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Department of the Treasury

Internal Revenue Service

DLN: 93491214000266

OMB No 1545-0052

Open to Public

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. Inspection

For calendar year 2015, or tax year beginning 01-01-2015 , and ending 12-31-2015 A Employer identification number Name of foundation DOLGIN FOUNDATION INC 11-6035390 BTelephone number (see instructions) Number and street (or P O box number if mail is not delivered to street address) 101 RICHARDSON STREET (718) 338-7700 C If exemption application is pending, check here ▶ City or town, state or province, country, and ZIP or foreign postal code BROOKLYN, NY 11211 G Check all that apply Initial return of a former public charity Initial return D 1. Foreign organizations, check here Final return Amended return $\textbf{2.} \ \ \text{Foreign organizations meeting the } 85\%$ Name change Address change test, check here and attach computation **H** Check type of organization \checkmark Section 501(c)(3) exempt private foundation If private foundation status was terminated under section 507(b)(1)(A), check here Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation **J**Accounting method Cash 🔽 Accrual IFair market value of all assets at end If the foundation is in a 60-month termination Cother (specify) under section 507(b)(1)(B), check here of year (from Part II, col. (c), (Part I, column (d) must be on cash basis.) line 16) ►\$ 3,965 Part I Analysis of Revenue and Expenses Disbursements Revenue and Net investment Adjusted net for charitable (The total of amounts in columns (b), (c), and (d) may not expenses per ıncome necessarily equal the amounts in column (a) (see (b) (c) purposes income books (d) (cash basis only) instructions)) Contributions, gifts, grants, etc , received (attach 1 15.591 2 Check ► ☐ If the foundation is **not** required to attach 3 Interest on savings and temporary cash investments Dividends and interest from securities Gross rents 5a Net rental income or (loss) b Net gain or (loss) from sale of assets not on line 10 6a Revenue Gross sales price for all assets on line 6a Capital gain net income (from Part IV, line 2) . . . Net short-term capital gain . . . 8 Income modifications . . . 10a Gross sales less returns and allowances Less Cost of goods sold b Gross profit or (loss) (attach schedule) C 11 Other income (attach schedule) Total. Add lines 1 through 11 15,591 13 Compensation of officers, directors, trustees, etc 14 Other employee salaries and wages . . . 15 Pension plans, employee benefits . . Operating and Administrative Expenses Legal fees (attach schedule). 16a Accounting fees (attach schedule). . . . b Other professional fees (attach schedule) . c **17** 18 Taxes (attach schedule) (see instructions) 19 Depreciation (attach schedule) and depletion . 20 21 Travel, conferences, and meetings. 22 Printing and publications . . . 23 Other expenses (attach schedule). . 24 Total operating and administrative expenses. 216 Add lines 13 through 23 216 11,410 11,410 25 Contributions, gifts, grants paid 26 Total expenses and disbursements. Add lines 24 and 11,626 11,410 25 27 Subtract line 26 from line 12 Excess of revenue over expenses and disbursements 3,965 a Net investment income (if negative, enter -0-) Adjusted net income(if negative, enter -0-)

Pa	rt II	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)	Beginning of year			f year
		Should be for end-or-year amounts only (See instructions) Cash—non-interest-bearing	(a) Book Value	(b) Book	Value 3,965	(c) Fair Market Value 3,965
	1	-			3,903	3,903
	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	O ther assets (describe 🟲)				
	16	Total assets (to be completed by all filers—see the				
		ınstructions Also, see page 1, item I)	0		3,965	3,965
	17	Accounts payable and accrued expenses				
	18	Grants payable				
<u>e</u> s	19	Deferred revenue				
Ξ	20	Loans from officers, directors, trustees, and other disqualified persons				
Liabilities	21	Mortgages and other notes payable (attach schedule)				
_	22	Other liabilities (describe 🟲)				
	23	Total liabilities(add lines 17 through 22)	0		0	
		Foundations that follow SFAS 117, check here				
φŞ		and complete lines 24 through 26 and lines 30 and 31.				
3uc	24	Unrestricted				
Sa.	25	Temporarily restricted				
C E	26	Permanently restricted				
or Fund Balance		Foundations that do not follow SFAS 117, check here				
Ä		and complete lines 27 through 31.				
	27	Capital stock, trust principal, or current funds	0		0	
Assets	28	Paid-in or capital surplus, or land, bldg , and equipment fund	0		0	
AS	29	Retained earnings, accumulated income, endowment, or other funds	0		3,965	
Net	30	Total net assets or fund balances(see instructions)	0		3,965	
Z	31	Total liabilities and net assets/fund balances(see instructions)	0		3,965	
Da						
	rt III		(n) line 20 /			
1		Total net assets or fund balances at beginning of year—Part II, column	,		,	0
2		with end-of-year figure reported on prior year's return)			2	
2		Enter amount from Part I, line 27a			3	3,965
3		Other increases not included in line 2 (itemize)		—		<u>_</u>
4		Add lines 1, 2, and 3			4	3,965
5		Decreases not included in line 2 (itemize)		_	6	3.065
6		Total net assets or fund balances at end of year (line 4 minus line 5)—F	aicii, colullii (D), III	16 20 .		3,965

