2949106902205

Return of Private Foundation

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

OMB. No. 1545-0052

Department of the Treasury Internal Revenue Service

▶ 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.

Open to Public Inspection

F	or cale	ndar year 2017 or tax year beginning 11/16/17	, and ending 12/3	31/17				
_		foundation			A Empl	loyer identification number		
		T110 MD110M T110				2470722		
_		INE TRUST INC	·			-3470733	-,	
		and street (or P 0 box number if mail is not delivered to street address) O N ANDREWS AVE STE 2023	K	oom/suite	B Telep	phone number (see instruction	is)	
\m ⁻		wn, state or province, country, and ZIP or foreign postal code		-,				
	FOR	T LAUDERDALE FL 33309			C If exe	emption application is pending	check here	
\mathcal{O}_{c}	Chec	k all that apply X Initial return Initial ref	turn of a former public c	harity	D 1 F	oreign organizations, check h	ere	▶ □
:lb		Final return Amende	d return	-	2 Fo	oreign organizations meeting	the	_
1 800		X Address change Name ch	nange			5% test, check here and attac		▶ □
Н	Chec	k type of organization X Section 501(c)(3) exempt priva	te foundation		E If priv	rate foundation status was teri	minated under	
Г	_		ble private foundation			on 507(b)(1)(A), check here		•
Ī		arket value of all assets at J Accounting method	X Cash Acc	rual	F If the	foundation is in a 60-month te	ermination	_
	end of	year (from Part II, col. (c), Other (specify)			under	r section 507(b)(1)(B), check i	nere	▶ ∐
	line 16	s) ▶ \$ 5,036,295 (Part I, column (d) mus	st be on cash basis)					
	Part		(a) Revenue and	/h) Not roy	ostmont	(a) Advisted not	(d) Disburser for charital	
		amounts in columns (b), (c) and (d) may not necessarily equal the amounts in column (a) (see instructions))	expenses per books	(b) Net inv		(c) Adjusted net income	purposes	i
2018	1		3,433,986	 			(cash basis o	only)
2[2	Contributions, gifts, grants, etc , received (attach schedule) Check ► if the foundation is not required to attach Sch. E						
()	3	Interest on savings and temporary cash investments	·					
14	4	Dividends and interest from securities	10,090	 	10,090		ļ	
72	5		10,050		20,030			***************************************
AP		<i>U</i>						
	ם 6	· · · · · · · · · · · · · · · · · · ·	254,810	<u> </u>				
SCANNIN	i ke							
爱	Kevenue	Capital gain net income (from Part IV, line 2)		2	54,810			
රී ්	_ 8	Net short-term capital gain				0		-,,,
Ñ	9	Income modifications						
	10	Gross sales less returns and allowances						
	t	Less Cost of goods sold						***************************************
	0	Gross profit or (loss) (attach schedule)						
	11	Other income (attach schedule)						
	12	Total. Add lines 1 through 11	3,698,886	26	4,900	0		
9	13 م	Compensation of officers, directors, trustees, etc	0					
Š	14	Other employee salaries and wages	RECEIVED) [_		
Š	14	Pension plans, employee benefits		77				
		į u.	MAR 0 1 2018	S				
9	ا يا ا	(-1123)	WAN O I ZOIC	101				
;			00054 15	-18 -18				
į	17	Interest	OGDEN U	<u> </u>	005			
	18	Taxes (attach schedule) (see instructions) STMT 1—	205		205		<u> </u>	
Onersting and Administration Ex	19	Depreciation (attach schedule) and depletion Occupancy						
<	20 21	Travel, conferences, and meetings						
7	2 22	Printing and publications				······································		
ē	n 23	Other expenses (att sch.)						
	24	Total operating and administrative expenses						
-	5	Add lines 13 through 23	205		205	o		0
9	25	Contributions, gifts, grants paid	0					 0
C	26	Total expenses and disbursements Add lines 24 and 25	205		205	0		<u> </u>
	27	Subtract line 26 from line 12		•••••			······································	
	а	Excess of revenue over expenses and disbursements	3,698,681					
	b	Net investment income (if negative, enter -0-)		26	4,695	· · · · · · · · · · · · · · · · · · ·		
_	c	Adjusted net income (if negative, enter -0-)				0		

