

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 1545-0052
2019
Open to Public Inspection

For calendar year 2019, or tax year beginning 01-01-2019, and ending 12-31-2019

Name of foundation The Buccino Foundation		A Employer identification number 36-3743267
Number and street (or P O box number if mail is not delivered to street address) 14483 Marsala Way	Room/suite	B Telephone number (see instructions) (917) 991-3410
City or town, state or province, country, and ZIP or foreign postal code Naples, FL 34109		C If exemption application is pending, check here <input type="checkbox"/>
G Check all that apply: <input type="checkbox"/> Initial return <input type="checkbox"/> Initial return of a former public charity <input type="checkbox"/> Final return <input type="checkbox"/> Amended return <input type="checkbox"/> Address change <input type="checkbox"/> Name change		D 1. Foreign organizations, check here <input type="checkbox"/> 2. Foreign organizations meeting the 85% test, check here and attach computation <input type="checkbox"/>
H Check type of organization: <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		E If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/>
I Fair market value of all assets at end of year (from Part II, col (c), line 16) ▶ \$ <u>1,513,058</u>	J Accounting method: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____ <i>(Part I, column (d) must be on cash basis)</i>	F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/>

Part I Analysis of Revenue and Expenses <i>(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions))</i>		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
Revenue	1 Contributions, gifts, grants, etc., received (attach schedule)	53,574			
	2 Check <input type="checkbox"/> if the foundation is not required to attach Sch. B				
	3 Interest on savings and temporary cash investments				
	4 Dividends and interest from securities	8,418	8,418		
	5a Gross rents				
	b Net rental income or (loss)				
	6a Net gain or (loss) from sale of assets not on line 10	141,855			
	b Gross sales price for all assets on line 6a	246,036			
	7 Capital gain net income (from Part IV, line 2)		141,855		
	8 Net short-term capital gain				
	9 Income modifications				
	10a Gross sales less returns and allowances				
b Less Cost of goods sold					
c Gross profit or (loss) (attach schedule)					
11 Other income (attach schedule)					
12 Total. Add lines 1 through 11	203,847	150,273			
Operating and Administrative Expenses	13 Compensation of officers, directors, trustees, etc	22,420	11,210		11,210
	14 Other employee salaries and wages				
	15 Pension plans, employee benefits				
	16a Legal fees (attach schedule)	12,959	6,479		6,480
	b Accounting fees (attach schedule)	2,500	1,250		1,250
	c Other professional fees (attach schedule)	11,880	10,380		1,500
	17 Interest				
	18 Taxes (attach schedule) (see instructions)	79	0		0
	19 Depreciation (attach schedule) and depletion	165	344		
	20 Occupancy	3,854	0		3,854
	21 Travel, conferences, and meetings	8,318	4,159		4,159
	22 Printing and publications				
	23 Other expenses (attach schedule)	8,948	3,857		3,856
	24 Total operating and administrative expenses. Add lines 13 through 23	71,123	37,679		32,309
	25 Contributions, gifts, grants paid	112,300			112,300
26 Total expenses and disbursements. Add lines 24 and 25	183,423	37,679		144,609	
27 Subtract line 26 from line 12					
a Excess of revenue over expenses and disbursements	20,424				
b Net investment income (if negative, enter -0-)		112,594			
c Adjusted net income (if negative, enter -0-)					

