

For calendar year 2018, or tax year beginning 01-01-2018, and ending 12-31-2018

Name of foundation THE CELIA LIPTON FARRIS AND VICTOR W FARRIS FOUNDATION		A Employer identification number 59-2667398	
Number and street (or P.O. box number if mail is not delivered to street address) 2 LIBERTY SQUARE NO 500		Room/suite	B Telephone number (see instructions) (561) 841-6360
City or town, state or province, country, and ZIP or foreign postal code BOSTON, MA 02109		C If exemption application is pending, check here ▶ <input type="checkbox"/>	
G Check all that apply <input type="checkbox"/> Initial return <input type="checkbox"/> Final return <input type="checkbox"/> Address change <input type="checkbox"/> Initial return of a former public charity <input type="checkbox"/> Amended return <input type="checkbox"/> Name change		D 1. Foreign organizations, check here ▶ <input type="checkbox"/> 2. Foreign organizations meeting the 85% test, check here and attach computation ▶ <input type="checkbox"/>	
H Check type of organization <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		E If private foundation status was terminated under section 507(b)(1)(A), check here ▶ <input type="checkbox"/>	
I Fair market value of all assets at end of year (from Part II, col. (c), line 16) ▶ \$ 87,273,486		F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here ▶ <input type="checkbox"/>	
J Accounting method <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____ (Part I, column (d) must be on cash basis)			

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) (see instructions) )		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
Revenue	1 Contributions, gifts, grants, etc., received (attach schedule)				
	2 Check <input checked="" type="checkbox"/> if the foundation is <b>not</b> required to attach Sch. B . . . . .				
	3 Interest on savings and temporary cash investments				
	4 Dividends and interest from securities . . .	2,223,791	2,223,791		
	5a Gross rents . . . . .				
	b Net rental income or (loss)				
	6a Net gain or (loss) from sale of assets not on line 10	4,305,322			
	b Gross sales price for all assets on line 6a 21,016,953				
	7 Capital gain net income (from Part IV, line 2) . . .		4,305,322		
	8 Net short-term capital gain . . . . .				
	9 Income modifications . . . . .				
	10a Gross sales less returns and allowances				
Operating and Administrative Expenses	b Less Cost of goods sold				
	c Gross profit or (loss) (attach schedule) . . . . .				
	11 Other income (attach schedule) . . . . .	-55,007	-55,007		
	12 Total. Add lines 1 through 11 . . . . .	6,474,106	6,474,106		
	13 Compensation of officers, directors, trustees, etc	175,400	0		175,400
	14 Other employee salaries and wages . . . . .				
	15 Pension plans, employee benefits . . . . .	31,429	0		31,429
	16a Legal fees (attach schedule) . . . . .				
	b Accounting fees (attach schedule) . . . . .	15,346	15,346		0
	c Other professional fees (attach schedule) . . . . .	471,573	471,573		0
	17 Interest . . . . .				
	18 Taxes (attach schedule) (see instructions) . . .	66,862	56,044		10,818
	19 Depreciation (attach schedule) and depletion . . .				
	20 Occupancy . . . . .	46,008	0		0
	21 Travel, conferences, and meetings . . . . .	31,550	0		0
	22 Printing and publications . . . . .				
	23 Other expenses (attach schedule) . . . . .	68,230	13,429		54,821
	24 Total operating and administrative expenses. Add lines 13 through 23 . . . . .	906,398	556,392		272,468
	25 Contributions, gifts, grants paid . . . . .	4,272,230			4,272,230
	26 Total expenses and disbursements. Add lines 24 and 25	5,178,628	556,392		4,544,698
	27 Subtract line 26 from line 12				
	a Excess of revenue over expenses and disbursements	1,295,478			
	b Net investment income (if negative, enter -0-)		5,917,714		
c Adjusted net income (if negative, enter -0-) . . .					

Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)			
		Beginning of year (a) Book Value	End of year (b) Book Value (c) Fair Market Value		
Assets	1	Cash—non-interest-bearing . . . . .	2,493,082	4,335,773	4,335,773
	2	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 (attach schedule) (see instructions) . . . . .			
	7	Other notes and loans receivable (attach schedule) ▶ _____ Less allowance for doubtful accounts ▶ _____			
	8	Inventories for sale or use . . . . .			
	9	Prepaid expenses and deferred charges . . . . .			
	10a	Investments—U S and state government obligations (attach schedule)			
	b	Investments—corporate stock (attach schedule) . . . . .			
	c	Investments—corporate bonds (attach schedule) . . . . .			
	11	Investments—land, buildings, and equipment basis ▶ _____ Less accumulated depreciation (attach schedule) ▶ _____			
	12	Investments—mortgage loans . . . . .			
	13	Investments—other (attach schedule) . . . . .	80,037,083	79,489,870	82,937,713
	14	Land, buildings, and equipment basis ▶ _____ Less accumulated depreciation (attach schedule) ▶ _____			
15	Other assets (describe ▶ _____)				
16	<b>Total assets</b> (to be completed by all filers—see the instructions Also, see page 1, item I)	82,530,165	83,825,643	87,273,486	
Liabilities	17	Accounts payable and accrued expenses . . . . .			
	18	Grants payable . . . . .			
	19	Deferred revenue . . . . .			
	20	Loans from officers, directors, trustees, and other disqualified persons			
	21	Mortgages and other notes payable (attach schedule) . . . . .			
	22	Other liabilities (describe ▶ _____)			
	23	<b>Total liabilities</b> (add lines 17 through 22) . . . . .	0	0	
Net Assets or Fund Balances	<b>Foundations that follow SFAS 117, check here ▶ <input type="checkbox"/></b> <b>and complete lines 24 through 26 and lines 30 and 31.</b>				
	24	Unrestricted . . . . .			
	25	Temporarily restricted . . . . .			
	26	Permanently restricted . . . . .			
	<b>Foundations that do not follow SFAS 117, check here ▶ <input checked="" type="checkbox"/></b> <b>and complete lines 27 through 31.</b>				
	27	Capital stock, trust principal, or current funds . . . . .	82,530,165	83,825,643	
	28	Paid-in or capital surplus, or land, bldg , and equipment fund	0	0	
	29	Retained earnings, accumulated income, endowment, or other funds	0	0	
30	<b>Total net assets or fund balances</b> (see instructions) . . . . .	82,530,165	83,825,643		
31	<b>Total liabilities and net assets/fund balances</b> (see instructions) .	82,530,165	83,825,643		

