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

Department of the Treasury Internal Revenue

▶ Do not enter social security numbers on this form as it may be made public.
 ▶ Information about Form 990-PF and its instructions is at <u>www.irs.gov/form990pf</u>.

2014

Serv	ice	Cremac					Inspection
For	cale	ndar year 2014, or tax year beginning 0:	1-01-2014	, a	nd ending 1	.2-31-2014	
		undation			A Employer Id	entification numb	er
IC	Hessed	Foundation			27-6354369		
Num	ber and	d street (or P O box number if mail is not delivered to street addr	ess) Room/suite		<b>B</b> Telephone nu	ımber (see ınstructio	ns)
CC	) Intima	teco 149 Madison Ave					
City	or town	n, state or province, country, and ZIP or foreign postal code			C If exemption	application is pendin	g, check here 🕨
		NY 10016					Γ
<b>G</b> C1	neck a		f a former public charit	v	D 1. Foreign o	rganizations, check h	ere <b>b</b>
		Final return	rn	•		· · · · · · · · · · · · · · · · · · ·	Г
		Address change Name change				rganizations meeting ik here and attach co	
<b>H</b> C h	neck ty	ype of organization  ✓Section 501(c)(3) exempt pr	ıvate foundatıon		<b>E</b> If private fo	undation status was in 507(b)(1)(A), chec	terminated
S	ection	1 4947(a)(1) nonexempt charitable trust Other ta			I under seemo	11 307 (B)(1)(A), GIC	►
		ket value of all assets at end  J Accounting method	•	rual		ation is in a 60-mont n 507(b)(1)(B), chec	
		from Part II, col (c), ☐ Other (specify)  \$ 75,059	ust be on cash basis )		under sectio	11 307(b)(1)(b), cliet	.k liele ▶
Pa	rt I	Analysis of Revenue and Expenses (The	1 ()	I	_		(d) Disbursements
		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) i	Net investment income	(c) Adjusted net income	for charitable purposes (cash basis only)
	1	Contributions, gifts, grants, etc , received (attach					
		schedule)	135,000				
	2	Check ► ☐ If the foundation is <b>not</b> required to					
		attach					
	3	Sch B					
	4	Dividends and interest from securities					
	_						
	5a	Gross rents	•				
χĘ	6a	Net gain or (loss) from sale of assets not on line 10					
Revenue	Ь	Gross sales price for all assets on line 6a	-				
æ							
	7	Capital gain net income (from Part IV, line 2)	•				
	8   9	Net short-term capital gain	-				
	10a	1	•				
		Gross sales less returns and allowances					
	b	Less Cost of goods sold					
	c	Gross profit or (loss) (attach schedule)					
	11	Other income (attach schedule)			0		
	12	Compensation of officers, directors, trustees, etc	. 133,000				
	14	Other employee salaries and wages					
Ş	15	Pension plans, employee benefits					
Expenses	16a	Legal fees (attach schedule)					
×	ь	Accounting fees (attach schedule)	-				
	c	Other professional fees (attach schedule)	•				
ativ	17	Interest	•				
Administrative	18 19	Taxes (attach schedule) (see instructions) Depreciation (attach schedule) and depletion	1 -				
Ē	20	Occupancy					
Adı	21	Travel, conferences, and meetings					
pu	22	Printing and publications					
g g	23	Other expenses (attach schedule)	. 🕦 228				228
atın	24	Total operating and administrative expenses.			_		
Operating and		Add lines 13 through 23			0		228
ŏ	25	Contributions, gifts, grants paid	93,699				93,699
	26	Total expenses and disbursements. Add lines 24 and					
	27	25 Subtract line 26 from line 12	93,927		0		93,927
	27   a	Excess of revenue over expenses and disbursements	41,073				
	b	Net investment income (if negative, enter -0-)	ŕ		0		
	c	Adjusted net income (if negative, enter -0-)				0	

