

### 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



# Form **990-PF**Department of the Treasury

EXTENDED TO AUGUST 15, 2016
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 separate instructions is at www.lrs.gov/form990pf.

OMB No. 1545-0052

2015

Open to Public Inspection

For calendar year 2015 or tax year beginning and ending Name of foundation A Employer identification number WEISS FAMILY FOUNDATION (F/K/A SAY YES TO EDUCATION FOUNDATION) 20-8916545 Boom/suite B Telephone number Number and street (or P O box number if mail is not delivered to street address 860-240-8900 C/O GEORGE WEISS ASSOC., ONE STATE ST. City or town, state or province, country, and ZIP or foreign postal code C If exemption application is pending, check here HARTFORD, CT 06103 G Check all that apply: Initial return Initial return of a former public charity D 1. Foreign organizations, check here Final return Amended return Foreign organizations meeting the 85% test, check here and attach computation X Name change Address change X Section 501(c)(3) exempt private foundation H Check type of organization: E If private foundation status was terminated Section 4947(a)(1) nonexempt charitable trust \_\_\_\_\_ Other taxable private foundation under section 507(b)(1)(A), check here I Fair market value of all assets at end of year J Accounting method: F If the foundation is in a 60-month termination Other (specify) (from Part II, col. (c), line 16) under section 507(b)(1)(B), check here 48,632,233. (Part I, column (d) must be on cash basis) ▶\$ Part I Analysis of Revenue and Expenses (d) Disbursements (c) Adjusted net (a) Revenue and (b) Net investment (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a)) charitable purposes (cash basis only) expenses per books income ıncome 3,420,000 N/A Contributions, gifts, grants, etc., received if the foundation is not required to attach Sch. B. Interest on savings and temporary cash investments 1,331 1,331 STATEMENT 151 STATEMENT 4 Dividends and interest from securities 5a Gross rents b Net rental income or (loss) 1,506,465 6a Net gain or (loss) from sale of assets not on line 10 b Gross sales price for all assets on line 6a 24,560,279. 1,506,465 7 Capital gain net income (from Part IV, line 2) 8 Net short-term capital gain Income modifications 10a Gross sales less returns and allowances b Less Cost of goods sold c Gross profit or (loss) STATEMENT 118,016. 41,201 11 Other income 5,045,963 549,148 Total. Add lines 1 through 11 403,000. 403,000. 13 Compensation of officers, directors, trustees, etc 14 Other employee salaries and wages 32,900. 43,342 0 15 Pension plans, employee benefits 30,888 30,888. 0 . 16a Legal fees STMT 5 5,000. STMT 5,000 **b** Accounting fees c Other professional fees 0 0. 634 17 Interest 68,423 1,666. 21,399. 18 Taxes STMT 6 19 Depreciation and depletion 20 Occupancy 20,579 0 . 20,464. 21 Travel, conferences, and meetings 22 Printing and publications 7,778. .778 STMT 7 0 23 Other expenses 24 Total operating and administrative <u>579,644</u> 1,666 <u>521,429.</u> expenses. Add lines 13 through 23 5,219,875 5,219,875. Contributions, gifts, grants paid Total expenses and disbursements. 5,799,519 5,741,304. 1,666 Add lines 24 and 25 27 Subtract line 26 from line 12: -753,556 8 Excess of revenue over expenses and disbursements 1,547,482 b Net investment income (if negative, enter -0-) N/A C Adjusted net income (if negative, enter -0-)

Form **990-PF** (2015)

LHA For Paperwork Reduction Act Notice, see instructions.

WEISS FAMILY FOUNDATION

For	m 99		PARTICION FOUNDATIO		0-8916545 Page 2
P	art	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year (a) Book Value	(b) Book Value	nd of year (c) Fair Market Value
_	1	Cash - non-interest-bearing	13,603,267.	7,329,85	
			13,003,207.	1,329,03	7,323,030.
		Savings and temporary cash investments  Accounts receivable ► 151.			
	3		•	1 5	1 1 1 1 1 1
		Less; allowance for doubtful accounts		15	1. 151.
	4	Pledges receivable ►			
		Less: allowance for doubtful accounts ▶			
		Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons			
	7	Other notes and loans receivable	į		
		Less: allowance for doubtful accounts ▶			
ţ	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			
ĕ	10a	Investments - U.S. and state government obligations			
	Ь	Investments - corporate stock STMT 9	0.	779,32	0. 779,320.
		Investments - corporate bonds			
		Investments - land, buildings, and equipment, basis		<del></del>	
	''	Less accumulated depreciation			
	12	Investments - mortgage loans		<del></del>	
	13	Investments - other STMT 10	37,364,776.	40,522,90	6. 40,522,906.
		Land, buildings, and equipment: basis	37,301,7700	10,022,00	10/322/3001
	' '	Less accumulated depreciation			
	45	Other assets (describe			
	l .	Total assets (to be completed by all filers - see the			<del>-</del>
	סו	, , ,	50,968,043.	48,632,23	3. 48,632,233.
_	47	Instructions. Also, see page 1, item I)	79,269.	22,80	
		Accounts payable and accrued expenses Grants payable	13,203.	22,00	<u> </u>
	18				<del> </del>
Liabilities	19	Deferred revenue			
≣	20	Loans from officers, directors, trustees, and other disqualified persons		<del> </del>	_
Ŀ	21	Mortgages and other notes payable			_
	22	Other liabilities (describe )			
	23	Total liabilities (add lines 17 through 22)	79,269.	22,80	2.
_	20	Foundations that follow SFAS 117, check here	, , , , , ,		<del></del>
		and complete lines 24 through 26 and lines 30 and 31.			
es	24	Unrestricted	50,888,774.	48,609,43	1.
JE C	25	Temporarily restricted	30,000,7711	10/005/10	
3ai	26	Permanently restricted		-	<del> </del>
or Fund Balances	20	Foundations that do not follow SFAS 117, check here			
Ē		and complete lines 27 through 31			
	27	Capital stock, trust principal, or current funds			
Assets	l	Paid-in or capital surplus, or land, bldg., and equipment fund			-
ISS	28	Retained earnings, accumulated income, endowment, or other funds			-
Net/	29	Total net assets or fund balances	50,888,774.	48,609,43	1
Z	30	I Otal liet 499et9 Of Initia parallees	30,000,774.	40,000,40	<u> </u>
	31_	Total liabilities and net assets/fund balances	50,968,043.	48,632,23	3.
ГР	art	III Analysis of Changes in Net Assets or Fund B	alances		
=			<del>.</del>	<del></del>	
1		I net assets or fund balances at beginning of year - Part II, column (a), line	บบ		1 50 999 774
_	•	st agree with end-of-year figure reported on prior year's return)			1 50,888,774.
		r amount from Part I, line 27a			$\begin{vmatrix} 2 & -753,556 \\ 2 & 0 \end{vmatrix}$
3		r increases not included in line 2 (itemize)	·		3 0.
		lines 1, 2, and 3	ann an		4 50,135,218.
		eases not included in line 2 (itemize)	***	ATEMENT 8	5 1,525,787. 6 48,609,431.
6	ı o <u>ta</u>	I net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	numm (D), ime 30		<del></del>
					Form <b>990-PF</b> (2015)