Part III Analysis of Changes in Net Assets or Fund Balances			
1	Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)	1	82,530,165
2	Enter amount from Part I, line 27a . . . . .	2	1,295,478
3	Other increases not included in line 2 (itemize) ▶ _____	3	0
4	Add lines 1, 2, and 3 . . . . .	4	83,825,643
5	Decreases not included in line 2 (itemize) ▶ _____	5	0
6	Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30 .	6	83,825,643

**Part IV Capital Gains and Losses for Tax on Investment Income**

(a) List and describe the kind(s) of property sold (e g , real estate, 2-story brick warehouse, or common stock, 200 shs MLC Co )		(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr )	(d) Date sold (mo , day, yr )
<b>1 a</b> ABBOTT DOWNING		P		2018-12-31
<b>b</b> ABBOTT DOWNING		P		2018-12-31
<b>c</b> ABBOTT DOWNING		P		2018-12-31
<b>d</b> PASS THROUGH GAIN		P		2018-12-31
<b>e</b> ABBOTT DOWNING		P		2018-12-31

  

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
<b>a</b> 2,106,262		2,157,213	-50,951
<b>b</b> 14,600,447		12,492,145	2,108,302
<b>c</b> 4,025,844		2,062,273	1,963,571
<b>d</b> 49,516			49,516
<b>e</b> 234,884			234,884

  

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69

(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	(l) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
<b>a</b>			-50,951
<b>b</b>			2,108,302
<b>c</b>			1,963,571
<b>d</b>			49,516
<b>e</b>			234,884

  

<b>2</b> Capital gain net income or (net capital loss)	If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7	<b>2</b>	4,305,322
<b>3</b> Net short-term capital gain or (loss) as defined in sections 1222(5) and (6) If gain, also enter in Part I, line 8, column (c) (see instructions) If (loss), enter -0- in Part I, line 8		<b>3</b>	

**Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income**

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income )

If section 4940(d)(2) applies, leave this part blank

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period?

☐ Yes☒ No

If "Yes," the foundation does not qualify under section 4940(e) Do not complete this part

**1** Enter the appropriate amount in each column for each year, see instructions before making any entries

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col (b) divided by col (c))
2017	4,491,797	93,147,348	0 048222
2016	4,476,291	88,141,560	0 050785
2015	4,653,407	84,495,045	0 055073
2014	4,639,393	89,643,117	0 051754
2013	1,509,832	84,846,739	0 017795

  

<b>2</b> Total of line 1, column (d)	<b>2</b>	0 223629
<b>3</b> Average distribution ratio for the 5-year base period—divide the total on line 2 by 5 0, or by the number of years the foundation has been in existence if less than 5 years	<b>3</b>	0 044726
<b>4</b> Enter the net value of noncharitable-use assets for 2018 from Part X, line 5	<b>4</b>	93,259,191
<b>5</b> Multiply line 4 by line 3	<b>5</b>	4,171,111
<b>6</b> Enter 1% of net investment income (1% of Part I, line 27b)	<b>6</b>	59,177
<b>7</b> Add lines 5 and 6	<b>7</b>	4,230,288
<b>8</b> Enter qualifying distributions from Part XII, line 4	<b>8</b>	4,544,698

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate See the Part VI instructions

**Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see instructions)**

<b>1a</b>	Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter "N/A" on line 1 Date of ruling or determination letter _____ (attach copy of letter if necessary—see instructions)		
<b>b</b>	Domestic foundations that meet the section 4940(e) requirements in Part V, check here <input checked="" type="checkbox"/> and enter 1% of Part I, line 27b . . . . .	<b>1</b>	59,177
<b>c</b>	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col (b)		
<b>2</b>	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	<b>2</b>	0
<b>3</b>	Add lines 1 and 2. . . . .	<b>3</b>	59,177
<b>4</b>	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	<b>4</b>	0
<b>5</b>	<b>Tax based on investment income.</b> Subtract line 4 from line 3. If zero or less, enter -0- . . . . .	<b>5</b>	59,177
<b>6</b>	Credits/Payments		
<b>a</b>	2018 estimated tax payments and 2017 overpayment credited to 2018	<b>6a</b>	30,572
<b>b</b>	Exempt foreign organizations—tax withheld at source . . . . .	<b>6b</b>	
<b>c</b>	Tax paid with application for extension of time to file (Form 8868) . . . . .	<b>6c</b>	0
<b>d</b>	Backup withholding erroneously withheld . . . . .	<b>6d</b>	0
<b>7</b>	Total credits and payments. Add lines 6a through 6d. . . . .	<b>7</b>	30,572
<b>8</b>	Enter any <b>penalty</b> for underpayment of estimated tax. Check here <input type="checkbox"/> if Form 2220 is attached	<b>8</b>	0
<b>9</b>	<b>Tax due.</b> If the total of lines 5 and 8 is more than line 7, enter <b>amount owed</b> . . . . .	<b>9</b>	28,605
<b>10</b>	<b>Overpayment.</b> If line 7 is more than the total of lines 5 and 8, enter the <b>amount overpaid</b> . . . . .	<b>10</b>	
<b>11</b>	Enter the amount of line 10 to be <b>Credited to 2019 estimated tax</b> <input type="checkbox"/> <b>Refunded</b> <input type="checkbox"/>	<b>11</b>	

