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

OMB No 1545-0052 2018

Départment of the Treasury Internal Revenue Service

► Do not enter social security numbers on this form as it may be made public Den to Public Inspection Social Security numbers on this form as it may be made public Den to Public Inspection Social Security numbers on this form as it may be made public Den to Public Inspection Social Security numbers on this form as it may be made public Den to Public Inspection Security numbers on this form as it may be made public Den to Public Inspection Security numbers on this form as it may be made public Den to Public Inspection Security numbers on this form as it may be made public Den to Public Inspection Security numbers on this form as it may be made public Den to Public Inspection Security numbers on this form as it may be made public Den to Public Inspection Security numbers on this form as it may be made public Den to Public Inspection Security numbers on this form as it may be made public Den to Public Inspection Security numbers on the Inspection Security numbers on the Inspection Security numbers on the Inspection Security numbers of the Inspection Se

For ca	endar year 2018 or tax year beginning	4/01 , 2018	and ending 3	/31	, 2019	
	,				ployer identification num	nber
	LLI FOUNDATION, INC			9	<u>4-2975159</u>	<u> </u>
	WEST LIBERTY STREET				ephone number (see inst	
RENO	, NV 89501		-		<u>908) 276-830</u>	
				C If e	exemption application is	pending, check here
<u> </u>	and all that ample Disabel action	Initial values of a form	nor nublic charity		,	· • ·
G Cn	eck all that apply Initial return	Initial return of a form	ner public charity	D 1 For	eign organizations, chec	k here -
	Final return	Amended return		2 Ear	eign organizations meet	ung the 85% test check
	Address change	Name change			e and attach computation	
` H Ch		1(c)(3) exempt private f				
	Section 4947(a)(1) nonexempt charitable				private foundation status	
		counting method X C	ash Accrual	unc	der section 507(b)(1)(A)	, check here
•	m Part II, column (c), line 16)	Other (specify)		F If t	he foundation is in a 60-	-month termination
► \$	100,726,061. (Part I	, column (d) must be or	r cash basis)	unc	der section 507(b)(1)(B)	, check here
Part	Analysis of Revenue and		4.5.51.1			(d) Disbursements
	Expenses (The total of amounts in	(a) Revenue and expenses per books	(b) Net investment income	t (4	c) Adjusted net income	`for charitable
	columns (b), (c), and (d) may not necessarily equal the amounts in	expenses per books	income		licome	purposes
	column (a) (see instructions))					(cash basis only)
	1 Contributions, gifts, grants, etc., received (attach schedule)	9,261,287.		Salt is	经验证证据	125年200年10年10日
h/	2 Check ► If the foundation is not required to attach Sch B	Participations, St Medicates and a state transfer for a				
% 1			- 1 10 market on \$5.3,4000			TERMINAL CONTRA
Ч	3 Interest on savings and temporary cash investments					CHARLES AND A SECOND CONTRACT OF THE PARTY O
k.	4 Dividends and interest from securities.	1,933,347.	1,933,34	7.		
	5 a Gross rents b Net rental income		9 .90 W PERCONS OF T 900. NOV CO	271 2131 24		itha nakesis kalan
_	or (loss)		distributed determine was married was not a second			
- ≘	6 a Net gain or (loss) from sale of assets not on line 10	1,157,400.	CELLULY CAM	piter & Milian		
e le	h Gross sales price for all assets on line 6a					
Revenue	7 Capital gaill net income (from Part IV, line 2)	MARY TANKS	5,662,75			
	8 Net short-term capital gain	PER AND AND LESS OF	はなる。まなののは		-RECEIV	EDIA WARM
	9 Income modifications. 10 a Gross sales less	THE SECTION OF THE	Edition that s		2 2	
	returns and			. * <u>0</u>		
	allowances b Less Cost of	TALLED STATE TO A STATE OF THE	PROTECTION OF THE PROPERTY OF		###### 10 2	020 0
ř.	goods sold		Amount Thomas In the Comment of the			
	C Gross profit or (loss) (attach schedule)		f. Bride Selfell et E	25.5	<u> </u>	
. (11 Other income (attach schedule)	0.61 571	067 57	. L	OGDEN,	
,	See Statement 1	261,571.	261,57			
	12 Total Add lines 1 through 11	12,613,605.	7,857,66		0.	987 M L B 485 B 140
	13 Compensation of officers, directors, trustees, etc	202,500.	101,25	J.		101,250.
	14 Other employee salaries and wages.		<u> </u>	-		
ses	15 Pension plans, employee benefits			_		
	16a Legal fees (attach schedule) b Accounting fees (attach sch) See St. 2	70.000	70.00	. 		
e d	b Accounting fees (attach sch) See St 2 c Other professional fees (attach sch) See St 3	78,000.	78,00	J.		240
ũ	i	340.		_		340.
ě	17 Interest 18 Taxes (attach scheduleXsee instrs) See Stm 4	120 202	F (0)	. -		F (01
at	1	138,383.	5,69	-	-	5,691.
<u>(S</u>	19 Depreciation (attach schedule) and depletion					
رَقِ	20 Occupancy			 	-	AL A NOW DE PROPERTY OF ANY PROPERTY AND ADDRESS OF A STATE OF THE PROPERTY AND ADDRESS OF A STATE
造	21 Travel, conferences, and meetings			-+-		
≸	22 Printing and publications					7
OBPRING AND AND STRAING EXPE	23 Other expenses (attach schedule)					
Oğ	See Statement 5	86,709.	86,70	9.		
. الجَّارِ .	24 Total operating and administrative			.		
perat	expenses Add lines 13 through 23 25 Contributions gifts grants paid Part XV	505,932.	271,65	1.	PRODUCTION OF THE PARTY OF THE PARTY OF	107,281.
ر ق	25	4,168,000.	PERMENT.	SE X	ALTO CHARACT	4,168,000.
~ ~	26 Total expenses and disbursements.	4 (73 030	271 (5	,	<u>, </u>	A 27E 201
>	Add lines 24 and 25	4,673,932.	271,65	L . Prouder.	0.	4,275,281.
>	27 Subtract line 26 from line 12: a Excess of revenue over expenses			語問語		
í	and disbursements	7,939,673.		剛騰。		
	b Net investment income (if negative, enter -0-)	SE CONTRACTOR OF THE SECOND	7,586,01	3	SHOTTING STATE	
	C Adjusted net income (if negative, enter -0-)		SECTOR PROPERTY.	(1) (1) (1) (1) (1) (1) (1) (1) (1) (1)	0.	

