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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

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▶ Information about Form 990-PF and its instructions is at www.irs.gov/form990pf.

OMB No 1545-0052

2014

Open to Public Inspection

For calendar year 2014, or tax year beginning 01-01-2014 , and ending 12-31-2014

Name of foundation LEEDS FAMILY FOUNDATION CO LIPSKY GOODKIN & CO		A Employer identification number 13-7219856	
Number and street (or P O box number if mail is not delivered to street address) 120 WEST 45TH ST NO 7TH FL		B Telephone number (see instructions) (212) 840-6444	
City or town, state or province, country, and ZIP or foreign postal code NEW YORK, NY 10036		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)▶\$ 20,985,115		F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/>	
J Accounting method <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____ (Part I, column (d) must be on cash basis.)			

Part I Analysis of Revenue and Expenses <small>(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions))</small>		(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)	427,550			
	2 Check <input type="checkbox"/> if the foundation is not required to attach Sch B				
	3 Interest on savings and temporary cash investments	14	14		
	4 Dividends and interest from securities.	61,567	61,567		
	5a Gross rents				
	b Net rental income or (loss) _____				
	6a Net gain or (loss) from sale of assets not on line 10	152,026			
	b Gross sales price for all assets on line 6a 753,506				
	7 Capital gain net income (from Part IV, line 2) . . .		152,026		
	8 Net short-term capital gain				
	9 Income modifications				
	10a Gross sales less returns and allowances				
Operating and Administrative Expenses	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	641,157	213,607		
	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)	4,500	2,250		2,250
	c Other professional fees (attach schedule)				
	17 Interest				
	18 Taxes (attach schedule) (see instructions) . . .				
	19 Depreciation (attach schedule) and depletion . . .				
	20 Occupancy				
	21 Travel, conferences, and meetings				
	22 Printing and publications	140	0		140
	23 Other expenses (attach schedule)	775	0		775
	24 Total operating and administrative expenses. Add lines 13 through 23	5,415	2,250		3,165
	25 Contributions, gifts, grants paid	1,487,241			1,487,241
	26 Total expenses and disbursements. Add lines 24 and 25	1,492,656	2,250		1,490,406
	27 Subtract line 26 from line 12				
	a Excess of revenue over expenses and disbursements	-851,499			
	b Net investment income (if negative, enter -0-)		211,357		
	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	1,516,427	778,311	778,311
	2	Savings and temporary cash investments	103,075	163,622	163,622
	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)	15,085	15,085	15,085
	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)	6,019 <input checked="" type="checkbox"/>	146,658	2,442,214
	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)	18,187,363 <input checked="" type="checkbox"/>	17,585,883	17,585,883
	14	Land, buildings, and equipment basis ▶ _____ Less accumulated depreciation (attach schedule) ▶ _____			
Liabilities	15	Other assets (describe ▶ _____)	<input checked="" type="checkbox"/> 0	<input checked="" type="checkbox"/> 286,911	<input checked="" type="checkbox"/> 0
	16	Total assets (to be completed by all filers—see the instructions Also, see page 1, item I)	19,827,969	18,976,470	20,985,115
	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 SFAS 117, check here ▶ <input type="checkbox"/> and complete lines 24 through 26 and lines 30 and 31.				
	24	Unrestricted			
	25	Temporarily restricted			
	26	Permanently restricted			
	Foundations that do not follow SFAS 117, check here ▶ <input checked="" type="checkbox"/> and complete lines 27 through 31.				
	27	Capital stock, trust principal, or current funds	0	0	
	28	Paid-in or capital surplus, or land, bldg , and equipment fund	20,689,594	19,827,969	
	29	Retained earnings, accumulated income, endowment, or other funds	-861,625	-851,499	
	30	Total net assets or fund balances (see instructions)	19,827,969	18,976,470	
	31	Total liabilities and net assets/fund balances (see instructions)	19,827,969	18,976,470	

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	19,827,969
2	Enter amount from Part I, line 27a	2	-851,499
3	Other increases not included in line 2 (itemize) ▶ _____	3	0
4	Add lines 1, 2, and 3	4	18,976,470
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	18,976,470

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)
1 a	601 48 SHS BUCKINGHAM RAF INTL PARTNERS	P	2012-04-30	2014-12-31
b	CITIGROUP CLASS ACTION SETTLEMENT	P		2014-09-12
c	COINSTAR CLASS ACTION SETTLEMENT	P		2014-10-02
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 750,000		601,480	148,520
b 2,382			2,382
c 1,124			1,124
d			
e			

