Form **990-PF**

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	calen	dar year 2017 or tax year beginning		, and ending		
Na	me of	foundation			A Employer identification	n number
_0	ET	ZEN FAMILY CHARITIES, I	NC.		,	
	70	WILLIAM E. GETZEN			82-054062	3
Nu	Number and street (or P O box number if mail is not delivered to street address) Room/suite					
1	42	1 WESTBROOK DRIVE			941-922-8	581
		own, state or province, country, and ZIP or foreign p	ostal code		C If exemption application is	
	-	ASOTA, FL 34231			полотрична арриосион го	portaning, distant sort p
		all that apply: Initial return	Initial return of a fo	rmer public charity	D 1. Foreign organization	ns check here
-	0110011	Final return	Amended return	The public onarty	i i i orongir organization	10, 01100K 110.10
		Address change	Name change	,	Foreign organizations no check here and attach in the control of the control	neeting the 85% test,
	Chack	type of organization: X Section 501(c)(3) ex		$ 0$ ψ	1	
٦, ،	_		Other taxable private founda	~ 1	E If private foundation st	
			ng method: X Cash		under section 507(b)(,, ,,
		·		Accrual	F If the foundation is in	
		Part II, col. (c), line 16) 01 1, 960, 812. (Part I, colur	ther (specify)		under section 507(b)(1)(B), check here
	<u>\$</u>					(4)
P	art I	(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	152,000.		N/A	
	2	Check In the foundation is not required to attach Sch. B				
	3	Interest on savings and temporary cash investments				
	4	Dividends and interest from securities	37,566.	37,566.		STATEMENT 1
	5a	Gross rents				
		Net rental income or (loss)				
	62	Net gain or (loss) from sale of assets not on line 10	29,817.			
5	h	Gross sales price for all assets on line 6a 123,840.				
Revenue	7	Capital gain net income (from Part IV, line 2)		29,817.	 	
ď	8 8	Net short-term capital gain		25/01/		
	9	Income modifications				
	1 -	Gross sales less returns and allowances				
	1 .	Less Cost of goods sold				
		Gross profit or (loss)				
	1	Other income	2,714.	2,714.		STATEMENT 2
	12	Total, Add lines 1 through 11	222,097.	70,097.		DIALBIMINI Z
` 	13		0.	0.	 	0.
))	14	Compensation of officers, directors, trustees, etc	ļ		 	
5		Other employee salaties and wages VED Pension plans, employee benefits VED			 	
	15	Legal fees 8			 	
	104	Accounting fields MAY 1452 MAY 38	1,250.	0.	 	1 250
\tilde{z}	<u>د</u> ا	Accounting fees MAY 1 4 SAIMT 3 Other professional fees	1,450.		 	1,250.
SCANNE Tive Expense	; _{1,7} °	Interest				
SCANNE Specialize Expensions of the property o	17		2,426.	0.	 	1,575.
1	18	Taxes	4,440.			1,3/3.
Ē	19	Depreciation and depletion				
5	20	Occupancy	600.	0.		+
4	21	Travel, conferences, and meetings	000.	<u> </u>	-	0.
-	22	Printing and publications	11 010	11 77 - 1	 	+
į	23	Other expenses STMT 5	11,812.	11,751.	 	61.
ž.	24	Total operating and administrative	1000	44 854	1	1 225
Š	5	expenses. Add lines 13 through 23	16,088.	11,751.	 	2,886.
_	25	Contributions, gifts, grants paid	71,400.		 	71,400.
	26	•	0.5 400	44]	
_	+	Add lines 24 and 25	87,488.	11,751.	ļ	74,286.
	27	Subtract line 26 from line 12:			}	
	a	Excess of revenue over expenses and disbursements	134,609.		 	
	b	Net investment income (if negative, enter -0-)		58,346.		
_	<u> </u>	Adjusted net income (if negative, enter -0-)	l,		N/A	<u> </u>
					^	OOO DE

