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· Form **990-PF**

Return of Private Foundation

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

2015

Do not enter social security numbers on this form as it may be made public. Department of the Treasury Internal Revenue Service ▶ Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf. SEP 1, 2015 AUG 31, 2016 For calendar year 2015 or tax year beginning , and ending A Employer identification number Name of foundation MORRIS, MAX AND SARAH ALTMAN MEMORIAL TR 38-6883555 Number and street (or P O box number if mail is not delivered to street address) Room/suite B Telephone number 2226 HALCYON LANE 703-517-0551 City or town, state or province, country, and ZIP or foreign postal code C If exemption application is pending, check here VIENNA, VA 22181 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 Address change Name change H Check type of organization: Section 501(c)(3) exempt private foundation E If private foundation status was terminated Section 4947(a)(1) nonexempt charitable trust X 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: | X | Cash Accrual 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 615068. (Part I, column (d) must be on cash basis.) ▶\$ Part I Analysis of Revenue and Expenses (d) Disbursements for charitable purposes (b) Net investment (c) Adjusted net (a) Revenue and (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a)) expenses per books income ıncome (cash basis only) N/A Contributions, gifts, grants, etc., received Check X If the foundation is not required to attach Sch. B Interest on savings and temporary cash investments 647. 647. Statement 4 Dividends and interest from securities 5a Gross rents Net rental income or (loss) 6a Net gain or (loss) from sale of assets not on line 10 b Gross sales price for all assets on line 6a 0. 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) 11 Other income 647 647 12 Total. Add lines 1 through 11 0. 13 Compensation of officers, directors, trustees, etc. 14 Other employee salaries and wages 15 Pension plans, employee benefits Expenses 16a Legal fees 600. 0. Stmt 2 300. **b** Accounting fees c Other professional fees perating and Administrative 17 Interest 0. Stmt 3 0. 18 Taxes 19 Depreciation and depletion Occupancy 21 Travel, conferences, and meetings 22 Printing and publications 23 Other expenses 24 Total operating and administrative expenses. Add lines 13 through 23 604 300 54500 54500. 25 Contributions, gifts, grants paid 26 Total expenses and disbursements. 55104 Add lines 24 and 25 300 54500. 27 Subtract line 26 from line 12: -54457 a Excess of revenue over expenses and disbursements 347 b Net investment income (if negative, enter -0-) C Adjusted net income (if negative, enter -0-) N/A

523501 11-24-15 LHA For Paperwork Reduction Act Notice, see instructions.

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Capital stock, trust principal, of current funds 28 Paid-in or capital surplus, or land, bldg., and equipment fund 29 Retained earnings, accumulated income, endowment, or other funds 669525. 615068. 30 Total net assets or fund balances 669525. 615068. 31 Total liabilities and net assets/fund balances 669525. 615068. 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 6695 2 Enter amount from Part I, line 27a 2 -544 3 Other increases not included in line 2 (itemize) 4 Add lines 1, 2, and 3 4 6150 5 Decreases not included in line 2 (itemize) 5	님		•			
31 Total liabilities and net assets/fund balances 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) 2 Enter amount from Part I, line 27a 3 Other increases not included in line 2 (itemize) ▶ 4 Add lines 1, 2, and 3 5 Decreases not included in line 2 (itemize) ▶ 5		27				
31 Total liabilities and net assets/fund balances 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) 2 Enter amount from Part I, line 27a 3 Other increases not included in line 2 (itemize) ▶ 4 Add lines 1, 2, and 3 5 Decreases not included in line 2 (itemize) ▶ 5	Se	28				
31 Total liabilities and net assets/fund balances 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) 2 Enter amount from Part I, line 27a 3 Other increases not included in line 2 (itemize) ▶ 4 Add lines 1, 2, and 3 5 Decreases not included in line 2 (itemize) ▶ 5	ΪĚ	29				
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) 2 Enter amount from Part I, line 27a 3 Other increases not included in line 2 (itemize) ▶ 4 Add lines 1, 2, and 3 5 Decreases not included in line 2 (itemize) ▶ 5	Se	30	Total net assets or fund balances	669525.	615068.	
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) 2 Enter amount from Part I, line 27a 3 Other increases not included in line 2 (itemize) ▶ 4 Add lines 1, 2, and 3 5 Decreases not included in line 2 (itemize) ▶ 5	ľ					
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) 2 Enter amount from Part I, line 27a 3 Other increases not included in line 2 (itemize) ▶ 4 Add lines 1, 2, and 3 5 Decreases not included in line 2 (itemize) ▶ 5		31	Total liabilities and net assets/fund balances	669525,	615068.	
(must agree with end-of-year figure reported on prior year's return) 1 6695 2 Enter amount from Part I, line 27a 2 -544 3 Other increases not included in line 2 (itemize) 3 4 Add lines 1, 2, and 3 4 6150 5 Decreases not included in line 2 (itemize) 5	Pa	art	Analysis of Changes in Net Assets or Fund B	alances		
(must agree with end-of-year figure reported on prior year's return) 1 6695 2 Enter amount from Part I, line 27a 2 -544 3 Other increases not included in line 2 (itemize) 3 4 Add lines 1, 2, and 3 4 6150 5 Decreases not included in line 2 (itemize) 5	1 T	otal	net assets or fund balances at beginning of year - Part II, column (a) line	30		
2 Enter amount from Part I, line 27a 3 Other increases not included in line 2 (itemize) 4 Add lines 1, 2, and 3 5 Decreases not included in line 2 (itemize) 5					1	669525.
3 Other increases not included in line 2 (itemize) ► 4 Add lines 1, 2, and 3 5 Decreases not included in line 2 (itemize) ► 5				• •		-54457.
4 Add lines 1, 2, and 3 5 Decreases not included in line 2 (itemize) ► 5					 	0.
5 Decreases not included in line 2 (itemize) 5						615068.
· · · · · · · · · · · · · · · · · · ·			·	•) 	0.
o rotal not apporte of rand palanote at one of year fine # milite into of rait it, column (b), into ot 10 10 10 10 10 10 10 10 10 10 10 10 10			net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	olumn (b), line 30	6	615068.
						Form 990-PF (2015)