(F/K/A SAY YES TO EDUCATION FOUNDATION) 20-8916545 Page 3

(a) List and descri	the Losses for Table be the kind(s) of property ehouse; or common stock	sold (e.g., real estate,		) How aco P - Purch D - Dona	iase '	e) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a DEUTSCHE BANK						ARIOUS	VARIOUS
b							
<u>.c</u>							
d			_				<u> </u>
e		····					<u> </u>
(e) Gross sales price	(f) Depreciation allow (or allowable)	plus e	st or other basis expense of sale			(h) Gain or (los (e) plus (f) minus	s (g)
a 24,560,279.		2	<u>3,053,814</u>	•			1,506,465
b		· · · · · · · · · · · · · · · · · · ·					
С			<u> </u>				··
d	<del> </del>						
<u>e</u>			10/04/00				
Complete only for assets showing				4		lains (Col. (h) gai k), but not less th	
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69		cess of col. (1)		i	osses (from col.	(h))
a							1,506,465
b				<u> </u>	<u>.</u>		
С			·····			<del> </del>	
d		<u> </u>					
e				1 ,			
	∫ If gain,	also enter in Part I, line	7				
Capital gain net income or (net cap	ortal loss) 🔪 If (loss)	, enter -0- ın Part İ, lıne	·7 )	2			1,506,465
Net short-term capital gain or (loss	s) as defined in sections 1:	222(5) and (6):	,	.			
If gain, also enter in Part I, line 8, o	olumn (c).			<b>)</b>			_
Part V Qualification U	nder Section 4940	(-) ( D1	N	3	A B	N/2	A
/as the foundation liable for the secting a section of the section	fy under section 4940(e).	Do not complete this pa	art.				Yes X No
Enter the appropriate amount in e	ach column for each year;		Tore making any entr	ies.			(4)
(a) Base period years Calendar year (or tax year beginnin	g in) Adjusted qual	(b) lifying distributions	Net value of noncl			Dıstr (col. (b) d	(d) ibution ratio ivided by col. (c))
2014		<u>8,361,869.</u>			1,931.		.16885
2013		<u>6,935,379.</u>			<u>2,950.</u>		.20881
2012		8,136,469.			<u>6,560.</u>	<u> </u>	.31737
2011		5,302,832.			3,887.		.19925
2010		7,687,150.	2	3,44	0,27 <b>4.</b>		.32794
						_	1 00004
? Total of line 1, column (d)						2	1.22224
3 Average distribution ratio for the 5		the total on line 2 by 5,	or by the number of	years		_	24444
the foundation has been in existen	ce if less than 5 years					3	.24444
Enter the net value of noncharitable	e-use assets for 2015 fror	m Part X, line 5				4	50,422,471
Multiply line 4 by line 3						5	12,325,723
6 Enter 1% of net investment incom	e (1% of Part I, line 27b)					6	15,475
7 Add lines 5 and 6						7	12,341,198
3 Enter qualifying distributions from	Part XII, line 4					8	5,741,304
If line 8 is equal to or greater than See the Part VI instructions.	line 7, check the box in Pa	irt VI, line 1b, and comp	plete that part using a	1% tax r	ate.		

Form **990-PF** (2015)

WEISS 'FAMILY FOUNDATION (F/K/A SAY YES TO EDUCATION FOUNDATION) <u>20-8916545</u> Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see instructions 1a Exempt operating foundations described in section 4940(d)(2), check here \( \bigs \) and enter "N/A" on line 1. Date of ruling or determination letter: (attach copy of letter if necessary-see instructions) b Domestic foundations that meet the section 4940(e) requirements in Part V, check here 🕨 📖 and enter 1% 30,950. of Part I, line 27b c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b). 2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 3 4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-Credits/Payments: 27,725. a 2015 estimated tax payments and 2014 overpayment credited to 2015 6a b Exempt foreign organizations - tax withheld at source 6b 5,000 c Tax paid with application for extension of time to file (Form 8868) 6c d Backup withholding erroneously withheld 7 Total credits and payments. Add lines 6a through 6d 32,725. 8 Enter any penalty for underpayment of estimated tax. Check here X if Form 2220 is attached Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed 9 731 10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 10 11 Enter the amount of line 10 to be: Credited to 2016 estimated tax Part VII-A | Statements Regarding Activities Yes No 1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? 1a Х b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definition)? 1b X If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities X c Did the foundation file Form 1120-POL for this year? 1c d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: (1) On the foundation. > \$ 0 • (2) On foundation managers. ► \$ e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. > \$ X 2 Has the foundation engaged in any activities that have not previously been reported to the IRS? 2 If "Yes," attach a detailed description of the activities 3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes X 3 4a Did the foundation have unrelated business gross income of \$1,000 or more during the year? X 4a b If "Yes," has it filed a tax return on Form 990-T for this year? X 4h X 5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? If "Yes," attach the statement required by General Instruction T. 6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: · By language in the governing instrument, or By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument? X X 7 Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV

Form **990-PF** (2015)

10

Х

CT

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

of each state as required by General Instruction G? If "No," attach explanation

b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)

year 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)? If "Yes," complete Part XIV

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

9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar

Form **990-PF** (2015)

X

3b

4a

Yes X No

N/A

3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time

4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?

