The state of the s

#### **Return of Private Foundation**

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

OMB No 1545-0052 2017

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.

			dar year 2017 or tax year beginning		, 2017, and		<del></del>	, 20
	Na	me of fo	undation			A Employe	er identification numb	er
	TH	E_SH	ERMAN FOUNDATION				136222	<del>_</del>
2020	Nu	mber an	d street (or P O box number if mail is not delivered to street address)		Room/suite	B Telepho	ne number (see instruct	ions)
	75	02 S	HADYVILLA LN			(281	)556-5628	
<b>a</b>	Cit	y or towi	n, state or province, country, and ZIP or foreign postal code			C If exemp	ition application is pend	ling, check here ► 🗌
<del></del>	НО	USTO	N TX 77055					
ت	G	Check	all that apply: Initial return Initial return	n of a former	public chari	ty <b>D</b> 1. Foreig	n organizations, check	here ▶ 🗌
0	9. <b>i</b> .		☐ Final return ☒ Amended	return		2 Foreign	ın organizations meetin	a the 95% test
	4		Address change Name cha	nge		· · · · ·	here and attach compl	· —
OPE	H	Check	type of organization: Section 501(c)(3) exempt p	rivate founda	ation		foundation status was	
z	X	Sectio	n 4947(a)(1) nonexempt charitable trust	kable private	foundation	section :	507(b)(1)(A), check here	► 🗆
<b>₹</b>	E	Fair m	arket value of all assets at J Accounting method	l. 🛛 Cash	☐ Accrua	F If the for	indation is in a 60-mont	h termination
3 =	8	end of	year (from Part II, col (c), Other (specify)				ection 507(b)(1)(B), chec	
<u>e</u>	9	line 16	) ► \$ 1,911,718. (Part I, column (d) must be	on cash basi	s)			
裠	Pa	art I	n 4947(a)(1) nonexempt charitable trust ☐ Other tax arket value of all assets at year (from Part II, col (c), ☐ Other (specify) > 1,911,718. (Part I, column (d) must be amounts in columns (b), (c), and (d) may not necessarily equal	(a) Revenue	and			(d) Disbursements
ಬ			amounts in columns (b), (c), and (d) may not necessarily equal	expenses p		let investment income	(c) Adjusted net income	for charitable purposes
-	۱۱/		the amounts in column (a) (see instructions) )	books			`.	(cash basis only)
_0	V.	)1	Contributions, gifts, grants, etc., received (attach schedule)				<u></u>	_ {
į,	N	2	Check ► ☑ if the foundation is <b>not</b> required to attach Sch. B	61	. 1,			
C 0 4 MAR 50		3	Interest on savings and temporary cash investments					1
<b>~</b> 1		4	Dividends and interest from securities		0.	-		
ΞĔ		5a	Gross rents					
≥.		b	Net rental income or (loss)	••	•	,		1
0	ē.	6a	Net gain or (loss) from sale of assets not on line 10					1
J	Revenue	b	Gross sales price for all assets on line 6a	-				
O	Š	7	Capital gain net income (from Part IV, line 2)					
<b>⊣</b>	ď	8	Net short-term capital gain		1			]
0 †		9	Income modifications			-		1
`		10a	Gross sales less returns and allowances					ŧ
ř		b	Less: Cost of goods sold					{
•		С	Gross profit or (loss) (attach schedule)					. 1
		11	Other income (attach schedule)					<u> </u>
		12	Total. Add lines 1 through 11		0.		UNII	
~	S	13	Compensation of officers, directors, trustees, etc.			STATUTE	VED	
202	Expenses	14	Other employee salaries and wages			REUL		
マ マ	en	15	Pension plans, employee benefits				5 2021	
es.	X	16a	Legal fees (attach schedule)			AZU.	ACH .	
~	e E	b	Accounting fees (attach schedule) L-16b. Stmt		0.		12 12 1 V	
JAN	ţį	С	Other professional fees (attach schedule)			TPI	GDEN	
_	Operating and Administrative	17	Interest					<b>%</b> *
ה	is	18	Taxes (attach schedule) (see instructions) .					T.
Ž	mir	19	Depreciation (attach schedule) and depletion				RECEI	1,
Z	١d	20	Occupancy				RECEIVED	<b>&gt;</b>
SCANNED	d/	21	Travel, conferences, and meetings			33		76
S	an	22	Printing and publications			၂၀၂ ၂	16 2020	
	<u>g</u>	23	Other expenses (attach schedule) See St.mt.		50.	<b>→</b>	- 2020	
	aţi.	24	Total operating and administrative expenses.			$L_0$	DEN, UT	Ĕ/
	ē		Add lines 13 through 23		50.		-IV, UT	<del></del>
	9	25	Contributions, gifts, grants paid	106,0				106,000.
	_	26	Total expenses and disbursements. Add lines 24 and 25	106,0	50.		<u> </u>	106,000.
		27	Subtract line 26 from line 12:		-			1
		а	Excess of revenue over expenses and disbursements	<u> </u>	50.			
		b	Net investment income (if negative, enter -0-)	*****		<del></del>		<u> </u>
			Adjusted net income (if negative, enter -0-)					000 PF
	For	Paperv	vork Reduction Act Notice, see instructions.				Fo	rm 990-PF (2017)