Pa	rt II	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)	(a) Book Value	(b) Book Value	
	1	Cash—non-interest-bearing	33,986	75,059	(c) Fair Market Value 75,059
	_	<u>.</u>	,	,	,
	2	Savings and temporary cash investments			
	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 ▶			
2	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			
As	10a	Investments—U S and state government obligations (attach schedule)			
	ь	Investments—corporate stock (attach schedule)			
	С	Investments—corporate bonds (attach schedule)			
		· · · · · · · -			
	11	Investments—land, buildings, and equipment basis ▶			
		Less accumulated depreciation (attach schedule) ▶			
	12	Investments—mortgage loans			
	13	Investments—other (attach schedule)			
	14	Land, buildings, and equipment basis ▶			
		Less accumulated depreciation (attach schedule) ▶			
	15	Other assets (describe)			
	16	<b>Total assets</b> (to be completed by all filers—see the			
		Instructions Also, see page 1, item I)	33,986	75,059	75,059
	17	Accounts payable and accrued expenses			
J.	18	Grants payable			
tie	19	Deferred revenue			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
Πa	21	Mortgages and other notes payable (attach schedule)			
	22	Other liabilities (describe ►)			
	23	Total liabilities (add lines 17 through 22)	0	0	
S		Foundations that follow SFAS 117, check here			
Balances		and complete lines 24 through 26 and lines 30 and 31.			
la Ia	24	Unrestricted			
8	25	Temporarily restricted			
7	26	Permanently restricted			
Fund		Foundations that do not follow SFAS 117, check here ▶			
ŏ		and complete lines 27 through 31.			
	27	Capital stock, trust principal, or current funds			
Se	28	Paid-in or capital surplus, or land, bldg , and equipment fund			
Ř	29	Retained earnings, accumulated income, endowment, or other funds	33,986	75,059	
Net Assets	30	Total net assets or fund balances (see instructions)	33,986	75,059	
	31	Total liabilities and net assets/fund balances (see instructions)	33,986	75,059	
Pa	rt II	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 agr	ee	
		with end-of-year figure reported on prior year's return)		1	33,986
2		Enter amount from Part I, line 27a		2	41,073
3		Other increases not included in line 2 (itemize)		_ 3	
4		Add lines 1, 2, and 3			75,059
5		Decreases not included in line 2 (itemize) ▶		_ 5	
6		Total net assets or fund balances at end of year (line 4 minus line 5)—Pa	art II, column (b), lın	e 30 . <b>6</b>	75,059

Part 1	V Capital Gains	and Losses for Tax on Inv	estment Incom	e		
		the kınd(s) of property sold (e g , nouse, or common stock, 200 shs		(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr )	(d) Date sold (mo , day, yr )
1a						
(e	) Gross sales price	<b>(f)</b> Depreciation allow (or allowable)		st or other basis xpense of sale		or (loss) ) mınus (g)
а						
b						
С						
d						
е						
Со	mplete only for assets s	showing gain in column (h) and owr	ned by the foundatio	on on 12/31/69	(I) Gains (Col	(h) gain minus
(i)	FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	, , ,	cess of col (1) col (j), if any	col (k), but not	less than -0-) <b>or</b> om col (h))
a						
b						
С						
d						
е					1	
		ı	If gain, also ente	r ın Part I, lıne 7	1	
2	Capital gain net inco	me or (net capital loss)	If (loss), enter -0		2	
3	Net short-term capit	al gain or (loss) as defined in secti	ions 1222(5) and (6	5)		
	If gain, also enter in l in Part I, line 8 .	Part I, line 8, column (c) (see insti	ructions) If(loss),	enter -0 -	3	
Part	V Qualification I	Under Section 4940(e) for	Reduced Tax or	n Net Investme	nt Income	
		private foundations subject to the :				
	on 4940(d)(2) applies,		500000 4540(a) tax	Con het mvestment	income j	
		ne section 4942 tax on the distribu	utable amount of any	vear in the base be	eriod?	┌ Yes ┌ No
If"Yes,	" the foundation does n	ot qualify under section 4940(e) [	Do not complete this	s part		
<b>1</b> En	ter the appropriate amo	ount in each column for each year,	see instructions bef	fore making any enti	1es	
	(a) period years Calendar or tax year beginning in)	<b>(b)</b> Adjusted qualifying distributions	(c Net value of noncha		<b>(d)</b> Distribution (col (b) divided	n ratio
	2013					
	2012					
	2011					
	2010					
	2009					
2	•	nn (d)		<u> </u>	2	
3	the number of years t	ratio for the 5-year base period—c the foundation has been in existen	ce if less than 5 yea	ars	3	
4	Enter the net value o	f noncharitable-use assets for 201	14 from Part X, line	5	4	
5	Multiply line 4 by line	e 3			5	0
6		stment income (1% of Part I, line			6	
7	Add lines 5 and 6				7	0
8		ributions from Part XII, line 4.			8	
J	, , ,	r greater than line 7, check the box			-	rate See

8a Enter the states to which the foundation reports or with which it is registered (see instructions)

If "Yes," complete Part XIV

and addresses

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

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?