Das	Paller	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year	En	d of year
Far	िहास्त्रि	(See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash – non-interest-bearing	1,068,214.	2,248,228	3. 2,248,228.
	2	Savings and temporary cash investments	13,297,916.	12,245,27	2. 12,245,272.
	3	Accounts receivable	MANAGE OF THE SECOND SE	程序的特色 网络萨拉克	4. K. M. A. A. M. A.
		Less allowance for doubtful accounts			
	4	Pledges receivable		表的例识性的概则	Charles and the second
		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 sch)			
		Less allowance for doubtful accounts			
ş	8	Inventories for sale or use.			
Assets	9	Prepaid expenses and deferred charges.			
•	10 a	Investments – US and state government obligations (attach schedule)			
	l t	Investments — corporate stock (attach schedule).	21,669,251.	24,205,93	31,799,986.
	(: 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)	45,657,504.	50,935,24	5. 54,432,575.
	14	Land, buildings, and equipment basis ►	in the second of the second of the		n archania (1
		Less accumulated depreciation (attach schedule)			
	15	Other assets (describe)	2,126.		
	16	Total assets (to be completed by all filers — see the instructions Also, see page 1, item I)	81,695,011.	89,634,684	1. 100,726,061.
	17	Accounts payable and accrued expenses	01,033,011.	05,051,00	318-18-218-12-CI-68-19-13
	18	Grants payable			CAN TRUST TO THE THE
ies	19	Deferred revenue			
iabilities	20	Loans from officers, directors, trustees, & other disqualified persons			
<u>.e</u>	21	Mortgages and other notes payable (attach schedule)			
_	22	Other liabilities (describe ► See Statement 6)	285.	285	TO THE STATE OF THE
					THE SECRET SECRET
	23	Total liabilities (add lines 17 through 22)	285.	285	
seou		Foundations that follow SFAS 117, check here and complete lines 24 through 26, and lines 30 and 31.			
<u>ia</u>	24	Unrestricted			
ã	25	Temporarily restricted			A STATE OF THE STA
ď	26	Permanently restricted			
Het Assets or Fund Balances		Foundations that do not follow SFAS 117, check here and complete lines 27 through 31.			
Š	27	Capital stock, trust principal, or current funds.			A PART OF THE PART
set	28	Paid-in or capital surplus, or land, bldg, and equipment fund			基金金属基金
A ASS	29	Retained earnings, accumulated income, endowment, or other funds	81,694,726.	89 <u>,6</u> 34,399	
	30	Total net assets or fund balances (see instructions)	81,694,726.	89,634,399	
	3	Total liabilities and net assets/fund balances (see instructions)	81,695,011.	89,634,684	
Par	tilli.	Analysis of Changes in Net Assets or Fund Balanc	es		
1	Total end-	net assets or fund balances at beginning of year — Part II, colu of-year figure reported on prior year's return)	ımn (a), line 30 (must a	gree with	81,694,726.
2	Ente	r amount from Part I, line 27a			
3	Other	increases not included in line 2 (itemize)			3
4	Add	lines 1, 2, and 3			89,634,399.
5		ases not included in line 2 (itemize)			
6	Total	net assets or fund balances at end of year (line 4 minus line 5)) – Part II, column (b),	line 30	89,634,399.

(a) List and describe	the kind(s) of property sold (for example warehouse, or common stock, 200 she	e, real estate,	How acquired — Purchase — Donation	(C) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
1a			Donation		
ь					
С					
d					
е					
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		(h) Gain or ((e) plus (f) m	
a					
b					
С					
d					_
e					
Complete only for assets show	ng gain in column (h) and owned by the			(I) Gains (Col	
(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any		ain minus col (k), b an -0-) or Losses (fi	
a					
b					
С			_		_
d					
e					
2 Capital gain net income or (n	et capital loss)	enter in Part I, line 7er -0- in Part I, line 7	2		5,662,751
3 Net short-term capital gain or	(loss) as defined in sections 1222(5)	and (6)			
If gain, also enter in Part I, Ii in Part I, line 8	ne 8, column (c) See instructions If	(loss), enter -0-	3		
Part V Qualification Unde	er Section 4940(e) for Reduce	d Tax on Net Investmen	nt Income		
(For optional use by domestic private	foundations subject to the section 4940(a) tax on net investment incom	ie)		
16 analysis 4040(d)(2) analysis language	About a seal bloods				
If section 4940(d)(2) applies, leave	this part blank				
Was the foundation liable for the se	ection 4942 tax on the distributable ai	mount of any year in the base	e period?	Yes	X No
If 'Yes,' the foundation doesn't qua	lify under section 4940(e) Do not cor	mplete this part			ш
1 Enter the appropriate amount in	each column for each year, see the ins	tructions before making any en	tries		
(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use asset	s	(d) Distribution (col (b) divided	
2017	4,312,006.	93,041,	430.		0.04634
2016	4,319,944.	88,181,			0.048989
2015	3,862,161.	85,483,			0.045180
2014	2,671,379.	83,189,			0.032112
2013	2,883,335.	74,076,			0.038924
2 Total of line 1, column (d)			2		
	- Consider a manual of the Constant	- l 0 b . f 0	-		0.211550
3 Average distribution ratio for the number of years the foundation	e 5-year base period – divide the total on has been in existence if less than	n line 2 by 5 0, or by the 5 years	3		0.042310
4 Enter the net value of noncha	aritable-use assets for 2018 from Part	X, line 5	_4_	96	5,023,951
5 Multiply line 4 by line 3			5	4	1,062,773
6 Enter 1% of net investment in	ncome (1% of Part I, line 27b)		6		75,860
7 Add lines 5 and 6			7		1,138,633
8 Enter qualifying distributions	from Part XII, line 4		8		1,275,281
If line 8 is equal to or greater th	an line 7, check the box in Part VI, line	1b, and complete that part usin	ig a 1% tax ra	ate See the	

	tylissi Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 494		e instructior	15)
1 a	Exempt operating foundations described in section 4940(d)(2), check here and enter 'N/A' on line	e1		
	Date of ruling or determination letter (attach copy of letter if necessary – see instr	ructions)		
b	Domestic foundations that meet the section 4940(e) requirements in Part V,		1	75,860.
	check here. X and enter 1% of Part I, line 27b			
С	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, col	(b)		
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-)		2	0.
3	Add lines 1 and 2		3	75,860.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only,	others, enter -0-)	4	0.
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	-	5	75,860.
6	Credits/Payments			ELECTIVE THE
а	2018 estimated tax pmts and 2017 overpayment credited to 2018	186,856		
b	Exempt foreign organizations — tax withheld at source 6b	,		
С	Tax paid with application for extension of time to file (Form 8868) 6 c			
d	Backup withholding erroneously withheld 6 d			
	Total credits and payments Add lines 6a through 6d		7	186,856.
8	Enter any penalty for underpayment of estimated tax. Check here X if Form 2220 is att	tached	8	
9	Tax due If the total of lines 5 and 8 is more than line 7, enter amount owed		9	0.
10	Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	,	10	110,996.
11	Enter the amount of line 10 to be Credited to 2019 estimated tax 110, 996.	Refunded '	11	0.
	Statements Regarding Activities	Retailed	1	
				Yes No
Ιa	During the tax year, did the foundation attempt to influence any national, state, or local le participate or intervene in any political campaign?	egisiation or did it		1 a X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition			1 b X
	If the answer is 'Yes' to 1a or 1b , attach a detailed description of the activities and copies of any ma or distributed by the foundation in connection with the activities	aterials published		
	Did the foundation file Form 1120-POL for this year?			1c X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the		•	
•	(1) On the foundation > \$ 0. (2) On foundation managers > Enter the reimbursement (if any) paid by the foundation during the year for political expenditure to		0.	
-	foundation managers >\$ 0	tax imposcu on		
2	Has the foundation engaged in any activities that have not previously been reported to the	e IRS?		2 X
_	If 'Yes,' attach a detailed description of the activities	,	,	78 78 78 PER 1993
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instruit of incorporation, or bylaws, or other similar instruments? If 'Yes,' attach a conformed copy	iment, articles		3 X
1 ~	Did the foundation have unrelated business gross income of \$1,000 or more during the ye	-		3 X X
	If 'Yes,' has it filed a tax return on Form 990-T for this year?	sai ·		
	Was there a liquidation, termination, dissolution, or substantial contraction during the year?			4b N/A 5 X
9	If 'Yes,' attach the statement required by General Instruction T			3 A
_	· · · · · · · · · · · · · · · · · · ·	authar		多 學/學/與明
	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied e	emiei		
	By language in the governing instrument, or			
	 By state legislation that effectively amends the governing instrument so that no mandatory dire with the state law remain in the governing instrument? 	ections that conflict		6 X
7	Did the foundation have at least \$5,000 in assets at any time during the year? If 'Yes,' complete Part II, col (c), and	nd Part XV		7 X
8 a	Enter the states to which the foundation reports or with which it is registered. See instructions	<u> </u>		
	NV			
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 <i>General Instruction G?</i> If 'No,' attach explanation			8b X
9		section 4942(i)(3) o	or 4942/11/51	EATTE
	Is the foundation claiming status as a private operating foundation within the meaning of for calendar year 2018 or the tax year beginning in 2018? See the instructions for Part XIV		e Part XIV	9 X
10	Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule and addresses	listing their names		10 X
BAA			Fc	orm 990-PF (2018)

