Form **990-PF** Department of the Treasury Internal Revenue Service

### **Return of Private Foundation**

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

► Do not enter social security numbers on this form as it may be made public.

Go to www.irs.gov/Form990PF for instructions and the latest information

OMB No 1545-0047

Ford	alendar year 2019 or tax year beginning		, and ending		
Nan	ne of foundation			A Employer identification	number
	ROSS FOUNDATION			22-2393682	
	ber and street (or P O box number if mail is not delivered to street	address)	Room/suite	B Telephone number	
	600 MAYACOO LAKES BLVD			561-242-88	44
•	or town, state or province, country, and ZIP or foreign p			C If exemption application is p	ending, check here
	EST PALM BEACH, FL 33411	- , T		<u>.</u>	
G C	heck all that apply:	Initial return of a fo	rmer public charity	D 1. Foreign organizations	, check here
	Final return	Amended return		Foreign organizations me check here and attach co	eting the 85% test,
<del></del>	Address change	Name change		check here and attach co	mputation
HC	heck type of organization: X Section 501(c)(3) ex		Jin DÜ	E If private foundation star	
` 느	(7/7)	Other taxable private foundaring method: X Cash	Accrual	under section 507(b)(1)	
	· I	her (specify)	Accidai	F If the foundation is in a ( under section 507(b)(1)	
(II			s.)		(b), check here
	rt   Analysis of Revenue and Expenses	(a) Revenue and	(b) Net investment	(c) Adjusted net	(d) Disbursements
<u> </u>	(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) )	expenses per books	income	income	for charitable purposes (cash basis only)
	1 Contributions, gifts, grants, etc., received	363,376.	<del></del>		
	2 Check  if the foundation is not required to attach Sch. B	-	****		
	Interest on savings and temporary cash investments	40,545.	40,545.		STATEMENT 1
	4 Dividends and interest from securities	130,879.	130,879.	130,879.	STATEMENT 2
	5a Gross rents				
	Net rental income or (loss)	herdillocate a			
e	6a Not gain or (locs) from sale at assets not on line 10	498,025.			χ 4.
nue	b Gross sales price for all assets on line fa 4,080,988.		400 005		
Revenue	7 Capital gain not income (from Part IV, line 2)		498,025.	, , , , , , , , , , , , , , , , , , ,	CEIVED
т.	8 Net short-term capital gain			N/A K	
	9 Income modifications Gross sales tess returns			<u>                                      </u>	1 7 0000
	108 and allowances	-			N 1 7 2020   있
	c Gross profit or (loss)		-		
	11 Other income		· · · · · · · · · · · · · · · · · · ·	00	DEN, UT
	12 Total. Add lines 1 through 11	1,032,825.	669,449.	171,424.	
_	13 Compensation of officers, directors, trustees, etc	0.	0.	0.	0.
	14 Other employee salaries and wages			- " .	
	15 Pension plans, employee benefits	".			
ses	16a Legal fees				
penses	b Accounting fees STMT 3	3,225.	0.	0.	3,225.
ĒX	c Other professional fees				
IVe.	17 Interest	2.50	2 050		
trat	18 Taxes STMT 4	2,058.	2,058.	0.	0.
Operating and Administrative	19 Depreciation and depletion				
μþ	20 Occupancy	-			
٧p	21 Travel, conferences, and meetings	<del></del>			
au	<ul><li>22 Printing and publications</li><li>23 Other expenses</li><li>STMT 5</li></ul>	58,541.	49,616.	0.	8,925.
th	24 Total operating and administrative	30,341.	40,010.	· ·	5,525.
era	expenses. Add lines 13 through 23	63,824.	51,674.	0.	12,150.
ဝ	25 Contributions, gifts, grants paid	463,176.			463,176.
	26 Total expenses and disbursements.				· -
	Add lines 24 and 25	527,000.	51,674.	0.	475,326.
	27 Subtract line 26 from line 12;				
	Excess of revenue over expenses and disbursements	505,825.			
	b Net investment income (if negative, enter -0-)		617,775.		
	c Adjusted net income (if negative, enter -0-)		-	171,424.	[

22-2393682

	_	Balance Sheets Attached schedules and amounts in the description	Beginning or year	End of	year
Р	art	Column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing	2,460.	2,459.	2,459.
	2	Savings and temporary cash investments	269,442.	152,646.	152,646.
	3	Accounts receivable >			- "
		Less: allowance for doubtful accounts			
	4	Pledges receivable ▶			
		Less; allowance for doubtful accounts			
	5	Grants receivable		· -	
	6	Receivables due from officers, directors, trustees, and other			·
		disqualified persons			
	7	Other notes and loans receivable			
		Less, allowance for doubtful accounts	· · · · · · · · · · · · · · · · · · ·		-
S	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			
As	10a	Investments - U.S. and state government obligations STMT 7	1,082,923.	1,663,876.	1,688,437.
		Investments - corporate stock STMT 8	6,099,534.	5,518,891.	7,296,324.
		Investments - corporate bonds STMT 9	881,164.	1,481,271.	1,476,793.
	١	Investments - land, buildings, and equipment basis	000,000		
				····	
	12	Less accumulated depreciation Investments - mortgage loans			
		Investments - other STMT 10	1,241,468.	1,258,662.	1,376,908.
		Land, buildings, and equipment; basis			
	14	Less accumulated depreciation		<del> </del>	
	15	Other assets (describe	<del></del>		
		Total assets (to be completed by all filers - see the			<del>`</del>
	10	Instructions. Also, see page 1, item I)	9,576,991.	10,077,805.	11,993,567.
_	17	Accounts payable and accrued expenses	3,3,0,3310	20,077,0031	12,000,00,0
		Grants payable			
	19	Deferred revenue			
ţ	20	<b>.</b>			
Liabilities		Loans from officers, directors, trustees, and other disqualified persons  Mortgages and other notes payable			
Ë		Other liabilities (describe )			
	22	Other habilities (describe			
	23	Total liabilities (add lines 17 through 22)	0.	0.	
_		Foundations that follow FASB ASC 958, check here		•	i
		and complete lines 24, 25, 29, and 30.			
Balances	24	Net assets without donor restrictions			
ilar		Net assets with donor restrictions	-		
	23	Foundations that do not follow FASB ASC 958, check here			
Net Assets or Fund		and complete lines 26 through 30.			
Ē	26	Capital stock, trust principal, or current funds	0.	0.	
S	27	Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.	
se	28	Retained earnings, accumulated income, endowment, or other funds	9,576,991.	10,077,805.	
Ž	29	Total net assets or fund balances	9,576,991.	10,077,805.	<u></u>
Š	23	Total liet assets of fully balances	3/3/0/3320	20/07//0037	
	30	Total liabilities and net assets/fund balances	9,576,991.	10,077,805.	
P	art	Analysis of Changes in Net Assets or Fund Ba	alances		
<del>-</del>	Total	net assets or fund balances at beginning of year - Part II, column (a), line	29		
		at agree with end-of-year figure reported on prior year's return)		1	9,576,991.
	•	amount from Part I, line 27a		2	505,825.
		r increases not included in line 2 (itemize)	SEE STA	ATEMENT 6 3	370.
		lines 1, 2, and 3		4	10,083,186.
		eases not included in line 2 (itemize)   DIFF-DONOR'S BA	ASIS OF CMN ST		5,381.
		net assets or fund balances at end of year (line 4 minus line 5) - Part II, co		6	10,077,805.

