

Form **990-PF**
 Department of the Treasury
 Internal Revenue Service

Return of Private Foundation
or Section 4947(a)(1) Trust Treated as Private Foundation
 ▶ Do not enter social security numbers on this form as it may be made public.
 ▶ Information about Form 990-PF and its instructions is at www.irs.gov/form990pf.

OMB No 1545-0052
2015
Open to Public Inspection

For calendar year 2015, or tax year beginning 01-01-2015 , and ending 12-31-2015

Name of foundation HERMIONE FOUNDATION C/O LAURA SLOATE		A Employer identification number 13-3673826
Number and street (or P O box number if mail is not delivered to street address) 35 EAST 75TH STREET	Room/suite	B Telephone number (see instructions) (212) 476-9175
City or town, state or province, country, and ZIP or foreign postal code NEW YORK, NY 10021		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) ▶ \$ 638,516	J Accounting method <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____ (Part I, column (d) must be on cash basis)	F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/>

Part I Analysis of Revenue and Expenses <i>(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions))</i>		Revenue and expenses per books (a)	Net investment income (b)	Adjusted net income (c)	Disbursements for charitable purposes (d) (cash basis only)
1	Contributions, gifts, grants, etc , received (attach schedule)	1,332,764			
2	Check <input type="checkbox"/> if the foundation is not required to attach Sch B				
3	Interest on savings and temporary cash investments				
4	Dividends and interest from securities	203	203		
5a	Gross rents	22,756	22,756		
b	Net rental income or (loss) <u>13,500</u>				
6a	Net gain or (loss) from sale of assets not on line 10	-24,270			
b	Gross sales price for all assets on line 6a <u>1,274,824</u>				
7	Capital gain net income (from Part IV, line 2)		722,897		
8	Net short-term capital gain				
9	Income modifications				
10a	Gross sales less returns and allowances				
b	Less Cost of goods sold				
c	Gross profit or (loss) (attach schedule)				
11	Other income (attach schedule)				
12	Total. Add lines 1 through 11	1,331,453	745,856		
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).				
c	Other professional fees (attach schedule)	238	0		0
17	Interest	183	0		0
18	Taxes (attach schedule) (see instructions)				
19	Depreciation (attach schedule) and depletion				
20	Occupancy				
21	Travel, conferences, and meetings				
22	Printing and publications				
23	Other expenses (attach schedule).	9,256	9,256		0
24	Total operating and administrative expenses. Add lines 13 through 23	9,677	9,256		0
25	Contributions, gifts, grants paid	1,111,311			1,111,311
26	Total expenses and disbursements. Add lines 24 and 25	1,120,988	9,256		1,111,311
27	Subtract line 26 from line 12				
a	Excess of revenue over expenses and disbursements	210,465			
b	Net investment income (if negative, enter -0-)		736,600		
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	1
	2 Savings and temporary cash investments	412,005	608,858	608,858
	3 Accounts receivable ▶ _____ Less allowance for doubtful accounts ▶ _____			
	4 Pledges receivable ▶ _____ Less allowance for doubtful accounts ▶ _____			
	5 Grants receivable			
	6 Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions).			
	7 Other notes and loans receivable (attach schedule) ▶ _____ Less allowance for doubtful accounts ▶ _____			
	8 Inventories for sale or use			
	9 Prepaid expenses and deferred charges			
	10a Investments—U S and state government obligations (attach schedule)			
	b Investments—corporate stock (attach schedule)			
	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)	16,046	29,560	29,560
	14 Land, buildings, and equipment basis ▶ _____ Less accumulated depreciation (attach schedule) ▶ _____			
15 Other assets (describe ▶ _____)	0	97	97	
16 Total assets (to be completed by all filers—see the instructions Also, see page 1, item I)	428,051	638,516	638,516	
Liabilities	17 Accounts payable and accrued expenses			
	18 Grants payable			
	19 Deferred revenue			
	20 Loans from officers, directors, trustees, and other disqualified persons			
	21 Mortgages and other notes payable (attach schedule).			
	22 Other liabilities (describe ▶ _____)			
	23 Total liabilities (add lines 17 through 22)	0	0	
Net Assets or Fund Balances	Foundations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 24 through 26 and lines 30 and 31.			
	24 Unrestricted	428,051	638,516	
	25 Temporarily restricted			
	26 Permanently restricted			
	Foundations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 27 through 31.			
	27 Capital stock, trust principal, or current funds			
	28 Paid-in or capital surplus, or land, bldg, and equipment fund			
	29 Retained earnings, accumulated income, endowment, or other funds			
	30 Total net assets or fund balances (see instructions)	428,051	638,516	
31 Total liabilities and net assets/fund balances (see instructions)	428,051	638,516		

