Department of the Treasury Internal Revenue Service

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

Do not enter social security numbers on this form as it may be made public.
Go to www.irs.gov/Form990PF for instructions and the latest information.

For	cale	ndar year 2018 or tax year beginning	NOV	14, 2018	` , and e	nding	DEC 31, 2018		
Na	me o	f foundation			-		A Employer identification	number	
7	NG	ELAKIS CHARITABLE FOU	IND.	ATION		•	83-2748427	,	
		and street (or PO box number if mail is not delivered to				Room/suite	B Telephone number	, -	<u> </u>
_4	10	MORRIS AVENUE		<u> </u>			2152867580		≟1
		town, state or province, country, and ZIP or for N MAWR, PA 19010	eign p	ostal code			C If exemption application is p	ending, check here	コレ
		k all that apply: X Initial return		Initial return of a f	ormer public o	harity	D 1. Foreign organizations	s, check here	
		Final return		. Amended reţurn		,	3 5	ations the REGG test	T
		Address change	`	Name change		• •	2. Foreign organizations me check here and attach co	mputation -	
H	_			cempt private foundation	\cap	U	E If private foundation sta		_
		ection 4947(a)(1) nonexempt charitable trust	_	Other taxable private found			under section 507(b)(1)	e.	
		· I -		ng method: X Cash ther (specify)	Accr	uai	F If the foundation is in a under section 507(b)(1)		٦
		Part II, col. (c), line 16) L 11,378,274. (Part I			ıs.)	•	under Section 307(b)(1)	(b), check here	_
	ârt;l	Analysis of Revenue and Expenses		(a) Revenue and		vestment	(c) Adjusted net	(d) Disbursements	
	1-1	(The total of amounts in columns (b), (c), and (d) may necessarily equal the amounts in column (a))	not ,	expenses per books	inco		income	for charitable purposes (cash basis only)	<u>.</u> ,
	1	Contributions, gifts, grants, etc., received		11,928,372.					
V	2	Check If the foundation is not required to attach Sc	hВ,						
$\mathcal{X}_{\mathcal{X}}$	3	hiterest on savings and temporary cash investments			<u> </u>	202			\$500 1200
U	4	Dividends and interest from securities			ļ	323.			<u>⊁778</u> [088]
•		Gross rents	,		DIN ASS.	e e e e e e e e e e e e e e e e e e e		以原数的政治。	30/W
	1 .	Net rental income or (loss) Net gain or (loss) from sale of assets not on line 10		A STATE AS A WASHING A SEA WILL ALTON.					
9	D .	Cross sales price for all assets not on line to assets on line 6a			(A) (A) (A) (A)				Ñ
Š	7	Capital gain net income (from Part IV, line 2)				0.		37 4. 232.232	
۵		Net short-term capital gain		建筑设置设置	經染的影			的是非洲的	830
	9	Income modifications		学行动和学生学校研究	10000		Table is accompanied to the property of the pr		<u> </u>
	10a	Gross sales less returns and allowances		Edi Aleliando de la companya de la c					<u> </u>
	1	Less Cost of goods sold -				140 - 140 - 1 200 - 140 - 140 - 140 - 140 - 140 - 140 - 140 - 140 - 140 - 140 - 140 - 140 - 140 - 140 - 140 - 140 - 140 - 140			881 881
	1.	: Gross profit or (loss)	<u></u>		144	ensemble (n.)			<u>koj</u>
	111	Other income Total. Add lines 1 through 11		11,928,372.	<u> </u>	323.	0.		
_	13	Compensation of officers, directors, trustees, etc	•	0.		0.	0.	0) .
	14	Other employee salaries and wages							_
	15	Pension plans, employee benefits					1		
9	វ្រី 16ឧ	a Legal fees				,			
	- 10	Accounting fees		FOLOE	VED		ļ		_
3		Other professional fees		H REVE	VED				_
	17	Interest		(S)		သွ			
-	18	Taxes Depreciation and depletion		# NOV 2 5	2019	 			
į	20	Occupancy		 		8		A 1 MA - TO A POSSES PRODUCED AND AND AND AND AND AND AND AND AND AN	<u></u>
Ž	-1	Traver conferences, and meetings		OGDEN	IIT				
7	22	Printing and publications		- JODLI	<u>", U I</u>				
Š	23	Otherexpenses			<u> </u>				
	24	Total perating and administrative				^			
ۇ ق		expenses. Add lines 13 through 23		300,000.	10000000000000000000000000000000000000	0.	0.	300,000	<u> </u>
	25	Contributions, gifts, grants paid		300,000.	新聞歌歌·報後	7.757.858.856.27.7.7.7.7.7.7.7.7.7.7.7.7.7.7.7.7.7.7		300,000	·
	26	Totaliexpenses and disbursements. Add lines 24 and 25		300,000.		0.	0.	300,000). /
	27	Subtract line 26 from line 12;		200,000.	100 100 100 E	Early 1957			屬么
	1	Excess of revenue over expenses and diaburationist		11,628,372.	mgi Limmer Jimi		in Minighallitic Obsessit Athermatic Mil	A Military of Management and Market	33. V
		Netanyestment income (if negative enter -0-)		Par ar a		323.		化学体的信息学生	100
		Adjusted net income (if negative, enter -0-)		NATURAL NATURA		物理學的	0.		

