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

Name of foundation LEIBOWITZ AND GREENWAY FAMILY CHARITABLE FOUNDATION		A Employer identification number 65-6358233	
Number and street (or P O box number if mail is not delivered to street address) 234 CLINTON STREET		B Telephone number (see instructions) (718) 624-7570	
City or town, state or province, country, and ZIP or foreign postal code BROOKLYN, NY 11201		C If exemption application is pending, check here <input type="checkbox"/>	
G Check all that apply <input type="checkbox"/> Initial return <input type="checkbox"/> Final return <input type="checkbox"/> Address change <input type="checkbox"/> Initial return of a former public charity <input type="checkbox"/> Amended return <input type="checkbox"/> Name change		D 1. Foreign organizations, check here <input type="checkbox"/> 2. Foreign organizations meeting the 85% test, check here and attach computation <input type="checkbox"/> E If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/>	
H Check type of organization <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/>	
I Fair market value of all assets at end of year (from Part II, col (c), line 16) ▶ \$ 8,887,623		J Accounting method <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____ (Part I, column (d) must be on cash basis)	

Part I	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions))	Revenue and expenses per books (a)	Net investment income (b)	Adjusted net income (c)	Disbursements for charitable purposes (d) (cash basis only)
Revenue	1 Contributions, gifts, grants, etc , received (attach schedule)	750,000			
	2 Check <input type="checkbox"/> if the foundation is not required to attach Sch B				
	3 Interest on savings and temporary cash investments				
	4 Dividends and interest from securities	226,830	226,830		
	5a Gross rents				
	b Net rental income or (loss) _____				
	6a Net gain or (loss) from sale of assets not on line 10	249,691			
	b Gross sales price for all assets on line 6a 2,939,396				
	7 Capital gain net income (from Part IV, line 2) . . .		249,691		
	8 Net short-term capital gain				
	9 Income modifications				
	10a Gross sales less returns and allowances				
Operating and Administrative Expenses	b Less Cost of goods sold				
	c Gross profit or (loss) (attach schedule)				
	11 Other income (attach schedule)	100	100		
	12 Total.Add lines 1 through 11	1,226,621	476,621		
	13 Compensation of officers, directors, trustees, etc	0	0		0
	14 Other employee salaries and wages				
	15 Pension plans, employee benefits				
	16a Legal fees (attach schedule).				
	b Accounting fees (attach schedule).	5,245	5,245		0
	c Other professional fees (attach schedule)				
	17 Interest				
	18 Taxes (attach schedule) (see instructions) . . .	13,893	4,589		0
	19 Depreciation (attach schedule) and depletion . . .				
	20 Occupancy				
	21 Travel, conferences, and meetings.				
	22 Printing and publications				
	23 Other expenses (attach schedule).	22,565	22,565		0
	24 Total operating and administrative expenses. Add lines 13 through 23	41,703	32,399		0
	25 Contributions, gifts, grants paid	861,380			861,380
	26 Total expenses and disbursements.Add lines 24 and 25	903,083	32,399		861,380
	27 Subtract line 26 from line 12				
	a Excess of revenue over expenses and disbursements	323,538			
	b Net investment income (if negative, enter -0-)		444,222		
	c Adjusted net income(if negative, enter -0-)				

Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)	Beginning of year	End of year	
			(a) Book Value	(b) Book Value	(c) Fair Market Value
Assets	1	Cash—non-interest-bearing	1,232	169	169
	2	Savings and temporary cash investments	302,732	1,115,377	1,115,377
	3	Accounts receivable ▶ _____ Less allowance for doubtful accounts ▶ _____			
	4	Pledges receivable ▶ _____ Less allowance for doubtful accounts ▶ _____			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions).			
	7	Other notes and loans receivable (attach schedule) ▶ _____ Less allowance for doubtful accounts ▶ _____			
	8	Inventories for sale or use			
	9	Prepaid expenses and deferred charges			
	10a	Investments—U S and state government obligations (attach schedule)			
	b	Investments—corporate stock (attach schedule)	1,654,568	1,362,620	1,795,535
	c	Investments—corporate bonds (attach schedule)	940,974	575,264	573,460
	11	Investments—land, buildings, and equipment basis ▶ _____ Less accumulated depreciation (attach schedule) ▶ _____			
	12	Investments—mortgage loans			
	13	Investments—other (attach schedule)	5,551,587	5,720,693	5,403,082
	14	Land, buildings, and equipment basis ▶ _____ Less accumulated depreciation (attach schedule) ▶ _____			
	15	Other assets (describe ▶ _____)	8,322	9,080	0
	16	Total assets (to be completed by all filers—see the instructions Also, see page 1, item I)	8,459,415	8,783,203	8,887,623
Liabilities	17	Accounts payable and accrued expenses	20,485	20,735	
	18	Grants payable			
	19	Deferred revenue			
	20	Loans from officers, directors, trustees, and other disqualified persons			
	21	Mortgages and other notes payable (attach schedule).			
	22	Other liabilities (describe ▶ _____)			
	23	Total liabilities (add lines 17 through 22)	20,485	20,735	
Net Assets or Fund Balances		Foundations that follow SFAS 117, check here <input type="checkbox"/> and complete lines 24 through 26 and lines 30 and 31.			
	24	Unrestricted			
	25	Temporarily restricted			
	26	Permanently restricted			
		Foundations that do not follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 27 through 31.			
	27	Capital stock, trust principal, or current funds	886,710	886,710	
	28	Paid-in or capital surplus, or land, bldg, and equipment fund	0	0	
	29	Retained earnings, accumulated income, endowment, or other funds	7,552,220	7,875,758	
	30	Total net assets or fund balances (see instructions)	8,438,930	8,762,468	
	31	Total liabilities and net assets/fund balances (see instructions)	8,459,415	8,783,203	

