Form 990-PF
Department of the Treasury
Internal Revenue Service

Return of Private Foundation

or Section 4947(a)(1) Trust Treated as Private Foundation
Do not enter social security numbers on this form as it may be made public
Go to www irs gov/Form990PF for instructions and the latest information

2017

Forc	alen	dar year 2017 or tax year beginning		, and ending		
		foundation	mmun		A Employer identification	namper
		<u>/</u> D TROTTER AND TERI TRO RITABLE TRUST	TTER	:	81-4736380	
		nd street (or P.O. box number if mail is not delivered to street	eddress)	Room/suite	B Telephone number	
1	70	BEARS CLUB DRIVE			860-234-02	01
City	or to	iwn, state or province, country, and ZIP or foreign	postal code		C If exemption application is pe	anding check here
		ITER, FL 33477		:		,
G C	heck	all that apply Initial return	Initial return of a fo	ormer public charity	D 1 Foreign organizations	, check here
		Final return	Amended return		2 5	The REW 1001
		Address change	Name change		Foreign organizations me check here and attach co.	mputation
H C	heck	type of organization X Section 501(c)(3) ϵ	xempt private foundation	0Ψ	E If private foundation sta	tus was terminated
	Sec	ction 4947(a)(1) nonexempt charitable trust	Other taxable private founda	ition	under section 507(b)(1)	(A), check here
l Fa	ır ma	·	ting method X Cash	Accrual	F If the foundation is in a	60-month termination
(fr	om P		Other (specify)	·	under section 507(b)(1)	(B), check here
	\$	387,179. (Part I, colu	mn (d) must be on cash base	s)		·
,Pa	rt I	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c) and (d) may not necessarily equal the amounts in column (a))	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net	(d) Disbursements for charitable purposes (cash basis only)
	_		102,282.		N/A	(casi dasis diny)
	1 2	Contributions, gifts, grants, etc., received Check I it the foundation is not required to attach Sch. B			A Marie Co	
	2	Interest on savings and temporary	7 7 7 7 7 4 4 7 94	4. 2 4. 2 2 3 3 1	A CALLES	11 11 11
	A	Dividends and interest from securities	1,551.	1,551.		STATEMENT 1
i	4 50	Gross rents	2,331.	1/331		£ 17, 17, 17, 18, 1
		Net rental income or (loss)	A E TO THE WARRY		SER	- 1 (3)
		Net gain or (loss) from sale of assets not on line 10	40,395.	Carlotte To The Carlotte Control	AMERICAN TOWNS	1 6 2 3 4 3 4 5 V
ine	b	Gross sales price for all 10 276	CONTRACTOR OF THE PARTY OF THE	\$47.6 S. K. M.	THE DE	CENTED IN
evenu		assets on line 6a 49, 270 • Capital gain neuincome (from Part IV, line 2)	SAN - STEERS	40,395.	773/2	PLIVED
Re		Net short-term capital gain	17 NO. 18 NO.	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1	8	8
	9	Income modifications	10 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Secretary and the secretary	MAY	17.7008
		Gross sales less returns		TV44723364318	ex () () ()	
		and allowances Less Cost of goods sold	The state of the s	大型是不不 · 大型的	\$ Star IN OCT	NEM TIT
		Gross profit or (loss)	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	San	UUL	
	11	Other income				- 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
	12	Total. Add lines 1 through 11	144,228.	41,946.		· **
	13	Compensation of officers directors, trustees, etc	0.	0.	-	0.
	14	Other employee salaries and wages				
	15	Pension plans, employee benefits				
Š		Legal fees				
ens	Ь	Accounting fees STMT 2	1,000.	1,000.		0.
ă	C	Other professional fees				
ы П	17	Interest				
ativ	18	Taxes				
Administrative Expe	19	Depreciation and depletion				La franchi franchi
ū	20	Occupancy				
Adn	21	Travel, conferences, and meetings				
		Printing and publications				
Operating and	23	Other expenses STMT 3	199.	199.		0.
ıtı	24	Total operating and administrative				
)era		expenses Add lines 13 through 23	1,199.	1,199.		0.
Ö	25	Contributions, gifts, grants paid	50,000.	(1975年) 经营业的	Committee of the second	50,000.
		Total expenses and disbursements				
		Add lines 24 and 25	51,199.	1,199.	<u> </u>	50,000.
	27	Subtract line 26 from line 12.	SOUTH TO THE		San	1 2 1 1 1 1 1 1 1 1 1 1 1
	a	Excess of revenue over expenses and disbursements	93,029.	19 · 李 · · · · · · · · · · · · · · · · ·		1000
	ь	Net investment income (if negative enter 0-)		40,747.	The table of the same	The state of the s
	C	Adjusted net income (if negative, enter -0)	不是你们想到了这个人	CAN CARE	N/A	900 PF

