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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

2018

Open to Public Inspection

For calendar year 2018, or tax year beginning 01-01-2018 , and ending 12-31-2018

Name of foundation
THE DEANNE & ARNOLD KAPLAN FOUNDATION

A Employer identification number
23-2961830

Number and street (or P O box number if mail is not delivered to street address)
13235 PALMERS CREEK TERRACE

Room/suite

B Telephone number (see instructions)
(610) 730-8551

City or town, state or province, country, and ZIP or foreign postal code
LAKEWOOD RANCH, FL 34202

C If exemption application is pending, check here ▶ ☐

G Check all that apply ☐ Initial return ☐ Initial return of a former public charity ☐ Final return ☐ Amended return ☐ Address change ☐ Name change

D 1. Foreign organizations, check here ▶ ☐
2 Foreign organizations meeting the 85% test, check here and attach computation ▶ ☐

H Check type of organization ☑ Section 501(c)(3) exempt private foundation ☐ Section 4947(a)(1) nonexempt charitable trust ☐ Other taxable private foundation

E If private foundation status was terminated under section 507(b)(1)(A), check here ▶ ☐

I Fair market value of all assets at end of year (from Part II, col (c), *line 16)* ▶$ 2,040,623

J Accounting method ☑ Cash ☐ Accrual ☐ Other (specify) _____
(Part I, column (d) must be on cash basis)

F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here ▶ ☐

Part I **Analysis of Revenue and Expenses** *(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions))*

			(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)	497,994			
	2	Check ▶ ☐ if the foundation is **not** required to attach Sch B				
	3	Interest on savings and temporary cash investments				
	4	Dividends and interest from securities	19,993	19,993		
	5a	Gross rents				
	b	Net rental income or (loss) _____				
	6a	Net gain or (loss) from sale of assets not on line 10	73,250			
	b	Gross sales price for all assets on line 6a 571,244				
	7	Capital gain net income (from Part IV, line 2)		522,987		
	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)	8,054	8,054		
	12	**Total.** Add lines 1 through 11	599,291	551,034		
Operating and Administrative Expenses	13	Compensation of officers, directors, trustees, etc	0	0		0
	14	Other employee salaries and wages				
	15	Pension plans, employee benefits				
	16a	Legal fees (attach schedule)				
	b	Accounting fees (attach schedule)	7,121	3,561		3,560
	c	Other professional fees (attach schedule)				
	17	Interest				
	18	Taxes (attach schedule) (see instructions)	16,537	16,537		0
	19	Depreciation (attach schedule) and depletion				
	20	Occupancy				
	21	Travel, conferences, and meetings				
	22	Printing and publications				
	23	Other expenses (attach schedule)	1,254	391		863
	24	**Total operating and administrative expenses.** Add lines 13 through 23	24,912	20,489		4,423
	25	Contributions, gifts, grants paid	82,445			82,445
	26	**Total expenses and disbursements.** Add lines 24 and 25	107,357	20,489		86,868
	27	Subtract line 26 from line 12				
	a	**Excess of revenue over expenses and disbursements**	491,934			
	b	**Net investment income** (if negative, enter -0-)		530,545		
	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 Savings and temporary cash investments		256,203	256,203
	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)	741,728	810,864	923,535
	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)	762,890	877,710	860,885
	14 Land, buildings, and equipment basis ▶			
	Less accumulated depreciation (attach schedule) ▶			
	15 Other assets (describe ▶)	9,186	9,295	0
	16 **Total assets** (to be completed by all filers—see the instructions Also, see page 1, item I)	1,513,804	1,954,072	2,040,623
Liabilities	17 Accounts payable and accrued expenses	21,734	21,792	
	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 ▶)	91,553	39,829	
	23 **Total liabilities**(add lines 17 through 22)	113,287	61,621	
Net Assets or Fund Balances	**Foundations that follow SFAS 117, check here ▶ ☑ and complete lines 24 through 26 and lines 30 and 31.**			
	24 Unrestricted	1,400,517	1,892,451	
	25 Temporarily restricted			
	26 Permanently restricted			
	Foundations that do not follow SFAS 117, check here ▶ ☐ and complete lines 27 through 31.			
	27 Capital stock, trust principal, or current funds			
	28 Paid-in or capital surplus, or land, bldg , and equipment fund			
	29 Retained earnings, accumulated income, endowment, or other funds			
	30 **Total net assets or fund balances** (see instructions)	1,400,517	1,892,451	
	31 **Total liabilities and net assets/fund balances** (see instructions)	1,513,804	1,954,072	