the Part VI instructions

	the kınd(s) of property sold (e g , re ehouse, or common stock, 200 shs		How acquired P—Purchase (b) D—Donation	(6)	Date acquired (mo , day, yr)	Date sold (d) (mo , day, yr)
1a						
b						
С						
d						
e						
(e) Gross sales price	Depreciation allowe (f) (or allowable)		t or other basıs expense of sale			or (loss) (f) mınus (g)
a						
b						
С						
d						
e						
Complete only for assets	showing gain in column (h) and owne	ed by the foundation	n on 12/31/69			(h) gaın mınus
(i) F M V as of 12/31/69	A djusted basis (j) as of 12/31/69		cess of col (ı) r col (j), ıf any	(1)		t less than -0-) or from col (h))
a						
b						
С						
d						
<u>е</u>						
3 Net short-term capit	me or (net capital loss) al gain or (loss) as defined in sectio Part I, line 8, column (c) (see instru		- ın Part I , lıne 7)	2		
Part V Qualification U	Jnder Section 4940(e) for R	Reduced Tax on	Net Investme	<u> </u>		
-	private foundations subject to the se					
	e section 4942 tax on the distribut ot qualify under section 4940(e) D	,	•	eriod?	•	┌ Yes ┌ No
$oldsymbol{1}$ Enter the appropriate amo	unt ın each column for each year, s	ee instructions befo	ore making any en	tries		
(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of nonchar	ritable-use assets		(d) Distributio (col (b) divided	n ratio
2014	0		0			0 000000
2013	0		0			0 000000
2012	0		0			0 000000
2011	3,511		1,723			2 037725
2010 2 Total of line 1, columi	1,175 n (d)		2,297	2		0 511537 2 549262
3 Average distribution	ratio for the 5-year base period—di the foundation has been in existence	vide the total on lin		3		0 509852
	f noncharitable-use assets for 201!		_	4		2,560
	e 3	•	H-	5		1,305
. , , , ,	stment income (1% of Part I, line 2			6		0
		•		7		1,305
	ibutions from Part XII, line 4			8		11,410