Form 990-PF (2017) 82-0540623 C/O WILLIAM E. Page 2 Beginning of year Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only End of year Part II (c) Fair Market Value (a) Book Value (b) Book Value 22,926. 11,839 22,926. 1 Cash - non-interest-bearing 120,932. 47,768. 120,932. 2 Savings and temporary cash investments 3 Accounts receivable ► Less: allowance for doubtful accounts 4 Pledges receivable ► Less: allowance for doubtful accounts 5 Grants receivable 6 Receivables due from officers, directors, trustees, and other disqualified persons 7 Other notes and loans receivable Less: allowance for doubtful accounts | 8 Inventories for sale or use 9 Prepaid expenses and deferred charges 1,075,381. 1,141,387. 1,553,515. 10a Investments - U.S. and state government obligations STMT 6 b Investments - corporate stock c Investments - corporate bonds 11 Investments - land, buildings, and equipment basis Less accumulated depreciation 12 Investments - mortgage loans STMT 7 261,526. 245,878. 263,439. 13 Investments - other 14 Land, buildings, and equipment; basis Less accumulated depreciation 15 Other assets (describe ▶ 16 Total assets (to be completed by all filers - see the 1,396,514. 1,531,123. 1,960,812. instructions. Also, see page 1, item I) 17 Accounts payable and accrued expenses 18 Grants payable 19 Deferred revenue 20 Loans from officers, directors, trustees, and other disqualified persons 21 Mortgages and other notes payable 22 Other liabilities (describe 0. 23 Total liabilities (add lines 17 through 22) Foundations that follow SFAS 117, check here and complete lines 24 through 26, and lines 30 and 31. 24 Unrestricted 25 Temporarily restricted 26 Permanently restricted Foundations that do not follow SFAS 117, check here **▶** X and complete lines 27 through 31. 27 Capital stock, trust principal, or current funds 0 28 Paid-in or capital surplus, or land, bldg., and equipment fund 1,396,514 1,531,123 29 Retained earnings, accumulated income, endowment, or other funds 1,396,514 1,531,123 30 Total net assets or fund balances 1,396,514 1,531 31 Total liabilities and net assets/fund balances Part III Analysis of Changes in Net Assets or Fund Balances 1 Total net assets or fund balances at beginning of year - Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return) <u>1,396,514.</u> 2 Enter amount from Part I, line 27a 134,609. 3 Other increases not included in line 2 (itemize) 4 Add lines 1, 2, and 3

5 Decreases not included in line 2 (itemize)

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

1,531,123. Form **990-PF** (2017)

Part IV Capital Gains	and Losses for T	ax on Investment	Income							
(a) List and describe the kind(s) of property sold (for example, real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.) (b) How acquired P - Purchase D - Donatron				(c) Date (mo., d	acquired ay, yr.)	(d) Date sold (mo., day, yr.)				
1a SEE ATTACHED						P	VARI	OUS	12/31/17	
b CAPITAL GAINS	DIVIDENDS									
_c				<u> </u>						
<u>d</u>				<u> </u>					ļ	
<u>e</u>				L					<u> </u>	
(e) Gross sales price	(f) Depreciation al (or allowable		st or other basis expense of sale					ain or (loss s (f) minus		
a 109,867.			94,02	3.					<u> 15,844.</u>	
b 13,973.									13,973.	
_ C										
d										
e		4 4 1 -	10/04/00							
Complete only for assets showin						(I) Gains (C	col. (h) gair not less tha	ın -N-) or	
(i) FMV as of 12/31/69	(j) Adjusted ba as of 12/31/6		cess of col. (ı) col. (ı), ıf any	- {		00	Losses	(from col.	(h))	
	43 01 12/0 1/0			-+					15 044	
<u>a</u>				\dashv					15,844. 13,973.	
<u>b</u>				-+					13,313.	
d d				-+						
e				-+						
	C 14		7	<u> </u>						
2 Capital gain net income or (net ca		n, also enter in Part I, line ss), enter -0- in Part I, line		}	2				29,817.	
3 Net short-term capital gain or (los	•	s 1222(5) and (6):		51						
If gain, also enter in Part I, line 8,	column (c).			 				3T / %		
If (loss), enter -0- in Part I, line 8 Part V Qualification U	nder Section 49	40(e) for Reduced	Tay on Net	Inv	estr	ent In	come	N/A	<u> </u>	
(For optional use by domestic private if section 4940(d)(2) applies, leave if Was the foundation liable for the sectif "Yes," the foundation doesn't qualif	nis part blank. tion 4942 tax on the dist	ributable amount of any ye	ear in the base per		l.)				Yes X No	
1 Enter the appropriate amount in	each column for each ye	ar; see the instructions be	fore making any e	ntries						
(a) Base period years Calendar year (or tax year beginni	ng in) Adjusted q	(b) jualifying distributions	Net value of no	(c) inchar	ıtable-	use asset	s	(d) Distribution ratio (col. (b) divided by col. (c))		
2016		54,966.		1	. 44	7,72				
2015		72,381.		1		4,12			.051549	
2014		56,501.		1	, 37	9,71	5.		.040951	
2013		50,518.		1	,19	4,53	5.		.042291	
2012		43,657.		1_	,02	0,01	5.		.042800	
2 Total of line 1, column (d)							2		.215558	
3 Average distribution ratio for the the foundation has been in exister	•	de the total on line 2 by 5.	0, or by the numb	er of y	ears/		3		.043112	
4 Enter the net value of noncharitable-use assets for 2017 from Part X, line 5			4		1,713,247.					
				5		73,862.				
5 Multiply line 4 by line 3										
6 Enter 1% of net investment incom	ne (1% of Part I, line 27t	o)					6		583.	
7 Add lines 5 and 6							7_		74,445.	
8 Enter qualifying distributions from Part XII, line 4						74,286.				
If line 8 is equal to or greater than See the Part VI instructions.	I line 7, check the box in	ran vi, line 10, and comp	piete that part usin	ig a 19	% tax i	rate. 				