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		LLOYD TROTTER AND TERI	TROTTER		
Fοι	m gg	20-PF (2017) CHARITABLE TRUST	INOTIBIC	81 –	4736380 Page 2
Part II Balance Sheets Anached schedules and amounts in the description			Beginning of year		of year
Р	art	column should be for end of year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing		629.	629.
	2	Savings and temporary cash investments			
	3	Accounts receivable		1 12 1/2	
	Ì	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			
	7	Other notes and loans receivable		19 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
		Less allowance for doubtful accounts			
2	8	inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			
ä	10a	Investments - U.S. and state government obligations			
	b	Investments - corporate stock STMT 5	59,634.	69,729.	386,550.
	C	Investments - corporate bonds			
- 1	11	investments land buildings and equipment basis	and the second	感让 50 4.20	,
		Less accumulated depreciation			
	12	Investments - mortgage loans			<u> </u>
	13	Investments - other	100 200 6		
	14	Land, buildings, and equipment basis	Richard Care Territ	M - Lealle Coult	
		Less accumulated depreciation			
		Other assets (describe	· · · · · · · · · · · · · · · · · · ·		
	16	Total assets (to be completed by all filers - see the	50 634	70 250	207 170
	 	instructions Also, see page 1, item I)	59,634.	70,358.	387,179.
		Accounts payable and accrued expenses			. ```.;
	18	Grants payable			1 22 10
es	19	Deferred revenue			
를	20	Loans from officers directors trustees, and other disqualified persons			
Liabilities	21	Mortgages and other notes payable			
_	22	Other liabilities (describe)			
	000	Tatal liabilities (add liggs 17 through 99)	0.	0.	
	23	Total liabilities (add lines 17 through 22) Foundations that follow SFAS 117, check here	- 0.		The first of the f
		and complete lines 24 through 26, and lines 30 and 31	İ		· "这一个一个
ຮ	24	Unrestricted	}		77 3 6 7 7 7 7 7 7 7 7
ü	25	Temporarily restricted			
ala	26	Permanently restricted			3.00
ssets or Fund Balances	20	Foundations that do not follow SFAS 117, check here			
E _L		and complete lines 27 through 31.			
5	27	Capital stock, trust principal, or current funds	0.	0.	
ets	28	Paid-in or capital surplus, or land, bldg, and equipment fund	0.	0.	
SS	20	Retained earnings accumulated income endowment or other funds	59.634.	70.358	1900年1900年

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	1	1	
	(must agree with end-of-year figure reported on prior year's return)	1		59,634.
2	Enter amount from Part 1, line 27a	2	oxdot	93,029.
3	Other increases not included in line 2 (itemize)	3		0.
4	Add lines 1, 2, and 3	4		152,663.
5	Decreases not included in line 2 (itemize) SEE STATEMENT 4	5	Г	82,305.
6	Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30	6	\Box	70,358.
_				

59,634.

59,634.

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30 Total net assets or fund balances

31 Total liabilities and net assets/fund balances

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	RITABLE TRUST			81-473	6380	Page 3
<u> </u>	and Losses for Tax on Inv		Lasu - Tá	т	1	
	the kind(s) of property sold (for exan arehouse, or common stock, 200 shs		(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo , day, yr.)	(d) Dati (mo , da	e sold ay, yr)
1a 41 SHS ALPHABE	T INC CL A		P	10/14/08	11/23	1/17
	DGE FINANCIAL SOL	LUTIONS	P	08/05/02	11/23	1/17
c 50 SHS CDK GLO	BAL INC COM		P	08/05/02	11/2:	1/17
e				<u></u>	L	_
(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		
a 42,721.		7,78	0.			,941.
b 3,244.		50	1.			,743.
c 3,311.		60	0.		2	,711.
d						
e						
Complete only for assets showing	ng gain in column (ħ) and owned by t	he foundation on 12/31/69		(I) Gains (Col (h) gair		
(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (ı) over col (ı), ıf any		col (k), but not less that Losses (from col		
a					34	,941.
b						,743.
c					2	,711.
d						
<u>e</u>						
2 Capital gain net income or (net ca	apital loss) $ \begin{cases} & \text{If gain, also enter} \\ & \text{If (loss), enter -0-} \end{cases} $	in Part I, line 7 - in Part I, line 7	} 2		40	,395.
3 Net short-term capital gain or (loilf gain, also enter in Part I, line 8,	ss) as defined in sections 1222(5) and , column (c)	d (6)	3			
If (loss), enter -0- in Part I, line 8] 3	N/A	1	
	Inder Section 4940(e) for			come		
(For optional use by domestic private	e foundations subject to the section 4	1940(a) tax on net investment inc	come)			
If section 4940(d)(2) applies, leave t	his part blank					
	tion 4942 tax on the distributable ami		iod?		Yes Yes	X No
	each column for each year, see the in		ntries			

Enter the appr (a) Base period years Calendar year (or tax year beginning in) (d) Distribution ratio (c) Adjusted qualifying distributions Net value of noncharitable-use assets (col. (b) divided by col (c)) 247,394. .000000 2015 2013 2012

2 Total of line 1, column (d)

Average distribution ratio for the 5-year base period - divide the total on line 2 by 50, or by the number of years the foundation has been in existence if less than 5 years

4 Enter the net value of noncharitable-use assets for 2017 from Part X, line 5

5 Multiply line 4 by line 3

6 Enter 1% of net investment income (1% of Part I, line 27b)

7 Add lines 5 and 6

8 Enter qualifying distributions from Part XII, line 4

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

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407.