16471209 755633 altmanmemori

	m 990-PF (2015) MORRIS, MAX AND SARAH ALTMAN MEMORIAL TR 38-688 art VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see			Page 4 ns)
1a	a 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)			
b	b Domestic foundations that meet the section 4940(e) requirements in Part V, check here X and enter 1%			3.
	of Part I, line 27b			
C	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-)			0.
3	Add lines 1 and 2			3.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)			0.
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-			3.
6	Credits/Payments:			
а	a 2015 estimated tax payments and 2014 overpayment credited to 2015 6a 6a			
b	Exempt foreign organizations - tax withheld at source			
С	Tax paid with application for extension of time to file (Form 8868)			
d	d Backup withholding erroneously withheld 6d			
7	Total credits and payments. Add lines 6a through 6d 7			0.
	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached 8			
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed			3.
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid .			
	Enter the amount of line 10 to be: Credited to 2016 estimated tax			
	art 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		Yes	No
	any political campaign?	1a		X
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.			
c	Did the foundation file Form 1120-POL for this year?	1c		X
	I 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?	2		х
-	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	İ		
•	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?	4a		X
	of "Yes," has it filed a tax return on Form 990-T for this year?	4b		
	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		Х
•	If "Yes," attach the statement required by General Instruction T.			
6	and the second s			
-	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		Х
7		7	Х	
	,,,			
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)			
-	DC, VA			
b	of 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	X	
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		10		X
		rm 99 0)-PF	

