# **Return of Private Foundation**

r Section 4947(a)(1) Trust Treated as Private Foundation of enter social security numbers on this form as it may be made public OMB No 1545-0052

Open to Public Inspection

Department of the Treasury to www irs gov/Form990PF for instructions and the latest information Internal Revenue Service 91230013小 08/23 . **2017**, and ending 12/31, 2017 For calendar year 2017 or tax year beginning A Employer Identification number Name of foundation CLARFELD FAMILY FOUNDATION 82-2595170 Number and street (or P.O. box number if mail is not delivered to street address) B Telephone number (see instructions) Room/suite FOUNDATION SOURCE 501 SILVERSIDE RD (800) 839-1754 City or town, state or province country, and ZIP or foreign postal code C It exemption application is pending check here WILMINGTON, DE 19809-1377 G Check all that apply X Initial return Initial return of a former public charity D 1 Foreign organizations check here Amended return Final return 2 Foreign organizations meeing the 85% test, check here and attach. Address change Name change computation H Check type of organization Section 501(c)(3) exempt private foundation F If private foundation status was terminated Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation under section 507(b)(1)(A) check here J Accounting method | Z Cash I Fair market value of all assets at Accrual If the foundation is in a 60-month termination Other (specify) end of year (from Part II col (c) line under section 507(b)(1)(B) check here 654,922 (Part I column (d) must be on cash basis ) (d) Disbursements Part | Analysis of Revenue and Expenses (The (a) Revenue and for charitable (b) Net investment (c) Adjusted net total of amounts in columns (b) (c) and (d) expenses per purposes income income may not necessarily equal the amounts in books (cash basis only) column (a) (see instructions) ) 645,330 Contributions gifts grants etc. received (attach schedule) Check If the foundation is not required to attach Sch B 6 6 Interest on savings and temporary cash investments 1,463 1,463 Dividends and interest from securities b. Net rental income or (loss) Gross sales price for all assets on line 6a

1 2 5a Gross rents Revenue 6a Net gain or (loss) from sale of assets not on line 10 0 Capital gain net income (from Part IV line 2) 8 Net short term capital gain Income modifications Gross sales less returns and allowances Ū b Less Cost of goods sold  $\overline{a}$ <del>اللك **23** والكالك الكالك ا</del> Gross profit or (loss) (attach schedule) Я 11 Other income (attach schedule) 646,799 12 Total Add lines 1 through 11 0 13 Compensation of officers directors trustees etc. Ses 14 Other employee salaries and wages Expense 16 Pension plans employee benefits 16 a Legal fees (attach schedule) Accounting fees (attach schedule) Administrative c Other professional fees (attach schedule) 17 Interest 18 Taxes (attach schedule) (see instructions) 19 Depreciation (attach schedule) and depletion 20 Occupancy and, 21 Travel conferences and meetings 22 Printing and publications perating 5 6,991 6,991 Other expenses (attach schedule) ATCH 1. Total operating and administrative expenses 6,991 6,991 Add lines 13 through 23 O 25 Contributions gifts grants paid 6,991 6,991 26 Total expenses and disbursements. Add lines 24 and 25 Subtract line 26 from line 12 a Excess of revenue over expenses and disbursements 639,808 1,469 b Net investment income (if negative enter -0-) c Adjusted net income (if negative enter 0) Form **990-PF** (2017) JSA For Paperwork Reduction Act Notice, see instructions

Part I		Attached schedules and amounts in the description column should be for end-of-year		Beginning of year	End	of year
	art II	- Dalance Sheets	amounts only (See instructions )	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bear	ng			
	2	Savings and temporary	cash investments		4,478	4,478
	3	Accounts receivable ▶				
		Less allowance for dou	btful accounts ►			
	4	Pledges receivable ▶				
		Less allowance for dou	btful accounts ▶			
	5	Grants receivable				
	6	Receivables due from	officers, directors, trustees, and other			
		disqualified persons (at	tach schedule) (see instructions)			
- 1	7	Other notes and loans r	eceivable (attach schedule)			
		Less allowance for dou	btful accounts ▶			
ş	8	Inventories for sale or us	e			
Assets	9		eferred charges			
ĕ	10a	• •	e government obligations (attach schedule)			
	b	Investments - corporate	stock (attach schedule) ATCH 2		635,330	650,444
	С	Investments - corporate	bonds (attach schedule)			
	11	Investments - land, buildings and equipment basis	s, <b>&gt;</b>			
		Less accumulated deprecia (attach schedule)	ation >			
	12		loans		_	
	13		ach schedule)			
		Land, buildings, and equipment basis	<b>•</b>			
		Less accumulated deprecia	ition >			
	15	(attach schedule)	·)	<del></del>		
			completed by all filers - see the			
			age 1, item l)	0.	639,808	654,922
$\dashv$			-		003/000	001,7522
		· •	ccrued expenses			†
s		• •				-
Liabilities						1
匵			ors, trustees, and other disqualified persons			†
ā	21	• •	tes payable (attach schedule)			┥
	22	Other liabilities (describe	<b>:►</b> )			┪
	23	Total liabilities (add line	se 17 through 22)	0.	0	
$\dashv$			es 17 through 22)			-
Ś			v SFAS 117, check here ▶ ☐☐☐ through 26, and lines 30 and 31.			
alances		•	- '			
a						-
Ba	25	•			-	4
Net Assets or Fund Ba	26					-
5			ot follow SFAS 117, check here ▶ X			
		and complete lines 27	through 31.			
S	27	• • •	cipal, or current funds			-{
šet	28	Paid-in or capital surplus, or	land, bldg , and equipment fund		620,000	4
\S	29	Retained earnings, accumi	ulated income, endowment, or other funds		639,808	
et/	30		balances (see instructions)	0.	639,808	<u>.</u>
ž			net assets/fund balances (see		620.000	
				0.	639,808	•
			nges in Net Assets or Fund Bala		<u> </u>	<del></del>
1			palances at beginning of year - Part			_
			ed on prior year's return)			630 000
			line 27a			639,808
3	Othe	er increases not includ	ded in line 2 (itemize) ▶		3	ļ
4	Add	lines 1, 2, and 3			4	639,808
5	Dec	reases not included in	n line 2 (itemize) ▶			
_6	Tota	al net assets or fund b	alances at end of year (line 4 minus	line 5) - Part II, column (	b), line 30 6	639,808