823501 12-11-18 LHA For Paperwork Reduction Act Notice, see instructions.

Form **990-PF** (2018)

Form 990-PF (2018) ANGELAKIS CHARITABLE FOUNDATION					2748427 Page 2
4p	à Tr	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only			of year
d 3	aı,t	column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
	<u> 1</u>	Cash - non-interest-bearing			
	2	Savings and temporary cash investments		2,199,237.	2,199,237.
	3	Accounts receivable ►			
		Less; allowance for doubtful accounts	The same and the s	PROBLEM STATE STATE AND	The set of
	4	Pledges receivable -			
		Less: allowance for doubtful accounts			<u> </u>
	5	Grants receivable		*	
	6	Receivables due from officers, directors, trustees, and other			
	_	disqualified persons		74.48.75 2.78 2.78 3.78 3.78 3.78 3.78 3.78 3.78 3.78 3	
	′	Other notes and toans receivable			
	١.	Less: allowance for doubtful accounts Inventories for sale or use			
Assets	8	Prepaid expenses and deferred charges			
Ass		Investments - U.S. and state government obligations			
	ı	Investments - corporate stock STMT 2	0.	4,272,255.	9,179,037.
	ŀ	Investments - corporate bonds			
	11	Investments - land, buildings, and equipment basis	7-10-10-10-10-10-10-10-10-10-10-10-10-10-		7
	'	Less accumulated depreciation	Action of the second se	about action of the control of the c	Secretary Control of the Control of
	12	Investments - mortgage loans			
	13	Investments - other			
	14	Land, buildings, and equipment basis			
		Less accumulated depreciation			
	15	Other assets (describe ►)			
	16	Total assets (to be completed by all filers - see the	_		
_		instructions Also, see page 1, item I)	0.	6,471,492.	11,378,274.
	17	Accounts payable and accrued expenses			
	18	Grants payable		· · · · · · · · · · · · · · · · · · ·	Section what a Section Control of
S	19	Deferred revenue			
iabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
ā.	21	Mortgages and other notes payable			Party 40 supervises Sc. Company
_	22	Other liabilities (describe			
		Table Cabilities (and long 17 through 20)	0.	0.	
_	23	Total liabilities (add lines 17 through 22) Foundations that follow SFAS 117, check here	<u> </u>	<u> </u>	
		and complete lines 24 through 26, and lines 30 and 31.			
es	24	Unrestricted			
ĕ	25	Temporarily restricted	,		
Balance		Permanently restricted			VOCATA SANCES
ğ		Foundations that do not follow SFAS 117, check here			53.54502074.64 3
Ē		and complete lines 27 through 31.			
ō	27	Capital stock, trust principal, or current funds	0.	0.	
Assets or Fund	28	Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.	
Ass	29	Retained earnings, accumulated income, endowment, or other funds	0.	6,471,492.	
Net	30	Total net assets or fund balances	0.	6,471,492.	
_					
	31	Total liabilities and net assets/fund balances	0.	6,471,492.	
įΡ	ärt	Analysis of Changes in Net Assets or Fund Ba	alances		
X.		······		· · · · · · · · · · · · · · · · · · ·	
		net assets or fund balances at beginning of year - Part II, column (a), line	30		
	•	st agree with end-of-year figure reported on prior year's return)		1	0.
		amount from Part I, line 27a		2	11,628,372.
		r increases not included in line 2 (itemize)			0. / /
-		lines 1, 2, and 3	מים מים מים	A DEMENT 1	11,628,372.
		eases not included in line 2 (itemize)		ATEMENT 1 5	5,156,880. 6,471,492.
<u>6</u>	rotal	net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	numin (D), line 30		Form 990-PF (2018)
					101111 * * (4010)