Form 990-PF (2015) MORRIS, MAX AND SARAH AL			38-68835	55 Pac	ge 6
Part VII-B Statements Regarding Activities for Which I	Form 4720 May Be I	Required (contin	ued)		
5à During the year did the foundation pay or incur any amount to:					
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	n 4945(e))?	. 🗀 Y	es 🗓 No 📙		
(2) Influence the outcome of any specific public election (see section 4955); o	r to carry on, directly or indir	ectly,			
any voter registration drive?		Y	es X No		
(3) Provide a grant to an individual for travel, study, or other similar purposes	?	Y	es X No		
(4) Provide a grant to an organization other than a charitable, etc., organization	n described in section			1 1	
4945(d)(4)(A)? (see instructions)		Y	es X 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?		Y	es X No		
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und	der the exceptions described	ın Regulations			
section 53.4945 or in a current notice regarding disaster assistance (see instru		•	N/A	5b	
Organizations relying on a current notice regarding disaster assistance check h	·				
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fr		ined	_		
expenditure responsibility for the grant?		. —	es 🔲 No		
If "Yes," attach the statement required by Regulations section 53.4945					
6a Did the foundation, during the year, receive any funds, directly or indirectly, to					
a personal benefit contract?	, , ,	☐ Ye	es X No		
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal benefit contract?			6b 2	X
If "Yes" to 6b, file Form 8870.					
7a At any time during the tax year, was the foundation a party to a prohibited tax s	helter transaction?	Ye	es 🗓 No		
b If "Yes," did the foundation receive any proceeds or have any net income attribu				7b	_
Part VIII Information About Officers, Directors, Trusto		nagers, Highly			_
Paid Employees, and Contractors					
1 List all officers, directors, trustees, foundation managers and their	compensation.				
() Name and address	(b) Title, and average hours per week devoted	(c) Compensation	(d) Contributions to employee benefit plans and deferred	(e) Expens account, ot	se her
(a) Name and address	to position	(If not paid, enter -0-)	compensation	allowance	S
RICHARD H. ALTMAN	TRUSTEE	:			
2226 HALCYON LANE]			
VIENNA, VA 22181	2.00	0.	0.	(0.
			,		
O. Communication of the high and maid annulation (Athen them the color	luded on time 4). If your	amban HALONIE II		<u> </u>	—
2 Compensation of five highest-paid employees (other than those inc	(b) Title, and average	enter NONE."	(d) Contributions to employee benefit plans	(e) Expens	 se
(a) Name and address of each employee paid more than \$50,000	hours per week	(c) Compensation	t and deterred	account, otl	her
MONTH	devoted to position		compensation	allowance	:5
NONE		1			
					—
]		
		 		<u> </u>	—
Total number of other employees paid over \$50,000		·	—	-	0

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Part VIII Information About Officers, Directors, Trustees, Four Paid Employees, and Contractors (continued)		
3 Five highest-paid independent contractors for professional services. If none, e	nter "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 st number of organizations and other beneficiaries served, conferences convened, research papers	atistical information such as the produced, etc.	Expenses
1 N/A		
2		
3		
1		
Part IX-B Summary of Program-Related Investments		
Describe the two largest program-related investments made by the foundation during the tax year	on lines 1 and 2.	Amount
N/A		<u> </u>
All other program-related investments. See instructions.		
Fotal Add lines 1 through 3		<u> </u>

Part X Minimum Investment Return (All domestic foundations must complete this part. For	oreign 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	0.
b Average of monthly cash balances	1b	643000.
c Fair market value of all other assets	1c	· · · · · · · · · · · · · · · · · · ·
d Total (add lines 1a, b, and c)	1d	643000.
e Reduction claimed for blockage or other factors reported on lines 1a and		
1c (attach detailed explanation)	0.	
2 Acquisition indebtedness applicable to line 1 assets	2	0.
3 Subtract line 2 from line 1d	3	643000.
4 Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	9645.
5 Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	633355.
6 Minimum investment return. Enter 5% of line 5	6	31668.
Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating four foreign organizations check here and do not complete this part.)	ndations and certain	
1 Minimum investment return from Part X, line 6	1	31668.
2a Tax on investment income for 2015 from Part VI, line 5	3.	
b Income tax for 2015. (This does not include the tax from Part VI.)		
c Add lines 2a and 2b	2c	3.
3 Distributable amount before adjustments. Subtract line 2c from line 1	3	31665.
4 Recoveries of amounts treated as qualifying distributions	4	0.
5 Add lines 3 and 4	5	31665.
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	31665.
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	54500.
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	54500.
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	5	3.
6 Adjusted qualifying distributions. Subtract line 5 from line 4	6	54497.
Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the fo	oundation 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				31665.
2 Undistributed income, if any, as of the end of 2015				
a Enter amount for 2014 only			20201.	
b Total for prior years:	ļ	0		
3 Excess distributions carryover, if any, to 2015:		0.		
a From 2010				
b From 2011				
c From 2012				
d From 2013				
e From 2014				
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2015 from				
Part XII, line 4: ► \$ 54500 .				
a Applied to 2014, but not more than line 2a			20201.	
b Applied to undistributed income of prior			202011	
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus				
(Election required - see instructions)	0.			
d Applied to 2015 distributable amount			***	31665.
e Remaining amount distributed out of corpus	2634.			
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))				
6 Enter the net total of each column as indicated below:				
& Corpus Add lines 3f, 4c, and 4e Subtract line 5	2634.			
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			Chiparie MY	
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		1		
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	0.			
9 Excess distributions carryover to 2016.				
Subtract lines 7 and 8 from line 6a	2634.			
10 Analysis of line 9:				
a Excess from 2011				
b Excess from 2012				
c Excess from 2013				
d Excess from 2014 e Excess from 2015 2634.				
e Excess from 2015 2634.				