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

	990-PF (2015) t VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b),	4940(e)	. or 4948—se	e pag	e 18 of	the inst	ructio		age 4
1a	Exempt operating foundations described in section 4940(d)(2), check here		,	<u> </u>				,	
Id	and enter "N/A" on line 1	- 1							
	Date of ruling or determination letter			\					
	(attach copy of letter if necessary-see instructions)								
Ь	Domestic foundations that meet the section 4940(e) requirements in Part \	√, check		J	1				0
	here Fand enter 1% of Part I, line 27b			•					
С	All other domestic foundations enter 2% of line 27b Exempt foreign organizations	zations (enter 4 % of						
2	Part I, line 12, col (b) Tax under section 511 (domestic section 4947(a)(1) trusts and taxable for	undation	s only Othe	rc					
2	enter -0-)	unuation	is only Othe	:15	2				0
3	Add lines 1 and 2				3				0
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable fo	undation	ns only Oth	ers					
_	enter -0-) Tax based on investment income. Subtract line 4 from line 3 If zero or less,	ontor C	1		5				0
5	Credits/Payments	enter -c	,	•	5				0
6	2015 estimated tax payments and 2014 overpayment credited to 2015	6a	1						
a	Exempt foreign organizations—tax withheld at source	6b							
b	Tax paid with application for extension of time to file (Form 8868)	6c							
c d	Backup withholding erroneously withheld	6d							
u 7	Total credits and payments Add lines 6a through 6d				7				0
8	Enter any penalty for underpayment of estimated tax. Check here if Form				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				10				
11	Enter the amount of line 10 to be Credited to 2015 estimated tax	ant over	Refunded		11	<u> </u>			
	t VII-A Statements Regarding Activities		- Ner unaca			<u> </u>			
1a	During the tax year, did the foundation attempt to influence any national, star	te orloc	al legislatio	n or d	д			Yes	No
	It participate or intervene in any political campaign?	20, 01 100	sar registatio	/// O/ U/	u		1a	103	No
b	Did it spend more than \$100 during the year (either directly or indirectly) for	r nolitica	l nurnoses (see In	structi	ons			
_	for definition)?					-	1b		No
	If the answer is "Yes" to 1a or 1b , attach a detailed description of the activities	es and co	opies of anvi	nateria	ls .	-			
	published or distributed by the foundation in connection with the activities.		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,						
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) imp			r					
	(1) On the foundation \blacktriangleright \$0 (2) On foundation managers	s - \$ _		0					
e	Enter the reimbursement (if any) paid by the foundation during the year for po	olitical e	xpenditure t	ax ımp	osed				
	on foundation managers 🕨 \$0								
2	Has the foundation engaged in any activities that have not previously been re	eported	to the IRS?				2		No
	If "Yes," attach a detailed description of the activities.								
3	Has the foundation made any changes, not previously reported to the IRS, in	ıts gove	erning instru	ment,	articles	s			
	of incorporation, or bylaws, or other similar instruments? If "Yes," attach a con	nformed	copy of the c	hanges			3		No
4a	Did the foundation have unrelated business gross income of \$1,000 or more	during t	he 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 d	luring th	e year?				5		No
	If "Yes," attach the statement required by General Instruction T.								
6	Are the requirements of section 508(e) (relating to sections 4941 through 4	945) sa	tisfied eithe	r					
	By language in the governing instrument, or								
	By state legislation that effectively amends the governing instrument so to the state of th					1			
_	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	ır? <i>If "Ye</i> :	s," complete	Part II	, col. (c),	_		
_	and Part XV.	• • •			• •		7	Yes	
8a	Enter the states to which the foundation reports or with which it is registered	(see ins	structions)						
L	► NY If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 9	000 DE	to the Atte						
D	General (or designate) of each state as required by General Instruction G^2 I .						8b	Yes	
9	Is the foundation claiming status as a private operating foundation within the				(1)(3)		- JD	1 63	
3	or 4942(j)(5) for calendar year 2015 or the taxable year beginning in 2015 (_						
	If "Yes," complete Part XIV	,500 11131		aic /			9		No
10	Did any persons become substantial contributors during the tax year? If "Yes	s," attacl	h a schedule	lıstına	their n	ames			
	and addresses.						10		No

Par	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 ► <u>N/A</u>			
14	The books are in care of ►KALMON DOLGIN Telephone no ►(718)) 338-	-7700	
	Located at ▶101 RICHARDSON STREET BROOKLYN NY ZIP+4 ▶11211			
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	• •	- ,	
			1	
16	At any time during calendar year 2015, did the foundation have an interest in or a signature or other authority over	مما	Yes	No
	a bank, securities, or other financial account in a foreign country?	16		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			
Par	t VII-B Statements Regarding Activities for Which Form 4720 May Be Required			1
	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?			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
	a disqualified person?			
	(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 V 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)?			
	(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)			
ь	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	Yes	
	Organizations relying on a current notice regarding disaster assistance check here		103	
c	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts,			
Ī	that were not corrected before the first day of the tax year beginning in 2015?	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 $4942(j)(5)$)			
а	At the end of tax year 2015, did the foundation have any undistributed income (lines 6d			
	and 6e, Part XIII) for tax year(s) beginning before 2015? Yes V No			
	If "Yes," list the years ▶ 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			
За	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at			
	any time during the year?			
b	If "Yes," did it have excess business holdings in 2015 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 2015.)	3b		<u> </u>
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 2015?	4b		No

