Department of the Treasury

EXTENDED TO MAY 15, 2019 Return of Private Foundation

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

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

▶ Go to www.irs.goy/Form990PF for instructions and the latest information.

180b

internal Reve		3.go (// O/// 330/ / 10/ ///3			Open to Public Inspection
For calend	lar year 2017 or tax year beginning JUI	1, 2017	, and ending	JUN 30, 2018	
Name of f	oundation			A Employer identificatio	n number
3.7700		SD	EA	20 001701	•
	RBACH FAMILY FOUNDATION d street (or P O box number if mail is not delivered to stree		Room/suite	32-0017913	<u> </u>
	REDSTONE LANE	. addicas)	THE OTHER SERVICE	B Telephone number 443-831-73	172
	wn, state or province, country, and ZIP or foreign i	nostal code		C if exemption application is	
	DER, CO 80305	postar oodo		in exemption application is	pending, check here
	all that apply: Initial return	Initial return of a fe	ormer public charity	D 1. Foreign organization	s, check here
	Final return	Amended return			
	Address change	Name change		Foreign organizations m check here and attach c	eeting the 85% test, omputation
H Check ty	ype of organization: X Section 501(c)(3) e			E If private foundation sta	atus was terminated
	tion 4947(a)(1) nonexempt charitable trust	Other taxable private found	ation /	under section 507(b)(1)(A), check here 🕨 📖
	ket value of all assets at end of year J Account	-	Accrual	F If the foundation is in a	
	rt II, col. (c), line 16)	ther (specify)		under section 507(b)(1)(B), check here $ ightharpoonup$ L
▶\$ Port i					(d) o
Part I	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a))	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes
	Contributions, gifts, grants, etc., received	769,049.		N/A	(cash basis only)
1	Check if the foundation is not required to attach Sch. B	709,049.	eren ne speren.	M/A	
l a tr	nterest on savings and temporary	61.	61.		STATEMENT 1
	Dividends and interest from securities	5,561.	5,561.		STATEMENT 2
5a G	Gross rents				
b N	Net rental income or (loss)				
<u>o</u> 6a №	Net gain or (loss) from sale of assets not on line 10	36.			
E ba	Gross sales price for all ssets on line 6a 42.				OF WED
۳	Capital gain net income (from Part IV, line 2)		36.		CEIVED
	Net short-term capital gain			189	ြို့
l G	ncome modifications Gross sales less returns		***	1 8 J4	N 3 0 2019
-	ess Cost of goods sold	MAN W MAN LAWAY & A ARP			12
I	Gross profit or (loss)			OG	DEN IIT
	Other income			Grand March Control	
12 T	Total Add lines 1 through 11	774,707.	5,658.		
6 43 c	Compensation of officers, directors, trustees, etc	0.	0.		0.
الكه	Other employee salaries and wages				
	Pension plans, employee benefits				
S 16a L	egal tees	1 000	^		1 000
Color	•	1,820.	0.		1,820.
	Other professional fees nterest				
33 3-1	axes				
Sing D	Depreciation and depletion				
	Occupancy				
₹ 21 T	ravel, conferences, and meetings				
E 22 P	Printing and publications				
23 0	Other expenses				
<u>-</u> 1	otal operating and administrative				
ම e	expenses. Add lines 13 through 23	1,820.	0.		1,820.
- 25 U	Contributions, gifts, grants paid	91,000.			91,000.
	otal expenses and disbursements	92 920	0.		92 920
	odd lines 24 and 25 Subtract line 26 from line 12:	92,820.	U.	u	92,820.
	xcess of revenue over expenses and disbursements	681,887.			
	let investment income (if negative, enter -0-)	301,007.	5,658.		
1	diusted net income (if pegative, enter -0-)		5,5500	N/A	

Fo	rm 99	00-PF (2017) AUERBACH FAMILY FOUNDAT		32-	0017911 Page 2
F	art	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year	End of	<u> </u>
<u>:</u>	γ	,	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing	43,021.	191,909.	191,909.
		Savings and temporary cash investments			
	3	Accounts receivable			
		Less: allowance for doubtful accounts ▶			
	4	Pledges receivable ►		· · · · · · · · · · · · · · · · · · ·	
		Less; allowance for doubtful accounts ▶			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons			
	7	Other notes and loans receivable			
		Less: allowance for doubtful accounts ▶			
ş	8	Inventories for sale or use			
ssets	9	Prepaid expenses and deferred charges			<u> </u>
V	10a	Investments - U.S. and state government obligations			
	b	Investments - corporate stock STMT 4	512.	533,511.	633,362.
	C	Investments - corporate bonds			
	11	Investments - land, buildings, and equipment basis			
		Less accumulated depreciation			
	12	Investments - mortgage loans			
	13	Investments - other			
	14	Land, buildings, and equipment basis ▶			
		Less accumulated depreciation			
	15	Other assets (describe ►)		-	
	16	Total assets (to be completed by all filers - see the			
	ļ	instructions. Also, see page 1, item I)	43,533.	725,420.	825,271.
	17	Accounts payable and accrued expenses			
		Grants payable			
Ø	19	Deferred revenue			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons	·		
apı	21	Mortgages and other notes payable			
_	22	Other liabilities (describe)			
	23	Total liabilities (add lines 17 through 22)	0.	0.	
		Foundations that follow SFAS 117, check here			
		and complete lines 24 through 26, and lines 30 and 31			
Ses	24	Unrestricted			ļ
ă	25	Temporarily restricted			
Ва	26	Permanently restricted			Ì
ā		Foundations that do not follow SFAS 117, check here			
Ť		and complete lines 27 through 31.			j
S	27	Capital stock, trust principal, or current funds	0.	0.	1
set	28	Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.	1
As	29	Retained earnings, accumulated income, endowment, or other funds	43,533.	725,420.	1
Net Assets or Fund Balances	30	Total net assets or fund balances	43,533.	725,420.	}
_					1
	31	Total liabilities and net assets/fund balances	43,533.	725,420.	
P	art	Analysis of Changes in Net Assets or Fund Ba			
_				1 1	
1		net assets or fund balances at beginning of year - Part II, column (a), line 3	U		45 E55
_		t agree with end-of-year figure reported on prior year's return)		11	43,533.
		amount from Part I, line 27a		2	681,887.
		increases not included in line 2 (itemize)		3	725 420
		ines 1, 2, and 3		4	725,420.
		eases not included in line 2 (itemize)		5	725 420
<u>D</u>	rotal	net assets or fund balances at end of year (line 4 minus line 5) - Part II, col	minu (n)* inie 20		725,420. Form 990-PF (2017)
					FULLE 330-FF (201/)