Part	V Capital Gains	s and Losses for Tax on Inv	estment Income			
		escribe the kind(s) of property sold (for or control warehouse, or common stock, 200		(b) How acquired P - Purchase	(c) Date acquired (mo , day, yr )	(d) Date sold (mo , day, yr )
1 a		and the state of t	,	D - Donation		
b						
_ с						
d						
е						
(6	e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		(h) Gain or (lo ((e) plus (f) min	
а						
b						
<u> </u>						
<u>d</u>						
e		have a second second (b) and second	house foundation on 42/24/20			
U	omplete only for assets s	showing gain in column (h) and owned			Gains (Col (h) ga	
(ı) F	MV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	COI	(k), but not less t Losses (from co	
<u>a</u>						
<u> </u>				1		
<u> </u>				-		
<u>d</u>						
е			and the second s	<del> </del>		
2 C	apital gain net income	or (net canital loss)	ain, also enter in Part I, line 7 oss), enter -0- in Part I, line 7	2		
3 N	et short-term capital o	ain or (loss) as defined in sections				
		Part I, line 8, column (c) See ins				
	_	<u> </u>		3		
Part \			duced Tax on Net Investment I	ncome		
Nas th		the section 4942 tax on the distrib	evitable amount of any year in the b		_	Yes No
		n't qualify under section 4940(e) [	ar, see the instructions before maki	ng any en	tripe	
<u> </u>	(a)		1	lig ally en	(d)	
Calenda	Base period years ir year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of nonchantable-use assets		Distribution ra (col (b) divided by	
	2016					
	2015			-		
	2014					
	2013 2012					
	2012	<u> </u>		<del>                                     </del>		
2 T	otal of line 1 column (	'd)		2		
		io for the 5-year base period - divid		- <del>-</del>		
	•	·	if less than 5 years	3		
.,	e number of years the	Touridation has been in existence	in least than a years			
4 E	nter the net value of n	oncharitable-use assets for 2017 f	rom Part X, line 5	4		
5 M	ultiply line 4 by line 3.			5		<del>-</del>
6 E	nter 1% of net investm	nent income (1% of Part I, line 27b)		6		·
7 A	dd lines 5 and 6			7		
		Annua faran Dest VIII lim 4		8		
lf	nter qualifying distribut fine 8 is equal to or q art VI instructions	greater than line 7, check the box	c in Part VI, line 1b, and complete		using a 1% ta	x rate See t

Pái	tVI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see	nstru		s)	
1a	Exempt operating foundations described in section 4940(d)(2), check here				
	Date of ruling or determination letter (attach copy of letter if necessary - see instructions)				
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check			29.	
	here  and enter 1% of Part I, line 27b				
С	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of J Part I, line 12, col (b)				
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-)				
3	Add lines 1 and 2			29.	
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-)			0.	
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0			29.	
6	Credits/Payments				
а	2017 estimated tax payments and 2016 overpayment credited to 2017 6a				
b	Exempt foreign organizations - tax withheld at source				
С	Tax paid with application for extension of time to file (Form 8868)6c 29.				
d	Backup withholding erroneously withheld				
7	Total credits and payments Add lines 6a through 6d			29.	
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached				
9	Tax due If the total of lines 5 and 8 is more than line 7, enter amount owed				
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid				
11 Par	Enter the amount of line 10 to be Credited to 2018 estimated tax ▶ Refunded ▶ 11   t VII-A Statements Regarding Activities				
	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it		Yes	No	
ıa		1a	162	X	
_	participate or intervene in any political campaign?	i i i		<del></del>	
b		16		х	
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials	"		<u> </u>	
	published or distributed by the foundation in connection with the activities				
c	Did the foundation file Form 1120-POL for this year?	10		х	
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year				
_	(1) On the foundation ►\$ (2) On foundation managers ►\$				
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed				
	on foundation managers   \$				
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	1			
	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		X	
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		Х	
b	If "Yes," has it filed a tax return on Form 990-T for this year?	4b			
	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		X	
	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	l i			
	By language in the governing instrument, or				
	• By state legislation that effectively amends the governing instrument so that no mandatory directions that				
	conflict with the state law remain in the governing instrument?	6	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 DE,				
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General				
	(or designate) of each state as required by General Instruction G? If "No," attach explanation	8ь	Х	<u> </u>	_
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	and the same
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their		.,		
	names and addresses . ATCH. 3	10	Х	<u> </u>	