Рa	Statements Reg	arding Activities for	Which Form 4/20 N	лау ве кеquirea (<i>Cont</i>	inuea)
5a	During the year did the foundation	on pay or incur any amount	to		
	(1) Carry on propaganda, or oth	erwise attempt to influence	legislation (section 494	5(e))? 	No
	(2) Influence the outcome of an	y specific public election (s	see section 4955), or to	carry	
	on, directly or indirectly, any	y voter registration drive?.		Yes 🗸	No
	(3) Provide a grant to an individ	lual for travel, study, or othe	er sımılar purposes?	✓ Yes 「	_ No
	(4) Provide a grant to an organiz		· · · · ·		
	in section 4945(d)(4)(A)? (see instructions)			No
	(5) Provide for any purpose other	er than religious, charitable	, scientific, literary, or		
	educational purposes, or for				No
b	,				
	Regulations section 53 4945 or				
	Organizations relying on a curre				
С	If the answer is "Yes" to question				_
	tax because it maintained exper			TYes	No
	If "Yes," attach the statement req				
6a	Did the foundation, during the ye				
	a personal benefit contract?				
b	Did the foundation, during the ye	ear, pay premiums, directly	or indirectly, on a persor	nal benefit contract?	. 6b No
	If "Yes" to 6b, file Form 8870.				
7a	At any time during the tax year,				
<u> </u>	If yes, did the foundation receiv				
Pa		ut Officers, Directors,	, Trustees, Foundat	tion Managers, Highly	Paid Employees,
	and Contractors List all officers, directors, truste	es, foundation managers ar	nd their compensation (s	ee instructions).	
				(d)	
	(a) Name and address	Title, and average hours per week	(c) Compensation(If not paid, enter	Contributions to	Expense account,
	(.,	(b) devoted to position	-0-)	employee benefit plans and deferred compensation	(e) other allowances
KALM	10N DOLGIN	PRESIDENT/SECRETARY	, 0	0	
101	RICHARDSON STREET	0 25			
BRO	OKLYN,NY 11211				
NEIL	DOLGIN	TREASURER	0	0	0
	RICHARDSON STREET	0 25			
	OOKLYN,NY 11211				. ""
	Compensation of five highest-pa	id employees (other than t	hose included on line 1—	Contributions to	nter "NONE."
	(a)	Title, and avera		employee henefit	Expense account,
IN a	me and address of each employee more than \$50,000	e paid hours per weel (b) devoted to posit		plans and deferred	(e) other allowances
				(d) compensation	
иои	NE .				
Tota	al number of other employees paid	lover \$50,000			0

	(see instructions). If none, enter "NO!	VE".
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE	、	
otal number of others receiving over \$50,000 for professional services		▶ 0
Part IX-A Summary of Direct Charitable Activities		
st the foundation's four largest direct charitable activities during the tax year Include re rganizations and other beneficiaries served, conferences convened, research papers pro		er of Expenses
1	duced, etc	
2		
3		
4		
Part IX-B Summary of Program-Related Investments	•	
Part IX-B Summary of Program-Related Investments Describe the two largest program-related investments made by the foundation during	•	Amount
Part IX-B Summary of Program-Related Investments	•	A mount
Part IX-B Summary of Program-Related Investments Describe the two largest program-related investments made by the foundation during	•	Amount
Part IX-B Summary of Program-Related Investments Describe the two largest program-related investments made by the foundation during	•	A mount
Part IX-B Summary of Program-Related Investments Describe the two largest program-related investments made by the foundation during 1	•	A mount
Part IX-B Summary of Program-Related Investments Describe the two largest program-related investments made by the foundation during 1 2	•	Amount
Part IX-B Summary of Program-Related Investments Describe the two largest program-related investments made by the foundation during 1 2 All other program-related investments See instructions	•	Amount
Part IX-B Summary of Program-Related Investments Describe the two largest program-related investments made by the foundation during 1 2	•	Amount

Part X Minimum Investment Return

PG	(All domestic foundations must complete this part. Foreign foundations, see instruction	ıs.)	
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc ,		
	purposes		
а	Average monthly fair market value of securities	1a	0
b	Average of monthly cash balances	1b	2,599
c	Fair market value of all other assets (see instructions)	1c	0
d	Total (add lines 1a, b, and c)	1d	2,599
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	A cquisition indebtedness applicable to line 1 assets	2	0
3	Subtract line 2 from line 1d	3	2,599
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see		
	ınstructions)	4	39
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	2,560
6	Minimum investment return. Enter 5% of line 5	6	128
Pai	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and cei check here ► □ and do not complete this part.)	rtaın f	oreign organizations
1	Mınımum ınvestment return from Part X, line 6	1	128
2a	Tax on investment income for 2015 from Part VI, line 5 2a		
b	Income tax for 2015 (This does not include the tax from Part VI) 2b		
С	Add lines 2a and 2b	2c	О
3	Distributable amount before adjustments Subtract line 2c from line 1	3	128
4	Recoveries of amounts treated as qualifying distributions	4	0
5	Add lines 3 and 4	5	128
6	Deduction from distributable amount (see instructions)	6	0
7	Distributable amountas adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1	7	128
Par	Qualifying Distributions (see instructions)		
1	A mounts paid (including administrative expenses) to accomplish charitable, etc , purposes		
а	Expenses, contributions, gifts, etc —total from Part I, column (d), line 26	1a	11,410
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		
а	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	11,410
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		
	ıncome Enter 1% of Part I, line 27b (see instructions)	5	0
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	11,410
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating wheth the section 4940(e) reduction of tax in those years	er the	foundation qualifies for

