

See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



As Filed Data -

DLN: 93491320004496

2015

OMB No 1545-0052

Inspection

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.

, and ending 12-31-2015 For calendar year 2015, or tax year beginning 01-01-2015 A Employer identification number Name of foundation MORTON & HELEN YULMAN CHARITABLE TRUST 14-6015572 BTelephone number (see instructions) Number and street (or P O box number if mail is not delivered to street address) Room/suite 4000 Ponce De Leon Blvd (847) 681-5066 C If exemption application is pending, check here City or town, state or province, country, and ZIP or foreign postal code Coral Gables, FL 33146 G Check all that apply Initial return Initial return of a former public charity D 1. Foreign organizations, check here Fınal return A mended return 2. Foreign organizations meeting the 85% test, check here and attach computation Address change Name change If private foundation status was terminated \checkmark Section 501(c)(3) exempt private foundation **H** Check type of organization under section 507(b)(1)(A), check here Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation JA ccounting method **✓** Cash Accrual IFair market value of all assets at end If the foundation is in a 60-month termination under section 507(b)(1)(B), check here of year (from Part II, col (c), Other (specify) line 16) ▶\$ 12,655,981 (Part I, column (d) must be on cash basis) Part I Analysis of Revenue and Expenses Disbursements Revenue and (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see Adjusted net Net investment for chantable expenses per books ıncome ıncome purposes (d) (cash basis only) Contributions, gifts, grants, etc , received (attach 1 2 attach Interest on savings and temporary cash investments 3 141,345 141,345 4 Dividends and interest from securities Gross rents Net rental income or (loss)_ b 444.939 Net gain or (loss) from sale of assets not on line 10 6a b Gross sales price for all assets on line 6a 1,150,488 444,939 7 Capital gain net income (from Part IV, line 2) . Net short-term capital gain . 8 9 Income modifications . 10a Gross sales less returns and allowances b Less Cost of goods sold . . . Gross profit or (loss) (attach schedule) . c 11 Other income (attach schedule) (چە 7,658 6,613 592.897 593.942 12 Total.Add lines 1 through 11 13 Compensation of officers, directors, trustees, etc Other employee salaries and wages 14 Pension plans, employee benefits. 15 Operating and Administrative Expenses اروه 3.125 3.125 16a Legal fees (attach schedule). . . 6.250 9 2,794 1,397 1,397 Accounting fees (attach schedule). b 145,841 145,841 Other professional fees (attach schedule) (چە c 485 485 17 **چ** 16,106 8,802 18 Taxes (attach schedule) (see instructions) Depreciation (attach schedule) and depletion 20 Occupancy Travel, conferences, and meetings. 21 22 Printing and publications . . (چە 1.122 23 Other expenses (attach schedule). Total operating and administrative expenses. 24 172.598 159.650 4.522 Add lines 13 through 23 . . . 824.000 824.000 25 Contributions, gifts, grants paid 26 Total expenses and disbursements. Add lines 24 and 996,598 159.650 828.522 27 Subtract line 26 from line 12 -402.656 а Excess of revenue over expenses and disbursements Net investment income (If negative, enter -0-) 433.247 b Adjusted net income(if negative, enter -0-)

D-	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	End o	f year
			(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash—non-interest-bearing	171,793	109,217	109,217
	2	Savings and temporary cash investments	389,211		
	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 ▶			
Ś	8	Inventories for sale or use			
4ssets	9	Prepaid expenses and deferred charges			
As	10a	Investments—U S and state government obligations (attach schedule)			
	ь	Investments—corporate stock (attach schedule)	4,256,798	4,248,351	5,819,621
	с	Investments—corporate bonds (attach schedule)	45,000	9 60,000	60,000
	11	Investments—land, buildings, and equipment basis ▶			
		Less accumulated depreciation (attach schedule) ▶			
	12	Investments—mortgage loans			
	13	Investments—other (attach schedule)	5,520,768	5,404,994	6,667,143
	14	Land, buildings, and equipment basis ▶			
		Less accumulated depreciation (attach schedule) ▶			
	15	Other assets (describe ▶)			
	16	Total assets (to be completed by all filers—see the			
		ınstructions Also, see page 1, item I)	10,383,570	9,822,562	12,655,981
	17	Accounts payable and accrued expenses			
	18	Grants payable			
6S	19	Deferred revenue			
abilities	20	Loans from officers, directors, trustees, and other disqualified persons			
g	21	Mortgages and other notes payable (attach schedule)			
	22	Other liabilities (describe)			
	23	Total liabilities(add lines 17 through 22)		0	
		Foundations that follow SFAS 117, check here ▶			
es		and complete lines 24 through 26 and lines 30 and 31.			
Ĭ	24	Unrestricted			
Balance	25	Temporarily restricted			
	26	Permanently restricted			
Fund	20	Foundations that do not follow SFAS 117, check here			
		and complete lines 27 through 31.			
5 O.	27	Capital stock, trust principal, or current funds	10,383,570	9,822,562	
Assets	28	Paid-in or capital surplus, or land, bldg, and equipment fund	10,303,370	3,022,002	
Ass	29	Retained earnings, accumulated income, endowment, or other funds			
Net		Total net assets or fund balances (see instructions)	10,383,570	9,822,562	
Ž	30	` ′	10,383,570	9,822,562	
	31	Total liabilities and net assets/fund balances(see instructions)	10,383,370	9,822,302	
	rt III				
1		Total net assets or fund balances at beginning of year—Part II, column ((a), line 30 (must ag		400
_		with end-of-year figure reported on prior year's return)		1	10,383,570
2		Enter amount from Part I, line 27a		-	-402,656
3		Other increases not included in line 2 (itemize)		_ 3	
4		Add lines 1, 2, and 3		4	9,980,914
5		Decreases not included in line 2 (itemize) ▶		_ 🥸 5	158,352
6		Total net assets or fund balances at end of year (line 4 minus line 5)—Pa	art II, column (b), li	ne 30 . 6	9,822,562

