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Form **990-PF**

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

2015

OMB No 1545-0052

Department of the Treasury Internal Revenue Service

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Open to Public Inspection

Form 990-PF (2015)

	lendar year 2015, or tax year beginning		, and ending		
RICH	foundation ARD H. LASDON CHARITABLE TRU	JST		A Employer Identification number 47-6891419	
Number	and street (or P O box number if mail is not delivered to street ATERMARK ROAD	address) Room/suite		B Telephone number (see instructions) (914) 234-0551	
	wn, state or province, country, and ZIP or foreign postal code		·		Ξ
BEDE			10506	C If exemption application is pending, check here . ►	ل
G Cr	eck all that apply X Initial return	Initial return of a forme	er public charity	D 1 Foreign organizations, check here ▶	٦
	Final return Address change	Amended return		2 Foreign organizations meeting the 85% test, check	_
H Ch		Name change		here and attach computation	٦
пС	Section 4947(a)(1) nonexempt charitable tru	1(c)(3) exempt private fou	rivate foundation	E If private foundation status was terminated	_
I Fai		counting method X C	 , , ,	under section 507(b)(1)(A), check here >	٦
(fro	m Part II, column (c), line 16)	Other (specify)	asii	F If the foundation is in a 60-month termination	_
► :	9,076,662. (Part I,	, column (d) must be on c	ash basis)	F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here ▶	٦
Part		(a) Revenue and	(b) Net investmen		=
	Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions))	expenses per books	income	income (a) Disbursements for charitable purposes (cash basis only)	
	1 Contributions, gifts, grants, etc, received (attach schedule)	. 8,878,767.			
	2 Ck lifthe foundation is not required to attach Sch B				
	3 Interest on savings and temporary cash investments			1	i
	4 Dividends and interest from securities				-
	5 a Gross rents				7
	b Net rental income or (loss)				
R	6 a Net gain or (loss) from sale of assets not on line 10 b Gross sales price for all	·	· · · · · · · · · · · · · · · · · · ·		
E V	assets on line 6a				_
E N	7 Capital gain net income (from Part IV, line 2) 8 Net short-term capital gain				4
U	9 Income modifications	.			4
E	10 a Gross sales less returns and				┪
	allowances b Less Cost of	<u> </u>			_
	goods sold				_
	c Gross profit or (loss) (attach schedule)	·]	··-		_
	11 Outer meetine (attach scriedule)				
	12 Total. Add lines 1 through 11	8,878,767.			긕
	13 Compensation of officers, directors, trustees, etc				
	14 Other employee salaries and wages				_
	15 Pension plans, employee benefits				
A D	16a Legal fees (attach schedule)				_
M	b Accounting fees (attach sch)	CEIVED 7	· -		_
ON	C Other prof fees (attach sch)	20			_
O P E R A T	18 Taxes (attach schedule)(see instrs)	1 8 2016 O			_
RRA	19 Depreciation (attach	100			٦
A A	schedule) and depletion	O I III			
N V		GDEN, UI	<u> </u>		_
AE	21 Travel, conferences, and meetings				_
N X D P	23 Other expenses (attach schedule)				-
E		<u> </u>			
S E S	24 Total operating and administrative expenses Add lines 13 through 23 · · · · · ·				_
3	25 Contributions, gifts, grants paid				-
	26 Total expenses and disbursements				_
	Add lines 24 and 25				
	a Excess of revenue over expenses				
	and disbursements	8,878,767.			
	b Net investment income (if negative, enter -0-)				
	C Adjusted net income (if negative, enter -0-)				_

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7

Enter 1% of net investment income (1% of Part I, line 27b) . .

Add lines 5 and 6

Part VI instructions.

