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.

		t of the Treasury venue Service		► Go to	www.i	rs.gov/F	orm990PF for ins	tructions and	the latest inf	ormation.		Open to Public Inspection
		dar year 2018	or tax year	beginning	JUL	1,	2018	, and e	ending	JUN 3	0, 2019	
		foundation			<u>.</u>			-		A Employe	r identification	number
K	'AS'	TORY FA	MILY	FOUNDATI	ON.	s 				14-	1837220	
Nur	nber a	nd street (or P O ·t	oox number if	mail is not delivered	to street	address)			Room/suite	B Telephor	ne number	
С	UM	MINGS &	LOCK	WOOD 75	ISH	AM R	.D		400	860	.313.49	30
City	or to	own, state or pri	ovince, cou	ntry, and ZIP or fo	reign p	ostal cod	e			C If exemption	on application is p	ending, check here
		T HARTF		-	-						,,	<b>5</b> ,
		all that apply:		Initial return	<u> </u>		Initial return of a	former public	charity	D 1. Foreig	n organizations	s, check here
			$\Box$	Final return			Amended return		•	1	_	
				Address change			Name change		_ 1	2 Foreign	n organizations me nere and attach co	eeting the 85% test, omputation
H (	heck	type of organiz		X Section 501(	c)(3) ex	empt pri	<del></del>					tus was terminated
	_			pt charitable trust			able private found	dation				)(A), check here
I Fa		arket value of all				ng metho		-	rual	1		60-month termination
		Part II, col. (c), li			_	her (spe			,	1		(B), check here
	\$	u. t 11, 00% (0), 11	3.161	, 820 . (Part				SIS.)		4	011011 001 (0)(1)	(O), Glicok Here
	irt l	Analysis of R	evenue an	d Expenses			Revenue and		nvestment	(c) Ad	justed net	(d) Disbursements
ئـــــــــــــــــــــــــــــــــــــ	<u>-</u>	☐ (The total of amount of amoun	ounts in colur	mns (b), (c), and (d) ma ts in column (a))	ay not	expe	enses per books		ome		come	for charitable purposes (cash basis only)
_	1			s, etc., received		l	271,907	12. 12. 12.	2 0 1 2	N	/A	2
	2		• • •	is not required to attach S	ich R	_ , _	_,_,_		· · · · · ·	* * **	, <u></u>	y = 1
	3	Interest on saving	as and tempo	•		н	57.	1	57.			STATEMENT 1
1	ا ا	cash investments Dividends and	-	m cacurities	•	-	78,575	-	78,575.			STATEMENT 2
•	5.	Gross rents	11161631110	in securities				<u>'</u>	0,313.			DIATEMENT 2
	Ι.		or (loos)			· -	*			1 " , , "		=
	۱ ـ	Net rental income				<u> </u>	63,608		* <u>* .</u>	1 2 2 2 2 2 2 3 2 3 3 3 3 3 3 3 3 3 3 3		
e	l ba	Gross sales price	for all	499,67	10		<u> </u>	1 1 1 1		7 3		
Revenue	_"	assets on line 6a		<del>_</del>	0.	-		-	3,608.	1 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	ere i jali te	
æ	7	Capital gain net ii				- 2			3,000.			
	8	Net short-term	, ,	п		7		·				
	9	Income modific Gross sales less				ji a ian' an'i a	- 11 - 1		4" () Name		1RI	CEIVE
	10a		ŀ	· · · · ·		7-2-2-3		1.5		2 2 2 6	<del> </del>	OTIVED -
		Less Cost of goo	-		-				<u>. 1552</u>		121 oc	0 0
		Gross profit or	(loss)			-		<del>                                     </del>		<del></del>		1 4 8, 2319 S
	11	Other income	. 4 46			<u> </u>	414,147.	1 /	12,240.	1	700	[0]
<del>-</del>	12	Total. Add line		•	<del>.</del>	-	20,000		20,000.		mark 11 5	FIT THE
	13	*		ctors, trustees, etc			20,000.	4	10,000.			111110.
,		Other employe Pension plans,								· · · -		
S		Legal fees	, employee	STMT	2	-	7,259		7,259.			0.
ns.	-	Accounting fee		SIMI	3		1,433	,	1,439.			<u></u>
Q.	****	Other profession										
بن نه		Interest	Uliai iees							•		
Ę.	18	Taxes		STMT	1	<b></b>	261.		0.			0.
Str	10		nd danlatia		4		201	·				<b>U</b> •
(≧	19	Depreciation a	na aepieno	11				<del></del>				, pa , , ,
슣	20	Occupancy Travel, confere				<u> </u>		<del> </del>				
ਉਂ	21	-	-	neenings		<u> </u>		1				
Ž	22	Printing and pu		CMM	_		15,525	1 1	E E 2 E			
Operatikg ลกดูใAศูกเทิเรียวิสเทษ	23	Other expenses		STMT	5	<del></del>	13,545	<u>,                                    </u>	5,525.		<del> </del>	0.
erat	24	Total operatin	-				42 A4E		12 701	1		
ŏ	0.5	expenses. Add					43,045	4	12,784.	in in the second	- 181 - 1 - 2 - 3	0.
	25	Contributions,					<u>205,000</u> .	* * * * * * * * * * * * * * * * * * * *		*	المحلق المحادث	205,000.
	26	Total expense		ursements.			240 045		10 704			205 000
_		Add lines 24 at				<u> </u>	248,045.	4	2,784.	·		205,000.
	27	Subtract line 2					166 100	3 13				
	I			ses and disbursemen	ts		<u>166,102</u> .	1	VO. 456	F 22,71		*
	I			negative, enter -0-)		<u> </u>		9 27. 2	9,456.		/-	The state of the s
	C	Adjusted net i	ncome (if ne	egative, enter -0-)	_	_*				<u> N</u>	/A	

