EXPENSE	32,462.	32,462.		0.
TO FORM 990-PF, PG 1, LN 23	32,462.	32,462.		0.
FORM 990-PF	OTHER INV	ESTMENTS		STATEMENT 4
DESCRIPTION		LUATION ETHOD BO	OK VALUE	FAIR MARKET VALUE
336 SHS FIDELITY LOW PRICED	STOCK	COST		
(FLPXS) 827 SHS AQR MANAGED FUTURES	FUND CL	COST	16,513.	18,320.
I (AQMIX) 8,382 SHS DELAWARE VALUE FUND	D	COST	7,622.	7,630.
INSTITUTIONAL (DDVIX) 7,805 SHS FIRST EAGLE OVERSE		COST	169,031.	180,040.
CLASS I (SGOIX)	· 	<u> </u>	187,730.	196,854.

TOLEO · FOUNDATION			58-1496345
2,329 SHS CLEARBRIDGE LARGE CAP	COST	07 519	104 764
GROWTH I (SBLYX) 635 SHS ISHARES S&P 500 GROWTH ETF	COCT	87,518.	104,764.
(IVW)	COST	153,054.	170,720.
12,542 SHS ISHARES RUSSELL 1000	COST	133,034	2707720.
VALUE ETF (IWD)		1,322,742.	1,559,472.
2,525 SHS ISHARES RUSSELL 2000	COST	•	
VALUE ETF (IWN)		255,467.	317,519.
1,650 SHS ISHARES RUSSELL 2000	COST		
GROWTH ETF (IWO)		235,406.	308,055.
3,618 SHS ISHARES EDGE MSCI MIN VOL	COST	0.4.2 0.77.2	064 040
EAFE ETF (EFAV)	GO GM	243,872.	264,042.
15,562 SHS ISHARES EDGE MSCI MIN	COST	729 061	021 262
VOL USA ETF (USMV) 369 SHS ISHARES CORE US AGGREGATE	COST	728,061.	821,362.
BOND ETF (AGG)	COSI	39,877.	40,343.
21,103 SHS ISHARES TRUST FLOATING	COST	23,07.0	10,515.
RATE BD ETF (FLOT)		1,072,755.	1,072,454.
12,063 SHS POWERSHARES EXCH TRADED	COST	•	
RFD TR II (PGX)		179,782.	179,256.
1,857 SHS SPDR SERIES TRUST BLMBRG	COST		
BRC CNVRT (CWB)		88,582.	93,964.
1,784 SHS VANGUARD INDEX FDS	COST	440.455	4.40.006
VANGUARD REIT ETF (VNQ)	G0.07	148,155.	148,036.
4,828 SHS FRANKLIN CONVERTIBLE	COST	00 703	04 050
SECURITIES ADVISOR (FCSZX) 1,338 SHS ISHARES S&P 500 GROWTH	COST	88,793.	94,050.
EFT (IVW)	COSI	159,820.	204,406.
13,189 SHS ISHARES RUSSELL 1000	COST	133,020.	204,400.
GROWTH EFT (IWF)	0022	1,364,402.	1,776,295.
6,158 SHS ISHARES TRUST CORE MSCI	COST	_,_,_,	_,,
EAFE ETF (IEFA)		329,895.	406,982.
3,712 SHS ISHARES INC CORE MSCI	COST		
EMERGING MKTS ETF (IEMG)		175,51 4. `	211,213.
8,544 SHS ISHARES IBONDS DEC 2018	COST		
TERM CORPORATE ETF (IBDH)		214,914.	214,711.
3,927 SHS ISHARES IBONDS DEC 2020	COST	22 274	00.000
TERM CORPORATE ETF (IBDL)	000m	99,974.	99,392.
7,610 SHS ISHARES IBONDS DEC 2019	COST	100 005	100 266
TERM CORPORATE ETF (IBDK)	COCH	189,905.	189,266. 201,270.
1,500 SHS ECOLAB INC (ECL) 7,852 SHS FINNACLE FINL PARTNERS	COST COST	180,345.	201,270.
INC (PNFP)	COBT	351,878.	520,588.
THO (THEE)			520,500.
TOTAL TO FORM 990-PF, PART II, LINE 13		8,091,607.	9,401,004.
, ,			