GETZEN FAMILY CHARITIES, INC.

	990-PF (2017)			age 4
	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) Domestic foundations that meet the section 4940(e) requirements in Part V, check here and enter 1%	1	.,16	57.
U	of Part I, line 27b		<u>. ,</u>	<u> </u>
	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations, enter 4% of Part I, line 12, col. (b).			
	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)			<u>0.</u>
	Add lines 1 and 2]	.,16	
	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)		- 1	0.
	Tax based on investment income Subtract line 4 from line 3. If zero or less, enter -0-		1,10	57.
	Credits/Payments:			
	2017 estimated tax payments and 2016 overpayment credited to 2017 Exempt foreign organizations - tax withheld at source 6a 560. 6b 0.			
	Exempt foreign organizations - tax withheld at source Tax paid with application for extension of time to file (Form 8868) 6c 0 •			
	Backup withholding erroneously withheld 6d 0.			
	Total credits and payments. Add lines 6a through 6d		5.6	50.
	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached			0.
	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed		61	$\overline{07.}$
	Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			
	Enter the amount of line 10 to be: Credited to 2018 estimated tax			
Pa	rt VII-A Statements Regarding Activities			
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in		Yes	
	any political campaign?	1a		<u>X</u> _
þ	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition	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	1	ļ	
	distributed by the foundation in connection with the activities.			
	Did the foundation file Form 1120-POL for this year?	1c		<u>X</u> _
٥	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:			
	(1) On the foundation. ► \$ 0 . (2) On foundation managers. ► \$ 0 . Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation			
e	managers. > \$ 0.			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		X
-	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			
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3	1	X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		X
b	If "Yes," has it filed a tax return on Form 990-T for this year?	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		<u>x</u> _
	If "Yes," attach the statement required by General Instruction T			
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:			
	By language in the governing instrument, or	}		
	By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law	1.1		
_	remain in the governing instrument?	6	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	
8a	Enter the states to which the foundation reports or with which it is registered. See instructions.			
	FL			
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)	1	1	
	of each state as required by General Instruction G? If "No," attach explanation	8b	х	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar			-
	year 2017 or the tax year beginning in 2017? See the instructions for Part XIV. If "Yes," complete Part XIV	9		_X_
10	Did any persons become substantial contributors during the tax year? if "Yes," attach a schedule listing their names and addresses	10		X

P.E	art 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	2 0	F 0 1	
14	The books are in care of \blacktriangleright WILLIAM E. GETZEN Located at \blacktriangleright 1421 WESTBROOK DRIVE, SARASOTA, FL Telephone no. \blacktriangleright 941-92		201	
15	Located at ► 1421 WESTBROOK DRIVE, SARASOTA, FL ZIP+4 ►34 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here	231	_	
13	and enter the amount of tax-exempt interest received or accrued during the year	N	/A	ш
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		X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the			_
	foreign country			
Pa	art 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? Yes X No			
	a disqualified person? (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			
	(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.)			
t	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 N/A	_1b		ļ
	Organizations relying on a current notice regarding disaster assistance, check here			
(Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2017?	1c		х
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)):			
á	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?			
	If "Yes," list the years ,,,,,			
ı	a Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect			
	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach			
	statement - see instructions.) If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.	_2b_		
		Ì		Į.
38	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			ĺ
	during the year?			
ł	a If "Yes," did it have excess business holdings in 2017 as a result of (1) any purchase by the foundation or disqualified persons after	-		l
	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		17
	a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	-	X
	b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2017?	4b		x
_		rm 99 0)-PF	
	10			(2017)