			OUNDATION						2	2-239	3682	Page 3
Part	V Capital Gains	and Lo	sses for Tax on In	vestmen	t Income							
			s) of property sold (for exam or common stock, 200 shs.		ite,	( <b>b)</b> P D	How ac - Purc - Dona	cquired hase ation		acquired lay, yr.)	( <b>d</b> ) Dat (mo., da	
1a BE	SSEMER INVES	TMEN	TS-LONG TERM			T					12/3	1/19
	SSEMER INVES			AIN		T						
c DI	STRIBUTIONS		···								12/3	1/19
d BE	SSEMER INVES	TMEN'	TS-SHORT TERM	M							12/3	1/19
e										-		-
	e) Gross sales price	(f) l	Depreciation allowed (or allowable)		st or other basis expense of sale			•		ain or (loss s (f) minus		
	2,660,275.		· - · · ·		2,276,94	5.					383	,330.
<u> </u>												,
<u> </u>	122,199.										122	,199.
_ <del></del>	1,298,514.				1,306,01	8.		· · ·			<7	,504.
	2,250,5210				_,,,,,,							, • • - •
	plete only for assets showing	la nain in	column (h) and owned by the	he foundation	on 12/31/69.			- (1	N Gains (C	Col. (h) gain	minus	
	) FMV as of 12/31/69		(j) Adjusted basis as of 12/31/69	(k) E>	cess of col. (i)			col	. (k), but	not less that (from col. (	n <b>-</b> 0-) <b>or</b>	
	·		43 01 12/0 1/03		001. (), 11 0.11						383	,330.
<u>a</u>			<del></del>								202	, , , , , , , ,
<u> </u>											122	,199.
C											144	,504.
<u>d</u>											<del>- '</del>	, 504.
_e	=					_		· ·				
2 Capit	al gain net income or (net ca	pital loss)	$ \begin{cases}     \text{If gain, also enter} \\     \text{If (loss), enter -0-} \end{cases} $	ın Part I, line ın Part I, line	7 7	}	2				498	,025.
3 Nets	hort-term capital gain or (los	ss) as defi	ned in sections 1222(5) and	1 (6).								
	n, also enter in Part I, line 8,			- (-)-		Ĵ						
	ss), enter -0- in Part I, line 8					J	3				<7	,504.
Part '	V	nder S	ection 4940(e) for	Reduced	Tax on Net	Inv	estn	nent Inc	come			
(For opti	onal use by domestic private	foundation	ons subject to the section 49	940(a) tax on	net investment in	come	e.)					
16	4040/4\/0\											
IT Section	ı 4940(d)(2) applies, leave tl	ns part of	ank.									
Was the	foundation liable for the sec	tion 4942	tax on the distributable amo	ount of any ye	ear in the base per	iods					Yes	X No
If "Yes," t	he foundation doesn't qualif	y under s	ection 4940(e). Do not com	plete this par	t.							
1 Enter	the appropriate amount in (	each colui	mn for each year; see the ins	structions be	fore making any e	ntries	S.			·		-
	(a)		(b)			(c)	)			Dietrik	(d) oution ratio	
Calend	Base periód years dar year (or tax year beginnii	ng in)	Adjusted qualifying distr	ributions	Net value of no	ncha	rıtable-	use assets		(col. (b) div	ided by col.	(c))
	2018		524	4,557.		10	, 36	3,856			.0!	50614
	2017		373	3,888.		9	,54	8,451	. •		.03	39157
	2016			2,195.		8	,70	1,170			.04	13925
-	2015		385	5,448.		8	,61	5,083			.04	14741
	2014			5,628.				2,964			.00	53276
2 Total	of line 1, column (d)								2	J	. 24	11713
	ge distribution ratio for the	5-vear bas	se period - divide the total or	n line 2 by 5.0	O. or by the numbe	er of	vears					
	undation has been in exister				o, o. o,o		,		3		.04	18343
41010	andation has occir in exister	1100 11 1033	than o years						<u> </u>			
4 Enter	the net value of noncharitab	le-use as:	sets for 2019 from Part X, III	ne 5					4	1	0,922	,489.
5 Multu	oly line 4 by line 3								5		528	,026.
6 Enter	1% of net investment incom	1e (1% of	Part I, line 27b)						6_		ь	,178.
7 Add I	nes 5 and 6								7		534	204.
8 Enter	qualifying distributions from	n Part XII,	line 4						8	<u> </u>	475	326.
	8 is equal to or greater than	line 7, ch	eck the box in Part VI, line	1b, and comp	lete that part using	g a 1	% tax r	ate				