No

3b 4a

4b

_								
	n 990-PF (2014) rt VII-B Statements Rega	rding Activities fo	- \A/F	ich Form 4720	May	Po Poquirod (cont	inuad)	Page
		rding Activities fo		iicii Foriii 4720	мау і	se kequirea (conti	iliueu)	
5a	During the year did the foundation			iclation (costion 40)	4 E (	. – –	_	
	(1) Carry on propaganda, or other	·	_	•		1 163 14	/ No	
	(2) Influence the outcome of any		,	,,	carry			
	on, directly or indirectly, any	voter registration drive	?			· · · · · Tyes No	<b>▽</b>	
	(3) Provide a grant to an individua	al for travel, study, or o	thers	ımılar purposes?		☐ Yes ☐	7 No	
	(4) Provide a grant to an organiza	ition other than a charit	able,	etc , organization des	scribe	d		
	in section 4945(d)(4)(A)? (se	ee instructions)				· · · · · TYes	<b>▽</b>	
	(5) Provide for any purpose other	than religious, charitah	ole, sc	ientific literary or		110	1	1 1
	educational purposes, or for the					· · · · · T Yes	<b>▽</b>	
b	If any answer is "Yes" to 5a(1)-(	5), did <b>anv</b> of the transa	action	s fail to qualify under	r the e		1	1 1
_	Regulations section 53 4945 or i	-					5b	
	Organizations relying on a curren	t notice regarding disas	ter as	sistance check here	e		_	
_	T5.6	- F - (4)		la		I	1	1 1
С	If the answer is "Yes" to question	* **		"		<u>_</u>	_	
	tax because it maintained expend	ilture responsibility for	tne gr	antz		···· Yes No		
	If "Yes," attach the statement requi	ired by Regulations secti	on 53	4945-5(d)			1	
<b>6</b> a	Did the foundation, during the yea	, ,		. ,	premii	ums on		
	a personal benefit contract?	•	•			··· TYes	- No	
h	Did the foundation, during the yea				nal he		. 6ь	No
	If "Yes" to 6b, file Form 8870	ir, pay premianis, uncer	.19 01 1	nuncetry, on a perso	mai be	nent contract	.   05	100
7-	·	use the foundation a nam	+ +	nrobibited tay abolt	tor tra	nanation? — —	_	
7a	At any time during the tax year, w	·	•	•		1 103 14	i	
b	If yes, did the foundation receive							<u> </u>
Pa	Information About	t Officers, Director	rs, Ti	rustees, Founda	tion	Managers, Highly	Paid Em	ployees,
1	List all officers, directors, trustees	s. foundation managers	and t	heir compensation (s	see ins	tructions).		
	,	(b) Title, and average		c) Compensation		I) Contributions to		
	(a) Name and address	hours per week	-	If not paid, enter		oloyee benefit plans		se account, Iowances
		devoted to position	-	-0-)	and d	eferred compensation		
Eli Le	·	Director 0 00		0		0		
	Intimateco 149 Madison Ave York,NY 10016							
	Compensation of five highest-paid	l employees (other than	thos	e included on line 1—	see in	structions). If none, en	ter "NONE.	"
	<u> </u>					(d) Contributions to		
(a)	Name and address of each employ	ee (b) Title, and ave		(c) Compensatio	n	employee benefit		se account,
	paid more than \$50,000	devoted to posit		(4, 5 5		plans and deferred compensation	other al	lowances
NON	JF					compensation		
	. –							
					+			
		<del></del>		1				

**Total** number of other employees paid over \$50,000. . . . . . . . .

D- 1 V/TTT	Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees,	
Part VIII	and Contractors (continued)	
·	·	_