Part	If Balance Sheets	Attached schedules and amount	ts in the desi	cription colum	าก	Beginning of year	<u> </u>	End of	year
		should be for end-of-year amoun	nts only (Se	e instructions		(a) Book Value	(b)	Book Value	(c) Fair Market Value
1	Cash - non-interest-bearing	•							
2	Savings and temporary cas	ih investments						300,772	300,772
3	Accounts receivable								
١.	Less allowance for doubtfu	il accounts >					ļ		
4	Pledges receivable								
	Less allowance for doubtfu	l accounts >							
5	Grants receivable						ļ		
6	Receivables due from office		id other						
1	disqualified persons (attach	schedule) (see						İ	
_	instructions)								
7	Other notes and loans receivable (att. s	•			_				
	Less allowance for doubtfu	I accounts >			0		ļ		. <u> </u>
8 9 10a	Inventories for sale or use						<u> </u>		
n 9	Prepaid expenses and defe							1,421	1,421
1 .	Investments – U.S. and state go	• •	•		_				
b	Investments – corporate sto	•		STMT	2		3	,293,218	4,630,742
С	Investments – corporate bo	•	SEE	STMT	3			103,270	103,360
11	Investments – land, buildings, and equil	pment basis							
1	Less accumulated depreciation (attach	•							
12	Investments – mortgage loa						J		
13	Investments – other (attach	schedule)					<u> </u>		
14	Land, buildings, and equipment basis								
	Less accumulated depreciation (attach	sch)					1		
15	Other assets (describe >) [ļ		
16	Total assets (to be complet								
	instructions Also, see page	1, item l)					3	,698,681	5,036,295
17	Accounts payable and accru	ied expenses							
18	Grants payable						ļ		
19	Deferred revenue								
20	Loans from officers, director		qualified p	persons		<u> </u>			
19 20 21	Mortgages and other notes payal	ble (attach schedule)							
22	Other liabilities (describe) [
23	Total liabilities (add lines 1	7 through 22)						0	
	Foundations that follow SF				▶ 🔲 [7	
24	and complete lines 24 thro	ugh 26 and lines 30 and	1 31.				ŀ	ł	
24	Unrestricted				L				
25	Temporarily restricted				[
26	Permanently restricted								
	Foundations that do not fo	llow SFAS 117, check h	еге		▼ X	-			
	and complete lines 27 thro	=			_		ĺ		
27	Capital stock, trust principal,	or current funds					3,	698,681	
28	Paid-in or capital surplus, or	land, bldg , and equipmen	nt fund		[
29	Retained earnings, accumula	ated income, endowment,	or other	funds	Γ				
	Total net assets or fund ba				Ī	0	3,	698,681	
31	Total liabilities and net ass	ets/fund balances (see			ſ				
	instructions)					0	3,	698,681	
Part II		ges in Net Assets o	r Fund	Balanc	es				
Total	net assets or fund balances a	it beginning of year – Part	t II, colum	nn (a), line	30 (mus	t agree with			
	f-year figure reported on prior	year's return)						1	0
	amount from Part I, line 27a							2	3,698,681
	increases not included in line	2 (itemize)						3	
	nes 1, 2, and 3							4	3,698,681
	ases not included in line 2 (ite							5	
Total r	net assets or fund balances a	t end of year (line 4 minu	s line 5) -	- Part II, c	olumn (b)), line 30		6	3,698,681
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	Part IV Capital Gains a	nd Losses for Tax on Investm	ent Income				
		the kind(s) of property sold (for example, real estate arehouse, or common stock, 200 shs MLC Co)	9,	(b) How acquired P – Purchase D – Donation	(c) Date a (mo , da		(d) Date sold (mo , day, yr)
1	SEE WORKSHEET						
t)						
_							
_				 	-		
6	·	(f) Depreciation allowed	(2) (2-1)		}	(h) Gain	or (loss)
_	(e) Gross sales price	(or allowable)		or other basis ense of sale		((e) plus (f)	
			 		_		
	Complete only for assets showin	g gain in column (h) and owned by the	foundation on 12/31/	/69	(1)	Gains (Col	(h) gain minus
	(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	1	ss of col (i)			ess than -0-) or
— а		77					
t							
d					ļ		
e					-		
2	Capital gain net income or (net c	apıtal loss) If gaın, also enter ıl If (loss), enter -0- ır			2		254,810
3	Net short-term capital gain or (los	ss) as defined in sections 1222(5) and ((6)				
		, column (c) See instructions. If (loss),	enter -0- ın				00 567
_	Part I, line 8 Part V Qualification Ur	nder Section 4940(e) for Redu			3		20,567
Wa	es," the foundation does not qual	tion 4942 tax on the distributable amou lify under section 4940(e) Do not comp	lete this part			<u></u>	N/A Yes No
1		each column for each year, see the inst	ructions before make	ing any entries			
	(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distribution	s Net valu	(c) e of noncharitable-use asse	ts		(d) bution ratio vided by col (c))
	2016						
	2015						
	2014						
	2013 2012						
	2012					Τ	
2	Total of line 1, column (d)				2		_
3	Average distribution ratio for the	5-year base period – divide the total on	line 2 by 5 0, or by the	he			
	number of years the foundation h	as been in existence if less than 5 year	rs .		3	 	
4	Enter the net value of noncharitat	ble-use assets for 2017 from Part X, line	e 5		4	<u> </u>	
5	Multiply line 4 by line 3				5		
e	Enter 19/ of not investment	(40/ of Dort Live 27h)					
	Enter 1% of net investment incom	ile (170 OI Pait I, lille 270)			6_		
7	Add lines 5 and 6				7	-	
	Enter qualifying distributions from	•			8	<u></u>	
	Part VI instructions	n line 7, check the box in Part VI, line 1t	o, and complete that	paπ using a 1% tax i	ate See the	e 	