**Part VII-A Statements Regarding Activities**

	Yes	No
<b>1a</b> During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? . . . . .	<b>1a</b>	No
<b>b</b> Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? (see Instructions for definition). . . . . <i>If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities</i>	<b>1b</b>	No
<b>c</b> Did the foundation file <b>Form 1120-POL</b> for this year? . . . . .	<b>1c</b>	No
<b>d</b> Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year (1) On the foundation <input type="checkbox"/> \$ 0 (2) On foundation managers <input type="checkbox"/> \$ 0		
<b>e</b> Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers <input type="checkbox"/> \$ 0		
<b>2</b> Has the foundation engaged in any activities that have not previously been reported to the IRS? . . . . . <i>If "Yes," attach a detailed description of the activities</i>	<b>2</b>	No
<b>3</b> 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? <i>If "Yes," attach a conformed copy of the changes</i> . . . . .	<b>3</b>	No
<b>4a</b> Did the foundation have unrelated business gross income of \$1,000 or more during the year? . . . . .	<b>4a</b>	No
<b>b</b> If "Yes," has it filed a tax return on <b>Form 990-T</b> for this year? . . . . .	<b>4b</b>	
<b>5</b> Was there a liquidation, termination, dissolution, or substantial contraction during the year? . . . . . <i>If "Yes," attach the statement required by General Instruction T</i>	<b>5</b>	No
<b>6</b> 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? . . . . .	<b>6</b>	Yes
<b>7</b> Did the foundation have at least \$5,000 in assets at any time during the year? <i>If "Yes," complete Part II, col (c), and Part XV</i> . . . . .	<b>7</b>	Yes
<b>8a</b> Enter the states to which the foundation reports or with which it is registered (see instructions) <input type="checkbox"/> FL		
<b>b</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? <i>If "No," attach explanation</i> .	<b>8b</b>	Yes
<b>9</b> Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2018 or the taxable year beginning in 2018? See the instructions for Part XIV <i>If "Yes," complete Part XIV</i> . . . . .	<b>9</b>	No
<b>10</b> Did any persons become substantial contributors during the tax year? <i>If "Yes," attach a schedule listing their names and addresses</i> . . . . .	<b>10</b>	No

**Part VII-A Statements Regarding Activities** (continued)

<b>11</b>	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule. See instructions. . . . .	<b>11</b>		<b>No</b>
<b>12</b>	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement. See instructions. . . . .	<b>12</b>	<b>Yes</b>	
<b>13</b>	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address <b>FARRISFDN.ORG</b>	<b>13</b>	<b>Yes</b>	
<b>14</b>	The books are in care of <b>ALFONSO PERILLO</b> Telephone no <b>(617) 426-7080</b>			

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<b>15</b>	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of <b>Form 1041</b> —check here . . . . . <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the year . . . . . <b>15</b>			
<b>16</b>	At any time during calendar year 2018, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? . . . . . See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes", enter the name of the foreign country <b>▶</b>	<b>16</b>	<b>Yes</b>	<b>No</b>

**Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required**

**File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.**

<b>1a</b>	During the year did the foundation (either directly or indirectly)		<b>Yes</b>	<b>No</b>
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(6) Agree to pay money or property to a government official? ( <b>Exception.</b> Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days). <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
<b>b</b>	If any answer is "Yes" to 1a(1)–(6), did <b>any</b> of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions. . . . . Organizations relying on a current notice regarding disaster assistance check here. <input type="checkbox"/>	<b>1b</b>		
<b>c</b>	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2018? . . . . .	<b>1c</b>		<b>No</b>
<b>2</b>	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5))			
<b>a</b>	At the end of tax year 2018, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2018? . . . . . <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "Yes," list the years <b>▶</b> 20____, 20____, 20____, 20____			
<b>b</b>	Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to <b>all</b> years listed, answer "No" and attach statement—see instructions). . . . .	<b>2b</b>		
<b>c</b>	If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here <b>▶</b> 20____, 20____, 20____, 20____			
<b>3a</b>	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? . . . . . <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
<b>b</b>	If "Yes," did it have excess business holdings in 2018 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2018). . . . .	<b>3b</b>		
<b>4a</b>	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	<b>4a</b>		<b>No</b>
<b>b</b>	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2018?	<b>4b</b>		<b>No</b>

**Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required** (continued)

<b>5a</b>	During the year did the foundation pay or incur any amount to		<b>Yes</b>	<b>No</b>
(1)	Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(2)	Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(3)	Provide a grant to an individual for travel, study, or other similar purposes?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(4)	Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? See instructions.	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(5)	Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
<b>b</b>	If any answer is "Yes" to 5a(1)–(5), did <b>any</b> of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance? See instructions.		<b>5b</b>	
	Organizations relying on a current notice regarding disaster assistance check here.	<input type="checkbox"/>		
<b>c</b>	If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? If "Yes," attach the statement required by Regulations section 53.4945–5(d)	<input type="checkbox"/> Yes <input type="checkbox"/> No		
<b>6a</b>	Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<b>6b</b>	<b>No</b>
<b>b</b>	Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? If "Yes" to 6b, file Form 8870			
<b>7a</b>	At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<b>7b</b>	
<b>b</b>	If yes, did the foundation receive any proceeds or have any net income attributable to the transaction?			
<b>8</b>	Is the foundation subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment during the year?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		

**Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors**

<b>1 List all officers, directors, trustees, foundation managers and their compensation. See instructions</b>				
(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
See Additional Data Table				
<b>2 Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, enter "NONE."</b>				
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE				
<b>Total number of other employees paid over \$50,000.</b>				<b>0</b>

**Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)**
**3 Five highest-paid independent contractors for professional services (see instructions). If none, enter "NONE".**

(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
ABBOT DOWNING	INVESTMENT SERVICES	471,573
255 S COUNTY ROAD STE 200		
PALM BEACH, FL 33480		
Total number of others receiving over \$50,000 for professional services. . . . .		0

**Part IX-A Summary of Direct Charitable Activities**

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.