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	1		
	meaning of section 512(b)(13)? If "Yes," attach schedule See instructions	11		Х
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	Х	
	Website address ► N/A			•
14	The books are in care of ▶ FOUNDATION SOURCE Telephone no ▶ 800-839	-175	4	
	Located at ▶501 SILVERSIDE ROAD, SUITE 123 WILMINGTON, DE ZIP+4 ▶ 19809-13	377		
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			
16	At any time during calendar year 2017, did the foundation have an interest in or a signature or other authority		Yes	No
	over a bank, securities, or other financial account in a foreign country?	16		X
	See the instructions for exceptions and filing requirements for FinCEN Form 114 If "Yes," enter the name of	<del></del>	<b>'</b>	
	the foreign country			ļ
Pai	t VII-B Statements Regarding Activities for Which Form 4720 May Be Required	L		L
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.	Ι	Yes	No
10	During the year, did the foundation (either directly or indirectly)			
10	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes X No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a			
	disqualified person?			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for			
	the benefit or use of a disqualified person)?			
	(6) Agree to pay money or property to a government official? (Exception Check "No" if the			
	foundation agreed to make a grant to or to employ the official for a period after			
_	termination of government service, if terminating within 90 days)			
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations	۱		
	section 53 4941(d)-3 or in a current notice regarding disaster assistance? See instructions	1b		
	Organizations relying on a current notice regarding disaster assistance, check here			
С	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		X
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))			
а	At the end of tax year 2017, did the foundation have any undistributed income (lines 6d and			
	6e, Part XIII) for tax year(s) beginning before 2017? Yes X No			
	If "Yes," list the years			
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)			
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to			
	all years listed, answer "No" and attach statement - see instructions )	2b		
c	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here			
	<b>)</b>			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise			
	at any time during the year?			
b	If "Yes," did it have excess business holdings in 2017 as a result of (1) any purchase by the foundation or			
	disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the			
	Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of			
	the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the			
	foundation had excess business holdings in 2017 )	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		Х
	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its			
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2017?	4b		Х

Pai	t VII-B	Statements Regarding Activities	for Which Form	4720 May Be Req	uired (continued)			
5a	During th	e year, did the foundation pay or incur any amo	ount to	<u> </u>			Yes	No
	(1) Carry	on propaganda, or otherwise attempt to influe	ence legislation (section	n 4945(e))?	. Yes X No			
	(2) Influe	ence the outcome of any specific public ele	ection (see section 4	955), or to carry or	١,		İ	
	direc	ily or indirectly, any voter registration drive?			. Yes X No			
		de a grant to an individual for travel, study, or o				i	ļ	
	(4) Provi	de a grant to an organization other than a	charitable, etc. org	anization described i	n		ļ	
		on 4945(d)(4)(A)? See instructions						
		de for any purpose other than religious, ch						i
		ses, or for the prevention of cruelty to children						
b		nswer is "Yes" to 5a(1)-(5), did any of the					İ	
-	_	ns section 53 4945 or in a current notice regar				5 b	i	
	-	tions relying on a current notice regarding disas	-			一 <u>一</u>		
С	-	swer is "Yes" to question 5a(4), does the			· · · · · · · · · · · · · · · · · · ·	_	ŀ	
·		t maintained expenditure responsibility for the		•				
		attach the statement required by Regulations s	-				1	
6a		foundation, during the year, receive any fur		ectly to nay premiur	ne		1	
ou		onal benefit contract?					ĺ	
ь		oundation, during the year, pay premiums, dire			• — · — ·	6ь		x
-		o 6b, file Form 8870	only or mandony, on a	portonial portoni contra		1		
7a		ne during the tax year, was the foundation a p	arty to a prohibited tax	shelter transaction?	Yes X No		1	
		did the foundation receive any proceeds or have				7 b	}	1
	t VIII	Information About Officers, Directo						<u> </u>
		and Contractors						
_1_	List all o	fficers, directors, trustees, foundation r	nanagers and their (b) Title, and average	(c) Compensation. See	(d) Contributions to			
		(a) Name and address	hours per week devoted to position	(if not paid, enter -0-)	employee benefit plans and deferred compensation	(e) Expensoler al		
			devoted to position	untor -u-j	and determed compensation		-	
ATC	H 4			0.	0.			0.
			1					
			1					
2	Compens	ation of five highest-paid employees	(other than thos	e included on line	e 1 - see instructio	ns). If n	one,	ente
	"NONE."				1 (1) 6 (1) (1)			
(2)	Name and	address of each employee paid more than \$50,000	(b) Title, and average hours per week	(c) Compensation	(d) Contributions to employee benefit	(e) Expen		
(4)	Hairic and	duress of each employee paid more than \$50,000	devoted to position	(b) Compensation	plans and deferred compensation	other al	lowance	es
					,			
	NONE							
			· · · · · · · · · · · · · · · · · · ·					
				<u> </u>				
		·					-	
Total	number 4	of other employees paid over \$50,000.	<del> </del>		·			
	amoor (	cc. ciripio jedo paid etel pediodet i				Fam 99	0-PF	(2017