Form 990-PF (2019) GROSS FOUNDATION		22-239	
Part VI Excise Tax Based on Investment Income (Section 4		4948 - see	: instructions)
1a Exempt operating foundations described in section 4940(d)(2), check here   an			1
Date of ruling or determination letter: (attach copy of letter if	necessary-see instructions)		
b Domestic foundations that meet the section 4940(e) requirements in Part V, check here	■ and enter 1%	1	12,356.
of Part I, line 27b			
c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations, enter	r 4% of Part I, line 12, col. (b)	1.	
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only		2	0.
3 Add lines 1 and 2	,	3	12,356.
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only	v: others, enter -0-)	4	0.
5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	,	5	12,356.
6 Credits/Payments.			
a 2019 estimated tax payments and 2018 overpayment credited to 2019	6a   8,295	, _	
b Exempt foreign organizations - tax withheld at source	6b 0	<b>_</b> → I	
c Tax paid with application for extension of time to file (Form 8868)	6c 0	1 1	
d Backup withholding erroneously withheld			
· · · · · · · · · · · · · · · · · · ·		<del>'   _   _  </del>	8,295.
7 Total credits and payments. Add lines 6a through 6d	-WLd	<b>—</b>	0,255.
8 Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is	апаспео	8	
9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed		9	4,061.
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	ì	10	
11 Enter the amount of line 10 to be: Credited to 2020 estimated tax	Refunded <b>▶</b>	·   11	
Part VII-A Statements Regarding Activities			T. IV. JAL
1a During the tax year, did the foundation attempt to influence any national, state, or local le	egislation or did it participate or interve	ne in	Yes No
any political campaign?			1a X
b Did it spend more than \$100 during the year (either directly or indirectly) for political pur		finition	1b X
If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copi	es of any materials published or		
distributed by the foundation in connection with the activities.			
c 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 year:		
(1) On the foundation > \$ 0. (2) On foundation manage	gers. ▶ \$ 0		
e Enter the reimbursement (if any) paid by the foundation during the year for political expe		_	
managers. ▶ \$ 0.			
2 Has the foundation engaged in any activities that have not previously been reported to the	ne IRS?		2 X
If "Yes," attach a detailed description of the activities.			
3 Has the foundation made any changes, not previously reported to the IRS, in its governing	ng instrument, articles of incorporation	ı. or	
bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	, , , , , , , , , , , , , , , , , , , ,	, -	3 X
4a Did the foundation have unrelated business gross income of \$1,000 or more during the	vear?		4a X
b If "Yes," has it filed a tax return on Form 990-T for this year?	, u	N/A	4b
5 Was there a liquidation, termination, dissolution, or substantial contraction during the ye	ar?	24, 22	5 X
If "Yes," attach the statement required by General Instruction T	ai ·		•   • • • • • • • • • • • • • • • • •
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfier	d either		
	d either.		
By language in the governing instrument, or      By take to relate a that off anything and the control of	story, directions that conflict with the at	ata la	
By state legislation that effectively amends the governing instrument so that no manda	mory directions that connict with the st	ile iaw	6 X
remain in the governing instrument?			<del></del>
7 Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," co	emplete Part II, col. (c), and Part XV		7 X
8a Enter the states to which the foundation reports or with which it is registered. See instru	ctions.		.
FL			.
b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to th	e Attorney General (or designate)		
of each state as required by General Instruction G? If "No," attach explanation			8b X
9 Is the foundation claiming status as a private operating foundation within the meaning of	f section 4942(j)(3) or 4942(j)(5) for ca	alendar	<u>                                </u>
year 2019 or the tax year beginning in 2019? See the instructions for Part XIV. If "Yes," of	omplete Part XIV		9 X
10 Did any persons become substantial contributors during the tax year? If "Yes," attach a sch	nedule listing their names and addresses		10 X
		F	orm <b>990-PF</b> (2019)

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Pa	rt VII-A	Statements Regarding Activities (continued)			
		<u> </u>		Yes	No
11	At any time	during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of			
	section 512	2(b)(13)? If "Yes," attach schedule. See instructions	11		Х
12	Did the fou	ndation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges?			
	If "Yes," atta	ach statement. See instructions	12		X
13	Did the fou	ndation comply with the public inspection requirements for its annual returns and exemption application?	13	Х	
		dress ► N/A			
14		are in care of ► GAYLE GROSS Telephone no. ► 561-24			
		► 1600 MAYACOO LAKES BLVD, WEST PALM BEACH, FL ZIP+4 ►3:	3411	-18	50
15		47(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here		· / ¬ ▶	
		he amount of tax-exempt interest received or accrued during the year	N	/A	-
16		e during calendar year 2019, did the foundation have an interest in or a signature or other authority over a bank,		Yes	
		or other financial account in a foreign country?	16		X
		tructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the	ŀ		i i
Do	foreign cou	Intry ► Statements Regarding Activities for Which Form 4720 May Be Required			
га			т —	Yes	No
1.		1 4720 if any item is checked in the "Yes" column, unless an exception applies.	-	163	140
ıa	-	year, did the foundation (either directly or indirectly): e in the sale or exchange, or leasing of property with a disqualified person?  Yes X No			
		w money from, lend money to, or otherwise extend credit to (or accept it from)		1	1 1
		ualified person?			
	•	h goods, services, or facilities to (or accept them from) a disqualified person?			
		ompensation to, or pay or reimburse the expenses of, a disqualified person?		-	1 1
		er any income or assets to a disqualified person (or make any of either available	1		1 1
	` '	benefit or use of a disqualified person)?	1		1 1
		to pay money or property to a government official? (Exception. Check "No"			ı
	If the f	oundation agreed to make a grant to or to employ the official for a period after			1 1
	termin	ation of government service, if terminating within 90 days )	1		
b	If any answ	ver is "Yes" to 1a(1)-(6), did <b>any</b> of the acts fail to qualify under the exceptions described in Regulations			
	section 53	4941(d)-3 or in a current notice regarding disaster assistance? See instructions N/A	1b		
	-	ons relying on a current notice regarding disaster assistance, check here			1 1
C	Did the fou	ndation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected	_		لـــا
		first day of the tax year beginning in 2019?	1c	L	X
2	Taxes on fa	allure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation			
		section 4942(j)(3) or 4942(j)(5)).			1 1
a		of tax year 2019, did the foundation have any undistributed income (Part XIII, lines	ĺ		
	•	for tax year(s) beginning before 2019?	ŀ		1 1
	•	the years , , , , , , , , , , , , , , , , , , ,			1 1
D		ny years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2) (relating to incorrect			
		f assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach see instructions.)  N/A	2b		┌──
_		- see instructions.)  N/A sions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.	20		$\vdash$
				•	1 1
2.	Dud the four	ndation hold more than a 2% direct or indirect interest in any business enterprise at any time			1 1
Ja	during the	1   ++ 1			1 1
h		I it have excess business holdings in 2019 as a result of (1) any purchase by the foundation or disqualified persons after			
		169; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose			
		acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Form 4720,	1.		
		c, to determine if the foundation had excess business holdings in 2019 ) N/A	3b		
4a		ndation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		X
		ndation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that			
		en removed from jeopardy before the first day of the tax year beginning in 2019?	4b		Х
		Fo	rm <b>99</b> 0	)-PF	(2019)