	Expenses
<b>1</b>	
<b>2</b>	
<b>3</b>	
<b>4</b>	

**Part IX-B Summary of Program-Related Investments (see instructions)**

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
<b>1</b>	
<b>2</b>	
All other program-related investments. See instructions.	
<b>3</b>	
Total. Add lines 1 through 3 . . . . .	0

**Part X Minimum Investment Return** (All domestic foundations must complete this part. Foreign foundations, see instructions.)

<b>1</b>	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes		
<b>a</b>	Average monthly fair market value of securities.	<b>1a</b>	91,742,929
<b>b</b>	Average of monthly cash balances.	<b>1b</b>	2,936,453
<b>c</b>	Fair market value of all other assets (see instructions).	<b>1c</b>	0
<b>d</b>	<b>Total</b> (add lines 1a, b, and c).	<b>1d</b>	94,679,382
<b>e</b>	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation).	<b>1e</b>	0
<b>2</b>	Acquisition indebtedness applicable to line 1 assets.	<b>2</b>	0
<b>3</b>	Subtract line 2 from line 1d.	<b>3</b>	94,679,382
<b>4</b>	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions).	<b>4</b>	1,420,191
<b>5</b>	<b>Net value of noncharitable-use assets.</b> Subtract line 4 from line 3. Enter here and on Part V, line 4.	<b>5</b>	93,259,191
<b>6</b>	<b>Minimum investment return.</b> Enter 5% of line 5.	<b>6</b>	4,662,960

**Part XI Distributable Amount** (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here ☐ and do not complete this part.)

<b>1</b>	Minimum investment return from Part X, line 6.	<b>1</b>	4,662,960
<b>2a</b>	Tax on investment income for 2018 from Part VI, line 5.	<b>2a</b>	59,177
<b>b</b>	Income tax for 2018 (This does not include the tax from Part VI).	<b>2b</b>	
<b>c</b>	Add lines 2a and 2b.	<b>2c</b>	59,177
<b>3</b>	Distributable amount before adjustments. Subtract line 2c from line 1.	<b>3</b>	4,603,783
<b>4</b>	Recoveries of amounts treated as qualifying distributions.	<b>4</b>	0
<b>5</b>	Add lines 3 and 4.	<b>5</b>	4,603,783
<b>6</b>	Deduction from distributable amount (see instructions).	<b>6</b>	0
<b>7</b>	<b>Distributable amount</b> as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1.	<b>7</b>	4,603,783

**Part XII Qualifying Distributions** (see instructions)

<b>1</b>	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
<b>a</b>	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26.	<b>1a</b>	4,544,698
<b>b</b>	Program-related investments—total from Part IX-B.	<b>1b</b>	0
<b>2</b>	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes.	<b>2</b>	
<b>3</b>	Amounts set aside for specific charitable projects that satisfy the		
<b>a</b>	Suitability test (prior IRS approval required).	<b>3a</b>	
<b>b</b>	Cash distribution test (attach the required schedule).	<b>3b</b>	
<b>4</b>	<b>Qualifying distributions.</b> Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4.	<b>4</b>	4,544,698
<b>5</b>	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b. See instructions.	<b>5</b>	59,177
<b>6</b>	<b>Adjusted qualifying distributions.</b> Subtract line 5 from line 4.	<b>6</b>	4,485,521

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



**Part XIII Undistributed Income** (see instructions)

	(a) Corpus	(b) Years prior to 2017	(c) 2017	(d) 2018
<b>1</b> Distributable amount for 2018 from Part XI, line 7				4,603,783
<b>2</b> Undistributed income, if any, as of the end of 2018				
<b>a</b> Enter amount for 2017 only. . . . .			3,080,861	
<b>b</b> Total for prior years 20____, 20____, 20____		0		
<b>3</b> Excess distributions carryover, if any, to 2018				
<b>a</b> From 2013. . . . .				
<b>b</b> From 2014. . . . .				
<b>c</b> From 2015. . . . .				
<b>d</b> From 2016. . . . .				
<b>e</b> From 2017. . . . .				
<b>f</b> Total of lines 3a through e. . . . .	0			
<b>4</b> Qualifying distributions for 2018 from Part XII, line 4 ▶ \$ 4,544,698				
<b>a</b> Applied to 2017, but not more than line 2a			3,080,861	
<b>b</b> Applied to undistributed income of prior years (Election required—see instructions). . . . .		0		
<b>c</b> Treated as distributions out of corpus (Election required—see instructions). . . . .	0			
<b>d</b> Applied to 2018 distributable amount. . . . .				1,463,837
<b>e</b> Remaining amount distributed out of corpus	0			
<b>5</b> Excess distributions carryover applied to 2018 (If an amount appears in column (d), the same amount must be shown in column (a) )	0			0
<b>6</b> Enter the net total of each column as indicated below:				
<b>a</b> Corpus Add lines 3f, 4c, and 4e Subtract line 5	0			
<b>b</b> Prior years' undistributed income Subtract line 4b from line 2b . . . . .		0		
<b>c</b> 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		
<b>d</b> Subtract line 6c from line 6b Taxable amount—see instructions . . . . .		0		
<b>e</b> Undistributed income for 2017 Subtract line 4a from line 2a Taxable amount—see instructions . . . . .			0	
<b>f</b> Undistributed income for 2018 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2019 . . . . .				3,139,946
<b>7</b> 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			
<b>8</b> Excess distributions carryover from 2013 not applied on line 5 or line 7 (see instructions). . . . .	0			
<b>9</b> Excess distributions carryover to 2019. Subtract lines 7 and 8 from line 6a . . . . .	0			
<b>10</b> Analysis of line 9				
<b>a</b> Excess from 2014. . . . .				
<b>b</b> Excess from 2015. . . . .				
<b>c</b> Excess from 2016. . . . .				
<b>d</b> Excess from 2017. . . . .				
<b>e</b> Excess from 2018. . . . .				