I.D	٠	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	beginning or year	Ella o	i year
	arı	column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
		Cash - non-interest-bearing		45.005	45.005
		Savings and temporary cash investments	20,282.	45,895.	45,895.
	3	Accounts receivable	กรับ เมา แต่ก็ก็ก็ก็กับกับกับกับกับกับกับกับกระเทศเล็กเลือนค	หังสาทันทางสอบทาสอบทุกที่ที่สามาจะสังเรา และสอง (10)	namen agenta de Certa commune de
		Less: allowance for doubtful accounts	T. T		
	4	Pledgés receivable	Carried to the state of the sta		
		Less; allowance for doubtful accounts ▶			
	5 Grants receivable				
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons			
	7	Other notes and loans receivable			
		Less: allowance for doubtful accounts ▶		<u></u>	
ţ	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			
ĕ	1	Investments - U.S. and state government obligations			
	Ь	Investments - corporate stock STMT 6	1,731,248.	1,831,953.	2,198,227.
	c	Investments - corporate bonds STMT 7	867,174.	906,958.	917,698.
	1	Investments - kind, buildings, and equipment basis	1. Nation (1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1	906,958.	Way or complete
		Less accumulated depreciation	immoning compagnition of the property of the p	21 IE 21E 21E 21E 21E 21E 21E 21E 21E 21E 21	3 10007-0-2 11-200
	12	Investments - mortgage loans			
	13	Investments - other		I	
	I	Land, buildings, and equipment: basis		00° 1 1 m m v m	" " " " " " " " " " " " " " " " " " "
	' '	Less accumulated depreciation			
	15	Other assets (describe ►	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
	1	Total assets (to be completed by all filers - see the	1		
	'0	instructions. Also, see page 1, item I)	2,618,704.	2,784,806.	3,161,820.
_	17	Accounts payable and accrued expenses	2,010,704.	2,704,000.	3,101,020.
	18	Grants payable			
	19	Deferred revenue			
Liabilıties					
Ē	20	Loans from officers, directors, trustees, and other disqualified persons	<del>-</del>		
Ë	21	Mortgages and other notes payable			*
	22	Other liabilities (describe )			
	23	Total liabilities (add lines 17 through 22)	0.	0.	
_	23				
		Foundations that follow SFAS 117, check here			
ŝ		and complete lines 24 through 26, and lines 30 and 31			
Š	24	Unrestricted		= .	2 7 7 7 2 2 2 2 7 7 7 7
ala	25	Temporarily restricted			
Net Assets or Fund Balances	26	Permanently restricted  Foundations that do not follow SFAS 117, check here			7,0 1 1 1
. <u>5</u>		•			
ö		and complete lines 27 through 31	1 (54 140	1 654 140	
ş	27	Capital stock, trust principal, or current funds	1,654,140.	1,654,140. 0.	1
SS	28	Paid-in or capital surplus, or land, bldg., and equipment fund			<u> </u>
¥	29	Retained earnings, accumulated income, endowment, or other funds	964,564.	1,130,666.	
ž	30	Total net assets or fund balances	2,618,704.	2,784,806.	
			0 610 704	2 704 006	
_	31	Total liabilities and net assets/fund balances	2,618,704.	2,784,806.	
P	art	III Analysis of Changes in Net Assets or Fund B	Balances		
_		<u> </u>	20		
1		net assets or fund balances at beginning of year - Part II, column (a), line	30		0 610 704
	•	st agree with end-of-year figure reported on prior year's return)		1	2,618,704.
		r amount from Part I, line 27a		2	166,102.
		r increases not included in line 2 (itemize)			0.
		lines 1, 2, and 3		4	2,784,806.
		eases not included in line 2 (itemize)		5	0.
<u>6</u>	Tota	net assets or fund balances at end of year (line 4 minus line 5) - Part II, c	olumn (b), line 30	6	2,784,806.
					Form <b>990-PF</b> (2018)

205,000.

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

See the Part VI instructions.