	ELAKIS	CHARITABLE	FOUN	DATION				8	3-274	8427	Page 3
<u> </u>		es for Tax on Inv			1/61	How ar	oured T			(d) Do	lo sold
(a) List and describe 2-story brick wa	the kind(s) o irehouse; or i	f property sold (for exan common stock, 200 shs.	nple, real esta . MLC Co.)	ate,	100	- Purc - Dona	cquired hase ation	(c) Date (mo.,	acquired day, yr.)	(a) Da (mo., d	te sold ay, yr.)
1a											
b NO	NE										
C					-						
<u>d</u>					├						
e	/f) Der	preciation allowed	(a) Co	st or other basis				(h) (Gain or (loss)		
(e) Gross sales price		or allowable)	10,	expense of sale					is (f) minus (
a											
b											_
<u>c</u>											
<u>d</u>									-		
Complete only for assets showing	ng gain in col	umn (h) and owned by t	he foundatior	on 12/31/69.				(I) Gains (Col. (h) gain	minus	
(i) FMV as of 12/31/69	(j)	Adjusted basis of 12/31/69	(k) E	xcess of col. (i)				ol. (k), but	not less than (from col. (1 -0-) or	
				(),							
<u>a</u> b											
C							·				
d											
<u>e</u>	<u> </u>										
2 Capital gain net income or (net ca	ıpıtal loss)	If gain, also enter If (loss), enter -0-			}	2					
3 Net short-term capital gain or (lo	ss) as define	d in sections 1222(5) an	d (6) [.]		`						
If gain, also enter in Part I, line 8,	column (c).				•						
If (loss), enter -0- in Part I, line 8 [Part V Qualification U	nder Sec	tion 4940(e) for	Reduced	Tax on Net	Inve	estm	ent Inc	ome			
(For optional use by domestic private	-									N/A	
			0.0(0) 10.0			-,					
If section 4940(d)(2) applies, leave t	his part blank	i.									
Was the foundation liable for the sec					iod?					Yes	∟ No
If "Yes," the foundation doesn't qualit 1 Enter the appropriate amount in					ntriac						
(a)	each column	(b)	Structions be	Tore making any en	(c)					(d) ution ratio	
Base periód years Calendar year (or tax year beginni	na in)	Adjusted qualifying dist	tributions	Net value of no			use assets	s	Distrib (col. (b) div	iútión ratio ided by col.	(c))
2017	3 /										
2016											
2015			_								
2014											
2013									ſ		
2 Total of line 1, column (d)								2			
3 Average distribution ratio for the	5-year base (period - divide the total o	on line 2 by 5.	.0, or by the numb	er of	years					
the foundation has been in existe	nce if less th	an 5 years	•					3			
4 Enter the net value of noncharitat	ole-use asset	s for 2018 from Part X, I	ine 5					4	ļ	_	
5 Multiply line 4 by line 3								5			
6 Enter 1% of net investment incom	ne (1% of Pa	rt I, line 27b)						6			
7 Add lines 5 and 6								7			
8 Enter qualifying distributions from	n Part XII. lır	ne 4						8_			
If line 8 is equal to or greater that See the Part VI instructions.			1b, and com	plete that part usin	ng a 1	% tax r	ate.				
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	990-PF (2018) ANGELAKIS CHARITABLE FOUNDATIO	N	040/5\ 46	40/		<u> 27484</u>		Page 4
2 //	Excise Tax Based on Investment Income (Section 4940			40(e), or 49	348 - s	see ins	truction	IS)
1a	Exempt operating foundations described in section 4940(d)(2), check here and e	nter "N//	A" on line 1.	Ì				
	Date of ruling or determination letter (attach copy of letter if nec							
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here	▶ 📖	and enter 1%	P	1	100 m 100 m	485 × > 5,000 × , > 6,0	6 •
	of Part I, line 27b					L.		
C	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations, enter 4%	of Part	I, line 12, col	. (b). ノ				
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only, of	ners, en	ter -0-)		2			0.
3	Add lines 1 and 2				3			6.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; of	hers, er	nter -0-)		4			<u>0.</u>
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-				5	PACKET PACKETA	LANGE CONTROL NO	b •
6	Credits/Payments		1					
. 8	2018 estimated tax payments and 2017 overpayment credited to 2018	6a	ļ ———	0.				
	Exempt foreign organizations - tax withheld at source	6b	<u> </u>	0.				
	Tax paid with application for extension of time to file (Form 8868)	6c		4,500.	76.4			
	Backup withholding erroneously withheld	6d	<u> </u>	0.	1		A	
	Total credits and payments. Add lines 6a through 6d				7		4,5	00.
	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is atta	ched		_	8			0.
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed			>	9			0.4
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid		4 404		10		4,4	94.
	Enter the amount of line 10 to be: Credited to 2019 estimated tax **REAVIT: AS Statements Regarding Activities		4,494.	Refunded >	11			<u> </u>
	***	lation o	did it portion	ote or interione		I,	₩: Yes	No
1a	During the tax year, did the foundation attempt to influence any national, state, or local legis	iation bi	r did it particit	ate of intervene	101	š		X
	any political campaign?		a tha inatriiati	and for the defin	ition	F	1a 1b	X
D	Did it spend more than \$100 during the year (either directly or indirectly) for political purpos				ILIUII	18	10 1860 1 15.53	\$ 1,758\7
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of	n any m	iateriais publis	silea oi		5		
_	distributed by the foundation in connection with the activities.					-	1c	X
	Did the foundation file Form 1120-POL for this year? Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the	war.				1	**************************************	1537
0	(1) On the foundation. \blacktriangleright \$ 0 . (2) On foundation managers			0.				
•	Enter the reimbursement (if any) paid by the foundation during the year for political expendi				•			
-	managers > \$ 0.	iui o iux	imposou on i	Januarion.		2.		
2	Has the foundation engaged in any activities that have not previously been reported to the IF	S?				[*	2	X
-	If "Yes," attach a detailed description of the activities.					<u> </u>	Carry Charge	4.784
3	Has the foundation made any changes, not previously reported to the IRS, in its governing ii	nstrume	nt. articles of	incorporation, o	r	- 8		
•	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes		•	. ,		[3	X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year	?	,				4a	X
	If "Yes," has it filed a tax return on Form 990-T for this year?				N.	/A [4b	
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?						5	Х
	If "Yes," attach the statement required by General Instruction T					ž,	网络 新 多	
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied en	ther				ģ		
	By language in the governing instrument, or							
	By state legislation that effectively amends the governing instrument so that no mandatory	/ directi	ons that confl	ct with the state	law		100	
	remain in the governing instrument?					L	6 X	<u> </u>
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," comp	lete Par	t II, col. (c), a	nd Part XV		L	7 X	
						7		
8a	Enter the states to which the foundation reports or with which it is registered. See instruction	ns. 🕨				\		
	PA	_				3		
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the A	ttorney	General (or de	signate)		9		
	of each state as required by General Instruction G? If "No," attach explanation					L	8b X	1
9	Is the foundation claiming status as a private operating foundation within the meaning of sec	ction 49	42(j)(3) or 49	42(j)(5) for cale	ndar	²	T Th	
	year 2018 or the tax year beginning in 2018? See the instructions for Part XIV. If "Yes," com	plete Pa	ırt XIV			_	9	x
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedu	le listing t	their names and	addresses (TMT		10 X	<u> </u>
						r	, ggn_pf	/00401