		he kınd(s) of property sold (e g , re nouse, or common stock, 200 shs	•	P—Purchase (b) D—Donation	100	Date acquired mo , day, yr)	Date sold (d) (mo , day, yr)
1a	See Additional Data Ta	able		(2) 2 20114:101			
b					1		
С С					1		
d					+		
					1		
e		Depressation allows	d Cont	t or other basis	Т	Caun	or (loss)
(е	e) Gross sales price	Deprectation allowed (f) (or allowable)		t or other basis expense of sale			or (loss) (f) minus (g)
а	See Additional Data Ta	able	15.	•			
b							
С							
d							
е							
	mplete only for assets sh	nowing gain in column (h) and owne	d by the foundation	n on 12/31/69	+	Gains (Col	(h) gain minus
	•	A djusted basis	· ·	cess of col (ı)	\dashv		t less than -0-) or
(1)	FM V as of 12/31/69	(j) as of 12/31/69	(k) ove	rcol (j), if any	(1)	Losses	from col (h))
a	See Additional Data Ta	able					
b							
С							
d							
е							
2	Capital gain net incom		If gain, also enter If (loss), enter -0-				444.000
_		'		'	2		444,939
3	•	gain or (loss) as defined in section		•			
	If gain, also enter in Pa in Part I, line 8 .	art I, line 8, column (c) (see instru · · · · · · · · ·	ctions) If(loss), e · · · ·	nter -0-	3		
Part	V Qualification Ur	nder Section 4940(e) for R	educed Tax on	Net Investm	ent Ir	ncome	
	nonal use by domestic pri on 4940(d)(2) applies, le	ivate foundations subject to the se	ection 4940(a) tax	on net investmen	incon	ne)	
	, , , , , , ,	·					
		section 4942 tax on the distributa qualify under section 4940(e) Do	•	•	eriod?		┌ Yes 🗸 No
		. , ,	•				
1 E N		nt in each column for each year, se	ee instructions bero	ore making any en	tries		
	(a) period years Calendar or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of nonchar			(d) Distributio (col (b) divided	
	2014	852,523		14,200,718			0 06003
	2013	436,900		13,347,284			0 03273
	2012	570,111		12,233,130			0 04660
	2011	693,078		12,591,927			0 05504
	2010	630,231		12,144,012			0 05190
2	Totalof line 1, column (` '		<u> </u>	2		0 246308
3	the number of years th	atio for the 5-year base period—div e foundation has been in existence	e ıf less than 5 yea	rs ´´´´	3		0 049262
4		noncharitable-use assets for 2015	•	L	4		13,362,824
5	Multiply line 4 by line 3	3		[5		658,279
6	Enter 1% of net invest	ment income (1% of Part I, line 2	7b) 	[6		4,332
7	Add lines 5 and 6			[7		662,611
8	Enter qualifying distrib	outions from Part XII, line 4		[8		828,522
	If line 8 is equal to or g the Part VI instruction	greater than line 7, check the box i s	n Part VI, line 1b,	and complete that	part u	ısıng a 1% tax	rate See

Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)?

. Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names

If "Yes," complete Part XIV

and addresses

No

No

9

10

Pai	t 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 applications and exemption applications are the second of the secon	on, [13	Yes	
	Website address ►N/A				
14	The books are in care of ▶Alan Tinsmon Telephone no ▶		681-	5066	
	Located at ► 1780 Green Bay Road suite 205 Highland Park IL ZIP+4 ► 600				
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				
16	At any time during calendar year 2015, did the foundation have an interest in or a signature or other authority ov	er ,		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 Financi Accounts (FBAR) If "Yes", enter the name of the foreign country ▶	ial			
Da.					
261	rt 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.	$\neg \tau$		Yes	No
1a	During the year did the foundation (either directly or indirectly)			163	140
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	, No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)				i
	- demonstrated names 2	, No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	_ İ		İ	İ
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	i			İ
	(5) Transfer any income or assets to a disqualified person (or make any of either available	i			İ
	for the benefit or use of a disqualified person)? Yes	, No			
	(6) Agree to pay money or property to a government official? (Exception. Check "No"				
	ıf 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) $ extstyle e$	No			ļ
b	If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in Regulation	ns			
	section 53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	٠ ٠	1b		No
	Organizations relying on a current notice regarding disaster assistance check here	-			l
с	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts,	- 1			l
	that were not corrected before the first day of the tax year beginning in 2015?	.	1 c		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 ▼	' No			l I
ь	If "Yes," list the years > 20, 20, 20, 20 Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)				
b	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2)				
	to allyears listed, answer "No" and attach statement—see instructions)		2b		No
С	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				
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at				
	any time during the year?	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? (Use Schedule C, Form 4720, to determine				
	if the foundation had excess business holdings in 2015)		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 201	5? <u></u>	4b		No

