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Form 990-PF

Department of the Treasury

Internal Revenue Service

DLN: 93491178001129

2017

OMB No 1545-0052

## **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.
 Information about Form 990-PF and its instructions is at <a href="www.irs.gov/form990pf">www.irs.gov/form990pf</a>.

Open to Public Inspection

For	caler	ndar year 2017, or tax year beginnir	ng 09-01-20	017	, aı	nd er	iding 08-31-	2018	
		indation ARD LAURENCE PARISH FOUNDATION					<b>A Employer Id</b> 13-1869530	entification numb	er
		d street (or P O box number if mail is not delivered t 611 DURFEE ROAD	o street address)	) Room	n/suite		<b>B</b> Telephone nu (630) 529-4959	mber (see instruction	ons)
		, state or province, country, and ZIP or foreign posta IL 60189	al code					application is pendi	na. check here
				_			·		▶ ∟
G C	neck al		tial return of a mended return	forme	r public charity			ganizations, check h ganizations meeting	▶ ∟
			ame change					k here and attach c	
		pe of organization Section 501(c)(3) e						undation status was n 507(b)(1)(A), che	
		4947(a)(1) nonexempt charitable trust  ket value of all assets at end		e priva		-l	E If the founds	ation is in a 60-mon	th termination
of	year <i>(f</i>	from Part II, col (c),  ■ 7.062.161 □ Othe	er (specify) elumn (d) must			aı		n 507(b)(1)(B), che	
Pa	rt I	Analysis of Revenue and Expenses of amounts in columns (b), (c), and (d) may not nequal the amounts in column (a) (see instructions	necessarily	(a)	Revenue and expenses per books	(b)	Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
	1	Contributions, gifts, grants, etc , received (a schedule)	attach						
	2	Check ► ✓ If the foundation is <b>not</b> require Sch B	d to attach						
	3	Interest on savings and temporary cash inve	estments		196		196		
	4	Dividends and interest from securities			221,510		221,510		
	5a	Gross rents		<u> </u>					
	b	Net rental income or (loss)	. l 10	-	106,569				
RE	6a	Net gain or (loss) from sale of assets not on	i line 10		100,309				1
Revenue	b	Gross sales price for all assets on line 6a	111,084	<u> </u>					
ă	7	Capital gain net income (from Part IV, line 2	2)				106,569		
	8	Net short-term capital gain							
	9 10a	Income modifications							
	b	Gross sales less returns and allowances  Less Cost of goods sold							
	c	Gross profit or (loss) (attach schedule) .		<u> </u>					
	11	Other income (attach schedule)							
	12	Total. Add lines 1 through 11			328,275		328,275		
	13	Compensation of officers, directors, trustees	s, etc		0		0		(
	14	Other employee salaries and wages							
ses	15	Pension plans, employee benefits							_
en:	16a	Legal fees (attach schedule)		06-1	7.035		7.025		7.025
EX	b	Accounting fees (attach schedule) Other professional fees (attach schedule)		<b>%</b> J	7,825		7,825		7,825
Operating and Administrative Expenses	17	Interest							
rat	18	Taxes (attach schedule) (see instructions)		92	3,420		250		3,420
<u> </u>	19	Depreciation (attach schedule) and depletion	n	<u> </u>	<u> </u>				
를	20	Occupancy							
Ā D	21	Travel, conferences, and meetings							
ä	22	Printing and publications							
ing	23	Other expenses (attach schedule)		<b>9</b>	3,214		3,214		3,214
ərat	24	Total operating and administrative expe	enses.		44.450		44.000		
ă	25	Add lines 13 through 23			14,459 350,300		11,289		14,459 350,300
	26	Total expenses and disbursements. Add	lines 24 and		550,500				330,300
	27	Subtract line 26 from line 12			364,759		11,289		364,759
	a a	Excess of revenue over expenses and			-36,484				
		disbursements	<b>.</b> 0 )				246.005		1
	b c	Net investment income (if negative, enter -0 Adjusted net income(if negative, enter -0	•				316,986		
For		work Reduction Act Notice, see instruction	•	<u> </u>		<u> </u>	Cat No 11289>	(	 orm <b>990-PF</b> (2017
	- F	and the state of t				,	140 11407/	, ,	I = (4U1/

6,912,434

25,426

7,062,161

	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 (attach schedule) (see instructions)			
	7	Other notes and loans receivable (attach schedule) ▶			
		Less allowance for doubtful accounts ▶			
25	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			
As	10a	Investments—U S and state government obligations (attach schedule)			
	b	Investments—corporate stock (attach schedule)	833,826	829,311	
	С	Investments—corporate bonds (attach schedule)	112,716	112,716	
	11	Investments—land, buildings, and equipment basis ▶			
		Less accumulated depreciation (attach schedule) ▶			
	12	Investments—mortgage loans			

## 13 Investments—other (attach schedule) 14 Land, buildings, and equipment basis Less accumulated depreciation (attach schedule) ▶ 11,081 Other assets (describe > \_ (چە 28,795 25,426 15 Total assets (to be completed by all filers—see the 16 instructions Also, see page 1, item I) 1,032,685 991,054 17 Accounts payable and accrued expenses . . . . 13,222 8,075 18 19 Deferred revenue . Loans from officers, directors, trustees, and other disqualified persons 20

13,222

1,019,463

1,019,463

1,032,685

0

8,075

982,979

982.979

991,054

2

3

4

5

n

1,019,463

-36,484

982,979

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0

0 982,979

Mortgages and other notes payable (attach schedule). . . . . .