407.

50,000.

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	996-PF (2017) CHARITABLE TRUST rt VI Excise Tax Based on Investment Income (Section 4940)	(a), 4940(b), 4			473638 see inst			Page 4	
1a	Exempt operating foundations described in section 4940(d)(2), check here and en		7						•
	Date of ruling or determination letter (attach copy of letter if nec		ions)						
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here			1			4	οŻ.	
	of Part I, line 27b			-					
C	All other domestic foundations enter 2% of line 27b Exempt foreign organizations, enter 4%	of Part I, line 12, c	ol (b) J	3.	-		•		
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only, other	ners, enter -0-)		2	_			0.	
3	Add lines 1 and 2			3			4	<u> </u>	
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only, of	hers, enter -0-)		4				0.	
5	Tax based on investment income Subtract line 4 from line 3. If zero or less, enter -0-			5			4	<u> </u>	
6	Credits/Payments		_	1 1/2 0		· .	, , ;	• •	
a	2017 estimated tax payments and 2016 overpayment credited to 2017	6a	0.	. 1		×.			
b	Exempt foreign organizations - tax withheld at source	6b	0.	31 - 2 - 25, 4					
C	Tax paid with application for extension of time to file (Form 8868)	_6c	0.	.4.	المراجعة المعادمة	2.04	- 1	` ,	
d	Backup withholding erroneously withheld	6d	0.	•		_	٠ .		
7	Total credits and payments Add lines 6a through 6d			7_				<u>0.</u>	
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attain	ched		8				0.	
9	Tax due If the total of lines 5 and 8 is more than line 7, enter amount owed		>	9_			4	07.	
10	Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid		<u> </u>	10					
	Enter the amount of line 10 to be Credited to 2018 estimated tax ▶ rt.VII-A. Statements Regarding Activities		Refunded -	11					
						· 1	Yes	No	
ıa	During the tax year, did the foundation attempt to influence any national, state, or local legisl	iation or did it partic	ipate or intervene	ın	-	_	163	X	
_	any political campaign?	Cas the			<u> </u>	la		X	
	Did it spend more than \$100 during the year (either directly or indirectly) for political purpos			lion		lb .	-	<u>.</u>	
	If the answer is "Yes" to 1a or 1b, lattach a detailed description of the activities and copies of	n any materials pub	iishea or				1		
	distributed by the foundation in connection with the activities Did the foundation file Form 1120-POL for this year?				ł	.	٠- ا	X	
		WOOF			-	C	\$,,	 -	
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the (1). On the foundation. \triangleright \$ 0 • (2) On foundation managers		0.					<i>;</i> , , ,	
	Enter the reimbursement (if any) paid by the foundation during the year for political expendit				,	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1	S 3	-	
	managers \triangleright \$	ture tax impuseu on	Touridation		1.5	£	3.	7	
	Has the foundation engaged in any activities that have not previously been reported to the IR	52			ء ا	<u>.</u> ا	¥.	X	
2	If "Yes," attach a detailed description of the activities					<u> </u>			
3	Has the foundation made any changes, not previously reported to the IRS, in its governing in	astrument articles o	of incorporation, or			F 2.	32. ·	ر د فهم به	•
·	bylaws, or other similar instruments? If "Yes, 'attach a conformed copy of the changes	istrament, artistas c	incorporation, or			3	_^~ ~	X	
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year	?				la		X	•
	If "Yes," has it filed a tax return on Form 990-T for this year?			N	,, <u> </u>	16			
	Was there a liquidation, termination, dissolution, or substantial contraction during the year?					5		X	
	If "Yes," attach the statement required by General Instruction T				F.	*****************	× 1	بنخد	•
	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied eit	her.			\$	\$.			
	By language in the governing instrument, or				1		编		1
	 By state legislation that effectively amends the governing instrument so that no mandatory 	directions that con	flict with the state	law	± ± ± ± ± ± ± ± ± ± ± ± ± ± ± ± ± ± ±		4	Por l	
	remain in the governing instrument?				1~	6	X		
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," compl	lete Part II, col (c),	and Part XV			7	Х		
		, , , , , , , , , , , , , , , , , , , ,			1,50	\$4.5°	. (3	د. العالمة: -	
8a	Enter the states to which the foundation reports or with which it is registered. See instruction	ns ►				2			
	FL							溪().	1
b	If the answer is "Yes' to line 7, has the foundation furnished a copy of Form 990-PF to the At	torney General (or o	designate)					الله الله الله الله الله الله الله الله	
	of each state as required by General Instruction G2 If "No," attach explanation						X		
9	Is the foundation claiming status as a private operating foundation within the meaning of sec	ction 4942(j)(3) or 4	1942(¡)(5) for caler	dar	19	12.	⁷⁷ 12 12 13 13 13 13 13 13	المرام ا	7
	year 2017 or the tax year beginning in 2017? See the instructions for Part XIV. If "Yes," comp	plete Part XIV			<u> </u>	9		X	. V
10	Did any persons become substantial contributors during the lax year? If "Yes," attach a schedul	a listing their names an	d addresses				X		
					Form	990-	-PF	(2017)	