**Part XIV Private Operating Foundations** (see instructions and Part VII-A, question 9)

**1a** If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2018, enter the date of the ruling. . . . . ▶

**b** Check box to indicate whether the organization is a private operating foundation described in section ☐ 4942(j)(3) or ☐ 4942(j)(5)

	Tax year	Prior 3 years			(e) Total
	(a) 2018	(b) 2017	(c) 2016	(d) 2015	
<b>2a</b> Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed . . . . .					
<b>b</b> 85% of line 2a . . . . .					
<b>c</b> Qualifying distributions from Part XII, line 4 for each year listed . . . . .					
<b>d</b> Amounts included in line 2c not used directly for active conduct of exempt activities . . . . .					
<b>e</b> Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c . . . . .					
<b>3</b> Complete 3a, b, or c for the alternative test relied upon					
<b>a</b> "Assets" alternative test—enter					
<b>(1)</b> Value of all assets . . . . .					
<b>(2)</b> Value of assets qualifying under section 4942(j)(3)(B)(i)					
<b>b</b> "Endowment" alternative test— enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed. . . . .					
<b>c</b> "Support" alternative test—enter					
<b>(1)</b> Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties) . . . . .					
<b>(2)</b> Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii). . . . .					
<b>(3)</b> Largest amount of support from an exempt organization					
<b>(4)</b> Gross investment income					

**Part XV Supplementary Information (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year—see instructions.)**

**1 Information Regarding Foundation Managers:**

**a** List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000) (See section 507(d)(2) )

**b** List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest

**2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:**

Check here ☒ if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. to individuals or organizations under other conditions, complete items 2a, b, c, and d. See instructions.

**a** The name, address, and telephone number or email address of the person to whom applications should be addressed

**b** The form in which applications should be submitted and information and materials they should include

**c** Any submission deadlines

**d** Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors

**Part XV** **Supplementary Information** (continued)**3 Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i> See Additional Data Table				
<b>Total . . . . .</b>			<b>▶ 3a</b>	
<b>b</b> <i>Approved for future payment</i>				
<b>Total . . . . .</b>			<b>▶ 3b</b>	

Enter gross amounts unless otherwise indicated

Line No.	Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes) (See instructions)
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Form **990-PF** (2018)

**Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations**

<b>1</b> Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?		<b>Yes</b>	<b>No</b>
<b>a</b> Transfers from the reporting foundation to a noncharitable exempt organization of			
<b>(1)</b> Cash.	<b>1a(1)</b>		<b>No</b>
<b>(2)</b> Other assets.	<b>1a(2)</b>		<b>No</b>
<b>b</b> Other transactions			
<b>(1)</b> Sales of assets to a noncharitable exempt organization.	<b>1b(1)</b>		<b>No</b>
<b>(2)</b> Purchases of assets from a noncharitable exempt organization.	<b>1b(2)</b>		<b>No</b>
<b>(3)</b> Rental of facilities, equipment, or other assets.	<b>1b(3)</b>		<b>No</b>
<b>(4)</b> Reimbursement arrangements.	<b>1b(4)</b>		<b>No</b>
<b>(5)</b> Loans or loan guarantees.	<b>1b(5)</b>		<b>No</b>
<b>(6)</b> Performance of services or membership or fundraising solicitations.	<b>1b(6)</b>		<b>No</b>
<b>c</b> Sharing of facilities, equipment, mailing lists, other assets, or paid employees.	<b>1c</b>		<b>No</b>
<b>d</b> If the answer to any of the above is "Yes," complete the following schedule. Column <b>(b)</b> should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column <b>(d)</b> the value of the goods, other assets, or services received.			

(a) Line No	(b) Amount involved	(c) Name of noncharitable exempt organization	(d) Description of transfers, transactions, and sharing arrangements

**2a** Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) (other than section 501(c)(3)) or in section 527? ☐ Yes ☒ No

**b** If "Yes," complete the following schedule

(a) Name of organization	(b) Type of organization	(c) Description of relationship

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

<b>Sign Here</b>	*****	2019-11-15	*****	May the IRS discuss this return with the preparer shown below? (see instr )? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
	Signature of officer or trustee	Date	Title	

<b>Paid Preparer Use Only</b>	Print/Type preparer's name	Preparer's Signature	Date	Check if self-employed <input type="checkbox"/>	PTIN
	RICHARD JUBACK				P00630706
	Firm's name ▶ TEMPLETON & COMPANY LLP Firm's address ▶ 222 LAKEVIEW AVENUE SUITE 1200 WEST PALM BEACH, FL 33401				

Form 990PF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation				
(a) Name and address	Title, and average hours per week (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
GEORGE F FARRIS	PRESIDENT 10 00	0	0	0
250 S AUSTRALIAN AVE 1403 WEST PALM BEACH, FL 33401				
ANDREW FARRIS	TREASURER 2 00	0	0	0
250 S AUSTRALIAN AVE 1403 WEST PALM BEACH, FL 33401				
CECILE VICTORIA FARRIS	TRUSTEE 1 00	0	0	0
250 S AUSTRALIAN AVE 1403 WEST PALM BEACH, FL 33401				
BRENT G HAGEY II	SECRETARY 2 00	0	0	0
250 S AUSTRALIAN AVE 1403 WEST PALM BEACH, FL 33401				
MARIAN RETTERER	TRUSTEE 1 00	0	0	0
250 S AUSTRALIAN AVE 1403 WEST PALM BEACH, FL 33401				
CHRISTINE KOEHN	EXECUTIVE DIRECTOR 40 00	175,400	31,429	0
250 S AUSTRALIAN AVE 1403 WEST PALM BEACH, FL 33401				
STEPHANIE R D'MEZA	TRUSTEE 1 00	0	0	0
250 S AUSTRALIAN AVE 1403 WEST PALM BEACH, FL 33401				
JAMIE RETTERER	TRUSTEE 1 00	0	0	0
250 S AUSTRALIAN AVE 1403 WEST PALM BEACH, FL 33401				
SAVANNA UNDERWOOD	TRUSTEE 1 00	0	0	0
250 S AUSTRALIAN AVE 1403 WEST PALM BEACH, FL 33401				