Foundations that follow SFAS 117, check here ▶

and complete lines 24 through 26 and lines 30 and 31.

Foundations that do not follow SFAS 117, check here

Paid-in or capital surplus, or land, bldg, and equipment fund Retained earnings, accumulated income, endowment, or other funds

Capital stock, trust principal, or current funds . . . . . . . . .

Total net assets or fund balances (see instructions) . . . . .

Total liabilities and net assets/fund balances (see instructions) .

Analysis of Changes in Net Assets or Fund Balances

Total net assets or fund balances at beginning of year-Part II, column (a), line 30 (must agree with end-

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

Liabilities

Assets or Fund Balances

21

22

23

24

25

26

27

28

29 30

31

Part III

2

3

Other liabilities (describe ▶\_

Unrestricted

Temporarily restricted

Permanently restricted .

and complete lines 27 through 31.

of-year figure reported on prior year's return)

Add lines 1, 2, and 3 . . . . . .

Decreases not included in line 2 (itemize) ▶

Other increases not included in line 2 (itemize)

Enter amount from Part I, line 27a

	<b>(a)</b> the kınd(s) of property sold (e g , re ehouse, or common stock, 200 shs		How acquired P—Purchase D—Donation	Date acquired (mo , day, yr )	Date sold (mo , day, yr )
1 a EXXON MOBILE CORP - 1	.,400 SHS		Р	2002-08-31	2018-08-02
<b>b</b> MICRO FCS INT - CASH I	·		Р		2017-09-08
c PERSPECTA - CASH IN LI			P		2018-06-05
d	<del></del>				
e					
	(f)		(g)	,	h)
(e)	Depreciation allowed		other basis		r (loss)
Gross sales price	(or allowable)		ense of sale		) minus (g)
a 11	1,063		4,506		106,557
b	10		<u> </u>		10
С	11		9		2
d			<u> </u>		
e					
		11 11 6 11	12/21/60	_	
Complete only for assets	s showing gain in column (h) and ow	i			l)
(i)	(j) Adjusted basis		<b>(k)</b> of col(ı)		h) gain minus less than -0-) <b>or</b>
F M V as of 12/31/69	as of 12/31/69		(j), if any		om col (h))
a			(377)	,	106,557
b					10
C					2
d					
e		If gain, also enter in P			
	gain or (loss) as defined in sections in the section in the sect	ons) If (loss), enter -0	, I	3	106,569
Part V Qualification U	Jnder Section 4940(e) for Re	duced Tax on Net	Investment In	come	
For optional use by domestic p	rivate foundations subject to the sec	tion 4940(a) tax on ne	et investment incom	ne )	
f section 4940(d)(2) applies, le	eave this part blank			_	_
	e section 4942 tax on the distributal ot qualify under section 4940(e) Do		ın the base period	? Y	es 🔽 No
1 Enter the appropriate an	nount in each column for each year,	see instructions before	making any entrie	s	
(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitab	le-use assets	<b>(d)</b> Distribution rat (col (b) divided by c	
2016	367,789		7,418,370	·	0 049578
2015	371,966		7,332,065		0 050731
2014	373,401		7,577,753		0 049276
2013	343,252		7,644,248		0 044903
2012	312,189		6,995,496		0 044627
2 Total of line 1, column (	d)		2		0 239115
	, o for the 5-year base period—divide (	the total on line 2 by 5	or by the		_
number of years the four	dation has been in existence if less	than 5 years 🔒 .	<u>3</u>		0 047823
	ncharitable-use assets for 2017 fron	•			7,305,900
<b>5</b> Multiply line 4 by line 3			5		349,390
<b>6</b> Enter 1% of net investme	ent income (1% of Part I, line 27b)		6		3,170
<b>7</b> Add lines 5 and 6			7		352,560
	ons from Part XII, line 4 ,				364,759
	eater than line 7, check the box in Pa			ng a 1% tax rate Se	e the Part VI

If yes, did the foundation receive any proceeds or have any net income attributable to the transaction?.

7b

•	,
	Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees,
D \/TTT	information About Officers, Directors, Trustees, Foundation Managers, Highly Faid Employees,
Part VIII	and Contractors
	with 001111 water 1