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	428,051
2	Enter amount from Part I, line 27a	2	210,465
3	Other increases not included in line 2 (itemize) ▶ _____	3	0
4	Add lines 1, 2, and 3	4	638,516
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	638,516

Part IV Capital Gains and Losses for Tax on Investment Income

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

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

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h)) (l)
(i) FMV as of 12/31/69	Adjusted basis (j) as of 12/31/69	Excess of col (i) (k) over col (j), if any	
a See Additional Data Table			
b			
c			
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	722,897
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))
2014	930,516	563,272	1.651983
2013	941,403	506,378	1.859091
2012	1,121,989	278,164	4.033552
2011	1,029,219	583,018	1.765330
2010	1,165,214	304,217	3.830207

2 Total of line 1, column (d).	2	13.140163
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	2.628033
4 Enter the net value of noncharitable-use assets for 2015 from Part X, line 5.	4	521,269
5 Multiply line 4 by line 3.	5	1,369,912
6 Enter 1% of net investment income (1% of Part I, line 27b).	6	7,366
7 Add lines 5 and 6.	7	1,377,278
8 Enter qualifying distributions from Part XII, line 4.	8	1,111,311

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)

Table with 11 rows for excise tax calculation. Includes fields for exempt foundations, domestic foundations, tax under section 511, and tax due. Total tax due is 13,201.

Part VII-A Statements Regarding Activities

Table with 10 rows for activity statements. Includes questions about political campaigns, unrelated business income, and substantial contributors. Includes Yes/No columns.

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? Website address ▶ <u>N/A</u>	13	Yes	
14 The books are in care of ▶ <u>LAURA SLOATE</u> Telephone no ▶ <u>(212) 476-9175</u> Located at ▶ <u>35 EAST 75TH STREET NEW YORK NY</u> ZIP+4 ▶ <u>10021</u>			
15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041—Check here ▶ <input type="checkbox"/>	15		
16 At any time during calendar year 2015, 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? 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 ▶	16	Yes	No

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? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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). <input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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)? <input type="checkbox"/> Organizations relying on a current notice regarding disaster assistance check here. ▶ <input type="checkbox"/>	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 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)) a 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? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "Yes," list the years ▶ 20____, 20____, 20____, 20____ b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement—see instructions). 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____	2b		
3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No 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? (<i>Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2015</i>).	3b		No
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

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... (2) Influence the outcome of any specific public election... (3) Provide a grant to an individual for travel... (4) Provide a grant to an organization other than a charitable... (5) Provide for any purpose other than religious... b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify... c If the answer is "Yes" to question 5a(4), does the foundation claim exemption... 6a Did the foundation, during the year, receive any funds... b Did the foundation, during the year, pay premiums... 7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? b If yes, did the foundation receive any proceeds...

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).

Table with 5 columns: (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. Rows include LAURA J SLOATE, MICHAEL J SCHWARTZ, DONNA LEONE, NESLI BASGOZ.

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

Table with 5 columns: (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. First row contains NONE.