Form 4720, to determine if the foundation had excess business holdings in 2015.)

had not been removed from jeopardy before the first day of the tax year beginning in 2015?

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,

b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that

during the year?

WEISS FAMILY FOUNDATION			00 0015		_
Form 990-PF (2015) (F/K/A SAY YES TO EDUCAT			<u>20-89165</u>	45	Page 6
Part VII-B   Statements Regarding Activities for Which I	Form 4/20 May Be F	Required (contin	ued)		
5a During the year did the foundation pay or incur any amount to:					
(1) Carry on propaganda, or otherwise attempt to influence legislation (section			es X No		
(2) Influence the outcome of any specific public election (see section 4955); of	or to carry on, directly or indire	• • • • • • • • • • • • • • • • • • • •			ŀ
any voter registration drive?	_		es X No		
(3) Provide a grant to an individual for travel, study, or other similar purposes		Y•	es LX No		
(4) Provide a grant to an organization other than a charitable, etc., organization	n described in section				
4945(d)(4)(A)? (see instructions)			es X No		
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or f				
the prevention of cruelty to children or animals?			es X No		
<b>b</b> If any answer is "Yes" to 5a(1)-(5), did <b>any</b> of the transactions fail to qualify unit		n Regulations	_		İ
section 53.4945 or in a current notice regarding disaster assistance (see instru	•		N/A	5b	<del>                                     </del>
Organizations relying on a current notice regarding disaster assistance check h				İ	
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption f				İ	1
expenditure responsibility for the grant?	N	Γ/A	es L No		1
If "Yes," attach the statement required by Regulations section 53.494	5-5(d).				
<b>6a</b> Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums on				
a personal benefit contract?		Ye	es 🗶 No		ļ
<b>b</b> Did the foundation, during the year, pay premiums, directly or indirectly, on a p	personal benefit contract?			6b	<u> </u>
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 X No					
b If "Yes," did the foundation receive any proceeds or have any net income attribu	<del> </del>			7b	
Part VIII Information About Officers, Directors, Trust Paid Employees, and Contractors	ees, Foundation Ma	nagers, Highly	y		
1 List all officers, directors, trustees, foundation managers and their		(c) Compensation	(d) Contributions to	7-7-	
(a) Name and address	(b) Title, and average hours per week devoted	(If not paid,	(d) Contributions to employee benefit plans and deferred	accou	xpense nt, other
	to position	enter -0-)	compensation	allov	vances
GEORGE A. WEISS	TRUSTEE			1	
7252 FISHER ISLAND DRIVE	0.00			1	•
FISHER ISLAND, FL 33109	2.00	0.	0.		0.
	EXECUTIVE DIR	ECTOR			
320 PARK AVE, 20TH FLOOR	40.00	015 000	20 100	00	001
NEW YORK, NY 10022	40.00	215,000.	32,199.	22,	<u>891.</u>
NORA SABRIER	FUNDRAISING D	TRECTOR			
320 PARK AVE, 20TH FLOOR	40.00	100 000			<i>-</i> 4 2
NEW YORK, NY 10022	40.00	188,000.	11,143.		<u>643.</u>
2 Compensation of five highest-paid employees (other than those inc	luded on line 1) If none	enter "NONE "		L.,	
2 - Component of the figurest paid employees found than those me	(b) Title, and average	INCINE.	(d) Contributions to	(e) F	xpense
(a) Name and address of each employee paid more than \$50,000	hours per week	(c) Compensation	(d) Contributions to employee benefit plans and deferred	accou	xpense nt, other
NONE	devoted to position		compensation	anov	vances_
NONE					
	-				
	-				
				ĺ	
				<del> </del>	
				<del>                                     </del>	
Total number of other employees paid over \$50,000		L			
- Case Carrot of other omproject paid over woodood					v

Form **990-PF** (2015)

WEISS 'FAMILY FOUNDATION

Form 990-PF (2015) (F/K/A SAY YES TO EDUCATION FO	UNDATION) 20-	8916545 Page 7
Part VIII Information About Officers, Directors, Trustees, Foun Paid Employees, and Contractors (continued)	ndation Managers, Highly	
3 Five highest-paid independent contractors for professional services. If none, er	nter "NONE."	<del>- · · · · · · · · · · · · · · · · · · ·</del>
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
	-	
<del> </del>		
Total number of others receiving over \$50,000 for professional services  Part IX-A Summary of Direct Charitable Activities		<u>▶</u> 0
List the foundation's four largest direct charitable activities during the tax year. Include relevant st	tatistical information such as the	
number of organizations and other beneficiaries served, conferences convened, research papers	produced, etc.	Expenses
1 N/A		
2		-
<del>-</del>		-
3		
4		
	<del></del>	
Part IX-B Summary of Program-Related Investments		<u> </u>
Describe the two largest program-related investments made by the foundation during the tax year	r on lines 1 and 2.	Amount
1 <u>N/A</u>		
2		
All other program-related investments. See instructions.		
3	<del></del>	
		-

Form **990-PF** (2015)

Total. Add lines 1 through 3

(F/K/A SAY YES TO EDUCATION FOUNDATION) 20-8916545 Page 8 Form 990-PF (2015) Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.) Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes: 40,315,249. a Average monthly fair market value of securities 1a 10.875.077. **b** Average of monthly cash balances 1b c Fair market value of all other assets 1c 51,190,326. d Total (add lines 1a, b, and c) 1d e Reduction claimed for blockage or other factors reported on lines 1a and 0. 1c (attach detailed explanation) 1e Acquisition indebtedness applicable to line 1 assets 2 Subtract line 2 from line 1d 3 190 326. 767,855. Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions) 4 50,422,471. Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4 5 2,521,124. Minimum investment return. Enter 5% of line 5 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.) 2,521,124. Minimum investment return from Part X, line 6 30,950. Tax on investment income for 2015 from Part VI, line 5 11,066. b Income tax for 2015. (This does not include the tax from Part VI.) 2b c Add lines 2a and 2b 2c 42.016. 3 2.479.108. Distributable amount before adjustments. Subtract line 2c from line 1 Recoveries of amounts treated as qualifying distributions 4 0. 2,479,108. Add lines 3 and 4 5 Deduction from distributable amount (see instructions) 6 0. 479 108. Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1 Part XII Qualifying Distributions (see instructions) Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes: 5,741,304. a Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26 1a b Program-related investments - total from Part IX-B 1b Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes 2 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 5,741,304. Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4 4 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment

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

Form **990-PF** (2015)

5

6

income, Enter 1% of Part I, line 27b

Adjusted qualifying distributions. Subtract line 5 from line 4

4940(e) reduction of tax in those years.