1 List all officers, directors, truste	es, f	oundation managers ar	nd their compensation	(see instructions).	
(a) Name and address		Title, and average hours per week <b>b)</b> devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	Expense account, (e) other allowances
RICHARD L PARISH III		SIDENT	0	'	C
25 WEST 611 DURFEE ROAD	0 00				
WHEATON, IL 60189  DAVID MCKISSOCK	DIRE	ECTOR	0	0	
20 HANCE ROAD	0 00				
FAIR HAVEN, NJ 07704					
RICHARD C BONDY	DIRE 0 00	ECTOR	0	0	
107 CIVITAS STREET MT PLEASANT, SC 29464	00				
2 Compensation of five highest-pa	id er	nployees (other than t	hose included on line 1	L—see instructions). If no	ne, enter "NONE."
(a) Name and address of each employee p more than \$50,000	aıd	Title, and average hours per week (b) devoted to position	(c) Compensation	Contributions to employee benefit plans and deferred (d) compensation	Expense account, (e) other allowances
NONE					
TOTAL		1			
		1			
		1			
		†			
		1			
Total number of other employees paid ov	er \$5	50,000			
3 Five highest-paid independent of		· ·			E".
(a) Name and address of each perso				e of service	(c) Compensation
NONE		· ·	• • • • • • • • • • • • • • • • • • • •		
			1		
Total number of others receiving over \$5	0,000	) for professional services			(
Part IX-A Summary of Direct	Chai	ritable Activities			
List the foundation's four largest direct charitabl	e activ	rities during the tax year Incl	ude relevant statistical inform	nation such as the number of	Expenses
organizations and other beneficiaries served, coi	nreren	ces convened, research paper	s produced, etc		
1					
3					
<b>-</b>					
-					
4					
<b>-</b>					
		-1-1-1	/		
		elated Investments	· · · · · · · · · · · · · · · · · · ·		
Describe the two largest program-related inv	estme	ents made by the foundation d	uring the tax year on lines 1	and 2	Amount
1					
2					
All of					
All other program-related investments	See	instructions			
<b>5</b>					
				_	
Total. Add lines 1 through 3 .					
				· · · · · · · · ·	- 000 DE (05)

Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for

2

3a 3h

4

5

364.759

3,170

361.589

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Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,

Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment

Adjusted qualifying distributions. Subtract line 5 from line 4. . . . . . . . . .

Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4

income Enter 1% of Part I. line 27b (see instructions).

Amounts set aside for specific charitable projects that satisfy the

the section 4940(e) reduction of tax in those years

2

3

4

5

347,017

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0

(d)

2017

Page 9

## Undistributed Income (see instructions)

PF (	(20	17	)
/TTT		$\overline{}$	In

-PF (2	017)
4.1.1.	1.113

Part XIII	

**b** Total for prior years Excess distributions carryover, if any, to 2017 a From 2012. . . . . **b** From 2013. . . . c From 2014. . .

Distributable amount for 2017 from Part XI, line 7

2 Undistributed income, if any, as of the end of 2017

a Enter amount for 2016 only. . . . . .

(a)

Corpus

0

0

(b)

Years prior to 2016

(c)

2016

349,651

349,651

- d From 2015. . . . .
- e From 2016. . . . . f Total of lines 3a through e. . . . . . . .
  - XII, line 4 🕨 \$
- 4 Qualifying distributions for 2017 from Part a Applied to 2016, but not more than line 2a **b** Applied to undistributed income of prior years (Election required—see instructions). . . . .

same amount must be shown in column (a) )

c Treated as distributions out of corpus (Election 

**5** Excess distributions carryover applied to 2017

a Corpus Add lines 3f, 4c, and 4e Subtract line 5 b Prior years' undistributed income Subtract line 4b from line 2b . . . . . . . . . . . . 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. . . . . . d Subtract line 6c from line 6b Taxable amount e Undistributed income for 2016 Subtract line 4a from line 2a Taxable amount—see instructions . . . . . . . f Undistributed income for 2017 Subtract lines 4d and 5 from line 1. This amount must

(If an amount appears in column (d), the

6 Enter the net total of each column as

be distributed in 2018 . . . . . 7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions) . . . . . . . . . 8 Excess distributions carryover from 2012 not

9 Excess distributions carryover to 2018.

10 Analysis of line 9

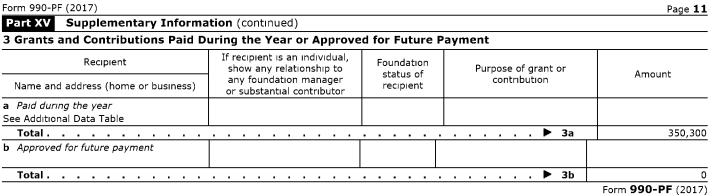
a Excess from 2013. . . **b** Excess from 2014. . c Excess from 2015. . . . d Excess from 2016. . . e Excess from 2017. . .

applied on line 5 or line 7 (see instructions) . . .

Subtract lines 7 and 8 from line 6a . . . . . .

indicated below:

**d** Applied to 2017 distributable amount. . . . e Remaining amount distributed out of corpus



Enter gross amounts unless otherwise indicated		Unrelated business income		Excluded by section	(e) Related or exempt	
_	service revenue	(a) Business code	<b>(b)</b> Amount	(c) Exclusion code	<b>(d)</b> Amount	function income (See instructions
	and contracts from government agencies					
Intere	ship dues and assessments st on savings and temporary cash					
	ments			14 14	196 221,510	
	tal income or (loss) from real estate			14	221,310	
	inanced property					
	ebt-financed property					
	ntal income or (loss) from personal property					
	nvestment income.					
	r (loss) from sales of assets other than ory			18	106,569	
Net inco	ome or (loss) from special events					
Gross p	rofit or (loss) from sales of inventory					
	evenue <b>a</b>					
с						
d	_					
c d e 2 Subtota	al Add columns (b), (d), and (e).		0		328,275	
c d e 2 Subtota 3 <b>Total.</b>	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e)		0	13	328,275 3	328,275
c d e 2 Subtota Total. A (See wo	al Add columns (b), (d), and (e).	lations )		13	· · · · · · · · · · · · · · · · · · ·	
c d e Subtota Total. (See wo	al Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  rksheet in line 13 instructions to verify calculated in the color of activities to the Explain below how each activity for which the accomplishment of the foundation's ex	lations )  e Accomplishr  Income is reported	ment of Exemp	pt Purposes  Part XVI-A contribut	ted importantly to	328,27
c d e Subtota Total. (See wo art XVI	Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  rksheet in line 13 instructions to verify calculated  Relationship of Activities to th  Explain below how each activity for which	lations )  e Accomplishr  Income is reported	ment of Exemp	pt Purposes  Part XVI-A contribut	ted importantly to	328,27
c d e Subtota Total. (See wo	al Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  rksheet in line 13 instructions to verify calculated in the color of activities to the Explain below how each activity for which the accomplishment of the foundation's ex	lations )  e Accomplishr  Income is reported	ment of Exemp	pt Purposes  Part XVI-A contribut	ted importantly to	328,27
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c d e Subtota Total. (See wo	al Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  rksheet in line 13 instructions to verify calculated in the color of activities to the Explain below how each activity for which the accomplishment of the foundation's ex	lations )  e Accomplishr  Income is reported	ment of Exemp	pt Purposes  Part XVI-A contribut	ted importantly to	328,27
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c d e Subtota Total. (See wo	al Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  rksheet in line 13 instructions to verify calculated in the color of activities to the Explain below how each activity for which the accomplishment of the foundation's ex	lations )  e Accomplishr  Income is reported	ment of Exemp	pt Purposes  Part XVI-A contribut	ted importantly to	328,27
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c d e Subtota Total. (See wo	al Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  rksheet in line 13 instructions to verify calculated in the color of activities to the Explain below how each activity for which the accomplishment of the foundation's ex	lations )  e Accomplishr  Income is reported	ment of Exemp	pt Purposes  Part XVI-A contribut	ted importantly to	328,27
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c d e Subtota Total. (See wo	al Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  rksheet in line 13 instructions to verify calculated in the color of activities to the Explain below how each activity for which the accomplishment of the foundation's ex	lations )  e Accomplishr  Income is reported	ment of Exemp	pt Purposes  Part XVI-A contribut	ted importantly to	328,27
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c d e Subtota Total. (See wo	al Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  rksheet in line 13 instructions to verify calculated in the color of activities to the Explain below how each activity for which the accomplishment of the foundation's ex	lations )  e Accomplishr  Income is reported	ment of Exemp	pt Purposes  Part XVI-A contribut	ted importantly to	328,275
c d e 2 Subtota 3 Total. (See wo	al Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  rksheet in line 13 instructions to verify calculated in the color of activities to the Explain below how each activity for which the accomplishment of the foundation's ex	lations )  e Accomplishr  Income is reported	ment of Exemp	pt Purposes  Part XVI-A contribut	ted importantly to	328,275

orm 990-PF (	2017)						Pa	ge <b>13</b>
Part XVII	Information Re Exempt Organiz		sfers To and Transact	ions and Relation	onships With Noncha	aritable		
	anization directly or in	directly engage ii	n any of the following with a nizations) or in section 527,			01	Yes	No
			narıtable exempt organizatio		-			
						1a(1)		No
(2) Other	assets					1a(2)		No
<b>b</b> Other trans	sactions							
<b>(1)</b> Sales	of assets to a noncharı	table exempt org	janization			1b(1)		No
(2) Purch	ases of assets from a n	oncharitable exe	mpt organization			1b(2)		No
(3) Renta	l of facilities, equipmen	nt, or other assets	s			1b(3)		No
(4) Reimb	oursement arrangemen	ts				1b(4)		No
	<del>-</del>					1b(5)		No
		·	draising solicitations			1b(6)		No
_			r assets, or paid employees te the following schedule  C			1c		No
		ngement, show II	e reporting foundation If the column (d) the value of the charitable exempt organization	ne goods, other ass			ingemen	nts
<b>2a</b> Is the foun	idation directly or indire	ectly affiliated wit	:h, or related to, one or mor	e tax-exempt orga	nızatıons			
	·	·	n section 501(c)(3)) or in se			☐ Yes	✓	No
	omplete the following so	•	, , , ,,					
·	(a) Name of organizatio	n	(b) Type of organiza	tion	(c) Description of re	lationship		
of my which		, it is true, correc	ave examined this return, ii ct, and complete Declaratio		r than taxpayer) is based	on all info	rmatio	n of
Sign Here	*****		2019-06-27		****** return		iscuss th	
<b>/</b> s	Signature of officer or tr	rustee	Date	Title		ee instr )? [	<b>√</b> Yes	□ <sub>No</sub>
	Print/Type preparer's	name Pre	parer's Signature	Date	Check if self- employed ▶ ☑	P0016	6476	
Paid Proporor								
Preparer Use Only	Firm's name ► MICH	HAEL L EMMEL CF	PA		Firm	s EIN ▶13	-39187	700
	Firm's address ► 270 MADISON AVENUE							

NEW YORK, NY 10016

Phone no (212) 228-7400

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year ATHLETES SERVING ATHLETES NONE PC CHARITY 1,500 PO BOX 4222 LUTHERVILLE, MD 21094 D.C CHARTTA 1.500

2700 GLEN AVE BALTIMORE, MD 21215	NOINE	PC	CHARITY	1,500
BENETH THE SEA 495 NEW ROCHELLE ROAD 2A	NONE	PC	CHARITY	1,250

BALTIMORE, MD 21215				
BENETH THE SEA 495 NEW ROCHELLE ROAD : BRONXVILLE, NY 10708	2A NONE	PC	CHARITY	1,25

Total .