Part IV Capital Gains	and Losses		vestmen						2 001	7711 Tugot
(a) l _e ist and describe 2-story brick wa		perty sold (for examon stock, 200 shs		ate,	(b)	How a - Puro) - Don	cquired chase lation		acquired day, yr.)	(d) Date sold (mo., day, yr.)
1a CHARLES SCHWAB	#9420 -	BROWN F	ORMAN	CORP			D	11/1	2/01	03/01/18
<u>b</u>				-	-					
<u></u>					├		ŀ			
<u>d</u>					├					
(e) Gross sales price		ition allowed owable)		st or other basis expense of sale					Gain or (loss s (f) minus	
a 42.				,	6.			•		36.
b										
<u>c</u>			<u></u>							· · · · · · · · · · · · · · · · · · ·
<u>d</u>	:									
Complete only for assets shown	ng gain in column	(h) and owned by t	the foundation	п п 12/31/69.				N Gaine ((Col. (h) gaın	minue
		ted basis		cess of col. (1)				l. (k), but	not less that	n -0-) or
(i) FMV as of 12/31/69		2/31/69		col. (j), if any				Losses	(from col. (h))
a										36.
b										
C										
<u>d</u>										
<u>e</u>		······································								
2 Capital gain net income or (net ca	pital loss)	If gain, also enter If (loss), enter -0-			}	2				36.
3 Net short-term capital gain or (los		ections 1222(5) an	d (6):							
If gain, also enter in Part I, line 8,	column (c).				 	•			N/A	
If (loss), enter -0- in Part I, line 8 Part V Qualification U	nder Section	n 4940(e) for	Reduced	Tax on Net	Inv	estn	nent ind	come	N/A	
(For optional use by domestic private										·
	ĺ					,				
If section 4940(d)(2) applies, leave the	ns part blank.									
Was the foundation liable for the sect	tion 4942 tax on tl	he distributable am	ount of any ye	ear in the base per	rod?					Yes X No
If "Yes," the foundation doesn't qualif										
1 Enter the appropriate amount in 6	each column for ea		istructions be	tore making any e						(d)
Base period years Calendar year (or tax year beginnii	agun) Adiu	(b) sted qualifying dist	ributions	Net value of no	(c) nchar		·use assets	.	Distrib	oution ratio ided by col. (c))
2016	19 111) / 12/2		6,764.			3	5,863		(col. (b) ulv	1.303962
2015			5,955.	•			8,854			1.376631
2014			0,195.				5,604			1.569872
2013			8,156.			1	9,430).		2.478435
2012		8	4,101.			2	3,279).	····	3.612741
2 Total of line 1, column (d)								2		10.341641
3 Average distribution ratio for the !	5-year base period	l - divide the total c	n line 2 by 5.6	O, or by the numb	er of y	years				
the foundation has been in exister	nce if less than 5 y	ears ears						3		2.068328
4 Enter the net value of noncharitab	le-use assets for 2	2017 from Part X. I	ıne 5					4		257,816.
5 Multiply line 4 by line 3								5	_	533,248.
6 Enter 1% of net investment incom	ne (1% of Part I, III	ne 27b)						6		57.
7 Add lines 5 and 6								7		533,305.
8 Enter qualifying distributions from	n Part XII. line 4							8		92,820.
If line 8 is equal to or greater than See the Part VI instructions.	·	box ın Part VI, line	1b, and comp	lete that part usin	g a 19	% tax	rate.			<u> </u>

	990-PF (2017) AUERBACH FAMILY FOUNDATION, INC. rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4)17911 ee instru		Page 4 1 s)
1a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1.				<u> </u>
	Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)			_	
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here and enter 1%	1		1	13.
	of Part I, line 27b				
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-)	2			0.
3	Add lines 1 and 2	3		_ 1	13.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)	4		_	0.
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5		1	<u>13.</u>
6	Credits/Payments:				
a	2017 estimated tax payments and 2016 overpayment credited to 2017 6a 332.				1
b	Exempt foreign organizations - tax withheld at source 6b 0.				
C	Tax paid with application for extension of time to file (Form 8868) 6c 0.				
	Backup withholding erroneously withheld 0.				
	Total credits and payments. Add lines 6a through 6d	7		3	<u>32.</u>
	Enter any penalty for underpayment of estimated tax. Check here If Form 2220 is attached	8			0.
	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9			1.0
	Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10		2	<u> 19.</u>
	Enter the amount of line 10 to be: Credited to 2018 estimated tax rt VII-A Statements Regarding Activities 219. Refunded	11			0.
				Yes	No
ıa	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene any political campaign?	11	1a	163	X
	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the defini	tion	1b		X
U	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or	11011	10		<u> </u>
	distributed by the foundation in connection with the activities.				
c	Did the foundation file Form 1120-POL for this year?		1c		
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:				
	(1) On the foundation. \triangleright \$ 0. (2) On foundation managers. \triangleright \$ 0.			•	
	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation				
	managers. ► \$ 0.				
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?		2		X
	If "Yes," attach a detailed description of the activities.				
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or				
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes		3		X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?		4a		<u>X</u>
b	If "Yes," has it filed a tax return on Form 990-T for this year?	N/A	4b		
	Was there a liquidation, termination, dissolution, or substantial contraction during the year?		5		<u>X</u>
	If "Yes," attach the statement required by General Instruction T				ĺ
	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:				
	By language in the governing instrument, or				
	By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state	law			
	remain in the governing instrument?		6	X	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV		7	Х	 -
R2	Enter the states to which the foundation reports or with which it is registered. See instructions.				
JE	KY		-		1
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		8b	X	
	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for caler	dar			
	year 2017 or the tax year beginning in 2017? See the instructions for Part XIV. If "Yes," complete Part XIV		9		X
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses S!	<u> </u>		х	
			Form 990	-PF (2017)

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X

3b

42

N/A

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,

b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that

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

Form 4720, to determine if the foundation had excess business holdings in 2017.)

had not been removed from jeopardy before the first day of the tax year beginning in 2017?