8 Enter qualifying distributions from Part XII, line 4

3

	-PF (2018) KASTORY FAMILY FOUNDATION					<u> 18372</u>		Page 4
Part \	/I Excise Tax Based on Investment Income (Section 494	Ю(а), 4	940(b), 49	40(e), or 4	948 -	see in	structi	ions)
1a Exe	mpt operating foundations described in section 4940(d)(2), check here 🕨 🔲 and e	enter "N/A"	on line 1.	)		72.35	11.	
Date	e of ruling or determination letter: (attach copy of letter if ne	cessary-s	ee instruction	s)	F.J		- ''	
<b>b</b> Dor	nestic foundations that meet the section 4940(e) requirements in Part V, check here	<b>▶</b> 🗶 a	nd enter 1%	<b>)</b>	1			<u>9</u> 95.
of P	Part I, line 27b					<u>.</u>		,
c All c	other domestic foundations enter 2% of line 27b. Exempt foreign organizations, enter 49	% of Part	I, line 12, col. (	(b).				
	under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only; o			, , -	2			0.
	l lines 1 and 2		·		3			995.
4 Sub	otitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; o	others, en	ter -0-)		4			0.
	based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	-	ŕ		5			995.
	dits/Payments:					-1 1, 11	-	*
	8 estimated tax payments and 2017 overpayment credited to 2018	6a		261.	. :			
	mpt foreign organizations - tax withheld at source	6b	•	0.	~ , !		- "- "	151
	paid with application for extension of time to file (Form 8868)	6c		0.	, 1 , 1	-	`ı -	
	kup withholding erroneously withheld	6d		0.	, ,	-		1
	al credits and payments. Add lines 6a through 6d	_ 34			7			261.
	er any <b>penalty</b> for underpayment of estimated tax. Check here if Form 2220 is atta	ached			8	<del></del>		12.
	to any penalty for underpayment of estimated tax. Gleck field in form 2220 is alto the lif the total of lines 5 and 8 is more than line 7, enter amount owed	201100			9			746.
	erpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid				10			740.
	er the amount of line 10 to be: Credited to 2019 estimated tax		-	lefunded 🕨	11		_	
	/II-A Statements Regarding Activities			iciuliucu 🚩				
	ing the tax year, did the foundation attempt to influence any national, state, or local legis	slation or	did it narticinat	e or intervene	ın		Ye	s No
	political campaign?	Siation of	old it participat	.c or intervente	***	-	1a	X
•	it spend more than \$100 during the year (either directly or indirectly) for political purpo	.cac2 Saa	the instruction	c for the defin	ition	-	1b	$\frac{x}{x}$
	ne answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies				111011	-		
	ributed by the foundation in connection with the activities.	or arry rita	iteriais publisiit	su oi		r		-   - "
	the foundation file Form 1120-POL for this year?						4.	X
		0.11005				-	1c	
	er the amount (if any) of tax on political expenditures (section 4955) imposed during the On the foundation.   \$ 0 . (2) On foundation managers			0.				
		_	manand on for				1,5	
	er the reimbursement (if any) paid by the foundation during the year for political expend nagers. $ ightharpoonup$ \$	mure tax i	imposea on iou	muation				;
6	nagers. > \$0 .  It is the foundation engaged in any activities that have not previously been reported to the I	inco				-		
		inot				-	<u>2</u>	X
	'es," attach a detailed description of the activities.				_			
	the foundation made any changes, not previously reported to the IRS, in its governing	ınstrumer	it, articles of in	corporation, o	r			1
-	aws, or other similar instruments? If "Yes," attach a conformed copy of the changes	0				-	3	X
	the foundation have unrelated business gross income of \$1,000 or more during the year	ar /			B.T	<u> </u>	4a	X
	'es," has it filed a tax return on Form 990-T for this year?	2			IN	/A	4b	<b>v</b>
	s there a liquidation, termination, dissolution, or substantial contraction during the year (	•				-	5	X
	'es," attach the statement required by General Instruction T					- 1		
	the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied e	amer:						
	y language in the governing instrument, or				la.		-   -	-1
	y state legislation that effectively amends the governing instrument so that no mandator	ry directio	ns that conflict	with the state	iaw			- " " aL
	nain in the governing instrument?	-1-4- 🙃 😁		D- 4 VA 1		-	6 X	
7 Did	the foundation have at least \$5,000 in assets at any time during the year? If "Yes," comp	piete Part	II, col. (c), and	Part XV		-	7 X	
_		_						
	er the states to which the foundation reports or with which it is registered. See instruction	ons			-	·	-   : :	
<u>N</u>		-					ļ,	-   -   -
	ne answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the A	Attorney G	ieneral (or desi	gnate)				- <u>15</u> -13+
	each state as required by General Instruction G? If "No," attach explanation						8b X	<del></del> -
	he foundation claiming status as a private operating foundation within the meaning of se			2(j)(5) for cale	ndar		H113 Novem   10 10 10 10 10 10 10 10 10 10 10 10 10	
_	r 2018 or the tax year beginning in 2018? See the instructions for Part XIV. If "Yes," com					_	9	<u>X</u>
<b>10</b> Did	any persons become substantial contributors during the tax year? If "Yes," attach a schedu	ule listing th	neir names and ac	dresses S	TMT		10 X	
						Form	990-P	<b>F</b> (2018)

3b

4a

4b

N/A

b If "Yes," did it have excess business holdings in 2018 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C,

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

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

Form 4720, to determine if the foundation had excess business holdings in 2018.)

had not been removed from jeopardy before the first day of the tax year beginning in 2018?

	-		1 ,	
	-			
2 Compensation of five highest-paid employees (other than those inc	Loluded on line 1). If none	, enter "NONE."		
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE	-			
	1			-
	-			
		1		<del>-</del>
	<del>_</del>			
	<u> </u> 			
Total number of other employees paid over \$50,000	<u>,1</u>	<del></del>	<u> </u>	

Form 990-PF (2018) KASTORY FAMILY FOUNDATION		1837220 Page 7
Part VIII Information About Officers, Directors, Trustees, Foundatio Paid Employees, and Contractors (continued)	n Managers, Highly	
3 Five highest-paid independent contractors for professional services. If none, enter "N	ONE."	
(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  Part IX-A Summary of Direct Charitable Activities		▶ 0
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical number of organizations and other beneficiaries served, conferences convened, research papers produce		Expenses
1 N/A		
2		
3		
4		
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 N/A	i 1 and 2.	Amount
2		
All other program-related investments. See instructions.		
3		
Total. Add lines 1 through 3	<b>•</b>	0 . Form <b>990-PF</b> (2018)
		(2010)