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 30 (must agree with end-of-year figure reported on prior year's return)	1	1,400,517
2	Enter amount from Part I, line 27a	2	491,934
3	Other increases not included in line 2 (itemize) ▶	3	0
4	Add lines 1, 2, and 3	4	1,892,451
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 30	6	1,892,451

Part VII-A Statements Regarding Activities (continued)

11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule See instructions.	11		No
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement See instructions	12		No
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Yes	

Website address ▶ N/A

14 The books are in care of ▶ ARNOLD H KAPLAN Telephone no ▶ (610) 730-8551

Located at ▶ 13235 PALMERS CREEK TERRACE LAKEWOOD RANCH FL ZIP+4 ▶ 34202

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

16	At any time during calendar year 2018, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country?	16		No

See the instructions for exceptions and filing requirements for FinCEN Form 114 If "Yes", enter the name of the foreign country ▶

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.

1a	During the year did the foundation (either directly or indirectly)			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? ☐ Yes ☑ No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? ☐ Yes ☑ No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? ☐ Yes ☑ No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? ☐ Yes ☑ No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? ☐ Yes ☑ No			
	(6) Agree to pay money or property to a government official? (**Exception.** Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days). ☐ Yes ☑ No			
b	If any answer is "Yes" to 1a(1)–(6), did **any** 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	1b		
	Organizations relying on a current notice regarding disaster assistance check here ▶ ☐			
c	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2018?	1c		No
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5))			
a	At the end of tax year 2018, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2018? ☐ Yes ☑ No			
	If "Yes," list the years ▶ 20____, 20____, 20____, 20____			
b	Are there any years listed in 2a for which the foundation is **not** applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to **all** years listed, answer "No" and attach statement—see instructions)	2b		
c	If the provisions of section 4942(a)(2) are being applied to **any** of the years listed in 2a, list the years here ▶ 20____, 20____, 20____, 20____			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? ☐ Yes ☑ No			
b	If "Yes," did it have excess business holdings in 2018 as a result of **(1)** any purchase by the foundation or disqualified persons after May 26, 1969, **(2)** the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or **(3)** the lapse of the 10-, 15-, or 20-year first phase holding period? *(Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2018).*	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		No
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2018?	4b		No

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required *(continued)*

			Yes	No
5a	During the year did the foundation pay or incur any amount to			
	(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?	☐ Yes ☑ No		
	(2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive?	☐ Yes ☑ No		
	(3) Provide a grant to an individual for travel, study, or other similar purposes?	☐ Yes ☑ No		
	(4) Provide a grant to an organization other than a charitable, etc , organization described in section 4945(d)(4)(A)? See instructions	☐ Yes ☑ No		
	(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?	☐ Yes ☑ No		
b	If any answer is "Yes" to 5a(1)–(5), did **any** of the transactions fail to qualify under the exceptions described in Regulations section 53 4945 or in a current notice regarding disaster assistance? See instructions	5b		
	Organizations relying on a current notice regarding disaster assistance check here ▶	☐		
c	If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?	☐ Yes ☐ No		
	If "Yes," attach the statement required by Regulations section 53 4945–5(d)			
6a	Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	☐ Yes ☑ No		
b	Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	6b		No
	If "Yes" to 6b, file Form 8870			
7a	At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?	☐ Yes ☑ No		
b	If yes, did the foundation receive any proceeds or have any net income attributable to the transaction?	7b		
8	Is the foundation subject to the section 4960 tax on payment(s) of more than $1,000,000 in remuneration or excess parachute payment during the year?	☐ Yes ☑ No		

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

1 List all officers, directors, trustees, foundation managers and their compensation. See instructions

(a) Name and address	**(b)** Title, and average hours per week devoted to position	**(c)** Compensation **(If not paid, enter -0-)**	**(d)** Contributions to employee benefit plans and deferred compensation	**(e)** Expense account, other allowances
ARNOLD KAPLAN 13235 PALMERS CREEK TERRACE LAKEWOOD RANCH, FL 34202	TRUSTEE 0 00	0	0	0
DEANNE KAPLAN 13235 PALMERS CREEK TERRACE LAKEWOOD RANCH, FL 34202	TRUSTEE 0 00	0	0	0
PAMELA RYBA 5 REBECCA ROAD WESTFORD, MA 01886	TRUSTEE 0 00	0	0	0

2 Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, enter "NONE."