Part II Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions.)		Beginning of year	End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value
Assets	1 Cash—non-interest-bearing	2,642	3,264	3,264
	2 Savings and temporary cash investments	5,632	18,261	18,261
	3 Accounts receivable ▶ _____ Less allowance for doubtful accounts ▶ _____			
	4 Pledges receivable ▶ _____ Less allowance for doubtful accounts ▶ _____			
	5 Grants receivable			
	6 Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions)			
	7 Other notes and loans receivable (attach schedule) ▶ _____ Less allowance for doubtful accounts ▶ _____			
	8 Inventories for sale or use			
	9 Prepaid expenses and deferred charges			
	10a Investments—U S and state government obligations (attach schedule)			
	b Investments—corporate stock (attach schedule)	533,894	541,232	1,491,286
	c Investments—corporate bonds (attach schedule)			
	11 Investments—land, buildings, and equipment basis ▶ _____ Less accumulated depreciation (attach schedule) ▶ _____			
	12 Investments—mortgage loans			
	13 Investments—other (attach schedule)			
	14 Land, buildings, and equipment basis ▶ <u>1,719</u> Less accumulated depreciation (attach schedule) ▶ <u>1,472</u>	412	247	247
15 Other assets (describe ▶ _____)				
16 Total assets (to be completed by all filers—see the instructions Also, see page 1, item I)	542,580	563,004	1,513,058	
Liabilities	17 Accounts payable and accrued expenses			
	18 Grants payable			
	19 Deferred revenue			
	20 Loans from officers, directors, trustees, and other disqualified persons			
	21 Mortgages and other notes payable (attach schedule)			
	22 Other liabilities (describe ▶ _____)			
	23 Total liabilities (add lines 17 through 22)	0	0	
Net Assets or Fund Balances	Foundations that follow FASB ASC 958, check here ▶ <input type="checkbox"/> and complete lines 24, 25, 29 and 30.			
	24 Net assets without donor restrictions			
	25 Net assets with donor restrictions			
	Foundations that do not follow FASB ASC 958, check here ▶ <input checked="" type="checkbox"/> and complete lines 26 through 30.			
	26 Capital stock, trust principal, or current funds	0	0	
	27 Paid-in or capital surplus, or land, bldg, and equipment fund	0	0	
	28 Retained earnings, accumulated income, endowment, or other funds	542,580	563,004	
29 Total net assets or fund balances (see instructions)	542,580	563,004		
30 Total liabilities and net assets/fund balances (see instructions) .	542,580	563,004		

Part III Analysis of Changes in Net Assets or Fund Balances			
1 Total net assets or fund balances at beginning of year—Part II, column (a), line 29 (must agree with end-of-year figure reported on prior year's return)		1	542,580
2 Enter amount from Part I, line 27a		2	20,424
3 Other increases not included in line 2 (itemize) ▶ _____		3	0
4 Add lines 1, 2, and 3		4	563,004
5 Decreases not included in line 2 (itemize) ▶ _____		5	0
6 Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 29 .		6	563,004

Part IV Capital Gains and Losses for Tax on Investment Income

(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse, or common stock, 200 shs. MLC Co.)	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a See Additional Data Table			
b			
c			
d			
e			

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
a See Additional Data Table			
b			
c			
d			
e			

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col. (h))
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any	
a See Additional Data Table			
b			
c			
d			
e			

2 Capital gain net income or (net capital loss)	2	141,855
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6) If gain, also enter in Part I, line 8, column (c) (see instructions) If (loss), enter -0- in Part I, line 8	3	

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

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

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

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? Yes No
 If "Yes," the foundation does not qualify under section 4940(e). Do not complete this part.

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

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col. (b) divided by col. (c))
2018	33,124	1,255,746	0.026378
2017	99,217	1,015,162	0.097735
2016	86,975	955,536	0.091022
2015	122,488	1,021,977	0.119854
2014	96,691	1,043,133	0.092693

2 Total of line 1, column (d)	2	0.427682
3 Average distribution ratio for the 5-year base period—divide the total on line 2 by 5.0, or by the number of years the foundation has been in existence if less than 5 years	3	0.085536
4 Enter the net value of noncharitable-use assets for 2019 from Part X, line 5	4	1,336,525
5 Multiply line 4 by line 3	5	114,321
6 Enter 1% of net investment income (1% of Part I, line 27b)	6	1,126
7 Add lines 5 and 6	7	115,447
8 Enter qualifying distributions from Part XII, line 4	8	144,609

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

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

Table with 11 rows for excise tax calculation. Includes fields for exempt foundations, tax under section 511, subtitle A tax, and total tax due. Includes sub-table for 2019 estimated tax payments (6a-6d).