4000 Ponce De Leon Blvd 510 CORAL GABLES, FL 33146 NEDRAY OREN 4000 Ponce De Leon Blvd 510 CORAL GABLES, FL 33146 HELEN B YULMAN 4000 Ponce De Leon Blvd 510 CORAL GABLES, FL 33146 HELEN B YULMAN 4000 Ponce De Leon Blvd 510 CORAL GABLES, FL 33146 2 Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, enter "NONE." Contributions to employee benefit expresse account.
(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?
(2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive?.
on, directly or indirectly, any voter registration drive?
(3) Provide a grant to an individual for travel, study, or other similar purposes? (4) Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? (see instructions). (5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?. (5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?. (6) If any answer is "Yes" to 5a(1)-(5), did amyof the transactions fail to qualify under the exceptions described in Regulations section 53 4945 or in a current notice regarding disaster assistance (see instructions)? (7) If any answer is "Yes" to guestion 53(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? (8) If "Yes," attach the statement required by Regulations section 53 4945-5(d) (9) Did the foundation, during the year, pay premiums, directly or indirectly, to pay premiums on a personal benefit contract? (9) If "Yes," of 6b, life Form 8870 (1) If "Yes," of 6b, life Form 8870 (1) If yes, did the foundation preceive any proceeds or have any net income attributable to the transaction? (1) 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). (1) Name and address (1) Italian and Contractors (1) Italian and Contractors (2) Compensation (see instructions). If none, enter "NoNE." Expense account, only the provided expension of five highest-paid employees (other than those included on line 1—see instructions). If none, enter "NoNE." (2) Contributions to Expension of five highest-paid employees (other than those included on line 1—see instructions). If none, enter "NoNE."
(4) Provide a grant to an organization other than a chantable, etc., organization described in section 4945(d)(4)(A)? (see instructions). (5) Provide for any purpose other than religious, chantable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals? (6) Provide for any purpose other than religious, chantable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals? (7) Provide for any purpose other than religious, chantable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals? (8) If any answer is "Yes" to 53(1)–(5), did anyof the transactions fail to qualify under the exceptions described in Regulations section 53 4945 or in a current notice regarding disaster assistance (see instructions)? (8) If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? (9) If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? (1) If "Yes," attach the statement required by Regulations section 53 4945–5(d) (6) Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? (8) Did the foundation, during the year, pay premiums, directly or indirectly, to pay premiums on a personal benefit contract? (9) If "Yes" to 6b, file Form 8870 (1) If "Yes" to 6b, file Form 8870 (1) If "Yes" to 6b, file Form 8870 (1) If "Yes" to 6b, file Form 8870 (2) If the foundation during the tax year, was the foundation a party to a prohibited tax shelter transaction? (1) If yes, did the foundation receive any proceeds or have any net income attributable to the transaction? (1) If the foundation forms to the foundation managers and their compensation (see instructions). (1) It is all officers, directors, trustees, foundation manager
in section 4945(d)(4)(A)? (see instructions).
educational purposes, or for the prevention of cruelty to children or animals?
Regulations section 53 4945 or in a current notice regarding disaster assistance (see instructions)?
Organizations relying on a current notice regarding disaster assistance check here. C If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?. If "Yes," attach the statement required by Regulations section 53 4945–5(d) 6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?. Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?. 6b No If "Yes" to 6b, file Form 8870 7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? Yes V No b If yes, did the foundation receive any proceeds or have any net income attributable to the transaction? 7b No Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors 1 List all officers, directors, trustees, foundation managers and their compensation (see instructions). (a) Name and address Directors, trustees, foundation managers and their compensation (see instructions). ERICHARD YULMAN OFFICER/TRUSTEE OCORAL GABLES, FL 33146 NODRAY OREN OFFICER/TRUSTEE OCORAL GABLES, FL 33146 NEDRAY OREN OFFICER/TRUSTEE OCORAL GABLES, FL 33146 NEDRAY OREN OFFICER/TRUSTEE OCORAL GABLES, FL 33146 HELEN B YULMAN OFFICER/TRUSTEE OCORAL GABLES, FL 33146 HELEN B YULMAN OFFICER/TRUSTEE OCORAL GABLES, FL 33146 CORAL GABLES, FL 33146 FURDING A GABLES, FL 33146 FURDING A GABLES, FL 33146 FURDING A GABLES, FL 33146 FURDING A GABLES, FL 33146 FURDING A GABLES, FL 33146 FURDING A GABLES, FL 33146 FURDING A GABLES, FL 33146 FURDING A GABLES, FL 33146 FURDING A GABLES, FL 33146 FURDING A GABLES, FL 33146 FURDING A GABLES, FL 33146 FURDING A GABLES, FL 33146 FURDING A GABLES, FL 33146 FURDING A GABLES, FL 33146 FURDING A GABLES, FL 33146 FURDING A GABLES, FL 33146 FURDING A GABLES, FL 33146 FURDING A GABLES, FL 33146 FURDING A GABLES, FL 33146
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?
tax because it maintained expenditure responsibility for the grant?
If "Yes," attach the statement required by Regulations section 53 4945-5(d) Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?
Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?
a personal benefit contract?