Form 990-PF (2019) GROSS FOUNDATION			22-23936	82 F	age <b>6</b>
Part VII-B Statements Regarding Activities for Which	Form 4720 May Be I	Required (contin	ued)		
5a During the year, did the foundation pay or incur any amount to:				Yes	No
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	n 4945(e))?	Ye	es 🗶 No		
(2) Influence the outcome of any specific public election (see section 4955); of	or to carry on, directly or indire	ectly,			. :
any voter registration drive?			es X No		
(3) Provide a grant to an individual for travel, study, or other similar purposes	?	Ye	es X No		
(4) Provide a grant to an organization other than a charitable, etc., organizatio					
4945(d)(4)(A)? See instructions		Y	es X No		
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational ourposes, or t				, ,
the prevention of cruelty to children or animals?	, , , , , , , , , , , , , , , , , , ,		es X No		
<b>b</b> If any answer is "Yes" to 5a(1)-(5), did <b>any</b> of the transactions fail to qualify uni	der the exceptions described				
section 53.4945 or in a current notice regarding disaster assistance? See instr			N/A	5b	
Organizations relying on a current notice regarding disaster assistance, check				<del></del>	-
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fi		inad			
• • •			es No		
expenditure responsibility for the grant?	I.	/A	ES   140		
If "Yes," attach the statement required by Regulations section 53.4945-5(d)			1		, '
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums on		es X No		
a personal benefit contract?		<b>T</b>	ES LALINO	<del>  </del>	X
<b>b</b> Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal benefit contract?		-	6b	
If "Yes" to 6b, file Form 8870.	_		[32]		
7a At any time during the tax year, was the foundation a party to a prohibited tax s		Y	es X No		
<b>b</b> If "Yes," did the foundation receive any proceeds or have any net income attribu			N/A	7b	
8 Is the foundation subject to the section 4960 tax on payment(s) of more than \$	\$1,000,000 in remuneration o				
excess parachute payment(s) during the year?			es 🗶 No 📗		
Part VIII Information About Officers, Directors, Trust	ees, Foundation Ma	magers, Highly	y		
Paid Employees, and Contractors					
1 List all officers, directors, trustees, and foundation managers and t		Li Componention	1 (4)		
(a) Name and address	(b) Title, and average hours per week devoted	(c) Compensation (If not paid,	(d) Contributions to employee benefit plans and deferred	(e) Expe account,	anse other
(a) Name and address	to position	`enter-0-)	compensation	allowar	ices
					_
SEE STATEMENT 11		0.	0.		0.
		ļ			
	1				
	1				
	1				
	1				
2 Compensation of five highest-paid employees (other than those inc	luded on line 1). If none,	enter "NONE."			
	(b) Title, and average		(d) Contributions to employee benefit plans	(e) Expe account,	ense
(a) Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	and deferred compensation	account,	otner
NONE		-	compensation		
	1				
		<del>                                     </del>			
	1				
		<del> </del>	<del></del>		
	<u> </u>	<u> </u>	L		
Total number of other employees paid over \$50,000				000 55	0
			Form	990-PF (	(2019)

>

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)	<u> </u>	
3 Five highest-paid independent contractors for professional services. If none, enter "NONE."		
(a) Name and address of each person paid more than \$50,000 (b) Type of service		(c) Compensation
NONE		
	•	0
Total number of others receiving over \$50,000 for professional services  Part IX-A   Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.		Expenses
1 N/A ,		
2		
		· , •
3		
4		<del>.</del>
[Post IV P. I		
Part IX-B Summary of Program-Related Investments  Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.	T	Amount
1 N/A		
2		
All other program-related investments. See instructions.  3		
	7	
Total. Add lines 1 through 3		0.

For	m 990-PF (2019) GROSS FOUNDATION	22-	2393682	Page 8
P	artiX Minimum Investment Return (All domestic foundations must complete this part. Foreign fou	ndations,	see instructions)	1
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:			
a	Average monthly fair market value of securities	1a	10,789	<u>,799.</u>
b	Average of monthly cash balances	1b	299	,022.
C	Fair market value of all other assets	1c		
d	Total (add lines 1a, b, and c)	1d	11,088	,821.
е	Reduction claimed for blockage or other factors reported on lines 1a and			
	1c (attach detailed explanation)			
2	Acquisition indebtedness applicable to line 1 assets	2		0.
3	Subtract line 2 from line 1d	3	11,088	
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4		,332.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	10,922	
6	Minimum investment return Enter 5% of line 5	6	546	,124.
Į <b>P</b>	Distributable Amount (see instructions) (Section 4942())(3) and (i)(5) private operating foundations are foreign organizations, check here and do not complete this part.)	nd certain		
1	Minimum investment return from Part X, line 6	1	546	,124.
	Tax on investment income for 2019 from Part VI, line 5 2a 2a 12,356.			
	Income tax for 2019. (This does not include the tax from Part VI)	1		
	Add lines 2a and 2b	2c	12	,356.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	533	,768.
4	Recoveries of amounts treated as qualifying distributions	4		0.
5	Add lines 3 and 4	5	533	,768.
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	533	,768.
P	art:XIII Qualifying Distributions (see instructions)			
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:			<u>.</u>
a	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	475	,326.
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:			
a	Suitability test (prior IRS approval required)	3a		
	Cash distribution test (attach the required schedule)	3b		
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8; and Part XIII, line 4	4	475	,326.
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		0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	475	,326.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation of 4940(e) reduction of tax in those years.	qualifies for	the section	