3 Five highest-paid independent contractors for professional services (s		
(a) Name and address of each person paid more than \$50,000	<b>(b)</b> Type of service	(c) Compensation
NONE		
<b>Total</b> number of others receiving over \$50,000 for professional services.		<b>•</b>
Part IV A Commonword Direct Charitable Activities		
Part IX-A Summary of Direct Charitable Activities		
ust the foundation's four largest direct charitable activities during the tax year. Include relever programizations and other beneficiaries served, conferences convened, research papers produ		of Expenses
1 Make donations for charitable educational and religious purposes	seu, etc	93,699
2		33,633
3	·	
Post IV D. Cummons of Drogues Poloted Investments (c		
Part IX-B Summary of Program-Related Investments (s  Describe the two largest program-related investments made by the foundation during the		A mount
1NA	e tax year on lines I and 2	Ainodit
		-
2		
All other program-related investments See instructions		
3		
Total. Add lines 1 through 3		<b>&gt;</b>
		·

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

93,927

5

	alt Alli Olidisti ibuted Tilcollie (see ilisti	uctions)			
		(a) Corpus	(b) Years prior to 2013	(c) 2013	(d) 2014
	Distributable amount for 2014 from Part XI, line 7	Сограз	rears prior to 2015	2013	2014
	Undistributed income, if any, as of the end of 2014				
	Enter amount for 2013 only				
	Total for prior years 20				
	Excess distributions carryover, if any, to 2014				
a					
	From 2010				
	From 2011				
	From 2012				
	From 2013				
	<b>Total</b> of lines 3a through e				
4	Qualifying distributions for 2014 from Part				
	XII, line 4  \$ 93,927				
	Applied to 2013, but not more than line 2a				
b	Applied to undistributed income of prior years (Election required—see instructions)				
c	Treated as distributions out of corpus (Election				
	required—see				
ns	tructions)				
d	Applied to 2014 distributable amount				
е	Remaining amount distributed out of corpus	93,927			
5	Excess distributions carryover applied to 2014				
	(If an amount appears in column (d), the				
_	same amount must be shown in column (a) )  Enter the net total of each column as				
U	indicated below:				
а	Corpus Add lines 3f, 4c, and 4e Subtract line 5	93,927			
	Prior years' undistributed income Subtract				
_	line 4b from line 2b				
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				
d	Subtract line 6c from line 6b Taxable amount —see instructions				
	Undistributed income for 2013 Subtract line				
_	4a from line 2a Taxable amount—see				
	instructions				
f	Undistributed income for 2014 Subtract				
	lines 4d and 5 from line 1 This amount must				
	be distributed in 2015				
7	A mounts 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)				
8	Excess distributions carryover from 2009 not				
٠	applied on line 5 or line 7 (see instructions)				
9	Excess distributions carryover to 2015.				
	Subtract lines 7 and 8 from line 6a	93,927			
10	Analysis of line 9				
а	Excess from 2010				
b	Excess from 2011				
c	Excess from 2012				
d	Excess from 2013				
е	Excess from 2014 93,927				