Part XIII Undistributed Income (see instructions)

	(a)	(b)	(c)	(d)
	Corpus	Years prior to 2014	2014	2015
1 Distributable amount for 2015 from Part XI,				
line 7				2,479,108.
2 Undistributed income, if any, as of the end of 2015			· · · · · · · · · · · · · · · · · · ·	2,115,12001
a Enter amount for 2014 only			0.	
b Total for prior years:				
		0.		
3 Excess distributions carryover, if any, to 2015:			*	
a From 2010 6,656,860.				
b From 2011 4,087,366.				
c From 2012 7,077,947.				
d From 2013 5,980,216.				
e From 2014 6,196,579.				
f Total of lines 3a through e	29,998,968.			
4 Qualifying distributions for 2015 from				· · · · · · · · · · · · · · · · · · ·
Part XII, line 4: ►\$ 5,741,304.				
a Applied to 2014, but not more than line 2a			0.	
<b>b</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				2,479,108.
e Remaining amount distributed out of corpus	3,262,196.			
5 Excess distributions carryover applied to 2015	0.			0.
(If an amount appears in column (d), the same amount must be shown in column (a))				<del></del>
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	33,261,164.			
<b>b</b> Prior years' undistributed income. Subtract	33,201,104.			
line 4b from line 2b		0.		
c Enter the amount of prior years'		<u>~</u>		······································
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 instr.			0.	
f Undistributed income for 2015. Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2016				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	6,656,860.			
9 Excess distributions carryover to 2016.				<del></del>
Subtract lines 7 and 8 from line 6a	26,604,304.			
10 Analysis of line 9:				
a Excess from 2011 4,087,366.				
b Excess from 2012 7,077,947.				
c Excess from 2013 5,980,216.				
d Excess from 2014 6,196,579.				
e Excess from 2015 3, 262, 196.				
				Form 000-DE (2015)

Form **990-PF** (2015)

Page 11

Supplementary Information (continued) Part XV Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Foundation Purpose of grant or show any relationship to Amount any foundation manager or substantial contributor status of contribution Name and address (home or business) recipient a Paid during the year BETH DAVID CONGREGATION N/A PC TO SUPPORT THE 2625 SW 3RD AVENUE SYNAGOGUE. MIAMI, FL 33129 175,000. SAY YES TO EDUCATION, INC. N/A PC TO SUPPORT PROGRAMS ONE STATE STREET, FL 18 THAT PROMOTE POST-SECONDARY HARTFORD, CT 06103 EDUCATION FOR AT-RISK CHILDREN. 200,000. CHILDREN ACTION N/A NC TO SUPPORT PROGRAMS TO PROVIDE MEDICAL AID TO GENEVA SWITZERLAND CHILDREN 100,000. HILLEL INTERNATIONAL N/A PC TO SUPPORT PROGRAMS TO 800 8TH STREET NW ENGAGE JEWISH STUDENTS WASHINGTON DC 20001 ON CAMPUS. 25,000. SOLOMON SCHECHTER SCHOOL OF PC TO SUPPORT FIVE CHAI N/A WESTCHESTER PROGRAMS. 555 WEST HARTSDALE AVENUE HARTSDALE NY 10530 100 000. SEE CONTINUATION SHEET(S) Total ▶ 3a 5 219 875. b Approved for future payment NONE Total → 3b