Form 990-PF (2017) Page 7 Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued) Five highest-paid independent contractors for professional services. See instructions. If none, enter "NONE." (a) Name and address of each person paid more than \$50,000 (b) Type of service (c) Compensation NONE 0. Part IX-A **Summary of Direct Charitable Activities** List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of Expenses organizations and other beneficianes served, conferences convened, research papers produced, etc 1 N/A Part IX-B Summary of Program-Related Investments (see instructions) Amount Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 1 NONE All other program-related investments. See instructions 3 NONE Total. Add lines 1 through 3

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Page 8

Pa	Part X Minimum Investment Return (All domestic foundations see instructions)	must complete this part. Fore	ign foundations,	
1	1 Fair market value of assets not used (or held for use) directly in	carrying out charitable, etc.		
	purposes			
а	a Average monthly fair market value of securities		1a	232,719.
	b Average of monthly cash balances		1b	3,920.
С	c Fair market value of all other assets (see instructions)		1c	
d	d Total (add lines 1a, b, and c)		1d	236,639.
е	e Reduction claimed for blockage or other factors reported on lines 1a and			
	1c (attach detailed explanation)	1e		
2			2	
3	3 Subtract line 2 from line 1d		3	236,639.
4	4 Cash deemed held for charitable activities Enter 1 1/2 % of line	3 (for greater amount, see		
	instructions)		4	3,550.
5	5 Net value of noncharitable-use assets. Subtract line 4 from line 3 E	nter here and on Part V, line 4	5	233,089.
6			6	4,183.
Pa	Part XI Distributable Amount (see Instructions) (Section 4942(j)(3) and certain foreign organizations, check here ▶ and do not		ndations	
1	1 Minimum investment return from Part X, line 6		1	4,183.
2 a	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)	2b		
С	c Add lines 2a and 2b		2c	29.
3			3	4,154.
4	•		4	· · · · · · · · · · · · · · · · · · ·
5			5	4,154.
6			6	
7	· · · · · · · · · · · · · · · · · · ·			
_	line 1		7	4,154.
Par	Part XII Qualifying Distributions (see instructions)			·-
1	1 Amounts paid (including administrative expenses) to accomplish chari	able etc purposes		
а	a Expenses, contributions, gifts, etc - total from Part I, column (d), line 2		1a	6,991.
b	b Program-related investments - total from Part IX-B		1b	
2				
	purposes	• • • • • • •	2	
3	·····			
a			3a	
b			3b	
4			4	6,991.
5			7	0,991.
•	Enter 1% of Part I, line 27b See instructions		5	0.
6			6	6,991.
U	Note: The amount on line 6 will be used in Part V, column (b),			
	qualifies for the section 4940(e) reduction of tax in those years	iii subsequent years when ca	cuating whether	the roundation

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Pa	rt XIII Undistributed Income (see inst	ructions)			
		(a)	(b)	(c)	(d)
1	Distributable amount for 2017 from Part XI,	Corpus	Years prior to 2016	2016	2017
	line 7				4,154.
2	Undistributed income, if any, as of the end of 2017				
a	Enter amount for 2016 only				
	Total for pnor years 20 15 ,20 14 ,20 13				
	Excess distributions carryover, if any, to 2017				
а	From 2012				
	From 2013				
	From 2014				
	From 2015				
	From 2016				
	Total of lines 3a through e				
	Qualifying distributions for 2017 from Part XII,				
	line 4 ▶ \$ 6,991.				
а	Applied to 2016, but not more than line 2a				
ь	Applied to undistributed income of prior years	-			
_	(Election required - see instructions)				
_	Treated as distributions out of corpus (Election				
٠	required - see instructions)				
d	Applied to 2017 distributable amount				4,154.
	Remaining amount distributed out of corpus	2,837.			-/2011
	Excess distributions carryover applied to 2017				<u> </u>
•	(If an amount appears in column (d), the same				
	amount must be shown in column (a) ) Enter the net total of each column as				
•	indicated below:				
а	Corpus Add lines 3f, 4c, and 4e Subtract line 5	2,837.			
	Prior years' undistributed income Subtract				
-	line 4b from line 2b				
С	Enter the amount of prior years' undistributed				
	income for which a notice of deficiency has been issued, or on which the section 4942(a)				
	tax has been previously assessed				
d	Subtract line 6c from line 6b Taxable				
_	amount - see instructions				
е	Undistributed income for 2016 Subtract line				
	4a from line 2a Taxable amount - see instructions				
f	Undistributed income for 2017 Subtract lines 4d and 5 from line 1. This amount must be				
	distributed in 2018				
7	Amounts treated as distributions out of corpus				
•	to satisfy requirements imposed by section				
	170(b)(1)(F) or 4942(g)(3) (Election may be		1		
	required - see instructions)				
8	Excess distributions carryover from 2012 not				
	applied on line 5 or line 7 (see instructions)				
9	Excess distributions carryover to 2018.				
	Subtract lines 7 and 8 from line 6a	2,837.			
0	Analysis of line 9				
а	Excess from 2013				
b	Excess from 2014				
	Excess from 2015				
d	Excess from 2016				
	Excess from 2017 2,837.				
					5 000 DE (0047)