D	art II	Ralance Shoots Attached schedules and amounts in the description column	beginning of year		End	year
	2014	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)	(a) Book Value	(b) Book Val	ue	(c) Fair Market Value
	1	Cash—non-interest-bearing	11,338.	15,2	288.	15,288.
	2	Savings and temporary cash investments	0.		0.	0.
	3	Accounts receivable ▶	*			· •
	1	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 (attach schedule) (see instructions)				
	7	Other notes and loans receivable (attach schedule) ▶		_		. /
		Less: allowance for doubtful accounts ▶				
ţ	8	Inventories for sale or use				
Assets	9	Prepaid expenses and deferred charges			-	
As	10a	Investments – U.S. and state government obligations (attach schedule)				
	b	Investments—corporate stock (attach schedule)				
	С	Investments – corporate bonds (attach schedule)		<del>-</del>	-	
	11	Investments—land, buildings, and equipment. basis ▶		т <u>г</u>		<b>'3</b>
		Less accumulated depreciation (attach schedule) ▶		*		
	12	Investments—mortgage loans				
	13		73,204,926.	73,094,9	26.	1,894,926.
	14	Land, buildings, and equipment. basis ▶			-	
		Less. accumulated depreciation (attach schedule) ▶				
	15		1,912.	1,5	04.	1,504.
	16	Other assets (describe )  Total assets (to be completed by all filers—see the	=, ===:			
	1	ınstructions. Also, see page 1, item l)	73,218,176.	73,111,7	18.	1,911,718.
	17	Accounts payable and accrued expenses	1	•		
(0	18	Grants payable				
<u>ë</u>	19	Deferred revenue				
Ĕ	20	Loans from officers, directors, trustees, and other disqualified persons				1
Liabilities	21	Mortgages and other notes payable (attach schedule)	·			'
	22	Other liabilities (describe ► )				
	23	Other liabilities (describe ► )  Total liabilities (add lines 17 through 22)				
alances		Foundations that follow SFAS 117, check here ▶ ☐ and complete lines 24 through 26, and lines 30 and 31.				
Ĕ	24	Unrestricted			i	
	25	Temporarily restricted			•	
<b>8</b>	26	Permanently restricted				,
or Fund B		Foundations that do not follow SFAS 117, check here ▶ ☒ and complete lines 27 through 31.				
ō	27	Capital stock, trust principal, or current funds				į
Net Assets	28	Paid-in or capital surplus, or land, bldg., and equipment fund				
SSE	29	Retained earnings, accumulated income, endowment, or other funds	73,218,176.	73,111,7	18.	
Ä	30	Total net assets or fund balances (see instructions)	73,218,176.	73,111,7		
<u>F</u>	31	Total liabilities and net assets/fund balances (see				
		ınstructions)	73,218,176.	73,111,7	18.	-
	rt III	Analysis of Changes in Net Assets or Fund Balances				
1		I net assets or fund balances at beginning of year-Part II, colur				
	end-	of-year figure reported on prior year's return)			1	73,218,176.
2		r amount from Part I, line 27a			2	-106,050.
3	Othe	er increases not included in line 2 (itemize) 🕨			3	
4		lines 1, 2, and 3			4	73,112,126.
5		reases not included in line 2 (itemize) FEDERAL INCOME TA			5	408.
6	Tota	I net assets or fund balances at end of year (line 4 minus line 5) - F	Part II, column (b), Iir	ne 30	6	73,111,718.