Pa	Art X Minimum Investment Return (All domestic foundations must complete this part. Foreign four	ndations, s	see instructions)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
а	Average monthly fair market value of securities .	1a	3,032,777.
b	Average of monthly cash balances	1b	35,683
C	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	3,068,460.
e	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 1e 0.		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	3,068,460
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	46,027
5	Net value of noncharitable-use assets Subtract line 4 from line 3. Enter here and on Part V, line 4	5	3,022,433
6	Minimum investment return Enter 5% of line 5	6	151,122
P	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and foreign organizations, check here  and do not complete this part.)	d certain	
1	Minimum investment return from Part X, line 6	1	151,122
2a	Tax on investment income for 2018 from Part VI, line 5	•	101/102
b	Income tax for 2018. (This does not include the tax from Part VI.)		
-	Add lines 2a and 2b	2c	995
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	150,127
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	150,127
6	Deduction from distributable amount (see instructions)	6	0.
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	150,127
$\dot{=}$	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	_1a	205,000.
b	Program-related investments - total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	<del></del>
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8; and Part XIII, line 4	4	205,000
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	5	995.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	204,005
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation of	ualifies for	the section

4940(e) reduction of tax in those years.

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2017	(c) 2017	(d) 2018
1 Distributable amount for 2018 from Part XI,	50.500		2011	
line 7				150,127.
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 46,083.				
c From 2015 16,257.				
d From 2016				
e From 2017				
f Total of lines 3a through e	62,340.			
4 Qualifying distributions for 2018 from				
Part XII, line 4: ►\$ 205,000.				
a Applied to 2017, but not more than line 2a			0.	
<b>b</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.			150 107
d Applied to 2018 distributable amount	54,873.			150,127.
e Remaining amount distributed out of corpus	54,673.			0.
5 Excess distributions carryover applied to 2018 (If an amount appears in column (d), the same amount must be shown in column (a))	0.			
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	117,213.			
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		2		
amount - see instructions		0.		
e Undistributed income for 2017. Subtract line			0	
4a from line 2a. Taxable amount - see instr.  f Undistributed income for 2018. Subtract			0.	
lines 4d and 5 from line 1. This amount must				
be distributed in 2019				0.
7 Amounts treated as distributions out of				. Other studies with an about a first
corpus to satisfy requirements imposed by		-		
section 170(b)(1)(F) or 4942(g)(3) (Election				
may be required - see instructions)	0.			
8 Excess distributions carryover from 2013				
not applied on line 5 or line 7	_ 0.			
9 Excess distributions carryover to 2019.				
Subtract lines 7 and 8 from line 6a	117,213.			
10 Analysis of line 9:				
<b>a</b> Excess from 2014 46,083.				
<b>b</b> Excess from 2015 16,257.				
c Excess from 2016				
d Excess from 2017				
e Excess from 2018 54,873.				

823581 12-11-18

Form **990-PF** (2018)

Form 990-PF (2018) KASTORY Part XIV Private Operating F	FAMILY FOU		II A munchion (I)		337220 Page 10
	·		II-A, question 9)	N/A	
1 a If the foundation has received a ruling of foundation, and the ruling is effective for		· -			
<b>b</b> Check box to indicate whether the foun	•	•	un contion	4942(j)(3) or 4	1942(1)(5)
	Tax year		Prior 3 years	4942(J)(3)_0114	1942(J)(3)
2 a Enter the lesser of the adjusted net income from Part I or the minimum	(a) 2018	<b>(b)</b> 2017	(c) 2016	(d) 2015	(e) Total
	(4) 25 15	(0) 20 17	(0) 20 10	(4) 25 10	4 (0) 10101
investment return from Part X for					7
each year listed			+		
b 85% of line 2a				<del>                                     </del>	<del> </del>
c Qualifying distributions from Part XII,					
line 4 for each year listed			-	<del>                                     </del>	<del></del>
d Amounts included in line 2c not					
used directly for active conduct of					
exempt activities					<del></del>
e Qualifying distributions made directly					
for active conduct of exempt activities.					
Subtract line 2d from line 2c 3 Complete 3a, b, or c for the					
alternative test relied upon:					
a "Assets" alternative test - enter:					
(1) Value of all assets					
(2) Value of assets qualifying					
under section 4942(j)(3)(B)(i)			<u> </u>	-	-
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	1: (2 1	<u> </u>		1 10 000	<u> </u>
Part XV Supplementary Info			if the foundation	had \$5,000 or m	ore in assets
		uctions.)			
1 Information Regarding Foundation	_				
a List any managers of the foundation what year (but only if they have contributed in the contributed in	no have contributed more	than 2% of the total con	tributions received by the	foundation before the clo	ose of any tax
	more man \$5,000). (See S	ection 307 (u)(2).)			
BERNARD H. KASTORY					<del></del>
b List any managers of the foundation who other entity) of which the foundation has			(or an equally large portion	on of the ownership of a p	partnership or
NONE	o a rose or ground arms or				
2 Information Regarding Contribut	tion Grant Gift Loan	Scholarchin etc. D	rograma		
Check here X if the foundation				int accent uncolleited rea	ugete for funde. If
the foundation makes gifts, grants, etc.					uests for fullus. If
a The name, address, and telephone num					
a The hame, address, and telephone hum	ibei di emanaduress di ti	ie person to whom appi	cations should be address	ocu.	
<b>b</b> The form in which applications should	be submitted and informa	tion and materials they s	hould include:		
c Any submission deadlines:	·		<del></del>		
		<del>-</del>			
d Any restrictions or limitations on award	ls, such as by geographica	al areas, charitable fields	, kınds of ınstitutions, or o	other factors:	