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(I) 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			148,520
b			2,382
c			1,124
d			
e			

2	Capital gain net income or (net capital loss)	{ If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 }	2	152,026
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))
2013	1,586,557	20,481,663	0 077462
2012	1,046,591	21,879,235	0 047835
2011	994,691	23,548,042	0 042241
2010	1,050,695	21,973,956	0 047815
2009	463,388	18,624,914	0 024880

2	Total of line 1, column (d).	2	0 240233
3	Average distribution ratio for the 5-year base period—divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years	3	0 048047
4	Enter the net value of noncharitable-use assets for 2014 from Part X, line 5.	4	20,691,379
5	Multiply line 4 by line 3.	5	994,159
6	Enter 1% of net investment income (1% of Part I, line 27b).	6	2,114
7	Add lines 5 and 6.	7	996,273
8	Enter qualifying distributions from Part XII, line 4.	8	1,490,406

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 page 18 of the instructions)

1a		Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter "N/A" on line 1			
b		Domestic foundations that meet the section 4940(e) requirements in Part V, check here <input checked="" type="checkbox"/> and enter 1% of Part I, line 27b		1	2,114
c		All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b)			
2		Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)		2	0
3		Add lines 1 and 2.		3	2,114
4		Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)		4	0
5		Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-		5	2,114
6		Credits/Payments			
a		2014 estimated tax payments and 2013 overpayment credited to 2014	6a	24,889	
b		Exempt foreign organizations—tax withheld at source	6b		
c		Tax paid with application for extension of time to file (Form 8868)	6c		
d		Backup withholding erroneously withheld	6d		
7		Total credits and payments. Add lines 6a through 6d.		7	24,889
8		Enter any penalty for underpayment of estimated tax. Check here <input type="checkbox"/> if Form 2220 is attached.		8	
9		Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed		9	
10		Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid.		10	22,775
11		Enter the amount of line 10 to be Credited to 2015 estimated tax <input checked="" type="checkbox"/> 22,775 Refunded <input type="checkbox"/>		11	0

Part VII-A

Statements Regarding Activities

1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?	1a	Yes	No
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for definition)? <i>If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities.</i>	1b		No
c	Did the foundation file Form 1120-POL for this year?	1c		No
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: (1) On the foundation <input checked="" type="checkbox"/> \$ 0 (2) On foundation managers <input checked="" type="checkbox"/> \$ 0			
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers <input checked="" type="checkbox"/> \$ 0			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS? <i>If "Yes," attach a detailed description of the activities.</i>	2		No
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? <i>If "Yes," attach a conformed copy of the changes.</i>	3		No
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		No
b	If "Yes," has it filed a tax return on Form 990-T for this year?	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year? <i>If "Yes," attach the statement required by General Instruction T.</i>	5		No
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?	6	Yes	
7	Did the foundation have at least \$5,000 in assets at any time during the year? <i>If "Yes," complete Part II, col. (c), and Part XV.</i>	7	Yes	
8a	Enter the states to which the foundation reports or with which it is registered (see instructions): <input checked="" type="checkbox"/> NY			
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? <i>If "No," attach explanation.</i>	8b	Yes	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2014 or the taxable year beginning in 2014 (see instructions for Part XIV)? <i>If "Yes," complete Part XIV.</i>	9		No
10	Did any persons become substantial contributors during the tax year? <i>If "Yes," attach a schedule listing their names and addresses.</i> 	10	Yes	

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 LIPSKY GOODKIN & CO Telephone no (212) 840-6444 Located at 120 WEST 45TH STREET - 7TH FL NEW YORK NY ZIP +4 10036			
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 2014, 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	Yes	No
See instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) 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.			Yes	No
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)? Organizations relying on a current notice regarding disaster assistance check here.	1b		
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 2014?.	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 2014, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2014?. 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 2014 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 2014.).	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 2014?	4b		No

Part VII-B

Statements Regarding Activities for Which Form 4720 May Be Required (continued)

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))?		<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
(2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive?		<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
(3) Provide a grant to an individual for travel, study, or other similar purposes?		<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
(4) Provide a grant to an organization other than a charitable, etc , organization described in section 4945(d)(4)(A)? (see instructions).		<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> 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?		<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> 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.		<input checked="" type="checkbox"/>		
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?		<input type="checkbox"/> Yes	<input type="checkbox"/> 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?		<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> 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?		<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
b If yes, did the foundation receive any proceeds or have any net income attributable to the transaction?		7b		