(re) Gross sales price  (or allowable)  plus expense of sale  (fe)  a  b  c  d  e  Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69  (i) FMV as of 12/31/69  (ii) FMV as of 12/31/69  (iii) Adjusted basis as of 12/31/69  (iv) Adjusted basis as of 12/31/69  (iv) Excess of col (i) over col (j), if any  a  b  c  d  e  2 Capital gain net income or (net capital loss)  If gain, also enter in Part I, line 7  If (loss), enter -0- in Part I, line 7  If gain, also enter in Part I, line 7  If gain, also enter in Part I, line 7  If gain, also enter in Part I, line 7  If gain, also enter in Part I, line 7  If (loss), enter -0- in Part I, line 7  If gain, also enter in Part I, line 8, column (c). See instructions. If (loss), enter -0- in Part I, line 8, column (c). See instructions. If (loss), enter -0- in Part I, line 8, column (c). See instructions. If (loss), enter -0- in Part I, line 8, column (c).	
to c d e (e) Gross sales price (f) Depreciation allowed (or allowable) (g) Cost or other basis plus expense of sale ((e) Gross sales price (or allowable) (g) Cost or other basis plus expense of sale ((e) Gross sales price (for allowable)	e) plus (f) minus (g))  ins (Col (h) gain minus but not less than -0-) or
c d e (e) Gross sales price (f) Depreciation allowed (or allowable) (g) Cost or other basis plus expense of sale ((e) Gross sales price (or allowable) (g) Cost or other basis plus expense of sale ((e) Gross sales price (f) Cost or other basis plus expense of sale ((f) Gross sales price (f) Gross sales price	e) plus (f) minus (g))  ins (Col (h) gain minus but not less than -0-) or
d e  (e) Gross sales price  (f) Depreciation allowed (or allowable)  (or allowable)  (g) Cost or other basis plus expense of sale  (le  a b c d e  Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69  (l) FMV as of 12/31/69  (l) Gain (k), cover col (j), if any  (l) Gain (li), if any  (l) Gain (li	e) plus (f) minus (g))  ins (Col (h) gain minus but not less than -0-) or
e (e) Gross sales price (f) Depreciation allowed (g) Cost or other basis plus expense of sale (f) Depreciation allowed (g) Cost or other basis plus expense of sale (f) Expense of sale (f) Depreciation allowed (g) Cost or other basis plus expense of sale (f) Expense of sale (f) Expense of sale (f) Gain (g) Expense of sale (f) Expense of sal	e) plus (f) minus (g))  ins (Col (h) gain minus but not less than -0-) or
(e) Gross sales price  (f) Depreciation allowed (g) Cost or other basis plus expense of sale  (f) Depreciation allowed (g) Cost or other basis plus expense of sale  (f) Expense of sale  (g) Cost or other basis plus expense of sale  (h) Cost or other basis plus expense of sale  (h) Cost or other basis plus expense of sale  (h) Cost or other basis plus expense of sale  (h) Cost or other basis plus expense of sale  (h) Cost or other basis plus expense of sale  (h) Cost or other ba	e) plus (f) minus (g))  ins (Col (h) gain minus but not less than -0-) or
(e) Gross sales price (or allowable)  plus expense of sale ((e)  a  b  c  d  e  Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 (i) FMV as of 12/31/69  (ii) FMV as of 12/31/69  (iii) FMV as of 12/31/69  (iv) FMV as of 12/31/69	e) plus (f) minus (g))  ins (Col (h) gain minus but not less than -0-) or
b c d e Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 (i) FMV as of 12/31/69 (j) Adjusted basis as of 12/31/69 (k) Excess of col (i) over col (j), if any col (k), Lo col (k), L	but not less than -0-) or
c d e Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 (i) FMV as of 12/31/69 (i) FMV as of 12/31/69 (ii) FMV as of 12/31/69 (iii) FMV as of 12/31/69 (iv)	but not less than -0-) or
d e Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 (i) FMV as of 12/31/69 (ii) FMV as of 12/31/69 (iii) Adjusted basis as of 12/31/69 (iv) Excess of col (i) over col (j), if any  a b c d e  2 Capital gain net income or (net capital loss) { If gain, also enter in Part I, line 7   If (loss), enter -0- in Part I, line 7   2  Net short-term capital gain or (loss) as defined in sections 12/22(5) and (6)   If gain, also enter in Part I, line 8, column (c). See instructions. If (loss), enter -0- in }	but not less than -0-) or
Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69  (i) FMV as of 12/31/69  (ii) FMV as of 12/31/69  (iii) FMV as of 12/31/69  (iv) Adjusted basis as of 12/31/69  (iv) Excess of col (iv) over col (iv), if any  (iv) Gain column (h) and owned by the foundation on 12/31/69  (iv) Gain column (iv) Excess of col (iv) over col (iv), if any  (iv) Gain column (iv) Gain column (iv), if any  (iv) Gain column (iv) Gain column (iv), if any  (iv) Gain column (iv) Gain column (iv), if any  (iv) Gain column (iv) Gain column (iv), if any  (iv) Gain column (iv) Gain column (iv), if any  (iv) Gain column (iv) Gain column (iv), if any  (iv) Gain column (iv) Gain column (iv), if any  (iv) Gain column (iv) Gain column (iv), if any  (iv) Gain column (iv) Gain column (iv), if any  (iv) Gain column (iv) Gain column (iv), if any  (iv) Gain column (iv) Gain column (iv), if any  (iv) Gain column (iv) Gain column (iv) Gain column (iv), if any  (iv) Gain column (iv) Gain column (iv), if any  (iv) Gain column (iv) Gain column (iv), if any  (iv) Gain column (iv) Gain column (iv), if any  (iv) Gain column (iv) Gain column (iv), if any  (iv) Gain column (iv) Gain column (iv) Gain column (iv), if any  (iv) Gain column (iv	but not less than -0-) or
Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69  (i) FMV as of 12/31/69  (ii) FMV as of 12/31/69  (iii) FMV as of 12/31/69  (iv) Adjusted basis as of 12/31/69  (iv) Adjusted basis over col (i) (k), Excess of col (i) over col (i), if any  (iv) FMV as of 12/31/69  (iv) Excess of col (iv) over col (i), if any  (iv) Gain col (k), if any  (iv) FMV as of 12/31/69  (iv) FMV as of 1	but not less than -0-) or
(i) FMV as of 12/31/69  (j) Adjusted basis as of 12/31/69  a  b  c  d  e  2 Capital gain net income or (net capital loss) { If gain, also enter in Part I, line 7   If (loss), enter -0- in Part I, line 7   2  Net short-term capital gain or (loss) as defined in sections 12/22(5) and (6)   If gain, also enter in Part I, line 8, column (c). See instructions. If (loss), enter -0- in }	but not less than -0-) or
(i) FMV as of 12/31/69  as of 12/31/69  over col (j), if any  c  d  e  2 Capital gain net income or (net capital loss) { If gain, also enter in Part I, line 7   If (loss), enter -0- in Part I, line 7 } 2  Net short-term capital gain or (loss) as defined in sections 12/22(5) and (6)   If gain, also enter in Part I, line 8, column (c). See instructions. If (loss), enter -0- in }	
c d e  Capital gain net income or (net capital loss) { If gain, also enter in Part I, line 7   If (loss), enter -0- in Part I, line 7 } 2  Net short-term capital gain or (loss) as defined in sections 1222(5) and (6)   If gain, also enter in Part I, line 8, column (c). See instructions. If (loss), enter -0- in }	
c d e  2 Capital gain net income or (net capital loss) { If gain, also enter in Part I, line 7   If (loss), enter -0- in Part I, line 7 } 2  3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6)   If gain, also enter in Part I, line 8, column (c). See instructions. If (loss), enter -0- in }	
d e  2 Capital gain net income or (net capital loss) { If gain, also enter in Part I, line 7   If (loss), enter -0- in Part I, line 7 }  3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6)   If gain, also enter in Part I, line 8, column (c). See instructions. If (loss), enter -0- in }	- ;
2 Capital gain net income or (net capital loss) { If gain, also enter in Part I, line 7   If (loss), enter -0- in Part I, line 7 } 2  3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6)   If gain, also enter in Part I, line 8, column (c). See instructions. If (loss), enter -0- in }	
2 Capital gain net income or (net capital loss) { If gain, also enter in Part I, line 7   If (loss), enter -0- in Part I, line 7   2    3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6)   If gain, also enter in Part I, line 8, column (c). See instructions. If (loss), enter -0- in }	
2 Capital gain net income or (net capital loss) { If (loss), enter -0- in Part I, line 7 } 2  3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6) If gain, also enter in Part I, line 8, column (c). See instructions. If (loss), enter -0- in }	- ,
If gain, also enter in Part I, line 8, column (c). See instructions. If (loss), enter -0- in	-
Part I, line 8	
Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income	
If section 4940(d)(2) applies, leave this part blank.  Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? If "Yes," the foundation doesn't qualify under section 4940(e) Do not complete this part.	☐ Yes 🗵 No
1 Enter the appropriate amount in each column for each year, see the instructions before making any en	tries.
(a) (b) (c) Base period years	(d) Distribution ratio col (b) divided by col (c))
2016 368, 500. 12, 969, 577.	0.028413
2015 283,029. 11,592,200.	0.024415
2014 236, 939. 10, 080, 422.	0.023505
2013 280,129. 7,934,155.	0.035307
2012 268,500. 6,507,685.	0.041259
2 Total of line 1, column (d)	0.152899
3 Average distribution ratio for the 5-year base period—divide the total on line 2 by 5 0, or by the number of years the foundation has been in existence if less than 5 years	0.030580
4 Enter the net value of noncharitable-use assets for 2017 from Part X, line 5	1,991,616.
5 Multiply line 4 by line 3	60,904.
6 Enter 1% of net investment income (1% of Part I, line 27b)	
7 Add lines 5 and 6	60,904.
8 Enter qualifying distributions from Part XII, line 4	106,000. ng a 1% tax rate. See the