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 any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
1HTC6703 WESTWOOD BLVD W TAMARAC, FL 33321	NONE	501(C)(3)	1HTC REGIONAL PLAN	75,000
ALPERT JEWISH FAMILY AND CHILDRENS SERVICE 5841 CORPORATE WAY 200 WEST PALM BEACH, FL 33407	NONE	501(C)(3)	MENTAL HEALTH FIRST AID EXPANSION	5,000
ASPIRA OF FLORIDA INC 5913 SOUTH DIXIE HIGHWAY SUITE D WEST PALM BEACH, FL 33405	NONE	501(C)(3)	ASPIRA APPRENTICE PROGRAM	60,000
<b>Total . . . . . ▶ 3a</b>				4,272,230

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 any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
BLUE PLANET INTERNATIONAL EXPLORERS BAZAAR AND WRITERS' ROOM 6415 LAKE WORTH RD SUITE 303 GREENACRES, FL 33463	NONE	501(C)(3)	STORY AMBASSADORS / GROWING OUR REACH	92,000
CAREER SOURCE PALM BEACH COUNTY 3400 BELVEDERE ROAD WEST PALM BEACH, FL 33406	NONE	501(C)(3)	GATEWAY TO GERIATRIC HEALTHCARE CAREERS	204,000
CENTER FOR CHILD COUNSELING INC 7731 N MILITARY TRAIL SUITE 4 WEST PALM BEACH, FL 33410	NONE	501(C)(3)	FIGHTING ACES	100,000
<b>Total . . . . . ▶ 3a</b>				4,272,230



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 any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
CENTER FOR CREATIVE EDUCATION 425 24TH STREET WEST PALM BEACH, FL 33407	NONE	501(C)(3)	MEDIA ARTS PROGRAM	100,000
CENTER FOR DISASTER PHILANTHROPY INC 1201 CONNECTICUT AVE NW STE 300 WASHINGTON, DC 20036	NONE	501(C)(3)	2018 ATLANTIC HURRICANE SEASON RECOVERY	100,000
CHILDREN'S PLAYHOUSE INC 400 TRACY CIRCLE BOONE, NC 28607	NONE	501(C)(3)	GENERAL OPERATING SUPPORT	10,000
<b>Total . . . . . ▶ 3a</b>				4,272,230

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 any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
CHRISTIANS REACHING OUT TO SOCIETY 3677 23RD AVE SOUTH B-101 LAKE WORTH, FL 33461	NONE	501(C)(3)	COMMUNITY FOOD PANTRY PROGRAM	50,000
CITY HOUSE OF DELRAY BEACH P O BOX 8451 DELRAY BEACH, FL 33484	NONE	501(C)(3)	GENERAL OPERATING SUPPORT	16,667
COMMUNITY FOUNDATION FOR GREATER BUFFALO 726 EXCHANGE STREET STE 525 BUFFALO, NY 14210	NONE	501(C)(3)	GENERAL OPERATING SUPPORT	10,000
<b>Total . . . . . ▶ 3a</b>				4,272,230

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 any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
COMMUNITY FOUNDATION FOR GREATER BUFFALO 726 EXCHANGE STREET STE 525 BUFFALO, NY 14210	NONE	501(C)(3)	HOME COMMUNITY FUND	95,950
COMMUNITY FOUNDATION OF BROWARD 910 E LAS OLAS BLVD 200 FORT LAUDERDALE, FL 33301	NONE	501(C)(3)	HOME COMMUNITY FUND	203,000
COMMUNITY FOUNDATION OF BROWARD 910 E LAS OLAS BLVD 200 FORT LAUDERDALE, FL 33301	NONE	501(C)(3)	GENERAL OPERATING SUPPORT	10,000
<b>Total . . . . .</b>			<b>▶ 3a</b>	4,272,230

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 any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
COMMUNITY FOUNDATION OF NEW JERSEY 35 KNOX HILL RD MORRISTOWN, NJ 07960	NONE	501(C)(3)	HOME COMMUNITY FUND	95,950
COMMUNITY FOUNDATION OF NEW JERSEY 35 KNOX HILL RD MORRISTOWN, NJ 07960	NONE	501(C)(3)	GENERAL OPERATING SUPPORT	10,000
COMMUNITY FOUNDATION OF PBMC 700 S DIXIE HIGHWAY STE 200 WEST PALM BEACH, FL 33401	NONE	501(C)(3)	HOME COMMUNITY GRANT	101,000
<b>Total . . . . . ▶ 3a</b>				4,272,230

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 any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
FARM CAFE617 W KING STREET BOONE, NC 28607	NONE	501(C)(3)	GENERAL OPERATING SUPPORT	6,667
FEEDING SANTA FEPO BOX 31086 SANTA FE, NM 87594	NONE	501(C)(3)	GENERAL OPERATING SUPPORT	29,166
FLORIDA ATLANTIC UNIVERSITY FOUNDATION 777 GLADES ROAD ADM 295 BOCA RATON, FL 33431	NONE	501(C)(3)	INTEGRATED PRIMARY AND BEHAVIORAL HEALTH CARE	192,000
<b>Total . . . . . ▶ 3a</b>				4,272,230