(a) Name and address of each employee paid more than $50,000	**(b)** Title, and average hours per week devoted to position	**(c)** Compensation	**(d)** Contributions to employee benefit plans and deferred compensation	**(e)** Expense account, other allowances
NONE				

Total number of other employees paid over $50,000 ▶ 0

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 2018, 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) 2018	(b) 2017	(c) 2016	(d) 2015	
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))

See Additional Data Table

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 email address of the person to whom applications should be addressed

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

c Any submission deadlines

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

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 *Paid during the year* See Additional Data Table				
Total . . . . . ▶ **3a**				
b *Approved for future payment*				
Total . . . . . ▶ **3b**				

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)
1	900 SH AMETEK INC	D	2010-02-25	2018-02-27
1	500 SH AUTONATION INC	D	2010-02-25	2018-02-27
	400 SH CHEMED CORP	D	2010-02-25	2018-02-27
	200 SH CHURCHILL DOWNS INC	D	2010-02-25	2018-02-27
	300 SH CRANE CO	D	2010-02-25	2018-02-27
	540 SH DR PEPPER SNAPPLE GP	D	2010-02-25	2018-02-27
	200 SH ENERGIZER HOLDINGS INC	D	2010-02-25	2018-02-27
	900 SH FLOWSERVE CORP	D	2010-02-25	2018-02-27
	213 SH LIBERTY GLOBAL INC CLASS A	D	2010-02-25	2018-02-27
	639 SH LIBERTY GLOBAL INC CLASS C	D	2010-02-25	2018-02-27

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

(e) Gross sales price	Depreciation allowed **(f)** (or allowable)	Cost or other basis **(g)** plus expense of sale	Gain or (loss) **(h)** (e) plus (f) minus (g)
70,886		3,573	67,313
26,172		2,920	23,252
104,842		7,240	97,602
51,870		6,756	45,114
28,385		3,387	24,998
62,512		10,773	51,739
11,045		952	10,093
40,584		2,799	37,785
6,960		1,250	5,710
20,362		3,489	16,873

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			Gains (Col (h) gain minus col (k), but not less than -0-) **or** **(l)** Losses (from col (h))
(i) F M V as of 12/31/69	Adjusted basis **(j)** as of 12/31/69	Excess of col (i) **(k)** over col (j), if any	
			67,313
			23,252
			97,602
			45,114
			24,998
			51,739
			10,093
			37,785
			5,710
			16,873

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)
	5 SH LIBERTY MEDIA CORP	D	2010-02-25	2018-02-27
1	54 SH LIBERTY MEDIA CORP SERIES A	D	2010-02-25	2018-02-27
	108 SH LIBERTY MEDIA SERIES C	D	2010-02-25	2018-02-27
	500 SH MSG NETWORK INC	D	2010-02-25	2018-02-27
	166 SH MADISON SQUARE GADEN CO	D	2010-02-25	2018-02-27
	300 SH WATTS WATER TECH INC	D	2010-02-25	2018-02-27
	CAPITAL GAINS DIVIDENDS	P		

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

(e) Gross sales price	Depreciation allowed **(f)** (or allowable)	Cost or other basis **(g)** plus expense of sale	Gain or (loss) **(h)** (e) plus (f) minus (g)
115		11	104
2,284		91	2,193
4,531		170	4,361
12,625		95	12,530
40,448		266	40,182
23,592		4,485	19,107
64,031			64,031

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			Gains (Col (h) gain minus col (k), but not less than -0-) **or** **(l)** Losses (from col (h))
(i) F M V as of 12/31/69	Adjusted basis **(j)** as of 12/31/69	Excess of col (i) **(k)** over col (j), if any	
			104
			2,193
			4,361
			12,530
			40,182
			19,107
			64,031

Form 990PF Part XV Line 1a - 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).