За

BENETH THE SEA	NONE	PC	CHARITY	1,2
495 NEW ROCHELLE ROAD 2A BRONXVILLE, NY 10708				
	•			

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year BOY'S LATIN SCHOOL OF MARYLAND NONE PC CHARITY 1.000 822 WEST LAKE AVE BALTIMORE, MD 21210

BRUNSWICK SCHOOL 100 MAHNER STREET GREENWICH, CT 06830	NONE	PC	CHARITY	5,000
CPC BEHAVIORAL HEALTHCARE 10 INDUSTRIAL WAY EAST EATONTOWN N1 07724	NONE	PC	CHARITY	2,800

GREENWICH, CT 06830				
CPC BEHAVIORAL HEALTHCARE 10 INDUSTRIAL WAY EAST EATONTOWN, NJ 07724	NONE	PC	CHARITY	2,8

CPC BEHAVIORAL HEALTHCARE	NONE	PC	CHARITY	2,
10 INDUSTRIAL WAY EAST EATONTOWN, NJ 07724				

Total .

NONE							'	PC				ЭΗΑ	RIT	Y							2
 	_	_	_	_	_	_	_	_	_	_	_	 _			_		_	<b></b>		350,30	

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year CALVERT SCHOOL105 TUCANY ROAD NONE PC 1,000 CHARITY BALTIMORE, MD 21210

COARE4123 BROADWAY 808 OAKLAND, CA 94611	NONE	PC	CHARITY	1,250
COARL RESTORATION FOUNDATION 5 SEAGATE BLVD KEY LARGO, FL 33037	NONE	PC	CHARITY	1,250

Total . 3a

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business)

or substantial contributor

a Paid during the year				
DIVERS ALERT NETWORK 6 WEST COLONY PLACE DURHAM, NC 27705	NONE	PC	CHARITY	2,000
DIVING WITH A PURPOSE - YDWP	NONE	PC	CHARITY	2,500

1309 JACKSON STREET NASHVILLE, TN 37208				
DUKE UNIVERSITYPO BOX 90581	NONE	PC	CHARITY	

NASHVILLE, TN 37208				
DUKE UNIVERSITYPO BOX 90581 DURHAM, NC 27708	NONE	PC	CHARITY	4,000
Total				350,300

NASHVILLE, TN 37208				
DUKE UNIVERSITYPO BOX 90581 DURHAM, NC 27708	NONE	PC	CHARITY	4

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

a Paid during the year				
DUPAGE FOUNDATION 3000 WOODCREEK DR STE 310 DOWNERS GROVE IL 60515	NONE	PC	CHARITY	1,000

DOWNERS GROVE, IL 60515				
EAGLE HILL SOUTHPORT 214 MAIN STREET SOUTHPORT, CT 06890	NONE	PC	CHARITY	3,000

214 MAIN STREET SOUTHPORT, CT 06890				,
ELON UNIVERSITY2600 CAMPUS BOX ELON, NC 27244	NONE	PC	CHARITY	3,50

			_	
ELON UNIVERSITY2600 CAMPUS BOX ELON, NC 27244	NONE	PC	CHARITY	3,500
300111F0K1, C1 00030				

ELON UNIVERSITY2600 CAMPUS BOX ELON, NC 27244	NONE	PC	CHARITY	3,5
Total				350,300

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year FAIR HAVEN PUBLIC LIBRARY NONE PC CHARITY 2.400 748 RIVER ROAD FAIR HAVEN, NJ 07704

FAIR HAVEN VOLUNTEER FIRE CO 1 645 RIVER ROAD FAIR HAVEN, NJ 07704	NONE	PC	CHARITY	1,700
FAMILY & CHILDREN SERVICE	NONE	PC	CHARITY	2,400

FAIR HAVEN, NJ 07704 FAMILY & CHILDREN SERVICE	NONE	PC	CHARITY	2,40
191 BATH AVENUE LONG BEACH, NJ 07704	NONE	1	CHAMII	2,40
Total				350,300

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year FIRST PRESBYTERIAN CHURCH OF NONE PC CHARITY 1,500 RUMSON EAST RIVERROAD AT PARK AVE RUMSON, NJ 07760

FIRST PRESBYTERIAN CHURCH OF WHEATON 715 NORTH CARLTON AVE WHEATON, IL 60187	NONE	PC	CHARITY	2,500
FRIENDS OF THE FOREST PRESERVE DISTRICT OF DUPAGE CO 3 S 580 NAPERVILLE RD/PO BOX 5000 WHEATON IL 60189	NONE	PC	CHARITY	1,000

Total .