Part III Analysis of Changes in Net Assets or Fund Balances

1	Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)	1	8,438,930
2	Enter amount from Part I, line 27a	2	323,538
3	Other increases not included in line 2 (itemize) ▶ _____	3	0
4	Add lines 1, 2, and 3	4	8,762,468
5	Decreases not included in line 2 (itemize) ▶ _____	5	0
6	Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30	6	8,762,468

Part IV

Capital Gains and Losses for Tax on Investment Income

List and describe the kind(s) of property sold (e g , real estate, (a) 2-story brick warehouse, or common stock, 200 shs MLC Co)		How acquired P—Purchase D—Donation (b)	Date acquired (c) (mo , day, yr)	Date sold (d) (mo , day, yr)
1 a	NORTERN TRUST	P		2015-12-31
b	NORTERN TRUST	P		2015-12-31
c	CAPITAL GAINS DIVIDENDS	P		
d				
e				

(e) Gross sales price	Depreciation allowed (f) (or allowable)	Cost or other basis (g) plus expense of sale	Gain or (loss) (h) (e) plus (f) minus (g)
a 123,288		130,758	-7,470
b 2,681,665		2,558,947	122,718
c 134,443			134,443
d			
e			

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69

(i) F M V as of 12/31/69	Adjusted basis (j) as of 12/31/69	Excess of col (i) (k) over col (j), if any	Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h)) (l)
a			-7,470
b			122,718
c			134,443
d			
e			

2	Capital gain net income or (net capital loss)	If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7	2	249,691
3	Net short-term capital gain or (loss) as defined in sections 1222(5) and (6) If gain, also enter in Part I, line 8, column (c) (see instructions) If (loss), enter -0- in Part I, line 8		3	

Part V

Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income)
If section 4940(d)(2) applies, leave this part blank

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? ☐ Yes ☒ No
If "Yes," the foundation does not qualify under section 4940(e) Do not complete this part

1 Enter the appropriate amount in each column for each year, see instructions before making any entries

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col (b) divided by col (c))
2014	651,000	8,885,765	0 073263
2013	1,560,861	9,730,734	0 160405
2012	542,000	9,740,445	0 055644
2011	538,000	9,570,584	0 056214
2010	555,000	8,638,282	0 064249

2	Total of line 1, column (d).	2	0 409775
3	Average distribution ratio for the 5-year base period—divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years	3	0 081955
4	Enter the net value of noncharitable-use assets for 2015 from Part X, line 5.	4	8,986,686
5	Multiply line 4 by line 3.	5	736,504
6	Enter 1% of net investment income (1% of Part I, line 27b).	6	4,442
7	Add lines 5 and 6.	7	740,946
8	Enter qualifying distributions from Part XII, line 4.	8	861,380

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

Part VI

Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see page 18 of the instructions)

1a

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 instructions)

2

Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)

3

Add lines 1 and 2.

4

Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)

5

Tax based on investment income.Subtract line 4 from line 3 If zero or less, enter -0-

6

Credits/Payments

a

2015 estimated tax payments and 2014 overpayment credited to 2015

6a

9,080

b

Exempt foreign organizations—tax withheld at source

6b

c

Tax paid with application for extension of time to file (Form 8868).

6c

d

Backup withholding erroneously withheld

6d

7

Total credits and payments Add lines 6a through 6d.

8

Enter any penalty for underpayment of estimated tax Check here ☐ if Form 2220 is attached

9

Tax due.If the total of lines 5 and 8 is more than line 7, enter amount owed

10

Overpayment.If line 7 is more than the total of lines 5 and 8, enter the amount overpaid.