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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 ▶ LLOYD G. TROTTER Telephone no ▶860-23		<u> 201</u>	
	Located at ► 170 BEARS CLUB DRIVE, JUPITER, FL ZIP+4 ►33	<u> 3477</u>		
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	N	/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> </u>	X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the	Ì		
_	foreign country			<u>_</u> `_
P	ort VII-B Statements Regarding Activities for Which Form 4720 May Be Required	т	V	Na
	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. `	, T	ļ:
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes X No	,	. `	1.
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? Yes X No		ì ·	777,
		120	, i. '	, ,
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X No (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes X No		' .	
	(4) Pay compensation to, or pay or reminduse the expenses of, a disqualified person? (5) Transfer any income or assets to a disqualified person (or make any of either available		F -	, '
	for the benefit or use of a disqualified person)?	ł		
	(6) Agree to pay money or property to a government official? (Exception. Check "No"		Γ.,	2.5
	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)	<u>.</u> .	, , , ,	3.
	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations	, A.	, ·	
	section 53 4941(d)-3 or in a current notice regarding disaster assistance? See instructions N/A	15		S . 5 . '
	Organizations relying on a current notice regarding disaster assistance, check here	1	١.	<u> </u>
,	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected		ł	١, ,,
	before the first day of the tax year beginning in 2017?	10		X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation	,	Κ.	ļ
_	defined in section 4942(j)(3) or 4942(j)(5)).	1. ;		
8	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		1	
	before 2017? Yes X No	7	74.00	***
	If "Yes," list the years	138	3) 3) 18/5	J. 3
t	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect	1.02		5.7.
	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach	1		
	statement - see instructions) N/A	2b		
	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.	-147 1	21. 4 X	3.
	>	2. \(\frac{1}{2}\)	are a	7.
38	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time	1	- 30	
	during the year?			[]
t	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	٠, '		r : .
	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,			<u></u> `
	Form 4720, to determine if the foundation had excess business holdings in 2017) N/A	_3b	<u> </u>	<u> </u>
	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	<u> </u>	X
l	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that		-	1.
	had not been removed from jeopardy before the first day of the tax year beginning in 2017?	4b_	0.55	X
	. Fo	orm 99 0	U-PF	(2017)

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

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

b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?

7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?

1 List all officers, directors, trustees, and foundation managers and	their compensation.			
(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Controlitions to employee peneficiales and defende compensation	(e) Expense account, other allowances
LLOYD G. TROTTER	TRUSTEE			
170 BEARS CLUB DRIVE				
JUPITER, FL 33477	0.50	0.	0.	0.
TERI L. TROTTER	TRUSTEE		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
170 BEARS CLUB DRIVE				
JUPITER, FL 33477	0.50	0.	0.	0.
	_			
2 Compensation of five highest-paid employees (other than those in	ncluded on line 1). If none,	enter "NONE."		
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Controllars to employee sees states and deferred compensation	(e) Expense account, other allowances
NONE			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
Total number of other employees paid over \$50,000			•	0
			Form	990-PF (2017)

Yes X No

Yes X No

N/A

Х

6b

7b

a personal benefit contract?

If "Yes" to 6b, file Form 8870

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CHA	КΙ	TV	ъL	L	TRU	2.1

Part VIII Information About Officers, Directors, Trustees, Fou Paid Employees, and Contractors (continued)	ndation Managers, Highly	2,30000
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 NONE	(b) Type of service	(c) Compensation
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 relevant number of organizations and other beneficiaries served, conferences convened, research paper.	statistical information such as the s produced, etc	Expenses
1 N/A		
2		
3		
4		
Port/IV P ()		
Part X-B Summary of Program-Related Investments Describe the two largest program-related investments made by the foundation during the tax you	ear on lines 1 and 2	Amount
1 N/A		
2		
All other program-related investments. See instructions		
3		