			_	_
Form	ggn	-PF	/201	7

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

Form 990-PF (2017)	C/O WILLIAM E. GETZEN	82-05	40623 Page 7
Rart VIII Inf	formation About Officers, Directors, Trustees, Foundation aid Employees, and Contractors (continued)		
	aid independent contractors for professional services. If none, enter "NO	NE."	
	(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE	3		
			
Total number of other	ers receiving over \$50,000 for professional services Immary of Direct Charitable Activities		▶ 0
List the foundation's	four largest direct charitable activities during the tax year. Include relevant statistical in ions and other beneficiaries served, conferences convened, research papers produced,		Expenses
1 N/A	to and that be contained and real, control and the control and		
2			
3			
	mmary of Program-Related Investments gest program-related investments made by the foundation during the tax year on lines	1 and 2.	Amount
1 <u>N/A</u>			
2			
All other program-re	elated investments. See instructions.		
Total, Add lines 1 t	through 3		0.
			Form 990-PF (2017)

Form **990-PF** (2017)

P	Minimum Investment Return (All domestic foundations must complete this part. Foreign four	ndations	s, see instructions)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
a	Average monthly fair market value of securities	1a	1,569,221.
b	Average of monthly cash balances	1b_	71,396.
C	Fair market value of all other assets	1c	98,720.
d	Total (add lines 1a, b, and c)	1d	1,739,337.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) <u>1e</u> <u>0.</u>	<u> </u>	
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	1,739,337.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	26,090.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	1,713,247.
6	Minimum investment return, Enter 5% of line 5	6	85,662.
Р	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations are foreign organizations, check here in and do not complete this part.)	ıd certaır	1
1	Minimum investment return from Part X, line 6	1	85,662.
2a	Tax on investment income for 2017 from Part VI, line 5		
b	Income tax for 2017. (This does not include the tax from Part VI.))	
C	Add lines 2a and 2b	2c	1,167.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	84,495.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	84,495
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	84,495
P	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		= 1 004
а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	74,286.
b	Program-related investments - total from Part IX-B	1b	0.
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:		
	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions Add lines 1a through 3b. Enter here and on Part V, line 8; and Part XIII, line 4	4	74,286
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	0,
6	Adjusted qualifying distributions Subtract line 5 from line 4	6	74,286.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation (qualifies	for the section

C/O WILLIAM E. GETZEN

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				84,495.
2 Undistributed income, if any, as of the end of 2017				
a Enter amount for 2016 only			71,837.	
b Total for prior years:				
,,		0.		
3 Excess distributions carryover, if any, to 2017:				
a From 2012				
b From 2013				
c From 2014		Ì	Ì	
d From 2015				
e From 2016	_ 1			
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2017 from				
Part XII, line 4: ► \$ 74,286.			E1 00E	
a Applied to 2016, but not more than line 2a			71,837.	
b Applied to undistributed income of prior				
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus	<u> </u>	j		
(Election required - see instructions)	0.			2,449.
d Applied to 2017 distributable amount	0.			2,449.
e Remaining amount distributed out of corpus	0.			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:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	0.			
b Prior years' undistributed income. Subtract	į			
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				
lines 4d and 5 from line 1. This amount must			:	
be distributed in 2018				82,046.
7 Amounts treated as distributions out of		}	ı	
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3) (Election	0	}		
may be required - see instructions)	0.			
8 Excess distributions carryover from 2012	0.			
not applied on line 5 or line 7				
9 Excess distributions carryover to 2018. Subtract lines 7 and 8 from line 6a	0.			
10 Analysis of line 9:				
a Excess from 2013				
b Excess from 2014		1		
c Excess from 2015				
d Excess from 2016		1		
e Excess from 2017				