b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 6b No If "Yes" to 6b, file Form 8870 7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? Yes Vo No b If yes, did the foundation receive any proceeds or have any net income attributable to the transaction? 7b No Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors 1 List all officers, directors, trustees, foundation managers and their compensation (see instructions). Title, and average hours per week (b) devoted to position of paid, enter of the paid of the paid, enter of the paid of the pa
Title, and average hours per week (b) devoted to position ERICHARD YULMAN 4000 Ponce De Leon Blvd 510 CORAL GABLES, FL 33146 NEDRAY OREN 4000 Ponce De Leon Blvd 510 CORAL GABLES, FL 33146 RELEN BYULMAN 4000 Ponce De Leon Blvd 510 CORAL GABLES, FL 33146 Title, and average days of the foundation blank by the foundation blank by the foundation blank by the foundation managers and their compensation (see instructions). Total average hours per week (b) devoted to position blank
Title, and average hours per week (b) devoted to position ERICHARD YULMAN 4000 Ponce De Leon Blvd 510 CORAL GABLES, FL 33146 NEDRAY OREN 4000 Ponce De Leon Blvd 510 CORAL GABLES, FL 33146 RELEN BYULMAN 4000 Ponce De Leon Blvd 510 CORAL GABLES, FL 33146 Title, and average days of the foundation blank by the foundation blank by the foundation blank by the foundation managers and their compensation (see instructions). Total average hours per week (b) devoted to position blank
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). Title, and average hours per week (b) devoted to position FRICHARD YULMAN OFFICER/TRUSTEE OOFFICER/TRUSTEE OORAL GABLES, FL 33146 HELEN B YULMAN OFFICER/TRUSTEE OOFFICER/TRUSTEE OOFFIC
Title, and average (b) devoted to position OFFICER/TRUSTEE OORAL GABLES, FL 33146 HELEN B YULMAN OORAL GABLES, FL 33146 COMPANIENT OF CORAL GABLES, FL 33146 COMPANIENT OF CORAL GABLES, FL 33146 COMPANIENT OF CORAL GABLES, FL 33146 Title, and average (C) Compensation (See instructions). OFFICER/TRUSTEE OOFFICER/TRUSTEE OOFFICER/TRUSTEE OOFFICER/TRUSTEE OOFFICER/TRUSTEE OORAL GABLES, FL 33146 Title, and average (B) devoted to position OORAL GABLES, FL 33146 Title, and average (C) Compensation (If not paid, enter object to the rallowances and deferred compensation OORAL GABLES, FL 33146 Title, and average OOFFICER/TRUSTEE OOFFICER/TRUST
Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors 1 List all officers, directors, trustees, foundation managers and their compensation (see instructions). (a) Name and address Title, and average hours per week (b) devoted to position ERICHARD YULMAN OFFICER/TRUSTEE OOORAL GABLES, FL 33146 NEDRAY OREN OFFICER/TRUSTEE OOFFICER/TRUSTEE OOFFICER/TRUSTEE OOORAL GABLES, FL 33146 HELEN B YULMAN OFFICER/TRUSTEE OOORAL GABLES, FL 33146 HELEN B YULMAN OFFICER/TRUSTEE OOORAL GABLES, FL 33146 Title, and average OOFFICER/TRUSTEE OOORAL GABLES, FL 33146 Title, and average OOFFICER/TRUSTEE OOORAL GABLES, FL 33146 Title, and average OORAL GABLES, FL 33146 Title, and average OORAL GABLES, FL 33146 Title, and average OORAL GABLES, FL 33146 Title, and average
1 List all officers, directors, trustees, foundation managers and their compensation (see instructions). (a) Name and address Title, and average hours per week (b) devoted to position ERICHARD YULMAN OFFICER/TRUSTEE 4000 Ponce De Leon Blvd 510 CORAL GA BLES, FL 33146 NEDRAY OREN OFFICER/TRUSTEE 4000 Ponce De Leon Blvd 510 CORAL GA BLES, FL 33146 HELEN B YULMAN OFFICER/TRUSTEE 1 00 OFFICER/TRUSTEE 1 00 OFFICER/TRUSTEE 1 00 CORAL GA BLES, FL 33146 HELEN B YULMAN OFFICER/TRUSTEE 1 00 OFFICER/TRUSTEE O CORAL GA BLES, FL 33146 Title, and average Contributions to employee heapfit and deferred compensation (e) other allowances of the remaining to the properties of the pro
(a) Name and address Title, and average hours per week (b) devoted to position E RICHARD YULMAN OFFICER/TRUSTEE 4000 Ponce De Leon Blvd 510 CORAL GABLES, FL 33146 NEDRAY OREN OFFICER/TRUSTEE OFFICER/TRUS
(a) Name and address C) Compensation(If not paid, enter hours per week (b) devoted to position Contributions to employee benefit plans and deferred compensation
E RICHARD YULMAN 4000 Ponce De Leon Blvd 510 CORAL GABLES, FL 33146 NEDRAY OREN 4000 Ponce De Leon Blvd 510 CORAL GABLES, FL 33146 NEDRAY OREN 4000 Ponce De Leon Blvd 510 CORAL GABLES, FL 33146 HELEN B YULMAN 4000 Ponce De Leon Blvd 510 CORAL GABLES, FL 33146 Title, and average OFFICER/TRUSTEE 0 Contributions to employee benefit exployee
4000 Ponce De Leon Blvd 510 CORAL GABLES, FL 33146 NEDRAY OREN 4000 Ponce De Leon Blvd 510 CORAL GABLES, FL 33146 HELEN B YULMAN 4000 Ponce De Leon Blvd 510 CORAL GABLES, FL 33146 OFFICER/TRUSTEE 1 00 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0
NEDRA Y OREN 4000 Ponce De Leon Blvd 510 CORAL GABLES, FL 33146 HELEN B YULMAN 4000 Ponce De Leon Blvd 510 CORAL GABLES, FL 33146 1 00 0 FFICER/TRUSTEE 0 OFFICER/TRUSTEE 1 00 CORAL GABLES, FL 33146 2 Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, enter "NONE." Contributions to employee benefit employee benefit employee benefit employee benefit employee benefit employee benefit.
4000 Ponce De Leon Blvd 510 CORAL GABLES, FL 33146 HELEN B YULMAN 4000 Ponce De Leon Blvd 510 CORAL GABLES, FL 33146 2 Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, enter "NONE." Contributions to employee benefit Expense account
CORAL GABLES, FL 33146 HELEN B YULMAN 4000 Ponce De Leon Blvd 510 CORAL GABLES, FL 33146 2 Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, enter "NONE." Contributions to employee benefit Expense account
4000 Ponce De Leon Blvd 510 CORAL GABLES, FL 33146 2 Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, enter "NONE." Contributions to employee benefit Expense account
CORAL GABLES, FL 33146 2 Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, enter "NONE." Contributions to employee benefit Expense account
(a) Title, and average Contributions to
(a) litle, and average employee benefit Expense account
Name and address of each employee paid more than \$50,000 hours per week (b) devoted to position (c) Compensation plans and deferred (d) compensation
NONE