Total. Add lines 1 through 3

F	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign four	ndations, see	e 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	299,218.
b	Average of monthly cash balances	1b	299,218. 534.
C	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	299,752.
е	Reduction claimed for blockage or other factors reported on lines. 1a and	7	
	1c (attach detailed explanation) 1e 0.	42 1.	
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	299,752.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	4,496.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	295,256.
6	Minimum investment return. Enter 5% of line 5	6	14,763.
F	art'XI Distributable Amount (see instructions) (Section 4942(1)(3) and (1)(5) private operating foundations are	nd certain	
_	foreign organizations, check here and do not complete this part.)		
1	Minimum investment return from Part X, line 6	1	14,763.
2 a	Tax on investment income for 2017 from Part VI, line 5		
b	Income tax for 2017 (This does not include the tax from Part VI)	1,00	
C	Add lines 2a and 2b	2c	407. 14,356.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	
4	Recoveries of amounts treated as qualifying distributions	4	<u> </u>
5	Add lines 3 and 4	5	14,356.
6	Deduction from distributable amount (see instructions)	6	0.
7	Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII, line 1.	7	14,356.
P	art XII Qualifying Distributions (see instructions)	1 71	
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes	الخينا	F0 000
а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	50,000.
b	Program-related investments - total from Part IX-B	1b	<u> </u>
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the	Alice C	
a		3a	· —
b		3b	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	50,000.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		
	income. Enter 1% of Part I, line 27b	5	407. 49,593.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	49,593.
	Note The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation (4940(e) reduction of tax in those years	qualifies for th	e section

Form 990-PF (2017)

Form 990-PF (2017) CHARITABLE TRUST

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				14,356.
2 Undistributed income if any, as of the end of 2017		\$ 4.00 TO 10	G ' ' ' ' ' ' ' '	
a Enter amount for 2016 only		m	12,370.	
b Total for prior years		0.		- ,
3 Excess distributions carryover, if any, to 2017		Control of the second		,
a From 2012 b From 2013			The state of the s	-
¢ From 2014				ı
d From 2015				` ,
e From 2016			The state of the s	
f Total of lines 3a through e	0.			,
4 Qualifying distributions for 2017 from	1. 1. E. M. + 1. D. S.	The state of the state of the state of	33, 6	•
Part XII, line 4 ► \$ 50,000	· March Control of the Control of the			,
a Applied to 2016, but not more than line 2a			12,370.	·
b Applied to undistributed income of prior				
years (Election required - see instructions)		0.	All Control	
c Treated as distributions out of corpus		1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	TOUR MEDICAL	
(Election required - see instructions)	0.	The state of the s		
d Applied to 2017 distributable amount	A STATE OF THE PARTY OF THE PAR	1 7 7 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Control of the Control	14,356.
e Remaining amount distributed out of corpus	23,274.	经营业的 经联合证明	Profession of	
5 Excess distributions carryover applied to 2017	0.	And the control of the control	The state of the s	0.
(If an amount appears in column (d), the same amount must be shown in column (a))		Frankling Landson	The state of the s	
6 Enter the net total of each column as	The state of the s			
indicated below				~ , ,
a Corpus Add lines 3f 4c and 4e Subtractine 5	23,274.	The fort of the same of the	S. C. S.	; - `
b Prior years' undistributed income. Subtract		1	人名英约多约 "一"。	
line 4b from line 2b	1 State of the sta	0.	Carlotte Control	
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.		A STATE OF THE STA
d Subtract line 6c from line 6b. Taxable	MINT A MINTER		THE JUNE OF THE	
amount - see instructions		0.		
e Undistributed income for 2016. Subtract line		ALTERNATION OF SECTION		4 th 1 th
4a from line 2a Taxable amount - see instr	一个多种的影響等		0.	
f Undistributed income for 2017 Subtract			· 可是的特殊的	
lines 4d and 5 from line 1. This amount must			《新 华····································	
be distributed in 2018	高等的特別	建筑地外的	。这个"你们是我的最后,	0.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3) (Election				The state of the s
may be required - see instructions)	0.	"在海棠里"的"	1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	
8 Excess distributions carryover from 2012	_	LINE PARTY OF THE		
not applied on line 5 or line 7	0.	19 6 18 18 18 18 18	Committee and the second	
9 Excess distributions carryover to 2018				
Subtract lines 7 and 8 from line 6a	23,274.	Com Marine Marine	100 100 100 100 100 100 100 100 100 100	
10 Analysis of line 9				
a Excess from 2013				
b Excess from 2014		And the second second		
c Excess from 2015		操作。我们就是不是	CONTRACTOR OF	
d Excess from 2016		· · · · · · · · · · · · · · · · · · ·		
e Excess from 2017 23, 274	· The said they	I change of policy of a	12 343 3	Form 990-PF (2017