11

Enter the amount of line 10 to be Credited to 2015 estimated tax 4,593 Refunded

1

4,442

0

4,442

0

4,442

9,080

45

4,593

0

Part VII-A

Statements Regarding Activities

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?		Yes	No
1a				No
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for definition)?			No
	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			
c	Did the foundation file Form 1120-POL for this year?			No
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 \$ 0			
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers \$ 0			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS? If "Yes," attach a detailed description of the activities	2		No
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		No
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		No
b	If "Yes," has it filed a tax return on Form 990-T for this year?	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year? If "Yes," attach the statement required by General Instruction T	5		No
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	Yes	
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	Yes	
8a	Enter the states to which the foundation reports or with which it is registered (see instructions) FL, NY			
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) of each state as required by General Instruction G? If "No," attach explanation	8b	Yes	
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		No
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses	10	Yes	

Form 990-PF (2015)

Part VII-A Statements Regarding Activities (continued)

11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions).	11		No
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement (see instructions)	12		No
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ▶ N/A	13	Yes	
14	The books are in care of ▶ MICHAEL B GOLDSTEIN Telephone no ▶ (305) 442-2200 Located at ▶ 2121 PONCE DE LEON BLVD 1100 CORAL GABLES FL ZIP+4 ▶ 33134			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041—Check here ▶ <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the year ▶ 15	15		
16	At any time during calendar year 2015, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? See instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) If "Yes," enter the name of the foreign country ▶	16	Yes No	No No

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required

File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.			Yes	No
1a	During the year did the foundation (either directly or indirectly) (1) Engage in the sale or exchange, or leasing of property with a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (6) Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days). <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
b	If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)? Organizations relying on a current notice regarding disaster assistance check here. ▶ <input type="checkbox"/>	1b		
c	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2015?	1c		No
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5))			
a	At the end of tax year 2015, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2015? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "Yes," list the years ▶ 20____, 20____, 20____, 20____			
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement—see instructions).	2b		
c	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here ▶ 20____, 20____, 20____, 20____			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
b	If "Yes," did it have excess business holdings in 2015 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2015).	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		No
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2015?	4b		No

Part VII-B

Statements Regarding Activities for Which Form 4720 May Be Required (Continued)

5a

During the year did the foundation pay or incur any amount to

(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?

☐ Yes

☒ No

(2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive?

☐ Yes

☒ No

(3) Provide a grant to an individual for travel, study, or other similar purposes?

☐ Yes

☒ No

(4) Provide a grant to an organization other than a charitable, etc , organization described in section 4945(d)(4)(A)? (see instructions).

☐ Yes

☒ No

(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?

☐ Yes

☒ No

b

If any answer is "Yes" to 5a(1)–(5), did **any**of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)?

5b

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?

☐ Yes

☐ No

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?

☐ Yes

☒ No

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

☒ No

b

If yes, did the foundation receive any proceeds or have any net income attributable to the transaction?

7b

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	Title, and average hours per week (b) devoted to position	(c) Compensation(If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	Expense account, (e) other allowances
LAWRENCE LEIBOWITZ 234 CLINTON STREET BROOKLYN, NY 11201	TRUSTEE 10 00	0	0	0
TARA GREENWAY - LEIBOWITZ 234 CLINTON STREET BROOKLYN, NY 11201	TRUSTEE 10 00	0	0	0

2

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

(a) Name and address of each employee paid more than \$50,000	Title, and average hours per week (b) devoted to position	(c) Compensation	Contributions to employee benefit plans and deferred compensation (d)	Expense account, (e) other allowances
NONE				

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

▶

0

Part VIII

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

3 Five highest-paid independent contractors for professional services (see instructions). If none, enter "NONE".

(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		

Total number of others receiving over \$50,000 for professional services. 0

Part IX-A

Summary of Direct Charitable Activities

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.

	Expenses
1	
2	
3	
4	

Part IX-B

Summary of Program-Related Investments (see instructions)

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1	
2	
All other program-related investments. See instructions.	
3	
Total. Add lines 1 through 3	0

Part X Minimum Investment Return

(All domestic foundations must complete this part. Foreign foundations, see instructions.)

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc , purposes		
a	Average monthly fair market value of securities.	1a	8,422,697
b	Average of monthly cash balances.	1b	700,842
c	Fair market value of all other assets (see instructions).	1c	0
d	Total (add lines 1a, b, and c).	1d	9,123,539
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation).	1e	0
2	Acquisition indebtedness applicable to line 1 assets.	2	0
3	Subtract line 2 from line 1d.	3	9,123,539
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see instructions).	4	136,853
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	8,986,686
6	Minimum investment return. Enter 5% of line 5.	6	449,334

Part XI Distributable Amount(see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here ☐ and do not complete this part.)

1	Minimum investment return from Part X, line 6.	1	449,334
2a	Tax on investment income for 2015 from Part VI, line 5.	2a	4,442
b	Income tax for 2015 (This does not include the tax from Part VI).	2b	
c	Add lines 2a and 2b.	2c	4,442
3	Distributable amount before adjustments Subtract line 2c from line 1.	3	444,892
4	Recoveries of amounts treated as qualifying distributions.	4	0
5	Add lines 3 and 4.	5	444,892
6	Deduction from distributable amount (see instructions).	6	0
7	Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1.	7	444,892

Part XII Qualifying Distributions (see instructions)

1	Amounts paid (including administrative expenses) to accomplish charitable, etc , purposes		
a	Expenses, contributions, gifts, etc —total from Part I, column (d), line 26.	1a	861,380
b	Program-related investments—total from Part IX-B.	1b	0
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc , purposes.	2	
3	Amounts set aside for specific charitable projects that satisfy the		
a	Suitability test (prior IRS approval required).	3a	
b	Cash distribution test (attach the required schedule).	3b	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	861,380
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income Enter 1% of Part I, line 27b (see instructions).	5	4,442
6	Adjusted qualifying distributions. Subtract line 5 from line 4.	6	856,938

Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years

Part XIII

Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2014	(c) 2014	(d) 2015
1 Distributable amount for 2015 from Part XI, line 7				444,892
2 Undistributed income, if any, as of the end of 2015				
a Enter amount for 2014 only.			0	
b Total for prior years 20____, 20____, 20____		0		
3 Excess distributions carryover, if any, to 2015				
a From 2010.	133,811			
b From 2011.	69,330			
c From 2012.	64,612			
d From 2013.	1,090,602			
e From 2014.	215,788			
f Total of lines 3a through e.	1,574,143			
4 Qualifying distributions for 2015 from Part XII, line 4 ► \$ 861,380				
a Applied to 2014, but not more than line 2a			0	
b Applied to undistributed income of prior years (Election required—see instructions).		0		
c Treated as distributions out of corpus (Election required—see instructions).	0			
d Applied to 2015 distributable amount.				444,892
e Remaining amount distributed out of corpus	416,488			
5 Excess distributions carryover applied to 2015 (If an amount appears in column (d), the same amount must be shown in column (a))	0			0
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	1,990,631			
b Prior years' undistributed income Subtract line 4b from line 2b.		0		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed.		0		
d Subtract line 6c from line 6b Taxable amount—see instructions		0		
e Undistributed income for 2014 Subtract line 4a from line 2a Taxable amount—see instructions			0	
f Undistributed income for 2016 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2015				0
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions).	0			
8 Excess distributions carryover from 2010 not applied on line 5 or line 7 (see instructions). . .	133,811			
9 Excess distributions carryover to 2016. Subtract lines 7 and 8 from line 6a	1,856,820			
10 Analysis of line 9				
a Excess from 2011. . . .	69,330			
b Excess from 2012. . . .	64,612			
c Excess from 2013. . . .	1,090,602			
d Excess from 2014. . . .	215,788			
e Excess from 2015. . . .	416,488			

Part XIV

Private Operating Foundations (see instructions and Part VII-A, question 9)

1a

If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2015, enter the date of the ruling.

b

Check box to indicate whether the organization is a private operating foundation described in section ☐ 4942(j)(3) or ☐ 4942(j)(5)

2a

Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed

Tax year	Prior 3 years			(e) Total
(a) 2015	(b) 2014	(c) 2013	(d) 2012	
b 85% of line 2a				
c Qualifying distributions from Part XII, line 4 for each year listed				
d Amounts included in line 2c not used directly for active conduct of exempt activities				
e 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

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.

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

Part XV

Supplementary Information (Complete this part only if the organization had \$5,000 or more in assets at any time during the year—see instructions.)

1

Information Regarding Foundation Managers:

a

List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000) (See section 507(d)(2))

LAWRENCE LEIBOWITZ

b

List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest

2

Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:

Check here ☒ if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d

a

The name, address, and telephone number or email address of the person to whom applications should be addressed

b

The form in which applications should be submitted and information and materials they should include

c

Any submission deadlines

d

Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors

Part XV

Supplementary Information(continued)

3 Grants and Contributions Paid During the Year or Approved for Future Payment

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)				
<div>a Paid during the year</div> <div>See Additional Data Table</div>				
<div>Total</div>			<div>3a</div>	861,380
<div>b Approved for future payment</div>				
<div>Total</div>			<div>3b</div>	0

Enter gross amounts unless otherwise indicated

Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes

Form **990-PF** (2015)

Part XVII

1 Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?		Yes	No
a Transfers from the reporting foundation to a noncharitable exempt organization of			
(1) Cash.	1a(1)		No
(2) Other assets.	1a(2)		No
b Other transactions			
(1) Sales of assets to a noncharitable exempt organization.	1b(1)		No
(2) Purchases of assets from a noncharitable exempt organization.	1b(2)		No
(3) Rental of facilities, equipment, or other assets.	1b(3)		No
(4) Reimbursement arrangements.	1b(4)		No
(5) Loans or loan guarantees.	1b(5)		No
(6) Performance of services or membership or fundraising solicitations.	1b(6)		No
c Sharing of facilities, equipment, mailing lists, other assets, or paid employees.	1c		No
d If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received.			

[illegible]

2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? ☐ Yes ☒ No

b If "Yes," complete the following schedule

(a) Name of organization	(b) Type of organization	(c) Description of relationship

Sign Here	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge				
	***** _____ Signature of officer or trustee	2016-11-08 _____ Date	***** _____ Title	<div style="border: 1px solid black; padding: 5px;"> May the IRS discuss this return with the preparer shown below (see instr)? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No </div>	
Paid Preparer Use Only	Print/Type preparer's name JEFFREY L WEISS	Preparer's Signature _____	Date _____	Check if self-employed <input type="checkbox"/>	PTIN P00572593
	Firm's name <input type="checkbox"/> BDO USA LLP			Firm's EIN <input type="checkbox"/> 13-5381590	
	Firm's address <input type="checkbox"/> 2121 PONCE DE LEON BLVD STE 1100 CORAL GABLES, FL 33134			Phone no (305) 442-2200	