DAA

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Pi	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940)(e), or 4948 – see instru	ctions)				
1a	Exempt operating foundations described in section 4940(d)(2), check here ▶ ☐ and	l enter "N/A" on line 1	7				
	Date of ruling or determination letter (attach copy of letter if ne	cessary—see instruction	ıs)				
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check			1		<u>5,</u>	294
	here ▶ and enter 1% of Part I, line 27b						
С	All other domestic foundations enter 2% of line 27b Exempt foreign organizations, enter	er 4% of	_				
	Part I, line 12, col (b)						
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only	y, others, enter -0-)	<u> </u>	2			
3	Add lines 1 and 2			3		<u>5,</u>	294
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only	y, others, enter -0-)		4			0
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	-		5		_5,	294
6	Credits/Payments						
а	2017 estimated tax payments and 2016 overpayment credited to 2017	6a					
b	Exempt foreign organizations – tax withheld at source	6b					
С	Tax paid with application for extension of time to file (Form 8868)	6c					
d	Backup withholding erroneously withheld	6d					
7	Total credits and payments Add lines 6a through 6d			7			
8	Enter any penalty for underpayment of estimated tax. Check here. X if Form 2220 is	attached		8			44
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed		 	9		5,	338
0	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpa	aid	▶ 1	10			
1	Enter the amount of line 10 to be Credited to 2018 estimated tax ▶	Refunde	d ▶ 1	11			
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				Yes	No
	participate or intervene in any political campaign?				1a_	<u> </u>	X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political pur	rposes? See the			ĺ		
	Instructions for the definition				1b	ļ. <u> </u>	X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copi	ies of any materials					
	published or distributed by the foundation in connection with the activities					1	
С	Did the foundation file Form 1120-POL for this year?				1c	ļ	X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during	•					
	(1) On the foundation > \$ (2) On foundation managers						
е	Enter the reimbursement (if any) paid by the foundation during the year for political expe	enditure tax imposed					
	on foundation managers > \$						
2	Has the foundation engaged in any activities that have not previously been reported to t	the IRS?			2	<u> </u>	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 govern	_					
	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy	y of the changes			3	<u> </u>	X
la	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?			N/A	4b		<u> </u>
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?				5		X
	If "Yes," attach the statement required by General Instruction T						
	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied	d either					
	By language in the governing instrument, or						
	 By state legislation that effectively amends the governing instrument so that no mand. 	atory directions that					
	conflict with the state law remain in the governing instrument?				6	X	
•	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," o	complete Part II, col (c), a	and Part X	(V	7	X	<u> </u>
la	Enter the states to which the foundation reports or with which it is registered. See instru ${f FL}$	ctions >					
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to t	he Attorney General					
	(or designate) of each state as required by General Instruction G? If "No," attach explan				8b	x	
	s the foundation claiming status as a private operating foundation within the meaning of						
	4942(j)(5) for calendar year 2017 or the taxable year beginning in 2017? See instruction				[
	complete Part XIV				9		x
	complete i dit XIV						- -
	Did any persons become substantial contributors during the tax year? If "Yes," attach a	schedule listing their					

