2949132107911

Return of Private Foundation

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

Department of the Treasury

Form 990-PF

Do not enter social security numbers on this form as it may be made public.

		nue Service GO to www.irs.gov/Form990PF to	r instructions and	the lates	st informat	ion.	to Public Inspection	
			1/2017	, and	ending	6/30/2018		
	me of for				A Employe	r identification numbe	r	
HE	LDHI	M & E FOR SMITHFIELD E-E CEM						
		d street (or P O box number if mail is not delivered to street address)	Roon	n/suite	B 7-1	25-6401678		
		on, NA - PO Box 185 I, state or province, country, and ZIP or foreign postal code		-	B Telephon	e number (see instruction	ons)	
_	tsburgi		15220.01	05		/000\ 00E EC	20	
		Intry name Foreign province/state/county		15230-0185 (888) 805-5689 Foreign postal code C If exemption application is pending, check to				
	, o.g., oo	Toroign province/state/county	i oreign post	ai coac	C if exemp	tion application is pendir	ng, check here	
G	Check	call that apply Initial return Initial return	of a former public	charity	D 1 Foreia	n organizations, check l	here ▶□	
		☐ Final return ☐ Amended re		Crianty	_	_	_	
		Address change Name change				n organizations meeting here and attach computed to the computer of the compu		
Н	Check	type of organization X Section 501(c)(3) exempt pr		ΩÚ	•	foundation status was to		
		on 4947(a)(1) nonexempt charitable trust Other tax		ation	section 5	07(b)(1)(A), check here	▶□	
1		narket value of all assets at J Accounting method						
		f year (from Part II, col (c), Other (specify)	22 +24			ndation is in a 60-month ction 507(b)(1)(B), checl		
		6) \$ 309,893 (Part I, column (d) must be	e on cash basis)				_	
į̈́Ρ	art i		(a) Revenue and				(d) Disbursements	
		amounts in columns (b), (c), and (d) may not necessarily	expenses per	1 ' '	tinvestment	(c) Adjusted net	for chantable	
		equal the amounts in column (a) (see instructions))	books	"	come	income	purposes (cash basis only)	
	1	Contributions, gifts, grants, etc , received (attach schedule)		20 P. O.	从外外的	建设建筑建筑	建筑新规模	
	2	Check ▶ 🗓 if the foundation is not required to attach Sch B	经过程程度的 现代	部變更	THE REPORT	SECTION OF THE PERSON OF THE P	THE WATER	
	3	Interest on savings and temporary cash investments					MAKEN WITH	
	4	Dividends and interest from securities	5,243	``	5,190			
	5a	Gross rents ·						
	b	Net rental income or (loss)	ASSESSED NO.	10.2	Winds 1987	Andrew St.	77,22,012,435,52	
Revenue	6a	Net gain or (loss) from sale of assets not on line 10	8,754					
en	_b	Gross sales price for all assets on line 6a 28,724	2012	SWEET, SE	4748 BAR			
ě	7	Capital gain net income (from Part IV, line 2)	Market Market Property	OH LLY YUSE	8,754	927 1931 75 1945 1635		
œ	8	Net short-term capital gain		2000		·		
	9	Income modifications	A CONTRACTOR OF THE PARTY OF TH	3.42		SELECTION SERVENT DUP OF AN		
	10a	Gross sales less returns and allowances		Carry State	and the state of t	CALEBOARDAN AND AND AND AND AND AND AND AND AND	14.14.14.14.15.14.15.14.15.14.15.14.15.15.14.15.15.15.15.15.15.15.15.15.15.15.15.15.	
	b	Less Cost of goods sold		05.080				
	11	Gross profit or (loss) (attach schedule) Other income (attach schedule)	,		ACCOUNT OF THE PARTY OF		AND STATES OF SALE	
	12	Total. Add lines 1 through 11	13,997	 	13,944	0	NAME OF THE PARTY	
10	13	Compensation of officers, directors, trustees, etc	5,169		3,101		2.068	
Expenses	14	Other employee salaries and wages	0,100	 	0,101		2,000	
e	15	Pension plans, employee benefits						
×	16a	Legal fees (attach schedule)				RECEIVE	5	
ы	b	Accounting fees (attach schedule)				TREGETYE		
ξ	С	Other professional fees (attach schedule)			120	,	Š	
Ta	17	Interest				NOV 1 4 201		
ist	18	Taxes (attach schedule) (see instructions)					- 88	
ᆵ	19	Depreciation (attach schedule) and depletion		ļ		OGDEN, U		
þ	20	Occupancy		ļ		OODLIV, O	<u> </u>	
Operating and Administrativ	21	Travel, conferences, and meetings				7		
an	22	Printing and publications	1 222	 				
ğ	23	Other expenses (attach schedule)	1,668	 				
Ĕ	24	Total operating and administrative expenses.	6 007]	0.404		2.060	
era	25	Add lines 13 through 23	6,837	Designation of the	3,101	0	2,068	
á	25 26	Contributions, gifts, grants paid Total expenses and disbursements. Add lines 24 and 25	12,640	可以数据的			12,640	
_			19,477	Whiteler has	3,101	0	14,708	
	27	Subtract line 26 from line 12	E 400					
	a b	Excess of revenue over expenses and disbursements Net investment income (if negative, enter -0-)	-7,4811					
		······································	183-32 843-240-4 18 5-31-12-24-25-2407-2		10.043	DECEMBER OF STREET	100 CA	