Enter qualifying distributions from Part XII, line 4

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the

Form	990-PF (2015) RICHARD H. LASDON CHARITABLE TRUST 47-68914	119		Р	age 4
Par			;)		
	Exempt operating foundations described in section 4940(d)(2), check here and enter 'N/A' on line 1				
•	Date of ruling or determination letter (attach copy of letter if necessary — see instrs)				
b	Domestic foundations that meet the section 4940(e) requirements in Part V,				
	check here . ▶ and enter 1% of Part I, line 27b			•	1
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	Add lines 1 and 2				<u>0.</u>
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) 4				
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0				<u>0.</u>
6	Credits/Payments:				
	2015 estimated tax pmts and 2014 overpayment credited to 2015				į
	Exempt foreign organizations — tax withheld at source				
	: Tax paid with application for extension of time to file (Form 8868) 6 c 0 .				İ
C	Backup withholding erroneously withheld				
7	Total credits and payments Add lines 6a through 6d				0.
8	Enter any penalty for underpayment of estimated tax. Check here				
9	Tax due If the total of lines 5 and 8 is more than line 7, enter amount owed				<u>0.</u>
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid				0.
11	Enter the amount of line 10 to be Credited to 2016 estimated tax Refunded 11				
Par	t VII-A Statements Regarding Activities				
1 a	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?		1 a	Yes	No X
t	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for the definition)?		1 b		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			<u>-</u>	
	Did the foundation file Form 1120-POL for this year?		1 c		X
	I Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year				<u> </u>
	(1) On the foundation · · · ▶ \$ (2) On foundation managers · · · · ▶ \$				
•	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on		1		
2	foundation managers • \$ Has the foundation engaged in any activities that have not previously been reported to the IRS?	-	2	~-	
2	If 'Yes,' attach a detailed description of the activities	· · · -			1
	•				
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	-	3		X
4.	a Did the foundation have unrelated business gross income of \$1,000 or more during the year?	`	4 a		X
	b If 'Yes,' has it filed a tax return on Form 990-T for this year?		4 b		<u> </u>
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	.	5		X
Ū	If 'Yes,' attach the statement required by General Instruction T	<u> </u>	_		
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? 	*	6	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		7	Х	
	Enter the states to which the foundation reports or with which it is registered (see instructions)	ľ			
	NY - New York	-			
ŀ	olf the answer is 'Yes' to line 7, has the foundation furnished a copy of Form 990-PF to the Altorney General (or designate) of each state as required by General Instruction G? If 'No,' attach explanation		8 b		
_		· '			$\vdash \neg$
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 year 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)? If 'Yes,' complete Part XIV		9		X
10	Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing their names and addresses	<u>.</u>	<u>1</u> 0	x	L
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Par	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		Х
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified pe advisory privileges? If 'Yes,' attach statement (see instructions)	rson had	12		Х
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption applic	cation?	13	Х	
14	Website address N/A The books are in care of TRUST Telephone Located at 68 WATERMARK ROAD BEDFORD NY ZIP + 4 ► Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 − Check here	no. (914)	234	_0 <u>5</u> 5	1
15	Section 4947(a)(1) progressing charitable trusts filing Form 990-PF in lieu of Form 1041 — Check here	10506			Т
	and enter the amount of tax-exempt interest received or accrued during the year	► 15			
16	At any time during calendar year 2015, did the foundation have an interest in or a signature or other authority bank, securities, or other financial account in a foreign country?	overa	16	Yes	No X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If 'Yes,' enter the name of the foreign country				
Par	t VII-B Statements Regarding Activities for Which Form 4720 May Be Required				
	File Form 4720 If any item is checked in the 'Yes' column, unless an exception applies.			Yes	No
1 a	During the year did the foundation (either directly or indirectly):				
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	Yes X No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?	Yes X No			
	Take a Company of the	Yes X No			
		Yes X No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)?	Yes X No			
	(6) Agree to pay money or property to a government official? (Exception. Check 'No' if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days).	Yes X No			
t	olf any answer is 'Yes' to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations section-53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?		1 b		
	Organizations relying on a current notice regarding disaster assistance check here	► 🔲			
C	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2015?		1 c		Х
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 X No			
	If 'Yes,' list the years ► 20 _ , 20 _ , 20 , 20				
t	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer 'No' and attach statement — see instructions.))	2 b		
c	of the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.				
	► 20 ,20 ,2020				
3 a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?	Yes X No			
t	olf '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)		3 b		
4 a	Did the foundation invest during the year any amount in a manner that would recognize its				
	chantable purposes?		4 a		Х
t	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2015?		4 b	.—	х
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Part VII-B Statements Regarding Activit		n 4720 May Be Req	uired (continued)		· · · · · · · · · · · · · · · · · · ·			
5 a During the year did the foundation pay or incur a	•	40454 220						
(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?								
(3) Provide a grant to an individual for travel, stu	dy, or other similar purpo	oses?	· · · · Yes X	No				
(4) Provide a grant to an organization other than in section 4945(d)(4)(A)? (see instructions).	a charitable, etc, organi	zation described	· · · · Yes X	No				
(5) Provide for any purpose other than religious, educational purposes, or for the prevention of	, charitable, scientific, lite of cruelty to children or a	erary, or nımals?	Yes X	No				
b If any answer is 'Yes' to 5a(1)-(5), did any of the described in Regulations section 53 4945 or in a (see instructions)?	transactions fail to qualif current notice regarding	y under the exceptions disaster assistance		5b	_			
Organizations relying on a current notice regardi	ng disaster assistance ch	neck here	▶ []					
c If the answer is 'Yes' to question 5a(4), does the tax because it maintained expenditure responsib	foundation claim exemplifity for the grant?	tion from the	Yes	No				
If 'Yes,' attach the statement required by Regular								
6 a Did the foundation, during the year, receive any on a personal benefit contract?	funds, directly or indirect	ly, to pay premiums	· · · · Yes X	No				
b Did the foundation, during the year, pay premium	ns, directly or indirectly, o	on a personal benefit con	tract?	6b	X			
If 'Yes' to 6b, file Form 8870.			□v _{**} □	lata				
7 a At any time during the tax year, was the foundationb If 'Yes,' did the foundation receive any proceeds								
Part VIII Information About Officers, D					 i.			
and Contractors					, 			
1 List all officers, directors, trustees, foundation	·							
(a) Name and address	(b) Title, and average hours per week devoted to position	(c)Compensation (If not paid, enter -0-)	(d)Contributions to employee benefit plans and deferred compensation	(e) Expense other all	account, owances			
JEFFREY S. LASDON					-			
68 WATERMARK ROAD	TRUSTEE		-					
BEDFORD NY 10506		0.	0.		0.			
MARINA THOMAS								
332 E. 116TH ST., APT 2	TRUSTEE		0		0			
NEW YORK NY 10029		0.	0.		0.			
ROBERT G. GRAY								
36 TAYLOR DRIVE NJ 07006	TRUSTEE	0.	0.		0.			
W. CALDWELL NO 07000			<u> </u>					
Compensation of five highest-paid employee (a) Name and address of each employee		(c) Compensation	(d)Contributions to	(e) Expense	account			
paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) compensation	employee benefit plans and deferred compensation	other all	owances			
NONE								
								