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

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Part VIII Information About Officers, Directors, Trustees, Foundation Paid Employees, and Contractors (continued)	on Managers, Highly	
3 Five highest-paid independent contractors for professional services. If none, enter "l	NONE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
T. 1. 1. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2.		
Total number of others receiving over \$50,000 for professional services Part IX-A Summary of Direct Charitable Activities		<u>▶</u> 0
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistica	dusformation such as the	
number of organizations and other beneficiaries served, conferences convened, research papers product	ed, etc.	Expenses
1 N/A		
2		-
		
3		
	· · · · · · · · · · · · · · · · · · ·	
Part IX-B Summary of Program-Related Investments	·	
Describe the two largest program-related investments made by the foundation during the tax year on line	es 1 and 2.	Amount
N/A		
		
2		
		
All other program-related investments. See instructions.		
An other program-related investments. See instructions.		
·		
Fotal. Add lines 1 through 3	>	0.
		Form 990-PF (2017)

P	art X Minimum Investment Return (All domestic foundations must	complete this part Foreign four	ndations, see	e instructions)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, et	c., purposes:		. ,
а	Average monthly fair market value of securities		1a	195,774.
b	Average of monthly cash balances		1b	195,774. 65,968.
C	Fair market value of all other assets		1c	
d	Total (add lines 1a, b, and c)		1d	261,742.
е	Reduction claimed for blockage or other factors reported on lines 1a and			
	1c (attach detailed explanation)	0.		
2	Acquisition indebtedness applicable to line 1 assets		2	0.
3	Subtract line 2 from line 1d		3	261,742.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see	instructions)	4	3,926.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Par	· ·	5	257,816.
6	Minimum investment return Enter 5% of line 5	·	6	12,891.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j) foreign organizations, check here ▶ ☐ and do not complete this part.)	(5) private operating foundations an	id certain	
1	Minimum investment return from Part X, line 6		1	12,891.
2a	Tax on investment income for 2017 from Part VI, line 5	113.		22,0521
b	Income tax for 2017. (This does not include the tax from Part VI.)			
C	Add lines 2a and 2b	_	2c	113.
3	Distributable amount before adjustments. Subtract line 2c from line 1		3	12,778.
4	Recoveries of amounts treated as qualifying distributions		4	0.
5	Add lines 3 and 4		5	12,778.
6	Deduction from distributable amount (see instructions)		6	0.
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII,	line 1	7	12,778.
	art XII Qualifying Distributions (see instructions)		• !	11,770.
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purpose	s:		
а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26		1a	92,820. 0.
b	Program-related investments - total from Part IX-B		1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, e	tc., 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 Pa	art XIII, line 4	4	92,820.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment	ent		
	income. Enter 1% of Part I, line 27b	ļ	5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	ĺ	6	92,820.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when	calculating whether the foundation of	ualifies for the	section

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4940(e) reduction of tax in those years.

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2016	(c) 2016	(d) 2017
Distributable amount for 2017 from Part XI.	Corpus	rears prior to 2010	2010	2017
line 7				12,778.
2 Undistributed income, if any, as of the end of 2017				12,770.
a Enter amount for 2016 only			0.	
b Total for prior years:				
b rotal for prior yours.		0.		
3 Excess distributions carryover, if any, to 2017:			·	
a From 2012 82,939.				
b From 2013 47, 186.				
c From 2014 38,917.				
d From 2015 25,014.				
e From 2016 44,974.				
f Total of lines 3a through e	239,030.			1
4 Qualifying distributions for 2017 from	2027000			
Part XII, line 4: ►\$ 92,820.				'
a Applied to 2016, but not more than line 2a			0.	
b Applied to undistributed income of prior				
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus				
(Election required - see instructions)	0.			
d Applied to 2017 distributable amount	· **			12,778.
e Remaining amount distributed out of corpus	80,042.			
5 Excess distributions carryover applied to 2017	0.			0.
(If an amount appears in column (d), the same amount must be shown in column (a))				,
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	319,072.			
b Prior years' undistributed income. Subtract				
line 4b from line 2b		0.		
c Enter the amount of prior years'				
undistributed income for which a notice of				
deficiency has been issued, or on which the section 4942(a) tax has been previously				
assessed		0.		
d Subtract line 6c from line 6b. Taxable				
amount - see instructions		0.		
e Undistributed income for 2016. Subtract line				
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2017. Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2018				0.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3) (Election				,
may be required - see instructions)	0.			
8 Excess distributions carryover from 2012				
not applied on line 5 or line 7	82,939.			
9 Excess distributions carryover to 2018.				
Subtract lines 7 and 8 from line 6a	236,133.			
10 Analysis of line 9:				
a Excess from 2013 47, 186.				ĺ
b Excess from 2014 38,917.				'
c Excess from 2015 25,014.				
d Excess from 2016 44,974.				'
e Excess from 2017 80,042.				