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

2

3

5

1

2a

3

4

5

6

7

1

2

5

Part XII

Part XI

13,566,319

13,566,319

13,362,824

203,495

668,141

668,141

4,332

663,809

663.809

663,809

828,522

828,522

4,332

824,190

Form **990-PF** (2015)

Part X Minimum Investment Return

1c (attach detailed explanation).

Subtract line 2 from line 1d.

Distributable Amount

(All domestic foundations	must complete	this part.	Foreign fo	oundations,	see
market value of accets not use	d (or hold for use)	directly in	carrung out	t charitable d	at c

Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4

Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1. . .

Expenses, contributions, qifts, etc —total from Part I, column (d), line 26.

Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4

Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for

Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment

Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see

check here ► and do not complete this part.)

Tax on investment income for 2015 from Part VI, line 5.

Income tax for 2015 (This does not include the tax from Part VI). . .

Recoveries of amounts treated as qualifying distributions.

Deduction from distributable amount (see instructions).

Qualifying Distributions (see instructions)

Amounts set aside for specific charitable projects that satisfy the

the section 4940(e) reduction of tax in those years

Distributable amount before adjustments Subtract line 2c from line 1.

Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes

A mounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,

Fair market value of all other assets (see instructions).

Reduction claimed for blockage or other factors reported on lines 1a and

- nstructions.) Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,
- 1a

- purposes 12,950,877

- 1

1e

2a

2b

(see instructions) (Section 4942(1)(3) and (1)(5) private operating foundations and certain foreign organizations

1b

1c 1d

> 2 3

> 4

5

1

2c

3

4

5

6

7

1a

1b

2

3а

3b

4

5

4,332

615,442

ď	ondistributed 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	2 2 1 7 2 2 2			663,809
	Undistributed income, if any, as of the end of 2015				<u>'</u>
	Enter amount for 2014 only				
b					
	Excess distributions carryover, if any, to 2015				
a					
	From 2011				
	From 2013				
е	From 2014				
f	Total of lines 3a through e	260,354			
	Qualifying distributions for 2015 from Part				
	XII, line 4 🕨 \$ 828,522				
а	Applied to 2014, 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	0			
	required—see instructions)				663,809
	Applied to 2015 distributable amount	164 740			663,809
	Remaining amount distributed out of corpus	164,713			
5	Excess distributions carryover applied to 2015				
	(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:	405.067			
	Corpus Add lines 3f, 4c, and 4e Subtract line 5	425,067			
b	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				
е	Undistributed income for 2014 Subtract line				
	4a from line 2a Taxable amount—see				
_	instructions				
T	Undistributed income for 2016 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 2010 not applied on line 5 or line 7 (see instructions)	32,840			
۵	Excess distributions carryover to 2016.				
7	Subtract lines 7 and 8 from line 6a	392,227			
LO	Analysis of line 9				
	Excess from 2011				
	Excess from 2012				
c	Excess from 2013				
d	Excess from 2014 153,103				
е	Excess from 2015 164,713				
_					Form 990-PF (2015)

	m 990-PF (2015)					Page 10
	Part XIV Private Operating Founda				1 9)	
La	If the foundation has received a ruling or detei foundation, and the ruling is effective for 2015					
b	Check box to indicate whether the organization	n <u>is a private operat</u>	ing foundation de	scribed in section	Г 4942(J)(3) or	4942(j)(5)
2a	Enter the lesser of the adjusted net	Tax year		Prior 3 years		(e) Total
	income from Part I or the minimum investment return from Part X for each	(a) 2015	(b) 2014	(c) 2013	(d) 2012	(0) 1010.
	year listed					
b	85% of line 2a					
	Qualifying distributions from Part XII, line 4 for each year listed					
d	A mounts included in line 2c not used directly for active conduct of exempt activities					
е	Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c					
3	Complete 3a, b, or c for the alternative test relied upon					
а	"Assets" alternative test—enter					
	(1) Value of all assets					
	(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b	"Endowment" alternative test— enter 2/3 of minimum investment return shown in					
	Part X, line 6 for each year listed					
c	"Support" alternative test—enter					
	(1) Total support other than gross					
	investment income (interest, dividends, rents, payments					
	on securities loans (section					
	512(a)(5)), or royalties)					
	(2) Support from general public					
	and 5 or more exempt					
	organizations as provided in section 4942(j)(3)(B)(iii).					
	(3) Largest amount of support					
	from an exempt organization					
	(4) Gross investment income					
Pā	art XV Supplementary Information (ie organizatio	n had \$5,000 o	r more in
_	assets at any time during the	e year—see inst	ructions.)			
ı a	Information Regarding Foundation Managers: List any managers of the foundation who have before the close of any tax year (but only if the				,	ation
	E RICHARD YULMAN					
b	List any managers of the foundation who own 1 ownership of a partnership or other entity) of w		•	, , ,	large portion of the	е
2	Information Regarding Contribution, Grant, Gi	ft, Loan, Scholarshii	p, etc., Programs:			
	Check here ▶ ▼ If the foundation only makes				nd does not accent	
	unsolicited requests for funds. If the foundation other conditions, complete items 2a, b, c, and	n makes gifts, grant				
	- The series of the control of the c				146	
ā	The name, address, and telephone number or	email address of the	e person to whom	applications shou	ld be addressed	
Ł	The form in which applications should be subr	nitted and information	on and materials t	they should includ	e	
•	: Any submission deadlines					
-	d Any restrictions or limitations on awards, suc	h as by geographica	al areas, charitabl	le fields, kinds of i	nstitutions, or other	-
	factors	. 9 9 9 9 9	,	,	,	

Form 990-PF (2015)

Part XV Supplementary Information(continued)

3 Grants and Contributions Paid	During the Year or App	proved for F	uture Payment	
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or	A mount
Name and address (home or business)	any foundation manager or substantial contributor	recipient	contribution	
a Paid during the year See Additional Data TableSee Additional Data Table	or substantial contributor	Тестриенс		
Total			▶ 3a	824,000
b Approved for future payment				
Total		1	▶ 3h	

Enter gross amounts unless otherwise indicated	Unrelated bu	usiness income	Excluded by section	512, 513, or 514	(e) Related or exemp
1 Program service revenue	(a) Business code	(b) A mount	(c) Exclusion code	(d) A mount	function income (See instructions)
a					
b					
C					
d e					
f					
g Fees and contracts from government agen	cies				
2 Membership dues and assessments.3 Interest on savings and temporary cash investments.					
4 Dividends and interest from securities		46,789	14	94,556	
5 Net rental income or (loss) from real estate		,		- 1,	
a Debt-financed property					
b Not debt-financed property					
6 Net rental income or (loss) from personal property	.				
7 Other investment income			14	1,218	
8 Gain or (loss) from sales of assets other tha					
inventory			18	444,939	
 9 Net income or (loss) from special events 10 Gross profit or (loss) from sales of inventory 	,				
11 Other revenue a ORD INCOME-PARTNERSHIPS	525990	6,440			
b					
c					
d e					
2 Subtotal Add columns (b), (d), and (e).		53,229		540,713	
3 Total. Add line 12, columns (b), (d), and (e).				13	593,942
(See worksheet in line 13 instructions to ve Part XVI-B Relationship of Activitie		plishment of E	xempt Purpos	es	
Explain below how each activity for the accomplishment of the foundarinstructions)	or which income is re	ported ın column (e) of Part XVI-A c	ontributed importa	