								
Yatal aurabas of albert and leaves to the control of the control o			<u> </u>					
Total number of other employees paid over \$50,000 . BAA	TEEA0306 10/			Form 990-	None PF (2015)			
we we	1 E E A U 3 U 0			. 5 550	(=0.0)			

Form 990-PF (2015) RICHARD H. LASDON CHARITABLE TRUST Party III Information About Officers, Directors, Trustees, Found	47-689 dation Managers, Highly Paid E	
and Contractors (continued) 3 Five highest-paid independent contractors for professional services (see in	estructional If name enter /NONE /	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE	(b) Type of solvies	(o) compensation
		<u></u>
		!
Total number of others receiving over \$50,000 for professional services		None
Part IX A Summary of Direct Charitable Activities		
Let the foundations four largest direct checktohic estimates divine the torring a leaked relevant statistical in	aformation such as the number of	
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical in organizations and other beneficiaries served, conferences convened, research papers produced, etc.	mornation such as the number of	Expenses
1		
2		
²		1
3		<u></u>
		
4	·	
	·	
Part IX B: Summary of Program-Related Investments (see instruc	etions)	
Describe the two largest program-related investments made by the foundation during to	he tax year on lines 1 and 2.	Amount
'		1
		i I
2		
		1
All the second of the second o		
All other program-related investments. See instructions. 3		
·		
		ı -
Total. Add lines 1 through 3		
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Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years.