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
AMERICAN FOUNDATION FOR SUICIDE PREVENTION 120 WALL STREET 29TH FLOOR NEW YORK,NY 10005	NONE	PUBLIC	UNRESTRICTED	10,000
AMERICAN FRIENDS SERVICE COMMITTEE 15 RUTHERFORD PLACE NEW YORK,NY 10003	NONE	PUBLIC	UNRESTRICTED	20,000
AMERICAN INDIAN COLLEGE FUND 8333 GREENWOOD BLVD DENVER,CO 80221	NONE	PUBLIC	UNRESTRICTED	5,000
AMERICAN RED CROSS INT'L RESPONSE FUND PO BOX 37243 WASHINGTON,DC 20013	NONE	PUBLIC	UNRESTRICTED	12,000
AMNESTY INTERNATIONAL USA 5 PENN PLAZA NEW YORK,NY 10001	NONE	PUBLIC	UNRESTRICTED	20,000
BLACK CANARY INC 12 E 14TH STREET APT 5E NEW YORK,NY 10003	NONE	PUBLIC	UNRESTRICTED	8,000
BOY SCOUTS OF AMERICA 1325 W WALNUT HILL LANE IRVING,TX 75038	NONE	PUBLIC	UNRESTRICTED	5,000
BROOKLYN BUREAU OF COMMUNITY SERVICE 285 SCHERMERHORN STREET BROOKLYN,NY 11217	NONE	PUBLIC	UNRESTRICTED	10,000
CARE PO BOX 1871 MERRIFIELD,VA 221169753	NONE	PUBLIC	UNRESTRICTED	25,000
CHILDREN INTERNATIONAL 2000 EAST RED BRIDGE ROAD KANSAS CITY,MO 64121	NONE	PUBLIC	UNRESTRICTED	3,000
CHILDREN'S DEFENSE FUND 25 E STREET NW WASHINGTON,DC 20001	NONE	PUBLIC	UNRESTRICTED	6,000
CHILDREN'S HOME SOCIETY OF FLORIDA 1485 S SEMORAN BLVD SUITE 1448 WINTER PARK,FL 32792	NONE	PUBLIC	UNRESTRICTED	6,000
CHRISTOPHER REEVE PARALYSIS FOUNDATION 636 MORRIS TURNPIKE SUITE 3A SHORT HILLS,NJ 07078	NONE	PUBLIC	UNRESTRICTED	4,000
COALITION FOR THE HOMELESS 129 FULTON STREET NEW YORK,NY 10038	NONE	PUBLIC	UNRESTRICTED	15,000
COVENANT HOUSE TIMES SQUARE STATION PO BOX 731 NEW YORK,NY 10108	NONE	PUBLIC	UNRESTRICTED	12,000
Total			▶ 3a	861,380

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year				
DEBRA OF AMERICA INC 16 EAST 41ST STREET 3RD FLOOR NEW YORK,NY 10017	NONE	PUBLIC	UNRESTRICTED	4,000
DOCTORS WITHOUT BORDERS USA 333 7TH AVENUE 2ND FLOOR NEW YORK,NY 10001	NONE	PUBLIC	UNRESTRICTED	35,000
EASTERN PARALYZED VETERANS ASSOCIATION 54 NASHUA STREET MILFORD,NH 03055	NONE	PUBLIC	UNRESTRICTED	4,000
FCNL 245 SECOND STREET NE WASHINGTON,DC 200025795	NONE	PUBLIC	UNRESTRICTED	15,000
FINCA INTERNATIONAL INC 1101 14TH ST NW WASHINGTON,DC 20005	NONE	PUBLIC	UNRESTRICTED	20,000
FLORIDA GRAND OPERA 8390 NW 25TH STREET MIAMI,FL 33122	NONE	PUBLIC	UNRESTRICTED	216,380
FOUNTAIN HOUSE 425 W 47TH STREET NEW YORK,NY 100362304	NONE	PUBLIC	UNRESTRICTED	5,000
GIRLS INCORPORATED 120 WALL STREET NEW YORK,NY 10005	NONE	PUBLIC	UNRESTRICTED	4,000
GOWANUS CANAL CONSERVANCY PO BOX 150-652 BROOKLYN,NY 112159997	NONE	PUBLIC	UNRESTRICTED	2,000
GREENBELT CONSERVANCY 200 NEVADA AVENUE STATEN ISLAND,NY 10306	NONE	PUBLIC	UNRESTRICTED	2,000
HABITAT FOR HUMANITY 121 HABITAT STREET AMERICUS,GA 317093498	NONE	PUBLIC	UNRESTRICTED	10,000
HELPUSADOPTORG PO BOX 787 NEW YORK,NY 10150	NONE	PUBLIC	UNRESTRICTED	5,000
HOSPICE EDUCATION INSTITUTE 3 UNITY SQUARE PO BOX 98 MACHIASPORT,ME 046550098	NONE	PUBLIC	UNRESTRICTED	4,000
HUMAN RIGHTS WATCH 350 FIFTH AVENUE 34TH FLOOR NEW YORK,NY 101183299	NONE	PUBLIC	UNRESTRICTED	15,000
INTERNATIONAL RESCUE COMMITTEE 122 EAST 42ND STREET NEW YORK,NY 10168	NONE	PUBLIC	UNRESTRICTED	40,000
Total ▶ 3a				861,380