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

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

Part VIII

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 NONE - CONTRIBUTIONS WERE MADE TO OTHER CHARITABLE ORGANIZATIONS	0
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 N/A	0
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	14,621
b	Average of monthly cash balances.	1b	514,586
c	Fair market value of all other assets (see instructions).	1c	0
d	Total (add lines 1a, b, and c).	1d	529,207
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	529,207
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see instructions).	4	7,938
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	521,269
6	Minimum investment return. Enter 5% of line 5.	6	26,063

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	26,063
2a	Tax on investment income for 2015 from Part VI, line 5.	2a	14,732
b	Income tax for 2015 (This does not include the tax from Part VI).	2b	
c	Add lines 2a and 2b.	2c	14,732
3	Distributable amount before adjustments Subtract line 2c from line 1.	3	11,331
4	Recoveries of amounts treated as qualifying distributions.	4	0
5	Add lines 3 and 4.	5	11,331
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	11,331

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	1,111,311
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	1,111,311
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	0
6	Adjusted qualifying distributions. Subtract line 5 from line 4.	6	1,111,311

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 2014	(c) 2014	(d) 2015
1 Distributable amount for 2015 from Part XI, line 7				11,331
2 Undistributed income, if any, as of the end of 2015				
a Enter amount for 2014 only.			0	
b Total for prior years 20___, 20___, 20___		0		
3 Excess distributions carryover, if any, to 2015				
a From 2010.				1,156,581
b From 2011.				1,009,601
c From 2012.				1,117,995
d From 2013.				925,975
e From 2014.				910,612
f Total of lines 3a through e.	5,120,764			
4 Qualifying distributions for 2015 from Part XII, line 4 ▶ \$ <u>1,111,311</u>				
a Applied to 2014, but not more than line 2a			0	
b Applied to undistributed income of prior years (Election required—see instructions).		0		
c Treated as distributions out of corpus (Election required—see instructions).	0			
d Applied to 2015 distributable amount.				11,331
e Remaining amount distributed out of corpus	1,099,980			
5 Excess distributions carryover applied to 2015 (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	6,220,744			
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 2014 Subtract line 4a from line 2a Taxable amount—see instructions.			0	
f 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 be required - see instructions).	0			
8 Excess distributions carryover from 2010 not applied on line 5 or line 7 (see instructions).	1,156,581			
9 Excess distributions carryover to 2016. Subtract lines 7 and 8 from line 6a.	5,064,163			
10 Analysis of line 9				
a Excess from 2011.				1,009,601
b Excess from 2012.				1,117,995
c Excess from 2013.				925,975
d Excess from 2014.				910,612
e Excess from 2015.				1,099,980

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 <i>Paid during the year</i> See Additional Data Table				
Total			▶ 3a	1,111,311
b <i>Approved for future payment</i>				
Total			▶ 3b	0

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

List and describe the kind(s) of property sold (e.g., real estate, (a) 2-story brick warehouse, or common stock, 200 shs MLC Co)	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
155 SHS AVIS BUDGET GROUP INC	D	2013-11-07	2015-01-08
2250 SHS ATMOS ENERGY CORP	D	2014-02-12	2015-01-08
4000 SHS OF MAGELLAN MIDSTREAM PARTNERS LP	D	2010-07-14	2015-01-09
500 SHS VORNADO REALTY TRUST	D	2007-11-21	2015-01-13
100 SHS GOLDMAN SACHS	D	2011-03-28	2015-05-26
2000 SHS EQT CORPORATION	D	2011-03-28	2015-05-26
45 SHS LABORATORY CORP	D	2014-01-21	2015-05-28
650 SHS OF WHITEWAVE FOODS	D	2012-10-26	2015-06-17
360 SHS JARDEN CORPORAITON	D	2013-09-04	2015-07-21
675 SHS BLACKSTONE GROUP	D	2013-01-03	2015-07-23

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

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
10,255		4,593	5,662
124,562		100,125	24,437
321,168		93,765	227,403
61,578		44,367	17,211
20,615		15,706	4,909
172,892		103,529	69,363
5,345		4,100	1,245
31,031		11,239	19,792
20,202		11,560	8,642
28,146		11,080	17,066

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

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	
			5,662
			24,437
			227,403
			17,211
			4,909
			69,363
			1,245
			19,792
			8,642
			17,066

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

List and describe the kind(s) of property sold (e g , real estate, (a) 2-story brick warehouse, or common stock, 200 shs MLC Co)	(b) How acquired P—Purchase D—Donation	Date acquired (c) (mo , day , yr)	(d) Date sold (mo , day , yr)
500 SHS WHITEWAVE FOODS COMPANY	D	2012-11-01	2015-08-10
2500 SHS WHITEWAVE FOODS COMPANY	D	2012-11-07	2015-08-10
1500 SHS SHAKE SHACK	D	2015-01-30	2015-08-13
3500 SHS SHAKE SHACK	D	2015-01-30	2015-08-17