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

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0.

0.

0.

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Part XIII Undistributed Income (see instructions)

•		(a) Corpus	(b) Years prior to 2014	(c) 2014	(d) 2015
1 Distributable amount fo					27 252
2 Undistributed income, if any		<u> </u>			37,252.
a Enter amount for 2014					
b Total for prior years 20	•				***
3 Excess distributions carryov					
a From 2010	,				
b From 2011					
c From 2012					
d From 2013					
e From 2014					
f Total of lines 3a throug	h e				
4 Qualifying distributions	for 2015 from Part				
XII, line 4 [.] • \$	0.				
a Applied to 2014, but no	t more than line 2a				
 b Applied to undistributed (Election required — se 	I income of prior years e instructions)				
c Treated as distributions (Election required — se	out of corpus e instructions)				
d Applied to 2015 distribu	ıtable amount				
e Remaining amount dist	ributed out of corpus	0.			
5 Excess distributions carryov					
(If an amount appears i same amount must be	n column (a), the shown in column (a).)				· !
	, , ,			n	
6 Enter the net total of e indicated below:	each column as		-		
a Corpus Add lines 3f, 4c, and	d 4e Subtract line 5	0.			
b Prior years' undistribute line 4b from line 2b	ed income Subtract		0.		
c Enter the amount of pri	or years' undistributed				
income for which a noti been issued, or on which	ce of deficiency has				
	assessed				
d Subtract line 6c from lin	ne 6b Taxable				
amount - see instruction			0.		
e Undistributed income for 201	14 Subtract line 4a from				
line 2a Taxable amount — s	see instructions			0.	
f Undistributed income for	or 2015. Subtract lines				
4d and 5 from line 1 Th	nis amount must be				
7 Amounts treated as dis					37,252.
corpus to satisfy require					
section 170(b)(1)(F) or	4942(g)(3) (Election Instructions)				
•	· · · · · · · · · · · · · · · · · · ·				
8 Excess distributions car applied on line 5 or line	rryover from 2010 not 7 (see instructions)	0.			
9 Excess distributions	carryover to 2016.				1
	rom line 6a	0.			
10 Analysis of line 9 a Excess from 2011		1		İ	
b Excess from 2011	0.	}	l	}	
© Excess from 2013	0.				
d Excess from 2014	0.			Í	
e Excess from 2015	0.		Í	1	
- LA0033 (10(1) 20 13	<u> </u>		1	<u> </u>	