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.)

c. If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here

, 20

If the provisions of section 4942(a)(2) are being applied to **any** of the years listed in 2a, list the years here

20 20 20 20

, 20

3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?

, 20

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)

4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?

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?

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N/A

No

N/A

X

Yes

2b

3h

4a

If "Yes," list the years ▶ 20

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_ p	art VII-B Statements Regarding	Activities for Which Fo	rm 4720 May Be F	Reguired (con	tinued)			
5a	During the year did the foundation pay or in	cur any amount to						
	(1) Carry on propaganda, or otherwise atte	mpt to influence legislation (sec	tion 4945(e))?		Yes X No			
	(2) Influence the outcome of any specific p	ublic election (see section 4955), or to carry on,					
	directly or indirectly, any voter registrati	on drive?			Yes X No			
	(3) Provide a grant to an individual for trave	el, study, or other similar purpos	es?		res 🏻 No			
	(4) Provide a grant to an organization other	r than a charitable, etc , organiz	ation described in		_			
	section 4945(d)(4)(A)? See instructions	:			res 🛚 X No	1 1		
	(5) Provide for any purpose other than relig	gious, charitable, scientific, litera	iry, or educational					
	purposes, or for the prevention of cruell	ty to children or animals?			res 🗓 No			
b	If any answer is "Yes" to 5a(1)–(5), did any	of the transactions fail to qualify	under the exceptions d	lescribed in				
	Regulations section 53 4945 or in a current	notice regarding disaster assist	ance? See instructions		N/A	5b		
	Organizations relying on a current notice re-	garding disaster assistance, che	eck here		▶ 🗌			
C	If the answer is "Yes" to question 5a(4), does	es the foundation claim exemption	on from the tax		_			
	because it maintained expenditure responsi	bility for the grant?		N/A 🗌	res 🗌 No			
	If "Yes," attach the statement required by R	egulations section 53 4945–5(d)					
6a	Did the foundation, during the year, receive	any funds, directly or indirectly,	to pay premiums			1		
	on a personal benefit contract?			_ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	res 🗓 No			
b	Did the foundation, during the year, pay pre	miums, directly or indirectly, on	a personal benefit contr	ract?		6b	X	:
	If "Yes" to 6b, file Form 8870							
7a	At any time during the tax year, was the fou	ndation a party to a prohibited to	ax shelter transaction?		res X No	1		
b	If "Yes," did the foundation receive any proc	eeds or have any net income a	tributable to the transac	ction?	N/A	7b		
Pa	rt VIII Information About Offic	ers, Directors, Trustees	, Foundation Mana	agers, Highly	Paid Employe	ees,		
	and Contractors							
1 L	ist all officers, directors, trustees, and for	undation managers and their	compensation. See ins	structions.			-	
	(a) Name and addre	ess	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred		ense accoun allowances	ιĹ
			201000 10 position		compensation	<u> </u>		
	DREW STORCH	FORT LAUDERDALE	VICE PRESIDE			ĺ		
	50 N ANDREWS AVE STE 2023	FL 33309	10.00	0	0		-	0
	HN ULBRICH	FORT LAUDERDALE	PRESIDENT					
	50 N ANDREWS AVE STE 2023	FL 33309	10.00	0	0	 		0
	CK LOVING	FORT LAUDERDALE	VICE PRESIDE					
13	23 SE THIRD AVE	FL 33316	10.00	0	0			0
2	Compensation of five highest-paid emplo	eyees (other than those include	led on line 1 – see inst	tructions). If non	e, enter			_
	(a) Name and address of each employee paid r	more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation		ense accoun allowances	t,
NO	NE				Compensation			_
								_
				_				_
								_
·								_
otal	number of other employees paid over \$50.00	00			.			n