Form **990-PF** (2019)

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2018	(c) 2018	( <b>d</b> ) 2019
Distributable amount for 2019 from Part XI, line 7	:		199,50	533,768.
2 Undistributed income, if any, as of the end of 2019				· · · · · · · · · · · · · · · · · · ·
a Enter amount for 2018 only	t ,		0.	
<b>b</b> Total for prior years:			1	;
		0.		
3 Excess distributions carryover, if any, to 2019				
aFrom 2014 30,405.				
<b>b</b> From 2015				
c From 2016				j
<b>d</b> From 2017				
eFrom 2018 15,966.				
f Total of lines 3a through e	46,371.			
4 Qualifying distributions for 2019 from				
Part XII, line 4: ►\$ 475, 326.				
a Applied to 2018, but not more than line 2a			0.	İ
· · · · · · · · · · · · · · · · · · ·	····			
b Applied to undistributed income of prior		0.		
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus	0.			}
(Election required - see instructions)	U • ]			475,326.
d Applied to 2019 distributable amount				4/3,320.
e Remaining amount distributed out of corpus	0.			
5 Excess distributions carryover applied to 2019 (If an amount appears in column (d), the same amount must be shown in column (a))	46,371.			46,371.
b Enter the net total of each column as indicated helow.				1
& Coupers Add Hook 3f, dr., and de Subdrar Flore 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 2018. Subtract line	·			
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2019 Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2020				12,071.
7 Amounts treated as distributions out of		<del></del>		22,0,21
corpus to satisfy requirements imposed by				
, , , , , , , , , , , , , , , , , , , ,				
section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions)	0.			
,	0.		<u></u>	
8 Excess distributions carryover from 2014	0.			
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2020	0.			
Subtract lines 7 and 8 from line 6a	0.			
10 Analysis of line 9:				
a Excess from 2015			-	
b Excess from 2016				
c Excess from 2017				
d Excess from 2018				
e Excess from 2019				

Part XV Supplementary Information (continued) Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Foundation status of recipient Purpose of grant or contribution show any relationship to Amount any foundation manager Name and address (home or business) or substantial contributor a Paid during the year UNRESTRICTED ANN NORTON SCULPTURE GARDENS NC 2051 SOUTH FLAGLER DR WEST PALM BEACH, FL 33401 1,500. ARTHUR STAPLER MEMORIAL FUND NC UNRESTRICTED TWO MILL ROAD, SUITE 106 WILMINGTON, DE 19806 1,000. BIRTHRIGHT ISRAEL FOUNDATION EOF UNRESTRICTED 33 E 33RD ST, 7TH FLOOR ...\*75,300. NEW YORK, NY 10016 CAMERA NC UNRESTRICTED PO BOX 35040 BOSTON, MA 02135 2,500. HASHOMER HACHADASH NC UNRESTRICTED 6505 WILSHIRE BLVD, SUITE 1200 LOS ANGELES, CA 90048 4,000. SEE CONTINUATION SHEET(S) **▶** 3a 463,176. Total b Approved for future payment NONE 0. Total

Part XV Supplementary Information			**	
3 Grants and Contributions Paid During the Y				
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient	Contribution	
		NO.	TNID ECORD I COMED	
HILLSDALE FREE PUBLIC LIBRARY 509 HILLSDALE AVE		NC	UNRESTRICTED	
HILLSDALE, NJ 07642				100,000.
				,
JAFCO-JEWISH ADOPTION & FAMILY OPT		NC	UNRESTRICTED	
234 S BRYN MAWR AVE, SUITE 100				
BRYN MAWR, PA 19010				1,000.
				•
JCC OF THE PALM BEACHES		NC	UNRESTRICTED	
5221 HOOD ROAD PALM BEACH GARDENS, FL 33418				1,000.
JEWISH FEDERATION OF PALM BEACH CO		NC	UNRESTRICTED	
1 HARVARD CIRCLE, SUITE 100				
WEST PALM BEACH, FL 33409				100,000.
JEWISH SERVICE FOR THE		NC	UNRESTRICTED	
DEVELOPMENTALLY DISABLED		1		
270 PLEASANT VALLEY WAY				
WEST ORANGE, NJ 07052				1,000.
KOL-DORAT SYNAGOGUE		NC	UNRESTRICTED	
660 KINDERKAMACK RD				
ORADELL, NJ 7649				35,000.
			TO 10	
MORIKAMI MUSEUM AND JAPANESE GARDENS 4000 MORIKAMI PARK ROAD		NC	UNRESTRICTED	
DELRAY BEACH, FL 33446				195.
NORTON MUSEUM OF ART		NC	UNRESTRICTED	
1451 S OLIVE AVE				20 500
WEST PALM BEACH, FL 33401		-		28,500.
DEDEZ ADM MICEIM MIAYI		NC	UNRESTRICTED	
PEREZ ART MUSEUM MIAMI 1103 BISCAYNE BLVD		INC.	DIRECTED	
MIAMI, FL 33132				1,000.
PLAY FOR PINK		NC	UNRESTRICTED	
28 WEST 44TH STREET, SUITE 609				
NEW YORK, NY 10036		L		225.
Total from continuation sheets				378,876.