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Part XIV					N/A		
1 a If the foundation has received a ruling or determined is effective for 2015, enter the date of the ruling	rmination letter that ig	it is a private operat	ing foundation, and	the ruling			
b Check box to indicate whether the foundation	is a private operati	ng foundation descri	bed in section	4942(J)(3) or	4942(J)(5)		
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years				
income from Part I or the minimum investment return from Part X for	(a) 2015	(b) 2014	(c) 2013	(d) 2012	(e) Total		
each year listed		<u> </u>		 	·		
© Qualifying distributions from Part XII,							
line 4 for each year listed	<u>.</u>		<u> </u>	 			
for active conduct of exempt activities				ļ			
e Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c							
Complete 3a, b, or c for the alternative test relied upon							
a '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		1					
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					- · <u> =</u> = <u>-</u> : -		
(4) Gross investment income							
Part:XV: Supplementary Information (assets at any time during the			foundation had	d \$5,000 or more	in		
1 Information Regarding Foundation Manage		Structions.)			· · · · · · · · · · · · · · · · · · ·		
a List any managers of the foundation who have		than 2% of the total	contributions receive	ed by the foundation be	efore the		
close of any tax year (but only if they have con NONE	ntributed more than	\$5,000) (See section	on 507(d)(2).)				
b List any managers of the foundation who own	10% or more of the	e stock of a cornorate	ion (or an equally la	rge portion of the owner	ership of		
a partnership or other entity) of which the four NONE	ndation has a 10% o	or greater interest.	ion (o. a.i oqually ia	go portion of the own			
2 Information Described Co. 1917	014 1 0 1 1	landin -4- B					
2 Information Regarding Contribution, Grant Check here ☐ if the foundation only mak requests for funds. If the foundation makes git complete items 2a, b, c, and d	es contributions to	preselected charitat	ole organizations an				
a The name, address, and telephone number of	e-mail address of	the person to whom	applications should	be addressed			
JEFFREY S. LASDON, TRUSTEE							
68 WATERMARK ROAD							
BEDFORD b The form in which applications should be subj	NY 1050		4) 234-0551				
LETTER WITH CURRENT FINANCI			y snould include.				
c Any submission deadlines							
NONE							
d Any restrictions or limitations on awards, such	as by geographica	l areas, charitable fie	elds, kinds of institut	ions, or other factors.			
NONE							
	<u> </u>						

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)	substantial contributor	recipient		
a Paid during the year				
NONE				
		1		
		1		
Total			3a	
b Approved for future payment				
NEW YORK CITY BALLET			GENERAL	
			<u>.</u>	100,000.
ADOPT-A-DOG INC.			GENERAL	100,000.
ADOPT-A-DOG INC.			CENERAL	
				25,000.
				,
— — — — — — — — — — — — — — — —				

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated	Unrelate	ed business income	Excluded by section 512, 513, or 514		(e)	
•	(a)	(b)	(c) Exclu-	(d)	Related or exempt	
	Business	Amount	Exclu- sion	Amount	function income	
1 Program service revenue	code		code		(See instructions.)	
a						
b					 	
C	 		 -			
	 		 			
de	 -		 			
f						
g Fees and contracts from government agencies			 			
2 Membership dues and assessments			 			
·			 			
Interest on savings and temporary cash investmentsDividends and interest from securities			 			
5 Net rental income or (loss) from real estate			 			
a Debt-financed property			<u> </u>			
b Not debt-financed property · · · · · · · · · · · · ·						
6 Net rental income or (loss) from personal property			<u> </u>			
7 Other investment income			<u> </u>			
8 Gain or (loss) from sales of assets other than inventory			<u> </u>			
9 Net income or (loss) from special events						
10 Gross profit or (loss) from sales of inventory						
11 Other revenue				-	r	
a						
b						
C						
d						
e			<u> </u>	- · · -		
12 Subtotal. Add columns (b), (d), and (e)	 		 			
Subtotal. Add columns (b), (d), and (e)				13		
(See worksheet in line 13 instructions to verify calculations	:)			•		
						
Part XVI-B Relationship of Activities to the	e Accomp	lishment of Exemp	pt Purp	oses		
Line No. Explain below how each activity for which inc	omo is roport	od in column (a) of Part	Υ\/I-Λ cc	entributed importantly to t	ho.	
accomplishment of the foundation's exempt p	urposes (other	er than by providing fund	ds for suc	ch purposes). (See instru	ctions.)	
77 / 7						
N/A						
			 			
						
						