PartWilf Statements Regarding Activities (continued) 11 All any interduction (part speed and statement) Statement			990-PF (2018) GABELLI FOUNDATION, INC	94-2	297515	9	Р	age 5
within the resaming of section \$2(0)(12)* If Yes, statich schedule See instructions. 12 Only the foundation makes a destriction to accordance deveal for the which the foundation or a disquisited person had been seen to the foundation or application? 13 Did the foundation compty with the public inspection requirements for its annual returns and exemption application? 14 The books are in care of ** ANCELLO & O 'BRITEN P. A. 15 Section 997(a)(1) innersempt charitable trusts timing form 999-PF in heir of Form 104 — check here and enter the amount of tax-exempt intertable trusts timing form 999-PF in heir of Form 104 — check here and enter the amount of tax-exempt intertable trusts timing form 999-PF in heir of Form 104 — check here and enter the amount of tax-exempt intertable trusts timing form 999-PF in heir of Form 104 — check here and enter the amount of tax-exempt intertable trusts timing form 999-PF in heir of Form 104 — check here and enter the amount of tax-exempt intertable trusts timing form 999-PF in heir of Form 104 — check here and enter the amount of tax-exempt intertable trusts timing form 999-PF in heir of Form 104 — check here and enter the amount of tax-exempt intertable trusts timing form 999-PF in heir of Form 104 — check here and enter the amount of tax exemption application? 16 Al any time during clientable and a foreign country. 17 See the instructions for exceptions and filing requirements for FincEn Form 114. If Yes, either the amount of tax is checked in the "Yes's column, unless an exception applies. 19 Carrier of the Search of the Country of the Search o	N	Par	t:VII:A: Statements Regarding Activities (continued)			,		
12		11					Yes	
13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application? 13 X Website address		12		on had		12		v
Website address 14 The books are in care of ANGELO 6 O'BRIEN, P. N. Located at 9 340 NORTH AVERUE EAST CRNNFORD NJ 2/P + 4 07015-2451 15 Section 4947(a)(1) nonexempt charitable trusts filing form 990-PF in leu of Form 1041 - check here and enter the amount of tax exempt interest received or accured during the year and enter the amount of tax exempt interest received or accured during the year and enter the amount of tax exempt interest received or accured during the year and enter the amount of tax exempt interest received or accured during the year and the form 1041 - check here 15 N/A N/A 15 N/A any time during calendar year 2018, and the foundation have an interest in or a signature or other authority over a bank, securities, or other interest in a signature or other authority over a bank, securities, or a signature or other authority over a bank securities, or a signature or other authority over a bank securities. The arms of the foreign county? Pairt NILES- 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. Pairt NILES- 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. Pairt NILES- 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. Pairt NILES- Statements Regarding Activities for Which Form 4720 May Be Required File Form 4720 in an interest of the received or indirect with a disqualified person? Yes No		13		n annlicat	ion? -		Y	<u> </u>
14 The books are in care of ** ANGELO & O'BRIEN, P. A. Located at ** 340 NORTH AYENIDE BAST CRANFORD NJ 21 + 4 * 07016-2461 15 Section 4947(a)(1) indexempt charitable trusts filing Form 990-PF in heu of Form 1041 - check here and enter the amount of tax-exempt interest received or accrued during the year 15 N/A N				. арриса			- 21	<u> </u>
15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990.FF in lieu of Form 1041 – check here and ender the amount of tax-exempt interest received during the year 16 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. Partit.VII.Ba.7 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. 1 a During the year, did the foundation (either directly or indirectly). 1 a During the year, did the foundation (either directly or indirectly). (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? (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) (or make any of either available for the benefit or use of a disqualified person) (or make any of either available for the benefit or use of a disqualified person) (or make any of either available for the benefit or use of a disqualified person) (or make any of either available for the benefit or use of a disqualified person) (or make any of either available for the benefit or use of a disqualified person) (or make any of either available for the benefit or use of a disqualified person). (6) Agree to pay money or property to a government afficial? (Exception, Check 'No' if the loundation and payled (No') or in a current notice regarding disaster assistance? See instructions [Ves] No bit any answer is 'Yes' to la(1) — (O), did any of the acts fail to qualify under the exceptions described		14		no ►	(908)	276	-830	. – – -
15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990.FF in lieu of Form 1041 – check here and ender the amount of tax-exempt interest received during the year 16 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. Partit.VII.Ba.7 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. 1 a During the year, did the foundation (either directly or indirectly). 1 a During the year, did the foundation (either directly or indirectly). (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? (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) (or make any of either available for the benefit or use of a disqualified person) (or make any of either available for the benefit or use of a disqualified person) (or make any of either available for the benefit or use of a disqualified person) (or make any of either available for the benefit or use of a disqualified person) (or make any of either available for the benefit or use of a disqualified person) (or make any of either available for the benefit or use of a disqualified person). (6) Agree to pay money or property to a government afficial? (Exception, Check 'No' if the loundation and payled (No') or in a current notice regarding disaster assistance? See instructions [Ves] No bit any answer is 'Yes' to la(1) — (O), did any of the acts fail to qualify under the exceptions described	_		Located at > 340 NORTH AVENUE FAST CRANFORD N.I ZIP + 4 >					<u> </u>
and enter the amount of tax-exempt interest received or accrued during the year 16. 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. Partifuli Bris Statements Regarding Activities for Which Form 4720 May Be Required File Form 4720 if any time is checked in the Yes' column, unless an exception applies. 1 a During the year, did the foundation (either directly or indirectly) (1) Engage in the sale or exchange, or leasing of property with a disqualified person? (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? (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)? western to be entire the exceptions of a disqualified person? (6) Agrie to any money or property to a government official? (Exception, Check 'No' if the foundation and the state of the complete the official for a period date termination of government service, if ferminating within 90 days.) b) If any answer is 'Yes' to Ia(1)'-(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53 491(6)'-(3) or in a current notice regarding disaster assistance? See instructions Organizations relying on a current notice regarding disaster assistance? See instructions Organizations relying on a current notice regarding disaster assistance. Check here • Did the foundation of the set of t				2.11				\Box
Yes No bank, securities, or other financial account in a foreign country? See the instructions for exceptions and filing requirements for FinCEN Form 114 If 'Yes,' select he name of the foreign country? File Form 4720 if any item is checked in the 'Yes' column, unless an exception applies.				▶ 1	5			N/A
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charitable purposes? 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? X X Ab X X			determine if the foundation had excess business holdings in 2018)			3 b	N	/A
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		_	reopardize its charitable purpose that had not been removed from reopardy before the first day of			NA L	<u> </u>	NA HI
	•	BΔΛ			Fo		0-PF (