ARNOLD KAPLAN
DEANNE KAPLAN

Form 990PF Part XV Line 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 *Paid during the year*				
ALL FAITHS FOOD BANK 8171 BLAIKIE COURT SARASOTA, FL 34240	N/A	PUBLIC CHARITIES	SUPPORT	1,000
ASOLO THEATRE5555 N TAMIAMI TRAIL SARASOTA, FL 34243	N/A	PUBLIC CHARITIES	SUPPORT	5,000
COMMUNITY FOUNDATION OF SARASOTA COUNTY INC 2635 FRUITVILLE ROAD SARASOTA, FL 34237	N/A	PUBLIC CHARITIES	SUPPORT	100
Total . . . . . ▶ **3a**				82,445

Form 990PF Part XV Line 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 *Paid during the year*				
FLORIDA STUDIO THEATRE 1241 NORTH PALM AVE SARASOTA, FL 34236	N/A	PUBLIC CHARITIES	SUPPORT	1,500
HEBREW UNION COLLEGE 1 WEST 4TH STREET NEW YORK, NY 10012	N/A	PUBLIC CHARITIES	SUPPORT	1,000
JEWISH NATIONAL FUND 42 E 69TH STREET NEW YORK, NY 10021	N/A	PUBLIC CHARITIES	SUPPORT	1,000
Total . . . . . ▶ **3a**				82,445

Form 990PF Part XV Line 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 *Paid during the year*				
JEWISH FEDERATION OF THE LEHIGH VALLEY 702 N 22ND STREET ALLENTOWN, PA 18104	N/A	PUBLIC CHARITIES	SUPPORT	1,000
MAZON10850 WILSHIRE BLVD STE 400 LOS ANGELES, CA 90024	N/A	PUBLIC CHARITIES	SUPPORT	1,000
MEALS ON WHEELS421 N LIME AVENUE SARASOTA, FL 34237	N/A	PUBLIC CHARITIES	SUPPORT	500
Total . . . . . ▶ **3a**				82,445

Form 990PF Part XV Line 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 *Paid during the year*				
NEPHCURE KIDNEY INTERNATIONAL 150 S WARNER RD 402 LKING OF PRUSSIA, PA 19406	N/A	PUBLIC CHARITIES	SUPPORT	620
SAINT JOSEPH'S PREPARATORY SCHOOL 1733 W GIRARD AVE PHILADELPHIA, PA 19130	N/A	PUBLIC CHARITIES	SUPPORT	500
SARASOTA OPERA HOUSE 61 N PINEAPPLE AVE SARASOTA, FL 34236	N/A	PUBLIC CHARITIES	SUPPORT	12,325
Total . . . . . ▶ **3a**				82,445

Form 990PF Part XV Line 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 *Paid during the year*				
SARASOTA-MANATEE JEWISH FEDERATION 580 MCINTOSH RD SARASOTA, FL 34232	N/A	PUBLIC CHARITIES	SUPPORT	400
SOUTHERN JEWISH HISTORICAL SOCIETY PO BOX 71601 MARIETTA, GA 300071601	N/A	PUBLIC CHARITIES	SUPPORT	1,000
TEMPLE EMANUEL151 MCINTOSH RD SARASOTA, FL 34232	N/A	PUBLIC CHARITIES	SUPPORT	5,000
Total . . . . . ▶ **3a**				82,445

Form 990PF Part XV Line 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 *Paid during the year*				
UNITED WAY1800 2ND STREET STE 102 SARASOTA, FL 34236	N/A	PUBLIC CHARITIES	SUPPORT	50,000
UNIVERSITY OF PENNSYLVANIA 3451 WALNUT STREET PHILADELPHIA, PA 19104	N/A	PUBLIC CHARITIES	SUPPORT	500
Total . . . . . ▶ **3a**				82,445

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TY 2018 Accounting Fees Schedule

Name: THE DEANNE & ARNOLD KAPLAN FOUNDATION

EIN: 23-2961830

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
PROFESSIONAL FEES	7,121	3,561		3,560

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491149008019

TY 2018 Investments Corporate Stock Schedule

Name: THE DEANNE & ARNOLD KAPLAN FOUNDATION

EIN: 23-2961830

Investments Corporation Stock Schedule

Name of Stock	End of Year Book Value	End of Year Fair Market Value
BP PLC	191,199	182,016
HARBOR CAPITAL APRRECIATION	415,346	561,041
IVA INTERNATIONAL	204,319	180,478

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TY 2018 Investments - Other Schedule

Name: THE DEANNE & ARNOLD KAPLAN FOUNDATION

EIN: 23-2961830

Investments Other Schedule 2

Category/ Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value
INVESTMENT IN JUDAICA	AT COST	263,307	263,307
EAGLE POINT CREDIT NON-US LP	AT COST	245,259	245,259
REF PARTNERS LP	AT COST	298,839	298,839
DUPONT	AT COST	70,305	53,480