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

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
24,532		7,913	16,619
122,676		38,950	83,726
104,008		31,500	72,508
227,814		73,500	154,314

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

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	
			16,619
			83,726
			72,508
			154,314

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

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a <i>Paid during the year</i>				
92ND STREET Y 1395 LEXINGTON AVENUE NEW YORK, NY 10128	NONE	PUBLIC CHARITY	TO FURTHER RECIPIENTS' PUBLICLY STATED OBJECTIVES	59,206
AMERICAN FRIEND SOF ISRAEL PHILHARMONIC ASSOCIATION 122 EAST 42ND STREET NEW YORK, NY 10168	NONE	PUBLIC CHARITY	TO FURTHER RECIPIENTS' PUBLICLY STATED OBJECTIVES	3,000
ARTISTS SPACE 38 GREENE STREET NEW YORK, NY 10013	NONE	PUBLIC CHARITY	TO FURTHER RECIPIENTS' PUBLICLY STATED OBJECTIVES	3,600
ASPCA 424 EAST 92ND STREET NEW YORK, NY 10128	NONE	PUBLIC CHARITY	TO FURTHER RECIPIENTS' PUBLICLY STATED OBJECTIVES	100
ASSOCIATION TO BENEFIT CHILDREN 419 EAST 86TH STREET NEW YORK, NY 10028	NONE	PUBLIC CHARITY	TO FURTHER RECIPIENTS' PUBLICLY STATED OBJECTIVES	1,200
BLYTHEDALE CHILDREN'S HOSPITAL 95 BRADHURST AVENUE VALHALLA, NY 10595	NONE	PUBLIC CHARITY	TO FURTHER RECIPIENTS' PUBLICLY STATED OBJECTIVES	1,200
BREAKTHROUGH NEW YORK 123 WILLIAM STREET 4TH FL NEW YORK, NY 10038	NONE	PUBLIC CHARITY	TO FURTHER RECIPIENTS' PUBLICLY STATED OBJECTIVES	27,500
CAMPAIGN FOR WESTCHESTER CHILDREN'S MUSEUM PLAYLAND PARKWAY RYE, NY 10580	NONE	PUBLIC CHARITY	TO FURTHER RECIPIENTS' PUBLICLY STATED OBJECTIVES	1,200
CANCER RESEARCH INSTITUTE 55 BROADWAY NEW YORK, NY 10006	NONE	PUBLIC CHARITY	TO FURTHER RECIPIENTS' PUBLICLY STATED OBJECTIVES	3,000
CARNEGIE HALL SOCIETY 881 7TH AVENUE NEW YORK, NY 10019	NONE	PUBLIC CHARITY	TO FURTHER RECIPIENTS' PUBLICLY STATED OBJECTIVES	36,351
CENTRAL SYNAGOGUE 652 LEXINGTON AVENUE NEW YORK, NY 10022	NONE	PUBLIC CHARITY	TO FURTHER RECIPIENTS' PUBLICLY STATED OBJECTIVES	150
GREYSTON FOUNDATION 21 PARK AVENUE YONKERS, NY 10703	NONE	PUBLIC CHARITY	TO FURTHER RECIPIENTS' PUBLICLY STATED OBJECTIVES	2,000
HALEYHOUSE 12 DADE STREET ROXBURY, MA 02119	NONE	PUBLIC CHARITY	TO FURTHER RECIPIENTS' PUBLICLY STATED OBJECTIVES	3,600
HOLE IN THE WALL GANG CAMP 565 ASHFORD CENTER ROAD ASHFORD, CT 06278	NONE	PUBLIC CHARITY	TO FURTHER RECIPIENTS' PUBLICLY STATED OBJECTIVES	2,550
JACK MARTIN FUNDNEXT GENERATION 17 EAST 102ND STREET NEW YORK, NY 10029	NONE	PUBLIC CHARITY	TO FURTHER RECIPIENTS' PUBLICLY STATED OBJECTIVES	3,600
Total			▶ 3a	1,111,311