Part	VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—	see in	strı	uctio	ns)
1a	Exempt operating foundations described in section 4940(d)(2), check here ▶ ☐ and enter "N/A" on line 1.  Date of ruling or determination letter: (attach copy of letter if necessary—see instructions)	:	N/	A	
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check	·			
	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 Part I, line 12, col. (b).				<u> </u>
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-)	<u> </u>			
3	Add lines 1 and 2			0.	
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)				<u> </u>
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0				ļ
6	Credits/Payments:	ŀ	•	-	ļ.
a	2017 estimated tax payments and 2016 overpayment credited to 2017 6a	ľ			[
b	Exempt foreign organizations—tax withheld at source	١.			
c C	Tax paid with application for extension of time to file (Form 8868) . 6c 0.				
d 7	Backup withholding erroneously withheld	- <del></del>			<b></b>
8	Total credits and payments. Add lines 6a through 6d	<u> </u>		0.	-
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	<b></b>			<del> </del>
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			0.	<del> </del>
11	Enter the amount of line 10 to be: Credited to 2018 estimated tax ▶ Refunded ▶ 11			<u> </u>	
Part '	/II-A Statements Regarding Activities				·
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or di		-	Yes	No
	participate or intervene in any political campaign?		1a		×
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See instructions for the definition	.	1b		×
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any mater	nals –			
	published or distributed by the foundation in connection with the activities.	<u>-</u>			
C	Did the foundation file Form 1120-POL for this year?	· [-	1c		×
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:  (1) On the foundation. ▶ \$		,		
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax impose on foundation managers. ► \$	∌d _	13	-	
2	Has the foundation engaged in any activities that have not previously been reported to the IRS? If "Yes," attach a detailed description of the activities	.  -	2		×
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes.				
4			3		×
ча b	Did the foundation have unrelated business gross income of \$1,000 or more during the year?		4a 4b		×
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	<u> </u>	5	-+	×
	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:		!		1
	By language in the governing instrument, or	1			j
	• By state legislation that effectively amends the governing instrument so that no mandatory directions t	hat			
	conflict with the state law remain in the governing instrument?	.  -	6		×
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	×	
8a	Enter the states to which the foundation reports or with which it is registered. See instructions. ▶				1
	If the angular (IV/a)! he has 7 here the f			J	
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General designation of each state as required by General Institute Co. (8) If "Not a state of each state of required by General Institute Co. (8) If "Not a state of each state of the Attorney General Institute Co. (8) If "Not a state of the Attorney General Institute Co. (8) It is a state of the Attorney General Institu				
_	(or designate) of each state as required by General Instruction G? If "No," attach explanation		3b	×	<del></del>
	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3)				
	4942(j)(5) for calendar year 2017 or the tax year beginning in 2017? See the instructions for Part XIV. If "Ye complete Part XIV				
	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing the		9		_ <u>×</u> _
	names and addresses		10		×
			· •		

Par	VII-A Statements Regarding Activities (continued)	- ·- ·-		
	At a control to the state of the formulation of months and included to a control and antitude of the	J-	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		×
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		×
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	×	
	Website address ► N/A			
14	The books are in care of ▶ The Sherman Foundation Telephone no. ▶ (832)		0020	) 
45	Located at ► 7502 Shadyvilla Lane Houston TX ZIP+4 ► 77055 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041—check here			▶ 🛚
15	and enter the amount of tax-exempt interest received or accrued during the year		•	0.
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		×
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the foreign country ▶	1 .	•	
Par	VII-B Statements Regarding Activities for Which Form 4720 May Be Required	<u> </u>	• •	<u> </u>
rai	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.	T -	Yes	No
1a	During the year, did the foundation (either directly or indirectly):	4		7. 1
-	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes No  (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?	» ı	: '	
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes    (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes    (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)?		1	
	(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.)	1,		
b	If any answer is "Yes" to 1a(1)–(6), did <b>any</b> of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions	1b		
	Organizations relying on a current notice regarding disaster assistance, check here	į.	•	, [
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		
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?			
b	Are there any years listed in 2a for which the foundation is <b>not</b> 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 <b>all</b> years listed, answer "No" and attach statement—see instructions.)			
С	If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here.  20 , 20 , 20 , 20	2b		
За	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	ļ	×
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		