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
LAURENCE C LEEDS JR	TRUSTEE 2 00	0	0	0
C/O LIPSKY GOODKIN - 120 W 45TH ST NEW YORK, NY 10036				
DALIA LEEDS	TRUSTEE 2 00	0	0	0
C/O LIPSKY GOODKIN - 120 W 45TH ST NEW YORK, NY 10036				
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 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	2,175,885
b	Average of monthly cash balances.	1b	943,968
c	Fair market value of all other assets (see instructions).	1c	17,886,623
d	Total (add lines 1a, b, and c).	1d	21,006,476
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	21,006,476
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see instructions).	4	315,097
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	20,691,379
6	Minimum investment return. Enter 5% of line 5.	6	1,034,569

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	1,034,569
2a	Tax on investment income for 2014 from Part VI, line 5.	2a	2,114
b	Income tax for 2014 (This does not include the tax from Part VI).	2b	
c	Add lines 2a and 2b.	2c	2,114
3	Distributable amount before adjustments Subtract line 2c from line 1.	3	1,032,455
4	Recoveries of amounts treated as qualifying distributions.	4	0
5	Add lines 3 and 4.	5	1,032,455
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	1,032,455

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	1,490,406
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	1,490,406
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	2,114
6	Adjusted qualifying distributions. Subtract line 5 from line 4.	6	1,488,292

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 2013	(c) 2013	(d) 2014
1 Distributable amount for 2014 from Part XI, line 7				1,032,455
2 Undistributed income, if any, as of the end of 2014				
a Enter amount for 2013 only.			281,531	
b Total for prior years 20____, 20____, 20____		0		
3 Excess distributions carryover, if any, to 2014				
a From 2009.				
b From 2010.				
c From 2011.				
d From 2012.				
e From 2013.				
f Total of lines 3a through e.	0			
4 Qualifying distributions for 2014 from Part XII, line 4 ▶ \$ 1,490,406				
a Applied to 2013, but not more than line 2a			281,531	
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 2014 distributable amount.				1,032,455
e Remaining amount distributed out of corpus	176,420			
5 Excess distributions carryover applied to 2014 (If an amount appears in column (d), the same amount must be shown in column (a).)	0			0
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	176,420			
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 2013 Subtract line 4a from line 2a Taxable amount—see instructions			0	
f Undistributed income for 2014 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2015				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 2009 not applied on line 5 or line 7 (see instructions). . . .	0			
9 Excess distributions carryover to 2015. Subtract lines 7 and 8 from line 6a	176,420			
10 Analysis of line 9				
a Excess from 2010. . . .				
b Excess from 2011. . . .				
c Excess from 2012. . . .				
d Excess from 2013. . . .				
e Excess from 2014. . . .	176,420			

Part XIVPrivate 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 2014, 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)

2a	Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed	Tax year	Prior 3 years			(e) Total
		(a) 2014	(b) 2013	(c) 2012	(d) 2011	
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 XVSupplementary Information (Complete this part only if the organization 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. (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d.

a

The name, address, and telephone number or e-mail address of the person to whom applications should be addressed

LAURENCE C LEEDS JR
120 W 45TH STREET - 7TH FL
NEW YORK, NY 10036
(212) 840-6444

b

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

NO FORMAL APPLICATION NECESSARY, ONLY A GENERAL LETTER OF REQUEST

c

Any submission deadlines

NONE

d

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

MUST BE A PUBLIC CHARITY AS DESCRIBED ON IRC SECTION 509 (A) (1) (2) OR (3)

Form 990-PF (2014)

Part XV

Supplementary Information (continued)

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 Paid during the year See Additional Data Table				
Total			3a	1,487,241
b Approved for future payment				
Total			3b	0

Enter gross amounts unless otherwise indicated


Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes

Form **990-PF** (2014)


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).