	m 990-PF (2014)					Page <b>10</b>
	Part XIV Private Operating Foun	,			n 9)	
La	If the foundation has received a ruling or do foundation, and the ruling is effective for 20					
<b>&gt;</b>	Touridation, and the running is effective for 20	714, chief the date	ortheraning			
h	Check box to indicate whether the organiza	otion is a private one	arating foundation	described in sectio	n 🔽 4942(1)(3) o	r
2a	Enter the lesser of the adjusted net		eracing loundation		T	1   4942()/(3)
<b>2</b> a	income from Part I or the minimum	Tax year		Prior 3 years		(e) Total
	investment return from Part X for each	(a) 2014	<b>(b)</b> 2013	(c) 2012	(d) 2011	
	year listed	0				(
	85% of line 2a					
С	Qualifying distributions from Part XII,	93,927		70,138	97,231	261,296
a	line 4 for each year listed			,	,	
u	directly for active conduct of exempt					
	activities					
е	Qualifying distributions made directly					
	for active conduct of exempt activities	93,927		70,138	97,231	261,296
_	Subtract line 2d from line 2c	93,327		70,136	37,231	201,230
3	Complete 3a, b, or c for the alternative test relied upon					
a	"Assets" alternative test—enter					
u	(1) Value of all assets		33,986	28,253	68,365	130,604
	(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					
С	"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					
Pā	rt XV Supplementary Informatio			the organizatio	on had \$5,000 c	or more in
	assets at any time during		nstructions.)			
L a	Information Regarding Foundation Manage List any managers of the foundation who ha		than 2% of the to	ntal contributions re	ceived by the found	dation
•	before the close of any tax year (but only if					3461011
	, , , , ,	•		, ,		
b	List any managers of the foundation who ov		•	, ,	y large portion of th	ne
	ownership of a partnership or other entity)	of which the foundat	ion has a 10% or o	greater interest		
	Information Regarding Contribution, Grant	Gift Loan Scholar	shin etc Drogram	ne:		
_						
	Check here ►  if the foundation only make unsolicited requests for funds. If the foundation					
	other conditions, complete items 2a, b, c, a		iants, etc. (see ins	tructions) to maivi	duals of organizatio	iis uiiuei
_	. The name address and talanhana number	or amail address of	the nevern to who		uld be addressed	
a	The name, address, and telephone number	or email address of	the person to who	пі аррпсацопь впо	uid be addressed	
b	The form in which applications should be s	ubmitted and inform	ation and material	s they should inclu	de	
c	Any submission deadlines					
ام	Any restrictions or limitations on awards,	such as by deparant	nical areas charits	hle fields kinds of	institutions or othe	ar .
u	factors	sasii as by geograpi	areas, charite	isie nerus, kinus Of	strations, or other	••

Form 990-PF (2014)				Page <b>11</b>
Part XV Supplementary Inform	nation (continued)	royad for E	utura Baymant	
3 Grants and Contributions Paid	If recipient is an individual,		uture Payment	
Recipient	show any relationship to any foundation manager	Foundation status of recipient	Purpose of grant or contribution	A mount
Name and address (home or business)	or substantial contributor	тестрієні		
a Paid during the year See Additional Data Table				
Total	<u> </u>		3a	93,699
b Approved for future payment				
Total		<u> </u>		0
				Form <b>990-PF</b> (2014)

	s amounts unless otherwise indicated	Unrelated b	usiness income	Excluded by section	512, 513, or 514	(e)
<b>1</b> Progran	n service revenue	(a) Business code	<b>(b)</b> A mount	(c) Exclusion code	<b>(d)</b> A mount	Related or exempt function income (See instructions)
а						mstractions )
g Fees 2 Membe	and contracts from government agencies rship dues and assessments					
invest	st on savings and temporary cash ments					
<b>5</b> Net rer	nds and interest from securities					
	financed property ebt-financed property					
6 Net ren	ntal income or (loss) from personal					
8 Gain o	nvestment income r (loss) from sales of assets other than					
	ory					
	profit or (loss) from sales of inventory					
	evenue <b>a</b>					
	1 4 1 1 1 (1) (1)					
3 Total. /	at Add columns (b), (d), and (e). Add line 12, columns (b), (d), and (e). Jorksheet in line 13 instructions to verify c	· · · · ·		1	.3	
	I-B Relationship of Activities to			xempt Purpos	es	
					ontributed importa	antly to
Line No. ▼	Explain below how each activity for which the accomplishment of the foundation's instructions )			providing funds for	such purposes)	(See
	Explain below how each activity for which the accomplishment of the foundation's			providing funds for	such purposes)	(See
	Explain below how each activity for which the accomplishment of the foundation's			providing funds for	such purposes)	(See
	Explain below how each activity for which the accomplishment of the foundation's			providing funds for	such purposes)	(See
	Explain below how each activity for which the accomplishment of the foundation's			providing funds for	such purposes)	(See
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	Explain below how each activity for which the accomplishment of the foundation's			providing funds for	such purposes)	(See
	Explain below how each activity for which the accomplishment of the foundation's			providing funds for	such purposes)	(See
	Explain below how each activity for which the accomplishment of the foundation's			providing funds for	such purposes)	(See