Rart⊮VII-B∦ Statements Regarding Activiti	ies for Which Form	4720 May Be Req	uired (co	ontınue	ed)			
5 a During the year, did the foundation pay or incur a	ny amount to					********* ********	Yes	No
(1) Carry on propaganda, or otherwise attempt	ot to influence legislatio	n (section 4945(e))?		Yes	XN	o [45]	Section of the second	を
(2) Influence the outcome of any specific pub on, directly or indirectly, any voter registra	lic election (see section ation drive?	4955), or to carry		Yes	XN	10000		
(3) Provide a grant to an individual for travel,	study, or other similar	purposes?		Yes	X N	o	\$ 4000 \$	建全型
(4) Provide a grant to an organization other than in section 4945(d)(4)(A)? See instructions	a charitable, etc , organi	zation described		Yes	X N	• *****		
(5) Provide for any purpose other than religio educational purposes, or for the preventio	us, charitable, scientific n of cruelty to children	c, literary, or or animals?		Yes	XN	o (1) (1) (1) (1) (1) (1) (1) (1) (1) (1)		
b If any answer is 'Yes' to 5a(1)—(5), did any of described in Regulations section 53 4945 or in a constructions	the transactions fail to current notice regarding of	qualify under the exceplisaster assistance?	ptions			5 b	N	/A
Organizations relying on a current notice rega	rding disaster assistance	ce, check here		•	- 🗍	142	14 (1-3-0,0,0) (1-4-18-1)	
c If the answer is 'Yes' to question 5a(4), does tax because it maintained expenditure respon		emption from the	N/A	☐ Yes		lo Pier		學等
If 'Yes,' attach the statement required by Regi	ulations section 53 4945	5–5(d)			Ш	5.5.5. 5.7.18		ANTES A
6 a Did the foundation, during the year, receive an on a personal benefit contract?	ny funds, directly or ind	rectly, to pay premium	s	Yes	XN	o 1111		
b Did the foundation, during the year, pay prem If 'Yes' to 6b, file Form 8870	iums, directly or indirec	tly, on a personal bene	fit contrac	t?		6b		X
7a At any time during the tax year, was the found	dation a party to a proh	ibited tax shelter transa	action?	Yes	XN	O प्रिकेश		
b If 'Yes,' did the foundation receive any procee	•			12	_N/	N 40.	114	ALCO N
8 Is the foundation subject to the section 4960 tax of		an \$1,000,000 in remune	ration	Yes	X N	10 (10 (10 (10 (10 (10 (10 (10 (10 (10 (Section 1	
or excess parachute payment(s) during the ye		·					i d rá.s	Irvi.\$
Part VIII Information About Officers, D			gers, Hig	ghly Pa	id En	nployee	s,	
and Contractors 1 List all officers, directors, trustees, and found	See Statement dation managers and the	/ neir compensation, See	instruction	ons.				
	(b) Title, and average	(c) Compensation		ributions	to			
(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	plans a	yee benand deferonsation	rred	e) Expens other a		
See Statement 8								
				-				•
		7,500.			0.			0.
					ļ			
								-
	•							
2 Compensation of five highest-paid employees (of	her than those included	on line 1 — see instructio	ne) If none	enter 'N	ONE			
(a) Name and address of each employee	(b) Title, and average	,	(d)Conti	ributions	to	(e) Expens		ount
paid more than \$50,000	hours per week devoted to position	(c) Compensation	plans a	yee bene ind defer sensation	red	other a		
None								
		<u> </u>		_				
		_						
Total number of other employees paid over \$50,000	<u>'</u>		i		- ▶			

Form **990-PF** (2018)

Form 990-PF (2018) GABELLI FOUNDATION, INC	94-297	5159 Page 7
Part VIII Information About Officers, Directors, Trustees, Foundand Contractors (continued)	dation Managers, Highly Paid E	mployees,
3 Five highest-paid independent contractors for professional services. See i	nstructions. If none, enter 'NONE.'	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
ANGELO & O'BRIEN, P.A. 340 NORTH AVENUE EAST	-	
CRANFORD, NJ 07016	TAX & ACCOUNTING	78,000.
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 statistic organizations and other beneficiaries served, conferences convened, research papers produced, etc.	al information such as the number of	Expenses
1 NONE		
2		
3		
Part IX-B Summary of Program-Related Investments (see Instru	ictions)	
Describe the two largest program-related investments made by the foundation during the	e tax year on lines 1 and 2	Amount
1 <u>N/A</u>		
2		
All other program-related investments. See instructions		
3		
Total. Add lines 1 through 3		0.
BAA		Form 990-PF (2018)

Form 990-PF (2018) GABELLI FOUNDATION, INC	94-29751	59 Page 8
Part X Minimum Investment Return (All domestic foundations must complete this part. f see instructions.)	oreign fou	undations,
1 Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes		00 540 460
a Average monthly fair market value of securities	1 a	80,742,163.
b Average of monthly cash balances	1 b	16,744,082.
c Fair market value of all other assets (see instructions)	1 c	
d Total (add lines 1a, b, and c)	1 d	97,486,245.
e Reduction claimed for blockage or other factors reported on lines 1a and	_	
<u> </u>	0.	_
2 Acquisition indebtedness applicable to line 1 assets	2	<u> </u>
3 Subtract line 2 from line 1d .	3	97,486,245.
4 Cash deemed held for charitable activities Enter 1-1/2% of line 3 (for greater amount, see instructions).	4	1,462,294.
5 Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	96,023,951.
6 Minimum investment return. Enter 5% of line 5	6	4,801,198.
Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operand certain foreign organizations, check here ☐ and do not complete this part.		ndations
1 Minimum investment return from Part X, line 6	1	4,801,198.
2a Tax on investment income for 2018 from Part VI, line 5 2a 75,860	o. 🗆 🗆	
b Income tax for 2018 (This does not include the tax from Part VI) 2b		
c Add lines 2a and 2b	2 c	75,860.
3 Distributable amount before adjustments Subtract line 2c from line 1	3	4,725,338.
4 Recoveries of amounts treated as qualifying distributions	4	
5 Add lines 3 and 4	5	4,725,338.
6 Deduction from distributable amount (see instructions)	6	
7 Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII, line 1.	7	4,725,338.
Part XII Qualifying Distributions (see instructions)	1 1	· · · · ·
1 Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
a Expenses, contributions, gifts, etc. — total from Part I, column (d), line 26	1 a	4,275,281.
b Program-related investments — total from Part IX-B	1 b	
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 a Suitability test (prior IRS approval required)	3 a	
b Cash distribution test (attach the required schedule)	3 b	
4 Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	4,275,281.
5 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income Enter 1% of Part I, line 27b. See instructions	5	75,860.
6 Adjusted qualifying distributions. Subtract line 5 from line 4	6	4,199,421.
Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the qualifies for the section 4940(e) reduction of tax in those years	foundation	,

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Form **990-PF** (2018)

Part XIII Undistributed Income (see instructions)

1 Distributable amount for 2018 from Part XI, line 7 2 Undistributed income, if any, as of the end of 2018 a Enter amount for 2017 only b Total for prior years 20 , 20 , 20	338.
2 Undistributed income, if any, as of the end of 2018 a Enter amount for 2017 only b Total for prior years 20 _ , 20 _ , 20 Excess distributions carryover, if any, to 2018 a From 2013 b From 2014	
a Enter amount for 2017 only b Total for prior years 20 , 20 , 20 Excess distributions carryover, if any, to 2018 a From 2013 b From 2014	
b Total for prior years 20 , 20 , 20 O. 3 Excess distributions carryover, if any, to 2018 a From 2013 b From 2014	
a From 2013 b From 2014	
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 * \$ 4,275,281.	
a Applied to 2017, but not more than line 2a 4,259,155.	
b Applied to undistributed income of prior years (Election required – see instructions).	
c Treated as distributions out of corpus	
(Election required – see instructions) 0.	
	<u> 126.</u>
e Remaining amount distributed out of corpus 0.	
5 Excess distributions carryover applied to 2018 0. (If an amount appears in column (d), the	0.
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 0.	
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	
Inne 2a Taxable amount — see instructions 0.	
f Undistributed income for 2018 Subtract lines	
4d and 5 from line 1. This amount must be distributed in 2019. 4,709,	212
7 Amounts treated as distributions out of	<u> </u>
corpus to satisfy requirements imposed by	
section 170(b)(1)(F) or 4942(g)(3) (Election may be required – see instructions)	
8 Excess distributions carryover from 2013 not applied on line 5 or line 7 (see instructions)	
9 Excess distributions carryover to 2019.	
Subtract lines 7 and 8 from line 6a 0.	
10 Analysis of line 9	
a Excess from 2014	
b Excess from 2015	
c Excess from 2016	
d Excess from 2017	
e Excess from 2018	