Part XV Supplementary Information				
3 Grants and Contributions Paid During the Y		-		
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		
RAMAPO COLLEGE FOUNDATION		EOF	UNRESTRICTED	
505 RAMAPO VALLEY RD				100 000
MAHWAH, NJ 07430			-	100,000
SARAH LAWERNCE COLLEGE		NC	UNRESTRICTED	
1 MEAD WAY				
BRONXVILLE, NY 10708				1,000
			•	
TEMPLE BETH EL		NC	UNRESTRICTED	
2815 N FLAGLER DR				
WEST PALM BEACH, FL 33407				6,000
			1	
TEMPLE JUDEA		NC	UNRESTRICTED	
333 SEARINGTOWN ROAD				300
MANHASSET, NY 11030	<del> </del>			300
•				
TREE OF LIFE		NC	UNRESTRICTED	
4047 OKEECHOBEE BLVD, SUITE 206				
WEST PALM BEACH, FL 33409				1,156
US HOLOCAUST MEMORIAL MUSEUM		NC	UNRESTRICTED	
100 RAOUL WALLENBERG PLACE, SW				
WASHINGTON, DC 20024				2,500
				·
	,			
Total from continuation sheets				

Part XVI-A	Analysis	of Income	-Producing	<b>Activities</b>
		• • • • • • • • • • • • • • • • • • • •		

Enter gross amounts unless atherwise indicated	Unrelate	d business income	Exclu	ded by section 512, 513, or 514	(e)
Enter gross amounts unless otherwise indicated.	(a) Business	(b) Amount	(C) Exclu- sion	(d) Amount	Related or exempt function income
1 Program service revenue:	code	711100111	code	Amount	- Idiocion income
a					
b			-		
·			-		
d	<del>                                     </del>	<del></del>	<u> </u>		
e	-		1		
† <u> </u>	-	<del>.</del>			
g Fees and contracts from government agencies	<b>—</b>				
2 Membership dues and assessments					
3 Interest on savings and temporary cash			14	40,545.	,
Investments			$\frac{14}{14}$		
4 Dividends and interest from securities	<del>                                     </del>		1.4	130,073.	
5 Net rental income or (loss) from real estate:	1		+		
a Debt-financed property	<del></del>		╁		
b Not debt-financed property	<b>-</b>		1		
6 Net rental income or (loss) from personal					
property  7 Other investment income					
7 Other investment income 8 Gain or (loss) from sales of assets other	1				
• •			18	498,025.	
than inventory			1 -0	450,025	
9 Net income or (loss) from special events  10 Gross profit or (loss) from sales of inventory	<del> </del>		<del>                                     </del>		
11 Other revenue	<b>—</b>		<del> </del>		
a b	<del>                                     </del>	<del></del> -	ł.—		
c		<u> </u>	<del> </del>		
d	1	<del></del>	<del>                                     </del>		
e	<b>+</b>				
12 Subtotal. Add columns (b), (d), and (e)	<b> </b>	0.		669,449.	0.
13 Total Add line 12, columns (b), (d), and (e)			1	13	669,449.
(See worksheet in line 13 instructions to verify calculations.)					
<u> </u>				1 D	<del>-</del>
Part XVI-B Relationship of Activities	to the Acco	implishment of E	xemp	t Purposes	
Line No. Explain below how each activity for which inco	me is reported ii	n column (e) of Part XVI-A	contrit	outed importantly to the accon	nolishment of
the foundation's exempt purposes (other than				F	
3 THE INVESTMENT INCOME	GENERATI	ED BY THE FO	UND	ATIONS' ASSET	S IS THE
PRIMARY MEANS BY WHICH	IT ACC	OMPLISHES IT	'S C	HARITABLE PUR	POSE.
4 THE INVESTMENT INCOME					
PRIMARY MEANS BY WHICH					
8 THE INVESTMENT INCOME					
PRIMARY MEANS BY WHICH	IT ACC	OMPLISHES IT	'S C	HARITABLE PUR	POSE.
					<u>.</u>
					<u>.</u>

		FOUNDATION		22-23			ige 13
Part X	VII Information Re Exempt Organ		and Transactions a	nd Relationships With Nonch	aritable	,	
1 Did t	he organization directly or indi	rectly engage in any of the following	ng with any other organization	on described in section 501(c)		Yes	No
(oth	er than section 501(c)(3) organ	nizations) or in section 527, relatin	ng to political organizations?				
a Tran	sfers from the reporting found	lation to a noncharitable exempt or	rganization of:				
	Cash	·			1a(1)		Х
(2)	Other assets				1a(2)		Х
<b>b</b> Othe	r transactions;						
(1)	Sales of assets to a noncharita	ible exempt organization			1b(1)		Х
(2)	Purchases of assets from a no	oncharitable exempt organization			1b(2)		Х
٠,	Rental of facilities, equipment,	, ,			1b(3)		X
٠,	Reimbursement arrangements				1b(4)		Х
• •	Loans or loan guarantees				1b(5)		Х
• •	•	embership or fundraising solicitati	ons		1b(6)		Х
		ailing lists, other assets, or paid en			1c		X
		• , , ,	• •	ways show the fair market value of the goods	لتنا	ets.	
				ie in any transaction or sharing arrangement		···,	
		other assets, or services received		io in any mandation of onating an angoment	,		
(a) Line no	(b) Amount involved	(c) Name of noncharitable		(d) Description of transfers, transactions, ar	nd sharing an	angeme	nts
7	(0)	N/A	-	(-7			
	<del> </del>	27/22	<u></u>		<del></del>		
			<del>-</del>		<del></del>		
		<del></del>					
		<del>                                     </del>	<del></del>				
		<del></del>		<del></del>			
		<del>                                     </del>	<del></del> -	<del></del>			
		<del></del>	· · · · · · · · · · · · · · · · · · ·	<del></del>			
		<del></del>					
				<del>_</del>			—
			<del></del>			-	
		<del></del>					
	<del>                                     </del>	<del></del>					
<del></del>	<del>                                     </del>		<del></del>				
	<del></del>			<del> </del>		-	
		<del></del>		· <del></del>			
		L	<u> </u>	<u> </u>			
		tly affiliated with, or related to, one	e or more tax-exempt organi	zations described	<b>—</b> ,,	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	No
		on 501(c)(3)) or in section 527?			Yes	LA	] No
b If "Ye	es," complete the following sch		(h) Tune of organization	(a) Description of relation			
	(a) Name of org	janization	(b) Type of organization	(c) Description of relation	nsnip		
	N/A		ļ				
	Under penalties of perjury, Vdeclare and belief, it is true, correct arity con	that I have examined this return, including the Declaration of preparer (other the	ing accompanying schedules and an taxpayer) is based on all inform	statements, and to the best of my knowledge nation of which preparer has any knowledge	May the IRS o	iscuss t	nis
Sìgn Here		IAAA	10/2/2		shown below	? Se <u>e ins</u>	str
nere		VVVI	3/30/20	TRUSTEE	X Yes	L	No
	Signature of officer or trustee	•	Date /	Title			
	Print/Type preparer's na	ame Preparer's s	signature	Date Check if PTII	4		
D		\\.\.\.\		3/22/20   self-employed   P			
Paid	WALT MAXWE	<del></del>	in		00186		
Prepa		IPLETON & COMPAN	Y, LLP	Firm's EIN ► 14-	19189	90	
Use O	· ·						
		2 LAKEVIEW AVEN					
	WE_	ST PALM BEACH,	FL 33401	Phone no. 561-	<u> 798-9</u>	988	