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

u . u.u uuy u / u				
GEORGETOWN UNIVERSITY 500 FIFTH AVE STE 222 NEW YORK, NY 10110	NONE	PC	CHARITY	

a Paid during the year

3a

GILMAN SCHOOL5407 ROLAND AVE BALTIMORE, MD 21210	NONE	PC	CHARITY	
GREATER BALTIMORE MEDICAL CENTER	NONE	PC	CHARITY	

BALTIMORE, MD 21210				
GREATER BALTIMORE MEDICAL CENTER 6701 NORTH CHARLES ST	NONE	PC	CHARITY	
DALTIMODE MD 24204				i

GREATER BALTIMORE MEDICAL CENTER	NONE	PC	CHARITY	
6701 NORTH CHARLES ST				
BALTIMORE, MD 21204				

GREATER BALTIMORE MEDICAL CENTER 5701 NORTH CHARLES ST BALTIMORE, MD 21204	NONE	PC	CHARITY	2,400
BALTIMORE, MD 21204				
Total				350,300

5.000

BALTIMORE, MD 21204				
6701 NORTH CHARLES ST				
GREATER DALTIMORE MEDICAL CENTER	INONE	r C	CHARTT	<b>,</b> ∠,

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient Foundation Purpose of grant or If recipient is an individual, Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year GREENWICH COUNTY DAY SCHOOL NONE PC CHARITY 1,000 PO BOX 623 OLD CHURCH RD GREENWICH, CT 06836

INSTITUTE FOR SUSTAINABILITY COMMUNITIES 535 STONE CUTTERS WAY MONTPELIER, VT 05602	NONE	PC	CHARITY	3,000
JOHN G SHEDD AQUARIUM 1200 SOUTH LAKE SHORE DRIVE	NONE	PC	CHARITY	5,000

MONTPELIER, VT 05602				
JOHN G SHEDD AQUARIUM 1200 SOUTH LAKE SHORE DRIVE CHICAGO, IL 60605	NONE	PC	CHARITY	5,00
· · · · · · · · · · · · · · · · · · ·				1

JOHN G SHEDD AQUARIUM 1200 SOUTH LAKE SHORE DRIVE CHICAGO, IL 60605	NONE	PC	CHARITY	

JOHN G SHEDD AQUARIUM 1200 SOUTH LAKE SHORE DRIVE CHICAGO, IL 60605	NONE	PC	CHARITY	5,00
Total				350,300

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient Purpose of grant or If recipient is an individual, Foundation Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year FUND FOR JOHNS HOPKINS MEDICINE NONE PC. CHARITY 2.500 750 E PRATT ST STE 1722A BALTIMORE, MD 21202 LIALIEV CLINIC MEDICAL CENTER NICHIE 100 CLIADITT 4 000

41 MALL ROAD BURLINGTON, MA 01805	NONE	PC	CHARITY	4,000
LAKE DUNMORE FERN LAKE ASSOCIATION PO BOX 14 SALISBURY, VT 05769	NONE	PC	CHARITY	8,000

350,300 За

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient Foundation Purpose of grant or If recipient is an individual, Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year MAYO CLINIC ROCHESTER NONE PC CHARITY 5,000 200 FIRST STSW ROCHESTER, MN 55905 MEMORIAL SLOAN-KETTERING CANCER NONE PC CHARITY 5,000

CENTER 1275 YORK AVE NEW YORK, NY 10065				·
MIDDLEBURY COLLEGE5 COURT ST MIDDLEBURY, VT 05753	NONE	PC	CHARITY	6,000

	NEW YORK, NY 10065				
	MIDDLEBURY COLLEGE5 COURT ST MIDDLEBURY, VT 05753	NONE	PC	CHARITY	6,0
1	· · · · · · · · · · · · · · · · · · ·			·	1

Total .

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year

MILTON ACADEMY170 CENTRE STREET MILTON, MA 02186	NONE	PC	CHARITY	3,500
MONMOUTH COUNTY SPCA 260 WALL ST/PO BOX 93 EATONTOWN, NJ 07724	NONE	PC	CHARITY	1,500
NATIONAL PARK CONSERVATION	NONE	PC	CHARITY	2,000

EATONTOWN, NJ 07724				
NATIONAL PARK CONSERVATION ASSOCIATION 777 6TH ST NW 700 WASHINGTON, DC 20001	NONE	PC	CHARITY	2,000

ASSOCIATION	2,000
WASHINGTON, DC 20001	

777 6TH ST NW 700 WASHINGTON, DC 20001			
ASSOCIATION			
ASSOCIATION	1	I	

,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
Total	 	350,300
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Total	▶	350,300
3a		

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient Foundation Purpose of grant or If recipient is an individual, Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year NATIONAL PARK FOUNDATION NONE PC CHARITY 2,500 1110 VERMONT AVE NW STE 200 WASHINGTON, DC 20005

NORTHWESTERN MEDICINE 0S050 WINFIELD RD STE 200 WINFIELD, IL 60190	NONE	PC	CHARITY	6,000
NY MUSICAL THEATER FESTIVAL 36 W 44TH ST STE 1010A	NONE	PC	CHARITY	2,000

NY MUSICAL THEATER FESTIVAL 36 W 44TH ST STE 1010A NEW YORK, NY 10036	NONE	PC	CHARITY	2,00

Total . 350,300

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient Foundation Purpose of grant or If recipient is an individual, Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year OCCIDENTAL COLLEGE NONE PC CHARITY 8.000 1600 CAMPUS RD M-33 LOS ANGELES, CA 90041