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>				
JAZZ AT LINCOLN CENTER 3 COLUMBUS CIRCLE NEW YORK, NY 10019	NONE	PUBLIC CHARITY	TO FURTHER RECIPIENTS' PUBLICLY STATED OBJECTIVES	3,590
JUNIOR ACHIEVEMENT OF PALM BEACHES 6903 VISTA PKWY N PALM BEACH, FL 33411	NONE	PUBLIC CHARITY	TO FURTHER RECIPIENTS' PUBLICLY STATED OBJECTIVES	1,000
LINCOLN CENTER INC 10 LINCOLN CENTER PLAZA NEW YORK, NY 10023	NONE	PUBLIC CHARITY	TO FURTHER RECIPIENTS' PUBLICLY STATED OBJECTIVES	3,933
MASSACHUSETTS GENERAL HOSPITAL 55 FRUIT STREET BOSTON, MA 02114	NONE	PUBLIC CHARITY	TO FURTHER RECIPIENTS' PUBLICLY STATED OBJECTIVES	100,000
MAVERICK CONCERTS 120 MAVERICK ROAD WOODSTOCK, NY 12498	NONE	PUBLIC CHARITY	TO FURTHER RECIPIENTS' PUBLICLY STATED OBJECTIVES	1,000
METROPOLITAN MUSEUM OF ART 1000 5TH AVENUE NEW YORK, NY 10028	NONE	PUBLIC CHARITY	TO FURTHER RECIPIENTS' PUBLICLY STATED OBJECTIVES	1,500
METROPOLITAN OPERA 30 LINCOLN CENTER PLAZA NEW YORK, NY 10023	NONE	PUBLIC CHARITY	TO FURTHER RECIPIENTS' PUBLICLY STATED OBJECTIVES	556,203
MICHAEL WOLK HEART FOUNDATION 865 PARK AVENUE NEW YORK, NY 10075	NONE	PUBLIC CHARITY	TO FURTHER RECIPIENTS' PUBLICLY STATED OBJECTIVES	5,000
MOUNT SINAI ADOLESCENT HEALTH CENTER 212 EAST 94TH STREET NEW YORK, NY 10128	NONE	PUBLIC CHARITY	TO FURTHER RECIPIENTS' PUBLICLY STATED OBJECTIVES	105,000
MOTION PICTURE TELEVISION FUND FOUNDATION 2114 PONTIUS AVENUE LOS ANGELES, CA 90025	NONE	PUBLIC CHARITY	TO FURTHER RECIPIENTS' PUBLICLY STATED OBJECTIVES	500
NEW YORK PHILHARMONIC 10 LINCOLN CENTER PLAZA NEW YORK, NY 10023	NONE	PUBLIC CHARITY	TO FURTHER RECIPIENTS' PUBLICLY STATED OBJECTIVES	38,803
NEW YORK PUBLIC LIBRARY 5TH AVENUE AT 42ND STREET NEW YORK, NY 10036	NONE	PUBLIC CHARITY	TO FURTHER RECIPIENTS' PUBLICLY STATED OBJECTIVES	62,500
PERLMAN MUSIC PROGRAM 19 WEST 69TH STREET NEW YORK, NY 10023	NONE	PUBLIC CHARITY	TO FURTHER RECIPIENTS' PUBLICLY STATED OBJECTIVES	49,000
PROJECT EZRA 465 GRAND STREET NEW YORK, NY 10002	NONE	PUBLIC CHARITY	TO FURTHER RECIPIENTS' PUBLICLY STATED OBJECTIVES	2,000
PULMONARY HYPERTENSION ASSOCIATION 54 WEST 40TH STREET NEW YORK, NY 10018	NONE	PUBLIC CHARITY	TO FURTHER RECIPIENTS' PUBLICLY STATED OBJECTIVES	100
Total				1,111,311