For Paperwork Reduction Act Notice, see instructions.

c Adjusted net income (if negative, enter -0-)

4 Add lines 1, 2, and 3

5 Decreases not included in line 2 (itemize) ▶ INTEREST PAID ON 2013 RETURN

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

Form 990-PF (2017)

290,433

290,215

218

Form 9	90-PF (2017) HELD H	M & E FOR SMITHFIELD E-E C	EM				25-6	401678	Page 3
Part	V Capital Gains and	d Losses for Tax on Investm	ent In	come					
		and(s) of property sold (for example, real esta use, or common stock, 200 shs MLC Co)	ate,		(b) How acquired P—Purchase D—Donation		Date acquired io , day, yr)	(d) Date (mo , da	
1a	BNY MELLON ASSET AL	LOCATION FUND - M					4/16/1993	9/	/14/2017
b	BNY MELLON ASSET AL						12/29/2017	6/	/19/2018
c	BNY MELLON ASSET AL	LOCATION FUND - M					4/16/1993	6/	/19/2018
d									
е	Capital Gains Distribution	<u>s</u>							
	(e) Gross sales price	(f) Depreciation allowed (or allowable)			other basis nse of sale		(h) Gaın ((e) plus (f)		
а	9,260				9,238				22
b	8,639				8,464				175
С	2,361				2,268				93
d									
<u>e</u>									8,464
	(i) F M V as of 12/31/69	nowing gain in column (h) and owned (j) Adjusted basis as of 12/31/69	by the f	(k) Excess over col	s of col (ı)		(I) Gains (Col in col (k), but not lead to Losses (fro	ess than -0-)	
a		as 01 12/3 1/09		over cor	(), ii ariy		200000 (110		22
b									175
с									93
d									
е									8,464
2	Capital gain net income o	r (net canital inss)		ter in Par -0- in Par	· · · · · · · · · · · · · · · · · · ·	2			8,754
3	If gain, also enter in Part I	n or (loss) as defined in sections , line 8, column (c) See instruction			er -0- in \		_		
b	Part I, line 8				J	3	<u></u>		0
Pärt		ler Section 4940(e) for Redu							
If sec	tion 4940(d)(2) applies, lea	ivate foundations subject to the sove this part blank section 4942 tax on the distribute						X Yes	∏ No
If "Ye		ualify under section 4940(e) Do				36 pc		<u>N</u> 103	
1		ount in each column for each year	r, see th	ne instruc	tions before mal	king a	ny entries		
Cal	(a) Base period years endar year (or tax year beginning ir	(b) Adjusted qualifying distributions	s 1	Net value of	(c) f nonchantable-use a	ssets		(d) button ratio uided by col	(c))
	2016	13	3,754	,	288	3,022		0	047753
	2015		0			0		0	000000
	2014		0			0		0	000000
	2013		0			0		0	000000
	2012		0			0		0	000000
2	Total of line 1, column (d)	1					2	0	047753
3	Average distribution ratio	for the 5-year base period—divide				Ī			
	the number of years the fo	oundation has been in existence i	f less th	nan 5 yea	ars	ŀ	3	0	009551
4	Enter the net value of non	charitable-use assets for 2017 fro	om Part	X, line 5		}	4		- "
5	Multiply line 4 by line 3					}	5		
6	Enter 1% of net investmen	nt income (1% of Part I, line 27b)				}	6		0
7	Add lines 5 and 6						7		0
8	Enter qualifying distributio	ns from Part XII, line 4					8		0
	If line 8 is equal to or great Part VI instructions	ter than line 7, check the box in F	Part VI,	line 1b, a	and complete tha	t part	using a 1% ta	x rate Se	e the