#### 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

2019

Name of the organization

Employer identification number

Schedule B (Form 990, 990-EZ, or 990-PF) (2019)

G	ROSS FOUNDATION	22-2393682
Organization type (check	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 fo	undation
٩	527 political organization	
Form 990-PF	S01(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a private found	ation
	501(c)(3) taxable private foundation	
General Rule  X For an organization	c)(7), (8), or (10) organization can check boxes for both the General Rule a on filing Form 990, 990-EZ, or 990-PF that received, during the year, contr	abutions totaling \$5,000 or more (in money or
Special Rules	ry one continuator complete raits raile in See instructions for determining	ig a contributor's total contributions
For an organization sections 509(a)(1 any one contribu	on described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33() and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Partitor, during the year, total contributions of the greater of (1) \$5,000, or (2) 2 Z, line 1 Complete Parts I and II	t II, line 13, 16a, or 16b, and that received from
year, total contrib	on described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that butions of more than \$1,000 exclusively for religious, charitable, scientific, lelty to children or animals. Complete Parts I, II, and III	
year, contribution is checked, enter purpose Don't co	on described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that his exclusively for religious, charitable, etc., purposes, but no such contributions that were received during the year for an exclusive any of the parts unless the <b>General Rule</b> applies to this organization, etc., contributions totaling \$5,000 or more during the year	utions totaled more than \$1,000 If this box fusively religious, chantable, etc.,
•	that isn't covered by the General Rule and/or the Special Rules doesn't file	

certify that it doesn't meet 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

## GROSS FOUNDATION

22-2393682

Part I	Contributors (see instructions) Use duplicate copies of Part I if addition	nal space is needed	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	PAUL L GROSS & GAYLE S GROSS CLAT  1600 MAYACOO LAKES BLVD  WEST PALM BEACH, FL 33401	\$ 363,376.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		- \$ - \$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) <b>N</b> o.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		- \$ - \$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		s	Person Payroll Oncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)

Name of organization

Employer identification number

## GROSS FOUNDATION

22-2393682

Part II	Noncash Property (see instructions) Use duplicate copies of Part II if a	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
		\$	<u></u>
(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
		\$	

Employer identification number

GROSS FOUNDATION	N
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GROSS	FOUNDATION			22-2393682			
Part III	Exclusively religious, charitable, etc., contribu	tions to organizations described in	section 501(c)(7),	(8), or (10) that total more than \$1,000 for the	e yea		
<u> </u>	from any one contributor. Complete columns (a	a) through (e) and the following line er	try For organizati	ons 🕨 🖈 🕏			
	completing Part III, enter the total of exclusively religious	, charitable, etc., contributions of \$1,000 or	less for the year (En	ter this info-once)			
/-\ <b>\</b> \ .	Use duplicate copies of Part III if additional	i space is needed		· · · · · · · · · · · · · · · · · · ·			
(a) No. from	(h) Burnosa of gift	(c) Use of gift		(d) Description of how gift is held			
Part I	(b) Purpose of gift	(c) use or gift		(a) Description of now girt is neith			
7, 4111							
		(e) Transfer of gi					
		(e) transier or gi	•				
	Transferee's name, address, a	and ZIP + 4	Relations	hip of transferor to transferee			
				<del></del>			
	<del></del>						
		<u> </u>					
(a) No.	4.5	(-) 11		(a) December of home with in health			
from Part I	(b) Purpose of gift	(c) Use of gift	ĺ	(d) Description of how gift is held			
			—— II ——	<del></del>	_		
		(e) Transfer of gr	t				
		(e) Transfer of gift					
	Transferee's name, address, a	and ZIP + 4	Relations	hip of transferor to transferee			
			· ·				
7.11							
(a) No. from	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held			
Part I	(b) Fulpose of gift	(c) Use of gift		(a) Description of now gire is field			
	•						
					_		
<del></del>			<del></del>		_		
			<u>'</u>				
		(e) Transfer of git	t				
	(6, 11216.6. 6. 3.1.						
	T		Dalations	him of two of come to transfers.			
	Transferee's name, address, a	ING ZIP + 4	Relations	hip of transferor to transferee			
İ							
	-				_		
(a) No		T					
(a) No. from	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held			
Part I	(5) 5 5 5 5	(0, 000 00 300					
					_		
	<del></del>				—		
			<u> </u>				
		(e) Transfer of git	t				
	Transferee's name, address, a	and ZID + 4	Palations	hip of transferor to transferee			
}	n ansieree's name, audress, a			inp of dansieror to dansieroe			
	<u> </u>						