Par	VIE: Statements Regarding Activitie	s for V	Which Form	4720	May Be F	Require	e <b>d</b> (contu	nued)			
5a	During the year, did the foundation pay or incur	any an	nount to:				<del> </del>			Yes	No
	(1) Carry on propaganda, or otherwise attempt			on (sec	tion 4945(e	))? .	☐ Yes	X No		l	
	(2) Influence the outcome of any specific publi							_			
	directly or indirectly, any voter registration di					-	☐ Yes	X No			
	(3) Provide a grant to an individual for travel, stu						_	⊠ No	j		
	(4) Provide a grant to an organization other tha										
	section 4945(d)(4)(A)? See instructions						☐ Yes	⊠ No	1		
	(5) Provide for any purpose other than religious										
	purposes, or for the prevention of cruelty to							⊠ No			
b	If any answer is "Yes" to 5a(1)-(5), did any of th							_			
_	Regulations section 53.4945 or in a current notice								5b		
	Organizations relying on a current notice regard	•	•						30		
С	If the answer is "Yes" to question 5a(4), does							-	1		
Č	because it maintained expenditure responsibility								ĺ	,	
							∐ Yes	∐ No			
6a	If "Yes," attach the statement required by Regul Did the foundation, during the year, receive any										
Va	on a personal benefit contract?						_	<b>▽</b>			
	•						_	∑ No			
Ь	Did the foundation, during the year, pay premiur If "Yes" to 6b, file Form 8870.	ns, aire	ectly or indired	ctiy, on	a persona	benetii	contract	<i>.</i>	6b		<u>×</u>
7-	•		<b>.</b>		_14 4						
	At any time during the tax year, was the foundation If "Yes," did the foundation receive any proceed						Yes				
	VIII Information About Officers, Direct								7b		
r ell	and Contractors	turs,	irustees, r	Junua	uon wana	agers,	mignity r	alu El	прюу	ees,	
	List all officers, directors, trustees, and found	tation	managore an	d their	compone	ation S	Soo instru	etions			
	List all Officers, directors, trustees, and found	,	e, and average		mpensation		Contributions				
	(a) Name and address	hou	ırs per week	(lf ı	not paid,	emplo	yee benefit i	plans	(e) Exper	nse acc	
			ed to position	er	nter -0-)	and defi	erred compe	nsation			
	SHERMAN	TRUS			^						_
	2 Shadyvilla Ln HOUSTON TX 77055	m	2.00		0.			0.			0.
	nryn Sherman	Trus			0						^
/502	Shadyvilla Ln Houston TX 77055	ļ	2.00		0.			0.			0.
		1						- 1			
<del></del>		<u> </u>		_							
				<del></del>							
2	Compensation of five highest-paid employed "NONE."	es (otn	er than thos	se incl	uded on li	ne 1—:	see instri	uctions	s). If no	one, e	enter
	NONE.		1		1			<del></del>			
			(b) Title, and a				(d) Contributemployee		(e) Expe	nse acc	ount.
,	<ul> <li>a) Name and address of each employee paid more than \$50,00</li> </ul>	JO	hours per w		(c) Comper	nsation	plans and d	leferred		llowand	
					<u> </u>		Compens	ation			
NONE								1			
			-				<del></del>				
			<b>_</b>								
						ļ		İ			
<b></b>			-					1			
			l								
Total	number of other employees paid over \$50,000.		<u></u>	•	<u> </u>				0		
								_	~~~ 001	DE.	(0017)

and Con	tractors (continued)		
	independent contractors for professional services.	See instructions. If none, enter "NON	E."
(a) Name a	and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
ONE		-	
		<del> </del>	
		-	
		<del> </del>	
	•••••••••••••••••••••••••••••••••••••••	•	
otal number of others r	receiving over \$50,000 for professional services		0
	and as Division Objection in Association		1····
art IX-A Summa	ary of Direct Charitable Activities		
	argest direct charitable activities during the tax year include relevant neficiaries served, conferences convened, research papers produced,		Expenses
1			
2 <u></u>			
	······································		
	· · · · · · · · · · · · · · · · · · ·		
3			
4			~
	······································		
art IX-B Summa	ary of Program-Related Investments (see instru	ictions)	<u> </u>
	ogram-related investments made by the foundation during the tax year		Amount
1			
2			
All other program salated	voetmente. See instructions		
All other program-related in	vestments See instructions		
3			
tal. Add lines 1 through	gh 3		
	<del>,</del>		Form 990-PE (20)

Part	see instructions.)	ign ioi	undations,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
а	Average monthly fair market value of securities	1a	0.
b	Average of monthly cash balances	1b	13,283.
C	Fair market value of all other assets (see instructions)	1c	2,008,662.
d	<b>Total</b> (add lines 1a, b, and c)	1d	2,021,945.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	2,021,945.
4	Cash deemed held for charitable activities. Enter 11/2% of line 3 (for greater amount, see		
	instructions)	4	30,329.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	1,991,616.
6	Minimum investment return. Enter 5% of line 5	6	99,581.
Part		ounda	itions
1	Minimum investment return from Part X, line 6	1	99,581.
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	Add lines 2a and 2b	2c	
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	99,581.
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	99,581.
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII,		
	line 1	7	99,581.
	Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:  Expenses, contributions, gifts, etc —total from Part I, column (d), line 26	1a	106 000
a	Program-related investments—total from Part IX-B	1b	106,000.
ь 2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,	IB	
2	purposes		
3	Amounts set aside for specific charitable projects that satisfy the:	2	
_	Suitability test (prior IRS approval required)		
a		3a	
b	Cash distribution test (attach the required schedule)	3b	105 000
4 5	<b>Qualifying distributions.</b> Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income	4	106,000.
J	Enter 1% of Part I, line 27b. See instructions	5	0
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	0. 106,000.
J		-	
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculatin qualifies for the section 4940(e) reduction of tax in those years.	y wnet	ner the foundation

art	XIII Undistributed Income (see instruction	ons)			
		(a)	(b)	(c)	(d)
1	Distributable amount for 2017 from Part XI,	Corpus	Years prior to 2016	2016	2017
	line 7				99,581.
2	Undistributed income, if any, as of the end of 2017:				4
а	Enter amount for 2016 only			269,079.	ζ-
b	Total for prior years: 20 ,20 ,20				21
3	Excess distributions carryover, if any, to 2017:			r ,	11 11 12 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
а	From 2012 0				The state of the state of
b	From 2013 0.			in the second of the second	First And All Services
C	From 2014			1 13 13 13 14 15 15 15 15 15 15 15 15 15 15 15 15 15	
ď	From 2015 0.			1. 经证据	八 一
е	From 2016				4
f	Total of lines 3a through e	0.		۲	•
4	Qualifying distributions for 2017 from Part XII,		,	Pr se	-
	line 4: ► \$ 106,000.				1
а	Applied to 2016, but not more than line 2a .			106,000.	
b	Applied to undistributed income of prior years				
	(Election required—see instructions)				1. 1.
C	Treated as distributions out of corpus (Election				·
	required—see instructions)				, ' ,
d	Applied to 2017 distributable amount .				
е	Remaining amount distributed out of corpus	<i>:</i> 0.		•	Transfer of the second
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	0.			
b	Prior years' undistributed income. Subtract				}
	line 4b from line 2b		0.		
C	Enter the amount of prior years' undistributed				Į
	income for which a notice of deficiency has				*
	been issued, or on which the section 4942(a)				
_	tax has been previously assessed				
đ	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 Instructions			160 070	
				163,079.	
T	Undistributed income for 2017. Subtract lines 4d and 5 from line 1. This amount must be				
	distributed in 2018				99,581.
7	Amounts treated as distributions out of corpus				99, 301.
′	to satisfy requirements imposed by section				ļ
	170(b)(1)(F) or 4942(g)(3) (Election may be				ļ
	required—see instructions)				i
8	Excess distributions carryover from 2012 not		-		
_	applied on line 5 or line 7 (see instructions).	0.			
9	Excess distributions carryover to 2018.	Ŭ.			
_	Subtract lines 7 and 8 from line 6a	0.			
10	Analysis of line 9:	<u>`</u>	·····		
a					
b	Excess from 2014 0 .				
C	Excess from 2015 0 .				,
d	Excess from 2016 0 .				j
е	Excess from 2017 0 .				