Exerting personal foundations described in section 4940(a), 4940(b), 4940(c), or 4948—see instructions)	Form 99	00-PF (2017) HELD H M & E FOR SMITHFIELD E-E CEM 25	-6401678	Page 4
1a Exempt operation foundations described in section 4940(st)/2, check here	Part	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see instruc	tions)	
b Domestic Foundations that meet the section 4940(p) requirements in Part V, check here ▶ ☐ and enter 1% of Part I, line 27b c. All other domestic foundations enter 2% of line 27b c. All other domestic foundations enter 2% of line 27b c. All other domestic foundations enter 2% of line 27b c. All other domestic foundations enter 2% of line 27b c. Part I, line 12, cot (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 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-) 5. Tax based on investment income. Subtract line 4 from line 3 if zero or less, enter -0- 6. Tax based on investment income. Subtract line 4 from line 3 if zero or less, enter -0- 7. Creditis/Payments a 2017 estimated tax payments and 2016 overpayment credited to 2017 6. Exempt foreign organizations—Lax withheld at source c. Tax paid with application for extension of time to file (Form 8888) 6. E. de	1a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1		
c. All other domestic foundations enter 2% of line 27b. Exempt foreign organizations, enter 4% of 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 4 Subtitible (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-) 5 Tax based on investment income. Subtract line 4 from line 3 if zero or less, enter -0- 6 Credis/Fayments a 2017 estimated tax payments and 2016 overpayment credited to 2017 8 Exempt foreign organizations—tax withheld at source 1 Tax paid with application for extension of time to file (Form 8868) 8 Enter any penalty for underpayment of estimated tax. Check here for the folial of the set of the	b		21	7
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Enter the amount of line 10 to be Credited to 2018 estimated tax ▶ Refunded ▶ 11 0 Particulary Statements Regarding Activities 1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities c Did the foundation file Form 1120-POL for this year? d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year (1) On the foundation ▶ \$ (2) On foundation managers ▶ \$ Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers ▶ \$ 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 3 Has the foundation have unrelated business gross income of \$1,000 or more during the year? 4a Did the foundation have unrelated business gross income of \$1,000 or more during the year? If "Yes," has it filled a tax return on Form 990-T for this year? Was there a liquidation, termination, dissolution, or substantial contraction during the year? If "Yes," attach the statement required by General Instruction T Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either By state legislation that effectively amends 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? By language in the governing instrument, or By state legislation that effectively amends the governing instrument so that no mandatory direc	-			
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conflict with the state law remain in the governing instrument? 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 8a Enter the states to which the foundation reports or with which it is registered. See instructions. PA 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. 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. 10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses. 10 X				
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(or designate) of each state as required by General Instruction G? If "No," attach explanation 9	L			
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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 10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses 10 X	0		25554 Pr. 43	E SELECTION .
"Yes," complete Part XIV 10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses 10 X	3			8 1.556F
10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses 10 X			0	x 0
names and addresses 10 X	10	·		+^-
	, 5			l x

Form 9	90-PF (2017) HELD H M & E FOR SMITHFIELD E-E CEM	25-6401678	í	Page 5
Par	tiVII-A@ Statements Regarding Activities (continued)			_
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the	MA	Yes	No
	the meaning of section 512(b)(13)? If "Yes," attach schedule. See instructions	11		x
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified	d		
	person had advisory privileges? If "Yes," attach statement. See instructions	12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	<u> </u>
	Website address ► N/A			- -
14	The books are in care of ▶ BNY MELLON, N A Telephone no ▶	(888) 805-568	9	
	Located at ► P O BOX 185, PITTSBURGH, PA ZIP+4 ►	15230-0185	. 	
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041—check here	1		▶ [
		15 N/A	, <u> </u>	1
16	At any time during calendar year 2017, did the foundation have an interest in or a signature or other auth	, ,	Yes	
	over a bank, securities, or other financial account in a foreign country?	16	(197) J. W	X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the foreign country.			
(Dar	WILE Statements Regarding Activities for Which Form 4720 May Be Required	1.3047	KIZI W	Por Military
Samera	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.	新作業	Yes	No
1a	During the year, did the foundation (either directly or indirectly)	27 10 - 10 27 10 - 11 27 10 - 11	19,100	K (10)
10		⊠ No		7
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a			
		X No		2
		X No		7.0
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	□ No		
	(5) Transfer any income or assets to a disqualified person (or make any of either available for			
		X No		
	(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)	X No 2		
b	If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in			
	Regulations section 53 4941(d)-3 or in a current notice regarding disaster assistance? See instructions	1b		Х
	Organizations relying on a current notice regarding disaster assistance, check here		312	
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that	at 🚉		
	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	e 7		
	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			
		X No .		
	If "Yes," list the years 20, 20, 20			
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a			
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(235	10/2
	all years listed, answer "No" and attach statement—see instructions)	2b	N/A	Date Se
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years her	e e	10	
20	▶ 20, 20, 20, 20 Did the foundation hold more than a 2% direct or indirect interest in any business enterprise			
3a	at any time during the year? Yes	X No		
h			改物	
b	If "Yes," did it have excess business holdings in 2017 as a result of (1) any purchase by the foundation of disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by			
	Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lap	180278947.6		
	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	N/A	**************************************
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		X
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its	10000	32.22	
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2017?	4b	CLOIMBELEIDE.	X