(F/K/A SAY YES TO EDUCATION FOUNDATION) 20-8916545 Page 12

ter gross amounts unless otherwise indicated.	Unrelated bu	isiness income		by section 512, 513, or 514	(e)	
	(a) Business	(b) Amount	(C) Exclu- sion	(d) Amount	Related or exempt	
rogram service revenue:	code		code			
	_		<del>  -</del>			
	_		<del>   -</del>			
	_				<del></del>	
		·	<del>                                     </del>			
e						
f	_	<del></del>	<del>  -</del>	***		
g Fees and contracts from government agencies  Membership dues and assessments			<del>                                     </del>			
Interest on savings and temporary cash		· · · · · · · · · · · · · · · · · · ·				
investments			14	1,331.		
Dividends and interest from securities			14	151.	<del></del>	
Net rental income or (loss) from real estate:					<del></del>	
a Debt-financed property					<del></del>	
b Not debt-financed property						
Net rental income or (loss) from personal					····································	
property						
Other investment income						
Gain or (loss) from sales of assets other						
than inventory			18	1,506,465.		
Net income or (loss) from special events						
Gross profit or (loss) from sales of inventory						
Other revenue:						
a INCOME FROM INVESTMENT						
b PARTNERSHIPS	523000	76,815.	18	41,201.		
		*				
C						
c						
d		76,815.		1,549,148.		
de  Subtotal. Add columns (b), (d), and (e)  Total Add line 12, columns (b), (d), and (e)		76,815.		1,549,148.	1,625,9	
e Subtotal. Add columns (b), (d), and (e) Total Add line 12, columns (b), (d), and (e) se worksheet in line 13 instructions to verify calculations.	)			13	1,625,9	
e Subtotal. Add columns (b), (d), and (e) Total Add line 12, columns (b), (d), and (e) se worksheet in line 13 instructions to verify calculations.	)			13	1,625,9	
d e Subtotal. Add columns (b), (d), and (e) Total Add line 12, columns (b), (d), and (e) we worksheet in line 13 instructions to verify calculations.  art XVI-B Relationship of Activities  ne No. Explain below how each activity for which in	s to the Accom	plishment of Explored to plumn (e) of Part XVI-A	kempt	13 Purposes		
e Subtotal. Add columns (b), (d), and (e) Total Add line 12, columns (b), (d), and (e) se worksheet in line 13 instructions to verify calculations.  Part XVI-B Relationship of Activities	s to the Accom	plishment of Explored to plumn (e) of Part XVI-A	kempt	13 Purposes		
e Subtotal. Add columns (b), (d), and (e) Total Add line 12, columns (b), (d), and (e) we worksheet in line 13 instructions to verify calculations.  Part XVI-B Relationship of Activities  ine No. Explain below how each activity for which in	s to the Accom	plishment of Explored to plumn (e) of Part XVI-A	kempt	13 Purposes	1,625,9	
d e Subtotal. Add columns (b), (d), and (e) Total Add line 12, columns (b), (d), and (e) se worksheet in line 13 instructions to verify calculations. Part XVI-B Relationship of Activities ne No. Explain below how each activity for which in	s to the Accom	plishment of Explored to plumn (e) of Part XVI-A	kempt	13 Purposes		
d e Subtotal. Add columns (b), (d), and (e) Total Add line 12, columns (b), (d), and (e) se worksheet in line 13 instructions to verify calculations. Part XVI-B Relationship of Activities ne No. Explain below how each activity for which in	s to the Accom	plishment of Explored to plumn (e) of Part XVI-A	kempt	13 Purposes		
e Subtotal. Add columns (b), (d), and (e) Total Add line 12, columns (b), (d), and (e) we worksheet in line 13 instructions to verify calculations.  Part XVI-B Relationship of Activities  ine No. Explain below how each activity for which in	s to the Accom	plishment of Explored to plumn (e) of Part XVI-A	kempt	13 Purposes		
e Subtotal. Add columns (b), (d), and (e) Total Add line 12, columns (b), (d), and (e) we worksheet in line 13 instructions to verify calculations.  Part XVI-B Relationship of Activities  ine No. Explain below how each activity for which in	s to the Accom	plishment of Explored to plumn (e) of Part XVI-A	kempt	13 Purposes		
d e Subtotal. Add columns (b), (d), and (e) Total Add line 12, columns (b), (d), and (e) we worksheet in line 13 instructions to verify calculations.  art XVI-B Relationship of Activities  ne No. Explain below how each activity for which in	s to the Accom	plishment of Explored to plumn (e) of Part XVI-A	kempt	13 Purposes		
d e Subtotal. Add columns (b), (d), and (e) Total Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculations.  art XVI-B Relationship of Activities ne No. Explain below how each activity for which in	s to the Accom	plishment of Explored to plumn (e) of Part XVI-A	kempt	13 Purposes		
d e Subtotal. Add columns (b), (d), and (e) Total Add line 12, columns (b), (d), and (e) se worksheet in line 13 instructions to verify calculations. Part XVI-B Relationship of Activities ne No. Explain below how each activity for which in	s to the Accom	plishment of Explored to plumn (e) of Part XVI-A	kempt	13 Purposes		
d e Subtotal. Add columns (b), (d), and (e) Total Add line 12, columns (b), (d), and (e) se worksheet in line 13 instructions to verify calculations. Part XVI-B Relationship of Activities ne No. Explain below how each activity for which in	s to the Accom	plishment of Explored to plumn (e) of Part XVI-A	kempt	13 Purposes		
d e Subtotal. Add columns (b), (d), and (e) Total Add line 12, columns (b), (d), and (e) se worksheet in line 13 instructions to verify calculations. Part XVI-B Relationship of Activities ne No. Explain below how each activity for which in	s to the Accom	plishment of Explored to plumn (e) of Part XVI-A	kempt	13 Purposes		
e Subtotal. Add columns (b), (d), and (e) Total Add line 12, columns (b), (d), and (e) we worksheet in line 13 instructions to verify calculations.  Part XVI-B Relationship of Activities  ine No. Explain below how each activity for which in	s to the Accom	plishment of Explored to plumn (e) of Part XVI-A	kempt	13 Purposes		
e Subtotal. Add columns (b), (d), and (e) Total Add line 12, columns (b), (d), and (e) we worksheet in line 13 instructions to verify calculations.  Part XVI-B Relationship of Activities  ine No. Explain below how each activity for which in	s to the Accom	plishment of Explored to plumn (e) of Part XVI-A	kempt	13 Purposes		
d e Subtotal. Add columns (b), (d), and (e) Total Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculations.  Part XVI-B Relationship of Activities ine No. Explain below how each activity for which in	s to the Accom	plishment of Explored to plumn (e) of Part XVI-A	kempt	13 Purposes		
e Subtotal. Add columns (b), (d), and (e) Total Add line 12, columns (b), (d), and (e) we worksheet in line 13 instructions to verify calculations.  Part XVI-B Relationship of Activities  ine No. Explain below how each activity for which in	s to the Accom	plishment of Explored to plumn (e) of Part XVI-A	kempt	13 Purposes		
d e Subtotal. Add columns (b), (d), and (e) Total Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculations.  Part XVI-B Relationship of Activities ine No. Explain below how each activity for which in	s to the Accom	plishment of Explored to plumn (e) of Part XVI-A	kempt	13 Purposes		
d e Subtotal. Add columns (b), (d), and (e) Total Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculations.  Part XVI-B Relationship of Activities ine No. Explain below how each activity for which in	s to the Accom	plishment of Explored to plumn (e) of Part XVI-A	kempt	13 Purposes		