						
		· · · · · · · · · · · · · · · · · · ·				
				 		
						
			····			
						
		<u> </u>				

Form 990-PF (2015) RICHARD H. LASDON CHARITABLE TRUST 47-6891419

Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

1 Did	the organization directly	or indirectly en	gage in any of the	following with any	other orga	anızatıon			Yes	No	
des	cribed in section 501(c)	of the Code (oth	er than section 50	1(c)(3) organization	ons) or in s	ection 527,	į				
	nsfers from the reporting		noncharitable exe	empt organization	of						
	Cash							1 a (1)		X	
	Other assets						1	1 a (2)		X	
b Oth	er transactions:										
(1)	Sales of assets to a nor	ncharitable exen	npt organization.					1 b (1)		X	
(2)	Purchases of assets fro	m a noncharital	ole exempt organiz	ation				1 b (2)		X	
(3) Rental of facilities, equipment, or other assets											
(4) Reimbursement arrangements											
(5) Loans or loan guarantees											
(6)	Performance of service	s or membership	p or fundraising so	licitations				1 b (6)		X	
c Sha	aring of facilities, equipm	ent, mailing lists	, other assets, or p	oaid employees.				1 c		X	
al 16 th	a annual to any of the	shava va Maa La	and the fallers	na sahadula Calu	ma /h\ ab	طم میرمیدام امارید	out the four market w	alua of			
the	e answer to any of the a goods, other assets, or	services given b	y the reporting fou	indation. If the fou	ndation red	ceived less that	ın faır market value ı	n			
any	transaction or sharing a	rrangement, sh	ow in column (d) th	ne value of the go	ods, other	assets, or sen	rices received.				
(a) Line no	o (b) Amount involved	(c) Name	of noncharitable exen	npt organization	(d) De	escription of trans	fers, transactions, and st	naring arran	gements	<u>. </u>	
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2 a le th	he foundation directly or	indirectly affiliat	ed with or related	to one or more ta	y-evemnt	organizations		·			
des	cribed in section 501(c)	of the Code (oth	ner than section 50	1(c)(3)) or in secti	on 527?			. Yes	X	No	
b If 'Y	es, complete the follow										
	(a) Name of organiza	tion	(b) Type	of organization		(c)	Description of relation	onship_			
	<u></u>										
	 										
											
C	Inder penalties of perjury, I declar orrect, and complete Declaratio	ire that I have examir n of preparer (other th	ned this return, including nan taxpayer) is based oi	accompanying schedule n all information of which	s and statement of preparer has	ents, and to the be any knowledge	st of my knowledge and bel	iet, it is true,			
Sign	(/ ///)	DN .				_	\	May the II			
Here	HALL E	abo		11/14/14		THUST	50	preparer s	shown be	elow	
	Signatura of officer or trustee			Date	Title				Yes	No	
	Print/Type preparer's n	ame	Preparer's s	gnature	E	ate	Check If	PTIN			
Paid	ROBERT G. C	GRAY				1/09/16	self-employed	P01381	946		
Prepare	er Firm's name	ROBERT G.	GRAM, CPA,	P.C.			Firm's EIN ► 46-20	72528			
Use On		12 NORTH									
	<u> </u>	PEARL RIV		<u>N</u>	Y 1096	5	Phone no				
BAA			=: · 					Form 990)-PF (2	2015)	

Schedule B

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

Schedule of Contributors

2015

OMB No 1545-0047

Attach to Form 990, Form 990-EZ, or Form 990-PF. Department of the Treasury Internal Revenue Service

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

Name of the organization Employer identification number 47-6891419 RICHARD H. LASDON CHARITABLE TRUST Organization type (check one): Filers of: Section: Form 990 or 990-EZ 501(c)() (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization Form 990-PF 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See instructions General Rule For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions. **Special Rules** For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33-1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1 Complete Parts I and II For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, chantable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000 If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year

Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer 'No' on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

BAA 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 org	B (Form 990, 990-EZ, or 990-PF) (2015)	Page	I Of I OF Part I
_	RD H. LASDON CHARITABLE TRUST	' '	891419
Part I	Contributors (see instructions) Use duplicate copies of Part I if additional space	s is needed.	
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	RICHARD H. LASDON REVOCABLE TRUST 68 WATERMARK ROAD BEDFORD NY 10506	\$ <u>8</u> _878_767.	Person X Payroll Noncash (Complete Part II for noncash contributions)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash
			(Complete Part II for noncash contributions)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash Complete Part II for noncash contributions.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash Complete Part II for noncash contributions.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
BAA	TEEA0702 10/12/15	Schedule B (Form 9	 90, 990-EZ, or 990-PF) (2015)