	90-PF (2017)	HELD H M & E FC	R SMITHFIE	LD E-E	СЕМ					25-64	401678	Р	age 6
Par	tiVII:B	Statements Regarding	Activities f	or Wh	ich Form 4	720 Ma	y Be Req	uired	(continue	ed)	12.000		
5a	(1) Carry (e year, did the foundation p on propaganda, or otherwi	se attempt to	ınfluen	ice legislation		,		Yes	X No			
		ce the outcome of any spe or indirectly, any voter re			(see section	4955),	or to carry	on,	☐ Yes	X No			
	_	e a grant to an individual fo	-		her similar pi	urposes	s?		Yes	X No	1.000		
		e a grant to an organizatio			•	-		ed in					
		1 4945(d)(4)(A)? See instru			,,,	9			Yes Yes	X No			
		e for any purpose other the ses, or for the prevention o				literary	, or educat	ional	Yes	X No			
b		wer is "Yes" to 5a(1)–(5), ons section 53 4945 or in a								bed in	5b	N/A	
С	Organizations relying on a current notice regarding disaster If the answer is "Yes" to question 5a(4), does the foundation because it maintained expenditure responsibility for the groups.							ax	☐ Yes	▶ □ No			
6a	If "Yes," attach the statement required by Regulations section 53 4945–5(d) Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums								_				
b	Did the for	undation, during the year, and the file Form 8870	pay premium:	s, direc	tly or indirect	ly, on a	personal b	enefit o	contract?		6b	202	X
	At any time	during the tax year, was the did the foundation receive a							Yes	X No	7b	N/A	
	VIII In	formation About Offic									ploye	es,	
1	• • • • • • • • • • • • • • • • • • • •	nd Contractors	s and farmal	-4:		سائم مالم لم		-4: C		-4			
	LIST all Off	ficers, directors, trustees	s, and round	(b) Titl	e, and average	(c) Co	mpensation	(d)	Contribution	s to	(e) Expe	nse acr	count
		(a) Name and address			irs per week ted to position		not paid, iter -0-)		oyee benefit ferred compe			allowand	
	Mellon, N.A. Box 185 Pitts	sburgh, PA 15230-0185			RUSTEE SEE ATTACHED 5,169 NON		NONE			NONE			
						<u>-</u>						•	
2	Compens "NONE."	ation of five highest-paid	d employees	(other	than those	include	ed on line	1—see	instructi	ons). If	none,	enter	
	(a) Name and	address of each employee paid in	more than \$50,00	0	(b) Title, and a hours per v devoted to p	week	(c) Compe	nsation	(d) Contribi employee plans and c compens	benefit deferred	(e) Expe	nse acc allowanc	
NONE							-						
Total	number of o	other employees paid over	\$50,000								NONE		
										F	orm 990)-PF (2017)

		-64016	378	Page 7
₽P	Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid and Contractors (continued)	Emp	loyees,	
3	Five highest-paid independent contractors for professional services. See instructions. If none, enter	r "NOI	 ЛЕ."	
	(a) Name and address of each person paid more than \$50,000 (b) Type of service		(c) Comper	nsation
NO	NE			
Tot	al number of others receiving over \$50,000 for professional services	► N	ONE	
# P	Summary of Direct Charitable Activities			
	st the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of ganizations and other beneficiaries served, conferences convened, research papers produced, etc.		Expens	ies
1	NONE			
2				
3				
4				
* P	art IX-B Summary of Program-Related Investments (see instructions)			
	escribe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2		Amour	nt
1	NONE			
2				
A	other program-related investments. See instructions	\dashv		
3	NONE			
Tot	al. Add lines 1 through 3		ONE	
		Forr	n 990-P!	F (2017)

	90-PF (2017) HELD H M & E FOR SMITHFIELD E-E CEM	25-6401678	Page 8
Part	X Minimum Investment Return (All domestic foundations must complete this part. Foreig	n foundations,	
	see instructions)		
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	305,66
b	Average of monthly cash balances	1b	6,096
С	Fair market value of all other assets (see instructions)	1c	
d	Total (add lines 1a, b, and c)	1d	311,757
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	311,757
4	Cash deemed held for charitable activities Enter 1½ % of line 3 (for greater amount, see		
_	instructions)	4	4,676
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	307,081
6 Part	Minimum investment return. Enter 5% of line 5	6	15,354
LECTL	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundat and certain foreign organizations, check here ► □ and do not complete this part)	ions	
1	Minimum investment return from Part X, line 6	111	15 25
2a	Tax on investment income for 2017 from Part VI, line 5	 _ _ _ _ _ _ _ _ 	15,354
2a b	Income tax for 2017 (This does not include the tax from Part VI)	-	
C	Add lines 2a and 2b	2c	217
3	Distributable amount before adjustments Subtract line 2c from line 1	3	15,137
4	Recoveries of amounts treated as qualifying distributions	4	13, 137
5	Add lines 3 and 4	5	15,137
6	Deduction from distributable amount (see instructions)	6	10,101
7	Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII,		
-	line 1	7	15,137
			10,10,
Part	XII. Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
а	Expenses, contributions, gifts, etc —total from Part I, column (d), line 26	1a	14,708
b	Program-related investments—total from Part IX-B	1b NONE	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
	purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the		
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	14,708
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income		
	Enter 1% of Part I, line 27b See instructions	5	
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	14,708
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating w	hether the found	ation
	qualifies for the section 4940(e) reduction of tax in those years		