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Part XIV Private Operating F	oundations (see in	structions and Part VI	I-A, question 9)	N/A	
1 a If the foundation has received a ruling of	or determination letter tha	t it is a private operating	`		
foundation, and the ruling is effective fo	or 2017, enter the date of	the ruling	▶ ∟		
b Check box to indicate whether the found		ng foundation described i		4942(j)(3) or	4942(j)(5)
2 a 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					
b 85% of line 2a					
c Qualifying distributions from Part XII,					
line 4 for each year listed					
d Amounts included in line 2c not	,				
used directly for active conduct of			/	1	
exempt activities					
e 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; a "Assets" alternative test - enter:					
(1) Value of all assets		:			
(2) Value of assets qualifying			/		
under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test - enter					
2/3 of minimum investment return shown in Part X, line 6 for each year					
listed					
c "Support" alternative test - enter:					
(1) Total support other than gross					
investment income (interest,		/		1	
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		Y			
section 4942(j)(3)(B)(iii)	/				
(3) Largest amount of support from					
an exempt organization					
(4) Gross investment income					
Part XV Supplementary Info	rmation (Comple	te this part only	if the foundation	had \$5,000 or r	nore in assets
at any time during t	he year-see instr	ructions.)			
1 Information Regarding Foundation	n Managers:				
a List any managers of the foundation wh			ributions received by the	foundation before the o	close of any tax
year (but only if they have contributed n	nore than \$5,000). (See s	ection 507(d)(2).)			
NONE					
b List any managers of the foundation wh	o own 10% or more of th	e stock of a corporation (or an equally large portion	on of the ownership of a	partnership or
other entity) of which the foundation has	s a 10% or greater interes	st.			
NONE					
2 Information Regarding Contributi	on, Grant, Gift, Loan,	Scholarship, etc., Pre	ograms:	· · · · · · · · · · · · · · · · · · ·	
Check here X if the foundation o		• • • •	-	not accept unsolicited re	quests for funds. If
the foundation makes gifts, grants, etc.,	to individuals or organiza	ations under other conditi	ons, complete items 2a,	b, c, and d.	
a The name, address, and telephone num	ber or email address of th	e person to whom applic	ations should be addres	sed:	
b The form in which applications should b	e submitted and informat	tion and materials they sh	ould include:		
		-			
c Any submission deadlines:					
			<u></u>		
d Any restrictions or limitations on awards	s, such as by geographica	al areas, charitable fields,	kinds of institutions, or o	other factors:	

Recipient If recipient is an individual, show any relationship to any foundation manager or substantial contributor Purpose of contributor	f grant or pution Amount
Name and address (home or business) Show any relationship to any foundation manager or substantial contributor Show any relationship to any foundation manager or status of contributor recipient	f grant or pution Amount
or substantial contributor recipient	
a Paid during the year	
ACTORS THEATRE NONE GENERAL FUNI	
316 W MAIN STREET	
LOUISVILLE, KY 40202	3,000.
BIRTHRIGHT ISRAEL FOUNDATION NONE GENERAL FUNI PO BOX 21615 NEW YORK, NY 10087	300.
BOULDER JEWISH COMMUNITY CENTER NONE GENERAL FUNI 6007 OREG AVE BOULDER, CO 80303	4,000.
CORPORATE ACCOUNTABILITY NONE GENERAL FUNI INTERNATIONAL 10 MILK STREET, SUITE 610 BOSTON, MA 02108	1,000.
DANA FARBER CANCER INSTITUTE NONE GENERAL FUNI 450 BROOKLINE AVE BOSTON MA 02215	1.000.
Total SEE CONTINUATION SHEET(S)	► 3a 91,000.
b Approved for future payment	
NONE	
	D 0
Total	► 3b 0. Form 990-PF (2017)

Supplementary Information Grants and Contributions Paid During the Year (Continuation) Recipient If recipient is an individual. Foundation Purpose of grant or show any relationship to Amount status of contribution any foundation manager Name and address (home or business) recipient or substantial contributor DAVID HOROWITZ FREEDOM CENTER NONE GENERAL FUND 14724 VENTURA BLVD, S-820 SHERMAN OAKS CA 91403 500. ENVIRONMENTAL WORKING GROUP NONE GENERAL FUND 1436 U ST. NW #100 WASHINGTON DC 20009 500. FRIENDS OF THE ISRAEL DEFENSE FORCES NONE GENERAL FUND PO BOX 4224 NEW YORK, NY 10163 500. FUND FOR THE ARTS NONE GENERAL FUND 623 WEST MAIN STREET #200 LOUISVILLE, KY 40202 500. GUTHY-JACKSON CHARITABLE FOUNDATION NONE GENERAL FUND PO BOX 15185 BEVERLY HILLS, CA 90210 500. HONEST REPORTING NONE GENERAL FUND 165 EAST 56TH STREET NEW YORK, NY 10024 300. JEWISH COMMUNITY OF LOUISVILLE NONE GENERAL FUND 3600 DUTCHMANS LN LOUISVILLE, KY 40205 50,000. JEWISH FEDERATION OF HOWARD CO. NONE GENERAL FUND 10630 LITTLE PATUXENT PKWY S STE 400 COLUMBIA, MD 21044 2,000. JEWISH WOMEN'S ARCHIVES NONE GENERAL FUND 1 HARVARD ST #200 BROOKLINE, MA 02445 300. KENTUCKY MUSEUM OF ARTS AND CRAFT NONE GENERAL FUND 715 WEST MAIN STREET LOUISVILLE KY 40202 500. Total from continuation sheets 700.