_	4	$\sim$
Page	1	0

Part	YIV Private Operating Founds	tiona (coo inctri	ections and Bort	VII A guartian	0)	Page 10
					9)	N/A
па	If the foundation has received a ruling			private operating		
	foundation, and the ruling is effective for		<del>-</del>		1 10 40 40 ()	(0)
b	Check box to indicate whether the fou		e operating tounda		ection 4942(j)	(3) or 4942(J)(5)
2a	Enter the lesser of the adjusted net income from Part I or the minimum	Tax year		Prior 3 years	T	(e) Total
	investment return from Part X for	(a) 2017	<b>(b)</b> 2016	(c) 2015	(d) 2014	
	each year listed					'
	85% of line 2a					
С	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					
е	Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c .					
3	Complete 3a, b, or c for the alternative test relied upon.					
а	"Assets" alternative test-enter.					
	(1) Value of all assets					
	(2) Value of assets qualifying under					
_	section 4942(j)(3)(B)(i)				i	
b	"Endowment" alternative test—enter 2/3 of minimum investment return shown in					
	Part X, line 6 for each year listed					
C	"Support" alternative test - enter:					
	(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					
	(2) Support from general public	_	· · · · · · · · · · · · · · · · · · ·			
	and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii) .					
	(3) Largest amount of support from an exempt organization					
	(4) Gross investment income		-			
Part	XV Supplementary Information	n (Complete th	is part only if the	he foundation h	nad \$5,000 or mo	ore in assets at
	any time during the year-	-see instruction	ns.)			
1	Information Regarding Foundation	Managers:				
а	List any managers of the foundation of before the close of any tax year (but of					by the foundation
b	List any managers of the foundation	who own 10% or	r more of the stoc	k of a corporatio	n (or an equally lai	rge portion of the
-	ownership of a partnership or other er					J
				-		
2	Information Regarding Contribution Check here ► ☒ if the foundation unsolicited requests for funds. If the fo complete items 2a, b, c, and d. See in	only makes controundation makes	ributions to presel	lected charitable		
а	The name, address, and telephone nu	mber or email add	dress of the persor	n to whom applica	ations should be ad	dressed:
b	The form in which applications should	be submitted and	d information and i	materials they sho	ould include:	
С	Any submission deadlines.	<del>-</del>		· · · · · · · · · · · · · · · · · · ·	<del></del>	
	Any restrictions or limitations as a	orda austras E	, goographical	الماحة ومام موم	عداد المساورة	4.4.4.
a	Any restrictions or limitations on aw factors:	ards, such as by	y geograpnicai ar	eas, charitable fi	eias, kinas of inst	itutions, or other

Part XV Supplementary Information (continued)

3 Grants and Contributions Paid During the Year or Approved for Future Payment

3 Grants and Contributions Paid During the Year or Approved for Future Payment								
Recipient	If recipient is an individual, show any relationship to any foundation manager	status of	Purpose of grant or contribution	Amount				
Name and address (home or business)	or substantial contributor	recipient	Contribution					
a Paid during the year								
American Diabetes Assn								
2451 Crystal Dr, #900		501 (0) 2	G.17.7.7.7.1	5 000				
Arlington VA 22202		501 (C) 3	CHARITY	5,000.				
Clarington Volunteer Fire								
221 Market St		E01/012	CUARTEN	10,000.				
Clarington OH 43915		301(0)3	CHARITY	10,000.				
Gracewood Inc 1617 Elmview								
Houston TX 77080		501 (C) 3	CHARITY	50,000.				
Kincaid School		301 (0) 3		] 30,000.				
201 Kincard School Dr								
Houston TX 77024		501 (C) 3	CHARITY	15,000.				
Texas Kidney Foundation								
45 NE Loop 410, Ste 255								
San Antonio TX 78216		501 (C) 3	CHARITY	5,000.				
Benedictine Sister of Florida								
32952 Michigan Ave		j						
San Antonio FL 33576		501 (C) 3	CHARITY	5,000.				
TXRX Labs								
205 Roberts St				•				
Houston TX 77003		501 (C) 3	CHARITY	-15,000.				
Young Survival Coalition			-					
80 Broad Street, Ste 1700								
New York NY 10004		501 (C) 3	CHARITY	1,000.				
	,							
				1				
				•				
				ļ				
Total		<u>.</u>	▶ 3a	106,000.				
<b>b</b> Approved for future payment								
				1				
				1				
	<u> </u>			<del></del>				
Total	· .		▶ 3	b				