LLOYD TROTTER AND TERI TROTTER

Form 990-PF (2017) CHARITABLE TRUST 81-4736380 Part XIV | Private Operating Foundations (see instructions and Part VII A, question 9) N/A 1 a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2017, enter the date of the ruling b Check box to indicate whether the foundation is a private operating foundation described in section 4942(1)(5) 4942(1)(3) 01 Prior 3 years 2 a Enter the lesser of the adjusted net Tax year (d) 2014 (c) 2015 (a) 2017 (b) 2016 (e) Total income from Part I or the minimum 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 d Amounts included in line 2c not used directly for active conduct of exempt activities e Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2d 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 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 an exempt organization Gross investment income Part XV | Supplementary Information (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year-see instructions.) Information Regarding Foundation Managers: 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)) NONE 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. NONE Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs Check here [X] 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., 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

Form 990-PF (2017) CHARITABLE TRUST

Part XV Supplementary Information (2014)

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3 Grants and Contributions Paid During the		ayment		
Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (nome of dusiness)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
SMITHSONIAN NATIONAL MUSEUM OF	NONE		GENERAL OPERATING	
AFRICAN AMERICAN HISTORY & CULTURE			SUPPORT	
1400 CONSTITUTION AVE NW				
WASHINGTON, DC 20560				25,000
STUDIO MUSEUM OF HARLEM	NONE		GENERAL OPERATING	
144 W 125TH ST			SUPPORT	
NEW YORK, NY 10027				25,000
			1	
Total		 		50,000
b Approved for future payment				
NONE				
	1			
_				

CHARITABLE TRUST

Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated	Unrelated	business income		dea by section 512, 513, or 514	(e)
•	(a) Business	(b) Amount	(C) Exclu- sion code	(d) Amount	Related or exempt function income
1 Program service revenue.	code		COOP	7.110011	
a	-				
			 		
	1 1		-		
ef	-				
g Fees and contracts from government agencies	-		 		
2 Membership dues and assessments				· -	
3 Interest on savings and temporary cash			†···		
investments					
4 Dividends and interest from securities			14		
5 Net rental income or (loss) from real estate	1 1,213 -	7 3 1 1 Sec.	71, 13	and the second	•
a Debt-financed property					
b Not debt-financed property					
6 Net rental income or (loss) from personal					
property					
7 Other investment income					
8 Gain or (loss) from sales of assets other					
than inventory			18	40,395.	
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue					
a	-				
b	-		 		
c			 		
d	-		<u> </u>		
e 12 Subtotal Add columns (b), (d), and (e)	1 (1	0.	11 (24)	41,946.	0.
13 Total Add line 12, columns (b), (d), and (e)			<u> </u>	13	41,946.
(See worksheet in line 13 instructions to verify calculations)					·
Part XVI-B. Relationship of Activities	to the Accor	nplishment of Exe	empt	Purposes	
Line No Explain below how each activity for which inc			contrib	outed importantly to the accom	plishment of
▼ the foundation's exempt purposes (other than	n by providing fund	is for such purposes)		· · · · · · · · · · · · · · · · · · ·	· ···
		····			
			•		
			•		
		·			
723621 01-03-18					Form 990-PF (2017)

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Form 990-PF (2017) CHARITABLE TRUST 81-4736380 Part XVII Information Regarding Transfers to and Transactions and Relationships With Noncharitable Exempt Organizations

1 Did (the organization directly or indi	rectly engage in any of the followi	ng with any other organization	i described in section 501(c)	Tes No
•		nizations) or in section 527, relatin	• •		
	_	ation to a noncharitable exempt or	ganization of		
	Cash				1a(1) X
	Other assets				1a(2) X
-	r transactions		1		1987 (1987)
	Sales of assets to a noncharital	· · · · · · · · · · · · · · · · · · ·			1b(1) X
		ncharitable exempt organization			1b(2) X
	Rental of facilities, equipment,				1b(3) X
(4)	Reimbursement arrangements				1b(4) X
	Loans or loan guarantees				1b(5) X
		embership or fundraising solicitation			1b(6) X
	•	ailing lists, other assets, or paid en			1c X
				ays show the fair market value of th	
	- · · · · · · · · · · · · · · · · · · ·			in any transaction or sharing arrang	gement, show in
		other assets, or services received			
a) Line no	(b) Amount involved	(c) Name of noncharitable	le exempt organization	(d) Description of transfers, transac	tions, and sharing arrangements
		N/A			
		ļ			
				 	