	Analysis	of Incomo	-Producing	Activition
Part XVI-A	Allalysis	or income.	-Producing	ACUVIUES

Enter gross amounts unless otherwise indicated.	Unrelate	ed business income		ded by section 512, 513, or 514	(e)
•	(a) Business code	(b) Amount	(C) Exclu- sion code	(d) Amount	Related or exempt function income
1 Program service revenue:	Code				
a					
<u> </u>					
e				_ •	
g Fees and contracts from government agencies	-				
2 Membership dues and assessments					
3 Interest on savings and temporary cash	_				
investments			14	57	
4 Dividends and interest from securities			14	57. 78,575.	
5 Net rental income or (loss) from real estate:			1 1	10,373.	
a Debt-financed property					-
b Not debt-financed property					
6 Net rental income or (loss) from personal					
property					
7 Other investment income					
8 Gain or (loss) from sales of assets other					
than inventory			18	63,608.	
9 Net income or (loss) from special events			1 - 0	03,000.	
10 Gross profit or (loss) from sales of inventory					
11 Other revenue:			$\vdash$		
a b					<del></del>
c					
d					
e					
12 Subtotal. Add columns (b), (d), and (e)	-	0.		142,240.	0.
13 Total Add line 12, columns (b), (d), and (e)					142,240.
(See worksheet in line 13 instructions to verify calculations.)					
Part XVI-B Relationship of Activities to	o the Acc	omplishment of Ex	(Amn	t Durnosas	
rait AVI-D Relationship of Activities to	o lile Acci	omplishment of L	remb	t ruiposes	
Line No. Explain below how each activity for which income			contrib	outed importantly to the accom	plishment of
the foundation's exempt purposes (other than	by providing fu	nds for such purposes).			
		<u></u> .			
				<del></del>	
				<del></del>	
	-				<del> </del>
		<del></del>			<del></del>
		<del></del>		· -	

		Exempt Organ	izations				<u>.</u>			
1	Did the o	rganization directly or indi	rectly engage in any	of the following	ig with any other organizati	on described in sect	ion 501(c)		Yes	No
	(other that	an section 501(c)(3) organ	nizations) or in secti	on 527, relating	g to political organizations?	1				
a	Transfers	from the reporting found	ation to a noncharita	able exempt or	ganization of:					
	(1) Cash	1								
	(2) Othe	r assets						1a(2)		X
b	Other tra	nsactions:								
	(1) Sale	s of assets to a noncharita	ible exempt organiza	ation				16(1)		X
	(2) Puro	hases of assets from a no	ncharitable exempt	organization				1b(2)		Х
	(3) Rent	al of facilities, equipment,	or other assets					1b(3)		Х
	(4) Rein	nbursement arrangements	;					1b(4)		Х
	(5) Loar	is or loan guarantees						1b(5)		Х
		ormance of services or me	embership or fundra	using solicitatio	ons			1b(6)		Х
C	Sharing	of facilities, equipment, ma	uling lists, other ass	ets, or paid em	ployees			1c		Х
d	If the ans	wer to any of the above is	"Yes," complete the	following sche	dule. Column (b) should al	ways show the fair r	narket value of the goods, o	ther ass	ets,	
							or sharing arrangement, sh			
	column (	d) the value of the goods,	other assets, or ser	vices received.						
(a) L	ne no	(b) Amount involved	(c) Name o	of noncharitable	e exempt organization	(d) Description	of transfers, transactions, and s	haring an	rangeme	nts
				N/A						
		<u> </u>								
									_	
	_									
						<u> </u>				
2a	Is the for	indation directly or indirec	tly affiliated with, or	related to, one	or more tax-exempt organi	izations described		_		
		n 501(c) (other than sectio		ection 527?				_ Yes	X	∫No
b	If "Yes," o	omplete the following sch			L., +	<del></del>				
		(a) Name of org	janization		(b) Type of organization		(c) Description of relationsh	ıp		
		N/A								
		·								
	Linds	r consistence of porture. I dealers	that I have evamined th	un catura, includin	g accompanying schedules and	Latetamenta and to the	hast of my knowledge			
Sig					n taxpayer) is based on all inform		May	the IRS o	iscuss t	his er
He	re L	Bar 1	2/1/0	There is	10/22/19	mp rramr	show	n below	? See ins	tr 1
•••		nature of officer or trustee	77/X	200	Data	TRUSTE	EE LX	∐ Yes		No
	Sig	Print/Type preparer's na		Drangrafte e	Date	Title Date	Check If PTIN			
		1		Preparer's s	griature	1 1 1	self- employed			
Pa	id	CATHERINE	LEE	( <i>]</i>		10/25/11		063	400	
	eparer	SCHETTINI	OUTNIGG 6 I	OCIVIA	D II O			<u>963</u>		
	e Only	Firm's name ► CUM	ттисо у Г	TOCKMOO	חחת		Firm's EIN ► 06-03	145	<b>J</b> U	
J	iny		TOURN DO	770 011	TMP 400		<del> </del>			
		Firm's address ► 75					Dhamas 0.00 21	2 4	000	
		WE	ST HARTFO	טאט, כד	00101		Phone no 860-31			0040;
							For	m <b>99</b> 0	,-rr (	ZU18)