_	n 990-PF (2017)	<del></del>	FAMILY FOUNDAT			82-	25951/	U Page 10
		erating Foundations					NOT A	APPLICABLE
1 a	If the foundation has				ating		-	
	foundation, and the rulin	*			▶[			
b	Check box to indicate i	whether the foundation	is a private operating	foundation described in	n section	4942(J)	(3) or	4942(j)(5)
2 2	Enter the lesser of the ad-	Tax year		Prior 3 years				e) Total
2 a	justed net income from Part	(a) 2017	<b>(b)</b> 2016	(c) 2015	(d) 20	14		o) 10tai
	I or the minimum investment	N <sub>i</sub>						
	return from Part X for each year listed							
b	85% of line 2a				//			·
c	Qualifying distributions from Part		1	./	1			
Ĭ	XII, line 4 for each year listed							
d	Amounts included in line 2c not			//				
	used directly for active conduct of exempt activities		10					
е	Qualifying distributions made			1				
	directly for active conduct of							
	exempt activities Subtract line 2d from line 2c		<i>)</i> "			}		
3	Complete 3a b or c for the		ul.		_			
2	alternative test relied upon "Assets" alternative test - enter		<i>11</i> 7					
•	(1) Value of all assets							
	(2) Value of assets qualifying							
	under section	,	/			1		
b	4942(j)(3)(B)(i) "Endowment" alternative test-							
-	enter 2/3 of minimum invest-							
	ment return shown in Part $X$					[		
	Ine 6 for each year listed "Support" alternative test - enter							
·	(1) Total support other than							
	gross investment income							
	(interest dividends rents, payments on secunties							
	loans (section 512(a)(5)),					Ì	1	
	or royalties)				<del> </del>		1	
	public and 5 or more							
	exempt organizations as provided in section 4942							
	(j)(3)(B)(m)				<del> </del>			_
	(3) Largest amount of sup- port from an exempt							
,	organization				<del> </del>			
	(4) Gross investment income .	lary Information (C	Samulata thia nast	only if the founds	tion had ¢£	. 000 0=		to -t
Гα		uring the year - see		only if the lounua	iliuii ilau pa	5,000 Or	more i	11 455EIS AL
1	<del></del>			<del></del>				
	List any managers of	the foundation who h	ave contributed mor	e than 2% of the tot	al contributio	ns receive	ed by th	e foundation
	before the close of any	tax year (but only if th	ey have contributed r	nore than \$5,000) (S	ee section 50	7(d)(2))	•	
	ATTACHME	NT 5						
b	List any managers of	the foundation who	own 10% or more o	f the stock of a corp	oration (or a	n equally	large p	ortion of the
	ownership of a partner						•	
	N/A							
2	Information Regardin	g Contribution, Grant,	Gift, Loan, Scholarsh	nip, etc., Programs:				
	Check here ► X If t	he foundation only r	makes contributions	to preselected char	itable organi	zations a	nd does	not accept
	unsolicited requests for	or funds. If the founda	ation makes gifts, gra	ints, etc., to individua	als or organiz	ations un	der othe	er conditions,
	complete items 2a, b,	c, and d See instructio	ns					
а	The name, address, a	nd telephone number	or email address of th	ne person to whom ap	plications sho	uld be add	ressed	
b	The form in which app	lications should be sub	mitted and information	on and materials they	should includ	е		
С	Any submission deadli	nes		<u>.                                    </u>				
	-							
	A		augh as his are	anhinal areas -k4	abla fialds 1	undo of	notiti itio	ne er eibe-
d	Any restrictions or li factors	mitations on awards,	such as by geogr	apnicai areas, charit	able TielOS, I	villus Of I	กรแบแบ	ns, or other

Part XV Supplementary Information (continued)

Page **11** 

3 Grants and Contributions Paid Durin	ng the Year or Appr	oved for F	-uture Payment	T
Recipient  Name and address (home or business)	show any relationship to	roundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient	CONTRIBUTION	
a Paid during the year				
		}		
				i
				ļ
		<u> </u>		
				İ
Total			▶ 3a	
<b>b</b> Approved for future payment				
,,				
ļ				
Total				