Form 990-PF (2015) MORRIS,	MAX AND SA	RAH ALTMAN	MEMORIAL TH		383555 Page 10
Part XIV Private Operating F			II-A, question 9)	N/A	
1 a If the foundation has received a ruling of					
foundation, and the ruling is effective fo b Check box to indicate whether the found	•	• • •	ın saction	4942(J)(3) or 4	942()(5)
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years	1312())(3) 011	342())(3)
income from Part I or the minimum	(a) 2015	(b) 2014	(c) 2013	(d) 2012	(e) Total
investment return from Part X for			<u> </u>	 	
each year listed					
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:				İ	
a "Assets" alternative test - enter: (1) Value of all assets					
• • • • • • • • • • • • • • • • • • • •				 	
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					1
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				1	
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 Info	rmation (Comple	te this part only	if the foundation	had \$5,000 or m	ore in assets
at any time during t				40,000 01	
1 Information Regarding Foundatio	n Managers:				
a List any managers of the foundation who	have contributed more t		ributions received by the	foundation before the clo	se of any tax
year (but only if they have contributed m	ore than \$5,000). (See so	ection 507(d)(2).)			
None					
 b List any managers of the foundation who other entity) of which the foundation has 			(or an equally large portio	n of the ownership of a p	artnership or
None					
2 Information Regarding Contributi					
Check here X if the foundation of the foundation makes gifts, grants, etc. (
a The name, address, and telephone numb	per or e-mail address of the	ne person to whom appl	cations should be addres	sed:	
b The form in which applications should b	e submitted and informat	on and materials they s	nould include:		
c Any submission deadlines:					
d Any restrictions or limitations on awards	, such as by geographica	l areas, charitable fields,	kinds of institutions, or o	ther factors:	
523601 11-24-15	<u>-</u> .				Form 990-PF (2015)

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Part XV

MORRIS, MAX AND SARAH ALTMAN MEMORIAL TR

Supplementary Information (continued) 3 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 status of contribution any foundation manager Name and address (home or business) recipient or substantial contributor a Paid during the year 1ST TEE OF GREATER CHARLESTON NONE PUBLIC CHARITY 321 WINGO WAY 500. MT PLEASANT, SC 29464 PUBLIC CHARITY AHAVAS YISRAEL CHARITY FUND NONE 2723 WOODCOURT ROAD 5000. BALTIMORE, MD 21209 BAIS MENACHEM YOUTH DEVELOPEMENT NONE PUBLIC CHARITY PROGRAM 150 SOUTH FRANKLIN STREET 1000. WILKES BARRE, PA 18701 BAIS YAAKOV SCHOOL FOR GIRLS NONE PUBLIC CHARITY 11111 PARK HEIGHTS AVE OWINGS MILLS, MD 21117 CHARITY 5000. CHARLESTON ANIMAL SOCIETY NONE PUBLIC CHARITY 2455 REMOUNT ROAD NORTH CHARLESTON SC 29406 500. See continuation sheet(s) ➤ 3a 54500. Total b Approved for future payment None Total