Part XV Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Foundation Purpose of grant or show any relationship to **Amount** contribution status of any foundation manager Name and address (home or business) recipient or substantial contributor LOUISVILLE PUBLIC MEDIA NONE GENERAL FUND 619 S. FOURTH STREET LOUISVILLE, KY 40202 1,000. LOUISVILLE VISUAL ARTS ASSOCIATION NONE GENERAL FUND 3005 RIVER ROAD LOUISVILLE, KY 40207 1,000. GENERAL FUND MIDDLE EAST FORUM NONE 1920 CHESTNUT ST. PHILADELPHIA PA 19103 400. NATIONAL PARKS CONSERVATION NONE GENERAL FUND ASSOCIATION 777 6TH STREET, NW, SUITE 700 WASHINGTON, DC 20001-3723 400. NATIONAL VACCINE INFORMATION CENTER NONE GENERAL FUND 21525 RIDGETOP CIRCLE SUITE 100 1,000. STERLING, VA 20166 OLMSTED PARKS NONE GENERAL FUND 1299 TREVILIAN WAY LOUISVILLE, KY 40213 6,000. ORGANIC CONSUMERS ASSOCIATION NONE GENERAL FUND 6771 S SILVER HILL DRIVE FINLAND MN 55603 1,000. PLANNED PARENTHOOD NONE GENERAL FUND 123 WILLIAM ST. 10TH FLOOR 500. NEW YORK, NY 10038 RIVER FIELDS NONE GENERAL FUND 643 W MAIN ST LOUISVILLE, KY 40202 1,000. NONE SIMON WIESENTHAL CENTER GENERAL FUND 1399 S ROXBURY DR LOS ANGELES, CA 90035 500. Total from continuation sheets

Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Foundation Purpose of grant or show any relationship to Amount status of contribution any foundation manager Name and address (home or business) recipient or substantial contributor SPEED ART MUSEUM NONE GENERAL FUND 2035 SOUTH THRID STREET LOUISVILLE, KY 40208 1,000. THE HEALING PLACE NONE GENERAL FUND 1020 W MARKET ST. LOUISVILLE, KY 40213 1,000. THE TEMPLE NONE GENERAL FUND 5101 US-42 LOUISVILLE KY 40241 10,000. UNITED SERVICE ORGANIZATIONS INC NONE GENERAL FUND PO BOX 96860 300. WASHINGTON DC 20077 UNITED WITH ISRAEL NONE GENERAL FUND MEUCHADIM IM YISRAEL NACHAL MAOR 8/19 400. BET SHEMESH, ISRAEL 99623 UNIVERSITY OF LOUISVILLE FOUNDATION NONE GENERAL FUND 2301 S 3RD STREET LOUISVILLE, KY 40208 300. WASHINGTON AND LEE UNIVERSITY NONE GENERAL FUND 204 W WASHINGTON ST. LEXINGTON, VA 24450 300. Total from continuation sheets

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated.	Unrelated business income		Exclu	ided by section 512, 513, or 514	(e)	
	Business Amount Sio		Exclu- sion code	(d) Amount	Related or exempt function income	
1 Program service revenue:	Code		Code		14.701.01.11001.10	
a b		<u></u>	 			
			 			
c			-			
d						
e	-					
f						
g Fees and contracts from government agencies		•				
2 Membership dues and assessments						
3 Interest on savings and temporary cash			١			
investments			14	61.		
4 Dividends and interest from securities			14	5,561.		
5 Net rental income or (loss) from real estate:					1	
a Debt-financed property						
b Not debt-financed property						
6 Net rental income or (loss) from personal						
property						
7 Other investment income						
8 Gain or (loss) from sales of assets other						
than inventory			18	36.		
9 Net income or (loss) from special events						
10 Gross profit or (loss) from sales of inventory						
11 Other revenue:						
a		<u> </u>				
b						
c						
d						
e						
12 Subtotal. Add columns (b), (d), and (e)		0.		5,658.	0. 5,658.	
13 Total Add line 12, columns (b), (d), and (e)				13	<u>5,658.</u>	
(See worksheet in line 13 instructions to verify calculations.)						
Part XVI-B Relationship of Activities to	the Acc	omplishment of Ex	emp	t Purposes	-	
· · · · · · · · · · · · · · · · · · ·				-		
Line No. Explain below how each activity for which incom			contrib	outed importantly to the accon	iplishment of	
the foundation's exempt purposes (other than b	y providing fu	nds for such purposes).				
					,	
		•				
	•					
		•				
· · · · · · · · · · · · · · · · · · ·						

Part XVII Information Regarding Transfers to and Transactions and Relationships With Noncharitable

		Évembr Organ	izations						I 1	
1	Did the or	ganization directly or indir	rectly engage in any c	of the following	ng with any other organization	on described in sect	ion 501(c)		Yes	No
	(other tha	n section 501(c)(3) organ	nizations) or in section	n 527, relating	g to political organizations?					
а	Transfers	from the reporting founda	ation to a noncharitab	le exempt or	ganization of:					,
	(1) Cash							1a(1)		_X_
	(2) Other	assets						1a(2)		_X_
b	Other tran	sactions;					•			:
	(1) Sales	of assets to a noncharital	ble exempt organizati	on				1b(1)		X
	. ,	nases of assets from a noi	• •					1b(2)		X
	• •	il of facilities, equipment,						1b(3)		X
	• •	bursement arrangements						1b(4)		X
	-	s or loan guarantees						1b(5)		X
	• •	rmance of services or me	mhershin or fundrais	ing solicitatio	nns			1b(6)		X
r	` '	f facilities, equipment, ma	•	_				1c		X
	•		•		edule. Column (b) should alv	ways show the fair r	narket value of the goods, o		ets.	
•					ed less than fair market valu				,	
		i) the value of the goods,								
	<u>`</u>	(b) Amount involved			e exempt organization	(d) Description	of transfers, transactions, and s	haring an	rangeme	nts
(<i>)</i>			(-)	N/A	, <u> </u>	 				
		···	-	14/21			***************************************			
										