	art XVII					actions	and R	elationships	With			gc = .
1	Did the o	rganızatıon dırectly or ı				any othe	er organ	zation described	l ın			
		01(c) of the Code (other	er than sec	ction 501(c)(3) o	organizations) or	ın sectio	n 527, r	elating to politic	al		Yes	No
	organizat											
а		from the reporting four								4-/4\		NI.
	` '								•	1a(1)		No
	• •	rassets								1a(2)		No
b		nsactions										
		s of assets to a noncha								1b(1)		No
		hases of assets from a							•	1b(2)		No
		al of facilities, equipme	•							1b(3)		No
	(4) Reim	bursement arrangemer	its							1b(4)		No
	(5) Loan	s or loan guarantees.								1b(5)		No
	(6) Perfor	mance of services or m	embership	or fundraising s	olicitations					1b(6)		No
c	Sharıng o	f facılıtıes, equipment,	mailing lis	ts, other assets,	or paid employe	es				1 c		No
	of the god	wer to any of the above ods, other assets, or se nsaction or sharing arr. (b) Amount involved	rvices giv angement,	en by the reporti	ng foundation If (d) the value of	the found the goods	dation re s, other	ceived less than	fair marke es receive	et value ed		ate.
(a)	Line NO	(b) Amount involved	(C) Name	or nonchantable exe	impt organization	(u) De	scription	or cransiers, cransacc	ions, and sna	illing arra	ilgenien	11.5
	-											
	-											
	described √ No	Indation directly or indictions of the section 501(c) of the complete the following (a) Name of organization	ne Code (o schedule	ther than section	•	n section			• • • •	·	25	
	-					-			-			
	T											
Sig	the Info	er penalties of perjury, best of my knowledge a rmation of which prepar	nd belief,	ıt ıs true, correct					n taxpayeı	r) is bas	ed on	all
	re	*****			2016-11-12	_	****		return	he IRS di he prepai		
		Signature of officer or t	rustee		Date	, ,	itle		(see ii	nstr)?	Yes N	No
		Print/Type preparer's AMY L EARING	name	Preparer's Sign	ature	Date		Check if self- employed ▶ ☐	PTIN P(008561	. 64	
Pa Pr Us	eparer	Firm's name ► Lavelle & Finn LLP						Firm's EIN ▶	1			
Or		Firm's address ► 29 British American B 121101405	oulevard	Latham, NY				Phone no (518)869-622	27		

Form 990PF Part IV - Capita	al Gains and Losses for Ta	ıx on Invest	ment Income -	Columns a - d		
	ınd(s) of property sold (e g , real e e, or common stock, 200 shs MI		(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)	
ST CAPITAL LOSSES-F	PARTNERSHIPS		Р	2015-02-01	2015-12-31	
JP MORGAN-EAGLE AC	CCOUNT		Р	2015-02-01	2015-12-31	
JP MORGAN-GARDNER			Р	2015-02-01	2015-12-31	
JP MORGAN-GARDNER			Р	2014-01-01	2015-12-31	
JP MORGAN-EAGLE AC	CCOUNT		Р	2014-01-01	2015-12-31	
JP MORGAN-EAGLE AC	CCOUNT		Р	2014-01-01	2015-12-31	
LT CAPITAL GAINS-PA	ARTNERSHIPS		Р	2014-01-01	2015-12-31	
JP MORGAN-GENERAL			Р	2014-01-01	2015-12-11	
Form 990PF Part IV - Capita	al Gains and Losses for Ta	x on Invest	ment Income -	Columns e - h		
(e) Gross sales price	Depreciation allowed (f) (or allowable)		or other basis expense of sale		or (loss) (f) minus (g)	
			11,997		-11,997	
24,129			27,365		-3,236	
39,797			31,135		8,662	
113,429			51,630		61,799	
156,697			89,188	89,188		
254,671			125,392		129,279	
261,765					261,765	
300,000			368,842		-68,842	
Form 990PF Part IV - Capita	al Gains and Losses for Ta	x on Invest	ment Income -	Columns i - I		
Complete only for assets show	ing gain in column (h) and owned	by the foundation	on on 12/31/69		(h) gain minus	
(i) F M V as of 12/31/69	Adjusted basıs (j) as of 12/31/69		ess ofcol (ı) col (j), ıfany		t less than -0-) or from col (h))	
					-11,997	
					-3,236	
					8,662	
					61,799	
					67,509	
					129,279	
					261,765	
					-68,842	