Part XVI-A **Analysis of Income-Producing Activities**

Enter gross amounts unless otherwise indicated.	Unrelate	d business income		uded by section 512, 513, or 514	(e)
1 Program service revenue:	(a) Business code	(b) Amount	(C) Exclu- sion code	(d) Amount	Related or exempt function income
	Couc		10000		
a b			 		
С					
d					
e					
f					
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash	1				
investments			14	647.	
4 Dividends and interest from securities					
5 Net rental income or (loss) from real estate:					
a Debt-financed property					
b Not debt-financed property					
6 Net rental income or (loss) from personal					
property					
7 Other investment income	ļ		ļ		
8 Gain or (loss) from sales of assets other					
than inventory					
9 Net income or (loss) from special events	-		-		
10 Gross profit or (loss) from sales of inventory					
11 Other revenue:					
a				· · · · · · · · · · · · · · · · · · ·	
b	 	<u> </u>			
c	 	·· ·			
d			_	- <u></u> .	
12 Subtotal. Add columns (b), (d), and (e)		0.		647.	0.
13 Total. Add line 12, columns (b), (d), and (e)	LI			13	647.
(See worksheet in line 13 instructions to verify calculations.)	•			10_	0 = 7 •
Part XVI-B Relationship of Activities to	the Acco	mplishment of Ex	emp	t Purposes	
Line No. Explain below how each activity for which incom	ne is reported in	column (e) of Part XVI-A	contrib	uted importantly to the accord	nplishment of
▼ the foundation's exempt purposes (other than by	<u> </u>				
3(C) THE MORRIS, MAX AND SAR	<u>AH ALTM</u>	IAN MEMORIAL	TR	<u>UST IS SUPPOR</u>	TED,
PRIMARILY, NY ITS INVES	TMENT F	ETURNS ON T	HE	<u>ORIGINAL CONR</u>	IBUTION
FROM THE ESTATE OF MORR	IS ALTM	AN AND ALL	INC	OME FROM INVE	STMENT RETURN
ARE UTILIZED TO CONTINU	ALLY FU	IND THE CHAR	<u>ITA</u>	BLE FUNCTION	OF THE TRUST.
					·
					
					· · · · · · · · · · · · · · · · · · ·
		 			
		· · · · · · · · · · · · · · · · · · ·	_		
					
					· · · · · · · · · · · · · · · · · · ·
				* *****	
23621 11-24-15					Form 990-PF (2015)

2a Is the foun	dation directly or indirectly affiliated with, or related to, on	e or more tax-exempt organi	zations described			
	501(c) of the Code (other than section 501(c)(3)) or in sec	ction 527?			Yes	LX No
b If "Yes," co	mplete the following schedule.	1				
	(a) Name of organization	(b) Type of organization	ļ(c) Description of rela	tionship	
	N/A					
		<u> </u>				
			-			
Sign and bei	penalties of perjury, I declare that I have examined this return, including it is true, correct, and complete Declaration of preparer (other the latting of officer or trustee		nation of which preparer		May the IRS dis return with the p shown below (so	oreparer
Paid Preparer	Print/Type preparer's name YAAKOV BORENSTEIN, C.P.A. Firm's name > YAAKOV BORENSTEIN	signature CoPoA PoC	Date 12-9-16	self- employed	PTIN <u>P007572</u> -213683	
Use Only		,,	-			-

Phone no. 301-530-5870

Firm's address ▶ 9505 LINDEN AVENUE

BETHESDA, MD 20814-1638

MORRIS, MAX AND SARAH ALTMAN MEMORIAL TR 38-6883555

Part XV Supplementary Information				
3 Grants and Contributions Paid During the				ļ
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient	 	
MAZZONI CENTER	NONE	PUBLIC	CHARITY	
21 S. 12TH ATREET PHILADELPHIA PA 19107				1500.
INIDADDINIA, IA 1910/				
FAMILIES FIRST	NONE	PUBLIC	CHARITY	
196 WATER STREET				
ELIZABETHTOWN, NY 12932		 	 	500.
FRIENDS OF THE IDF- SOUTHEAST REGION	NONE	PUBLIC	CHARITY	
5555 GLENRIDGE CONNECTOR ATLANTA, GA 30342				1000.
ATUMITA, GA JUJ42				1000.
GIRLS ROCK PHILLY	NONE	PUBLIC	CHARITY	
1428 GERMANTOWN AVE PHILADELPHIA, PA 19122				
			CHARITY	1500.
SARANAC LAKE YOUTH CENTER	NONE	PUBLIC	CHARITY	
29 WOODRUFF STREET				
SARANAC LAKE, PA 12983	- 		 	500.
COUNCIL FOR SECURE AMERICA 888 7TH AVE	NONE	PUBLIC	CHARITY	
NEW YORK, NY 10019				5000.
JEWISH INSTITUTE FOR NATIONAL SECURITY AFFAIRS	NONE	PUBLIC	CHARITY	,
1307 NEW YORK AVENUE				
WASHINGTON, DC 20005	 	· 	 	1000.
KENNEDY CENTER FOR THE PERFORMING	NONE	PUBLIC	CHARITY	
ARTS			<u>}</u>	•
2700 F STREET WASHINGTON DC 20566			1	2000.
CONFERENCE OF PRESIDENTS OF MAJOR	NONE	PUBLIC	CHARITY	
JEWISH ORG. 633 THIRD AVE				
NEW YORK, NY 10017		ļ		5000.
HOPE FOR HENRY FOUNDATION	NONE	PUBLIC	CHARITY	
2300 WISCONSIN AVE				1000
WASHINGTON DC 20007 Total from continuation sheets			<u> </u>	1000. 42500.