Form **990-PF** (2017)

orm 9	90-PF (2017) HELD H M & E FC	OR SMITHFIELD E	E-E CEM		25-6	3401678	Page 9
Pärt	XIII Undistributed Income (see instructions)					
1	Distributable amount for 2017 from		(a) Corpus	(b) Years prior to 2016	(c) 2016	(d) 201	
	line 7			MANAGEMENT AND	Several Company		15,137
2	Undistributed income, if any, as of the	end of 2017					
а	Enter amount for 2016 only				O		
b		20, 20		THE ANTIGOREM TO A PURE SCHOOL TO			
3	Excess distributions carryover, if a	any, to 2017				21.24	
a	From 2012						
b	From 2013 From 2014	` 2 455					d proper
c d	From 2015	<u>`3,155</u> 8,055					
u	From 2016	6,055					3 34
f	Total of lines 3a through e		11,210				
4	Qualifying distributions for 2017 fr	om Part XII				MATERIAL PROPERTY.	
•	line 4 ▶ \$ 14,708	5 a			97 March 1985	18 PM 20	
а	Applied to 2016, but not more than	n line 2a			1411)(A 1811-1411-1411-1411-1411-1411-1411-1411		
b	Applied to undistributed income of						artis (U)
	(Election required—see instruction	ns)					
C	Treated as distributions out of corp	pus (Election					
	required—see instructions)	•					LV
d	Applied to 2017 distributable amount			23400.000		Silliant a same months and	* 14,708
e	Remaining amount distributed out					algoria lighter	
5	Excess distributions carryover app		429			TAMES INCOME.	429
	(If an amount appears in column (
6	amount must be shown in column						
0	Enter the net total of each colur indicated below:	iii as	44.5 T (44.59)				
а	Corpus Add lines 3t, 4c, and 4c 8	Subtract line 5	10,781				
b	Prior years' undistributed income		PASSINE TESTIN	LUNES AND THE STANSON		2502 DGE	35./545
-	line 4b from line 2b	oustrust		0			
С	Enter the amount of prior years' ui	ndistributed	area any astron		STATE OF THE STATE		
	income for which a notice of defici						
	been issued, or on which the section	on 4942(a)					
	tax has been previously assessed				CHARLES STATE		
d	Subtract line 6c from line 6b Taxa	ble					
	amount—see instructions			MATERIAL CONTRACTOR SAME CASSING	artharialmane.		A PARTY OF
е	Undistributed income for 2016 Su						
	4a from line 2a Taxable amount—	-see					
f	Instructions Undistributed income for 2017 Su	ibtract lines		221134131425-77420		oagurtuig	w. Astronom
•	4d and 5 from line 1. This amount						
	distributed in 2018	111031 10					0
7	Amounts treated as distributions of	out of corpus	- Draw day & whole some on the equipment	Tili William Andrew I		300 346 Thomas	
	to satisfy requirements imposed b		•				
	170(b)(1)(F) or 4942(g)(3) (Election	*					
	required—see instructions)	·					
8	Excess distributions carryover from	n 2012 not					
	applied on line 5 or line 7 (see ins	tructions)	<u> </u>				# PARKAY!
9	Excess distributions carryover		'				
	Subtract lines 7 and 8 from line 6a	1	10,781				
10	Analysis of line 9						
a	Excess from 2013						
b	Excess from 2014	2,726					
Ç	Excess from 2015	8,055				amangga, biologija	
d e	Excess from 2016 Excess from 2017		nag agailpas atomonoscut politika At				
-	LAGOSS HOTH ZUTT		/www.new-warthersteinschier	o zarezna byłokucznika	TO THE PERSON OF	Form 990-	DF (2017)
						. 5,,,, 555	(===11)