				<u> </u>	
2a (s.thr	e foundation directly or indirect	tly affiliated with, or related to, on	e or more fax-exempt organiza	ations described	
		in 501(c)(3)) or in section 527?	o or more tax exempt organize	2000 000000	Yes X No
	otion of ital former than sound				
<u>U 11 10</u>	es ' complete the following sch				
	es,' complete the following sch		(b) Type of organization	(c) Description o	f relationship
	(a) Name of org		(b) Type of organization	(c) Description o	f relationship
			(b) Type of organization	(c) Description o	f relationship
	(a) Name of org		(b) Type of organization	(c) Description o	f relationship
	(a) Name of org		(b) Type of organization	(c) Description o	f relationship
	(a) Name of org		(b) Type of organization	(c) Description o	f relationship
	(a) Name of org N/A	ganization			f relationship
	(a) Name of org N/A	ganization that I have examined this return, includin	g accompanying schedules and stat	(c) Description 0 terments, and to the best of my knowledge on of which preparer has any knowledge	May the IRS discuss this
Sign '	(a) Name of org N/A	ganization that I have examined this return, includin	g accompanying schedules and state n taxpayer) is based on all information	tements, and to the best of my knowledge on of which preparer has any knowledge	May the IRS discuss this return with the preparer shown below? See instr
	(a) Name of org N/A Under penalties of perjury, I declare t and belief, it is true, correct, and com	ganization that I have examined this return, including the pectage of preparer (other than the please of p	g accompanying schedules and statin taxpayer) is based on all information	tements, and to the best of my knowledge on of which preparer has any knowledge OFFICER	May the IRS discuss this return with the preparer
Sign '	(a) Name of org N/A Under penalties of perjury, I declare t and belief, it is the, correct, and com Signature of officer or trustee	ganization that I have examined this return, including a place of the	g accompanying schedules and state in taxpayer) is based on all information.	tements, and to the best of my knowledge on of which preparer has any knowledge OFFICER Title	May the IRS discuss this return with the preparer shown below? See instr
Sign '	(a) Name of org N/A Under penalties of perjury, I declare t and belief, it is true, correct, and com	ganization that I have examined this return, including a place of the	g accompanying schedules and state in taxpayer) is based on all information.	Tements, and to the best of my knowledge on of which preparer has any knowledge OFFICER Title Date Check X	May the IRS discuss this return with the preparer shown below? See instr
Sign ' Here	(a) Name of org N/A Under penalties of perjury, I declare to and belief, it is true, correct, and com Signature of officer or trustee Print/Type preparer's na	that I have examined this return, including applies. Declaration of preparer (other than the control of the con	g accompanying schedules and state in taxpayer) is based on all information.	tements, and to the best of my knowledge on of which preparer has any knowledge OFFICER Title	Mey the IRS discuss this return with the preparer shown below? See instr
Sign Here	(a) Name of org N/A Under penalties of perjury, I declare to and belief, it is true, correct, and com Signature of officer or trustee Print/Type preparer's na LEONARD CA	that I have examined this return, including a place of the property of the pro	g accompanying schedules and state in taxpayer) is based on all information. Date Signature	Tements, and to the best of my knowledge on of which preparer has any knowledge OFFICER Title Date Check X 1 self- employed	May the IRS discuss this return with the preparer shown below? See instr X Yes No PTIN P00644749
Sign Here Paid Prepar	(a) Name of org N/A Under penalties of perjury, I declare t and belief, it is true, correct, and com Signature of officer or trustee Print/Type preparer's na LEONARD CA Firm's name ► SMO	that I have examined this return, including applies. Declaration of preparer (other than the control of the con	g accompanying schedules and state in taxpayer) is based on all information. Date Signature	Tements, and to the best of my knowledge on of which preparer has any knowledge OFFICER Title Date Check X 1 self- employed	Mey the IRS discuss this return with the preparer shown below? See instr
Sign '	(a) Name of org N/A Under penalties of perjury, I declare the and belief, it is true, correct, and come of the service of of the service o	that I have examined this return, including plete Declaration of preparer (other than the preparer is the prep	g accompanying schedules and state in taxpayer) is based on all information. Date signature CIDSON & ASSOC	Tements, and to the best of my knowledge on of which preparer has any knowledge OFFICER Title Date Check X 1 self- employed	May the IRS discuss this return with the preparer shown below? See instr X Yes No PTIN P00644749
Sign Here Paid Prepar	(a) Name of org N/A Under penalties of perjury, I declare to and belief, it is true, correct, and come of the correct of trustee of the correct of the cor	that I have examined this return, including plete Declaration of preparer (other than the preparer). By Preparer's state of the preparer of the preparer's state of the prepa	g accompanying schedules and state in taxpayer) is based on all information. Date Signature VIDSON & ASSOC.	tements, and to the best of my knowledge on of which preparer has any knowledge OFFICER Title Date Check X is self- employed LLC Firm's EIN	May the IRS discuss this return with the preparer shown below? See instr X Yes No 1 PTIN P00644749 46-5683178
Sign Here Paid Prepar	(a) Name of org N/A Under penalties of perjury, I declare to and belief, it is true, correct, and come of the correct of trustee of the correct of the cor	that I have examined this return, including plete Declaration of preparer (other than the preparer is the prep	g accompanying schedules and state in taxpayer) is based on all information. Date Signature VIDSON & ASSOC.	tements, and to the best of my knowledge on of which preparer has any knowledge OFFICER Title Date Check X is self- employed LLC Firm's EIN	May the IRS discuss this return with the preparer shown below? See instr X Yes No PTIN P00644749

Schedule B

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

Department of the Treasury Internal Revenue Service

Schedule of Contributors

➤ Attach to Form 990, Form 990-EZ, or Form 990-PF.
➤ Go to www irs.gov/Form990 for the latest information.