Form 990-PF (2018) GABELLI FOUNDATIO			1 1 / (1 A	94-297515	
Part XIV Private Operating Foundat					N/A
1 a If the foundation has received a ruling or dete is effective for 2018, enter the date of the	rmination letter that i ruling	it is a private operati	ng toundation, and tr	ie ruiing	
b Check box to indicate whether the foundat	ion is a private ope	rating foundation d	lescribed in section	4942(j)(3) or	4942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year	-	Prior 3 years		(e) Total
income from Part I or the minimum investment return from Part X for	(a) 2018	(b) 2017	(c) 2016	(d) 2015	(-,
each year listed		-			
b 85% of line 2a					
c Qualifying distributions from Part XII, line 4 for each year listed					
d Amounts included in line 2c not used directly for active conduct of exempt activities					
 Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c 					
3 Complete 3a, b, or c for the alternative test relied upon					
a 'Assets' alternative test — enter					
(1) Value of all assets.					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					:
b 'Endowment' alternative test — enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed		_			
c 'Support' alternative test - enter					
(1) Total support other than gross investment income (interest, dividends, rents, payments					
on securities loans (section 512(a)(5)), or royalties)					
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from					
an exempt organization (4) 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 th	e year — see in	structions.)		, 40,000 or more	
1 Information Regarding Foundation Manag					
a List any managers of the foundation who have close of any tax year (but only if they have	e contributed more the contributed more	ian 2% of the total co than \$5.000) (See	ontributions received section 507(d)(2)	by the foundation bef	ore the
MARIO J. GABELLI		, 2, 2 2 2 7	,(-,,		
		<u> </u>			
b List any managers of the foundation who own a partnership or other entity) of which the	10% or more of the foundation has a 10	stock of a corporatio	n (or an equally large	portion of the owner	ship of
None	, our lad a li	oro or grounds and			
2 Information Regarding Contribution, Grant, C					L - L - I
Check here \(\begin{align*} \begin{align*} \begin{align*} \begin{align*} \ld \begin{align*} \ld \ld \ld \\ \end{align*} & \text{If the foundation make} \end{align*} \)					
2a, b, c, and d See instructions a The name, address, and telephone number or	omed address of the	n naraan ta wham an	and blueds anathonia	addrage ad	
a The hame, address, and telephone humber of	eman address or the	e person to whom ap	phications should be	addiessed	
		_			
b The form in which applications should be s	submitted and infor	mation and materia	ils they should inclu	de	
c Any submission deadlines					· · · · · · · · · · · · · · · · · · ·
		<u> </u>		<u>-</u>	
d Any restrictions or limitations on awards, s	such as by geograp	hical areas, charita	ble fields, kinds of i	nstitutions, or other	factors

3	Grants and Contributions Paid During the Ye	ar or Approved for Fut	ure Paymen	t	
	Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
	Name and address (home or business)	or substantial contributor	recipient		
	Paid during the year				
See	Statement 9				
		•			
—	Total	<u> </u>		<u>l</u> ▶ 3a	4,168,000
	Approved for future payment]	4,100,000
	Tripproved for fatare payment				
	Total	<u> </u>	<u>I.</u>	► 3b	<u> </u>
	ı vıaı				<u> </u>

Enter	gross	amounts unless otherwise indicated	Unrelate	ed business income	Excluded	d by section 512, 513, or 514	(e)
1	Drogr	am service revenue	(a) Business code	(b) Amount	(c) Exclu- sion	(d) Amount	Related or exempt function income (See instructions)
' a	Flogra	ant service revenue			code		
a b					+		
C			<u> </u>				
d			+	<u>-</u>	+		
e							
•		· · · · · · · · · · · · · · · · · · ·		_	1		
'	Foos	and contracts from government agencies			+		
-		pership dues and assessments			-		
3		t on savings and temporary cash investments		_	-		
3 4		ends and interest from securities	-		1.4	1 022 247	
•			under entre has been		14	1,933,347.	
		ental income or (loss) from real estate financed property	### 875.4 kg/5	李维·李伦敦联举和 最高的共享。	4 G. 1887-500.	SAMES AND ACCURATE	######################################
					 		
		ebt-financed property					
6		tal income or (loss) from personal property			 	0.54 574	
7		investment income	<u> </u>			261,571.	
8		(loss) from sales of assets other than inventory	ļ		-	1,157,400.	
9		come or (loss) from special events					
10		profit or (loss) from sales of inventory	A ALVII a Nove the tile	The this was a like who are to be for the start and a	nd 454. , 455. , 484pa.s.Xv	, and anomalous, was and contains union. The sales	was the continuity it as a constitution of
11	Other	revenue	GREET STREET	ANGENIA ESPOSA PER		BEFFE CALLERY	
а							
b					ļ		
С					ļ		
d							
d e					ļ		
d e	Subto	tal Add columns (b), (d), and (e)	A SALE SALES		1		
d e 12 13	Total.	Add line 12, columns (b), (d), and (e)			1 (- 24) 12 - 12 4 12	3,352,318. 13	3,352,318.
d 12 13 (See	Total. worksl	Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculat	ions)			13	3,352,318
d 12 13 (See	Total. worksl	Add line 12, columns (b), (d), and (e)	ions)			13	3,352,318
d 12 13 (See	Total. worksl	Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculat	e Accompl	ishment of Exemp	ot Purp	Oses -A contributed important	tly to the
d 12 13 (See Par	Total. worksl XVI- No.	Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculat B Relationship of Activities to th	e Accompl	ishment of Exemp	ot Purp	Oses -A contributed important	tly to the
d 12 13 (See Par	Total. worksl	Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculat B Relationship of Activities to th	e Accompl	ishment of Exemp	ot Purp	Oses -A contributed important	tly to the
d 12 13 (See Par	Total. worksl XVI- No.	Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculat B Relationship of Activities to th	e Accompl	ishment of Exemp	ot Purp	Oses -A contributed important	tly to the
d 12 13 (See Par	Total. worksl XVI- No.	Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculat B Relationship of Activities to th	e Accompl	ishment of Exemp	ot Purp	Oses -A contributed important	tly to the
d 12 13 (See Par	Total. worksl XVI- No.	Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculat B Relationship of Activities to th	e Accompl	ishment of Exemp	ot Purp	Oses -A contributed important	tly to the
d 12 13 (See Par	Total. worksl XVI- No.	Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculat B Relationship of Activities to th	e Accompl	ishment of Exemp	ot Purp	Oses -A contributed important	tly to the
d 12 13 (See Par	Total. worksl XVI- No.	Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculat B Relationship of Activities to th	e Accompl	ishment of Exemp	ot Purp	Oses -A contributed important	tly to the
d 12 13 (See Par	Total. worksl XVI- No.	Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculat B Relationship of Activities to th	e Accompl	ishment of Exemp	ot Purp	Oses -A contributed important	tly to the
d 12 13 (See Par	Total. worksl XVI- No.	Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculat B Relationship of Activities to th	e Accompl	ishment of Exemp	ot Purp	Oses -A contributed important	tly to the
d 12 13 (See Par	Total. worksl XVI- No.	Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculat B Relationship of Activities to th	e Accompl	ishment of Exemp	ot Purp	Oses -A contributed important	tly to the
d 12 13 (See Par	Total. worksl XVI- No.	Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculat B Relationship of Activities to th	e Accompl	ishment of Exemp	ot Purp	Oses -A contributed important	tly to the
d 12 13 (See Par	Total. worksl XVI- No.	Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculat B Relationship of Activities to th	e Accompl	ishment of Exemp	ot Purp	Oses -A contributed important	tly to the
d 12 13 (See Par	Total. worksl XVI- No.	Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculat B Relationship of Activities to th	e Accompl	ishment of Exemp	ot Purp	Oses -A contributed important	tly to the
d 12 13 (See Par	Total. worksl XVI- No.	Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculat B Relationship of Activities to th	e Accompl	ishment of Exemp	ot Purp	Oses -A contributed important	tly to the
d 12 13 (See Par	Total. worksl XVI- No.	Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculat B Relationship of Activities to th	e Accompl	ishment of Exemp	ot Purp	Oses -A contributed important	tly to the
d 12 13 (See Par	Total. worksl XVI- No.	Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculat B Relationship of Activities to th	e Accompl	ishment of Exemp	ot Purp	Oses -A contributed important	tly to the
d 12 13 (See Par	Total. worksl XVI- No.	Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculat B Relationship of Activities to th	e Accompl	ishment of Exemp	ot Purp	Oses -A contributed important	tly to the
d 12 13 (See Par	Total. worksl XVI- No.	Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculat B Relationship of Activities to th	e Accompl	ishment of Exemp	ot Purp	Oses -A contributed important	tly to the
d 12 13 (See Par	Total. worksl XVI- No.	Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculat B Relationship of Activities to th	e Accompl	ishment of Exemp	ot Purp	Oses -A contributed important	tly to the
d 12 13 (See Par	Total. worksl XVI- No.	Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculat B Relationship of Activities to th	e Accompl	ishment of Exemp	ot Purp	Oses -A contributed important	tly to the
d 12 13 (See Par	Total. worksl XVI- No.	Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculat B Relationship of Activities to th	e Accompl	ishment of Exemp	ot Purp	Oses -A contributed important	tly to the
d 12 13 (See Par	Total. worksl XVI- No.	Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculat B Relationship of Activities to th	e Accompl	ishment of Exemp	ot Purp	Oses -A contributed important	tly to the
d 12 13 (See Par	Total. worksl XVI- No.	Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculat B Relationship of Activities to th	e Accompl	ishment of Exemp	ot Purp	Oses -A contributed important	tly to the
d 12 13 (See Par	Total. worksl XVI- No.	Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculat B Relationship of Activities to th	e Accompl	ishment of Exemp	ot Purp	Oses -A contributed important	3,352,318.