Form 9	90-PF (2017) HELD H M & E FOR S	MITHFIELD E-E	CEM		25-640)1678 Page	10
Part	XIV Private Operating Foundation	ons (see instru	ctions and Part V	/II-A, question 9)		N/A	
1a	If the foundation has received a ruling						$\overline{}$
	foundation, and the ruling is effective for		•				
b	Check box to indicate whether the foundation		-		4942(J)(3) or 4942()(5)
2a	Enter the lesser of the adjusted net	Tax year		Prior 3 years			
	income from Part I or the minimum	(a) 2017	(b) 2016	(c) 2015	(d) 2014	(e) Total	
	investment return from Part X for each year listed			1			0
b	85% of line 2a			<u> </u>		,	0
	Qualifying distributions from Part XII,		-				<u> </u>
·	line 4 for each year listed						0
d	Amounts included in line 2c not used directly		-	 			
u	for active conduct of exempt activities						0
_	, , , , , , , , , , , , , , , , , , ,			 			
е	Qualifying distributions made directly						
	for active conduct of exempt activities Subtract line 2d from line 2c	`					0
•		<u> </u>		<u> </u>			
3	Complete 3a, b, or c for the	1					
_	alternative test relied upon						
а	"Assets" alternative test—enter						_
	(1) Value of all assets	ļ	· · · · · · · · · · · · · · · · · · ·	\			0
	(2) Value of assets qualifying under section 4942(j)(3)(B)(i)			1.	•		0
þ	"Endowment" alternative test—enter 2/3						
	of minimum investment return shown in Part X, line 6 for each year listed						0
С	"Support" alternative test—enter						
Ū	(1) Total support other than gross			\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \			
	investment income (interest,						
	dividends, rents, payments on		i				
	securities loans (section 512(a)(5)), or revalties)						0
	512(a)(5)), or royalties) (2) Support from general public						
	and 5 or∙more exempt			1			
	organizations as provided in séction 4942(j)(3)(B)(iii)						0
	(3) Largest amount of support from				-		
	an exempt organization						0
	(4) Gross investment income			-			0
Part		(Complete th	is part only if th	ne foundation ha	d \$5 000 or mor	e in assets a	
	any time during the year—		•	ic roundation na	40,000 01 11101	0 111 000010 0	
1	Information Regarding Foundation N		,	 			
a	List any managers of the foundation wi		ted more than 2%	of the total contribut	ions received by t	he foundation	
-	before the close of any tax year (but or						
NONE		.,,					
	List any managers of the foundation when	20 OWD 10% or m	nore of the stock of	f a corporation (or a	n equally large por	tion of the	
_	ownership of a partnership or other ent			· ·			
NONE		, 0		a /o or ground minor			
2	Information Regarding Contribution	Grant Gift Los	an Scholarshin e	etc Programs:		 	
_	Check here ► 🗵 if the foundation or				sach bne and does	not accent	
	unsolicited requests for funds. If the fou	undation makes	aifts, grants, etc. to	o individuals or orga	inizations under of	her	
	conditions, complete items 2a, b, c, and						
а	The name, address, and telephone nur			n to whom applicati	one chould be add	resed	
a	The hathe, address, and telephone hat	inder of email ad	diess of the person	ii to whom applicati	ons should be add	103300	
NOT A	APPLICABLE						
b	The form in which applications should be	be submitted and	information and n	naterials they should	d include		
NOT	APPLICABLE						
	Any submission deadlines						
	APPLICABLE						
d	Any restrictions or limitations on award	s, such as by ge	ographical areas, o	charitable fields, kin	ds of institutions, c	or other	
	factors						
NOT A	APPLICABLE						

Form 990-PF (2017)

HELD H M & E FOR SMITHFIELD E-E CEM

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Page 11

3 Grants and Contributions Paid During	the Year or Approve	d for Fut	ure Payment	1
Recipient	If recipient is an individual, show any relationship to	Foundation	Purpose of grant or	A
Name and address (home or business)	any foundation manager or substantial contributor	status of recipient	contribution	Amount
a Paid during the year	Or Substantial Contributor			
See Attached Statement				
				i
				}
				}
				ľ
,				
				· •
			,	
		i		
Total			▶ 3a	12,640
b Approved for future payment				
NONE				ļ
		i		
Total			D 3h	NONE
· V(a)			📂 3D	INCINE

