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Extended to September 15, 2017

Return of Private Foundation

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

▶ Do not enter social security numbers on this form as it may be made public.

▶ Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf.

OMB No 1545-0052

For	calendar year 2015 or tax year beginning NOV	1, 2015	, and ending	OCT 31, 2016	
Na	me of foundation			A Employer identification	number
C:	HDI Foundation, Inc.				
A	ttn: Ken Slutsky, Tax Exempt Inst Grp			73-1683871	
Nur	mber and street (or P O box number if mail is not delivered to street	B Telephone number			
0:	ne Lowenstein Drive	973-597-2510			
Cit	y or town, state or province, country, and ZIP or foreign p	ostal code		C If exemption application is p	ending, check here
R	oseland, NJ 07068				
G (Check all that apply: Initial return	Initial return of a fo	ormer public charity	D 1. Foreign organizations	s, check here
	Final return	Amended return		2 Foreign organizations me	seting the 85% test
	x Address change	Name change		2 Foreign organizations me check here and attach co	omputation
H (Check type of organization: X Section 501(c)(3) ex	cempt private foundation		E If private foundation sta	tus was terminated
L		Other taxable private found		under section 507(b)(1))(A), check here
l Fa	air market value of all assets at end of year J Accounti	=	X Accrual	F If the foundation is in a	
•	, , , , , , , , , , , , , , , , , , ,	ther (specify)	, , , , , , , , , , , , , , , , , , , 	under section 507(b)(1)(B), check here
	\$ 174,880,578. (Part I, colu		T		(d) = .
Pa	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a))	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
	1 Contributions, gifts, grants, etc., received	135,805,765.	*	N/A ∛ ∴,	
	2 Check I if the foundation is not required to attach Sch. 8	A	y ,	* * 1/2/2	¥
	3 Interest on savings and temporary cash investments	2,723.	2,723.		See Statement 1
	4 Dividends and interest from securities	775,555.	775,555.		See Statement 2
	5a Gross rents				* *
	b Net rental income or (loss)		, 4	<u> </u>	2/3
_ o	6a Net gain or (loss) from sale of assets not on line 10			v.); 🔻 ;	· · · · · · · · · · · · · · · · · · ·
2017 venue	b Gross sales price for all assets on line 6a			¥1.	
5 2017 Revenue	7 Capital gain net income (from Part IV, line 2)		0.		\$ 33
ಖ ಗಾ π	8 Net short-term capital gain	·	34. 'S		
	9 Income modifications Gross sales less returns	2	Z7.		
SEP	10a and allowances	**\	* ,	* 11. * 12.	<u> </u>
	D Less Cost of goods sold		ž ,	* * * * * * ·	\$3 \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\
Įį.	c Gross profit or (loss)	.22 023	* O.		See Statement 3
SCANNED —	11 Other income	<22,823. 136,561,220.	778,278,		Sée pracement 2 / 4
₹—	12 Total. Add lines 1 through 11	130,301,220.	770,270	<u> </u>	0.
	13 Compensation of officers, directors, trustees, etc 14 Other employee salaries and wages	<u>~.</u>			
20	15 Pension plans, employee benefits			DECEMBER	
es	16a Legal fees			RECEIVED	
ens	b Accounting fees Stmt 4	48,000.	48 0000		0.
X	c Other professional fees	,	<u>[8</u>]	SEP 22 2017	
ve E	17 Interest				(2)
rati	18 Taxes Stmt 5	13,637.	0.6	raem. Ut	0.
ist	19 Depreciation and depletion				
Ē	20 Occupancy				
Ad	21 Travel, conferences, and meetings				
and	22 Printing and publications				
ng.	23 Other expenses Stmt 6	159,485,435.	13,434.		165,202,471.
ratı	24 Total operating and administrative				
Operating and Administrative Expens	expenses Add lines 13 through 23	159,547,072.	61,434.		165,202,471.
0	25 Contributions, girts, grants paid	30,926.	;	* * * * *	30,926.
	26 Total expenses and disbursements.				165 000 000
	Add lines 24 and 25	159,577,998.	61,434,		165,233,397.
	27 Subtract line 26 from line 12.	. "	<u>.</u>		
	Excess of revenue over expenses and disbursements Net investment income (if negative, enter -0-)	<23,016,778.	716,844.	* *.	****
	C Adjusted net income (if negative, enter -0-)	23 SEC 2	.10,011	N/A	- 1/2. 1/2 - 1