GETZEN FAMILY CHARITIES, INC. Form 990-PF (2017) C/O WILLIAM E. GETZEN 82-0540623 Page 10 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 4942(j)(5) 4942(j)(3) or b Check box to indicate whether the foundation is a private operating foundation described in section 2 a Enter the lesser of the adjusted net Tax year Prior 3 years (b) 2016 (a) 2017 (c) 2015 (d) 2014 (e) Total income from Part I or the minimum investment return from Part X for each year listed **b** 85% of line 2a 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 2c 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 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 (4) 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 LX 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:

Part XV Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Foundation Purpose of grant or show any relationship to Amount status of contribution any foundation manager Name and address (home or business) recipient or substantial contributor a Paid during the year ALL FAITHS FOOD BANK NONE ₽C GENERAL FOOD 8171 BLAIKIE CT SARASOTA, FL 34240 5,000. AMERICAN CANCER SOCIETY NONE РC GENERAL FUND 2970 UNIVERSITY PKY #104 SARASOTA, FL 34243 1,000. AMERICAN RED CROSS NONE PC GENERAL FUND 2001 CANTU COURT 2,000. SARASOTA, FL 34232 NONE PC BLUE RIDGE FREE DENTAL CLINIC GENERAL FUND 130 US HIGHWAY 64E, #12 CASHIERS, NC 28717 1,000. PC CASHIERS-HIGHLANDS HUMANE SOCIETY NONE GENERAL FUND P.O. BOX 638 CASHIERS NC 28717 1,000. SEE CONTINUATION SHEET(S) ▶ 3a Total 71,400. b Approved for future payment NONE Total **▶** 3b

Form 990-PF (2017) C/O WILLIAM E. GETZEN

Part XVI-A Analysis of Income-Produ	ucing Activitie	es			
Enter gross amounts unless otherwise indicated.	Unrelated t	ousiness income		section 512, 513, or 514	(e)
	(a)	(b)	(c) Exclu-	(d)	Related or exempt
1 Program service revenue:	Business code	Amount	sion	Amount	function income
a	-				
b					
C	1 1				
d	I I				
e					
f					
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	37,566.	
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			14	2,714.	
8 Gain or (loss) from sales of assets other					
than inventory	1		18	29,817.	
9 Net income or (loss) from special events			 		
O Gross profit or (loss) from sales of inventory					
1 Other revenue:					
a					
b		***			
c	i i				
d	· ·		 		
e	-		 - - - - - - - - - -		
2 Subtotal. Add columns (b), (d), and (e)	-	0		70,097.	0
3 Total. Add line 12, columns (b), (d), and (e)	<u> </u>			13	
See worksheet in line 13 instructions to verify calculations.)				··· <u>-</u>	,
Part XVI-B Relationship of Activities	to the Accon	npiisnment of t	=xempt Pl	ırposes	
Line No. Explain below how each activity for which in	come is reported in o	column (e) of Part XVI	-A contributed	importantly to the accomp	olishment of
the foundation's exempt purposes (other that				. , ,	
					· · · · · · · · · · · · · · · · · · ·
		.,			
					
		 		·	
		·			
			. <u> </u>		
	 				
					

723621 01-03-18

orm 990-PF (201	7)C/O_1	WILLIAM	E. G	ETZEN	82-0540623	Page 13
Part XVII	Information F	Regarding T	ransfe	rs to and	Transactions and Relationships With Noncharitable	
	Exempt Orga	nizations				

1 D	d the org	ganization directly or indir	ectly engage in any of the following	g with any other organization	described in secti	on 501(c)		Yes	No
(other than section 501(c)(3) organizations) or in section 527, relating to political organizations?									
a Ti	ansfers	from the reporting founda	ation to a noncharitable exempt org	anization of:			1		
(1) Cash						1a(1)	L	_X_
(2) Other	assets					1a(2)		_X_
b 0	ther trans	sactions:							
(1) Sales	of assets to a noncharitat	ble exempt organization				1b(1)		_X_
(2	!) Purch	ases of assets from a nor	ncharitable exempt organization				1b(2)		_X_
(3	•	l of facilities, equipment, o	or other assets				1b(3)		<u>X</u>
(4	I) Reimb	oursement arrangements					1b(4)		<u>X</u>
•	-	or loan guarantees					1b(5)		X
			mbership or fundraising solicitation				1b(6)		<u>X</u>
	-		ılıng lısts, other assets, or paid emi				10_	L	<u> X</u>
			"Yes," complete the following sche	• •				ets,	
			oundation. If the foundation receive	ed less than fair market value	in any transaction	or sharing arrangement, s	how in		
		`	other assets, or services received.		1 (4)				
a) Line	no	(b) Amount involved	(c) Name of noncharitable	exempt organization	(d) Description	of transfers, transactions, and	sharing ar	rangeme	nts
			N/A		-				
					-				
					ļ				
					<u> </u>				
					ļ				
				<u> </u>					
	_ [_				<u></u>				
							_		
							-		
						- • • • • • • • • • • • • • • • • • • •			
2a 19	the four	ndation directly or indirect	tly affiliated with, or related to, one	or more tax-exempt organiz	ations described				
			n 501(c)(3)) or in section 527?	of more tax exempt organiz	alions dosorisod		Yes	X	No
		emplete the following sche							_ 140
יי ט	163, 60	(a) Name of org		(b) Type of organization		(c) Description of relations	hin		
			azaron	(b) type of organization		of Bosonphon of Tolansino			
		N/A							
									