										
					·····					
	 -									—
										
					<u></u>					
					II					
						 				
			-							
		·			•					
			-							
	_									
	-+									
			<u> </u>							
					or more tax-exempt organi	izations described		٦	[٦
		501(c) (other than section		ction 527?		•		Yes	LX.	No
b	If "Yes," co	omplete the following sche			(1) T(T	(-) D			
		(a) Name of org	janization		(b) Type of organization		(c) Description of relationsh	ıp		
		N/A								
										
	and he				ng accompanying schedules and in taxpayer) is based on all inform		May	the IRS	iscuss t	hıs
Sig	n 🛌			parti (other tha	n taxpayar, is sassed on an inform	Name of the property	show	n with the	e prepare ? Se <u>e ins</u>	er etr
He	re 💽	Peny a	enedada fo	ulle	X 1/18/19	PRESI	DENT X	∐ Yes		No
	Sigr	ature of officer or frustee			Date	Title				
		Print/Type preparer's na	ame	Preparer's s		Date	Check If PTIN			
				A	S. miles	1/10/19	self- employed			
Pa	id	AMY S MILE	S	Comes	1. rrus	1110/19		217		
	eparer	Firm's name ► LOU	IS T. ROT	н & СО	., PLLC		Firm's EIN ► 61-04	802	36	
Us	e Only									
		Firm's address ▶ 21	00 GARDIN	ER LAN	E					
			UISVILLE,				Phone no. (502)4	<u> 5</u> 9-	<u>8</u> 10	0_
								m 99 0		
									,	•

Schedule B

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

Department of the Treasury Internal Revenue Service

Schedule of Contributors

Attach to Form 990, Form 990-EZ, or Form 990-PF.
 Go to www.irs.gov/Form990 for the latest information.

OMB No 1545-0047

2017

Employer identification number Name of the organization AUERBACH FAMILY FOUNDATION, INC. 32-0017911 Organization type (check one): Filers of: Section: Form 990 or 990-EZ ___ 501(c)() (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization Form 990-PF 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See instructions **General Rule** X For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions **Special Rules** For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000, or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1 Complete Parts I and II J For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III ☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990 EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

LHA For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2017)

Employer identification number

AUDIODICII I MILDI I CUMDALIONA INC	AUERBACH	FAMILY	FOUNDATION,	INC.
-------------------------------------	----------	--------	-------------	------

	ACH PARIET FOUNDATION, INC.		. 001/711
Part I	'Contributors (see instructions) Use duplicate copies of Part I if additional and the copies of Part I is a copies of Part I if additional and the copies of Part I is a copies of	tional space is needed	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	PENNY FRIEDBERG 3006 REDSTONE LANE BOULDER, CO 80305	\$5,000. 	Person X Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	JONATHAN KEITH AUERBACH 1416 WILLOW AVE, #2A LOUISVILLE, KY 40204	\$5,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3	S. PEARSON AUERBACH, M.D. 1400 WILLOW AVE., #405 LOUISVILLE, KY 40204	\$66,370.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4	ROBERT C. AUERBACH 1113 W HWY 42 LAGRANGE, KY 40031	\$5,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5	S. PEARSON AUERBACH, M.D. 1400 WILLOW AVE., #405 LOUISVILLE, KY 40204	\$ <u></u> \$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
6	ESTATE OF S P AUERBACH 1400 WILLOW AVE., #405 LOUISVILLE, KY 40204	\$505,206.	Person Payroll Noncash X (Complete Part II for noncash contributions)

Employer identification number

AUERBACH	FAMILY	FOUNDATION,	INC.

	TOTAL TIME TO CANDITAL CAN / MANUAL CAN / MA		001/711
Part I	`Contributors (see instructions) Use duplicate copies of Part I if additio	nal space is needed	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7	ESTATE OF S P AUERBACH 1400 WILLOW AVE., #405 LOUISVILLE, KY 40204	\$\$ <u>154,674.</u>	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)

Employer identification number

AUERBACH FAMILY FOUNDATION, INC.

<u>UERB.</u>	ACH FAMILY FOUNDATION, INC.	32-	-0017911
Part II	`Noncash Property (see instructions) Use duplicate copies of Part	II if additional space is needed	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
<u>5</u>	1,887 SHARES OF BROWN FORMAN CORP	_	
		\ \\$100,431.	09/01/17
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
5	860 SHARES OF BROWN FORMAN CORP	_	,
		sss	11/17/17
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
6	140 SHARES OF BERKSHIRE HATHAWAY	_	
_		\$\$	05/31/18
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
6	125 SHARES OF CHEVRON CORP	_	
			05/31/18
(a) No. rom Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
6	700 SHARES OF COMCAST CORP		
		\$\$	05/31/18
(a) No. rom Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
6	225 SHARES OF EXXON MOBIL CORP		71/2
		 s19,868.	05/31/18
453 11-01	1.17		00, 990-EZ, or 990-PF) (20

Employer identification number

AUERBACH FAMILY FOUNDATION, INC.

	PACH FAMILY FOUNDATION, INC.		-0017911
Part II	Noncash Property (see instructions) Use duplicate copies of Part II if a	additional space is needed	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
6	925 SHARES OF GENERAL ELECTRIC CO	i	
		\$ <u>14,816.</u>	05/31/18
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
6	100 SHARES OF HOME DEPOT INC		
		\$\$	05/31/18
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
6	150 SHARES OF JOHNSON & JOHNSON		
		\$	05/31/18
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
6	334 SHARES OF JOHNSON CONTROLS INTER F		
		\$	_05/31/18
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
6	400 SHARES OF JPMORGAN CHASE & CO		-
		\$\$	05/31/18
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
6	125 SHARES OF KRAFT HEINZ CO		
"		\$ 9,785.	05/31/18
2452 11-0:			90 990-E7 or 990-PE\(()

Employer identification number

AUERBACH FAMILY FOUNDATION, INC.

art II	`Noncash Property (see instructions) Use duplicate copies of Pa	rt II if additional space is needed	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
	575 SHARES OF MATTEL INC		
6		s8,904.	05/31/18
(a) No. rom art l	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
6	300 SHARES OF MICROSOFT CORP		
		\$\$	05/31/18
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
6	375 SHARES OF MONDELEZ INTL		
		\$17,043.	05/31/18
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
6	175 SHARES OF OMNICOM GROUP INC	_	date
		\$13,373.	05/31/18
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
6	83 SHARES OF PENTAIR PLC		
		 \$5,924.	05/31/18
(a) No. rom Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
6	600 SHARES OF PFIZER INC	_	
		 \$22,410.	05/31/18
153 11-01	.17	Schedule B (Form 9	90, 990-EZ, or 990-PF) (

Employer identification number

AUERBACH FAMILY FOUNDATION, INC.