Program service revenue    Column   Co	nter gross amounts unless otherwise indicated	Unrelat	ed business income	Excluded by	section 512, 513, or 514	(e)
a b c c d d d d d d d d d d d d d d d d d	1 Program service revenue					
b c d d e f f g Fees and contracts from government agencies f g Fees and contracts from government agencies f g Fees and contracts from government agencies f g Fees and contracts from government agencies f g Fees and contracts from government agencies f g Fees and contracts from government agencies f g Fees and contracts from government agencies f g Fees and contracts from government agencies f g Fees and contracts from government agencies f g Fees and contracts from government seems f g Fees and contracts from government seems f g Fees and contracts from government seems f g Fees and contracts from government seems f g Fees and contracts from government seems f g Fees and contracts from government seems f g Fees and contracts from government seems f g Fees and contracts from government seems f g Fees and contracts from government seems f g Fees and contracts from government seems f g Fees and contracts from government seems f g Fees and contracts from government seems f g Fees and contracts from government agencies f g Fees and contracts from government seems f g Fees and contracts from government agencies f g Fees and contracts from government seems f g Fees and contracts from government seems f g Fees and contracts from government seems f g Fees and contracts from g Fe	-					(OCC WIGHTONIO)
c d e e						
d e f g Fees and contracts from government agencies Membership dues and assessments						
g Fees and contracts from government agencies  Membership dues and assessments						
g Fees and contracts from government agencies  Membership dues and assessments  Interest on savings and temporary cash investments  Dividends and interest from securities  Net rental income or (loss) from real estate a Debt-financed property  b Not debt-financed property  Set rental income or (loss) from personal property  Wet rental income or (loss) from personal property  Het rental income or (loss) from personal property  Gain or (loss) from sales of assets other than inventory						
Membership dues and assessments					-	
Interest on savings and temporary cash investments .  Dividends and interest from securities .  Net rental income or (loss) from real estate a Debt-financed property .  b Not debt-financed property .  the rental income or (loss) from personal property .  Other investment income .  Gain or (loss) from sales of assets other than inventory .  Net income or (loss) from sales of inventory .  Other revenue a .  b .  c .  d .  Subtotal Add columns (b), (d), and (e) .  Total Add line 12, columns (b), (d), and (e) .  Total Add line 12, columns (b), (d), and (e) .  Total Add line 13 instructions to verify calculations )  art XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes  Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to						
Interest on savings and temporary cash investments .  Dividends and interest from securities  Net rental income or (loss) from real estate a Debt-financed property  b Not debt-financed property  the trental income or (loss) from personal property Other investment income  Gain or (loss) from sales of assets other than inventory Net income or (loss) from special events  Gross profit or (loss) from sales of inventory.  Other revenue a b c c subtotal Add columns (b), (d), and (e)  Total Add line 12, columns (b), (d), and (e)  Total Add line 12, columns (b), (d), and (e)  Relationship of Activities to the Accomplishment of Exempt Purposes ine No. Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to	Membership dues and assessments				-	·
Dividends and interest from securities	•			14	6.	
a Debt-financed property	, ,	l i		14	1,463.	
b Not debt-financed property	Net rental income or (loss) from real estate					_
Net rental income or (loss) from personal property  Other investment income	a Debt-financed property	·	<u> </u>			
Other investment income  Gain or (loss) from sales of assets other than inventory  Net income or (loss) from special events  Gross profit or (loss) from sales of inventory.  Other revenue a  b  c  d  e  Subtotal Add columns (b), (d), and (e)  Total Add line 12, columns (b), (d), and (e)  ee worksheet in line 13 instructions to verify calculations)  art XVI-B  Relationship of Activities to the Accomplishment of Exempt Purposes  ine No.  Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to	b Not debt-financed property					
Gain or (loss) from sales of assets other than inventory  Net income or (loss) from special events  Gross profit or (loss) from sales of inventory .  Other revenue a  b  c  Subtotal Add columns (b), (d), and (e)	Net rental income or (loss) from personal property					
Net income or (loss) from special events	Other investment income					
Gross profit or (loss) from sales of inventory	Gain or (loss) from sales of assets other than inventor	у				
Other revenue a  b c d e Subtotal Add columns (b), (d), and (e) Total Add line 12, columns (b), (d), and (e)  e worksheet in line 13 instructions to verify calculations )  art XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes  ine No. Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to	Net income or (loss) from special events · · ·					
b c d d d d d d d d d d d d d d d d d d						
c d e Subtotal Add columns (b), (d), and (e)	Other revenue a	1		<u> </u>		
Subtotal Add columns (b), (d), and (e)	b					
Subtotal Add columns (b), (d), and (e)	c	<b>-</b>				
Subtotal Add columns (b), (d), and (e)	d					
Total Add line 12, columns (b), (d), and (e)					1 460	
ee worksheet in line 13 instructions to verify calculations )  art XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes  ine No. Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to						
art XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes  ine No. Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to			• • • • • • • • • • •	• • • • • • •	13	1,40
ine No. Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to			complichment of	Everent Dur	20000	
			-			•
			-			
			···			
		··				
			: <u>.</u>			
						<u> </u>
					· <u> </u>	

Part	X V II	Exempt Organ	egarding in	ransiers to	and Iransaci	ions and	i Helationships Witt	n Nonchar	itable	)
1 [	Old the			v engage in ai	ny of the follows	ng with an	y other organization des	cribed	Yes	No
							on 527, relating to p			
		cations?			,		, ,			
а٦	<b>Fransfe</b>	ers from the reporting	ig foundation t	o a noncharita	able exempt orga	nization of				
(	1) Cas	sh			<i></i>			1a(1	)L	Х
									)	Х
		ransactions								
(	1) Sal	es of assets to a no	ncharitable ex	empt organizat	ion			16(1	)	Х
										Х
										Х
										X
										X
(	<b>6)</b> Per	formance of service	s or members	ship or fundrais	sing solicitations.			1b(6	1	Х
										X
d if	the a	answer to any of th	e above is "Y	es," complete	the following s	chedule (	Column (b) should alway	s show the	fair m	arke
V	alue o	of the goods, other	assets, or sen	vices given by	the reporting for	oundation	If the foundation receiv	ed less than	fair m	arke
		(b) Amount involved					of the goods, other asse			
(a) Line	no	N/A	(c) Name of	nonchantable exe	empt organization		cription of transfers, transactions	s, and shanng an	angeme	nts
		N/A		<del></del>		N/A	<del></del>			
						<del> </del>	- · · · · · · · · · · · · · · · · · · ·			
					·	-				
	$\dashv$	<del></del>				+				-
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		· · · · · · · · · · · · · · · · · · ·								
		<del> </del>	<del></del>				·			
						<del> </del>	·			
	-					+				
						1				
						1				
2a Is	the f	oundation directly of	or indirectly a	ffiliated with	or related to or	e or more	tax-exempt organizatio	ns		
									es X	No
		" complete the follow			··					
		(a) Name of organization	1	(b) T	ype of organization		(c) Description of	of relationship		
						<u>_</u>				
		·								
	10.2.		<del></del>	L						
		penaltica of perjury, I fiecta: , and complete, Declaration of	preparer (other than	າເກed this return, in: taxpayer) is based ດຖ	cluding accompanying t all information of which	chedules and : preparer has ar	statements, and to the best of my ny knowledge	knowledge and	belief, it	is true,
Sign		INVV AV.	/(_/	10/	alice	$\mathbf{A}(\mathbf{y})$	May	the IRS discu	ss this	return
Here	Curr	100/1/2	<del>* </del>	16/	k7/18			the preparer		_
_	Sign	ature of officer or trustee	- [	Date	1	HITIE	See	instructions 2	Yes	No
-	<u> </u>	Print/Type preparer's nar	me \	Preparer's s	ionature		Date Chock T	, PTIN		
Paid		JEFFREY D HASK	1		Y D HASKELL		06/28/2018 self-emp	'"	4577	n
Prepa		. =0:	UNDATION S		THEVETT		<del></del>	51039834		<del></del>
Use C	1		E HOLLOW I		2		rim's EIN	71072034	<u>,                                     </u>	
	,		KE SUCCESS	-	-	110	42 Phone no. 8	300-839-1	754	