Form 990PF Part XV Line 3 - Gr	ants 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				
UNION COLLEGE 807 Union Street Schenectady,NY 12308	NONE	PC	PROGRAM SUPPORT	25,000
GREATER MIAMI JEWISH FEDERATION 4200 BISCAYNE BLVD MIAMI,FL 33137	NONE	PC	PROGRAM SUPPORT	254,355
THE MOOG CENTER FOR DEAF EDUCATION 12300 SOUTH FORTY DRIVE ST LOUIS,MO 63141	NONE	PC	PROGRAM SUPPORT	2,000
MAYO CLINIC 200 FIRST STREET SW ROCHESTER,MN 55905	NONE	PC	program support	10,000
UNITED WAY OF MIAMI 3250 SOUTHWEST THIRD AVENUE MIAMI,FL 33129	NONE	PC	PROGRAM SUPPORT	126,500
DANA FARBER CANCER INSTITUTE 450 BROOKLINE AVENUE BOSTON, MA 02215	NONE	PC	PROGRAM SUPPORT	10,000
CLEVELAND ORCHESTRA MIAMI 1444 BISCAYNE BLVD MIAMI,FL 33132	NONE	PC	PROGRAM SUPPORT	75,000
BAPTIST HEALTH FOUNDATION 6855 RED ROAD CORAL GABLES,FL 33143	NONE	PC	program support	10,000
ALBANY MEDICAL CENTER FOUNDATION 43 NEW SCOTLAND AVENUE ALBANY, NY 12208	NONE	PC	PROGRAM SUPPORT	10,000
ADRIENNE ARSHT CTR FOR PERFORMING A 1300 BISCAYNE BLVD MIAMI,FL 33132	NONE	PC	program support	5,000
ARTHUR I MEYER JEWISH ACADEMY 5225 HOOD ROAD PALM BEACH GARDENS,FL 33418	NONE	PC	PROGRAM SUPPORT	3,500
MIAMI MUSIC PROJECT 2125 BISCAYNE BLVD SUITE 215 MIAMI,FL 33137	NONE	PC	program support	2,500
HARVARD MEDICAL SCHOOL 401 PARK DRIVE SUITE 22 WEST BOSTON, MA 02215	NONE	PC	PROGRAM SUPPORT	2,500
RUSSELL SAGE COLLEGE 65 1ST STREET TROY,NY 12180	NONE	PC	PROGRAM SUPPORT	2,500
NEW WORLD SYMPHONY 500 17th street miami beach,FL 33139	NONE	PC	PROGRAM SUPPORT	2,500
Total			▶ 3a	824,000

Form 990PF Part XV Line 3 - Gra	ants 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				
PEREZ ART MUSEUM 1103 Biscayne Blvd miami,FL 33132	NONE	PC	PROGRAM SUPPORT	81,750
ASPEN MUSIC FESTIVAL 225 MUSIC SCHOOL ROAD ASPEN,CO 81611	NONE	PC	PROGRAM SUPPORT	8,100
THE ASPEN INSTITUTE SOCIETY OF FELL 1000 NORTH THIRD STREET ASPEN,CO 81611	NONE	PC	PROGRAM SUPPORT	3,500
ASPEN JEWISH CONGREGATION 0077 MEADOWOOD DRIVE ASPEN,CO 81611	NONE	PC	PROGRAM SUPPORT	5,100
TEMPLE BETH AM 5950 KENDALL DRIVE PINECREST,FL 33156	NONE	PC	PROGRAM SUPPORT	15,495
WILLIAMS COLLEGE HOPKINS HALL 880 MAIN STREET WILLIAMSTOWN, MA 01267	NONE	PC	PROGRAM SUPPORT	10,000
CONGREGATION BETH ISRAEL 53 LOIS STREET NORTH ADAMS,MA 01247	NONE	PC	PROGRAM SUPPORT	1,000
WASHINGTON UNIVERSITY 1 BROOKINGS DRIVE ST LOUIS,MO 63130	NONE	PC	PROGRAM SUPPORT	5,000
TEMPLE JUDEA 311 HOOD ROAD PALM BEACH GARDENS,FL 33410	NONE	PC	PROGRAM SUPPORT	5,000
TEMPLE BETH EL OF BOCA RATON 333 SW 4TH AVENU BOCA RATON,FL 33432	NONE	PC	PROGRAM SUPPORT	2,500
EARLY CHILDHOOD INITIATIVE FOUNDATI 3250 SW 3RD AVENUE MIAMI,FL 33129	NONE	PC	PROGRAM SUPPORT	5,000
THE GOOD GOVERNMENT INITIATIVE 1320 S DIXIE HIGHWAY SUITE 911 CORAL GABLES,FL 33146	NONE	PC	PROGRAM SUPPORT	1,000
ASPEN COMMUNITY FOUNDATION 110 EAST HALLAM STREET SUITE 126 ASPEN,CO 81611	NONE	PC	PROGRAM SUPPORT	2,600
AMERICAN JEWISH COMMITTEE 9200 SOUTH DADELAND BLVD SUITE 50 MIAMI,FL 33156	NONE	PC	PROGRAM SUPPORT	4,100
MCCJ 150 SE 2 AVENUE SUITE 914 MIAMI,FL 33131	NONE	PC	PROGRAM SUPPORT	700
Total			▶ 3a	824,000

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	o. cubcumua comanbuca			
FUNDING ARTS NETWORK 111 NW 1ST STREET SUITE 625 MIAMI,FL 33128	NONE	PC	PROGRAM SUPPORT	1,000
ANDERSON RANCH ARTS CENTER PO BOX 5598 GNOWMASS VILLAGE,CO 81615	NONE	PC	PROGRAM SUPPORT	5,300
ANTI-DEFAMATION LEAGUE 521 NW 53rd Street Suite 450 3oca Raton,FL 33487	NONE	PC	Program Support	15,000
JEWISH FEDERATION OF PALM BEACH COU 4601 Community Drive West Palm Beach,FL 33417	NONE	PC	PROGRAM SUPPORT	35,000
Boys Girls Clubs of Palm Beach Coun 800 Northpoint Parkway Suite 204 West Palm Beach,FL 33407	NONE	PC	PROGRAM SUPPORT	2,500
JNIVERSITY OF MIAMI MEDICAL SCHOOL PO Box 016960R-100 Miami,FL 33101	NONE	PC	PROGRAM SUPPORT	10,000
ASPEN SAN FE BALLET D245 Sage Way Aspen,CO 81611	NONE	PC	PROGRAM SUPPORT	1,000
MIAMI CITY BALLET 2200 Liberty Avenue Miami Beach,FL 33139	NONE	PC	PROGRAM SUPPORT	1,000
FROST MUSEUM OF SCIENCE 1040 Biscayne Blvd Suite 400 Miami,FL 33132	NONE	PC	PROGRAM SUPPORT	26,000
JNIVERSITY OF MIAMI HILLEL 1100 Standord Drive Coral Gables,FL 33146		PC	program support	10,000
DANA FARBERJIMMY FUND Pan Mass Challenge77 Fourth Avenue Needham,MA 02494	NONE	PC	PROGRAM SUPPORT	1,000
INSTITUTE OF CONTEMPORARY ART 4040 NE 2nd Ave Miami,FL 33137	NONE	PC	PROGRAM SUPPORT	5,000
MIAMI CHILDRENS INITIATIVE 2525 NW 62nd Street 4th Floor Miami, FL 33147	NONE	PC	PROGRAM SUPPORT	5,000
EQUAL JUSTICE INITIATIVE 122 Commerce Street Montgomery,AL 36104	NONE	PC	PROGRAM SUPPORT	3,500
DOCTORS WITHOUT BORDERS 333 Seventh Avenue 2nd Floor New York, NY 10001	NONE	PC	PROGRAM SUPPORT	3,000