MORRIS, MAX AND SARAH ALTMAN MEMORIAL TR 38-6883555

3' Grants and Contributions Paid During the				
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	l Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient	Contribution	
MANNA 2323 RANSTEAD STREET	NONE	PUBLIC	CHARITY	
PHILADELPHIA, PA 19203		ļ		100
MOUNTAIN LAKE PBS	NONE	PUBLIC	CHARITY	
ONE SESAME STREET				:
PLATTSBOURGH NY 12901	 			50
NATIONAL COUNCIL OF JEWISH WOMEN	NONE	PUBLIC	CHARITY	
75 RIVERSIDE DRIVE				
NEW YORK, NY 10115			CHARITY	500
THE JEWISH FEDERATION OF CHARLESTON	NONE	PUBLIC	CHARITY	
176 CROGHAN SPUR ROAD	HOME	OBBIC		
CHARLESTON, SC 29407	 	<u> </u>		250
NORTH COUNTRY PUBLIC RADIO	NONE	PUBLIC	CHARITY	
ST. LAWRENCE UNIVERSITY]		
CANTON, NY 13617	 		 	50
PGA REACH	NONE	PUBLIC	CHARITY	
100 AVENUE OF THE CHAMPIONS PALM BEACH GARDENS FL 33418				50
PHILABUNDANCE	NONE	PUBLIC	CHARITY	
3616 S. GALLOWAY STREET	HOME		CHACTI	
PHILADELPHIA, PA 19148	 	-	-	100
		}		
EWISH HOME OF EASTERN PA	NONE	PUBLIC	CHARITY	
1101 VINE STREET SCRANTON, PA 18503		1		50
SCRANTON, PA 10303				
SIBLEY MEMORIAL HOSPITAL FOUNDATION 5255 LOUGHBORO ROAD	NONE	PUBLIC	CHARITY	
WASHINGTON, DC 20016				250
THE GOOD PEOPLE FUND, INC.	NONE	PUBLIC	CHARITY	
384 WYOMING AVE			1	
AILBURN, NJ 07041 Total from continuation sheets		L		200

MORRIS, MAX AND SARAH ALTMAN MEMORIAL TR 38-6883555

3' Grants and Contributions Paid During the				
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient	Contribution	741104111
PAWS	NONE	PUBLIC	CHARITY	
100 N 2ND STREET	HONE	COBSIC	CHARTIT	ļ
PHILADELPHIA, PA 19106				100
TRI-LAKES HUMANE SOCIETY	NONE	PUBLIC	CHARITY	
255 GEORGE LAPAN MEMORIAL HWY				
SARANAC LAKE NY 12983		 		50
AMERICAN FRIENDS OF LIBI	NONE	PUBLIC	CHARITY	
420 HARVARD STREET				
BROOKLINE, MA 02446				250
CHALLAH FOR HUNGER	NONE	PUBLIC	CHARITY	
201 S CAMAC STREET PHILADELPHIA PA 19107				50
ввуо	NONE	PUBLIC	CHARITY	
		<u> </u>		100
BNAI ZION FOUNDATION	NONE	PUBLIC	CHARITY	
		 		100
				:
GBS/CIDP FOUNDATION INT'L	NONE	PUBLIC	CHARITY	100
				<u>-</u>
	1			
		 		
Total from continuation sheets				

Form 990-PF Interest on Sav	ings and Tem	porary Cash	Investments	Statement 1
Source	(a Reve Per B	nue Net	(b) Investment Income	(c) Adjusted Net Income
WELLS FARGO BANK		647.	647.	
Total to Part I, line 3		647.	647.	
Form 990-PF	Accounti	ng Fees		Statement 2
Description	(a) Expenses Per Books	(b) Net Invest- ment Income	(c) Adjusted Net Incom	
ACCOUNTING	600.	300	•	0.
To Form 990-PF, Pg 1, ln 16b	600.	300		0.
Form 990-PF	Tax	es		Statement 3
Description	(a) Expenses Per Books	(b) Net Invest- ment Income	(c) Adjusted Net Incom	
EXCISE TAX	4.	0	•	0.
To Form 990-PF, Pg 1, ln 18	4.	0	•	0.