	1990-PF (2018) ANGELAKIS CHARITABLE FOUNDATION	83- <u>274842</u>	7	Page 5
₹ P a	art VII-A Statements Regarding Activities (continued)			
			§ Yes	No
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of		-	
• •	section 512(b)(13)? If "Yes," attach schedule. See instructions	11	1	Х
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory p		1	
12	If "Yes," attach statement. See instructions	12		х
40	,	13		
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	<u> </u>	<u> </u>	Ь—
	Website address ► N/A	<u> 215-286-</u>	7590	
14				
	Located at ► 1250 LAFAYETTE ROAD, GLADWYNE, PA	ZIP+4 ▶ 1903	<u> </u>	$\overline{}$
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here		.	-
	and enter the amount of tax-exempt interest received or accrued during the year	15	N/A	T N =
16	At any time during calendar year 2018, did the foundation have an interest in or a signature or other authority over a bank,		Yes	No
	securities, or other financial account in a foreign country?	16	SA CONTRACTOR	X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the			
	foreign country 🕨			紫源
R	art VIFB Statements Regarding Activities for Which Form 4720 May Be Required	T 850	w1	
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1 a	During the year, did the foundation (either directly or indirectly).			7.7
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	es 🗶 No 🕍		
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			38
	a disqualified person?	es 🗶 No 🏻		
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	es 🔲 No 🔯		
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	es 🗶 No 🔯		
	(5) Transfer any income or assets to a disqualified person (or make any of either available	1		200
	for the benefit or use of a disqualified person)?	es 🗶 No 🏻		14
	(6) Agree to pay money or property to a government official? (Exception. Check "No"			禁續
	if the foundation agreed to make a grant to or to employ the official for a period after	199		
	termination of government service, if terminating within 90 days.)	es X No		
t	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations	26.75 2.750 2.620		
	section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions	1b		X
	Organizations relying on a current notice regarding disaster assistance, check here			
0	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?	1c	X	
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation		THE	
_	defined in section 4942(j)(3) or 4942(j)(5)):			
a	At the end of tax year 2018, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginnin	a Si		
•		es X No		
	If "Yes," list the years ,,,,,,,,			
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect	ı	156.5	
	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach	18,03,%		
	statement - see instructions.)	N/A 2b		
,	: If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.		经	\$300 V
٠		1986	g reads	
2.	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			
38		es X No		
	ourning the year? If "Yes," did it have excess business holdings in 2018 as a result of (1) any purchase by the foundation or disqualified persons aft	768630¥		
· ·	May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to di			
	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,	Spool S		
	Form 4720, to determine if the foundation had excess business holdings in 2018.)	N/A 3b	* ************************************	
4-			+	x
	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4 <u>8</u>	2 :2/2/20	THE SAME
£	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose		e areii	X
	had not been removed from jeopardy before the first day of the tax year beginning in 2018?	1 4b Form 99	00-DE	
		F0(III) 3 3	/J-F I	(2010)