## Form 990-PF (2015) (F/K/A SAY YES TO EDUCATION FOUNDATION) 20-8916545 Page 13 Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

		rectly engage in any of the follow		` '	1 1	res	NO
		c)(3) organizations) or in section (		ations?			
	·	lation to a noncharitable exempt o	organization of:		$ \cdot $		
(1) Cas	sh				1a(1)		X
(2) Oth	ner assets				1a(2)		_X_
<b>b</b> Other tra	ansactions:						
(1) Sale	les of assets to a noncharita	ible exempt organization			1b(1)		X
(2) Pur	rchases of assets from a no	oncharitable exempt organization			1b(2)		X
(3) Rer	ntal of facilities, equipment,	or other assets			1b(3)		X
(4) Rer	ımbursement arrangements	<b>;</b>			1b(4)		X
( <b>5</b> ) Loa	ans or loan guarantees				1b(5)		X
(6) Per	rformance of services or me	embership or fundraising solicitat	tions		1b(6)		X
		ailing lists, other assets, or paid e			10		X X X X X
				ays show the fair market value of the goods, o		ets.	
				in any transaction or sharing arrangement, sl		,	
		other assets, or services received		,			
a) Line no	(b) Amount involved	(c) Name of noncharitat		(d) Description of transfers, transactions, and s	haring arra	ngeme	nts
		N/A		· · · · · · · · · · · · · · · · · · ·		_ <u></u>	
	1						
<del></del>			3"			1	
	<del></del>						
		<del>                                     </del>	·				
<del></del>		<del> </del>	* 1				
	<del> </del>	<del></del>					
			<u> </u>				
	· · · · · · · · · · · · · · · · · · ·						
2a is the fo	oundation directly or indirect	tly affiliated with, or related to, or	ie or more tax-exempt organiza	tions described			
ın sectio	on 501(c) of the Code (other	r than section 501(c)(3)) or in se	ction 527?		Yes	X	] No
b If "Yes,"	complete the following scho	edule.					
	4 3 34	nanization	4				
	(a) Name of org	junization	(b) Type of organization	(c) Description of relationsh	ıp		
	<del></del>	<u></u>	(b) Type of organization	(c) Description of relationsh	IP .		
	(a) Name of org	gunzation	(b) Type of organization	(c) Description of relationsh	ıp		
	<del></del>	ganzation	(b) Type of organization	(c) Description of relationsh	ıp		
	<del></del>	ganzation	(b) Type of organization	(c) Description of relationsh	ip		
	<del></del>	gamzation	(b) Type of organization	(c) Description of relationsh	IP		
Und	N/A				ID		
	N/A	that I have examined this return, include	ling accompanying schedules and st	atements, and to the best of my knowledge May	the IRS di	scuss ti	his r
Sign and	N/A	that I have examined this return, include	ling accompanying schedules and stantaxpayer) is based on all informat	atements, and to the best of my knowledge lon of which preparer has any knowledge return show	the IRS di n with the vn below (s	prepare	er (r)?
Sign and Here	N/A  der penalties of perjury, I declare I belief, it is true, correct, and con	that I have examined this return, including the Declaration of preparer (other the	ling accompanying schedules and strian taxpayer) is based on all informat	atements, and to the best of my knowledge ion of which preparer has any knowledge return show TRUSTEE	the IRS di	prepare	er
Sign and Here	N/A  der penalties of perjury, I declare I belief, it is true, correct, and con ignature of officer or trustee	that I have examined this return, including the Declaration of preparer (other the Declaration other the Decla	ling accompanying schedules and standard taxpayer) is based on all informat	atements, and to the best of my knowledge ion of which preparer has any knowledge return show TRUSTEE  Title	the IRS di n with the vn below (s	prepare	r )?
Sign and Here	N/A  der penalties of perjury, I declare I belief, it is true, correct, and con	that I have examined this return, including mplete. Declaration of preparer (other the	ling accompanying schedules and standard taxpayer) is based on all informat	atements, and to the best of my knowledge return show TRUSTEE  Titte  Check if PTIN	the IRS di n with the vn below (s	prepare	r )?
Sign Here	N/A  der penalties of perjury, I declare it belief, it is true, correct, and consignature of officer or trustee  Print/Type preparer's na	that I have examined this return, including the Declaration of preparer (other the Declaration of preparer (other the Declaration of preparer) arms.	ling accompanying schedules and standard taxpayer) is based on all informat	atements, and to the best of my knowledge non of which preparer has any knowledge return show the properties of the prop	the IRS din n with the en with the work (s	prepare see inst	r )?
Sign Here Sign Paid	der penalties of perjury, I declare it belief, it is true, correct, and congrature of officer or trustee  Print/Type preparer's na	that I have examined this return, including mplete. Declaration of preparer (other the same arms.)  Preparer's	ling accompanying schedules and state taxpayer) is based on all information and taxpayer.  Date	atements, and to the best of my knowledge ton of which preparer has any knowledge return show TRUSTEE  Title  Date Check If Self- employed POC	the IRS di n with the yn below (s Yes	prepare see inst	r )?
Sign Here Sign Sign Sign Sign Sign Sign Sign Sign	der penalties of perjury, I declare it belief, it is true, correct, and consignature of officer or trustee  Print/Type preparer's na  ROBERT SIE  Firm's name CIT	that I have examined this return, including the Declaration of preparer (other the Declaration of preparer (other the Declaration of preparer) arms.	ling accompanying schedules and standard taxpayer) is based on all informat	atements, and to the best of my knowledge for of which preparer has any knowledge return show TRUSTEE  Title  Date Check If PTIN self- employed  7 20 16 P0 0	the IRS di n with the yn below (s Yes	prepare see inst	er (r)?
Sign Here Sign Paid	In the penalties of perjury, I declare is belief, it is true, correct, and consider a print/Type preparer's national ROBERT SIE    ROBERT SIE   Firm's name   CIT	that I have examined this return, including preparer (other the state of the state	Date  COMPANY, LLP	atements, and to the best of my knowledge ion of which preparer has any knowledge  TRUSTEE  Title  Check	the IRS di n with the yn below (s Yes	prepare see inst	er (r)?
Sign Here Sign Sign Sign Sign Sign Sign Sign Sign	N/A  der penalties of perjury, I declare it belief, it is true, correct, and congrature of officer or trustee  Print/Type preparer's nate of the print/Type preparer's nate of	that I have examined this return, including property (other the state of the state	Ing accompanying schedules and stan taxpayer) is based on all informate Date  SCOMPANY, LLP  ANT AVENUE #33	atements, and to the best of my knowledge ion of which preparer has any knowledge  TRUSTEE  Title  Check	the IRS di n with the yn below (s Yes	prepare see inst	er (r)?
Sign Here Sign Sign Sign Sign Sign Sign Sign Sign	N/A  der penalties of perjury, I declare it belief, it is true, correct, and congrature of officer or trustee  Print/Type preparer's nate of the print/Type preparer's nate of	that I have examined this return, including preparer (other the state of the state	Ing accompanying schedules and stan taxpayer) is based on all informate Date  SCOMPANY, LLP  ANT AVENUE #33	atements, and to the best of my knowledge ion of which preparer has any knowledge  TRUSTEE  Title  Check	the IRS din n with the n with the yn below (s	prepare see inst	er tr)?