73-1683871 Form 990-PF (2015) Attn: Ken Slutsky, Tax Exempt Inst Grp Page 2 Beginning of year Fnd of year Balance Sheets Attached schedules and amounts in the description Part II column should be for end-of-year amounts only (a) Book Value (b) Book Value (c) Fair Market Value 1 Cash - non-interest-bearing 75,310,146 41,249,088 2 Savings and temporary cash investments 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 : A . 7 Other notes and loans receivable Less: allowance for doubtful accounts | 8 Inventories for sale or use 9 Prepaid expenses and deferred charges 130,306,645 130 306 645 10a Investments - U.S. and state government obligations Stmt 7 124 999 199 **b** Investments - corporate stock c Investments - corporate bonds . 41 * 11 Investments - land, buildings, and equipment basis Less accumulated depreciation 12 Investments - mortgage loans 13 Investments - other 14 Land, buildings, and equipment; basis Less accumulated depreciation 3,324,845. 15 Other assets (describe ▶ Prepaid Expenses 3,324,845 3,277,602, 16 Total assets (to be completed by all filers - see the 203,586,947 174,880,578 instructions. Also, see page 1, item I) 34,559,886 28,866,208 17 Accounts payable and accrued expenses 18 Grants payable 19 Deferred revenue 20 Loans from officers, directors, trustees, and other disqualified persons 21 Mortgages and other notes payable 0 4,088 22 Other liabilities (describe > Deferred Tax Expense 28,870,296 34,559,886 23 Total liabilities (add lines 17 through 22) Foundations that follow SFAS 117, check here **X** and complete lines 24 through 26 and lines 30 and 31. **Net Assets or Fund Balances** 24 Unrestricted 169,027,061 146,010,282 25 Temporarily restricted 26 Permanently restricted Foundations that do not follow SFAS 117, check here and complete lines 27 through 31. 27 Capital stock, trust principal, or current funds 28 Paid-in or capital surplus, or land, bldg., and equipment fund 29 Retained earnings, accumulated income, endowment, or other funds 169,027,061 146,010,282 30 Total net assets or fund balances 203,586,947. 174,880,578 31 Total liabilities and net assets/fund balances **Analysis of Changes in Net Assets or Fund Balances** Part III

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		169,027,061.
2	Enter amount from Part I, line 27a	2	Т	<23,016,778.>
3	Other increases not included in line 2 (itemize)	3	П	0.
4	Add lines 1, 2, and 3	4	Τ	146,010,283.
5	Decreases not included in line 2 (itemize)	5	П	0.
6	Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30	6	$oxed{\mathbb{L}}$	146,010,283.