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year				
JUVENILE DIABETES RESEARCH FOUNDATION 120 WALL STREET NEW YORK,NY 10005	NONE	PUBLIC	UNRESTRICTED	5,000
MEDICINE SHOW THEATRE ENSEMBLE 549 WEST 52ND STREET 3RD FLOOR NEW YORK,NY 10019	NONE	PUBLIC	UNRESTRICTED	4,000
MERCY CORPS 28 SW FIRST AVENUE PORTLAND,OR 97204	NONE	PUBLIC	UNRESTRICTED	15,000
MIAMI SCIENCE MUSEUM 3280 SOUTH MIAMI AVENUE MIAMI,FL 33129	NONE	PUBLIC	UNRESTRICTED	5,000
MULTIPLE SCLEROSIS FOUNDATION 6350 NORTH ANDREWS AVENUE FORT LAUDERDALE,FL 333092130	NONE	PUBLIC	UNRESTRICTED	5,000
NAAR - NATIONAL ALLIANCE FOR AUTISM RESEARCH 2 PARK AVENUE 11TH FLOOR NEW YORK,NY 10016	NONE	PUBLIC	UNRESTRICTED	10,000
NAMI - NATIONAL ALLIANCE FOR THE MENTALLY ILL 3803 N FAIRFAX DR SUITE 100 ARLINGTON,VA 22203	NONE	PUBLIC	UNRESTRICTED	20,000
NATIONAL URBAN LEAGUE 120 WALL STREET NEW YORK,NY 10005	NONE	PUBLIC	UNRESTRICTED	15,000
NATIONAL VULVODYNIA ASSOCIATION PO BOX 4491 SILVER SPRINGS,MD 209144494	NONE	PUBLIC	UNRESTRICTED	20,000
NEW YORK PUBLIC INTEREST RESEARCH GROUP 9 MURRAY STREET 3RD FLOOR NEW YORK,NY 100072223	NONE	PUBLIC	UNRESTRICTED	4,000
NEW YORK RESTORATION PROJECT (NYRP) 254 WEST 31ST STREET 10TH FLOOR NEW YORK,NY 10001	NONE	PUBLIC	UNRESTRICTED	5,000
ONE SPIRIT LEARNING ALLIANCE 330 WEST 38TH STREET SUITE 1500 NEW YORK,NY 10018	NONE	PUBLIC	UNRESTRICTED	5,000
OPERATION SMILE 6435 TIDEWATER DR NORFOLK,VA 23509	NONE	PUBLIC	UNRESTRICTED	2,000
OXFAM AMERICA 226 CAUSEWAY ST 5TH FLOOR BOSTON,MA 02114	NONE	PUBLIC	UNRESTRICTED	25,000
PLANNED PARENTHOOD FEDERATION OF AMERICA 434 WEST 33RD STREET NEW YORK,NY 10001	NONE	PUBLIC	UNRESTRICTED	5,000
Total ▶ 3a				861,380

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year				
PREVENT CHILD ABUSE AMERICA 228 SOUTH WABASH AVENUE 10TH FLOOR CHICAGO,IL 60604	NONE	PUBLIC	UNRESTRICTED	10,000
PREVENT CHILD ABUSE NEW YORK 33 ELK STREET SUITE 201 ALBANY,NY 12207	NONE	PUBLIC	UNRESTRICTED	10,000
PRO MUJER 253 W35TH STREET 11TH FLOOR NEW YORK,NY 10001	NONE	PUBLIC	UNRESTRICTED	5,000
PROJECT HOPE 255 CARTER HALL LANE MILLWOOD,VA 22646	NONE	PUBLIC	UNRESTRICTED	15,000
PSYCHOTHERAPY AND SPIRITUALITY INSTITUTE 74 TRINITY PLACE SUITE 612 NEW YORK,NY 10006	NONE	PUBLIC	UNRESTRICTED	10,000
SAFE SPACE 295 LAFAYETTE STREET SUITE 920 NEW YORK,NY 10012	NONE	PUBLIC	UNRESTRICTED	8,000
SIERRA CLUB FOUNDATION 85 SECOND STREET SUITE 750 SAN FRANCISCO,CA 94105	NONE	PUBLIC	UNRESTRICTED	5,000
SMART RECOVERY 7304 MENTOR AVENUE SUITE F MENTOR,OH 44060	NONE	PUBLIC	UNRESTRICTED	10,000
SOUTHERN POVERTY LAW CENTER 400 WASHINGTON AVE MONTGOMERY,AL 36104	NONE	PUBLIC	UNRESTRICTED	5,000
THE BARTON G KIDS HEAR NOW FOUNDATION 5061 BISCAYNE BLVD MIAMI,FL 33137	NONE	PUBLIC	UNRESTRICTED	3,000
THE CHILDREN'S AID SOCIETY 105 EAST 22ND STREET NEW YORK,NY 10010	NONE	PUBLIC	UNRESTRICTED	10,000
THE CORRECTIONAL LAW ASSOCIATION 2090 ADAM CLAYTON POWELL BLVD SUITE 200 NEW YORK,NY 10027	NONE	PUBLIC	UNRESTRICTED	5,000
THE FRESH AIR FUND 633 THIRD AVENUE 14TH FLOOR NEW YORK,NY 10017	NONE	PUBLIC	UNRESTRICTED	8,000
THE GILDER LEHRMAN INSTITUTE OF AMERICAN HISTORY 49 W 45TH STREET NEW YORK,NY 10036	NONE	PUBLIC	UNRESTRICTED	3,000
THE MICHAEL J FOX FOUNDATION CHURCH STREET STATION PO BOX 780 NEW YORK,NY 10008	NONE	PUBLIC	UNRESTRICTED	4,000
Total ▶ 3a				861,380