**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 any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
FLORIDA ATLANTIC UNIVERSITY FOUNDATION 777 GLADES ROAD ADM 295 BOCA RATON, FL 33431	NONE	501(C)(3)	CROSS-DISCIPLINARY/INTER- GENERATIONAL "TECHNOLOGY TRANSLATION TEAMS"	100,000
FLORIDA COLLEGE ACCESS NETWORK 4202 E FOWLER AVE ALN 185 TAMPA, FL 33620	NONE	501(C)(3)	GENERAL OPERATING SUPPORT	10,000
FRIENDS OF CAMP GLEN GRAY 200 MIDVALE MOUNTAIN RD MAHWAH, NJ 07430	NONE	501(C)(3)	IMPROVEMENT PROJECT 2017	5,000
<b>Total . . . . . ▶ 3a</b>				4,272,230

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 any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
GOOD HEALTH FOUNDATION INC 1515 N FLAGLER DRIVE SUITE 101 WEST PALM BEACH, FL 33401	NONE	501(C)(3)	MOBILE HOMLESS HEALTH	100,000
HOLY FAMILY CHURCH 2330 SE MARIPOSA AVE PORT ST LUCIE, FL 34952	NONE	501(C)(3)	DUPITY, HAITI FUND	10,000
JUNIOR ACHIEVEMENT OF THE PALM BEACHES & TREASURE COAST 6903 VISTA PARKWAY NORTH SUITE 10 WEST PALM BEACH, FL 33411	NONE	501(C)(3)	JA PIVOT & PITCH	100,000
<b>Total . . . . .</b> ► <b>3a</b>				4,272,230

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 any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
KITCHEN ANGELS1222 SILER ROAD SANTE FE, NM 87507	NONE	501(C)(3)	GENERAL OPERATING SUPPORT	25,000
LORD'S PLACEPO BOX 3265 WEST PALM BEACH, FL 33402	NONE	501(C)(3)	SOCIAL ENTERPRISE PROGRAM	125,000
MAINE COMMUNITY FOUNDATION 50 MONUMENT WAY PORTLAND, ME 04101	NONE	501(C)(3)	HOME COMMUNITY FUND	212,500
<b>Total . . . . . ▶ 3a</b>				4,272,230



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 any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
MAX PLANCK FLORIDA INSTITUTE 1 MAX PLANCK WAY JUPITER, FL 33458	NONE	501(C)(3)	IMPRS FOR BRAINS AND BEHAVIOR FELLOWSHIP	75,000
MEALS ON WHEELS OF THE PALM BEACHES INC PO BOX 247 WEST PALM BEACH, FL 33402	NONE	501(C)(3)	FURTHERING THE REACH OF MOWPB	200,000
MILAGRO CENTER695 AUBURN AVE DELRAY BEACH, FL 33444	NONE	501(C)(3)	MILAGRO MIDDLE SCHOOL PROGRAM	50,000
<b>Total . . . . . ▶ 3a</b>				4,272,230

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 any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
NORTH CAROLINA COMMUNITY FOUNDATION 3737 GLENWOOD AVE 460 RALEIGH, NC 27612	NONE	501(C)(3)	HOME COMMUNITY FUND	204,000
PALM BEACH COUNTY FOOD BANK 525 GATOR DRIVE LANTANA, FL 33462	NONE	501(C)(3)	FOOD DISTRIBUTION AND FOOD4OURKIDS	100,000
PALM BEACH COUNTY FOOD BANK 525 GATOR DRIVE LANTANA, FL 33462	NONE	501(C)(3)	INCREASING IMPACT IN PBC	100,000
<b>Total . . . . .</b> ► <b>3a</b>				4,272,230

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 any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
PALM HEALTHCARE FOUNDATION 700 S DIXIE HIGHWAY STE 205 WEST PALM BEACH, FL 33401	NONE	501(C)(3)	PBC BEHAVIORAL HEALTH STRATEGIC PLAN IMPLEMENTATION CONSULTANT	75,000
PATH TO COLLEGEPO BOX 487 LAKE WORTH, FL 33460	NONE	501(C)(3)	GENERAL OPERATING SUPPORT	5,000
PATHWAYS TO PROSPERITY 900 NORTH SEACREST BLVD BOYNTON BEACH, FL 33435	NONE	501(C)(3)	CIRCLES PBC	25,000
<b>Total . . . . . ▶ 3a</b>				4,272,230

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Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
PLANNED PARENTHOOD OF SOUTH FLORIDA AND THE TREASURE COAST 2300 N FLORIDA MANGO ROAD WEST PALM BEACH, FL 33409	NONE	501(C)(3)	CUIDATE (TAKE CARE OF YOURSELF) PROGRAM	61,667
QUIET GIVERSPO BOX 95 BOONE, NC 28607	NONE	501(C)(3)	GENERAL OPERATING SUPPORT	40,000
REGENTS OF THE UNIVERSITY OF MICHIGAN 503 THOMPSON STREET ANN ARBOR, MI 48109	NONE	501(C)(3)	ROBERT KAHN FELLOWSHIP FOR THE SCIENTIFIC STUDENT OF SOCIAL	25,000
<b>Total . . . . .</b> ► <b>3a</b>				4,272,230

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 any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
SANTA FE COMMUNITY FOUNDATION PO BOX 1827 SANTA FE, NM 87505	NONE	501(C)(3)	HOME COMMUNITY FUND	203,000
TAKE STOCK IN CHILDREN 1896 PALM BEACH BLVD 103 WEST PALM BEACH, FL 33409	NONE	501(C)(3)	COLLEGE RETENTION SERVICES	50,000
THE PALM BEACH STATE COLLEGE FOUNDATION INC 4200 S CONGRESS AVENUE LAKE WORTH, FL 33461	NONE	501(C)(3)	ONE SOURCE CENTER	125,000
<b>Total . . . . . ▶ 3a</b>				4,272,230