FORM 990-PF INTERE	ST ON SAVI	NGS AND TEM	PORARY CASH	INVESTMENTS	STATEMENT 1	
SOURCE		(A REVE PER B	NUE NET	(B) INVESTMENT INCOME	(C) ADJUSTED NET INCOME	
INTEREST INCOME		4	0,545.	40,545.	40,545.	
TOTAL TO PART I, LI	NE 3	4	0,545.	40,545.	40,545.	
FORM 990-PF	DIVIDEND	S AND INTER	EST FROM SEC	CURITIES	STATEMENT 2	
SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDEND	(A) REVENUE S PER BOOK			
DIVIDEND INCOME	130,879	•	0. 130,87	79. 130,87	79. 130,879.	
TO PART I, LINE 4	130,879	•	0. 130,87	130,87	9. 130,879.	
FORM 990-PF		ACCOUNTI	NG FEES		STATEMENT 3	
DESCRIPTION		(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME			
TAX PREPARATION		3,225.		).	0. 3,225.	
TO FORM 990-PF, PG	1, LN 16B =	3,225.		).	0. 3,225.	
FORM 990-PF		TAX	ES		STATEMENT 4	
DESCRIPTION		(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME			
FOREIGN TAX PAID &	CREDIT -	2,058.	2,058	3.	0. 0.	
TO FORM 990-PF, PG	1, LN 18	2,058.	2,058	3.	0. 0.	

FORM 990-PF	OTHER EXPENSES				STATEMENT 5		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVE MENT INC		(C) ADJUSTEI NET INCOI		(D) CHARITAE PURPOSE	
INVESTMENT FEES PROGRAM SERVICES	49,616. 8,925.		616.		0.	8,92	0. 25.
TO FORM 990-PF, PG 1, LN 23	58,541.	49,	616.		0.	8,92	25.
FORM 990-PF OTHER INCREASES	IN NET ASS	ETS OR FU	ND BA	LANCES	STA	ATEMENT	6
DESCRIPTION						AMOUNT	
NON-DIVIDEND DISTRIBUTIONS CASH LIQUIDATION DISTRIBUTION							21. 19.
TOTAL TO FORM 990-PF, PART II	I, LINE 3					37	70.
FORM 990-PF U.S. AND S	TATE/CITY G	OVERNMENT	OBLI	GATIONS	STA	ATEMENT	7
DESCRIPTION	U.S		вос	K VALUE	FA	IR MARKET VALUE	C
INVESTMENTS-US AND STATE GOVE OBLIGATIONS	RNMENT X		1	,663,876.		1,688,43	37.
TOTAL U.S. GOVERNMENT OBLIGAT	IONS	•	1	,663,876.		1,688,43	37.
TOTAL STATE AND MUNICIPAL GOV	ERNMENT OBL	IGATIONS					
TOTAL TO FORM 990-PF, PART II	, LINE 10A	•	1	,663,876.		1,688,43	37.

# GROSS FOUNDATION

FORM 990-PF	CORPORATE STOCK		STATEMENT 8
DESCRIPTION		BOOK VALUE	FAIR MARKET VALUE
INVESTMENTS-CORPORATE STOCK		5,518,891.	7,296,324.
TOTAL TO FORM 990-PF, PART II,	LINE 10B	5,518,891.	7,296,324.
FORM 990-PF	CORPORATE BONDS		STATEMENT 9
DESCRIPTION		BOOK VALUE	FAIR MARKET VALUE
INVESTMENTS-CORPORATE BONDS	,	1,481,271.	1,476,793.
TOTAL TO FORM 990-PF, PART II,	LINE 10C	1,481,271.	1,476,793.
FORM 990-PF	OTHER INVESTMENTS		STATEMENT 10
DESCRIPTION	VALUATION METHOD	BOOK VALUE	FAIR MARKET VALUE
INVESTMENTS-OTHER	COST	1,258,662.	1,376,908.
TOTAL TO FORM 990-PF, PART II,	LINE 13	1,258,662.	1,376,908.

	ST OF OFFICERS, D D FOUNDATION MANA	STATEMENT 11		
NAME AND ADDRESS	TITLE AND AVRG HRS/WK		EMPLOYEE BEN PLAN CONTRIB	
PAUL L. GROSS 1600 MAYACOO LAKES BLVD WEST PALM BEACH, FL 33401	TRUSTEE 1.00	0.	0.	0.
GAYLE GROSS 1600 MAYACOO LAKES BLVD WEST PALM BEACH, FL 33401	TRUSTEE 1.00	0.	0.	0.
GREGORY A. GROSS C/O ATHLETIC CLUB, 62 POULTNEY WHITEHALL, NY 12887	TRUSTEE 1.00	0.	0.	0.
LAUREN A. GROSS 1512 BREAKERS WEST BLVD WEST PALM BEACH, FL 33411	TRUSTEE 2.00	0.	0.	0.
ROGER A. GROSS 15 PASCACK ROAD WOODCLIFF LAKE, NJ 07625	TRUSTEE 1.00	0.	0.	0.
TOTALS INCLUDED ON 990-PF, PAGE 6	5, PART VIII	0.	0.	0.

FORM 990-PF

GRANT APPLICATION SUBMISSION INFORMATION PART XV, LINES 2A THROUGH 2D

STATEMENT

12

NAME AND ADDRESS OF PERSON TO WHOM APPLICATIONS SHOULD BE SUBMITTED

PAUL L. GROSS 1600 MAYACOO LAKES BLVD WEST PALM BEACH, FL 33401

TELEPHONE NUMBER

561-242-8844

FORM AND CONTENT OF APPLICATIONS

SEE STATEMENT 12

FORM 990-PF, PART XV, LINE 2A-D APPLICATION FOR SUBMISSION INFORMATION

LETTER CONTAINING DESCRIPTION OF ORGANIZATION, AMOUNT OF FUNDING REQUIRED AND FOR WHAT PURPOSE.

ANY SUBMISSION DEADLINES

NONE

RESTRICTIONS AND LIMITATIONS ON AWARDS

NONE