Form 990-PF (2018) GABELLI FOUNDATION, INC 94-2975159

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

1 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?	_	Yes	No
a Transfers from the reporting foundation to a noncharitable exempt organization of			
(1) Cash	1 a (1)		Х
(2) Other assets	1 a (2)		X
b Other transactions			
(1) Sales of assets to a noncharitable exempt organization	1 b (1)		X
(2) Purchases of assets from a noncharitable exempt organization	1 b (2)		X
(3) Rental of facilities, equipment, or other assets	1 b (3)		X
(4) Reimbursement arrangements	1 b (4)		X
(5) Loans or loan guarantees	1 b (5)		X
(6) Performance of services or membership or fundraising solicitations	1 b (6)		Х
c Sharing of facilities, equipment, mailing lists, other assets, or paid employees	1 c		X
d If the answer to any of the above is 'Yes,' complete the following schedule. Column (b) should always show the fair mathematical forms 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 (d) the value of the goods, other assets, or services received	arket valu	ue of	
(a) Line no (b) Amount involved (c) Name of noncharitable exempt organization (d) Description of transfers, transactions, and st	naring arran	gement	s
N/A			
 2 a 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? b If 'Yes,' complete the following schedule 	Yes	X	No
(a) Name of organization (b) Type of organization (c) Description of relati	ionship		
N/A			
Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.	May the II	RS disci	ıss
Here Line Chairman	preparer : See instru	shown b	
Signature of officer or trustee Date Title	X	Yes	No
Cleck U	PTIN P005245:	30	
Preparer Firm's name Angelo & O'Brien, P.A. Firm's EIN 22-274			
Use Only Firm's address 340 North Avenue East	<u></u>		
	276-830	0	
	Form 99 0		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
GABELLI FOUNDATION, INC		94-2975159
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	s a private foundation
	527 political organization	·
	527 pointed 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	
Check if your organization is covered by the Genera	l Rule or a Special Rule.	
Note: Only a section 501(c)(7), (8), or (10) org	anization can check boxes for both the General Rule and	a Special Rule See instructions
General Rule		
X For an organization filing Form 990, 990-E	Z, or 990-PF that received, during the year, contributions ete Parts I and II See instructions for determining a conti	totaling \$5,000 or more (in money or ributor's total contributions
Special Rules		
under sections 509(a)(1) and 170(b)(1)(A)(vi).	01(c)(3) filing Form 990 or 990-EZ that met the 33-1/3% s that checked Schedule A (Form 990 or 990-EZ), Part II, line he year, total contributions of the greater of (1) \$5,000, o 00-EZ, line 1 Complete Parts I and II	13. 16a, or 16b, and that
Uduring the year total contributions of more	01(c)(7), (8), or (10) filing Form 990 or 990-EZ that receiv than \$1,000 <i>exclusively</i> for religious, charitable, scientific o children or animals. Complete Parts I (entering 'N/A' in	c. literary, or educational
during the year, contributions exclusively for \$1,000 If this box is checked, enter here to charitable, etc., purpose. Don't complete a	01(c)(7), (8), or (10) filing Form 990 or 990-EZ that received religious, charitable, etc., purposes, but no such contribute total contributions that were received during the year finy of the parts unless the General Rule applies to this oreble, etc., contributions totaling \$5,000 or more during the	outions totaled more than or an <i>exclusively</i> religious, ganization becayse
Caution: An organization that isn't covered by 990-PF), but it must answer 'No' on Part IV, lie	the General Rule and/or the Special Rules doesn't file Sone 2, of its Form 990, or check the box on line H of its Form 1900, or Schedule B (Form 990, 990-EZ, or	thedule B (Form 990, 990-EZ, or rm 990-EZ or on its Form 990-PF,

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

Name of organization

CADETTT	FOUNDATION.	INC
GADELLL	LOUNDATTON.	TING

Employer identification number

94-2975159

Part I	Contributors (see instructions) Use duplicate copies of Part I if additional s	pace is needed	
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	MARIO J. GABELLI 165 WEST LIBERTY STREET RENO, NV 89501	\$ <u>8,006,386.</u>	Person Payroll Complete Part II for noncash contributions)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	LICT CORPORATION 401 THEODORE FREMD AVENUE RYE, NY 10580	\$1,254,900.	Person X Payroll Noncash (Complete Part II for noncash contributions)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Complete Part II for noncash contributions)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Complete Part II for noncash contributions)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$ 	Person
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Complete Part II for noncash contributions)

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

Employer identification number

GABELLI FOUNDATION, INC

94-2975159

Part II	Noncash Property (see instructions) Use duplicate copies of Part II if additional s	pace is needed	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
1	Provided upon request	\$8,006,386.	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
- -		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
BAA	Sch	edule B (Form 990, 990-EZ	, or 990-PF) (2018

2018	Federal Statements	
Client MJG_FD	GABELLI FOUNDATION, INC	94-2975159
1/22/20 Statement 1 Form 990-PF, Part I, Line 11 Other Income		10 51AN
Other Investment Income	(a) (b) Net Revenue Investment per Books Income \$ 261,571. Total \$ 261,571. \$ 0.	(c) Adjusted Net Income
Statement 2 Form 990-PF, Part I, Line 16b Accounting Fees		
Angelo & O'Brien, P.A.	(a) (b) Net (c) Expenses per Books Investment Income Adjusted Net Income \$ 78,000. \$ 78,000. \$ 78,000. \$ 78,000.	(d) Charitable Purposes \$ 0.
Statement 3 Form 990-PF, Part I, Line 16c Other Professional Fees		
Bank Charges Filing Fees	(a) (b) Net (c) Expenses Investment Adjusted per Books Income Net Income \$ 15. 325. Total \$ 0. \$ 0	(d) Charitable Purposes \$ 15. 325. \$ 340.
Statement 4 Form 990-PF, Part I, Line 18 Taxes		
Federal Excise Taxes (net) Payroll Taxes	(a) (b) Net (c) Expenses per Books Investment Adjusted Net Income \$ 127,000.	\$ 5,691.