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Part VIII Information About Officers, Directors, To and Contractors (continued)	rustees, Foundation Managers, Highly Paid Emp	loyees,
3 Five highest-paid independent contractors for professional s	ervices. See instructions. If none, enter "NONE."	
(a) Name and address of each person paid more than \$50	0,000 (b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services	<u>i</u>	<u> </u>
Part IX-A Summary of Direct Charitable Activities	s	
List the foundation's four largest direct charitable activities during the tax year. Include relevangenizations and other beneficianes served, conferences convened, research papers produ		Expenses
1 N/A		
2		
3		
4		
Part IX-B Summary of Program-Related Investme	ents (see instructions)	
Describe the two largest program-related investments made by the foundation during the tax		Amount
1 N/A		
2		
All other program-related investments. See instructions		
3		

Total. Add lines 1 through 3

Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4 4 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income Enter 1% of Part I, line 27b See instructions 5 6

Adjusted qualifying distributions. Subtract line 5 from line 4

Amounts set aside for specific charitable projects that satisfy the

Suitability test (prior IRS approval required)

Cash distribution test (attach the required schedule)

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

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0

0

2

3а

3ь

5

P	art XIII Undistributed Income (see instructions)				
		(a)	(b)	(c)	(d)
1	Distributable amount for 2017 from Part XI,	Corpus	Years prior to 2016	2016	2017
	line 7				0
2	Undistributed income, if any, as of the end of 2017				
а	Enter amount for 2016 only	······			
b	Total for prior years 20 , 20 , 20				
3	Excess distributions carryover, if any, to 2017				
а	From 2012				
b	From 2013				
С	From 2014				
d	From 2015				
е	From 2016				
f	Total of lines 3a through e				
4	Qualifying distributions for 2017 from Part XII,				:
	line 4 ▶ \$				Ĭ.
а	Applied to 2016, but not more than line 2a				:
b	Applied to undistributed income of prior years				
	(Election required – see instructions)			······	
С	Treated as distributions out of corpus (Election				
	required – see instructions)				·
d	Applied to 2017 distributable amount			<u></u>	
е	Remaining amount distributed out of corpus			·····	
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:				-
а	Corpus Add lines 3f, 4c, and 4e Subtract line 5				
b	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				0
7	Amounts treated as distributions out of corpus				
	to satisfy requirements imposed by section				
	170(b)(1)(F) or 4942(g)(3) (Election may be				
	required—see instructions)				
8	Excess distributions carryover from 2012 not				
	applied on line 5 or line 7 (see instructions)	 			
9	Excess distributions carryover to 2018				
	Subtract lines 7 and 8 from line 6a				
0	Analysis of line 9				
a	Excess from 2013			i	
b	Excess from 2014				
C	Excess from 2015				
d	Excess from 2016				
e	Excess from 2017				L