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Form 990-PF (2018) ANGELAKIS CHARITABLE FOU			83-274843	27 F	Page 6
Part VII-BA Statements Regarding Activities for Which F	orm 4720 May Be R	lequired (contin	ued)		
5a During the year, did the foundation pay or incur any amount to:				🌣 Yes	No
(1) Carry on propaganda, or otherwise attempt to influence legislation (section			es 🗶 No 🥻		
(2) Influence the outcome of any specific public election (see section 4955); o	r to carry on, directly or indir				AND THE STREET, STREET
any voter registration drive?			es 🗶 No 🚆		i a
(3) Provide a grant to an individual for travel, study, or other similar purposes	?	Y	es 🗶 No 🎇		
(4) Provide a grant to an organization other than a charitable, etc., organization	n described in section				w(f)
4945(d)(4)(A)? See instructions		Yo	es 🗶 No 🏥		5.5
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or t				
the prevention of cruelty to children or animals?		Y	es 🗶 No 📑		
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify uni	der the exceptions described	ın Regulations	93		į w
section 53.4945 or in a current notice regarding disaster assistance? See instru	uctions		N/A	5b	
Organizations relying on a current notice regarding disaster assistance, check f	nere				
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fr	om the tax because it mainta				
expenditure responsibility for the grant?	ľ	1/A 🔲 Y	es 🔙 No 🚉		
If "Yes," attach the statement required by Regulations section 53.4945-5(d).			322		
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums on		\$-3 \$-3		
a personal benefit contract?		Y	es 🗶 No 🚆	320 (3.55.2)	
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal benefit contract?		<u> </u>	ib di	<u> </u>
If "Yes" to 6b, file Form 8870.			1		李锋 着
7a At any time during the tax year, was the foundation a party to a prohibited tax s	helter transaction?	Ye	es 🗶 No 🔄	No.	南海
b If "Yes," did the foundation receive any proceeds or have any net income attribu	table to the transaction?	•	N/A 7	7b	
8 Is the foundation subject to the section 4960 tax on payment(s) of more than \$	1,000,000 in remuneration or		<u> </u>		
excess parachute payment(s) during the year?		Y(s X No	A Trail	
Part VIII Information About Officers, Directors, Truste Paid Employees, and Contractors	es, Foundation Ma	nagers, Highly	-		
List all officers, directors, trustees, and foundation managers and tr	peir compensation				
List an officers, directors, and touridation managers and t	(b) Title, and average	(c) Compensation	(d) Contributions to	(e) Expe	ense
(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expe account, allowan	other ices
MICHAEL J. ANGELAKIS	TRUSTEE				
1250 LAFAYETTE ROAD			İ		
GLADWYNE, PA 19035	0.00	0.	0.		0.
CHRISTINE B. ANGELAKIS	TRUSTEE				
1250 LAFAYETTE ROAD					
GLADWYNE, PA 19035	0.00	0.	0.		0.
			i		
2 Compensation of five highest-paid employees (other than those incl	· · · · · · · · · · · · · · · · · · ·	enter "NONE."	[(d) o		
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week	(c) Compensation	(d) Contributions to employee benefit plans and deferred	(e) Expe	nse other
(a) Name and address of each employee paid more than \$00,000	devoted to position	(C) Compensation	and deterred compensation	allowan	
NONE					
		1	1		
			l		
			T		_
		<u> </u>			
Total number of other employees paid over \$50,000	· · ·			200 55	0
			Form \$	990-PF (2018)

823551 12-11-18

	2/4842/ Page /
Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)	
3 Five highest-paid independent contractors for professional services. If none, enter "NONE."	
(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
NONE	
	
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	Evnanças
number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1 N/A	
2	
3	
4	
Dort IV P. C	
Part IX-B Summary of Program-Related Investments Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.	Amount
1 N/A	, and an
2	
All other program-related investments. See instructions.	
3	
Total. Add lines 1 through 3	0.
	Form 990-PF (2018)

P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign four	ndations, se	ee instructions)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
·	Average monthly fair market value of securities	1a	382,460.
b	Average of monthly cash balances	1b	382,460. 91,635.
c	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	474,095.
e	The state of the s		
·	1c (attach detailed explanation) 1e 0.		
2	Acquisition indebtedness applicable to line 1 assets	2	0
3	Subtract line 2 from line 1d	3	474,095.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	7,111.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	466,984.
6	Minimum investment return. Enter 5% of line 5 ADJUSTED FOR SHORT TAX PERIOD	6	3,070.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations an	ıd certain	
_	foreign organizations, check here and do not complete this part.)		
1	Minimum investment return from Part X, line 6	1	3,070.
2a	Tax on investment income for 2018 from Part VI, line 5]	
b	Income tax for 2018. (This does not include the tax from Part VI)		
C	Add lines 2a and 2b	2c	6.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	3,064.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	3,064.
6	Deduction from distributable amount (see instructions)	6	0.
<u>7</u>	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	3,064.
P	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		200 000
а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	300,000.
b	Program-related investments - total from Part IX-B	1b	<u> </u>
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
а		3a	
b	Cash distribution test (attach the required schedule)	3b	300,000.
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8; and Part XIII, line 4	4	300,000.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment	_	Λ
	income. Enter 1% of Part I, line 27b	5	300,000.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation of 4940(e) reduction of tax in those years.	qualifies for t	ne section

Form **990-PF** (2018)

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2017	(c) 2017	(d) 2018
1 Distributable amount for 2018 from Part XI,	<u>'</u>			
line 7				3,064.
2 Undistributed income, if any, as of the end of 2018				
a Enter amount for 2017 only			0.	
b Total for prior years				
,,		0.		
3 Excess distributions carryover, if any, to 2018:				
a From 2013				
b From 2014				
c From 2015				
d From 2016				
e From 2017				
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2018 from Part XII, line 4: ►\$ 300,000.	İ			
			0.	
a Applied to 2017, but not more than line 2a b Applied to undistributed income of prior			0.	
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus		•		
(Election required - see instructions)	0.			
d Applied to 2018 distributable amount				3,064.
e Remaining amount distributed out of corpus	296,936.			
5 Excess distributions carryover applied to 2018	0.			0.
(If an amount appears in column (d), the same amount must be shown in column (a))				
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	296,936.			
b Prior years' undistributed income. Subtract				
line 4b from line 2b		0.		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b. Taxable				
amount - see instructions		0.		
e Undistributed income for 2017. Subtract line				
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2018. Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2019				0.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3) (Election	0.			
may be required - see instructions)				
8 Excess distributions carryover from 2013 not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2019.				
Subtract lines 7 and 8 from line 6a	296,936.			
10 Analysis of line 9:				
a Excess from 2014				
b Excess from 2015	1			
c Excess from 2016				
d Excess from 2017	1			
e Excess from 2018 296, 936.				
				Form QQ0-PF (2010)