Ρ	art XIIII Undistributed Income (see instr	uctions)				
		(a) Corpus	(b) Years prior to 2014	(c) 2014	(d) 2015	
1	Distributable amount for 2015 from Part XI, line 7					128
2	Undistributed income, if any, as of the end of 2015					
	Enter amount for 2014 only			0		
	Total for prior years 20, 20, 20		0			·
3	Excess distributions carryover, if any, to 2015					
а	From 2010 1,060					
	From 2011 3,425					
c	From 2012					
d	From 2013					
е	From 2014					
f	Total of lines 3a through e	4,485				
4	Qualifying distributions for 2015 from Part					
	XII, line 4 🕨 \$ 11,410					
а	Applied to 2014, but not more than line 2a			0		
	Applied to undistributed income of prior years		0			
	(Election required—see instructions)					
C	Treated as distributions out of corpus (Election required—see instructions)	0				
d	Applied to 2015 distributable amount					128
е	Remaining amount distributed out of corpus	11,282				
5	Excess distributions carryover applied to 2015	0				0
	(If an amount appears in column (d), the same amount must be shown in column (a).)					
6	Enter the net total of each column as indicated below:					
а	Corpus Add lines 3f, 4c, and 4e Subtract line 5	15,767				
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			
е	Undistributed income for 2014 Subtract line					
	4a from line 2a Taxable amount—see			0		
_	Instructions			J		
Т	Undistributed income for 2016 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	0				
	be required - see instructions)					
٥	applied on line 5 or line 7 (see instructions)	1,060				
9	Excess distributions carryover to 2016.					
-	Subtract lines 7 and 8 from line 6a	14,707				
10	Analysis of line 9					
а	Excess from 2011 3,425					
b	Excess from 2012					
	Excess from 2013					
	Excess from 2014					
е	Excess from 2015 11,282					

- 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 If recipient is an individual, Recipient Foundation Purpose of grant or show any relationship to status of Amount contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year See Additional Data Table 11,410 **b** Approved for future payment

	ing Activitie	5			Page 1 2
Enter gross amounts unless otherwise indicated	Unrelated bu	siness income	Excluded by section	n 512, 513, or 514	(e) Related or exempt function income
1 Program service revenue	(a) Business code	(b) A mount	(c) Exclusion code	(d) A mount	(See Instructions)
a b					
c					
e f					
 g Fees and contracts from government agencies 2 Membership dues and assessments 3 Interest on savings and temporary cash investments					
4 Dividends and interest from securities 5 Net rental income or (loss) from real estate					
a Debt-financed property b Not debt-financed property					
6 Net rental income or (loss) from personal property					
7 Other investment income					
9 Net income or (loss) from special events 0 Gross profit or (loss) from sales of inventory .					
Dother revenue a b					
c d					
e 2 Subtotal Add columns (b), (d), and (e) 3 Total.Add line 12, columns (b), (d), and (e)		0		.3	•
(See worksheet in line 13 instructions to verify of Part XVI-B Relationship of Activities to		olishment of E	xempt Purpos	es	
Line No. Explain below how each activity for whi the accomplishment of the foundation's	ch income is rep	oorted in column (e) of Part XVI-A c	ontributed importa	
instructions)					
the accomplishment of the loundation's					
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Part	XVI	II Information Re Noncharitable				sactions and	Relationships	With		
		organization directly or i	ndırectly	engage in any o	f the following wi				.,	Τ
		501(c) of the Code (other	er than se	ction 501(c)(3)) organizations) d	or in section 527	, relating to politic	al	Yes	No
_		itions?								
		rs from the reporting four						-	(4)	
		sh							(1)	No
		nerassets						la	(2)	No
		ansactions						416	(1)	Na
		es of assets to a noncha								No
		chases of assets from a		·	_					No
		ital of facilities, equipme						1b		No
		mbursement arrangemer							-	No
		ns or loan guarantees. ormance of services or m								No No
									.c	No
		of facilities, equipment, iswer to any of the above	_							NO
of t	he go iny tr	oods, other assets, or se ransaction or sharing arr	rvices giv angement	en by the report, show in colum	ting foundation	If the foundation of the goods, othe	received less thai	n fair market va ces received	alue	unto
(a) Line	: NO	(b) Amount involved	(C) Name	or nonchantable e	xempt organization	(d) Description	ir or transfers, transact	lons, and snaming	ariangeme	111.5
						-				
des	cribe	oundation directly or indicated in section 501(c) of the complete the following (a) Name of organization	ne Code (schedule	other than secti		in section 527?		·····Γ	·	No
Sign Here	the inf	nder penalties of perjury, e best of my knowledge a formation of which prepai	nd belief,	, it is true, corre		Declaration of p	preparer (other tha	an taxpayer) is May the IF return		n all
		Signature of officer or t	rustee		Date	Title		below	`)?┡¥Yes┡	
		Print/Type preparer's ECKSTEIN BRADLI		Preparer's Sig	gnature	Date	Check if self- employed ►	PTIN POO8	46003	
Paid Prepa Use	are			1			Firm's EIN ► 1	1-3518842		
Only		Firm's address • 88 FROEHLICH FARN 11797	1 BLVD W	√O O DBURY, NY			Phone no (516	5)992-5900		