LAURENCE C LEEDS JR
DALIA LEEDS


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 Paid during the year				
ACE FOR THE HOMELESS 370 LENFANT PROMENADE SW WASHINGTON,DC 20447	NONE	EXEMPT	GENERAL CHARITABLE PURPOSE	10,000
ALZHEIMERS DRUG DISCOVERY FOUNDATION 57 WEST 57TH STREET 904 NEWYORK,NY 10019	NONE	EXEMPT	GENERAL CHARITABLE PURPOSE	60,875
AMERICAN FOLK ART MUSEUM 2 LINCOLN SQUARE NEWYORK,NY 10023	NONE	EXEMPT	GENERAL CHARITABLE PURPOSE	2,300
AMERICAN FRIENDS OF ISRAEL MUSEUM 500 FIFTH AVENUE SUITE 2540 NEWYORK,NY 10110	NONE	EXEMPT	GENERAL CHARITABLE PURPOSE	7,200
AMERICAN FRIENDS OF ISRAEL PHILHARMONIC ORCHESTRA 122 EAST 42ND STREET NEWYORK,NY 10168	NONE	EXEMPT	GENERAL CHARITABLE PURPOSE	15,000
AMERICAN HOSPITAL OF PARIS FOUNDATION 575 MADISON AVENUE NEWYORK,NY 10022	NONE	EXEMPT	GENERAL CHARITABLE PURPOSE	4,400
AMERICAN JEWISH COMMITTEE 165 E 56TH STREET NEWYORK,NY 10022	NONE	EXEMPT	GENERAL CHARITABLE PURPOSE	9,775
ASSOCIATION FOR FRONTOTEMPORAL DEGENERATION 290 KING OF PRUSSIA ROAD RADNOR,PA 19087	NONE	EXEMPT	GENERAL CHARITABLE PURPOSE	10,000
BACHMAN-STRAUSS DYSTONIA & PARKINSON FOUNDATION 551 5TH AVENUE 520 NEWYORK,NY 10176	NONE	EXEMPT	GENERAL CHARITABLE PURPOSE	1,090
BIRTHRIGHT ISRAEL FOUNDATION PO BOX 1784 NEWYORK,NY 10156	NONE	EXEMPT	GENERAL CHARITABLE PURPOSE	2,700
BREAST CANCER RESEARCH FOUNDATION 60 EAST 56TH STREET 8TH FL NEWYORK,NY 10022	NONE	EXEMPT	GENERAL CHARITABLE PURPOSE	7,850
CANCER RESEARCH INSTITUTE 55 BROADWAY 1802 NEWYORK,NY 10006	NONE	EXEMPT	GENERAL CHARITABLE PURPOSE	5,150
CASA COLUMBIA 633 3RD AVENUE 19TH FL NEWYORK,NY 10017	NONE	EXEMPT	GENERAL CHARITABLE PURPOSE	750
CHALLENGED ATHLETES FOUNDATION 9591 WAPLES STREET SAN DIEGO,CA 92121	NONE	EXEMPT	GENERAL CHARITABLE PURPOSE	10,000
CHRISTIANS FOR FAIR WITNESS IN THE MIDDLE EAST 475 RIVERSIDE DRIVE 1960 NEWYORK,NY 10115	NONE	EXEMPT	GENERAL CHARITABLE PURPOSE	1,000
Total  3a				1,487,241