_		oss amounts unless otherwise indicated.		siness income	Excluded by sect	on 512, 513, or 51	4 (2)
4	D		(a) Business code	<b>(b)</b> Amount	(c) Exclusion code	<b>(d)</b> Amount	Related or exemp function income (See instructions)
1	a a	gram service revenue:			<del> </del>		
	b				+		
	c	<del></del>					<del> </del>
	ď				<del>                                     </del>		<del></del>
	е						
	f	<del></del>					
	g	Fees and contracts from government agencies					<del> </del>
2	_	mbership dues and assessments					
3		rest on savings and temporary cash investments					
4		idends and interest from securities					0.
5		rental income or (loss) from real estate:		<del></del>			
		Debt-financed property					
		Not debt-financed property					
6		rental income or (loss) from personal property					
7		er investment income					
8		n or (loss) from sales of assets other than inventory					
9	Net	income or (loss) from special events				<del></del>	
10	Gro	ss profit or (loss) from sales of inventory					
11	Oth	er revenue: a					
	b						
	C						
	d						
	е						ļ
			1 1		1		1
		ototal. Add columns (b), (d), and (e)	Ll	<del></del>	1		0.
13	Tot	al. Add line 12, columns (b), (d), and (e)				13	0.
<b>13</b> (See	<b>Tot</b> wor	<b>al.</b> Add line 12, columns (b), (d), and (e) ksheet in line 13 instructions to verify calculation	s.)			13	
13 See Pai	Tot wor	al. Add line 12, columns (b), (d), and (e) ksheet in line 13 instructions to verify calculation /I-B Relationship of Activities to the A	s.) <b>ccomplishm</b>	ent of Exemp	t Purposes		0.
13 See Pal	<b>Tot</b> wor	al. Add line 12, columns (b), (d), and (e) ksheet in line 13 instructions to verify calculation /I-B Relationship of Activities to the A	s.) <b>ccomplishm</b>	ent of Exemp	t Purposes		0.
13 See Pal	Tot wor t X e No	al. Add line 12, columns (b), (d), and (e) ksheet in line 13 instructions to verify calculation /I-B Relationship of Activities to the A	s.) <b>ccomplishm</b>	ent of Exemp	t Purposes		0.
13 See Pal	Tot wor t X e No	al. Add line 12, columns (b), (d), and (e) ksheet in line 13 instructions to verify calculation /I-B Relationship of Activities to the A	s.) <b>ccomplishm</b>	ent of Exemp	t Purposes		0.
13 See Pal	Tot wor t X e No	al. Add line 12, columns (b), (d), and (e) ksheet in line 13 instructions to verify calculation /I-B Relationship of Activities to the A	s.) <b>ccomplishm</b>	ent of Exemp	t Purposes		0.
13 See Pal	Tot wor t X e No	al. Add line 12, columns (b), (d), and (e) ksheet in line 13 instructions to verify calculation /I-B Relationship of Activities to the A	s.) <b>ccomplishm</b>	ent of Exemp	t Purposes		0.
13 See Pal	Tot wor t X e No	al. Add line 12, columns (b), (d), and (e) ksheet in line 13 instructions to verify calculation /I-B Relationship of Activities to the A	s.) <b>ccomplishm</b>	ent of Exemp	t Purposes		0.
13 See Pal	Tot wor t X e No	al. Add line 12, columns (b), (d), and (e) ksheet in line 13 instructions to verify calculation /I-B Relationship of Activities to the A	s.) <b>ccomplishm</b>	ent of Exemp	t Purposes		0.
13 See Pal	Tot wor t X e No	al. Add line 12, columns (b), (d), and (e) ksheet in line 13 instructions to verify calculation /I-B Relationship of Activities to the A	s.) <b>ccomplishm</b>	ent of Exemp	t Purposes		0.
13 See Pal	Tot wor t X e No	al. Add line 12, columns (b), (d), and (e) ksheet in line 13 instructions to verify calculation /I-B Relationship of Activities to the A	s.) <b>ccomplishm</b>	ent of Exemp	t Purposes		0.
13 See Pal	Tot wor t X e No	al. Add line 12, columns (b), (d), and (e) ksheet in line 13 instructions to verify calculation /I-B Relationship of Activities to the A	s.) <b>ccomplishm</b>	ent of Exemp	t Purposes		0.
13 See Pal	Tot wor t X e No	al. Add line 12, columns (b), (d), and (e) ksheet in line 13 instructions to verify calculation /I-B Relationship of Activities to the A	s.) <b>ccomplishm</b>	ent of Exemp	t Purposes		0.
13 See Pal	Tot wor t X e No	al. Add line 12, columns (b), (d), and (e) ksheet in line 13 instructions to verify calculation /I-B Relationship of Activities to the A	s.) <b>ccomplishm</b>	ent of Exemp	t Purposes		0.
13 See Pal	Tot wor t X e No	al. Add line 12, columns (b), (d), and (e) ksheet in line 13 instructions to verify calculation /I-B Relationship of Activities to the A	s.) <b>ccomplishm</b>	ent of Exemp	t Purposes		0.
13 See Pal	Tot wor t X e No	al. Add line 12, columns (b), (d), and (e) ksheet in line 13 instructions to verify calculation /I-B Relationship of Activities to the A	s.) <b>ccomplishm</b>	ent of Exemp	t Purposes		0.
13 See Pal	Tot wor t X e No	al. Add line 12, columns (b), (d), and (e) ksheet in line 13 instructions to verify calculation /I-B Relationship of Activities to the A	s.) <b>ccomplishm</b>	ent of Exemp	t Purposes		0.
13 See Pal	Tot wor t X e No	al. Add line 12, columns (b), (d), and (e) ksheet in line 13 instructions to verify calculation /I-B Relationship of Activities to the A	s.) <b>ccomplishm</b>	ent of Exemp	t Purposes		0.
13 See Pal	Tot wor t X e No	al. Add line 12, columns (b), (d), and (e) ksheet in line 13 instructions to verify calculation /I-B Relationship of Activities to the A	s.) <b>ccomplishm</b>	ent of Exemp	t Purposes		0.
13 See Pal	Tot wor t X e No	al. Add line 12, columns (b), (d), and (e) ksheet in line 13 instructions to verify calculation /I-B Relationship of Activities to the A	s.) <b>ccomplishm</b>	ent of Exemp	t Purposes		0.
13 See Pal	Tot wor t X e No	al. Add line 12, columns (b), (d), and (e) ksheet in line 13 instructions to verify calculation /I-B Relationship of Activities to the A	s.) <b>ccomplishm</b>	ent of Exemp	t Purposes		0.
13 See Pal	Tot wor t X e No	al. Add line 12, columns (b), (d), and (e) ksheet in line 13 instructions to verify calculation /I-B Relationship of Activities to the A	s.) <b>ccomplishm</b>	ent of Exemp	t Purposes		0.
13 See Pal	Tot wor t X e No	al. Add line 12, columns (b), (d), and (e) ksheet in line 13 instructions to verify calculation /I-B Relationship of Activities to the A	s.) <b>ccomplishm</b>	ent of Exemp	t Purposes		0.
13 See Pal	Tot wor t X e No	al. Add line 12, columns (b), (d), and (e) ksheet in line 13 instructions to verify calculation /I-B Relationship of Activities to the A	s.) <b>ccomplishm</b>	ent of Exemp	t Purposes		0.
13 See Pal	Tot wor t X e No	al. Add line 12, columns (b), (d), and (e) ksheet in line 13 instructions to verify calculation /I-B Relationship of Activities to the A	s.) <b>ccomplishm</b>	ent of Exemp	t Purposes		0.
13 See Pal	Tot wor t X e No	al. Add line 12, columns (b), (d), and (e) ksheet in line 13 instructions to verify calculation /I-B Relationship of Activities to the A	s.) <b>ccomplishm</b>	ent of Exemp	t Purposes		0.