Part VII-A Statements Regarding Activities

Table with 10 rows for activity statements. Columns include question number, 'Yes', and 'No' responses. Questions cover political campaign influence, political expenditures, and other activities.

Part VII-A Statements Regarding Activities (continued)

Table with 3 columns: Question, Yes, No. Rows 11-13 regarding controlled entities, distribution to donor advised funds, and public inspection requirements.

14 The books are in care of Gerald P Buccino Telephone no (917) 991-3410

Located at 14483 Marsala Way Naples FL ZIP+4 34109

15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here and enter the amount of tax-exempt interest received or accrued during the year 15

Table with 3 columns: Question, Yes, No. Row 16 regarding interest in foreign countries.

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

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

Main table with 3 columns: Question, Yes, No. Rows 1a-4b regarding Form 4720 exceptions and requirements.

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)

3 Five highest-paid independent contractors for professional services (see instructions). If none, enter "NONE".		
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services. ▶		0

Part IX-A Summary of Direct Charitable Activities

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1	
2	
3	
4	

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

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

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

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	1,341,978
b	Average of monthly cash balances.	1b	14,900
c	Fair market value of all other assets (see instructions).	1c	0
d	Total (add lines 1a, b, and c).	1d	1,356,878
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	1,356,878
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions).	4	20,353
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	1,336,525
6	Minimum investment return. Enter 5% of line 5.	6	66,826

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

1	Minimum investment return from Part X, line 6.	1	66,826
2a	Tax on investment income for 2019 from Part VI, line 5.	2a	1,126
b	Income tax for 2019 (This does not include the tax from Part VI).	2b	
c	Add lines 2a and 2b.	2c	1,126
3	Distributable amount before adjustments. Subtract line 2c from line 1.	3	65,700
4	Recoveries of amounts treated as qualifying distributions.	4	0
5	Add lines 3 and 4.	5	65,700
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	65,700

Part XII Qualifying Distributions (see instructions)

1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
a	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26.	1a	144,609
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	
b	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	144,609
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b. See instructions.	5	1,126
6	Adjusted qualifying distributions. Subtract line 5 from line 4.	6	143,483

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

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2018	(c) 2018	(d) 2019
1 Distributable amount for 2019 from Part XI, line 7				65,700
2 Undistributed income, if any, as of the end of 2019				
a Enter amount for 2018 only.			0	
b Total for prior years 20___, 20___, 20___		0		
3 Excess distributions carryover, if any, to 2019				
a From 2014.	7,937			
b From 2015.	71,389			
c From 2016.	39,198			
d From 2017.	49,349			
e From 2018.				
f Total of lines 3a through e.	167,873			
4 Qualifying distributions for 2019 from Part XII, line 4 ▶ \$ <u>144,609</u>				
a Applied to 2018, but not more than line 2a			0	
b Applied to undistributed income of prior years (Election required—see instructions).		0		
c Treated as distributions out of corpus (Election required—see instructions).	0			
d Applied to 2019 distributable amount.				65,700
e Remaining amount distributed out of corpus	78,909			
5 Excess distributions carryover applied to 2019 (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	246,782			
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 instructions			0	
f Undistributed income for 2019 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2020				0
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions).		0		
8 Excess distributions carryover from 2014 not applied on line 5 or line 7 (see instructions).	7,937			
9 Excess distributions carryover to 2020. Subtract lines 7 and 8 from line 6a	238,845			
10 Analysis of line 9				
a Excess from 2015.	71,389			
b Excess from 2016.	39,198			
c Excess from 2017.	49,349			
d Excess from 2018.				
e Excess from 2019.	78,909			