ORBIS INTERNATIONAL 520 8TH AVE 11TH FLR NEW YORK, NY 10018	NONE	PC	CHARITY	4,000
OUR WORLD UNDERWATER SCHOLARSHIP SOC PO BOX 6157 WOODBRIDGE, IL 60517	NONE	PC	CHARITY	7,500

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Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient Foundation Purpose of grant or If recipient is an individual, Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year PATHWAYS INC175 MILBANK NONE PC CHARITY 3,000 GREENWICH, CT 06830

PEGGY ADAMS ANIMAL RESCUE LEAGUE 3100/3200 NORTH MILITIARY TRAIL WEST PALM BEACH, FL 33409	NONE	PC	CHARITY	2,000
POLICEMEN'S BENEVOLENT ASSOCIATION PO BOX 263	NONE	PC	CHARITY	1,700

WEST PALM BEACH, FL 33409				
POLICEMEN'S BENEVOLENT ASSOCIATION PO BOX 263 FAIR HAVEN, NJ 07704	NONE	PC	CHARITY	1,7

Total . За

orm 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
RIVERVIEW MEDICAL CENTER FOUNDATION 1 RIVERVIEW PLAZA RED BANK, NJ 07701	NONE	PC	CHARITY	8,000
SAINT MARK'S EPISCOL CHURCH 3395 BURNS ROAD PALM BEACH GARDENS, FL 33410	NONE	PC	CHARITY	40,000
SAINT PAUL'S EPISCOL CHURCH 200 RIVER ROAD RIVERSIDE, CT 06878	NONE	PC	CHARITY	3,500
Total				350,300

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
SAINT THOMAS CHURCH OF WHITEMORE PO BOX 247 FORT WASHINGTON, PA 19034	NONE	PC	CHARITY	3,000
SALT CREEK BALLET CO 98 EAST CHICAGO AVE WESTMOUNT, IL 60559	NONE	PC	CHARITY	2,000
SINAI HOSPITAL LIFE BRIDGE HEALTH 2401 WEST BELVERDERE AVE BALTIMORE, MD 21215	NONE	PC	CHARITY	6,000
Total				350,300

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient Foundation Purpose of grant or If recipient is an individual, Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year SINAI HOSPITAL LIFE BRIDGE HEALTH NONE PC CHARITY 6,000 2401 WEST BELVERDERE AVE BALTIMORE, MD 21215 CKIDMODE COLLECE NONE DC CHARTTY 6.000

815 NORTH BROADWAY SARATOGA SPRING, NY 12866	NONE		CHART	0,000
SOUTH FLORIDA SCIENCE MUSEUM 4801 DREHER TRAIL NORTH WEST PALM BEACH, FL 33405	NONE	PC	CHARITY	10,000

Total.

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year SPARTANBURG REGIONAL HEALTHCARE NONE PC CHARITY 4,000 SYSTEM FOUNDATION 101 EAST WOOD STREET SPARTANBURG SC 29303

SI AKTANDOKO, SC 23303				
THE ACADEMY OF UNDERWATER ART & SCIENCES 27 WEST ANAPAMU ST 31 SANTA BARBARA, CA 93101	NONE	PC	CHARITY	1,000
THE EQUUS FOUNDATION INC 168 LONG LOTS ROAD	NONE	PC	CHARITY	12,000

SANTA BARBARA, CA 93101				
THE EQUUS FOUNDATION INC 168 LONG LOTS ROAD WESTPORT, CT 06880	NONE	PC	CHARITY	12,00
Total				350,300

THE EQUUS FOUNDATION INC 168 LONG LOTS ROAD	NONE	PC	CHARITY	
WESTPORT, CT 06880				
				1

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

a Paid during the year				
THE EXPLORES CLUB46 E 70TH ST NEW YORK, NY 10021	NONE	PC	CHARITY	2,000

1					
	THE FIELD MUSEUM 1400 S LAKE SHORE DR CHICAGO, IL 60605	NONE	PC	CHARITY	
1					

3a

1400 S LAKE SHORE DR CHICAGO, IL 60605				
THE GREENWICH TEEN CENTERINC 100 ARCH ST/PO BOX 1339 GREENWICH CT 06836	NONE	PC	CHARITY	7,000

*				
THE GREENWICH TEEN CENTERINC 100 ARCH ST/PO BOX 1339 GREENWICH, CT 06836	NONE	PC	CHARITY	7,000

THE GREENWICH TEEN CENTERINC 100 ARCH ST/PO BOX 1339 GREENWICH, CT 06836	NONE	PC	CHARITY	7,00
Total				350,300

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year THE HISTORICAL SOCIETY OF NONE PC CHARITY 500 GREENWICH 39 STICKLAND RD COS COB, CT 06807

1 000 000, 01 00007				
THE LAWRENCEVILLE SCHOOL PO BOX 6125 LAWRENCEVILLE, NJ 08648	NONE	PC	CHARITY	2,400
THE MORTON ARBORETUM 4100 ILLNOIS ROUTE 53 LISLE, IL 60532	NONE	PC	CHARITY	3,500

350,300 Total . .