	Under	nenalties of neritiny. I declare	that I have examined this return, includin	a accompanying schedules and s	statements, and to the	hest of my knowledge			
Sigr		elief, it as true porrect, and con	riplete Declaration of preparer (other than	n taxpayer) is based on all informa	ation of which preparer	. L Ma	y the IRS a	discuss e prepar	this er
Here	• •	Mindel	Sh.	V5/10/18		sho	wn below	? See in	str
	K/				DIRECT	:OR	X Yes	· L_	J No I
	Sigu	ature of officer or trustee		Date /	Title	Chook Total			
		Print/Type preparer's na	ame Preparer's si	griadure	Date	Check if PTIN			
De:-			(\hu	- Yer many	5-10-10	self- employed			
Paid		JULIE L. B			5-10-18		<u>0106</u>		_
•	oarer	Firm's name KER	KERING, BARBERI	0 & 60.		Firm's EIN ► 59-1'	7533	37	
Use	Only					<u> </u>			
		•	O. BOX 49348						
		SA	RASOTA, FL 3423	0-6348		Phone no. 941-3			
						Fr	orm 99 0	0-PF	(2017)

Schedule B

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

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

Attach to Form 990, Form 990-EZ, or Form 990-PF.

► Go to www.irs.gov/Form990 for the latest information.

OMB No 1545-0047

2017

Employer identification number

	TZEN FAMILY CHARITIES, INC. O WILLIAM E. GETZEN	82-0540623					
Organization type (check o							
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						
General Rule	(7), (8), or (10) organization can check boxes for both the General Rule and a Special Ru						
property) from any	one contributor Complete Parts I and II. See instructions for determining a contributor	's total contributions.					
Special Rules							
sections 509(a)(1) any one contributo	n described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or, during the year, total contributions of the greater of (1) \$5,000, or (2) 2% of the amount line 1. Complete Parts I and II.	or 16b, and that received from					
year, total contribu	For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.						
For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000 if this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year							
but it must answer "No" on	nat isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (F Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Fo 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
GETZEN FAMILY CHARITIES, INC.
C/O WILLIAM E. GETZEN

Employer identification number

82-0540623

Part I	Contributors (see instructions) Use duplicate copies of Part I if ad	ditional space is needed	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	WILLIAM E. AND RUTH E. GETZEN 1421 WESTBROOK DRIVE SARASOTA, FL 34231	\$152,000.	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.)

Name of organization

GETZEN FAMILY CHARITIES, INC.

C/O WILLIAM E. GETZEN

Employer identification number

82-0540623

Part II	Noncash Property (see instructions) Use duplicate copies of 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
		-	
		_ _ \$	
(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
		_	
		_ \$	