3 Grants and Contributions Paid During th	o Voor or America	F. 4 P		
S Grants and Contributions Paid During th		ruture Payment		
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		
a Paid during the year				
N/A	1			
	Ì			
	•	ľ		
	1	1		
		1		
)]		
	Į			
)			
]			
		1		
	•			
			1	
Total	· 	<u> </u>	▶ 3a	
		Τ	Ja	·
b Approved for future payment N/A			1	
			1	
		1		
j				
		[
Total			▶ 3b	

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated	Unrelated	business income	Excluded by s	section 512, 513, or 514	(e)
Program service revenue	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income (See instructions)
-	-	·			
ab	 		 		
С	 				
d					
е			 		
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	10,090	
5 Net rental income or (loss) from real estate			 		
a Debt-financed property		·····			
b Not debt-financed property					
6 Net rental income or (loss) from personal property					
7 Other investment income			 - 		
8 Gain or (loss) from sales of assets other than inventory			18	254,810	
9 Net income or (loss) from special events			 - • -		
10 Gross profit or (loss) from sales of inventory		-			
11 Other revenue a	 - 				
b					
c					
d					
e					
12 Subtotal Add columns (b), (d), and (e)			0	264,900	0
13 Total Add line 12, columns (b), (d), and (e)	<u> </u>			13	·
See worksheet in line 13 instructions to verify calculations)				· · · ·	
Part XVI-B Relationship of Activities to the Ac	complishme	nt of Exempt	Purposes		
Line No. Explain below how each activity for which income				d importantly to the	
▼ accomplishment of the foundation's exempt purpo					ns)
N/A					
				-	-
					
	-				
					- <u></u>
					

Form 990-F	PF (2017) AI	PINE T	RUST I	NC	_	82-3	470733		Pag	ge 13
Part XV	∕II Inforn		arding Tr		and Transaction	ons and Relatio	onships With Nonc	haritable		
1 Did t	_			ge in any of the	following with any	other organization of	lescribed		Yes	No
	•					relating to political				
organ	nizations?									
-		eporting found	dation to a no	oncharitable exe	mpt organization	of				
(1)					F			1a(1)		X
	Other assets									
	r transactions							1	Yes No 1a(1) X 1a(2) X 1b(1) X 1b(2) X 1b(3) X 1b(4) X 1b(5) X 1c X angements T is true, so this return hown below? Yes No	
	Sales of assets	to a noncharit	ahla avemnt	organization				16(1)		x
			•	exempt organiz	otion			1		-
					ation					
٠,	Rental of facilities			seis						-
٠,	Reimbursement	_	S							-
	oans or loan gu									
` '			· ·	r fundraising so						_
	•		•		paid employees		ys show the fair market	[16]		
value	of the goods, on any transac	other assets, o	or services g arrangeme	iven by the repo	orting foundation I	f the foundation reco	erved less than fair mark ssets, or services receive tion of transfers, transactions, ar	ed	nte	
	no (b) An	nount involved	(c) Nam	e or noncharitable ex	tempt organization	(a) Descrip	don or transfers, transactions, ar	id sharifig afrangemen		
N/A						-				
						- 				
			ļ			 				
								 		
descr		501(c) (other	than section	with, or related 501(c)(3)) or in		x-exempt organizati	ons	Ye	s X] No
	(a) Name of	organization		(b) Type	of organization		(c) Description of relation	nship		
N/A										
		Declaration of p				which preparer has any	May with See	the IRS discuss this re	etum] No
- ' -	Print/ ype preparer						· · ·	Date		$\overline{\Box}$
	ype preparer	s rame			Preparer's signati	· C -	C. On	Date	Check	[] if
aid	TEVEN M.	BORISMAN	at .		20/2	MPau	CM	2/20/18	self-em	.pioyed
reparer 🗀				ZIICMAN	WEINSTEI	N & POOLE	T.T.C	P00153	106	
Jse Only ├─	Firm's name	GOLDS		ZUGMAN, WAY ST		IN & POOTE				
	Firm's address					45	Firm's EIN			
		<u> </u>	UDERDA	LE, FL	33309-20	43	Phone no	954-35	<u> </u>	<u> </u>