## Schedule B

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** 

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

1	KASTORY FAMILY FOUNDATION	14-1837220
Organization type (chec	k one)	
Filers of:	Section:	
Form 990 or 990-EZ	501(c)( ) (enter number) organization	
	4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private foundation	1
	527 political organization	
Form 990-PF	X 501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt chantable trust treated as a private foundation	
	501(c)(3) taxable private foundation	
Note: Only a section 501  General Rule  For an organization	in is covered by the <b>General Rule</b> or a <b>Special Rule</b> .  (c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule, or (10) organization can check boxes for both the General Rule and a Special Rule, or (10) organization can check boxes for both the General Rule and a Special Rule, or (10) organization can check boxes for determining a contribution or (10) organization can check boxes for both the General Rule and a Special Rule.	totaling \$5,000 or more (in money or
Special Rules		
sections 509(a)( any one contrib	tion described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% si (1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 1: utor, during the year, total contributions of the greater of (1) \$5,000, or (2) 2% of the EZ, line 1. Complete Parts I and II	3, 16a, or 16b, and that received from
year, total contr	tion described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received abutions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or uelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead or	or educational purposes, or for the
year, contribution is checked, enter purpose Don't o	tion described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received ons exclusively for religious, charitable, etc., purposes, but no such contributions toter here the total contributions that were received during the year for an exclusively recomplete any of the parts unless the <b>General Rule</b> applies to this organization becauble, etc., contributions totaling \$5,000 or more during the year	aled more than \$1,000 If this box eligious, charitable, etc ,
but it must answer "No"	n that isn't covered by the General Rule and/or the Special Rules doesn't file Schedu on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or o et 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.

Name of organization

**Employer identification number** 

1 KASTORY FAMILY CLAT BERNARD KASTORY, TRUSTEE, 211 TERRAPIN POINT VERO BEACH, FL 32963  (a) (b) (c)	roll
No.         Name, address, and ZIP + 4         Total contributions         Type           1         KASTORY FAMILY CLAT             BERNARD KASTORY, TRUSTEE, 211 TERRAPIN             Point             Point             VERO BEACH, FL 32963         \$	e of contribution  son X  rroll
BERNARD KASTORY, TRUSTEE, 211 TERRAPIN POINT VERO BEACH, FL 32963  (a) (b) (c)	roll
	son
	roll
(Compl	elete Part II for sh contributions)
(a) (b) (c) No. Name, address, and ZIP + 4 Total contributions Type	(d) e of contribution
(Compl	
(a) (b) (c) Name, address, and ZIP + 4 Total contributions Type	(d) e of contribution
(Compl	
(a) (b) (c) Name, address, and ZIP + 4 Total contributions Type	(d) e of contribution
(Compl	
(a) (b) (c) Name, address, and ZIP + 4 Total contributions Type	(d) e of contribution
(Compl	rroll ncash lete Part II for sh contributions.)

**Employer identification number** 

## KASTORY FAMILY FOUNDATION

14-1837220

Part II	Noncash Property (see instructions) Use duplicate copies of Part II	of additional space is needed	
(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
:		- - - \$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		- - - - - - - -	

Name of o	rganization '			Employer identification number
KASTO	RY FAMILY FOUNDATION			14-1837220
Part III	Exclusively religious, charitable, etc., contribut from any one contributor. Complete columns (a completing Part III, enter the total of exclusively religious, Use duplicate copies of Part III if additional	) through (e) and the following line er charitable, etc., contributions of \$1,000 or	try For organizations	r (10) that total more than \$1,000 for the yea
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d)	Description of how gift is held
		(e) Transfer of git	ft	
	Transferee's name, address, a			of transferor to transferee
(a) No.	(b) Purpose of gift	(c) Use of gift	(d)	Description of how gift is held
Part I				
		(e) Transfer of git		
	Transferee's name, address, a	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 git	tt	
	Transferee's name, address, a	nd ZIP + 4	Relationship o	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 gif	<del>1</del>	
	Transferee's name, address, a			of transferor to transferee