(e) Transfer of gift

Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee				

Part XV **Supplementary Information** Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient Foundation Purpose of grant or show any relationship to Amount status of contribution any foundation manager Name and address (home or business) or substantial contributor recipient CHURCH OF THE PALMS NONE ÞС FOOD PANTRY 3224 BEE RIDGE RD SARASOTA, FL 34239 2,000. FORTY CARROTS FAMILY CENTER NONE ₽C GENERAL FUND 1500 SOUTH TUTTLE AVE 4.000. SARASOTA, FL 34239 GIRL SCOUT OF GULFCOAST FLORIDA, INC. PC GENERAL FUND 4780 CATTLEMEN RD SARASOTA, FL 34233 5,000. HIGHLANDS BOLIVIAN MISSION NONE ÞС GENERAL FUND P.O. BOX 1959 HIGHLANDS NC 28741 250. HIGHLANDS-CASHIERS HOSPITAL NONE so т GENERAL FUND FOUNDATION PO BOX 190 2,000, HIGHLANDS, NC 28741 NONE JACK AND JILL FOUNDATION РC GENERAL FUND 1930 17TH STREET NW WASHINGTON, DC 20009 GENERAL FUND 5,000, LABRADOR RETRIEVER RESCUE OF FLORIDA ÞС NONE GENERAL FUND 481 E HILLSBORO BLVD 500. DEERFIELD BCH, FL 33441 LIBRARY FOUNDATION FOR SARASOTA NONE ÞС GENERAL FUND COUNTY, INC. 13801 TAMIAMI TR, S-D 5,400. NORTH PORT, FL 34287 MOFFITT CANCER CENTER GENERAL FUND NONE PC 12902 USF MAGNOLIA DRIVE TAMPA FL 33612 1,000. NATE'S HONOR ANIMAL RESCUE NONE ÞС GENERAL FUND 8437 COOPER CREEK BLVD 3,500. BRADENTON, FL 34201 Total from continuation sheets 61 400.

Part XV Supplementary Information	JIAM E. GETZEN		02_03	40623
3. Grants and Contributions Paid During the You				
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient	Contribution	
PINES OF SARASOTA FOUNDATION	NONE	₽C	MEMORIAL	
1501 N ORANGE AVE SARASOTA, FL 34236				1,000.
RESURRECTION HOUSE	NONE	PC	GENERAL FUND	
507 KUMQUAT COURT SARASOTA, FL 34236				4,000.
SAMARITAN COUNSELING CENTER 3224 BEE RIDGE RD	NONE	PC	GENERAL FUND	
SARASOTA, FL 34239				4,000.
SARASOTA MEMORIAL HEALTHCARE FOUNDATION	NONE	₽C	GENERAL FUND	
1700 S TAMIAMI TRAIL SARASOTA, FL 34239				5,000.
SEMPER FI FUND	NONE	PC	GENERAL FUND	
825 COLLEGE BLVD, #102 OCEANSIDE, CA 92057	NO.		GENERAL FUND	5,000.
YMCA FOUNDATION ONE S SCHOOL AVE, SUITE 301	NONE	PC	GOLDEN HEARTS GALA	
SARASOTA, FL 34237				500.
FIREFIGHTERS BENEVOLENT FUND	NONE	PC		
P.O. BOX 147 SARASOTA FL 34230				250.
HIGHLANDS UNITED METHODIST CHURCH	NONE	PC	FOOD PANTRY	
P.O. BOX 1959 HIGHLANDS NC 28741				2,000.
COMMUNITY FOUNDATION OF SARASOTA	NONE	PC	SEASON OF SHARING	
COUNTY 2635 FRUITVILLE ROAD				
SARASOTA, FL 34237	NOVE			6,000.
SOUTHWEST FLORIDA COUNCIL, BOY SCOUTS OF AMERICA 1801 BOY SCOUT DRIVE	NONE	PC	GENERAL FUND	
FT MYERS FL 33907 Total from continuation sheets		<u> </u>		5,000.