0M8 No 1545-0047

2017

Name of the organization LLOYD TROTTER AND TERI TROTTER

LLOYD TROTTER AND TERI TROTTER CHARITABLE TRUST

81-4736380

Employer identification number

Organization type (check one)						
Filers of		Section ·				
Form 990	0 or 990-EZ	501(c)() (enter number) organization				
		4947(a)(1) nonexempt charitable trust not treated as a private foundation				
		527 political organization				
Form 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				
	nly a section 501(c)(covered by the General Rule or a Special Rule 7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See instructions				
		filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.				
Special F	Rules					
	sections 509(a)(1) a any one contributor	described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under 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 r, 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, line 1 Complete Parts I and II				
	year, total contribut	described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the tions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for ruelty to children or animals. Complete Parts I, II, and III				
	year, contributions is checked, enter hi purpose Don't com	described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box ere the total contributions that were received during the year for an exclusively religious, charitable, etc., inplete any of the parts unless the General Rule applies to this organization because it received nonexclusively etc., etc., contributions totaling \$5,000 or more during the year.				
but it mu	st answer "No" on	at isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to be 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
LLOYD TROTTER AND TERI TROTTER
CHARITABLE TRUST

Employer identification number

81-4736380

Part I	Contributors (see instructions) Use duplicate copies of Part I if additional	I space is needed	
(a) <u>No</u>	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	LLOYD TROTTER 170 BEARS CLUB DRIVE JUPITER, FL 33477	s50,641.	Person Payroll Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	TERI TROTTER 170 BEARS CLUB DRIVE JUPITER, FL 33477	s50,641.	Person Payroll Complete Part II for noncash contributions)
(a) <u>No.</u>	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3	LLOYD TROTTER 170 BEARS CLUB DRIVE JUPITER, FL 33477	\$1,000.	Person X 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 Oncash Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		s	Person Payroll Noncash (Complete Part II for noncash contributions)

Name of organization

LLOYD TROTTER AND TERI TROTTER

CHARITABLE TRUST

Employer identification number

81-4736380

Part II	Noncash Property (see instructions) Use duplicate copies of P	art II if additional space is needed	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
	50 SHS OF ALPHABET INC.		-
1			
		ss50,641.	10/31/17
(a) No. from	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
Part I	50 SHS OF ALPHABET INC.	(See instructions.)	
2	JU SHS OF ALFHADET INC.		
		ssssssssss	10/31/17
(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
		s	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		s	
(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) (

Name of organization Employer identification number LLOYD TROTTER AND TERI TROTTER CHARITABLE TRUST 81-4736380 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 info once) Use duplicate copies of Part III if additional space is needed (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (d) Description of how gift is held (c) Use of gift Part I (e) Transfer of gift Relationship of transferor to transferee Transferee's name, address, and ZIP + 4

FORM 990-PF	DIVIDENDS	AND INTER	EST	FROM SECUR	ITIES S'	PATEMENT 1
SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDEND		(A) REVENUE PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME
UBS	1,551.		0.	1,551.	1,551.	
TO PART I, LINE 4	1,551.		0.	1,551.	1,551.	
FORM 990-PF		ACCOUNTI	NG	FEES	S	PATEMENT 2
DESCRIPTION		(A) EXPENSES PER BOOKS		(B) T INVEST- NT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
SMOLIN, CALBO, DAVIDS ASSOCIATES, LLC	ÒN &	1,000.		1,000.		0.
TO FORM 990-PF, PG 1,	LN 16B	1,000.		1,000.		0.
FORM 990-PF		OTHER E	XPE:	NSES	S'	ratement 3
DESCRIPTION		(A) EXPENSES PER BOOKS		(B) T INVEST- NT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
UBS ANNUAL FEE LATE PAYMENT INTEREST	_ '	150. 49.		150. 49.		0.
TO FORM 990-PF, PG 1,	LN 23	199.		199.		0.
	DECREASES	IN NET AS	SET	S OR FUND B	ALANCES S	TATEMENT 4
DESCRIPTION						AMOUNT
DIFFERENCE BETWEEN FM	V & BOOK	VALUE OF S	TOC:	K SOLD		82,305

82,305.

TOTAL TO FORM 990-PF, PART III, LINE 5

FORM 990-PF CORPORATE STOCK		STATEMENT 5
DESCRIPTION	BOOK VALUE	FAIR MARKET VALUE
ALPHABET INC LOCKHEED MARTIN CORP	58,069. 11,660.	322,340. 64,210.
TOTAL TO FORM 990-PF, PART II, LINE 10B	69,729.	386,550.