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

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a <i>Paid during the year</i>				
RICHARD TUCKER MUSIC FOUNDATION 1790 BROADWAY 715 NEW YORK, NY 10019	NONE	PUBLIC CHARITY	TO FURTHER RECIPIENTS' PUBLICLY STATED OBJECTIVES	1,200
SHARE OUR STRENGTH 13030 15TH STREET NW STE 1100 WASHINGTON, DC 20012	NONE	PUBLIC CHARITY	TO FURTHER RECIPIENTS' PUBLICLY STATED OBJECTIVES	22,125
SURPRISE LAKE CAMP 307 7TH AVENUE NEW YORK, NY 10001	NONE	PUBLIC CHARITY	TO FURTHER RECIPIENTS' PUBLICLY STATED OBJECTIVES	100
THE SEEING EYE 10 WASHINGTON VALLEY ROAD MORRISTOWN, NJ 07960	NONE	PUBLIC CHARITY	TO FURTHER RECIPIENTS' PUBLICLY STATED OBJECTIVES	5,000
TURKISH PHILANTHROPY FUNDS 216 EAST 45TH STREET NEW YORK, NY 10017	NONE	PUBLIC CHARITY	TO FURTHER RECIPIENTS' PUBLICLY STATED OBJECTIVES	1,500
WOMEN DELIVER 588 BROADWAY 905 NEW YORK, NY 10012		PUBLIC CHARITY	TO FURTHER RECIPIENTS' PUBLICLY STATED OBJECTIVES	500
YOUNG SURVIVAL COALITION 80 BROAD STREET 1700 NEW YORK, NY 10004		PUBLIC CHARITY	TO FURTHER RECIPIENTS' PUBLICLY STATED OBJECTIVES	2,500
Total ▶ 3a				1,111,311

TY 2015 Investments - Other Schedule**Name:** HERMIONE FOUNDATION

C/O LAURA SLOATE

EIN: 13-3673826

Category/ Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value
FGHP CAPITAL LP	FMV	29,560	29,560

TY 2015 Other Assets Schedule**Name:** HERMIONE FOUNDATION

C/O LAURA SLOATE

EIN: 13-3673826

Description	Beginning of Year - Book Value	End of Year - Book Value	End of Year - Fair Market Value
OTHER RECEIVABLE	0	97	97

TY 2015 Other Expenses Schedule**Name:** HERMIONE FOUNDATION

C/O LAURA SLOATE

EIN: 13-3673826

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
FGHP CAPITAL LMTD PARTNERSHIP	9,256	9,256		0

TY 2015 Other Professional Fees Schedule**Name:** HERMIONE FOUNDATION

C/O LAURA SLOATE

EIN: 13-3673826

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
FILING FEE	238	0		0

**TY 2015 Substantial Contributors
Schedule****Name:** HERMIONE FOUNDATION

C/O LAURA SLOATE

EIN: 13-3673826

Name	Address
LAURA SLOATE	35 EAST 75TH STREET NEW YORK, NY 10021

Schedule B

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

Department of the Treasury Internal Revenue Service

Schedule of Contributors

OMB No 1545-0047

2015

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

Name of the organization HERMIONE FOUNDATION C/O LAURA SLOATE

Employer identification number 13-3673826

Organization type (check one)

Filers of:

Section:

- Form 990 or 990-EZ [] 501(c)() (enter number) organization [] 4947(a)(1) nonexempt charitable trust not treated as a private foundation [] 527 political organization Form 990-PF [x] 501(c)(3) exempt private foundation [] 4947(a)(1) nonexempt charitable trust treated as a private foundation [] 501(c)(3) taxable private foundation

Check if your organization is covered by the General Rule or a Special Rule. Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See instructions

General Rule

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

Special Rules

- [] For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1 Complete Parts I and II [] For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals Complete Parts I, II, and III [] For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc , purposes, but no such contributions totaled more than \$1,000 If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc , purpose 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)

Name of organization
HERMIONE FOUNDATION
C/O LAURA SLOATE

Employer identification number
13-3673826

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

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
—	See Additional Data Table _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contribution)
—	_____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contribution)
—	_____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contribution)
—	_____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contribution)
—	_____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contribution)
—	_____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contribution)

Name of organization HERMIONE FOUNDATION C/O LAURA SLOATE	Employer identification number 13-3673826
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Part II Noncash Property (see instructions) Use duplicate copies of Part II if additional space is needed