Part XVII

		Organization	ons										
1	in se		directly or indirectly ther than section									Yes	No
а	Trans	sfers from the rep	porting foundation to	o a nonc	haritable exe	empt org	anızatıon	of.					
	(1) C	ash									1a(1)		×
	<b>(2)</b> O	ther assets .	· · · · · ·								1a(2)		×
b	Othe	r transactions:											
	(1) S	ales of assets to	a noncharitable exe	empt org	anızatıon						1b(1)		×
	<b>(2)</b> P	urchases of asse	ets from a noncharit	able exe	mpt organiza	ation .					1b(2)		×
	(3) R	ental of facilities,	equipment, or othe	er assets							1b(3)		×
	(4) R	leimbursement ai	rrangements								1b(4)		×
	(5) L	oans or loan gua	rantees								1b(5)		×
			ervices or members	-	_						1b(6)		×
C		•	quipment, mailıng li								1c		<u></u>
d			of the above is "Ye										
			ther assets, or serv										
			on or sharing arrang										
(a) Line	no (	(b) Amount involved	(c) Name of nonc	haritable ex	xempt organizat	tion	(d) Desc	ription of transf	ers, transa	ctions, and sh	aring arra	angeme	ents
			<u> </u>										
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	desc	ribed in section 5	ectly or indirectly at 501(c) (other than se following schedule	ection 50						_	Yes	<b>X</b>	No
		(a) Name of organ			(b) Type of or	ganızatıon			(c) Descr	ption of relation	onship		
				_						<u></u> -			
				<u> </u>	<del></del>								
Ci	Unde	er penjalties of perjury, l est and complete. Décli	declare that I have examin gration of preparer (other th	ed this retur nan taxpavei	rn, including acco r) is based on all i	ompanying s information (	chedules an of which prei	d statements, an parer has anv kn	id to the be: owledge	st of my knowle	edge and	beliet, it	is true,
Sign	II.	11/11/11	7		110//100	1		,			IRS discu		
Here		MV/			1/45/20		ustee			— See instr	preparer s uctions	∐Yes	DNo □
	Sign	nature of officer or trus		[D	Date	Title		T Det:				_	
Paid		Print/Type preparer	's name	Prepare	er's signature			Date		heck 🔲 if	PTIN		
Prepa	arer		<u> </u>	4~		<del>\ \ \ \</del>	~~~		s	elf-employed			
Use (		Firm's name ▶	NOH-Pa	<u> u</u>	<u> </u>	<u>jar</u> (	= T		Firm's E	IN ►			
		Firm's address ▶							Phone n			<u> </u>	
BAA										I	Form <b>99</b>	V-PF	(2017)

Information Regarding Transfers to and Transactions and Relationships With Noncharitable Exempt

THE SHERMAN FOUNDATION

912136222

1

# Additional information from your Form 990-PF: Return of Private Foundation

Form 990-PF: Return of Private Foundation

Other Expenses

**Continuation Statement** 

Description	Revenue and Expense per Book	Net Investment Income	Adjusted Net Income	Disbursement for charitable purpose
MISCELLANEOUS	50.			
Total	5.0			

Total 50.

## Legal and Professional Fees

2017

Name	Employer Identification No
THE SHERMAN FOUNDATION	91-2136222

### Line 16a - Legal Fees

Name of Provider	Type of Service Provided	Amount Paid Per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
	D-PF, Part I, Line 16a				

### Line 16b - Accounting Fees

Name of Provider	Type of Service Provided	Amount Paid Per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
LEGACY GROUP	ACCOUNTING & T	0.			
Total to Form 990	-PF, Part I, Line 16b	0.			

#### Line 16c - Other Professional Fees

Name of Provider	Type of Service Provided	Amount Paid Per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
Total to Form 990-F	PF, Part I, Line 16c				

Name THE SHERMAN FOUNDATION		yer Identification No		
Line 10a - Investments - US and State Government Obligations:	End o State and Local Obligations Book Value	f Year State and Local Obligations FMV	End of US Government Obligations Book Value	of Year US Government Obligations FMV
Tot to Fm 990-PF, Pt II, Ln 10a				
Line 10b - Investm	ents - Corporate	Stock:	End of Book Value	of Year Fair Market Value
Totals to Form 990-PF, Part II, I	Line 10b		- End o	of Year
Line 10c - Investme	ents - Corporate I	Bonds:	Book Value	Fair Market Value
Totals to Form 990-PF, Part II, I	Line 10c			
Line 12 - Investme	ents - Mortgage I	oans:	End o Book Value	of Year Fair Market Value
Totals to Form 990-PF, Part II, I	Line 12			
Line 13 - Inve	estments - Other:	:	End o Book Value	f Year Fair Market Value
INVESTMENT-BROOKSHIRE	INVESTMENT TRU	JST	73,094,926.	1,894,926.
Totals to Form 990-PF. Part II. I	Line 13 · · ·		73,094,926.	1,894,926.