823581 12-11-18

Form **990-PF** (2018)

	IS CHARITAB				748427 Page 10
Part XIV, Private Operating F			I-A, question 9)	N/A	
1 a If the foundation has received a ruling of					
foundation, and the ruling is effective for			▶ └	7	
b Check box to indicate whether the found		ng foundation described		4942(j)(3) or 4	1942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year	(b) 2017	Prior 3 years (c) 2016	(g)/2015	(e) Total
Income from Part I or the minimum	(a) 2018	(0) 2017	(6) 2010	1072013	(e) rotal
Investment return from Part X for					
each year listed			<u> </u>	/	
b 85% of line 2a			 	-	
c Qualifying distributions from Part XII,					
line 4 for each year listed					
d Amounts included in line 2c not					}
used directly for active conduct of	1				
exempt activities		 			<u> </u>
e Qualifying distributions made directly					
for active conduct of exempt activities.					
Subtract line 2d from line 2c					<u> </u>
3 Complete 3a, b, or c for the alternative test relied upon:]			1	
a "Assets" alternative test - enter.					
(1) Value of all assets		/			
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test - enter					
2/3 of minimum investment return					
shown in Part X, line 6 for each year listed		1	1		ĺ
c "Support" alternative test - enter:	-				
(1) Total support other than gross					1
investment income (interest,					
dividends, rents, payments on					
securities loans (section 512(a)(5)), or royalties)					
(2) Support from general public				 -	
and 5 or more exempt					
orgapižations as provided in spetion 4942(j)(3)(B)(iii)					7
(3) Largest amount of support from					
an exempt organization	1				
(4) Gross investment income					
Part XV. Supplementary Info	rmation (Comple	te this part only i	f the foundation	had \$5,000 or mo	re in assets
at any time during t				, ,	
1 Information Regarding Foundatio					
a List any managers of the foundation wh	•	than 2% of the total cont	ributions received by the	foundation before the clo	se of any tax
year (but only if they have contributed in					50 01 any tan
SEE STATEMENT 4					
b List any managers of the foundation wh			or an equally large porti	on of the ownership of a p	artnership or
Other entity) of which the foundation ha	s a 10% or greater interes	st.			
NONE					
2 Information Regarding Contributi					
Check here X if the foundation of the foundation makes gifts, grants, etc					iests for funds. If
		·		- <u></u>	
a The name, address, and telephone number	per or email address of th	e person to whom applic	ations should be addres	sed.	
b The form in which applications should b	e submitted and informat	tion and materials they sh	nould include:	-	
c Any submission deadlines:					
4.0		al access of the state of the	lundo of matitutes as	other feet	
d Any restrictions or limitations on awards	s, such as by geographica	ai areas, charitable fields,	KITIOS OF INSTITUTIONS, OF	other factors;	

ANGELAKIS CHARITABLE FOUNDATION

83-2748427 Page 11

Supplementary Information (continued) Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Purpose of grant or contribution Foundation show any relationship to Amount status of any foundation manager Name and address (home or business) recipient or substantial contributor a Paid during the year OPERATIONAL SUPPORT BABSON COLLEGE NONE 231 FOREST STREET BABSON PARK, MA 02457 300,000. 300,000. **▶** 3a Total b Approved for future payment NONE **▶** 3b Total Form 990-PF (2018)

Part XVI-A A	alysis of Income-Producing Activitie	es
--------------	--------------------------------------	----

Enter gross amounts unless otherwise indicated.	Unrelated business income			uded by section 512, 513, or 514	(e)	
	(a) Business	(b) Amount	Exclu- sion code	(d) Amount	Related or exempt	
1 Program service revenue:	code					
å	<u> </u>		-	<u> </u>		
b			 			
C			-			
d			ļ			
e			ļ			
f			<u> </u>			
g Fees and contracts from government agencies					 	
2 Membership dues and assessments						
3 Interest on savings and temporary cash						
investments						
4 Dividends and interest from securities			14	323.		
5 Net rental income or (loss) from real estate:						
a Debt-financed property						
b Not debt-financed property			1			
6 Net rental income or (loss) from personal						
property						
7 Other investment income						
8 Gain or (loss) from sales of assets other						
than inventory						
9 Net income or (loss) from special events						
10 Gross profit or (loss) from sales of inventory						
11 Other revenue						
a			 			
b			-			
·			-			
d			 			
e				222		
12 Subtotal. Add columns (b), (d), and (e)		0.	<u> </u>	323.		
13 Total Add line 12, columns (b), (d), and (e)				13	323.	
(See worksheet in line 13 instructions to verify calculations.)						
Part XVI-B Relationship of Activities to	the Acco	mplishment of Exe	empt	Purposes		
Line No Explain below how each activity for which incom			contric	outed importantly to the accom	iplishment of	
the foundation's exempt purposes (other than by	y providing ful	nas for such purposes).		_		
		····				
					· · · · · · · · · · · · · · · · · · ·	
		·				
						