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).

1/ A	1 N/	10	NI	$\cap \cap$	IGIN

NEIL DOLGIN

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	Foundation status of recipient	Purpose of grant or contribution	A mount
· · · · · · · · · · · · · · · · · · ·	or substantial contributor			
a Paid during the year				
JEWISH NATIONAL FUND 42 EAST 69TH STREET NEW YORK,NY 10021	NONE	PC	COMMUNITY DEVELOPMENT PROGRAMS	100
AMERICAN FRIENDS OF ISRAEL MUSEUM 500 FIFTH AVE STE 2540 NEW YORK,NY 10110	NONE	PC	ARTS, CULTURE, AND HUMANITIES	100
LEUKEMIA & LYMPHOMA 1311 MAMARONECK AVE STE 310 WHITE PLAINS,NY 10605	NONE	PC	CANCER RESEARCH	50
RABBI STECKER 108 OLD MILL ROAD GREAT NECK,NY 11023	NONE	I	GENERAL FUND	1,000
SID JACOBSON JEWISH COMMUNITY CENTER 300 FOREST DRIVE EAST HILLS,NY 11548	NONE	PC	COMMUNITY DEVELOPMENT PROGRAMS	360
JEWISH NATIONAL FUND 42 EAST 69TH STREET NEW YORK,NY 10021	NONE	PC	COMMUNITY DEVELOPMENT PROGRAMS	100
THE MORGAN CENTER PO BOX 333 BRIGHTWATERS,NY 11718	NONE	PC	EDUCATIONAL INSTITUTION	350
TEMPLE ISRAEL OF GREAT NECK 108 OLD MILL ROAD GREAT NECK,NY 11023	NONE	PC	RELIGIOUS	180
MS SOCIETY 733 THIRD AVENUE NEW YORK, NY 10017	NONE	PC	GENERAL SUPPORT - MS RESEARCH	500
THE LUSTGARTEN PANCREATIC CANCER FOUNDATION 1111 STEWART AVE BETHPAGE,NY 11714	NONE	PC	GENERAL SUPPORT - CANCER RESEARCH	100
THE LUSTGARTEN PANCREATIC CANCER FOUNDATION 1111 STEWART AVE BETHPAGE,NY 11714	NONE	PC	GENERAL SUPPORT - CANCER RESEARCH	100
THE VISCARDI CENTER 201 I U WILLETS ROAD ALBERTSON,NY 11507	NONE	PC	GENERAL SUPPORT	100
CCFA - LONG ISLAND 585 STEWART AVE STE 304 GARDEN CITY,NY 11530	NONE	PC	GENERAL SUPPORT	550
MOLLOY COLLEGE 1000 HEMPSTEAD AVE ROCKVILLE CENTER,NY 11571	NONE	PC	EDUCATIONAL INSTITUTIONS	600
THE LUSTGARTEN PANCREATIC CANCER FOUNDATION 1111 STEWART AVE BETHPAGE,NY 11714	NONE	PC	GENERAL SUPPORT, CANCER RESEARCH	25