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
THE NAVAJO HEALTH FOUNDATION 700 EAST JEFFERSON STREET SUITE 100 PHOENIX,AZ 85034	NONE	PUBLIC	UNRESTRICTED	5,000
THE OSBORNE ASSOCIATION 809 WESTCHESTER AVENUE BRONX,NY 10455	NONE	PUBLIC	UNRESTRICTED	5,000
THEATER RESOURCES UNLIMITED 257 W 52ND STREET NEW YORK,NY 10019	NONE	PUBLIC	UNRESTRICTED	2,000
THIRTEEN 825 EIGHT AVENUE NEW YORK,NY 10019	NONE	PUBLIC	UNRESTRICTED	5,000
UNICEF 3 UNITED NATIONS PLAZA NEW YORK,NY 10017	NONE	PUBLIC	UNRESTRICTED	15,000
WATER 1ST INTERNATIONAL 1904 3RD AVENUE SUITE 1012 SEATTLE,WA 98101	NONE	PUBLIC	UNRESTRICTED	3,000
WILDLIFE CONSERVATION SOCIETY 2300 SOUTHERN BLVD BRONX,NY 10460	NONE	PUBLIC	UNRESTRICTED	4,000
WNYC RADIO 160 VARICK STREET NEW YORK,NY 10013	NONE	PUBLIC	UNRESTRICTED	5,000
WORLD WILDLIFE FUND 1250 24TH STREET NW 20037-1193 PO BOX 97180 WASHINGTON,DC 200907180	NONE	PUBLIC	UNRESTRICTED	5,000
THE DOE FUND 232 EAST 84TH STREET NEW YORK,NY 10028	NONE	PUBLIC	UNRISTRICTED	5,000
DRANOFF INTERNATIONAL 2 PIANO FOUNDATION 3550 BISCAYNE BLVD SUITE 702 MIAMI,FL 33137	NONE	PUBLIC	UNRISTRICTED	5,000
THE JANE GOODALL INSTITUTE 1595 SPRING HILL RD SUITE 550 VIENNA,VA 22182	NONE	PUBLIC	UNRISTRICTED	5,000
TRUST FOR CONVERVATION INNOVATION 405 14TH STREET SUITE 164 OAKLAND,CA 94612	NONE	PUBLIC	UNRISTRICTED	4,000
MULTIPLE SCLEROSIS FOUNDATION - STOP PAYMENT ON 2011 CHECK 6350 NORTH ANDREWS AVENUE FORT LAUDERDALE,FL 333092130	NONE	PUBLIC	UNRISTRICTED	-5,000
Total ▶ 3a				861,380

TY 2015 Accounting Fees Schedule

Name: LEIBOWITZ AND GREENWAY FAMILY CHARITABLE
FOUNDATION

EIN: 65-6358233

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
ACCOUNTING FEES	5,245	5,245		0

TY 2015 Investments Corporate Bonds Schedule

Name: LEIBOWITZ AND GREENWAY FAMILY CHARITABLE
FOUNDATION

EIN: 65-6358233

Name of Bond	End of Year Book Value	End of Year Fair Market Value
	575,264	573,460

TY 2015 Investments Corporate Stock Schedule

Name: LEIBOWITZ AND GREENWAY FAMILY CHARITABLE
FOUNDATION

EIN: 65-6358233

Name of Stock	End of Year Book Value	End of Year Fair Market Value
	1,362,620	1,795,535

TY 2015 Investments - Other Schedule

Name: LEIBOWITZ AND GREENWAY FAMILY CHARITABLE
FOUNDATION

EIN: 65-6358233

Category/ Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value
MUTUAL FUNDS	FMV	5,720,693	5,403,082

TY 2015 Other Assets Schedule

Name: LEIBOWITZ AND GREENWAY FAMILY CHARITABLE
FOUNDATION

EIN: 65-6358233

Description	Beginning of Year - Book Value	End of Year - Book Value	End of Year - Fair Market Value
PREPAID EXCISE TAXES	8,322	9,080	