## 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.

OMB No 1545-0047

**2017** 

Name of the organization

CLARFELD FAMILY FOUNDATION

Employer identification number

82-2595170 Organization type (check one) Filers of: Section: 501(c)( Form 990 or 990-EZ ) (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization Form 990-PF 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See instructions General Rule For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions **Special Rules** For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3 % support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000, or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1 Complete Parts I and II For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals Complete Parts I, II, and III For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990,

990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

Employer identification number 82-2595170

(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
11	CLARFELD, ROBERT A.  520 WHITE PLAINS ROAD  TARRYTOWN, NY 10591	<b>\$</b> 645,330.	Person X Payroll X Noncash X (Complete Part II for noncash contributions)
(a)	(b)	(c) Total contributions	(d)
No.	Name, address, and ZIP + 4		Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a)	(b)	(c) Total contributions	(d)
No.	Name, address, and ZIP + 4		Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
			Person Payroli Noncash (Complete Part II for noncash contributions)

Employer identification number 82-2595170

Part II Noncash Property (see instructions) Use duplicate copies of Part II if additional space is needed. (a) No. (c) (b) (b) from FMV (or estimate) Description of noncash property given Date received Part I (See instructions) DFA REAL ESTATE SECURITIES PORTFOLIO DFREX, 2079.849 SH. 1 72,150. 12/20/2017 (a) No. (c) (b) (d) from FMV (or estimate) Description of noncash property given Date received Part I (See instructions.) DARDEN RESTAURANTS INC DRI, 385 SH. 1 34,034. 12/15/2017 (a) No. (c) (b) (d) from FMV (or estimate) Description of noncash property given Date received Part I (See instructions.) CISCO SYSTEMS INC CSCO, 1290 SH. 1 49,007. 12/15/2017 (a) No. (c) (b) (d) from FMV (or estimate) Description of noncash property given Date received Part I (See instructions.) OLD REP INTL CORP ORI, 1300 SH. 26,930. 12/15/2017 (a) No. (c) (b) (d) from FMV (or estimate) Description of noncash property given Date received Part I (See instructions) NEXTERA ENERGY, INC NEE, 225 SH. 1 35,580. 12/15/2017 (a) No. (c) (d) (b) from FMV (or estimate) Description of noncash property given Date received Part I (See instructions.) AMERICAN TOWER REIT INC AMT, 215 SH. 1 30,822. 12/15/2017

Employer identification number 82-2595170

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
1	KAR AUCTION SERVICES INC KAR, 885 SH.			
			44,874.	12/15/2017
(a) No. from Part I	(b) Description of noncash property given		(c) FMV (or estimate) (See instructions.)	(d) Date received
1	PAYCHEX PAYX, 510 SH.			
		\$_	35,363.	12/15/2017
(a) No. from Part I	(b) Description of noncash property given		(c) FMV (or estimate) (See instructions.)	(d) Date received
1	NATL HEALTH INVESTOR NHI, 210 SH.			
		\$	16,867.	12/15/2017
a) No. from Part I	(b) Description of noncash property given		(c) FMV (or estimate) (See instructions.)	(d) Date received
1	INTEL CORP INTC, 830 SH.	_		
		\$	36,483.	12/15/2017
a) No. from Part I	(b)  Description of noncash property given	1	(c) FMV (or estimate) (See instructions.)	(d) Date received
1	STAG INDUSTRIAL INC STAG, 385 SH.			
		\$	10,790.	10/05/2017
a) No. from Part I	(b) Description of noncash property given		(c) FMV (or estimate) (See instructions.)	(d) Date received
1	ALTRIA GROUP INC MO, 150 SH.			
	1	_	9,559.	10/05/2017