KASTORY FAMILY F		14-18.	<u> 37220                                    </u>	P2	<u>AGE</u>	<u> 1 OF</u>	<u>      2                              </u>
Part IV Capital Gains and Lo	sses for Tax on Investment Income						
(a) List and 2-story b	d describe the kind(s) of property sol rick warehouse; or common stock, 2	d, e.g., real estate, 00 shs. MLC Co.	1 P-1	w acquired Purchase Donation	(c) Date acqui (mo., day, yi		Date sold ., day, yr.)
1a 18.12 SHS VANG	UARD REIT INDEX	FUND ADMIRAL SHS			09/22/	1707/	09/18
b 592.52 SHS DFA	D		12/15/				
c 475.78 SHS VAN			02/08/				
	d 1,008.26 SHS DFA US LARGE VALUE INSTL CL						24/19
	ARD GROWTH INDEX		-		09/28/		
	UARD INFLATION P		SHS		06/17/		
g 215.53 SHS WAS		NVESTORS FD CL F			12/19/		
	US MICRO CAP PO	· · · · · · · · · · · · · · · · · · ·			06/29/		
	ARD FTSE ALL WOR		_		09/26/3		
	UARD MATERIALS I				06/28/		
	US SMALL CAP VAL			-	05/02/		
	ROWE PRICE NEW E				$\frac{37}{12}$		
		METALS AND MINI	AG.		07/03/		
	FA US LARGE VALU				01/22/		
	FA INTERNATIONAL		FD		12/16/2		
	(f) Depreciation allowed	(g) Cost or other basis			Gain or (loss)		<u> </u>
(e) Gross sales price	(or allowable)	plus expense of sale			us (f) minus (		
a 2,114.		2,133.					<u>&lt;19.</u> >
b 3,000.		3,028.					<u>&lt;28.</u> >
c 3,847.		4,577.					<u>&lt;730.</u> >
d 35,217.	<u> </u>	36,072.					<u>&lt;855.</u> >
e 223.		230.					<u> </u>
f 821.		824.	_				<u> &lt;3.</u> >
<u>9</u> 9,750.	T	9,843.					<u>&lt;93.</u> >
h 6,000.	<del>;</del>	6,336.					<u>&lt;336.</u> >
1 741.		757.					<u>&lt;16.</u> >
1 800.		824.					<u>&lt;24.</u> >
k 3,700.	•	3,359.					<u>341.</u>
6,000.		5,411.		<u> </u>			<u>589.</u>
m 18,425.		23,000.					<u>,575.</u> >
n 152,874.		147,941.			_	4	<u>,933.</u>
<u>o</u> 13,400.		13,250.					<u> 150.</u>
Complete only for assets showl	ng gain in column (h) and owned by		Cour	(I) Loss	es (from col. (	(h))	
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (ı) over col. (ֈ), ıf any	Gair	is (excess or but no	col. (h) gain d t less than "-0	over coi. (K -")	(),
a							<19.>
b							<28.>
С							<del>&lt;73</del> 0.>
d							< <u>855.</u> >
е							<del>&lt;7.</del> >
f							<3.>
9							<93.>
h				·			<336.>
1		-	_				<16.>
1							<24.>
k							341.
							589.
m						<4	,575.>
n							,933.
0							150.
	tt z	in Don't line 7					
2 Capital gain net income or (net ca	apıtal loss) { If gaın, also enter If (loss), enter *-0	in Part I, line 7	2				
3 Net short-term capital gain or (lo If gain, also enter in Part I, line 8,	ss) as defined in sections 1222(5) an	d (6):					
If (loss), enter "-0-" in Part I, line		<u> </u>	3				

CONTINUATION FOR 990-PF, PART IV 14-1837220 PAGE 2 OF 2

(a) List and describe the kind(s) of property sold, e.g., real estate,	Date acquired (d) Date cold							
(a) List and describe the kind(s) of property sold, e.g., real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.  (b) How acquired P - Purchase D - Donation  (c) Date acquired (mo., day, yr.)								
1a 817.48 SHS PIMCO FOREIGN BOND FUND (US DOLLAR HED P 04	1/02/1206/25/19							
	5/12/1506/25/19							
	2/10/1406/25/19							
d 31.87 SHS VANGUARD FTSE ALL WORLD EX-US SC P 02	2/08/1806/25/19							
	2/25/1406/25/19							
	5/29/1206/25/19							
	/22/1506/25/19							
h 309.27 SHS VANGUARD INTERNATIONAL VALUE PORTFOLIO P 12	2/07/1606/25/19							
112.08 SHS VANGUARD MATERIALS INDEX FD ADM P 07	7/03/1706/25/19							
488.23 SHS VANGUARD REIT INDEX FD ADM SHS P 12	2/10/1506/25/19							
k 461.25 SHS WASHINGTON MUTUAL INVESTORS FD CL F-3 P 03	3/23/1506/25/19							
71 SHS VANGUARD SMALL CAP VALUE ETF P   12	2/31/0908/13/18							
m 195.20 SHS VANGUARD INFLATION PROTECTED FD ADM SH P 12	2/08/1106/25/19							
n ADJUSTMENT TO BALANCE								
o CAPITAL GAINS DIVIDENDS								
	in or (loss) (f) minus (g)							
a 9,050. 8,860.	190.							
b 5,000. 5,112.	<112.>							
c 18,500. 19,504.	<1,004.>							
d 3,313. 3,690.	<377.>							
e 33,927. 21,315.	12,612.							
f 4,045. 4,525.	<480.>							
g 15,300. 14,016.	1,284.							
h 11,000. 10,506.	494.							
7,200.	158.							
58,836. 55,997.	2,839.							
k 21,000. 19,908.	1,092.							
1 9,870. 3,914.	5,956.							
m 5,034. 5,499.	<u> </u>							
n <1,403.>	1,403.							
<u>o 40,691.</u>	40,691.							
Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69  (I) Losses (from col. (h))								
(i) F.M.V. as of 12/31/69  (j) Adjusted basis (k) Excess of col. (i) Gains (excess of col but not les	ol. (h) gaın over col. (k), ss than "-0-")							
<u>a</u>	190.							
<u>b</u>	<u>&lt;112.</u> >							
<u>c</u>	<u> </u>							
<u>d</u>	<u>&lt;377.</u> >							
<u>e</u>	12,612.							
f	<u>&lt;480.</u> >							
9	1,284.							
<u>h</u>	494.							
	158.							
<del>!  </del>	2,839.							
<u>k</u>	1,092.							
	5,956.							
m	<u> </u>							
<u></u>	1,403.							
O (figure places through Court Lines 7)	40,691.							
2 Capital gain net income or (net capital loss) { If gain, also enter in Part I, line 7 } 2	63,608.							
Net short-term capital gain or (loss) as defined in sections 1222(5) and (6):  If gain, also enter in Part I, line 8, column (c).  If (loss), enter "-0-" in Part I, line 8	N/A							