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TY 2018 Other Assets Schedule

Name: THE DEANNE & ARNOLD KAPLAN FOUNDATION

EIN: 23-2961830

Other Assets Schedule

Description	Beginning of Year - Book Value	End of Year - Book Value	End of Year - Fair Market Value
UNREALIZED GAIN ON CONTRIBUTED STOCKS	8,987	8,987	0
DIV REC	199	308	0

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TY 2018 Other Expenses Schedule

Name: THE DEANNE & ARNOLD KAPLAN FOUNDATION

EIN: 23-2961830

Other Expenses Schedule

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
OTHER PORTFOLIO EXPENSES	96	96		0
MARGIN INT	295	295		0
OTHER FOUNDATION EXPENSES	863	0		863

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TY 2018 Other Income Schedule

Name: THE DEANNE & ARNOLD KAPLAN FOUNDATION

EIN: 23-2961830

Other Income Schedule

Description	Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income
EAGLE POINT CREDIT NON-US LP	-5,395	-5,395	-5,395
REF PARTNERS LP	13,449	13,449	13,449

TY 2018 Other Liabilities Schedule

Name: THE DEANNE & ARNOLD KAPLAN FOUNDATION

EIN: 23-2961830

Description	Beginning of Year - Book Value	End of Year - Book Value
EXCHANGE	5,852	4,366
MARGIN LOAN	85,701	0
CREDIT CARD PAYABLE	0	35,463

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TY 2018 Taxes Schedule

Name: THE DEANNE & ARNOLD KAPLAN FOUNDATION

EIN: 23-2961830

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
FEDERAL TAXES	16,537	16,537		0

efile GRAPHIC print - DO NOT PROCESS | As Filed Data - | DLN: 93491149008019

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

2018

Name of the organization
THE DEANNE & ARNOLD KAPLAN FOUNDATION

Employer identification number
23-2961830

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 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of **(1)** $5,000 or **(2)** 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1 Complete Parts I and II

☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than $1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals Complete Parts I, 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 DEANNE & ARNOLD KAPLAN FOUNDATION

Employer identification number
23-2961830

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
____	See Additional Data Table	$ ____	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contribution)

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
____		$ ____	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contribution)

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
____		$ ____	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contribution)

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
____		$ ____	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contribution)

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
____		$ ____	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contribution)

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
____		$ ____	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contribution)

Name of organization	Employer identification number
THE DEANNE & ARNOLD KAPLAN FOUNDATION	23-2961830

Part II **Noncash Property** (See instructions) Use duplicate copies of Part II if additional space is needed

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
	See Additional Data Table	$	

(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 DEANNE & ARNOLD KAPLAN FOUNDATION

Employer identification number
23-2961830

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	

Additional Data

Software ID:
Software Version:
EIN: 23-2961830
Name: THE DEANNE & ARNOLD KAPLAN FOUNDATION

Form 990 Schedule B, 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	ARNOLD AND DEANNE KAPLAN 13235 PALMERS CREEK TERRACE LAKEWOOD RANCH, FL 34202	$ 69,044	Person ☐ Payroll ☐ Noncash ☑ (Complete Part II for noncash contributions)
2	ARNOLD AND DEANNE KAPLAN 13235 PALMERS CREEK TERRACE LAKEWOOD RANCH, FL 34202	$ 25,978	Person ☐ Payroll ☐ Noncash ☑ (Complete Part II for noncash contributions)
3	ARNOLD AND DEANNE KAPLAN 13235 PALMERS CREEK TERRACE LAKEWOOD RANCH, FL 34202	$ 103,350	Person ☐ Payroll ☐ Noncash ☑ (Complete Part II for noncash contributions)
4	ARNOLD AND DEANNE KAPLAN 13235 PALMERS CREEK TERRACE LAKEWOOD RANCH, FL 34202	$ 50,605	Person ☐ Payroll ☐ Noncash ☑ (Complete Part II for noncash contributions)
5	ARNOLD AND DEANNE KAPLAN 13235 PALMERS CREEK TERRACE LAKEWOOD RANCH, FL 34202	$ 28,320	Person ☐ Payroll ☐ Noncash ☑ (Complete Part II for noncash contributions)
6	ARNOLD AND DEANNE KAPLAN 13235 PALMERS CREEK TERRACE LAKEWOOD RANCH, FL 34202	$ 62,138	Person ☐ Payroll ☐ Noncash ☑ (Complete Part II for noncash contributions)