523622 11-24-15

### Schedule B

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

Department of the Treasury Internal Revenue Service

### **Schedule of Contributors**

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

OMB No 1545-0047

Name of the organization

WEISS FAMILY FOUNDATION

(F/K/A SAY YES TO EDUCATION FOUNDATION)

**Employer identification number** 

	(F/K/A SAY YES TO EDUCATION FOUNDATION)	20-8916545
Organization type (checl	k one):	
Filers of:	Section:	
Form 990 or 990-EZ	501(c)( ) (enter number) organization	
	4947(a)(1) nonexempt charitable trust <b>not</b> 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	
	on is covered by the <b>General Rule</b> or a <b>Special Rule.</b> I (c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Ru	ile See instructions.
X For an organizat	tion filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling any one contributor. Complete Parts I and II See instructions for determining a contributor	
Special Rules		
sections 509(a)( any one contrib	tion described in section 501(c)(3) filing Form 990 or 990 EZ that met the 33 1/3% support (1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990 EZ), Part II, line 13, 16a, outor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount EZ, line 1 Complete Parts I and II.	or 16b, and that received from
year, total contr	tion described in section 501(c)(7), (8), or (10) filing Form 990 or 990·EZ that received from ributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educ of cruelty to children or animals. Complete Parts I, II, and III.	
year, contribution is checked, ente purpose Do not	tion described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from ons exclusively for religious, charitable, etc., purposes, but no such contributions totaled mer here the total contributions that were received during the year for an exclusively religious to complete any of the parts unless the <b>General Rule</b> applies to this organization because reable, etc., contributions totaling \$5,000 or more during the year	ore than \$1,000. If this box s, chantable, etc.,
but it <b>must</b> answer "No"	n that is not covered by the General Rule and/or the Special Rules does not file Schedule E 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 eet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).	

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2015)

Name of organization

WEISS FAMILY FOUNDATION

(F/K/A SAY YES TO EDUCATION FOUNDATION)

Employer identification number

20-8916545

Part I	Contributors (see instructions). Use duplicate copies of Part I if a	additional space is needed	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	GEORGE A WEISS 7252 FISHER ISLAND DRIVE FISHER ISLAND, FL 33109	\$ 3,420,000.	Person X Payroll  Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		<b>\$</b>	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		<b>\$</b>	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		<b>\$</b>	Person Payroll Noncash (Complete Part II for noncash contributions)

Name of organization

Employer identification number

WEISS FAMILY FOUNDATION

F/K/2	A SAY YES TO EDUCATION FOUNDATION)	20	)-8916 <u>5</u> 45
Part II	Noncash Property (see instructions). Use duplicate copies of Pa	art II if additional space is needed.	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received

Name of orga				Employer identification number				
	FAMILY FOUNDATION			00 0016545				
( F / K / A Part III	A SAY YES TO EDUCATION FO Exclusively religious, charitable, etc., contributed in the co	UNDATION ) tions to organizations described	in section 501(c)(7), (8), or	20-8916545 (10) that total more than \$1,000 for				
	the year from any one contributor. Complete colur	mns (a) through (e) and the follo	wing line entry. For organization	ns				
	completing Part III, enter the total of exclusively religious, ch. Use duplicate copies of Part III if additional s	aritable, etc., contributions of \$1,000 or	r less for the year (Enterthis info onc	e) • •				
(a) No.		pace is necaca						
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Desc	cription of how gift is held				
		•		**				
1		(e) Transfer of gif	ft					
	Transferee's name, address, and 2	ZIP + 4	Relationship of tra	nsferor to transferee				
(a) No.	<del> </del>							
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Desc	cription of how gift is held				
Parti								
		·		<del></del>				
	(e) Transfer of gift							
	· · · · · · · · · · · · · · · · · · ·							
	Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee							
(a) No.								
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Desc	cription of how gift is held				
raiti		<del></del>						
L								
	(e) Transfer of gift							
-	Transferee's name, address, and a	ZIP + 4	Relationship of tra	nsferor to transferee				
	· · ·		<del></del>					
			···					
(a) No.								
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Desc	cription of how gift is held				
		(e) Transfer of gif	ft					
-	Transferee's name, address, and a	ZIP + 4	Relationship of tra	nsferor to transferee				
ŀ			<del></del>					
ŀ								