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2018	Federal Statements	Page 2		
Client MJG_FD	GABELLI FOUNDATION, INC	94-29751		
1/22/20		10 51AN		
Statement 5 Form 990-PF, Part I, Line 23 Other Expenses				
	(a) (b) Net (c) Expenses Investment Adjusted per Books Income Net Income	(d) Charitable Purposes		
Other Investment Expense Trading Expenses	$\begin{array}{cccccccccccccccccccccccccccccccccccc$	\$ 0.		
Statement 6 Form 990-PF, Part II, Line 22 Other Liabilities				
Payroll Taxes Payable	\$	285.		
	Total <u>₹</u>	285.		
Statement 7 Form 990-PF, Part VIII Compensation Explanation				
ANGELO & O'BRIEN, P.A.	O YEARS OF SERVICE IN THE SAME YEAR.			

Statement 8 Form 990-PF, Part VIII, Line 1 List of Officers, Directors, Trustees, and Key Employees

Name and Address	Title and Average Hours <u>Per Week Devoted</u>	Compen- sation	Contri- bution to EBP & DC	Expense Account/ Other
MARIO J. GABELLI 165 WEST LIBERTY STREET RENO, NV 89501	Chairman 1.00	\$ 0.	\$ 0.	\$ 0.
MICHAEL GABELLI 165 WEST LIBERTY STREET RENO, NV 89501	Trustee 1.00	2,500.	0.	0.
MARY MAZZOLLA 165 WEST LIBERTY STREET RENO, NV 89501	Trustee 1.00	2,500.	0.	0.
MATTHEW R. GABELLI 165 WEST LIBERTY STREET RENO, NV 89501	Trustee 1.00	0.	0.	0.

018	Federal Sta	tements			Pag	e :
ient MJG_FD GABELLI FOUNDATION, INC					94-297	515
Statement 8 (continued) Form 990-PF, Part VIII, Line 1 List of Officers, Directors, Trustees	s, and Key Employees	· · · · · · · · · · · · · · · · · · ·			10 9	51A
Name and Address	Title a Average H Per Week D	Hours C		Contri- bution to EBP & DC	Expense Account Other	:/
MARC J. GABELLI 165 WEST LIBERTY STREET RENO, NV 89501	Trustee 1.00	\$	2,500. \$	0.	\$	0
ELISA GABELLI WILSON 165 WEST LIBERTY STREET RENO, NV 89501	President 25.00		0.	0.		0
,	0		0.	0.		0
		Total \$	7,500.	\$ 0.	\$	0
Statement 9 Form 990-PF, Part XV, Line 3a Recipient Paid During the Year						-
Form 990-PF, Part XV, Line 3a						
Form 990-PF, Part XV, Line 3a Recipient Paid During the Year Name and Address	Donee Relationship	Found- ation Status	Purpos Gra	int	<u>Amount</u>	
Name and Address BOSTON COLLEGE 140 COMMONWEALTH AVENUE CHESTNUT HILL MA 02467	Relationship NONE	ation <u>Status</u> 501(c)	Gra PLAZA FUN CAMPUS IMPROVEME	INTS	\$ 1,400,0	000
Name and Address BOSTON COLLEGE 140 COMMONWEALTH AVENUE	Relationship	ation <u>Status</u>	PLAZA FUN CAMPUS	int : ID : INTS IVILLE		000
Name and Address BOSTON COLLEGE 140 COMMONWEALTH AVENUE CHESTNUT HILL MA 02467 COLUMBIA BUSINESS SCHOOL 535 WEST 116TH STREET	Relationship NONE	ation <u>Status</u> 501(c)	Gra PLAZA FUN CAMPUS IMPROVEME MANHATTAN	INTS IVILLE FUND	\$ 1,400,0	000
Name and Address BOSTON COLLEGE 140 COMMONWEALTH AVENUE CHESTNUT HILL MA 02467 COLUMBIA BUSINESS SCHOOL 535 WEST 116TH STREET NEW YORK NY 10027 FORDHAM PREPARATORY SCHOOL EAST FORDHAM ROAD	Relationship NONE NONE	ation Status 501(c) 501(c)	PLAZA FUN CAMPUS IMPROVEME MANHATTAN BUILDING	INTS IVILLE FUND	\$ 1,400,0 1,000,0	000
Name and Address BOSTON COLLEGE 140 COMMONWEALTH AVENUE CHESTNUT HILL MA 02467 COLUMBIA BUSINESS SCHOOL 535 WEST 116TH STREET NEW YORK NY 10027 FORDHAM PREPARATORY SCHOOL EAST FORDHAM ROAD BRONX NY 10458 THE URSULINE SCHOOL 1354 NORTH AVENUE	Relationship NONE NONE NONE	ation Status 501(c) 501(c) 501(c)	PLAZA FUN CAMPUS IMPROVEME MANHATTAN BUILDING SCHOLARSH	INTS IVILLE FUND IP FUND	\$ 1,400,0 1,000,0 100,0	000
Name and Address BOSTON COLLEGE 140 COMMONWEALTH AVENUE CHESTNUT HILL MA 02467 COLUMBIA BUSINESS SCHOOL 535 WEST 116TH STREET NEW YORK NY 10027 FORDHAM PREPARATORY SCHOOL EAST FORDHAM ROAD BRONX NY 10458 THE URSULINE SCHOOL 1354 NORTH AVENUE NEW ROCHELLE NY 10804 BISHOP MANOGUE H.S. 400 BARTLETT STREET	Relationship NONE NONE NONE NONE	ation Status 501(c) 501(c) 501(c)	PLAZA FUN CAMPUS IMPROVEME MANHATTAN BUILDING SCHOLARSH ANNUAL FU	INTS IVILLE FUND IP FUND IND IND	\$ 1,400,0 1,000,0 100,0 25,0	000