	990-PF (2017) HELD H M & E FOR SMITHFIE	LD E-E CEM			25-64	01678 Page 12
Pā	t XVI-A Analysis of Income-Producing Ac	tivities				
	er gross amounts unless otherwise indicated	T	siness income	Excluded by sect	ion 512, 513, or 514	(6)
_		(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	(e) Related or exempt function income (See instructions)
1	Program service revenue					(000
	ab	-	· · · · · · · · · · · · · · · · · · ·			
	•					
	d					
	e					
	f					
	g Fees and contracts from government agencies					
2	Membership dues and assessments					
3	Interest on savings and temporary cash investments					
4	Dividends and interest from securities		H . F 3	14	4,885	
5	Net rental income or (loss) from real estate	er strum con i c	H JOH SHOWING A	T	At Marining of the	**************************************
	a Debt-financed propertyb 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	8,754	
9	Net income or (loss) from special events		-		5,7.0.	
10	Gross profit or (loss) from sales of inventory					
11	Other revenue a					
	b					
	c					
	d					
12	e	P 4 2 2 2 3 1 1		15 6 6 7	12 620	0
	Subtotal Add columns (b), (d), and (e)		<u> </u>	- × × ×	13,639	13,639
	Total Add line 12 columns (h) (d) and (e)					
	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation	ns)			13	13,039
(See	worksheet in line 13 instructions to verify calculation		ent of Exempt	Purposes	13	13,639
(Sec	worksheet in line 13 instructions to verify calculation TXVI-B Relationship of Activities to the A	ccomplishme	•			
(Sec	worksheet in line 13 instructions to verify calculation TXVI-B Relationship of Activities to the A	ccomplishment of the complishing of the complishing of the complex	olumn (e) of Part	XVI-A contributed	d importantly to the	
(Sec	e worksheet in line 13 instructions to verify calculation TXVI-B Relationship of Activities to the A e No. Explain below how each activity for which income	ccomplishment of the complishing of the complishing of the complex	olumn (e) of Part	XVI-A contributed	d importantly to the	
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(Sec	e worksheet in line 13 instructions to verify calculation **TXVI-B: Relationship of Activities to the Activities to the Activity for which income accomplishment of the foundation's exempt pure	ccomplishment of the complishing of the complishing of the complete of the com	olumn (e) of Part	XVI-A contributed	d importantly to the	
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25-6401678

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Part	XVII	Information Exempt Org		sfers to and Transa	ctions	and Re	lationship	s With	Nonchar	itable		
1	ın se	he organization d	lirectly or indirectly e	engage in any of the fo	-		_		escribed		Yes	No
а	Tran (1) C		porting foundation to	a noncharitable exem	pt orgar	nization o	of			1a(1)		X
	(2) C	Other assets								1a(2)		Χ_
b		r transactions										¢
			a noncharitable exe							1b(1)		X
				able exempt organizati	on					1b(2)		X
		Remai or racilities, Reimbursement ai	equipment, or other	rassets						1b(3)		$\hat{\mathbf{x}}$
		oans or loan gua	-							1b(5)	1	X
				up or fundraising solici	tations					1b(6)		
С				sts, other assets, or pa		oyees				1c		X
d				nplete the following sche								
				given by the reporting fou ent, show in column (d) the								
(a) Line	no .	(b) Amount involved	(c) Name of nonc	hantable exempt organizatio	n	(d) Des	cnption of trans	fers, trans	actions, and s	hanng arr	angeme	nts
	_		NOT APPLICABLE									
	_									_		
	-+											
												
		-										
		·										
	_			***								
	-+						··-···					
		· <u> </u>										
	desc	ribed in section 5	01(c) (other than se	ated with, or related to ction 501(c)(3)) or in s			x-exempt or	ganızatıd	ons [] Yes	X N	0
b	II TE	(a) Name of organ	following schedule	(b) Type of orga	anization			(c) Desc	ription of relat	ionshin		
		(a) Name of organ		(b) Type of orge				(0) 5000	nphon or rolat	ionionip		
											_	
-	,											
۵.				eturn, including accompanying sche yer) is based on all information of v				knowledge a	nd belief, it is tru	e		
Sign	1	•	on or preparer (once their taxpa		k	•	•			RS discuss		
Here	Sign	nature of officer or trus	No.	10/2/2018 Date	VICI	E PRESI	DENT		— See instri		X Yes	No
	Joigi	Print/Type preparer's		Preparer's signature	inie		Date			PTIN	·	
Paid		Shawn P Hanlo		1000	!CP		10/2/20		heck X if elf-employed	1	5022	
•	Preparer Firm's name						1 1012120	Firm's El		0030 008324	<u> </u>	
Use O	nly			ET, PITTSBURGH, PA	15219			Phone no		355-60	000	
										Form 99		(2017)

HELD H M & E FOR SMITHFIELD I				25-640		1 of 1
Continuation of Part XV, Lin	e 3a (990-PF) -	Gran	ts and Cont	tributions Paic	During t	he Year
Recipient(s) paid during the year						
Name SMITHFIELD EAST END CEMETERY, Street	ATTN SHERRI REU	THER				
1599 SOUTH DALLAS AVE						
City	-	State	Zip Code	Foreign Coun	try	
PITTSBURGH	·	PA	15217			
Relationship NONE	Foundation Status PC					
Purpose of grant/contribution GENERAL OPERATING PURPOSES	Ĭbc				Amount	12,640
Name					<u> </u>	12,040
Street	·					
City		State	Zip Code	Foreign Coun	try	
Relationship	Foundation Status			-		
Purpose of grant/contribution	- 				Amount	
Name						
Street						
City		State	Zip Code	Foreign Coun	try	
Relationship	Foundation Status					
Purpose of grant/contribution	1				Amount	
Name						
Street						
City		State	Zip Code	Foreign Coun	try	
Relationship	Foundation Status	,				
Purpose of grant/contribution	<u> </u>				Amount	
Name						
Street		-				
City		State	Zip Code	Foreign Coun	try	
Relationship	Foundation Status					
Purpose of grant/contribution				<u> </u>	Amount	
Name			_	· · · · · · · · · · · · · · · · · · ·	<u> </u>	
Street	<u> </u>					
City		State	Zip Code	Foreign Coun	try	
Relationship	Foundation Status		<u> </u>			
Purpose of grant/contribution	<u>I</u>				Amount	