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

1a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2019, enter the date of the ruling. ▶

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

	Tax year	Prior 3 years			(e) Total
	(a) 2019	(b) 2018	(c) 2017	(d) 2016	
2a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed					
b 85% of line 2a					
c Qualifying distributions from Part XII, line 4 for each year listed					
d Amounts included in line 2c not used directly for active conduct of exempt activities					
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)					
b "Endowment" alternative test— enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed.					
c "Support" alternative test—enter					
(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii).					
(3) Largest amount of support from an exempt organization					
(4) Gross investment income					

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

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

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

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

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

a The name, address, and telephone number or e-mail address of the person to whom applications should be addressed
 Gerald P Buccino
 14483 Marsala Way
 Naples, FL 34109
 (917) 991-3410

b The form in which applications should be submitted and information and materials they should include
 Applications must be submitted in writing

c Any submission deadlines
 N/A

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

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

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a <i>Paid during the year</i> See Additional Data Table				
Total ▶ 3a				112,300
b <i>Approved for future payment</i>				
Total ▶ 3b				0

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d

List and describe the kind(s) of property sold (e.g., real estate, (a) 2-story brick warehouse, or common stock, 200 shs MLC Co.)	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo, day, yr)	(d) Date sold (mo, day, yr)
NXStage Medical Inc	P	2007-03-08	2019-01-16
The Ultimate Software Group Inc	P	2011-01-25	2019-02-12
Electronics For Imaging Inc	P	2017-04-21	2019-07-01
HFF Inc	P	2011-03-04	2019-07-03
Jones Lang LaSalle Inc	P	2011-03-04	2019-07-05
Wageworks Inc	P	2012-08-27	2019-07-25
Costar Group Inc	P	2007-03-08	2019-09-20
Dexcom Inc	P	2017-10-27	2019-09-20
Exact Sciences Corp	P	2015-10-06	2019-09-20
Jones Lang LaSalle Inc	P	2011-03-04	2019-09-20

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
28,745		12,364	16,381
52,117		7,651	44,466
12,345		15,000	-2,655
4,310		266	4,044
47		26	21
23,283		8,330	14,953
14,752		1,127	13,625
15,233		4,462	10,771
15,489		1,509	13,980
3,573		1,994	1,579

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - l

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	
			16,381
			44,466
			-2,655
			4,044
			21
			14,953
			13,625
			10,771
			13,980
			1,579

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d

List and describe the kind(s) of property sold (e.g., real estate, (a) 2-story brick warehouse, or common stock, 200 shs MLC Co.)	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo, day, yr)	(d) Date sold (mo, day, yr)
Lululemon Athletica Inc	P	2013-09-20	2019-09-20
Marcus & Millichap Inc	P	2013-11-21	2019-09-20
Visa Inc Class A	P	2018-12-20	2019-09-20
Idexx Laboratories Inc	P	2018-12-20	2019-09-30
Walgreen Boots Alliance Inc Com	P	2016-05-16	2019-10-23
Charles Schwab Corp	P	2018-10-30	2019-11-05
Dave & Buster's Entertainment Inc	P	2018-02-21	2019-12-17
Dave & Buster's Entertainment Inc	P	2019-06-12	2019-12-17
Basis Adjustment HFF Merger w/Jones Lang LaSalle	P	2019-09-20	2019-09-20

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
16,247		6,227	10,020
14,682		5,950	8,732
7,852		5,794	2,058
5,457		3,701	1,756
7,082		3,069	4,013
11,953		12,560	-607
4,899		5,677	-778
7,970		8,269	-299
		205	-205

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - l

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	
			10,020
			8,732
			2,058
			1,756
			4,013
			-607
			-778
			-299
			-205