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year THE SEEING EYEPO BOX 375 NONE PC CHARITY 9.500

MORRISTOWN, NJ 07963				·
THE TAFT SCHOOL 110 WOODBURY ROAD WATERTOWN, CT 06795	NONE	PC	CHARITY	50,000
THE US HEREDITARY ANGLOEDEMA ASSOCIATE	NONE	PC	CHARITY	1,000

WATERTOWN, CT 06/95				
THE US HEREDITARY ANGLOEDEMA ASSOCIATE PO BOX 803 CONWAY, MA 01341	NONE	PC	CHARITY	1,000
			_	

THE US HEREDITARY ANGLOEDEMA	NONE	PC	CHARITY	1,00
ASSOCIATE				
PO BOX 803				
CONWAY, MA 01341				
Total				350,300

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year **TULANE UNIVERSARYPO BOX 61075** NONE PC CHARITY 3,500 NEW ORLEANS, LA 70161

Total				350 300
UNIVERSITY OF RICHMOND MARYLAND HALL 107/28 WESTHAMPTON WAY RICHMOND, VA 23173	NONE	PC	CHARITY	3,500
UNITED NEGRO COLLEGE FUND INC 1222 SOUTH ANDREWS AVE STE 502A FT LAUDERDALE, FL 33316	NONE	PC	CHARITY	5,000

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

a Paid during the year				
WEIL CORNELL MEDICAL COLLEGE 1300 YORK AVE/BOX 123 NEW YORK, NY 10065	NONE	PC	CHARITY	4,000

WESMINSTER SCHOOL 995 HOPMEADOW ST SIMSURY, CT 06070	NONE	PC	CHARITY	

3a

П	995 HOPMEADOW ST SIMSURY, CT 06070				
	WHEATON COLLEGE26 E MAIN ST NORTON, MA 02766	NONE	PC	CHARITY	3,000

WHEATON COLLEGE26 E MAIN ST NORTON, MA 02766	NONE	PC	CHARITY	3,000
T-4-1				350 300

WHEATON COLLEGE26 E MAIN ST NORTON, MA 02766	NONE	PC	CHARITY	3,0
Total			•	350 300

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year WHEATON PUBLIC LIBRARY NONE PC CHARITY 500 225 NCROSS ST WHEATON, IL 60187 WOMEN DIVERS HALL OF FAME NONE DC CHARITY 9 000

503 VIA FLORIDA SAN CLEMENTE, CA 92672	NONE	PC	CHARITY	8,000
LOYOLA UNIVERSITY 5911 YORK RD ROOM 110 BALTIMORE, MD 21212	NONE	PC	CHARITY	1,500

SAN CLEMENTE, CA 92672				
LOYOLA UNIVERSITY 5911 YORK RD ROOM 110 BALTIMORE, MD 21212	NONE	PC	CHARITY	1

Total .

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business)

2.250

a Paid during the year				
PORTER MEDICAL CENTER	NONE	PC	CHARITY	

or substantial contributor

MIDDLEBURY, VT 05753		
Total	 	35

·	
Total	 350,300

efile GRAPHIC print - DO NOT P	file GRAPHIC print - DO NOT PROCESS As Filed Data - DLN: 93491178001129							
TY 2017 Accounting Fees Schedule								
	Name: THE RICHARD LAURENCE PARISH FOUNDATION							
	EIN:	13-1869530						
Accounting Fees Schedule	,							
Category	Amou	unt Ne	t Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes			

ACCOUNTING FEES

7,825

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491178001129
TY 2017 Investments Corporat	e Bonds Sche	dule
Name: 7	HE RICHARD LAU	JRENCE PARISH FOUNDATION

100,700

112,716

EIN: 13-1809330							
Investments Corporate Bonds Schedule							
Name of Bond	End of Year Book Value	End of Year Fair Market Value					

ETN: 12 1060520

INVESTMENTS-CORPORATE BONDS

Name: THE RICHARD LAURENCE PARISH FOUNDATION

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

INVESTMENTS-COMMON STOCK

INVESTMENTS-PREFERRED STOCK

<b>EIN:</b> 13-1869530		
Name of Stock	End of Year Book	E

End of Year Fair

614,040

DLN: 93491178001129

value

802,536

26,775

Market Value

6,298,394

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

Name: THE RICHARD LAURENCE PARISH FOUNDATION **EIN:** 13-1869530

DIVIDENDS & INTEREST RECEIVABLE

FEDERAL INCOME TAX RECEIVABLE

Other Assets Schedule			
Description	Beginning of Year - Book Value	End of Year - Book Value	End of Year Market Va

26,944

1,851

ar - Fair

DLN: 93491178001129

/alue

24,956

470

24,956

470

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN	: 93491178001129		
TY 2017 Other Expenses Schedule						
Name:	THE RICHARD	LAURENCE PARISH	H FOUNDATION			
EIN:	13-1869530					
Other Expenses Schedule						
Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes		
INVESTMENT FEES	22	22		22		
STORAGE	3,142	3,142		3,142		

POSTAGE

efile GRAPHIC print - DO NOT PROCE	SS As Filed Data	-	DLI	N: 93491178001129		
TY 2017 Taxes Schedule						
Na	me: THE RICHAR	D LAURENCE PAR	ISH FOUNDATION			
EIN: 13-1869530						
EIN: 13-1009330						
Category	Amount	Net Investment	Adjusted Net	Disbursements		
		Income	Income	for Charitable		
				Purposes		
FEDERAL EXCISE TAX	3,170	0		3,170		
NYS FILING FEE	250	250		250		