FORM 990-PF DI	IVIDENDS	AND INTER	REST	FROM SECU	RITIES S	STATEMENT	1
	GROSS AMOUNT	CAPITAI GAINS DIVIDENI	REVENUE		(B) NET INVEST- MENT INCOME		
NORTHERN TRUST	51,539.	13,97	73.	37,566	. 37,566	•	
TO PART I, LINE 4	51,539.	13,97	73.	37,566	37,566.	•	
FORM 990-PF		OTHER I	NCOM	E		STATEMENT	2
DESCRIPTION			REV		(B) NET INVEST- MENT INCOME	(C) ADJUSTEI	
INCREASE IN CSV OF LIFE	E INSURA	NCE		2,714.	2,714.		
TOTAL TO FORM 990-PF, I	PART I,	LINE 11		2,714.	2,714.		
FORM 990-PF		ACCOUNT	ING F	EES	2	STATEMENT	3
		ACCOUNTI (A) EXPENSES PER BOOKS	NET	(B) INVEST- T INCOME	(C) ADJUSTED NET INCOME	STATEMENT (D) CHARITAI PURPOSI	BLE
DESCRIPTION		(A) EXPENSES	NET MEN	(B)	(C) ADJUSTED NET INCOME	(D) CHARITAI	BLE ES
DESCRIPTION	<u>-</u>	(A) EXPENSES PER BOOKS	NET MEN	(B) INVEST- T INCOME	(C) ADJUSTED NET INCOME	(D) CHARITAI PURPOSI	BLE ES
DESCRIPTIONACCOUNTANT FEES	<u>-</u>	(A) EXPENSES PER BOOKS 1,250	NET MEN	(B) INVEST- T INCOME	(C) ADJUSTED NET INCOME	(D) CHARITAI PURPOSI	BLE ES 50.
DESCRIPTION ACCOUNTANT FEES TO FORM 990-PF, PG 1, I	LN 16B	(A) EXPENSES PER BOOKS 1,250.	NET MEN	(B) INVEST- T INCOME	(C) ADJUSTED NET INCOME	(D) CHARITAI PURPOSI 1,25	50. 50. 4
DESCRIPTION ACCOUNTANT FEES TO FORM 990-PF, PG 1, I	LN 16B	(A) EXPENSES PER BOOKS 1,250. 1,250. TAX (A) EXPENSES	NET MEN KES	(B) INVEST- T INCOME 0. 0. (B) INVEST-	(C) ADJUSTED NET INCOME (C) ADJUSTED	(D) CHARITAI PURPOSI 1,2! 1,2! STATEMENT (D) CHARITAI	BLE 50.

FORM 990-PF	OTHER E	OTHER EXPENSES			STATEMENT 5		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME		(C) ADJUSTED NET INCOM			
CORPORATE ORGANIZATION FEE INVESTMENT FEES PREMIUM ON LIFE INSURANCE HELD BY CHARITY	61. 7,751. 4,000.				61. 0. 0.		
TO FORM 990-PF, PG 1, LN 23	11,812.	11,	751.		— —————	1.	
FORM 990-PF U.S. AND S	STATE/CITY G	OVERNMENT	OBLI	GATIONS	STATEMENT	6	
DESCRIPTION	U.S GOV'		вос	OK VALUE	FAIR MARKET VALUE		
MFB NORTHERN FDS LARGE CAP VANORTHERN MID CAP NORTHERN SMALL CAP NORTHERN INTL DEVELOPED NORTHERN INTL EMERGING	ALUE FD X X X X X	-		345,922. 76,980. 31,666. 482,601. 204,218.	593,955 104,073 49,676 544,728 261,083	3. 8. 8.	
TOTAL U.S. GOVERNMENT OBLIGAT	PIONS	-	1	1,141,387.	1,553,51	5.	
TOTAL STATE AND MUNICIPAL GOV	VERNMENT OBL	IGATIONS					
TOTAL TO FORM 990-PF, PART I	I, LINE 10A	=	1	1,141,387.	1,553,51	5 . —	
FORM 990-PF	OTHER INV	ESTMENTS			STATEMENT	7	
DESCRIPTION		LUATION ETHOD	вос	OK VALUE	FAIR MARKET VALUE		
MFO CREDIT SUISSE COMMODITY LIFE INSURANCE POLICIES (CSV				147,158. 98,720.			
TOTAL TO FORM 990-PF, PART II, LINE 13		-		245,878.	263,439.		

	- LIST OF OFFICERS, DIRECTORS STATEMENT S AND FOUNDATION MANAGERS					
NAME AND ADDRESS	TITLE AND AVRG HRS/WK		EMPLOYEE BEN PLAN CONTRIB	EXPENSE		
WILLIAM E. GETZEN 1421 WESTBROOK DRIVE SARASOTA, FL 34231	DIRECTOR 2.00	0.	0.	0.		
RUTH E. GETZEN 1421 WESTBROOK DRIVE SARASOTA, FL 34231	DIRECTOR 1.00	0.	0.	0.		
LINDA R. GETZEN 1421 WESTBROOK DRIVE SARASOTA, FL 34231	DIRECTOR 1.00	0.	0.	0.		
SANDRA L. ALGER 1421 WESTBROOK DRIVE SARASOTA, FL 34231	DIRECTOR 1.00	0.	0.	0.		
JAMES W. GETZEN 1421 WESTBROOK DRIVE SARASOTA, FL 34231	DIRECTOR 1.00	0.	0.	0.		
TOTALS INCLUDED ON 990-PF, PAGE	6, PART VIII	0.	0.	0.		