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 Paid during the year				
CITY PARKS FOUNDATION 830 5TH AVENUE NEWYORK,NY 10021	NONE	EXEMPT	GENERAL CHARITABLE PURPOSE	2,000
COMMITTEE TO REDUCE INFECTIOUS DEATHS 5 PARTRIDGE HOLLOW ROAD GREENWICH,CT 06831	NONE	EXEMPT	GENERAL CHARITABLE PURPOSE	250
CROHN'S & COLITIS FOUNDATION OF AMERICA 386 PARK AVE SOUTH 17TH FL NEWYORK,NY 10016	NONE	EXEMPT	GENERAL CHARITABLE PURPOSE	500
DARE AMERICA PO BOX 512090 LOS ANGELES,CA 90051	NONE	EXEMPT	GENERAL CHARITABLE PURPOSE	500
EDUCATIONSUPERHIGHWAY 101 CALIFORNIA STREET 4100 SAN FRANCISCO,CA 94111	NONE	EXEMPT	GENERAL CHARITABLE PURPOSE	50,000
EL MUSEO DEL BARRIO 1230 5TH AVENUE NEWYORK,NY 10029	NONE	EXEMPT	GENERAL CHARITABLE PURPOSE	5,000
ELIE WIESEL FOUNDATION FOR HUMANITY 555 MADISON AVENUE NEWYORK,NY 10022	NONE	EXEMPT	GENERAL CHARITABLE PURPOSE	7,300
FILM SOCIETY OF LINCOLN CENTER 70 LINCOLN CENTER PLAZA NEWYORK,NY 10023	NONE	EXEMPT	GENERAL CHARITABLE PURPOSE	3,975
FIT FOUNDATION 227 WEST 27TH STREET NEWYORK,NY 10001	NONE	EXEMPT	GENERAL CHARITABLE PURPOSE	100,000
FOUNTAIN HOUSE 425 WEST 47TH STREET NEWYORK,NY 10036	NONE	EXEMPT	GENERAL CHARITABLE PURPOSE	1,780
FRIENDS OF JAMAICA 1697 BROADWAY SUITE 502 NEWYORK,NY 10019	NONE	EXEMPT	GENERAL CHARITABLE PURPOSE	1,000
HARLEM CHILDREN'S ZONE 35 EAST 125TH STREET NEWYORK,NY 10035	NONE	EXEMPT	GENERAL CHARITABLE PURPOSE	2,272
HELP USA 5 HANOVER SQUARE 17TH FL NEWYORK,NY 10004	NONE	EXEMPT	GENERAL CHARITABLE PURPOSE	5,000
HUDSON INSTITUTE 1015 15TH STREET NW WASHINGTON,DC 20005	NONE	EXEMPT	GENERAL CHARITABLE PURPOSE	50,000
HYPERTENSION EDUCATION FOUNDATION BOX 651 SCARSDLE,NY 10583	NONE	EXEMPT	GENERAL CHARITABLE PURPOSE	1,000
Total  3a				1,487,241

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 Paid during the year				
JUMPSTART 919 18TH STREET NW SUITE 300 WASHINGTON,DC 20006	NONE	EXEMPT	GENERAL CHARITABLE PURPOSE	250
LEAVE OUT VIOLENCE 32 WEST 28TH ST 3RD FLOOR NEW YORK,NY 10001	NONE	EXEMPT	GENERAL CHARITABLE PURPOSE	350
LINCOLN CENTER FOR THE PERFORMING ARTS 132 WEST 65TH STREET NEW YORK,NY 10023	NONE	EXEMPT	GENERAL CHARITABLE PURPOSE	16,800
LINCOLN CENTER THEATRE 150 WEST 65TH STREET NEW YORK,NY 10023	NONE	EXEMPT	GENERAL CHARITABLE PURPOSE	6,643
LYME RESEARCH ALLIANCE 2001 WEST MAIN ST SUITE 280 STAMFORD,CT 06902	NONE	EXEMPT	GENERAL CHARITABLE PURPOSE	1,000
MANHATTAN THEATRE CLUB 311 W 43RD STREET 8TH FL NEW YORK,NY 10036	NONE	EXEMPT	GENERAL CHARITABLE PURPOSE	4,070
METROPOLITAN MUSEUM OF ART 1000 FIFTH AVENUE NEW YORK,NY 10028	NONE	EXEMPT	GENERAL CHARITABLE PURPOSE	510
MUSEUM AT ELDRIDGE STREET 12 ELDRIDGE STREET NEW YORK,NY 10002	NONE	EXEMPT	GENERAL CHARITABLE PURPOSE	1,634
MUSEUM OF MODERN ART 11 W 53RD STREET NEW YORK,NY 10019	NONE	EXEMPT	GENERAL CHARITABLE PURPOSE	5,282
NATIONAL DANCE INSTITUTE 217 W 147TH STREET NEW YORK,NY 10039	NONE	EXEMPT	GENERAL CHARITABLE PURPOSE	5,750
NATIONAL MARFAN FOUNDATION 22 MANHASSET AVENUE PORT WASHINGTON,NY 11050	NONE	EXEMPT	GENERAL CHARITABLE PURPOSE	1,000
NATIONAL MUSEUM OF AMERICAN JEWISH HISTORY 101 SOUTH INDEPENDENCE MALL EAST PHILADELPHIA,PA 19106	NONE	EXEMPT	GENERAL CHARITABLE PURPOSE	1,000
NEW YORK HISTORICAL SOCIETY 170 CENTRAL PARK WEST NEW YORK,NY 10024	NONE	EXEMPT	GENERAL CHARITABLE PURPOSE	8,950
NEW YORK JUNIOR TENNIS & LEARNING 58-12 QUEENS BLVD WOODSIDE,NY 11377	NONE	EXEMPT	GENERAL CHARITABLE PURPOSE	4,715
NEW YORK JUNIOR TENNIS LEAGUE 58-12 QUEENS BLVD WOODSIDE,NY 11377	NONE	EXEMPT	GENERAL CHARITABLE PURPOSE	220,200
Total  3a				1,487,241