TY 2015 Other Expenses Schedule

Name: LEIBOWITZ AND GREENWAY FAMILY CHARITABLE
FOUNDATION

EIN: 65-6358233

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
BROKERAGE FEES	22,315	22,315		0
NY ANNUAL FILING FEE	250	250		0

TY 2015 Other Income Schedule

Name: LEIBOWITZ AND GREENWAY FAMILY CHARITABLE
FOUNDATION

EIN: 65-6358233

Description	Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income
MISCELLANEOUS	100	100	100

TY 2015 Substantial Contributors Schedule

Name: LEIBOWITZ AND GREENWAY FAMILY CHARITABLE
FOUNDATION

EIN: 65-6358233

Name	Address
LAWRENCE LEIBOWITZ	234 CLINTON STREET BROOKLYN,NY 11201
DOROTHY E LEIBOWITZ CHARITABLE LEAD TRUST	2121 PONCE DE LEON BLVD 1100 CORAL GABLES,FL 33134
CIU INC	2121 PONCE DE LEON BLVD 1100 CORAL GABLES,FL 33134

TY 2015 Taxes Schedule

Name: LEIBOWITZ AND GREENWAY FAMILY CHARITABLE
FOUNDATION

EIN: 65-6358233

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
FOREIGN TAX PAID	4,589	4,589		0
EXCISE TAX	9,304	0		0

<div>Schedule B</div> <div>(Form 990, 990-EZ, or 990-PF)</div> <div>Department of the Treasury Internal Revenue Service</div>	<div>Schedule of Contributors</div> <div>▶ Attach to Form 990, 990-EZ, or 990-PF</div> <div>▶ Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at www.irs.gov/form990</div>	<div>OMB No 1545-0047</div> <div>2015</div>
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<div>Name of the organization</div> <div>LEIBOWITZ AND GREENWAY FAMILY CHARITABLE FOUNDATION</div>	<div>Employer identification number</div> <div>65-6358233</div>
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Organization type (check one)

<div>Filers of:</div> <div>Form 990 or 990-EZ</div> <div>Form 990-PF</div>	<div>Section:</div> <div><input type="checkbox"/> 501(c)() (enter number) organization</div> <div><input type="checkbox"/> 4947(a)(1) nonexempt charitable trust not treated as a private foundation</div> <div><input type="checkbox"/> 527 political organization</div> <div><input checked="" type="checkbox"/> 501(c)(3) exempt private foundation</div> <div><input type="checkbox"/> 4947(a)(1) nonexempt charitable trust treated as a private foundation</div> <div><input type="checkbox"/> 501(c)(3) taxable private foundation</div>
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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 other property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

- ☐ For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33¹/₃% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of **(1)** \$5,000 or **(2)** 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.
- ☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.
- ☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Do not complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year. ▶ \$ _____

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

Employer identification number
65-6358233

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

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	CIU INC	\$ 750,000	Person <input checked="" type="checkbox"/>
	2121 PONCE DE LEON BLVD 1100		Payroll <input type="checkbox"/>
	CORAL GABLES, FL 33134		Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person <input type="checkbox"/>
			Payroll <input type="checkbox"/>
			Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person <input type="checkbox"/>
			Payroll <input type="checkbox"/>
			Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person <input type="checkbox"/>
			Payroll <input type="checkbox"/>
			Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person <input type="checkbox"/>
			Payroll <input type="checkbox"/>
			Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person <input type="checkbox"/>
			Payroll <input type="checkbox"/>
			Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person <input type="checkbox"/>
			Payroll <input type="checkbox"/>
			Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)

Part II

(see instructions) Use duplicate copies of Part II if additional space is needed

Schedule B (Form 990, 990-EZ, or 990-PF) (2015)

Name of organization LEIBOWITZ AND GREENWAY FAMILY CHARITABLE FOUNDATION	Employer identification number 65-6358233
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Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of *exclusively* religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once. See instructions.) ► \$ _____

Use duplicate copies of Part III if additional space is needed

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-	_____	_____	_____
	_____	_____	_____
	_____	_____	_____
	_____	_____	_____
(e) Transfer of gift			
Transferee's name, address, and ZIP 4		Relationship of transferor to transferee	
_____		_____	
_____		_____	
--		_____	
_____		_____	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-	_____	_____	_____
	_____	_____	_____
	_____	_____	_____
	_____	_____	_____
(e) Transfer of gift			
Transferee's name, address, and ZIP 4		Relationship of transferor to transferee	
_____		_____	
_____		_____	
--		_____	
_____		_____	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-	_____	_____	_____
	_____	_____	_____
	_____	_____	_____
	_____	_____	_____
(e) Transfer of gift			
Transferee's name, address, and ZIP 4		Relationship of transferor to transferee	
_____		_____	
_____		_____	
--		_____	
_____		_____	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-	_____	_____	_____
	_____	_____	_____
	_____	_____	_____
	_____	_____	_____
(e) Transfer of gift			
Transferee's name, address, and ZIP 4		Relationship of transferor to transferee	
_____		_____	
_____		_____	
--		_____	
_____		_____	