					, , , , , , , , , , , , , , , , , , , ,	
					· · · · · · · · · · · · · · · · · · ·	
		·				
						
823621 12-11-18					Form 990-PF (2018)	

823621 12-11-18

Form 99	0-PF (2	018) ANGEL	<u> AKIS CHAR</u>	RITABLE	FOU	NOITADN_		83-	<u> 2748427</u>	Pa	ige 13
Part	XVII	Information Re	•	sfers to a	nd Tra	nsactions ar	nd Relationsh	nips With None	charitable		
		Exempt Organ	izations							1	
1 Dic	the or	ganization directly or indi	rectly engage in any	of the following	ng with an	y other organization	on described in sec	tion 501(c)		Yes	No
(ot	her tha	n section 501(c)(3) organ	nizations) or in sectio	on 527, relating	g to politic	cal organizations?					
a Tra	insfers	from the reporting found	ation to a noncharita	able exempt or	ganızatıon	of:					
(1) Cash									1a(1)		X
(2)	Other	assets							1a(2)		X
b Oti	ner tran	sactions;									
(1)	Sales	of assets to a noncharita	ıble exempt organıza	ition					1b(1)		X
(2)	Purch	nases of assets from a no	ncharitable exempt o	organization					1b(2)	-	X
• •		I of facilities, equipment,							1b(3)	-	X
		bursement arrangements	;						1b(4)	\vdash	X
		s or loan guarantees							1b(5)		X
٠,		rmance of services or me		-					1b(6)		X
	-	facilities, equipment, ma	- ·						<u> 1c</u>	لــــــا	
		ver to any of the above is								eis,	
		s given by the reporting f the value of the goods,				an iair market vaiu	ie ili aliy iransaciioi	i di Silaring arranger	nem, snow m		
(a) Line n	 -	(b) Amount involved	T	of noncharitable		nrnanization	(d) Description	n of transfers, transactio	ns, and sharing arr	angemen	
(E) Eille II	+	(b) Amount involved	(6) Harrie o	N/A	o oxompt	or garnzation	(4) 5000 (5110	aron banola o, banocono	no, and one mg an		
	+		+	14/11			+				
	+										
	+										
											
			1					-			
				•							
-		-									
2a Is	the four	dation directly or indirec	tly affiliated with, or	related to, one	e or more	tax-exempt organı	zations described				_
ın :	section	501(c) (other than sectio	ın 501(c)(3)) or ın se	ection 527?	-				Yes	X	No
<u>b lf "</u>	Yes," co	mplete the following sch			1		·				
		(a) Name of org	ganization	_	(b) Typ	e of organization		(c) Description of re	elationship		
		N/A									
		 · · ·			<u> </u>						
					-						
									<u> </u>		
	Lindor	penalties of perjury, I declare	that I have examined this	e return uncluding	accompany	una echadulae and st	atements and to the hi	ast of my knowledge			
Sign	and be		nplete Declaration of pre						May the IRS or	e prepare	ar a
Here				>-	I		TRUST	e e	shown below X Yes		٦
*	Sign	ature of officer or trustee			Da	ate .	Title	212	X Yes		J No
	July	Print/Type preparer's na		Preparer's s		110	Date	Check If	PTIN		
		. This type proparer 3 he	27770	Toparor 3 3	,,g.,a.a.			self- employed			
Paid		MATTHEW BL	AKESLEE	Matthe	w e.	Blakeslee	11/14/2019	F7	P01379	479	
Prepa	arer	Firm's name ► PRI				LLP		Fırm's EIN ► 1			
Use (indistant FIXI									
	•	Firm's address ► 20	01 MARKET	י פיים	T ST	፲፻፹፰ 1800	n	1			

PHILADELPHIA, PA 19103

Phone no. (267) 330-3000 Form **990-PF** (2018)

Schedule B

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

Department of the Treasury Internal Revenue Service

Schedule of Contributors

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

OMB No 1545 0047

2018

Name of the organization

Employer identification number

AN.	NGELAKIS CHARITABLE FOUNDATION	83-2748427				
Organization type (check one)						
Filers of:	Section:					
Form 990 or 990-EZ	501(c)() (enter number) organization					
	4947(a)(1) nonexempt charitable trust not treated as a private foundation					
	527 political organization					
Form 990-PF	X 501(c)(3) exempt private foundation					
	4947(a)(1) nonexempt charitable trust treated as a private foundation					
	501(c)(3) taxable private foundation					
, ,	s covered by the General Rule or a Special Rule. (7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule	e See instructions				
General Rule						
	n filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling one contributor. Complete Parts I and II. See instructions for determining a contributor's					
Special Rules						
For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000, or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1 Complete Parts I and II.						
For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III						
For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year.						
but it must answer "No" on	nat isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Fo Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Fo the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)					

LHA For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF.