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
Alzheimer Association 8430 W Bryn Mawr Ave Chicago, IL 60631	None	PC	Unrestricted general operating support	150
American Foundation For The Blind 1401 South Clark Street Suite 730 Arlington, VA 22202	None	PC	Unrestricted general operating support	150
American Heart Association PO Box 78851 Phoenix, AZ 85062	None	PC	Unrestricted general operating support	100
Total ▶ 3a				112,300

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
American Lung Association 6852 Belford Oaks Place Jacksonville, FL 32216	None	PC	Unrestricted general operating support	100
Blinded Veterans Association 477 H Stree NW Washington, DC 20001	None	PC	Unrestricted general operating support	150
Doctors Without Borders 40 Rector St 16th Floor New York, NY 10006	None	PC	Unrestricted general operating support	100
Total ▶ 3a				112,300

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
Guide Dogs For The Blind PO Box 151200 San Rafael, CA 94915	None	PC	Unrestricted general operating support	150
Helen Keller International One Dag Hammarskjold Plaza Floor 2 New York, NY 10017	None	PC	Unrestricted general operating support	150
Help Heal Veterans 36585 Penfield Lane Winchester, CA 92596	None	PC	Unrestricted general operating support	150
Total ▶ 3a				112,300

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
Humane Society Naples 370 Airport Pulling Road N Naples, FL 34104	None	PC	Unrestricted general operating support	50
Macular Degeneration Association 22512 Gateway Center Drive Clarksburg, MD 20871	None	PC	Unrestricted general operating support	100
Make A Wish Foundation PO Box 29119 Phoenix, AZ 85038	None	PC	Unrestricted general operating support	250
Total ▶ 3a				112,300

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
Marine Corps Heritage Foundation 18900 Jefferson Davis Highway Triangle, VA 22172	None	PC	Unrestricted general operating support	150
Misericordia6300 North Ridge Avenue Chicago, IL 60660	None	PC	Unrestricted general operating support	500
National Glaucoma Research 22512 Gateway Center Drive Clarksburg, MD 20871	None	PC	Unrestricted general operating support	100
Total ▶ 3a				112,300

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
National Multiple Sclerosis Society PO Box 91891 Washington, DC 20090	None	PC	Unrestricted general operating support	100
Northshore University Healthcare Foundation 1033 University Place Suite 450 Evanston, IL 60201	None	PC	Unrestricted general operating support	100
Operation Smile PO Box 5017 Hagerstown, MD 21741	None	PC	Unrestricted general operating support	150
Total ▶ 3a				112,300

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
Operation Finally Home PO Box 1218 Merrifield, VA 22116	None	PC	Unrestricted general operating support	100
Paralyzed Veterans of America 801 18th Street NW Washington, DC 20006	None	PC	Unrestricted general operating support	200
Ronald McDonald House 110 North Carpenter Street Chicago, IL 60607	None	PC	Unrestricted general operating support	200
Total				112,300

▶ **3a**

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
Seton Hall University 400 South Orange Avenue Jubilee Hall South Orange, NJ 07079	None	PC	Unrestricted general operating support	106,000
Shriners Hospital For Children 2900 Rocky Point Dr Tampa, FL 33607	None	PC	Unrestricted general operating support	500
SOS Childrens Village USA 1620 I Street NW Suite 900 Washington, DC 20006	None	PC	Unrestricted general operating support	150
Total ▶ 3a				112,300

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
St Judes Childrens Hospital 501 St Jude Place Memphis, TN 38105	None	PC	Unrestricted general operating support	500
St Pauls Outreach 5814 Blackshire Path Inver Grove Heights, MN 55076	None	PC	Unrestricted general operating support	250
Susan G Komen 5005 LBJ Freeway Dallas, TX 75244	None	PC	Unrestricted general operating support	150
Total ▶ 3a				112,300

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
The ALS Association 1300 Wilson Boulevard Suite 600 Arlington, VA 22209	None	PC	Unrestricted general operating support	100
The First Tee 1370 Creekside Blvd Naples, FL 34108	None	PC	Unrestricted general operating support	500
The Salvation Army 615 Slaters Lane Alexandria, VA 22314	None	PC	Unrestricted general operating support	150
Total ▶ 3a				112,300