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 Paid during the year				
NEW YORK LANDMARKS CONSERVANCY 1 WHITEHALL STREET NEW YORK,NY 10004	NONE	EXEMPT	GENERAL CHARITABLE PURPOSE	9,600
NEW YORK PHILHARMONIC 10 LINCOLN CENTER PLAZA NEW YORK,NY 10023	NONE	EXEMPT	GENERAL CHARITABLE PURPOSE	6,600
NEW YORK POLICE & FIRE WIDOWS & CHILDRENS BENEFIT FUND 767 5TH AVENUE ROOM 2654-S1 NEW YORK,NY 10153	NONE	EXEMPT	GENERAL CHARITABLE PURPOSE	4,650
NEW YORK UNIVERSITY 70 WASHINGTON SQUARE SOUTH NEW YORK,NY 10012	NONE	EXEMPT	GENERAL CHARITABLE PURPOSE	300,000
NO LABELS FOUNDATION PO BOX 25429 WASHINGTON,DC 20027	NONE	EXEMPT	GENERAL CHARITABLE PURPOSE	10,000
NORTHSIDE CENTER FOR CHILD DEVELOPMENT 1301 5TH AVENUE NEW YORK,NY 10029	NONE	EXEMPT	GENERAL CHARITABLE PURPOSE	1,300
PERLMAN MUSIC PROGRAM 19 WEST 69TH STREET 304 NEW YORK,NY 10023	NONE	EXEMPT	GENERAL CHARITABLE PURPOSE	1,800
PHOENIX HOUSE 57467 WATERWORKS STREET CALUMET,MI 49913	NONE	EXEMPT	GENERAL CHARITABLE PURPOSE	50,000
PIN DOWN BLADDER CANCER 885 3RD AVENUE SUITE 2620 NEW YORK,NY 10022	NONE	EXEMPT	GENERAL CHARITABLE PURPOSE	11,000
PREP FOR PREP 328 WEST 71ST STREET NEW YORK,NY 10023	NONE	EXEMPT	GENERAL CHARITABLE PURPOSE	60,000
PROSTATE CANCER FOUNDATION 1250 FOURTH STREET SANTA MONICA,CA 90401	NONE	EXEMPT	GENERAL CHARITABLE PURPOSE	100,000
ROBIN HOOD FOUNDATION 826 BROADWAY 9TH FLOOR NEW YORK,NY 10003	NONE	EXEMPT	GENERAL CHARITABLE PURPOSE	4,750
SHATTERPROOF 101 MERRITT 1ST FLOOR NORWALK,CT 06851	NONE	EXEMPT	GENERAL CHARITABLE PURPOSE	1,000
THE BROTHERHOOD SYNAGOGUE 28 GRAMERCY PARK SOUTH NEW YORK,NY 10003	NONE	EXEMPT	GENERAL CHARITABLE PURPOSE	6,950
THE JEWISH MUSEUM 1109 5TH AVENUE NEW YORK,NY 10128	NONE	EXEMPT	GENERAL CHARITABLE PURPOSE	5,020
Total  3a				1,487,241

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 LAWRENCEVILLE SCHOOL 2500 MAIN STREET LAWRENCEVILLE,NJ 08648	NONE	EXEMPT	GENERAL CHARITABLE PURPOSE	2,500
THIRTEEN 825 8TH AVENUE NEW YORK,NY 10019	NONE	EXEMPT	GENERAL CHARITABLE PURPOSE	300
TURN OF RIVER FIRE DEPARTMENT 268 TURN OF RIVER ROAD STAMFORD,CT 06905	NONE	EXEMPT	GENERAL CHARITABLE PURPOSE	100
UJA FEDERATION OF NEW YORK 130 EAST 59TH STREET NEW YORK,NY 10022	NONE	EXEMPT	GENERAL CHARITABLE PURPOSE	51,375
WORLD JEWISH CONGRESS 501 MADISON AVENUE NEW YORK,NY 10022	NONE	EXEMPT	GENERAL CHARITABLE PURPOSE	1,400
YALE UNIVERSITY CLASS OF 1950 S ROWE-7920 ANNESDALE DRIVE CINCINNATI,OH 45243	NONE	EXEMPT	GENERAL CHARITABLE PURPOSE	75
YALE UNIVERSITY 157 CHURCH STREET NEW HAVEN,CT 06510	NONE	EXEMPT	GENERAL CHARITABLE PURPOSE	202,000
Total			3a	1,487,241