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

Employer identification number

82-3470733 ALPINE TRUST INC Organization type (check one) Section:

Filers of 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 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 331/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000, or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1 Complete Parts I and II For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000 If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year

Caution. An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Form 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)

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)

PAGE 1 OF 1

Name of organization ALPINE TRUST INC

Employer identification number 82-3470733

Part I	Contributors (see instructions) Use duplicate copies of Part I if additional space is needed.								
(a)	(b)	(c)	(d)						
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution						
1	JOHN ULBRICH 6750 N ANDREWS AVE STE 2023 FORT LAUDERDALE FL 33309	\$ 3,433,986	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) No.	(b)	(c) Total contributions	(d) Type of contribution						
NO.	Name, address, and ZIP + 4	\$	Person Payroll Noncash (Complete Part II for noncash contributions)						
(a) No	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution						
	reality address, and all 14	\$	Person Payroli Noncash (Complete Part II for noncash contributions)						
(a)	(b)	(c)	(d)						
No.	Name, address, and ZIP + 4	Total contributions \$	Person Payroll Noncash (Complete Part II for noncash contributions)						

Name of organization
ALPINE TRUST INC

Employer identification number 82-3470733

Part II	Noncash Property (see instructions) Use dup	licate copies of Part II if additional sp	ace is needed
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
1	MARKETABLE SECURITIES		
		\$ 4,961,961	12/18/17
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	

Form 990-PF	-	I Gains and Losses				2017
Name	For calendar year	2017, or tax year beginning	11/16/1	7 , and ending	12/31/17 Employer Ide	entification Number
					Employer ide	,,,,,,,,,
ALPINE TRUS	T INC				82-3470	733
(a)	List and describe the kind(s 2-story brick warehouse, or	of property sold, e.g., real estate, common stock, 200 shs. MLC Co		(b) How acquired P-Purchase	(C) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
(1) BB & T CC	DD			D-Donation D	03/23/17	12/19/1
(1) BB & T CC (2) BP AMOCO				D D	03/23/17	12/19/1
3) BLACKROCK		······································		D	03/23/17	12/19/1
	YERS SQUIE	B CO		D	03/23/17	12/19/1
	NE FINL CO			D	03/23/17	12/19/1
6) COCA COLA				D	03/23/17	12/19/1
7) CORNING I	NC			D	03/23/17	12/19/1
8) INTEL COP				D	03/23/17	12/19/1
	RRUSSELL			D	11/01/17	12/19/1
10) MCDONALDS				D	03/23/17	12/19/1
11) PEPSICO I				D	03/23/17	12/19/1
12) TEXAS INS				<u>D</u>	03/23/17	12/19/1
	IFIC CORP			<u>D</u>	03/23/17	12/19/1
	RCEL SVC			D	03/23/17	12/19/1
15) WELLS FAR				D	03/23/17	12/19/1
(e) Gross sales price	. (f) Depreciation allowed (or allowable)	(g) Cost or other	er basis	(h) Gair (e) plus (f	or (loss)
1) 5,0	013	· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·	4,468	·	545
	062			3,416		646
	L70			3,786		1,384
	536			4,217	·	419
	956			4,251		705
	779			5,286		493
7) 3,2				2,757		476
3) 6, 9				5,267		1,708
9) 166,9			16	1,079		5,856
10) 13,0				9,705		3,328
11, 11, 8			1	1,204		689
12) 7,7				6,053		1,743
(3) 3 , 3				2,621		710
(4) 5, S (5) 6, C				5,332 5,586		630 472
<u> </u>	750			5,586	. 1	4/2
Complete only for as:		column (h) and owned by the fo			(I) Gains (Co	(h) gain minus
		(j) Adjusted basis as of 12/31/69	(k) Excess of over col (j),	if any	col (k), but not les Losses (from	col (h))
)						545
2)				· · · · · · · · · · · · · · · · · · ·		646
<u>) </u>					 	1,384
						419
()						705
i) ')					 -	<u>493</u> 476
()					 	1,708
)					 	5,856
0)				•	 	3,328
1)					 	689
2)			·			1,743
3)					 	710
4)						630
5)						472