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	Foundation status of recipient	Purpose of grant or contribution	Amount
,	or substantial contributor			
a Paid during the year				
SID JACOBSON JEWISH COMMUNITY CENTER 300 FOREST DRIVE EAST HILLS,NY 11548	NONE	PC	COMMUNITY DEVELOPMENT PROGRAMS	950
SID JACOBSON JEWISH COMMUNITY CENTER 300 FOREST DRIVE EAST HILLS,NY 11548	NONE	PC	GENERAL SUPORT	750
CYSTIC FIBROSIS FOUNDATION 6931 ARLINGTON ROAD BETHESDA,MD 20814	NONE	PC	GENERAL SUPPORT, RESEARCH AND DRUG DEVELOPMENT	180
JIMMY FUNDPAN MASS 77 4TH AVENUE NEEDHAM,MA 02494	NONE	PC	GENERAL SUPPORT, CANCER RESEARCH	180
NORTH SHORE AUTISM 65 PEACH DRIVE ROSLYN,NY 11579	NONE	PC	GENERAL SUPPORT	800
HOMES FIT FOR HEROS 500 N FRANKLIN TURNPIKE RAMSEY,NJ 07446	NONE	PC	COMMUNITY DEVELOPMENT PROGRAMS	180
UNIFORMED FIREFIGHTERS 204 EAST 23RD STREET NEW YORK,NY 10010	NONE	PC	EDUCATIONAL PROGRAMS	25
UJA-FEDERATION OF NEW YORK 130 EAST 59TH STREET NEW YORK,NY 10022	NONE	PC	COMMUNITY DEVELOPMENT PROGRAMS	720
JACKIE SIMONDS 1712 LALIQUE LANE ORLANDO,FL 32828	NONE	I	FUNDS NEEDED FOR MEDICAL ASSISTANCE	250
THE LUSTGARTEN PANCREATIC CANCER FOUNDATION 1111 STEWART AVE BETHPAGE,NY 11714	NONE	PC	GENERAL SUPPORT - CANCER RESEARCH	50
AVON 39 440 NINTH AVENUE 17TH FLOOR NEW YORK, NY 10001	NONE	PC	DONATION FOR SHERYL YARMUS	200
TOM ZANGAS MEMORIAL LUNG CANCER FOUNDATION 286 NORTHERN BLVD GREAT NECK,NY 11021	NONE	PC	BRONZE SPONSOR	250
THE ARCHANGEL MICHAEL CHURCH 100 FAIRWAY DRIVE PORT WASHINGTON,NY 11050	NONE	PC	RELIGIOUS	50
UJA-FEDERATION OF 130 EAST 59TH STREET NEW YORK,NY 10022	NONE	PC	COMMUNITY DEVELOPMENT PROGRAMS	250
AMERICAN CANCER SOCIETY 250 WILLIAMS STREET ATLANTA, GA 30303	NONE	PC	GENERAL SUPPORT - CANCER RESEARCH	50
Total			▶ 3a	11,410

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	A mount
a Paid during the year				
KIDCARE NYC 130 EAST 18TH ST APT 15E NEW YORK,NY 10003	NONE	PC	CHILDRENS' DEVELOPMENT PROGRAMS	200
THE LUSTGARTEN PANCREATIC CANCER FOUNDATION 1111 STEWART AVE BETHPAGE,NY 11714	NONE	PC	GENERAL SUPPORT - CANCER RESEARCH	200
TEMPLE EMANUEL OF GREAT NECK 108 OLD MILL ROAD GREAT NECK,NY 11023	NONE	PC	RELIGIOUS	180
ELS FOR AUTISM 18370 LIMESTONE CREEK ROAD JUPITER,FL 33458	NONE	PC	GENERAL SUPPORT - AUTISM RESERACH/EDUCATION/SUPPORT	50
TEMPLE ISRAEL OF GREAT NECK 108 OLD MILL ROAD GREAT NECK,NY 11023	NONE	PC	RELIGIOUS	320
LUBAVITCH YOUTH ORGANIZATION 770 EASTERN PARKWAY BROOKLYN,NY 11213	NONE	PC	RELIGIOUS / COMMUNITY DEVELOPMENT PROGRAMS	500
TEMPLE ISRAEL OF GREAT NECK 108 OLD MILL ROAD GREAT NECK,NY 11023	NONE	PC	RELIGIOUS	360
THE LUSTGARTEN PANCREATIC CANCER FOUNDATION 1111 STEWART AVE BETHPAGE,NY 11714	NONE	PC	GENERAL SUPPORT - CANCER RESEARCH	50
THE LUSTGARTEN PANCREATIC CANCER FOUNDATION 1111 STEWART AVE BETHPAGE,NY 11714	NONE	PC	GENERAL SUPPORT - CANCER RESEARCH	50
OXALOSIS & HYPEROXALURIA FOUNDATION 201 E 19TH STREET 12E NEW YORK,NY 10003	NONE	PC	GENERAL SUPPORT - MEDICAL RESEARCH/EDUCATION/SUPPORT	100
RILEY'S DANCE CO NJ SHARING NETWORK 691 CENTRAL AVENUE NEW PROVIDENCE,NJ 07974	NONE	PC	GENERAL SUPPORT	250
VIGILANT ENGINE & HOOK & LADDER CO 83 CUTTERMILL ROAD GREAT NECK,NY 11021	NONE	PC	COMMUNITY PROTECTION	50
Total				11,410

efile GRAPHIC print - DO NOT PROCESS | As Filed Data - DLN: 93491214000266

TY 2015 Other Expenses Schedule

Name: DOLGIN FOUNDATION INC

EIN: 11-6035390

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
BANK CHARGES	216	216	0	0

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93491214000266

_N. 93491214000200

OMB No 1545-0047

0045

Schedule B

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

► Attach to Form 990, 990-EZ, or 990-PF.
► Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at www.irs.gov/form990.