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
The Seeing Eye PO Box 375 Morristown, NJ 07963	None	PC	Unrestricted general operating support	150
The USO 2111 Wilson Blvd Arlington, VA 22201	None	PC	Unrestricted general operating support	100
Toys For Tots 18251 Quantico Gateway Dr Triangle, VA 22172	None	PC	Unrestricted general operating support	150
Total ▶ 3a				112,300

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
Tunnel To Towers 2361 Hylan Boulevard Staten Island, NY 10306	None	PC	Unrestricted general operating support	200
Wounded Warrior Project 4899 Belfort Road Ste 300 Jacksonville, FL 32256	None	PC	Unrestricted general operating support	200
Total ▶ 3a				112,300

TY 2019 Accounting Fees Schedule**Name:** The Buccino Foundation**EIN:** 36-3743267

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
Accounting Fees	2,500	1,250		1,250

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

TY 2019 Depreciation Schedule

Name: The Buccino Foundation

EIN: 36-3743267

Depreciation Schedule

Description of Property	Date Acquired	Cost or Other Basis	Prior Years' Depreciation	Computation Method	Rate / Life (# of years)	Current Year's Depreciation Expense	Net Investment Income	Adjusted Net Income	Cost of Goods Sold Not Included
Lenovo Computer	2017-05-03	1,719	447	200DB	5 000000000000	165	344		

TY 2019 Investments Corporate Stock Schedule

Name: The Buccino Foundation

EIN: 36-3743267

Investments Corporation Stock Schedule

Name of Stock	End of Year Book Value	End of Year Fair Market Value
Accelerate Diagnostic Inc Com	10,720	7,521
Afiliated Managers Group	10,945	14,830
Blackline Inc Com	12,364	17,788
Carvana Co CL A	6,471	25,774
Costar Group Inc Com	4,237	56,240
Dexcom Inc	4,647	88,590
Docusign Inc Com	11,355	15,563
Ecolab, Inc	10,363	46,318
Edward Lifesciences Corp	11,678	29,161
Cheesecake Factory Inc	7,798	7,578
Chewy Inc Cl A	7,363	7,540
Evolent Health Inc Cl A	19,946	10,951
Exact Sciences Corp	6,060	69,360
Floor & Decor Hldgs Inc Cl A	8,230	11,178
Globant	11,396	37,118
Goldman Sachs Group Inc	8,886	31,960
Goosehead Ins Inc Com Cl A	10,162	9,964
Healthcare Svcs Grp Inc Com	14,310	17,340
HMS Holdings Corp	13,186	32,856
Idexx Laboratories Inc Com	34,917	56,143
IHS Markit LTD Com	22,654	51,916
Inogen Inc Com	19,965	36,557
Kornit Digital Ltd Ord	15,139	41,761
Lululemon Athletica Inc Com	23,284	78,768
Mercury Sys Inc Com	13,318	23,843
Nektar Therapeutics	6,076	18,455
Neogenomics Inc Com New	16,145	66,690
Netflix Com Inc Com	14,273	46,918
Neuronetics Inc Com	6,007	2,200
Nevro Corp Com	12,160	16,103

Investments Corporation Stock Schedule

Name of Stock	End of Year Book Value	End of Year Fair Market Value
Northern Trust Corp Com	10,987	15,936
Optimizer Corp Com New	7,117	5,649
Planet Fitness Inc Cl A	9,704	45,928
Proto Labs Inc Com	18,141	26,403
Qualcomm Inc	7,624	42,792
Redfin Corp Com	10,652	12,473
Resmed Inc	8,673	54,240
Salesforce.Com Inc	3,452	52,858
Smartsheet Inc Com Cl A	7,253	12,533
Square Inc Cl A	7,533	37,536
Starbucks Corp Com	8,235	43,081
Visa Inc Com Cl A	9,363	62,007
Walgreens Boots Alliance Inc Com	4,490	11,202
Watsco Inc Common Cl A Reclassified	26,780	54,946
Yeti Hldgs Inc Com	11,212	20,729
Zoom Video Communications Inc Cl A	15,961	15,989