Form	990-PF		Capital Gains and Losse	es 101				2017
Nome		For calen	dar year 2017, or tax year beginning		11/16/1	.7 , and ending	12/31/17 Employer Ide	ntification Number
Name							Employer ide	nancation Number
ALP	INE TRUS	T INC					82-3470	733
	(a)	List and descrit 2-story brick wa	pe the kind(s) of property sold, e.g., real estate, arehouse, or common stock, 200 shs MLC Co			(b) How acquired P-Purchase D-Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
(1) A	CCENTURE	PLC				P	03/23/17	12/19/17
(2) S	EE ATTAC	HED S	CHEDULE 1			D	VARIOUS	12/19/17
(3)						ļ		
(4)							 	
(5)	<u></u>		-					-
(6)								
(7) (8)							 	
(9)					****			
(10)								
(11)								
(12)							 	
(13)							1	
(14)					···	 	1	
(15)					·	<u> </u>		l
(e) Gross sales price	e	(f) Depreciation allowed (or allowable)	\prod	(g) Cost or ot plus expense	her basis e of sale	(h) Gain (e) plus (f)	-
(1)	3,8	318				3,055		763
(2)	462,4				2	28,219	2	34,243
(3)								
(4)								
(5)							<u> </u>	
(6)							-	
7)							-	
(8)		·		_			-	
(9) (10)							-	
11)								
12)		-						
13)								
14)								
15)					·····		1	
		_						:
Com	plete only for as	sets showir	ng gain in column (h) and owned by the	e found	lation on 12/31/6	69	(I) Garage (Co	(h) gain mous
	FMV as of 12/31/6	39 	(j) Adjusted basis as of 12/31/69	_	(k) Excess over col (of col (i) j), if any	(I) Gains (Co col (k), but not les Losses (from	cal (h))
1)	_ 					· · ·		763 34,243
2)				-		_		34,243
3) 4)	. <u>.</u> .						 	
4) 5)			-	+			 	
5) 6) 7)				_	· · · · · · · · · · · · · · · · · · ·		1	
7)					 			
8) 9)								
10)								
11)				_				
12)				_			 	
13) 14)							 	
14) 15)							 	

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Federal Statements

10213 ALPINE TRUST INC

FYE: 12/31/2017

82-3470733

Statement 1 - Form 990-PF, Part I, Line 18 - Taxes

Description		Total	Inve	Net nvestment	Adjuste Net	g	Charitable Purpose
FOREIGN TAXES	တ	205	တ	205	Sy.		₩.
TOTAL	\$	205	φ.	205	v,	0	\$

Statement 2 - Form 990-PF, Part II, Line 10b - Corporate Stock Investments

is of Fair Market Value	w	\$ 4,630,742
Basis of Valuation	COST	
End of Year	\$ 3,280,718 12,500	\$ 3,293,218
Beginning of Year	w.	w.
Description	SEE STATEMENT 2 PG 5/5 CREDIT SUISSE COMMODITY RETURN	TOTAL

Statement 3 - Form 990-PF, Part II, Line 10c - Corporate Bond Investments

Fair Market Value	\$ 103,360	
Basis of Valuation	COST	
End of Year	\$ 103,270 \$ 103,270	
Beginning of Year	\$ \$	
Description	COCA COLA CO TOTAL	

Statement 4 - Form 990-PF, Part VII-A, Line 10 - Substantial Contributors

	City, State, Zip
Name	Address

6750 N ANDREWS AVE STE 2023

JOHN ULBRICH

FORT LAUDERDALE FL 33309