TY 2014 Accounting Fees Schedule

Name: LEEDS FAMILY FOUNDATION CO LIPSKY GOODKIN & CO

EIN: 13-7219856

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
ACCOUNTING	4,500	2,250		2,250

TY 2014 Investments Corporate Stock Schedule

Name: LEEDS FAMILY FOUNDATION CO LIPSKY GOODKIN & CO

EIN: 13-7219856

Name of Stock	End of Year Book Value	End of Year Fair Market Value
CORPORATE STOCK	146,658	2,442,214

TY 2014 Investments - Other Schedule

Name: LEEDS FAMILY FOUNDATION CO LIPSKY GOODKIN & CO

EIN: 13-7219856

Category/ Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value
BUCKINGHAM INTL PARTNERS	FMV	6,540,939	6,540,939
BUCKINGHAM RAF INTL PARTNERS	FMV	11,044,944	11,044,944

TY 2014 Other Assets Schedule

Name: LEEDS FAMILY FOUNDATION CO LIPSKY GOODKIN & CO

EIN: 13-7219856

Description	Beginning of Year - Book Value	End of Year - Book Value	End of Year - Fair Market Value
UNREALIZED GAIN ON DONATED STOCK - CANTEL	0	286,911	0

TY 2014 Other Expenses Schedule

Name: LEEDS FAMILY FOUNDATION CO LIPSKY GOODKIN & CO

EIN: 13-7219856

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
NYS FILING FEE	775	0		775

TY 2014 Substantial Contributors Schedule

Name: LEEDS FAMILY FOUNDATION CO LIPSKY GOODKIN & CO

EIN: 13-7219856

Name	Address
LAURENCE C LEEDS JR	C/O LIPSKY GOODKIN 120 W 45 ST NEW YORK, NY 10036

<div>Schedule B</div> <div>(Form 990, 990-EZ, or 990-PF)</div> <div>Department of the Treasury Internal Revenue Service</div>	<div>Schedule of Contributors</div> <div>▶ Attach to Form 990, 990-EZ, or 990-PF.</div> <div>▶ Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at <u>www.irs.gov/form990</u>.</div>	<div>OMB No 1545-0047</div> <div>2014</div>
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<div>Name of the organization</div> <div>LEEDS FAMILY FOUNDATION CO LIPSKY GOODKIN & CO</div>	<div>Employer identification number</div> <div>13-7219856</div>
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Organization type (check one)

<div>Filers of:</div> <div>Form 990 or 990-EZ</div> <div>Form 990-PF</div>	<div>Section:</div> <div><div><input type="checkbox"/> 501(c)() (enter number) organization</div><div><input type="checkbox"/> 4947(a)(1) nonexempt charitable trust not treated as a private foundation</div><div><input type="checkbox"/> 527 political organization</div><div><input checked="" type="checkbox"/> 501(c)(3) exempt private foundation</div><div><input type="checkbox"/> 4947(a)(1) nonexempt charitable trust treated as a private foundation</div><div><input type="checkbox"/> 501(c)(3) taxable private foundation</div></div>
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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 Do not 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 is not covered by the General Rule and/or the Special Rules does not 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 does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

Employer identification number
13-7219856

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	LAURENCE C LEEDS JR C/O LIPSKY GOODKIN - 120 W 45TH ST NEW YORK, NY 10036	\$ 427,550	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)

Employer identification number
13-7219856

Part II

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
<u> 1 </u>	10,000 SHS CANTEL MEDICAL CORP	\$ <u>427,550</u>	<u>2014-11-12</u>
(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
<u> </u>	_____	_____ \$	_____

(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
<u> </u>	_____	_____ \$	_____

Name of organization LEEDS FAMILY FOUNDATION CO LIPSKY GOODKIN & CO	Employer identification number 13-7219856
------------------------------------------------------------------------	----------------------------------------------

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	
_____		_____	
_____		_____	
_____		_____	