(a) No. tom Description of noncash property given See instructions. (b) Temperate (c) FMV (or estimate) (see instructions.) (d) Date received (e) FMV (or estimate) (see instructions.) (d) Date received (e) FMV (or estimate) (see instructions.) (d) Date received (e) FMV (or estimate) (see instructions.) (f) FM		ACH FAMILY FOUNDATION, INC.		2-0017911
No. from Part 1 Second Part 2 Second Property given Second Property giv	Part II	Noncash Property (see instructions) Use duplicate copies of Part II i	f additional space is needed	-
\$ 21,506. 05/31/3 (a) No. The part Description of noncash property given (b) SHARES OF TE CONNECTIVITY LTD (a) No. The part (b) Description of noncash property given (c) FMV (or estimate) (See instructions.) (d) Date receive (e) FMV (or estimate) (See instructions.) (a) No. The part (b) Date receive (c) FMV (or estimate) (See instructions.) (d) Date receive (e) FMV (or estimate) (See instructions.) (d) Date receive (e) FMV (or estimate) (See instructions.) (d) Date receive (e) FMV (or estimate) (See instructions.) (d) Date receive (e) FMV (or estimate) (See instructions.) (f) FMV (or estimate) (See instructions.) (a) No. The part (b) Description of noncash property given (c) FMV (or estimate) (See instructions.) (d) Date receive (e) FMV (or estimate) (See instructions.) (d) Date receive (e) FMV (or estimate) (See instructions.) (d) Date receive (e) FMV (or estimate) (See instructions.) (d) Date receive (e) FMV (or estimate) (See instructions.)	No. from		FMV (or estimate)	(d) Date received
(a) No. from Part I 200 SHARES OF TE CONNECTIVITY LTD (a) No. from Part I 200 SHARES OF TE CONNECTIVITY LTD (b) SHARES OF TE CONNECTIVITY LTD (c) FMV (or estimate) (See instructions.) (d) Date receive (See instructions.) (e) FMV (or estimate) (See instructions.) (f) Date receive (See instructions.) (e) FMV (or estimate) (See instructions.) (f) Date receive (See instructions.) (g) FMV (or estimate) (See instructions.)	6	250 SHARES OF PROCTER & GAMBLE	-	
No. 10 Description of noncash property given	-		\$ 21,506.	05/31/18
\$ 20,678. 05/31/1 (a) No. from Part I (b) Description of noncash property given (See instructions.) (b) TMV (or estimate) (See instructions.) (a) No. (b) Description of noncash property given (C) FMV (or estimate) (See instructions.) (a) No. Description of noncash property given (C) FMV (or estimate) (See instructions.) (b) Date receive (See instructions.) (c) FMV (or estimate) (See instructions.) (d) Date receive (See instructions.) (a) No. (c) FMV (or estimate) (See instructions.) (a) No. (c) FMV (or estimate) (See instructions.) (b) Date receive (See instructions.) (c) FMV (or estimate) (See instructions.) (d) Date receive (See instructions.) (e) FMV (or estimate) (See instructions.) (f) Description of noncash property given (See instructions.) (a) No. (b) Description of noncash property given (See instructions.) (b) Description of noncash property given (See instructions.) (c) FMV (or estimate) (See instructions.) (d) Date receive (See instructions.)	No. from		FMV (or estimate)	(d) Date received
(a) No. from Part I (b) Description of noncash property given (See instructions.) (a) No. from Part I (b) Description of noncash property given (See instructions.) (b) Description of noncash property given (See instructions.) (c) FMV (or estimate) (Cc) FMV (or estimate) (See instructions.) (d) Date receive (See instructions.) (a) No. from Part I (a) No. (b) Description of noncash property given (See instructions.) (a) No. (b) Description of noncash property given (See instructions.) (a) No. (b) Description of noncash property given (See instructions.) (b) Description of noncash property given (See instructions.) (b) Description of noncash property given (See instructions.) (c) FMV (or estimate) (See instructions.) (d) Date receive (See instructions.)	6	200 SHARES OF TE CONNECTIVITY LTD	-	
No. from Part I			\$ 20,678.	05/31/18
(a) No. (b) Co FMV (or estimate) (See instructions.) (d) Date receive (See instructions.) (d) Date receive (See instructions.) (e) (for estimate)	No. from		FMV (or estimate)	(d) Date received
(a) No. The description of noncash property given (b) Description of noncash property given (c) FMV (or estimate) (See instructions.) (d) Date receive \$ 17,126. (d) Date receive \$ 17,126. (e) FMV (or estimate) (See instructions.) (d) Date receive FMV (or estimate) (See instructions.) (d) Date receive \$ 34,090. (e) (f) (g) (g) (h) (h) (h) (h) (h) (h) (h) (h) (h) (h	6	200 SHARES OF TUX COMPANIES INC	-	
No. from Part I Description of noncash property given Part I			\$16,030.	_05/31/18
(a) No. from Part I 6 725 SHARES OF VANGUARD FTSE DEVELOPED MARKETS (a) No. (b) FMV (or estimate) (See instructions.) 5 34,090. (b) (c) FMV (or estimate) (See instructions.)	No. ' from	• •	FMV (or estimate)	(d) Date received
(a) No. from Part I 6 725 SHARES OF VANGUARD FTSE DEVELOPED MARKETS (a) No. (b) FMV (or estimate) (See instructions.) 5 34,090. (b) (c) CO FMV (or estimate) (See instructions.)	6	300 SHARES OF US BANCORP		
No. from Description of noncash property given 6			\$ 17,126.	05/31/18
6 MARKETS \$ 34,090. 05/31/1	No. from		FMV (or estimate)	(d) Date received
(a) (c) (d)	6			
No. (c) (d)			\$ 34,090.	05/31/18
FMV (or estimate)	No. from	(b) Description of noncash property given	FMV (or estimate)	(d) Date received
6 MARKETS 225 SHARES OF VANGUARD FTSE EMERGING MARKETS	6			,
\$ 11,144. 05/31/1			\$ <u>11,144.</u>	05/31/18