Schedule B (Form 990, 990-EZ, or 990-PF) (2018)

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Schedule	В	(Form	990.	990-EZ.	or 990-PF)	(2018)

Page 2

NI-			
wa	me	OΤ	organization

Employer identification number

ANGELAKIS	CHARITABLE	FOUNDATION

83-2748427

Part I	Contributors (see instructions) Use duplicate copies of Part I if addition	nal space is needed	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u> </u>	MICHAEL J. ANGELAKIS 1250 LAFAYETTE ROAD GLADWYNE , PA 19035	\$ 915,456.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	CHRISTINE B. ANGELAKIS 1250 LAFAYETTE ROAD GLADWYNE, PA 19035	- \$\$_915,455.	Person X Payroll X Noncash X (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3	ANGELAKIS FAMILY FOUNDATION 1250 LAFAYETTE ROAD GLADWYNE, PA 19035	\$ 10,097,461.	Person X Payroll Noncash X (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		- \$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		- \$	Person Payroll Oncash Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Occash Occash (Complete Part II for noncash contributions)

Schedule B (Form 990, 990-EZ, or 990-PF) (2018) Name of organization

Employer identification number

ANGELAKIS CHARITABLE FOUNDATION

83-2748427

ANGELA	AKIS CHARITABLE FOUNDATION	83	-2748427
Part II	Noncash Property (see instructions) Use duplicate copies of P	art II if additional space is needed	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
	33489 SHS HPE		
1			
		\$\$.	12/19/18
(a)		(c)	
No.	(b)	FMV (or estimate)	(d)
from Part I	Description of noncash property given	(See instructions)	Date received
	33489 SHS HPE		
2			
		\$ 441,050.	12/19/18
(a) No.	(b)	(c)	(d)
from	Description of noncash property given	FMV (or estimate) (See instructions)	Date received
Part I		(See instructions)	
_ ا	219556 SHS CMCSA		
3			
		s7,726,176.	12/19/18
			12/15/10
(a)		(5)	
No.	(b)	(c) FMV (or estimate)	(d)
from Part I	Description of noncash property given	(See instructions)	Date received
rarti	892 SHS XOM		
3			•
		\$ 63,136.	12/19/18
(a) No.	<i>IL</i>	(c)	(4)
from	(b) Description of noncash property given	FMV (or estimate)	(d) Date received
Part I		(See instructions)	
	3346 SHS IVW		
3		}	
			12/10/10
		\$ 504,041.	12/19/18
(a)			
No.	(b)	(c)	(d)
from	Description of noncash property given	FMV (or estimate) (See instructions)	Date received
Part I		(000 110110010110)	
,	5452 SHS IWR		
3			
			12/19/18
3453 11-08-	.10		90, 990-EZ, or 990-PF) (2018

Schedule B	(Form 990,	990-EZ,	or 990-PF)	(2018)

Page 4

	 	Ψ.	 _	
Name of organization				

Employer identification number

•			00 0540405						
ANGEL. Part III	AKIS CHARITABLE FOUNDATI Exclusively religious, charitable, etc., contributi	ons to organizations described in section	83 – 2748427 n 501(c)(7), (8), or (10) that total more than \$1,000 for the year						
	from any one contributor. Complete columns (a) completing Part III enter the total of exclusively religious, or	through (e) and the following line entry. For	or organizations						
	Use duplicate copies of Part III if additional	space is needed							
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held						
		(e) Transfer of gift							
	Transferee's name, address, ar	nd ZIP + 4	Relationship of transferor to transferee						
(a) No. from	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held						
Part I	(b) Fulpose of gift	(c) Ose of gift	(a) Description of now gire is not						
	(e) Transfer of gift								
	Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee								
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held						
		(e) Transfer of gift							
	Transferee's name, address, ar	nd ZIP + 4	Relationship of transferor to transferee						
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held						
		(e) Transfer of gift							
	Transferee's name, address, ar	nd ZIP + 4	Relationship of transferor to transferee						
I									

ANGELAKIS CHARITABLE FOUNDATION

83-2748427

FORM 990-PF	OTHER	DECREASES	IN NET	ASSETS	OR FU	ND BALANCES	STATEMENT 1
DESCRIPTION							AMOUNT
BOOK VALUE AD	JUSTMENT	FOR CONTE	RIBUTED	SECURIT	PIES		5,156,880.
TOTAL TO FORM	990-PF,	PART III,	LINE	5			5,156,880.
FORM 990-PF			CORPO	RATE STO	OCK		STATEMENT 2
DESCRIPTION						BOOK VALUE	FAIR MARKET VALUE
UBS X9148						4,272,255.	9,179,037.
TOTAL TO FORM	990-PF,	PART II,	LINE 10)B	_	4,272,255.	9,179,037.

	F SUBSTANTIAL CONTRIBUTORS PART VII-A, LINE 10	STATEMENT 3
NAME OF CONTRIBUTOR	ADDRESS	
MICHAEL J. ANGELAKIS	1250 LAFAYETTE ROAD GLADWYNE, PA 19035	
CHRISTINE B. ANGELAKIS	1250 LAFAYETTE ROAD GLADWYNE, PA 19035	

FORM 990-PF PART XV - LINE 1A STATEMENT 4
LIST OF FOUNDATION MANAGERS

NAME OF MANAGER

MICHAEL J. ANGELAKIS CHRISTINE B. ANGELAKIS