**TY 2019 Land, Etc.
Schedule****Name:** The Buccino Foundation**EIN:** 36-3743267

Category / Item	Cost / Other Basis	Accumulated Depreciation	Book Value	End of Year Fair Market Value
Lenovo Computer	1,719	1,472	247	247

TY 2019 Legal Fees Schedule**Name:** The Buccino Foundation**EIN:** 36-3743267

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
Legal Fees	12,959	6,479		6,480

TY 2019 Other Expenses Schedule**Name:** The Buccino Foundation**EIN:** 36-3743267**Other Expenses Schedule**

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
Telephone	1,450	725		725
Dues & Subscriptions	151	76		75
Meals	2,468	617		617
Supplies	673	337		336
Postage	131	65		66
Insurance	1,800	900		900
Office Expense	2,275	1,137		1,137

TY 2019 Other Professional Fees Schedule**Name:** The Buccino Foundation**EIN:** 36-3743267

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
Consulting Fees	3,000	1,500		1,500
Investment Fees	8,880	8,880		0

TY 2019 Taxes Schedule**Name:** The Buccino Foundation**EIN:** 36-3743267

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
2018 Federal Taxes	79	0		0

Schedule B
(Form 990, 990-EZ,
or 990-PF)
Department of the Treasury
Internal Revenue Service

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

OMB No 1545-0047
2019

Name of the organization
The Buccino Foundation

Employer identification number
36-3743267

Organization type (check one)

Filers of:

Section:

Form 990 or 990-EZ

- 501(c)() (enter number) organization
- 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation
- 527 political organization

Form 990-PF

- 501(c)(3) exempt private foundation
- 4947(a)(1) nonexempt charitable trust treated as a private foundation
- 501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.

Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See instructions

General Rule

- For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or other property) from any one contributor Complete Parts I and II See instructions for determining a contributor's total contributions

Special Rules

- For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33¹ 3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1 Complete Parts I and II
- For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals Complete Parts I, II, and III
- For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc , purposes, but no such contributions totaled more than \$1,000 If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc , purpose Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc , contributions totaling \$5,000 or more during the year ▶ \$ _____

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Form 990PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

Name of organization
The Buccino Foundation

Employer identification number
36-3743267

Part I
Contributors (see instructions) Use duplicate copies of Part I if additional space is needed

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	Gerald P Buccino 14483 Marsala Way Naples, FL 34109	\$ 53,574	<input checked="" type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash (Complete Part II for noncash contributions)
		\$	<input type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash (Complete Part II for noncash contributions)
		\$	<input type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash (Complete Part II for noncash contributions)
		\$	<input type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash (Complete Part II for noncash contributions)
		\$	<input type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash (Complete Part II for noncash contributions)
		\$	<input type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash (Complete Part II for noncash contributions)

Name of organization
The Buccino Foundation

Employer identification number

36-3743267

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

Name of organization
The Buccino Foundation

Employer identification number
36-3743267

Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once. See instructions.) ▶ \$ _____
Use duplicate copies of Part III if additional space is needed

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	_____	_____	_____
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4	Relationship of transferor to transferee	
	_____	_____	
	_____	_____	

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	_____	_____	_____
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4	Relationship of transferor to transferee	
	_____	_____	
	_____	_____	

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	_____	_____	_____
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4	Relationship of transferor to transferee	
	_____	_____	
	_____	_____	

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	_____	_____	_____
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4	Relationship of transferor to transferee	
	_____	_____	
	_____	_____	