Part XVI	Information Re Noncharitable				actions and	Relationships With			
section 5	rganization directly or ii 01(c) of the Code (othe	ndırectly engaç	je in any of t	the following wit				Yes	No
organizat a Transfers	ions? s from the reporting four	ndation to a nor	ncharitable e	exempt organiza	tion of				
	h						. 1a(1)		No
(2) Othe	erassets						. 1a(2)		No
<b>b</b> Other tra	nsactions s of assets to a noncha	rıtable exempt	organızatıor	n			1b(1)		No
							45/23	1	N-
	hases of assets from a			inization			1b(2)	<u>                                       </u>	No No
		·					1		
• •	nbursement arrangemen						. 1b(4)		No
• •	ns or loan guarantees.						. 1b(5)		No
• •	rmance of services or n of facilities, equipment, i	·	_				. 1b(6)		No No
<b>d</b> If the ans	swer to any of the above ods, other assets, or se	e is "Yes," com rvices given by	plete the fol the reporti	lowing schedule ng foundation It	Column <b>(b)</b> sh the foundation	ould always show the fair received less than fair ma er assets, or services rec	market va arket value		140
(a) Line No	(b) Amount involved	(c) Name of nor	nchantable exe	empt organization	(d) Description	n of transfers, transactions, and	l sharing arra	ngemer	nts
des crībeo <b>√</b> No	undation directly or indi d in section 501(c) of th	ne Code (other	•	•	•	-	[Y	'es	
b If "Yes,"	complete the following : (a) Name of organization		(b	) Type of organizat	ion	(c) Description of re	elationship		
	_								
			+						
the		and belief, it is t	true, correct			mpanying schedules and oreparer (other than taxpa			
Sign Here	*****	,		2015-05-06	****	retu with	the prepare		
	Signature of officer or t	rustee		Date	Title	belo (see	w e instr )? 🌄 '	Yes [ i	νo
	Print/Type preparer's Joseph M Harary	name Pre	parer's Sign	ature	Date 2016-11-09	Check if self- employed ► ✓	P01209	560	
Paid Preparer Use		,				Firm's EIN ▶ 13-3133	945		
Only	Firm's address ► 3115 Quentin Road	Brooklyn, NY :	11234			Phone no (718) 376-	6635		

Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	A mount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
Chabad of Great Neck 400 East Shore Rd Great Neck, NY 11024	None		Charitable	201
Chai Lifeline 151 West 30th Street New York, NY 10001	None		Charitable	301
Congregation Shaare Zion 2030 Ocean Parkway Brooklyn, NY 11223	None		Charitable	5,653
Emek Hatorah 1781 Ocean Parkway Brooklyn, NY 11223	None		Charitable	4,004
Friends of Nahar Shalom 587 Fifth Ave New York, NY 10017	None		Charitable	201
Hatzalah EMS PO Box 2333 Long Branch, NJ 07740	None		Charitable	301
Hillel Yeshiva 1025 Deal Rd Asbury Park,NJ 07712	None		Charitable	101
Maor Yeshiva PO Box 254 West Long Branch,NJ 07764	None		C harıtable	432
Mattan Basseter 1924 East 7th Street Brooklyn,NY 11223	None		Charitable	1,602
Mitzvah Man Foundation Corp 2618 Ave M Brooklyn, NY 11210	None		Charitable	200
Nefesh 1750 East 18th Street Brooklyn, NY 11229	None		Charitable	501
Ohel Sımcha Congregation 295 Park Ave Long Branch, NJ 07740	None		Charitable	250
PEylim Lev Lachin 1034 East 12th Street Brooklyn, NY 11230	None		Charitable	1,500
Sephardic Bikur Holim 425 Kings Highway Brooklyn, NY 11223	None		Charitable	602
Sephardic Food Fund 8 West 40th Street New York, NY 10018	None		Charitable	252

Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	A mount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
<b>a</b> Paıd durıng the year				
Torah Ore Seminary 3006 Ave M Brooklyn, NY 11210	None		Charitable	126
UJA Federation of NY 130 East 59th Street New York, NY 10022	None		Charitable	36
Yad YosefTorah Center 1036 Ocean Parkway Brooklyn, NY 11230	None		Charitable	201
Yeshiva Ateret Torah 901 Quentin Road Brooklyn, NY 11223	None		C haritable	13,320
Yeshıvat Keter Torah 613 Apollo Road Lakewood,NJ 08701	None		Charitable	101
Yeshivat Mikdash Melech 1326 Ocean Parkway Brooklyn, NY 11230	None		Charitable	378
Yeshivat Shaare Torah 1680 Coney Island Ave Brooklyn,NY 11230	None		Charitable	350
Lev Torah 3300 King Highway Brooklyn,NY 11234	None		Charity	38,800
American Friends of Binyan Av 1481 East 8th Street Brooklyn,NY 11230	None		Charity	501
American Friends of Mishkane Meir 910 Ave P Brooklyn, NY 11223	None		Charity	352
Bais HaVaad Halacha Center 32 Fifth Street Lakewood,NJ 08701	None		Charity	180
Bneı Aram Soba 63 Manhattan Court Brooklyn, NY 11235	None		Charity	100
Central Fund of Israel Mishne Torah 34 West 33rd Street Suite 7th Fl New York, NY 10001	None		Charity	401
Congregation Zichron Binyamin 701 Princeton Ave Lakewood,NJ 08701	None		Charity	100
Ezer Mizion 1281 49th Street Brooklyn, NY 11219	None		Charity	100

Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	A mount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
Hatzoloh of Flatbush 1880 Ocean Ave Brooklyn, NY 11230	None		Charity	1,001
Ilan High School 82 Norwood Ave Suite 3 Deal,NJ 07723	None		Charity	100
Jerusalem Center of Research 1525 East 5th Street Brooklyn,NY 11230	None		Charity	180
Mishkan Shelomo 10 West 33 Street New York, NY 10001	None		Charity	501
Ramot Torah Schools 359 Ave o Brooklyn, NY 11230	None		Charity	201
SEAD- Special Ed Academy of Deal 1 Meridian Road Eatontown,NJ 07724	None		Charity	227
Sephardic Community Center 1901 Ocean Parkway Brooklyn,NY 11223	None		Charity	400
Sephardic Press 1741 East 3rd Street Brooklyn, NY 11223	None		Charity	137
The Jewish Literary Foundation PO Box 1327 Lakewood,NJ 08701	None		Charity	500
Tıferet Torah 1741 East 3rd Street Brooklyn, NY 11223	None		Charity	6,732
Yeshıvat Ohel Torah 1760 53rd Street Brooklyn,NY 11204	None		Charity	670
Aahavat Hayım Vachesed 2222 East 12th Street Brooklyn,NY 11229	None		Charity	101
Ahaba Ve Ahva of Ocean Parkway 1744 Ocean Parkway Brooklyn,NY 11223	None		Charity	1,500
Beit Ariel 1514 East 10th Street Brooklyn,NY 11230	None		Charity	101
Shem Hagedolim 1675 East 7th Street Brooklyn,NY 11230	None		Charity	101
Total				93,699

Recipient If recipient is an individual, Foundation Purpose of grant or A mount show any relationship to contribution status of any foundation manager recipient

10,000

93,699

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

Name and address (nome or business)	or substantial contributor	133.613.11	
<b>a</b> Paid during the year			

YDE Yeshiva 2210 East 8th Street Brooklyn,NY 11223	None	Charity	
Vachus Darach Chaim, 1572 20th	None	Charity	

Brooklyn, NY 11223			
Yeshıva Derech Chaım 1573 39th Street	None	Charity	

Yeshıva Derech Chaim 1573 39th	None	Charity	
Street			
Brooklyn, NY 11218			

Total.

		I .	
Yeshiva Derech Chaim 1573 39th	None	Charity	100
Street			
Donaldon NV 44040	1	I	I