KASTORY FAMILY FOUNDATION

Supplementary Information Part XV Grants and Contributions Paid During the Year (Continuation) Recipient If recipient is an individual, Foundation show any relationship to Purpose of grant or Amount any foundation manager status of contribution Name and address (home or business) or substantial contributor recipient NEST INC NONE PUBLIC CHARITY CURRENT USE FOR 501 5TH AVENUE, STE 1608 GENERAL CHARITABLE NEW YORK, NY 10017 PURPOSES 5,000. UNITED AGAINST POVERTY, INC. NONE PUBLIC CHARITY CURRENT USE FOR 2746 US HWY 1 GENERAL CHARITABLE VERO BEACH, FL 32963 PURPOSES 20,000. DEXTER SOUTHFIELD FUND NONE PUBLIC CHARITY CURRENT USE FOR P.O. BOX 845914 GENERAL CHARITABLE BOSTON, MA 02284 PURPOSES 5,000. ACTION AGAINST HUNGER USA PUBLIC CHARITY CURRENT USE FOR NONE ONE WHITEHALL STREET, FLOOR 2 GENERAL CHARITABLE NEW YORK NY 10004 PURPOSES 12,500. MERIT SCHOOL OF MUSIC/JOY FAITH KNAPP NONE PUBLIC CHARITY CURRENT USE FOR MUSIC CENTER GENERAL CHARITABLE 38 SOUTH PEORIA STREET PURPOSES CHICAGO IL 60607 12 500. MD ANDERSON CANCER CENTER NONE PUBLIC CHARITY CURRENT USE FOR P.O. BOX 4486 GENERAL CHARITABLE HOUSTON TX 77210 PURPOSES 100,000. COLLEGE POSSIBLE, CHICAGO NONE PUBLIC CHARITY CURRENT USE FOR 5 WEST SUPERIOR STREET, STE 300 GENERAL CHARITABLE CHICAGO, IL 606054 PURPOSES 5 000. Total from continuation sheets 160 000.

FORM 990-PF INTERE	ST ON SAVII	NGS AND TEM	PORARY	CASH IN	VESTMENTS	STATEMENT	1
SOURCE		(A REVE PER B	NUE		(B) VESTMENT COME	(C) ADJUSTED NET INCOME	<b>E</b>
TD AMERITRADE ACCT	#932019128		57.		57.		
TOTAL TO PART I, LI	NE 3		57.	-	57.		
FORM 990-PF	DIVIDEND	S AND INTER	EST FRO	OM SECUR	ITIES	STATEMENT	2
SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDEND	RI	(A) EVENUE R BOOKS	(B) NET INVES MENT INCO		
TD AMERITRADE ACCOUNT	119,266	. 40,69	1.	78,575.	78,57	5.	
TO PART I, LINE 4	119,266	. 40,69	1.	78,575.	78,57	5.	
FORM 990-PF		LEGAL	FEES			STATEMENT	3
DESCRIPTION		(A) EXPENSES PER BOOKS		3) NVEST- INCOME	(C) ADJUSTED NET INCOM		
CUMMINGS & LOCKWOOD LEGAL FEES	LLC -	7,259.		7,259.			0.
TO FM 990-PF, PG 1,	LN 16A =	7,259.	:	7,259.			0.
FORM 990-PF		TAX	ES			STATEMENT	4
DESCRIPTION		(A) EXPENSES PER BOOKS	NET IN		(C) ADJUSTED NET INCOM		
UNITED STATES TREAS ESTIMATED TAX FYE 6		261.		0.			0.
TO FORM 990-PF, PG	1, LN 18	261.		0.			0.
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FORM 990-PF	OTHER E	XPENSES	<u> </u>		STATEMENT	5
DESCRIPTION	(A) EXPENSES PER BOOKS					
NYS DEPARTMENT OF LAW - FILING FEE TD AMERITRADE - MANAGEMENT	250.		250.			0.
FEES	15,275.	15,	275.			0.
TO FORM 990-PF, PG 1, LN 23	15,525.	15,	525.			0.
FORM 990-PF	CORPORAT	E STOCK			STATEMENT	6
DESCRIPTION			вос	OK VALUE	FAIR MARKET	Г
SEE ATTACHED SCHEDULE			-	1,831,953.	2,198,22	27.
TOTAL TO FORM 990-PF, PART II	I, LINE 10B			1,831,953.	2,198,22	27.
FORM 990-PF	CORPORAT	E BONDS			STATEMENT	7
DESCRIPTION			вос	OK VALUE	FAIR MARKET	r
SEE ATTACHED SCHEDULE				906,958.	917,69	98.
TOTAL TO FORM 990-PF, PART II	, LINE 10C			906,958.	917,69	98.

FORM 990-PF	LIST OF SUBSTANTIAL CONTRIBUTORS PART VII-A, LINE 10	STATEMENT	8
NAME OF CONTRIBUTOR	ADDRESS		
KASTORY FAMILY CLAT	211 TERRAPIN POINT VERO BEACH, FL 32963-4407		