Form 990 Schedule B, 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
7	ARNOLD AND DEANNE KAPLAN 13235 PALMERS CREEK TERRACE LAKEWOOD RANCH, FL 34202	$ 10,840	Person ☐ Payroll ☐ Noncash ☑ (Complete Part II for noncash contributions)
8	ARNOLD AND DEANNE KAPLAN 13235 PALMERS CREEK TERRACE LAKEWOOD RANCH, FL 34202	$ 39,690	Person ☐ Payroll ☐ Noncash ☑ (Complete Part II for noncash contributions)
9	ARNOLD AND DEANNE KAPLAN 13235 PALMERS CREEK TERRACE LAKEWOOD RANCH, FL 34202	$ 6,826	Person ☐ Payroll ☐ Noncash ☑ (Complete Part II for noncash contributions)
10	ARNOLD AND DEANNE KAPLAN 13235 PALMERS CREEK TERRACE LAKEWOOD RANCH, FL 34202	$ 19,924	Person ☐ Payroll ☐ Noncash ☑ (Complete Part II for noncash contributions)
11	ARNOLD AND DEANNE KAPLAN 13235 PALMERS CREEK TERRACE LAKEWOOD RANCH, FL 34202	$ 115	Person ☐ Payroll ☐ Noncash ☑ (Complete Part II for noncash contributions)
12	ARNOLD AND DEANNE KAPLAN 13235 PALMERS CREEK TERRACE LAKEWOOD RANCH, FL 34202	$ 2,260	Person ☐ Payroll ☐ Noncash ☑ (Complete Part II for noncash contributions)

Form 990 Schedule B, 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
13	ARNOLD AND DEANNE KAPLAN 13235 PALMERS CREEK TERRACE LAKEWOOD RANCH, FL 34202	$ 4,477	Person ☐ Payroll ☐ Noncash ☑ (Complete Part II for noncash contributions)
14	ARNOLD AND DEANNE KAPLAN 13235 PALMERS CREEK TERRACE LAKEWOOD RANCH, FL 34202	$ 12,463	Person ☐ Payroll ☐ Noncash ☑ (Complete Part II for noncash contributions)
15	ARNOLD AND DEANNE KAPLAN 13235 PALMERS CREEK TERRACE LAKEWOOD RANCH, FL 34202	$ 38,549	Person ☐ Payroll ☐ Noncash ☑ (Complete Part II for noncash contributions)
16	ARNOLD AND DEANNE KAPLAN 13235 PALMERS CREEK TERRACE LAKEWOOD RANCH, FL 34202	$ 23,415	Person ☐ Payroll ☐ Noncash ☑ (Complete Part II for noncash contributions)

Form 990 Schedule B, Part II - Noncash Property (see Instructions) Use duplicate copies of Part II if additional space is needed

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
1	900 SH AMETEK INC	$ 69,044	2018-02-22
2	500 SH AUTONATION INC	$ 25,978	2018-02-22
3	400 SH CHEMED CORP	$ 103,350	2018-02-22
4	200 SH CHURCHILL DOWNS	$ 50,605	2018-02-22
5	300 SH CRANE COMPANY	$ 28,320	2018-02-22
6	540 SH DR PEPPER SNAPPLE GP	$ 62,138	2018-02-22
7	200 SH ENERGIZER	$ 10,840	2018-02-22
8	900 SH FLOWSERVE	$ 39,690	2018-02-22
9	213 SH LIBERTY GLOBAL A	$ 6,826	2018-02-22
10	639 SH LIBERTY GLOBAL C	$ 19,924	2018-02-22

Form 990 Schedule B, Part II - Noncash Property (see Instructions) Use duplicate copies of Part II if additional space is needed

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
11	5 SH LIBERTY BRAVES	$ 115	2018-02-22
12	54 SH SIRIUS XM A	$ 2,260	2018-02-22
13	108 SH SIRIUS XM C	$ 4,477	2018-02-22
14	500 SH MSG NETWORK	$ 12,463	2018-02-22
15	166 SH MADISON SQUARE GARDEN	$ 38,549	2018-02-22
16	300 SH WATTS WATER TECH	$ 23,415	2018-02-22