Employer identification number

AUERBACH FAMILY FOUNDATION, INC.

art II	Noncash Property (see instructions) Use duplicate copies of Part	ii ii auditional space is needed.	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
6	225 SHARES OF WAL-MART STORES	_	
			05/31/18
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
6	300 SHARES OF WALGREENS BOOTS ALLI	_	
			05/31/18
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
6	200 SHARES OF WALT DISNEY CO	_	
			05/31/18
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		 .	
		_ \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		_	
		\ \$	<u> </u>
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		_	
		_ _	
			990, 990-EZ, or 990-PF) (

Name of or	ganization		Employer identification number			
AUERB.	ACH FAMILY FOUNDATION,	INC.	32-0017911			
Part III	Exclusively religious, charitable, etc., contitude the year from any one contributor. Complete completing Part III, enter the total of exclusively religious. Use duplicate copies of Part III if addition	COIUMNS (a) INFOUGN (e) and INE TOIN is, charitable, etc , contributions of \$1,000 (32-0017911 sed in section 501(s)(7), (8), or (10) that total more than \$1,000 for old on less for the year (Enter this info once) \$\int \frac{32-0017911}{\text{total more than \$1,000 for or less for the year (Enter this info once)}} \$\int \frac{5}{\text{total more than \$1,000 for once)}} \$\text{Total more than \$1,000 for once)} \$\int \frac{5}{\text{total more than \$1,000 for once)}} \$\int \frac{5}{total more th			
(a) No. from Part I	(b) Purpose of gift	(d) Description of how gift is held				
	· · ···	(e) Transfer of gi	gift			
-	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee			
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held			
-	, (e) Transfer of gift					
ļ	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee			
		·				
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held			
-		(e) Transfer of gi	 gift			
<u></u>	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee			
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held			
		(e) Transfer of gi	gift			
-	Transferee's name, address, ar	nd ZIP + 4	Relationship of transferor to transferee			

FORM 990-PF, INTERE	ST ON SAVI	NGS AND TEM	PORARY	CASH IN	VESTMENTS	STATEMENT
SOURCE		(A REVE PER B	NUE		(B) VESTMENT COME	(C) ADJUSTED NET INCOME
INTEREST INCOME - S	CHWAB		61.		61.	
TOTAL TO PART I, LI	NE 3		61.		61.	
FORM 990-PF	DIVIDEND	S AND INTER	EST FRO	M SECUR	ITIES	STATEMENT 2
SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDEND	RE	(A) VENUE BOOKS	(B) NET INVES MENT INCO	
DIVIDEND INCOME - SCHWAB	5,561	•	0.	5,561.	5,56	51.
TO PART I, LINE 4	5,561	•	0.	5,561.	5,56	51.
FORM 990-PF		ACCOUNTI	NG FEES			STATEMENT 3
DESCRIPTION		(A) EXPENSES PER BOOKS	(B NET IN MENT I	VEST-	(C) ADJUSTEI NET INCOM	
ACCOUNTING FEES	_	1,820.		0.		1,820.
TO FORM 990-PF, PG	1, LN 16B =	1,820.		0.		1,820.
FORM 990-PF		CORPORAT	E STOCK			STATEMENT 4
DESCRIPTION				воо	K VALUE	FAIR MARKET VALUE
101 SHS BB&T CORPOR 140 SHS BERSHIRE HA 3433 SHS BROWN FORM 125 SHS CHEVRON COR 700 SHS COMCAST COR 225 SHS EXXON MOBIL 925 SHS GENERAL ELE	THAWAY AN CORP P CORP				512. 30,207. 27,794. 15,607. 29,566. 19,867. 14,816.	5,094. 26,131. 168,251. 15,804. 22,967. 18,614. 12,589.

AUERBACH FAMILY FOUNDATION, INC.		32-0017911
100 SHS HOME DEPOT INC	20,033	19,510.
150 SHS JOHNSON & JOHNSON	20,823.	18,201.
334 SHS JOHNSON CONTROLS INTER F	13,190.	11,172.
400 SHS JPMORGAN CHASE & CO	46,496.	41,680.
125 SHS KRAFT HEINZ CO	9,785.	7,853.
575 SHS MATTEL INC	8,904.	9,442.
300 SHS MICROSOFT CORP	28,450.	29,583.
375 SHS-MONDELEZ INTL	17,043.	15,375.
83 SHS NVENT ELECTRONIC PLC	2,014.	2,083.
175 SHS OMNICOM GROUP INC	13,373.	13,347.
83 SHS PENTAIR PLC	3,910.	3,493.
600 SHS PFIZER INC	22,410.	21,768.
250 SHS PROCTER & GAMBLE	21,506.	19,515.
200 SHS TE CONNECTIVITY LTD	20,678.	18,012.
200 SHS TJX COMPANIES INC	16,030.	19,036.
300 SHS US BANCORP	17,126.	15,006.
225 SHS WAL-MART STORES	23,828.	19,271.
300 SHS WALGREENS BOOTS ALLI	22,504.	18,005.
200 SHS WALT DISNEY CO	21,805.	20,962.
725 SHS VANGUARD FTSE DEVELOPED MARKETS	34,090.	31,103.
225 SHS VANGUARD FTSE EMERGING MARKETS	11,144.	9,495.
TOTAL TO FORM 990-PF, PART II, LINE 10B	533,511.	633,362.
FORM 990-PF LIST OF SUBSTANTIAL CONTR		STATEMENT 5
PART VII-A, LINE 10		
NAME OF CONTRIBUTOR ADDRESS		

1400 WILLOW AVENUE #405 LOUISVILLE, KY 40204

ESTATE OF S P AUERBACH