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2018	Federal Statements				
Client MJG_FD	GABELLI FOUND	ATION, INC		94-2975159	
1/22/20				10 51AM	
Statement 9 (continued) Form 990-PF, Part XV, Line 3a Recipient Paid During the Year				,	
Name and Address	Donee <u>Relationship</u>	Found- ation Status	Purpose of Grant	Amount	
BOYS & GIRLS CLUB 2680 W. NINTH STREET RENO NV 89512	NONE	501 (c)	PROVIDE OPERATING FUNDS	\$ 4,000.	
BOYS & GIRLS CLUB 124 MAIN STREET YERINGTON NV 89447	NONE	501(c)	PROVIDE OPERATING FUNDS	4,000.	
WESTERN FOLKLIFE CENTER 501 RAILROAD STREET ELKO NV 89801	NONE	501(c)	PROVIDE OPERATING FUNDS	3,000.	
ARTOWN P.O. BOX 3058 RENO NV 89505	NONE	501(c)	PROVIDE OPERATING FUNDS	2,500.	
CRISTO REY HIGH SCHOOL 112 EAST 106TH STREET NEW YORK NY 10029	NONE	501(c)	ANNUAL FUND	50,000.	
GREENWICH HOSPITAL 5 PERRYRIDGE ROAD GREENWICH CT 06830	NONE	501(c)	EMERGENCY DEPT	100,000.	
NY PRESBYTERIAN HOSPITAL 177 FORT WASHINGTON AVENUE NEW YORK NY 10032	NONE	501 (c)	PROVIDE OPERATING FUNDS	100,000.	
FIRST TEE OF NORTHERN NEVADA 1575 DELUCCHI LANE, STE 104 RENO NV 89502	NONE	501(c)	PROVIDE OPERATING FUNDS	2,500.	
MUHLENBERG COLLEGE 2400 W CHEW STREET ALLENTOWN PA 18104	NONE	501(c)	RESEARCH AWARDS IN BIOLOGY	5,000.	
FORDHAM UNIVERSITY 888 7TH AVENUE NEW YORK NY 10019	NONE	501(c)	BUSINESS SCHOOL ENDOWMENT FUND	614,000.	
GREENWICH COUNTRY DAY SCHOOL 401 OLD CHURCH ROAD GREENWICH CT 06836	NONE	501 (c)	ANNUAL FUND	100,000.	
UCONN LAW SCHOOL FOUNDATION 45 ELIZABETH STREET HARTFORD CT 06105	NONE	501 (c)	ANNUAL FUND	1,500.	

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2018	Federal Stat	tements	***************************************	Page 5
	GABELLI FOUND			94-2975159
Client MJG_FD 1/22/20	GABELLI FOUND	ATION, INC	-	 10 51AM
Statement 9 (continued) Form 990-PF, Part XV, Line 3a Recipient Paid During the Year				
Name and Address	Donee Relationship	Found- ation <u>Status</u>	Purpose of Grant	 Amount
AMERICAN UNIVERSITY 4400 MASS AVENUE, NW WASHINGTON DC 20016	NONE	501(c)	PROVIDE OPERATING FUNDS	\$ 1,500.
GREENWICH SCHOLARSHIP ONE LAFAYETTE COURT GREENWICH CT 06830	NONE	501(c)	PROVIDE OPERATING FUNDS	1,500.
UCONN FOUNDATION 2390 ALUMNI DR, UNIT 3206 STORRS CT 06269	NONE	501(c)	PROVIDE OPERATING FUNDS	1,500.
ITHACA COLLEGE 953 DANBY ROAD ITHACA NY 14850	NONE	501(c)	ANNUAL FUND	5,000.
HOLY TRINITY RC SCHOOL 1100 8TH AVENUE NORTH NO. MYRTLE BEACH SC 29582	NONE	501(c)	SCHOLARSHIP FUND	2,000.
ST JUDE CHILDREN'S HOSPITAL 501 ST JUDE PLACE MEMPHIS TN 38101	NONE	501(c)	PROVIDE OPERATING FUNDS	2,000.
UCONN SCHOOL OF BUSINESS 2100 HILLSIDE ROAD STORRS CT 06269	NONE	501(c)	PROVIDE OPERATING FUNDS	1,000.
HOSPITAL FOR SPECIAL SURGERY 535 E 70TH STREET NEW YORK NY 10021	NONE	501 (C)	ANNUAL TRIBUTE DINNER	100,000.
HOLY TRINITY ANNUAL FUND 1100 8TH AVENUE NORTH NORTH MYRTLE BEACH SC 29582	NONE	501(c)	PROVIDE OPERATING FUNDS	1,000.
SACRED HEART GREENWICH 1177 KING STREET GREENWICH CT 06831	NONE	501 (C)	CAPITAL CAMPAIGN	11,000.
JOSEPH LAWRENCE CHOW SCHOLARSHIP FUND 20 EDGEMONT CIRCLE SCARSDALE NY 10583	NONE	501 (C)	PROVIDE OPERATING FUNDS	1,000.
SHRINERS HOSPITAL FOR CHILDREN 2900 ROCKY POINT DRIVE TAMPA FL 33607	NONE	501 (C)	PROVIDE OPERATING FUNDS	2,000.

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2018	Federal Stat	tements	·	Page 6
Client MJG_FD	GABELLI FOUND	ATION INC		94-2975159
Statement 9 (continued) Form 990-PF, Part XV, Line 3a Recipient Paid During the Year	GABLELITOOND	ATION, INC		10 51AM
Name and Address	Donee <u>Relationship</u>	Found- ation Status	Purpose of Grant	Amount
WATERSIDE SCHOOL 535 FAIRFIELD AVENUE STAMFORD CT 06902	NONE	501 (C)	PROVIDE OPERATING FUNDS	\$ 3,000.
DISCOVERY MUSEUM 490 S CENTER STREET RENO NV 89501	NONE	501 (C)	PROVIDE OPERATING FUNDS	5,000.
GREENWICH POLICE DEPT SCHOLARSHIP FUND 11 BRUCE PLACE GREENWICH CT 06830	NONE	501 (C)	PROVIDE OPERATING FUNDS	2,000.
RIVERSIDE GATORS FOOTBALL 90 COS COB AVENUE COS COB CT 06807	NONE	501 (C)	PROVIDE OPERATING FUNDS	3,000.
OGRCC THUNDER BALLS 90 HARDING ROAD OLD GREENWICH CT 06878	NONE	501 (C)	PROVIDE OPERATING FUNDS	1,000.
STATUE OF LIBERTY ELLIS ISLAND FDN 17 BATTERY PLACE, SUITE 210 NEW YORK NY 10004	NONE	501 (C)	PROVIDE OPERATING FUNDS	200,000.
BRUNSWICK SCHOOL 100 MAHER AVENUE GREENWICH CT 06830	NONE	501 (C)	PROVIDE OPERATING FUNDS	200,000.
FAMILY CENTERS 500 WEST PUTNAM AENUE GREENWICH CT 06830	NONE	501 (C)	PROVIDE OPERATING FUNDS	25,000.
GREENWICH LIBRARY 101 WEST PUTNAM AVENUE GREENWICH CT 06830	NONE	501 (C)	PROVIDE OPERATING FUNDS	25,000.
ONE LOVE FOUNDATION PO BOX 368 BRONXVILLE NY 10708	NONE	501 (C)	PROVIDE OPERATING FUNDS	25,000.
NATIONAL BASEBALL HALL OF FAME 25 MAIN STREET COOPERSTOWN NY 13326	NONE	501 (C)	PROVIDE OPERATING FUNDS	1,000.
JACKIE ROBINSON FOUNDATION 75 VARICK STREET, 2ND FLOOR NEW YORK NY 10013	NONE	501 (C)	PROVIDE OPERATING FUNDS	1,000.

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2018	Federal Statements			Page 7		
Client MJG_FD	GABELLI FOUNDATION, INC				94-2975159	
1/22/20					10 51AM	
Statement 9 (continued) Form 990-PF, Part XV, Line 3a Recipient Paid During the Year						
Name and Address	Donee <u>Relationship</u>	Found- ation Status	Purpose of Grant	A	mount	
WESTCHESTER ACADEMY BASEBALL 29 MORGAN PLACE WHITE PLAINS NY 10605	NONE	501 (C)	PROVIDE OPERATING FUNDS	\$	2,000.	
BOSTON COLLEGE 140 COMMONWEALTH AVENUE CHESTNUT HILL MA 02467	NONE	501(c)	PROVIDE OPERATING FUNDS		25,000.	
			Total	\$ 4,	168,000.	