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

Name of organization
HERMIONE FOUNDATION
C/O LAURA SLOATE

Employer identification number

13-3673826

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 _____ _____ _____	
-	_____ _____ _____	_____ _____ _____	_____ _____ _____
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4 _____ _____ --	Relationship of transferor to transferee _____ _____ _____	
-	_____ _____ _____	_____ _____ _____	_____ _____ _____
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4 _____ _____ --	Relationship of transferor to transferee _____ _____ _____	
-	_____ _____ _____	_____ _____ _____	_____ _____ _____
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4 _____ _____ --	Relationship of transferor to transferee _____ _____ _____	

Additional Data

Software ID:
Software Version:
EIN: 13-3673826
Name: HERMIONE FOUNDATION
 C/O LAURA SLOATE

Form 990 Schedule B, Part I - Contributors (see Instructions) Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	LAURA J SLOATE 35 EAST 75TH STREET NEW YORK, NY 10021	\$ 125,775	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contribution)
2	LAURA J SLOATE 35 EAST 75TH STREET NEW YORK, NY 10021	\$ 10,349	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contribution)
3	LAURA J SLOATE 35 EAST 75TH STREET NEW YORK, NY 10021	\$ 320,800	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contribution)
4	LAURA J SLOATE 35 EAST 75TH STREET NEW YORK, NY 10021	\$ 61,595	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contribution)
5	LAURA J SLOATE 35 EAST 75TH STREET NEW YORK, NY 10021	\$ 20,780	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contribution)
6	LAURA J SLOATE 35 EAST 75TH STREET NEW YORK, NY 10021	\$ 175,200	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contribution)

Form 990 Schedule B, Part I - Contributors (see Instructions) Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>7</u>	<u>LAURA J SLOATE</u> <u>35 EAST 75TH STREET</u> <u>NEW YORK, NY 10021</u>	<u>\$ 5,375</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contribution)
<u>8</u>	<u>LAURA J SLOATE</u> <u>35 EAST 75TH STREET</u> <u>NEW YORK, NY 10021</u>	<u>\$ 183,607</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contribution)
<u>9</u>	<u>LAURA J SLOATE</u> <u>35 EAST 75TH STREET</u> <u>NEW YORK, NY 10021</u>	<u>\$ 20,113</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contribution)
<u>10</u>	<u>LAURA J SLOATE</u> <u>35 EAST 75TH STREET</u> <u>NEW YORK, NY 10021</u>	<u>\$ 28,080</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contribution)
<u>11</u>	<u>LAURA J SLOATE</u> <u>35 EAST 75TH STREET</u> <u>NEW YORK, NY 10021</u>	<u>\$ 347,420</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contribution)

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

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
<u>1</u>	2,250 SHS ATMOS ENERGY CORP	<u>\$ 125,775</u>	<u>2015-01-05</u>
<u>2</u>	155 SHS AVIS	<u>\$ 10,349</u>	<u>2015-01-05</u>
<u>3</u>	4,000 SHS MAGELLAN MIDSTREAM	<u>\$ 320,800</u>	<u>2015-01-06</u>
<u>4</u>	500 SHS VORNADO REALTY	<u>\$ 61,595</u>	<u>2015-01-08</u>
<u>5</u>	100 SHS GOLDMAN SACHS	<u>\$ 20,780</u>	<u>2015-05-26</u>
<u>6</u>	2,000 SHS EQT CORPORATION	<u>\$ 175,200</u>	<u>2015-05-28</u>
<u>7</u>	45 SHS LABORATORY CORP	<u>\$ 5,375</u>	<u>2015-05-28</u>
<u>8</u>	3,650 SHS WHITEWAVE FOODS	<u>\$ 183,607</u>	<u>2015-08-07</u>
<u>9</u>	370 SHS JARDEN CORPORATION	<u>\$ 20,113</u>	<u>2015-07-16</u>
<u>10</u>	675 SHS BLACKSTONE GROUP	<u>\$ 28,080</u>	<u>2015-07-20</u>

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

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
<u>11</u>	5,000 SHS SHAKE SHACK	<u>\$ 347,420</u>	<u>2015-08-12</u>