Part XV Supplementary Information  3 Grants and Contributions Paid During the Ye	ear (Continuation)			
Recipient	If recipient is an individual,			
Name and address (home or business)	show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (name of business)	or substantial contributor	recipient		<u> </u>
ATLANTA PUBLIC SECTOR ALLIANCE	N/A	PC	TO SUPPORT OPERATIONS.	
542 MORELAND AVE SE				
ATLANTA GA 30316				25,000
FACING HISTORY AND OURSELVES	N/A	PC	TO SUPPORT PROGRAMS	
225 WEST 34TH STREET, SUITE 1416			THAT COMBAT RACISM AND	
NEW YORK, NY 10122			PREJUDICE AND NURTURE	
			DEMOCRACY,	25,000
PAJAMA PROGRAM	N/A	PC	TO SUPPORT PROGRAMS TO	
114 E 39TH STREET			PROVIDE PAJAMAS AND	
NEW YORK, NY 10016			BOOKS TO NEEDY	
	ļ		CHILDREN.	15,000
SEEDS OF PEACE	N/A	₽C	TO SUPPORT PROGRAMS	
370 LEXINGTON AVE., SUITE 401			THAT DEVELOP	
NEW YORK, NY 10017			LEADERSHIP SKILLS	
			REQUIRED TO ADVANCE	25 000
MAN AZERDODOL TELM ODERN	7/3	TO	LASTING PEACE.	25,000
THE METROPOLITAN OPERA	N/A	PC	TO SUPPORT PROGRAMS	
LINCOLN CENTER			FOR THE PURPOSE OF	
NEW YORK, NY 10023			SUSTAINING, ENCOURAGING, AND	
			PROMOTING MUSICAL ART.	500,000
UNIVERSITY OF PENNSYLVANIA	N/A	PC	TO SUPPORT	
3451 WALNUT ST., 433 FRANKLIN BUILDING			PROFESSORSHIPS FOR THE	
PHILADELPHIA, PA 19104			PERELMAN SCHOOL OF	
			MEDICINE,	2,500,000
UNIVERSITY OF PENNSYLVANIA	N/A	PC	TO SUPPORT UNIVERSITY	
3451 WALNUT ST., 433 FRANKLIN BUILDING			PROFESSORSHIPS.	
PHILADELPHIA, PA 19104				150,000
UNIVERSITY OF PENNSYLVANIA	N/A	PC	TO SUPPORT COLLEGIATE	
3451 WALNUT ST., 433 FRANKLIN BUILDING			ATHLETIC PROGRAMS.	
PHILADELPHIA PA 19104		ļ		627,375
	7/2	ng.	TO CUIDDONE TUE STATE	
UNIVERSITY OF PENNSYLVANIA	N/A	PC	TO SUPPORT THE PENN	
3451 WALNUT ST., 433 FRANKLIN BUILDING			CENTER FOR ORPHAN	
PHILADELPHIA, PA 19104			DISEASE RESEARCH AND	652 500
		<u> </u>	THERAPY.	652,500
UNIVERSITY OF PENNSYLVANIA	N/A	ÞC	TO SUPPORT	
3451 WALNUT ST., 433 FRANKLIN BUILDING			UNDERGRADUATE	
PHILADELPHIA, PA 19104		<u> </u>	SCHOLARSHIPS,	100,000
Total from continuation sheets				4 619 875

FORM 990-PF INTERE	ST ON SAVING	GS AND TE	<b>IPORARY</b>	CASH	INVESTMENTS	STATEMENT	1
SOURCE  BANK OF AMERICA  TOTAL TO PART I, LINE 3		REVI	(A) REVENUE PER BOOKS  1,331.		(B) INVESTMENT INCOME	(C) ADJUSTED NET INCOM	
					1,331.		
					1,331.		
FORM 990-PF	DIVIDENDS	AND INTE	REST FR	OM SEC	URITIES	STATEMENT	2
SOURCE	GROSS AMOUNT	CAPITAI GAINS DIVIDENI	R	(A) EVENUE R BOOK			
DEUTSCHE BANK	151.		0.	15	1. 15	51.	
TO PART I, LINE 4	151.		0.	15	1. 15	51.	
FORM 990-PF		OTHER :	INCOME			STATEMENT	3
DESCRIPTION			(A) REVEN PER BO	UE	(B) NET INVEST- MENT INCOME		
INCOME FROM INVESTM	SHIPS	IPS 118,016.		41,201			
TOTAL TO FORM 990-P	F, PART I,	LINE 11 =	11	8,016.	41,201		
FORM 990-PF		LEGA	L FEES			STATEMENT	4
DESCRIPTION		(A) EXPENSES PER BOOKS	NET I	B) NVEST- INCOME	(C) ADJUSTEI NET INCOM		
LEGAL RESEARCH AND EXAMINATION SUPPORT		30,888	•	0	•	30,8	88.
TO FM 990-PF, PG 1,	LN 16A	30,888	 ,	0	•	30,8	88.

FORM 990-PF	ACCOUNTI	NG FEES	STATEMENT 5		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITAI PURPOSI	
ACCOUNTING FEES	5,000.	0.		5,00	00.
TO FORM 990-PF, PG 1, LN 16B	5,000.	0.		5,00	00.
FORM 990-PF	TAX	ES		STATEMENT	6
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITAI PURPOSI	
EXCISE TAXES UNRELATED BUSINESS TAX FOREIGN TAX PAYROLL TAX	30,994. 11,257. 4,773. 21,399.	1,666.		21,3	0. 0. 0. 99.
TO FORM 990-PF, PG 1, LN 18	68,423.	1,666.		21,3	99.
FORM 990-PF	OTHER E	XPENSES		STATEMENT	7
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITAI PURPOSI	
OFFICE EXPENSE	7,778.	0.		7,778.	
TO FORM 990-PF, PG 1, LN 23	7,778.	0.		7,7	78.
FORM 990-PF OTHER DECREASE	ES IN NET AS	SETS OR FUND	BALANCES S	STATEMENT	8
DESCRIPTION				AMOUNT	
UNREALIZED LOSS ON INVESTMENT UNREALIZED GAIN ON MARKETABLE	1,355,113. 170,674.				
TOTAL TO FORM 990-PF, PART I	1,525,787.				

FORM 990-PF	CORPORATE STOCK		STATEMENT 9
DESCRIPTION		BOOK VALUE	FAIR MARKET VALUE
MARKETABLE SECURITIES	-	779,320.	779,320.
TOTAL TO FORM 990-PF, PART II, L	JINE 10B	779,320.	779,320.
FORM 990-PF O	OTHER INVESTMENTS		STATEMENT 10
DESCRIPTION	VALUATION METHOD	BOOK VALUE	FAIR MARKET VALUE
INVESTMENT IN PARTNERSHIP INVESTMENT IN FOREIGN CORPORATIO	FMV ONS FMV	18,230,985. 22,291,921.	18,230,985. 22,291,921.
TOTAL TO FORM 990-PF, PART II, L	INE 13	40,522,906.	40,522,906.