2015

Employer identification number

DOLGI	IN FOUNDATION INC					
0.00	ization tuna (abadua		11-6035390			
Organ	ization type (check o	ne)				
Filers	of:	Section:				
Form 9	90 or 990-EZ	☐ 501(c)() (enter number) organization				
		☐ 4947(a)(1) nonexempt charitable trust not treated as a private foundation	1			
		☐ 527 political organization				
Form 9	90-PF	▼ 501(c)(3) exempt private foundation				
		☐ 4947(a)(1) nonexempt charitable trust treated as a private foundation				
		☐ 501(c)(3) taxable private foundation				
		covered by the General Rule or a Special Rule. 7), (8), or (10) organization can check boxes for both the General Rule and a Sp	pecial Rule See instructions			
Gener	al Rule					
ᅜ		filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions in any one contributor. Complete Parts I and II. See instructions for determining a				
Specia	al Rules					
Γ	under sections 509(a received from any on	escribed in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 ¹ /3% supplet (1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part e contributor, during the year, total contributions of the greater of (1) \$5,000 or Form 990-EZ, line 1 Complete Parts I and II	II, line 13, 16a, or 16b, and that			
Γ	during the year, total	escribed in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that receive contributions of more than \$1,000 exclusively for religious, charitable, scientific cruelty to children or animals. Complete Parts I, II, and III	-			
Γ	during the year, contr this box is checked, e purpose Do not comp	escribed in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that receive ibutions exclusively for religious, charitable, etc., purposes, but no such contributer here the total contributions that were received during the year for an excludete any of the parts unless the General Rule applies to this organization because, contributions totaling \$5,000 or more during the year	outions totaled more than \$1,000 lf usively religious, charitable, etc, ause it received nonexclusively			

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
DOLGIN FOUNDATION INC

Employer identification number 11-6035390

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			Person	I
	KALMON DOLGIN 6 MEADOW LANE	\$ 5,197	Payroll	Г
	MANHASSET, NY 11030		Noncash (Complete Part II f	or noncash
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of cont	tribution
2			Person	হ
	NEIL DOLGIN 3 JORDAN DRIVE	\$ 7,795	Payroll	Г
	GREAT NECK, NY11021		Noncash	Γ
			(Complete Part II f contributions)	or noncash
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of cont	tribution
			Person	Γ
		\$	Payroll	Γ
			Noncash	Γ
			(Complete Part II f contributions)	or noncash
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of cont	tribution
			Person	Γ
		\$	Payroll	Г
		<u> </u>	Noncash	Γ
			(Complete Part II f contributions)	or noncash
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of cont	tribution
			Person	Γ
		\$	Payroll	Г
			Noncash	Г
			(Complete Part II f contributions)	or noncash
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of cont	tribution
			Person	Γ
		\$	Payroll	Г
			Noncash	Γ
			(Complete Part II f contributions)	

Name of organization DOLGIN FOUNDATION INC		Employer identification no	umber
		11-6035390	
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
(a) No.from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(a) No.from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		<u> </u>	
(a) No.from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(a) No.from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		<u> </u>	
(a) No.from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received

Schedule B (Form 990, 990-EZ, or 990-F	F)	(201	5)
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chedule B (Form 990,	990-EZ, or 990-PF) (2015)		Page 4
ame of organization OLGIN FOUNDATIO	ONINC		Employer identification number 11-6035390
total more line entry. of \$1,000 c	than \$1,000 for the year from any o	ne contributor. Complete co II, enter the total of <i>exclusiv</i> mation once. See instruction	ribed in section 501(c)(7), (8), or (10) that olumns (a) through (e) and the following ely religious, charitable, etc., contributions
(a) No.from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
. [-			
-	Transferee's name, address, and	(e) Transfer of gi	ft 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
- -	Transferee's name, address, and	(e) Transfer of gi	ft Relationship of transferor to transferee
(a) lo.from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
- -			
-	Transferee's name, address, and	(e) Transfer of gi	ft 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
<u> </u>	Transferee's name, address, and	(e) Transfer of gi	ft Relationship of transferor to transferee
-	-	_	