DLN: 93491314003096

228

## Name: IC Hessed Foundation

228

ETN: 27 C2542C0

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

Bank Service Charges

	EIN: 27-6354369	,		
Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes

efile GRAPHIC print -	DO NOT PROCESS	As Filed Data -			DLN: 93491314003096	
Schedule B		Schedu	le of Contributors		OMB No 1545-0047	
(Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service	► Informatio	► Attach to F	Form 990, 990-EZ, or 990-PF B (Form 990, 990-EZ, or 990-PF) and its inst <u>www.irs.gov/form990</u>	ructions is at	2014	
Name of the organization	on			Employer ide	entification number	
- ressed Foundation				27-635436	9	
Organization type (ch	eck one)					
Filers of:	Filers of: Section:					
Form 990 or 990-EZ	Form 990 or 990-EZ					
☐ 4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private foundation						
	☐ 527 politica	organization				
Form 990-PF						
□ 501(c)(3) taxable private foundation						
_	_		at received, during the year, contributions to I and II See instructions for determining a co	-	· · · · · · · · · · · · · · · · · · ·	
Special Rules						
under sections to received from ai	509(a)(1) and 170(b)(1	)(A)(vı), that check ing the year, total c	form 990 or 990-EZ that met the 33 <sup>1</sup> /3% supposed Schedule A (Form 990 or 990-EZ), Part contributions of the greater of <b>(1)</b> \$5,000 or as I and II	II, line 13, 16a,	or 16b, and that	
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 <b>General Rule</b> 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)						

Name of organization IC Hessed Foundation

Employer identification number 27-6354369

Part I	Contributors (see instructions) Use duplicate copies of Part I if additional space is needed	l	
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
1			Person _
	Intimateco LLC		'5
	149 Madison Ave		1
	143 Madison Ave	\$135,000	Noncash ┌
	New Years NV 1001C		
	New York, NY 10016		(Complete Part II for noncash
			contributions )
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
			Person —
			Payroll –
		\$	Noncash
	-		(Complete Part II for noncash
			contributions )
			Contributions y
4-1	4.5	(-)	(.1)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
			Person —
			Payroll _
		\$	Noncash –
		Φ	
			(Complete Part II for noncash
			contributions)
			· ·
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
			.,,,
			Person _
			Payroll _
		\$	Noncash ┌
			(Complete Part II for noncash
			contributions )
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
			Person —
			Payroll <del></del>
			Noncash
		\$	, noneasin
			(Complete Part II for noncash
			contributions )
			1
(a)	(b)	(c)	(d)
۱۵) No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
	rame, addition, and in the	. C.a. Contributions	. Jpc or contribution
			Parasa
			Person _
			Payroll —
		\$	Noncash ┌
			(Complete Part II for noncash
			contributions )

Schedule B (Form 990, 990-EZ, or 990-PF) (2014) Name of organization **Employer identification number** IC Hessed Foundation 27-6354369 Noncash Property (see instructions) Use duplicate copies of Part II if additional space is Part II (a) No. (c) (d) from FMV (or estimate) Description of noncash property given Date received Part I (see instructions) (a) No. (c) (b) (d) from FMV (or estimate) Description of noncash property given Date received Part I (see instructions) \$ (a) No. (c) (d) (b) from FMV (or estimate) Description of noncash property given Date received Part I (see instructions) (a) No. (c) (d) (b) from FMV (or estimate) Description of noncash property given Date received Part I (see instructions) (a) No. (c) (b) (d) from FMV (or estimate) Description of noncash property given Date received Part I (see instructions) (a) No. (c) (b) (d) from FMV (or estimate) Description of noncash property given Date received Part I (see instructions)

schedule i	B (FORM 990, 990-EZ, or 990-PF) (2014)			rage 4		
	organization d Foundation			Employer identification number		
C Hessei	a i oundation			27-6354369		
Part III		from any one nter the total of structions ) ▶	contributor. Complet	•		
(a) No. from Part I	(b) Purpose of gift		) Use of gıft	(d) Description of how gift is held		
-		(0)	Transfer of gift			
	Transferee's name, address, an		_	onship of transferor to transferee		
(a) No. from Part I	(b) Purpose of gift	(c	) Use of gift	(d) Description of how gift is held		
	Transferee's name, address, an		Transfer of gift Relatio	enship of transferor to transferee		
(a) No. from Part I	(b) Purpose of gift	(c	) Use of gift	(d) Description of how gift is held		
				_ -		
	Transferee's name, address, an		Transfer of gift Relatio	enship of transferor to transferee		
(a) No. from Part I	(b) Purpose of gift	(с	) Use of gift	(d) Description of how gift is held		
	Transferee's name, address, an		Transfer of gift Relatio	enship of transferor to transferee		