Attachment to Form 990PF Part VIII, Column (b) Title and Average Hours Per Week Devoted To Position

The compensation reported in column (b) paid to BNY Mellon, N.A. as Corporate Trustee is calculated based on market value and current fee schedule. It is not determined on an hourly basis. Corporate Trustee services include administrative responsibilities, grant requirements, recordkeeping, investment management, income collection, statement and accounting services, and regulatory reporting.

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Part I, Line 6 (990-PF) - Gain/Loss from Sale of Assets Other Than Inventory

								Totals	Gross	25	Cost or Other Basis, Expenses,	isis, Expenses,	Net	Sain,
	Amount								Sales	Š.	Depreciation and Adjustments	d Adjustments	Or L	or Loss '
Long Term CG Distributions	8,464						ú	Capital Gains/Losses		28,724		19,970		8.754
Short Term CG Distributions	0							Other sales	•	0		0		0
				Check "X" if										1.
		Check "X"		Purchaser		_					Expense of Sale			
		to include		e sı	Acquisition	Date	Date	Gross Sales	Cost or	Valuation	and Cost of			Net Gain
Description	CUSIP #	in Part IV	Purchaser	Business	Method	Acquired	Sold	Price	Other Basis	Melhod	Improvements	Depreciation	Adjustments	or Loss
BNY MELLON ASSET ALLOCA	05569M657	×				4/16/1993	9/14/2017	9,260	9.238				0	22
SNY MELLON ASSET ALLOCA	05569M657	×				12/29/2017	1	8,639	8,464				0	175
BNY MELLON ASSET ALLOCA	05569M657	×				4/16/1993	6/19/2018	2,361	2.268				0	66

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Part I, Line 23 (990-PF) - Other Expenses

	1,668	0	0	0
	Revenue and			Disbursements
	Expenses	Net Investment	Adjusted Net	for Charitable
Description	_per Books	Income	Income	Purposes
1 ESTIMATED EXCISE PAYMENTS	1,668	0		

Part II, Line 13 (990-PF) - Investments - Other

			0	279,462	299,140
		Basis of	Book Value	Book Value	FMV
	Asset Description	Valuation	Beg of Year	End of Year	End of Year
7				0	
7	BNY MELLON ASSET ALLOCATION FUND		0	279,462	299,140

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Part IV (990-PF) - Capital Gains and Losses for Tax on Investment Income

	0 290	Gains Minus	Excess FMV Over		0	175	93
	_	Excess of FMV	Over	Adjusted Basis			
		Adjusted Basis	as of	12/31/69	0		3
	0	> M: T	as of	12/31/69	0	0	0
	290			Gain or Loss	22	175	93
	19,970	Cost or Other	Basis Plus	Expense of Sale	9,238	8,464	2,268
	0			Adjustments	0	0	0
	0		Depreciation	Allowed			
	20,260		Gross	Sales Price	9,260	8,639	2,361
			Date	Sold	9/14/2017	6/19/2018	6/19/2018
			Date	Acquired	4/16/1993	12/29/2017	4/16/1993
[]		Acquisition	Method			
8,464	,			CUSIP #	05569M657	05569M657	05569M657
Long Term CG Distributions	Short Term CG Distributions			Description of Property Sold	1 BNY MELLON ASSET ALLOCA	2 BNY MELLON ASSET ALLOCA	3 BNY MELLON ASSET ALLOCA

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Part VIII, Line 1 (990-PF) - Compensation of Officers, Directors, Trustees and Foundation Managers

									5,169	0	•
Name	Check "X" if Business	Street	Cily	State	Zip Code	Foreign Country	Title	Avg Hrs Per Week	Compensation	Benefits	Expense
BNY Mellon, N.A.		P O Box 185	Piltsburgh	PA 1	5230-0185		TRUSTEE	SEE ATTAC	5,1691	NONE	NONE

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Part VI, Line 6a (990-PF) - Estimated Tax Payments

		Date	Amount
1	Credit from prior year return	1	67
2	First quarter estimated tax payment	2	_
	Second quarter estimated tax payment	3	
4	Third quarter estimated tax payment	4	
	Fourth quarter estimated tax payment	5	
6	Other payments	6	0
_7	Total	7	67