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 any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
THE PALM BEACH STATE COLLEGE FOUNDATION INC 4200 S CONGRESS AVENUE LAKE WORTH, FL 33461	NONE	501(C)(3)	AMP COACHING PROGRAM	15,000
THE SCRIPPS RESEARCH INSTITUTE 120 SCRIPPS WAY 4B2 JUPITER, FL 33458	NONE	501(C)(3)	FARRIS FOUNDATION FELLOWSHIP	62,163
THE SCRIPPS RESEARCH INSTITUTE 120 SCRIPPS WAY 4B2 JUPITER, FL 33458	NONE	501(C)(3)	FARRIS FOUNDATION FELLOWSHIP ENDOWMENT	145,000
<b>Total . . . . .</b> ► <b>3a</b>				4,272,230

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Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
TRUSTEES OF PRINCETON UNIVERSITY 701 CARNEGIE CTR PRINCETON, NJ 08540	NONE	501(C)(3)	GENERAL OPERATING SUPPORT	10,000
TRUSTEES OF UNIVERSITY OF PENNSYLVANIA 3451 WALNUT ST PHILADELPHIA, PA 19104	NONE	501(C)(3)	GENERAL OPERATING SUPPORT	10,000
UNITED WAY OF PALM BEACH COUNTY INC 477 ROSEMARY AVE SUITE 230 WEST PALM BEACH, FL 33401	NONE	501(C)(3)	ACHIEVE PALM BEACH COUNTY	100,000
<b>Total . . . . . ▶ 3a</b>				4,272,230

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 any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
UNITED WAY OF PALM BEACH COUNTY INC 477 ROSEMARY AVE SUITE 230 WEST PALM BEACH, FL 33401	NONE	501(C)(3)	HUNGER RELIEF EXECUTIVE AND PLAN ACTIVITIES	100,000
UNITED WAY OF PALM BEACH COUNTY INC 477 ROSEMARY AVE SUITE 230 WEST PALM BEACH, FL 33401	NONE	501(C)(3)	HUNGER RELIEF INITIATIVE TEAM PROJECTS	5,000
UNITED WAY OF PALM BEACH COUNTY INC 477 ROSEMARY AVE SUITE 230 WEST PALM BEACH, FL 33401	NONE	501(C)(3)	STUDENT URGENT RELIEF FUND	10,000
<b>Total . . . . . ▶ 3a</b>				4,272,230



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 any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
UNIVERSITY NOW DAY NURSERY 171 BROADMEAD PRINCETON, NJ 08540	NONE	501(C)(3)	TUITION ASSISTANCE FUND AND OTHER SUPPORT	25,000
URBAN LEAGUE OF PALM BEACH COUNTY 1700 N AUSTRALIAN AVENUE WEST PALM BEACH, FL 33407	NONE	501(C)(3)	PROJECT READY STEM	100,000
VITA NOVA INC 2724 N AUSTRALIAN AVE WEST PALM BEACH, FL 33407	NONE	501(C)(3)	THE SPOT	75,000
<b>Total . . . . .</b> ► <b>3a</b>				4,272,230

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 any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
YALE UNIVERSITYP O BOX 2038 NEW HAVEN, CT 06521	NONE	501(C)(3)	YALE CANCER CENTER ENDOWMENT PROJECT	10,000
YOUTHWORKS 2 PINE TREE DRIVE SUITE 250 ARDEN HILLS, MN 55112	NONE	501(C)(3)	GENERAL OPERATING SUPPORT	12,500
<b>Total . . . . . ▶ 3a</b>				4,272,230

**TY 2018 Accounting Fees Schedule**

**Name:** THE CELIA LIPTON FARRIS AND VICTOR W  
FARRIS FOUNDATION

**EIN:** 59-2667398

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
ACCOUNTING	15,346	15,346		0

**TY 2018 Investments - Other Schedule**

**Name:** THE CELIA LIPTON FARRIS AND VICTOR W  
FARRIS FOUNDATION

**EIN:** 59-2667398

**Investments Other Schedule 2**

Category/ Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value
ABBOT DOWNING - FIXED INCOME	AT COST	25,057,466	24,232,553
ABBOT DOWNING - EQUITIES	AT COST	34,240,568	37,379,682
ABBOT DOWNING - COMPLEMENTARY STRATEGIES	AT COST	12,157,009	15,080,923
ABBOT DOWNING - REAL ASSETS	AT COST	8,034,827	6,244,555

**TY 2018 Other Expenses Schedule**

**Name:** THE CELIA LIPTON FARRIS AND VICTOR W  
FARRIS FOUNDATION

**EIN:** 59-2667398

**Other Expenses Schedule**

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
OFFICE AND OTHER EXPENSES	10,457	0		10,457
INSURANCE	5,100	0		5,100
DUES	12,515	0		12,515
TELEPHONE	3,153	0		3,153
PASS THRU DEDUCTIONS FROM INVESTMENT PARTNERSHIP K-1	13,429	13,429		0
WEBSITE AND COMPUTER EXPENSE	19,113	0		19,133
GRANTMAKING SOFTWARE	4,463	0		4,463

**TY 2018 Other Income Schedule**

**Name:** THE CELIA LIPTON FARRIS AND VICTOR W  
FARRIS FOUNDATION

**EIN:** 59-2667398

**Other Income Schedule**

Description	Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income
LAZARD GLOBAL FIXED INCOME K-1	-55,007	-55,007	-55,007

**TY 2018 Other Professional Fees Schedule**

**Name:** THE CELIA LIPTON FARRIS AND VICTOR W  
FARRIS FOUNDATION

**EIN:** 59-2667398

<b>Category</b>	<b>Amount</b>	<b>Net Investment Income</b>	<b>Adjusted Net Income</b>	<b>Disbursements for Charitable Purposes</b>
INVESTMENT MANAGEMENT FEES	452,268	452,268		0
INVESTMENT FEES	19,305	19,305		0

**TY 2018 Taxes Schedule**

**Name:** THE CELIA LIPTON FARRIS AND VICTOR W  
FARRIS FOUNDATION

**EIN:** 59-2667398

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
PAYROLL TAXES	10,757	0		10,757
FOREIGN TAXES	56,044	56,044		0
TAXES - OTHER	61	0		61