Employer identification number 82-2595170

### Part II Noncash Property (see instructions) Use duplicate copies of Part II if additional space is needed (a) No. (c) (b) (d) from FMV (or estimate) Description of noncash property given Date received Part I (See instructions) PAYCHEX 1 PAYX, 150 SH. 9,428. 10/05/2017 (a) No. (c) (b) (d) FMV (or estimate) from Description of noncash property given Date received Part I (See instructions.) KAR AUCTION SERVICES INC KAR, 190 SH. 1 9,109. 10/05/2017 (a) No. (c) (b) (d) FMV (or estimate) from Description of noncash property given Date received Part I (See instructions) MICROCHIP TECHNOLOGY INC MCHP, 360 SH. 10/05/2017 32,863. (a) No. (b) (d) FMV (or estimate) from Description of noncash property given Date received Part I (See instructions.) OLD REP INTL CORP ORI, 285 SH. 1 5,610. 10/05/2017 (a) No. (c) (b) (d) FMV (or estimate) from Description of noncash property given Date received Part I (See instructions.) JP MORGAN CHASE JPM, 215 SH. 1 20,742. 10/05/2017 (a) No. (c) (d) (b) FMV (or estimate) from Description of noncash property given Date received Part I (See instructions.) CINCINNATI FINANCIAL CORP CINF, 245 SH. 1 10/05/2017 18,963.

Name of organization CLARFELD FAMILY FOUNDATION

Employer identification number 82-2595170

# 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	
1	SIX FLAGS ENTERTAINMENT CORPORATION SIX, 315 SH.			
		\$19,420.	10/05/2017	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received	
1	LOCKHEED MARTIN CORP LMT, 115 SH.			
		\$36,106.	10/05/2017	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received	
1	PHILIP MORRIS INTL PM, 165 SH.			
		\$ 18,422.	10/05/2017	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received	
1	CISCO SYSTEMS INC CSCO, 200 SH.	_		
		\$6,708.	10/05/2017	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received	
1	CRACKER BARREL OLD COUNTRY STORE INC CBRL, 30 SH.			
		<b>\$\$4,</b> 596.	10/05/2017	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received	
1	ABBVIE INC ABBV, 300 SH.			

Name of organization CLARFELD FAMILY FOUNDATION

Employer (dentification number

	<del></del>	82-25	95170
Part II	Noncash Property (see instructions) Use duplicate copies	of Part II if additional space is nee	eded.
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
1	INTEL CORP INTC, 195 SH.	7.600	10/05/2017
		<b>\$</b> 7,689.	10/05/2017
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
1	DARDEN RESTAURANTS INC DRI, 100 SH.		
		\$	10/05/2017
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
1	HASBRO INC HAS, 30 SH.	_	
		\$\$.	10/05/2017
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
1	LEGGETT PLATT INC LEG, 110 SH.	_	
_ <del></del>	and the second s	<b>\$</b>	10/05/2017
(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

	(Form 990, 990-EZ, or 990-PF) (2017)  organization CLARFELD FAMILY FOUNDATION	)N		Page 4		
				82-2595170		
Part III	Exclusively religious, charitable, etc., co (10) that total more than \$1,000 for the the following line entry. For organizations contributions of \$1,000 or less for the years duplicate copies of Part III if additional	year from any one c completing Part III, er ear (Enter this informa	ontributor. (	Complete columns (a) through (e) and of exclusively religious, charitable, etc		
(a) No. from Part l	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held		
		(e) Transfer of gift				
	Transferee's name, address, and ZI	P+4	Relation	nship of transferor to transferee		
(a) No from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held		
		(e) Transfer of gr				
	Transferee's name, address, and ZIP + 4 Relatio		Relation	nship of transferor to transferee		
- Can No.						
(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 Zlf	2+4	Relation	nship of transferor to transferee		
			<del></del>			
(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 ZII	-		nship of transferor to transferee		
	Transieree 5 fiame, address, and Zir	<del> </del>	Keiatioi	iomp of transferor to danisteree		

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- OTHER EXPENSES PART FORM 990PF, REVENUE EXPENSES ADMINISTRATIVE FEES
ADMINISTRATIVE SET-UP FEE
DELAWARE INCORPORATION FEES
IRS APPLICATION FEES DESCRIPTION

5,150. 500. 850. 491. PER BOOKS

6,991.

TOTALS

5,150. 500. 850. 491. PURPOSES

CHARITABLE

6,991.

ATTACHMENT 2

# FORM 990PF, PART II - CORPORATE STOCK

ENDING <u>FMV</u>	4,767. 2,727. 36,921. 10,712. 17,432. 15,830. 22,992. 30,674. 35,143. 10,522. 44,933. 47,314. 54,298. 57,066. 33,887.
ENDING BOOK VALUE	4,596. 2,926. 36,106. 9,539. 18,422. 16,867. 27,006. 19,420. 10,790. 41,970. 44,792. 53,983. 55,715.
DESCRIPTION	CRACKER BARREL OLD COUNTRY STO HASBRO INC LEGGETT PLATT INC LOCKHEED MARTIN CORP ALTRIA GROUP INC PHILIP MORRIS INTL NATL HEALTH INVESTOR JP MORGAN CHASE AMERICAN TOWER REIT INC NEXTERA ENERGY, INC CINCINNATI FINANCIAL CORP ABBVIE INC SIX FLAGS ENTERTAINMENT CORPOR MICROCHIP TECHNOLOGY INC STAG INDUSTRIAL INC DARDEN RESTAURANTS INC PAYCHEX INTEL CORP KAR AUCTION SERVICES INC CISCO SYSTEMS INC OLD REP INTL CORP DFA REAL ESTATE SECURITIES POR