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

7.500

824,000

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

	or substantial contributor			
a Paid during the year				
BOYS GIRLS CLUB OF	NONE	PC	PROGRAM SUPPORT	

or substantial contributor

Name and address (home or business)

SOUTHWESTERN CT PO Box 1849		
New London, CT 06320		

efile GRAPHIC print - D	O NOT PROCESS	As Filed Data -		[DLN: 93491320004496		
TY 2015 Accounting Fees Schedule							
	Name: N	MORTON & HELEN	I YULMAN	CHARITABLE TRUS	Т		
	EIN: 14-6015572						
	Software ID: 1	15000324					
Soft	Software Version: 2015v2.0						
Category	Amount	Net Invest	l l	Adjusted Net	Disbursements for		

Software version: 2015V2.0						
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes		
JP MORGAN-TAX PREP	2,794	1,397	0	1,397		

efile GRAPHIC print - DO NOT PROCESS As Filed Data - DLN: 93491320004496						
TY 2015 Investments Corporate Bonds Schedule						
Name:	MORTON & HELEN YULMA	AN CHARITABLE TRUST	-			
EIN:	14-6015572					
Software ID:	15000324					
Software Version:	2015v2.0					
Name of Bond	I	End of Year Book Value	End of Year Fair Market Value			
state of israel bonds		60,000	60,000			

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	D	LN: 93491320004496			
TY 2015 Investments Corporate Stock Schedule						
Name:	MORTON & HELEN YULMA	AN CHARITABLE TRUST	-			
EIN:	14-6015572					
Software ID:	15000324					
Software Version:	2015v2.0					
Name of Stoc	k	End of Year Book Value	End of Year Fair Market Value			
corporate stocks		4,248,351	5,819,621			

efile GRAPHIC print - DO NOT PROCESS As Filed Data - DLN: 93491320004496						
TY 2015 Investments - Other Schedule						
Name:	MORTON & HELE	N YULMAN CH	ARITABLE TRUST			
EIN:	IN: 14-6015572					
Software ID:	15000324					
Software Version:	Software Version: 2015v2.0					
Category/ Item	List	ed at Cost or FMV	Book Value	End of Year Fair Market Value		
HEDGE FUNDs	AT C	OST	4,435,141	5,960,918		
PARTNERSHIPS	AT C	OST	969,853	706,225		

efile GRAPHIC print - DO NO	T PROCESS	As Filed Data -		DL	N: 93491320004496
TY 2015 Legal Fees S	chedule				
	Name:	MORTON & HELEI	N YULMAN (CHARITABLE TRUST	
	EIN:	14-6015572			
Soft	tware ID:	15000324			
Software Version: 2015v2.0					
Category	Атош	nt Net In	estment	Adjusted Net	Dishursements for

Colonal Colonal 2013/2.0						
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes		
LAVELLE & FINN, LLP	6,250	3,125	0	3,125		

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN: 93491320004496		
TY 2015 Other Decreases Schedule					
Name:	MORTON & HELEN	I YULMAN CHARITABLE TR	UST		
EIN:	14-6015572				
Software ID:	15000324				
Software Version:	2015v2.0				
Description Amount					
PRIOR PERIOD ADJ			158,352		

TY 2015 Other Expenses Schedule						
Name:	: MORTON & HELEN YULMAN CHARITABLE TRUST					
EIN:	: 14-6015572					
Software ID:	Software ID: 15000324					
Software Version:	2015v2.0					
					1	

DLN: 93491320004496

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

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
PASSTHROUGH ENTITY OTHER	1,122			

efile GRAPHIC print - DO NOT PROCESS	As Filed D	ata -	DLN	: 93491320004496	
TY 2015 Other Income Schedu	ıle				
Name:	Name: MORTON & HELEN YULMAN CHARITABLE TRUST				
EIN:	: 14-6015572				
Software ID:	: 15000324				
Software Version:	2015v2.0				
Description		Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income	
ORD INCOME-PARTNERSHIPS		6,440	6,440		

1,218

Other Investment Income

173

TY 2015 Other Professional Fees Schedule	

Name: MORTON & HELEN YULMAN CHARITABLE TRUST

DLN: 93491320004496

EIN: 14-6015572

Software ID: 15000324

Software Version: 2015v2.0

FUNDS/PARTNERSHIPS

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

Software version: 2013v2.0				
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
JPM CUSTODY FEE	982	982	0	0
JPM EAGLE	15,175	15,175	0	0
JPM GARDNER RUSSO	21,794	21,794	0	0
LORELEI PARTNERS LLC	44,713	44,713	0	0
NORTHERN TRUST CUSTODY FEES	15,508	15,508	0	0
THROUGH HEDGE	47,669	47,669	0	0

efile GRAPHIC print - DO NOT PROCESS	S As Filed Data - DLN: 93491320004496			
TY 2015 Taxes Schedule				
Name:	MORTON	N & HELEN YULMAN	CHARITABLE TRUST	
EIN:	: 14-6015572			
Software ID:	: 15000324			
Software Version: 2015v2.0				
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
2014 FEDERAL EXCISE TAX	6,716			
2014 FEDERAL UBTI TAX	13,250			
Foreign Tax	8,802	8,802		
MISC STATE TAX WITHHELD- PARTNERSHIPS	1,830			

14,492

prior year Excise Tax refunded