Page 3

(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.)			(b)	How ac - Purc - Don	nase i '	c) Date a (mo., da	ay, yr.)	(d) Date sold (mo., day, yr.)		
1a						•				
b NON	IE									
_ <u>C</u>		·			<u> </u>					
<u>d</u>					Ь.					
_e					<u> </u>					
(e) Gross sales price	(f) [Depreciation allowed (or allowable)		st or other basis expense of sale					nn or (loss) (f) minus (
<u>a</u>										
<u>b</u>										
C										
_d						-				
e	<u> </u>			10/04/00						
Complete only for assets show		<u></u>							ol. (h) gain i ot less than	
(i) F.M.V. as of 12/31/69		j) Adjusted basis as of 12/31/69		cess of col. (I) col. (J), if any					(from col. (I	
_a										
_b										
							***.			
_e	L		<u>L</u>							
2 Capital gain net income or (net co	apıtal loss)	If gain, also enter If (loss), enter -0	r in Part I, line - in Part I, line	7 7	}	2				
3 Net short-term capital gain or (lo	ss) as defi	ned in sections 1222(5) ar	nd (6):				_			
If gain, also enter in Part I, line 8	•	. ,	(- / -] [
If (loss), enter -0- in Part I, line 8 Part V Qualification U		ection 4940(e) for	_			3	<u> </u>			
If section 4940(d)(2) applies, leave to Was the foundation liable for the sec If "Yes," the foundation does not quantly and the appropriate amount in	tion 4942 lify under	tax on the distributable am section 4940(e). Do not co	mplete this pa	ırL						Yes X No
(a)	each colui		istructions be	iore making any e				- -		(d)
Base period years Calendar year (or tax year beginn	ıng ın)	(b) Adjusted qualifying dis		Net value of no	(c) onchai	ritable			Distrib	ution ratio ided by col. (c))
2014			,074,811.				,471,220	<u> </u>		.69123
2013			,196,027.				,392,292	 		2.43825
2012			,503,695.				,425,555	' -		1.19994
2011			,345,779. ,337,697.	<u></u>			,198,310	'		1,14611
2010		111	,337,037.			152	, 920 , 163	 		.72807
7. Tetal of line 1 column (d)								2		6,20363
2 Total of line 1, column (d)3 Average distribution ratio for the	5-year bac	o pariod - divide the total i	on line 2 hy 5	or by the number	of vo	arc				0.203030
the foundation has been in existe	•	•	on mie z by J,	or by the number	OI yo	aıs		3		1,24072
the roundation has been in existe	1100 11 1033	tilali o years						1		
4 Enter the net value of noncharital	ble-use ass	sets for 2015 from Part X,	line 5					4		199,955,292
5 Multiply line 4 by line 3								5		248,089,730
6 Enter 1% of net investment incor	ne (1% of	Part I, line 27b)						6		7,168
7 Add lines 5 and 6								7		248,096,898
8 Enter qualifying distributions fror	n Part XII	line 4						8		165,233,397
If line 8 is equal to or greater that See the Part VI instructions.			1b, and comp	lete that part usin	g a 19	% tax ı	ate.			·

5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? If "Yes." attach the statement required by General Instruction T.

6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:

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

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?

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

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

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

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

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6 X

7

8b

10

Attn: Ken Slutsky Tax Exempt Inst Gro

Page 5

	Will all Changes Developed Advisory			i age e
Pe	art VII-A Statements Regarding Activities (continued)			T
			Yes	No
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of			١
	section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		_ <u>x</u>
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges?	ا ۵۰]
	If "Yes," attach statement (see instructions)	12		<u> x</u>
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	х	L
	Website address ► N/A			
14	The books are in care of ► Kenneth J Slutsky - TEIG Telephone no. ► 973-597-2			
	Located at ► Lowenstein Sandler One Lowenstein Drive, Roseland NJ ZIP+4 ▶070	- 68		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here		,	•
	and enter the amount of tax-exempt interest received or accrued during the year	N/		I NI.
16	At any time during calendar year 2015, did the foundation have an interest in or a signature or other authority over a bank,		Yes	
	securities, or other financial account in a foreign country?	16		<u> </u>
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the]	- 4°	
_	foreign country	L	/ \	L
Pa	art 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.	ļ	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?			j
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)		<i>}</i> : ``	4.
	a disqualified person?	3	,	33
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	× 3		1 15
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?			
	(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)?			
	(6) Agree to pay money or property to a government official? (Exception Check "No"		اُدور گرون	
	if the foundation agreed to make a grant to or to employ the official for a period after		100	
	termination of government service, if terminating within 90 days.)		ž.	``
b	o If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations		š .	,,
	section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	1b 1		х
	Organizations relying on a current notice regarding disaster assistance check here	4	,	1/3
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	.\$		1 - 3
	before the first day of the tax year beginning in 2015?	1c **	,	X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation	, ,		31
	defined in section 4942(j)(3) or 4942(j)(5)):			
а	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?)	3 %
	If "Yes," list the years > , , ,	()		
h	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	of the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.	7 M		†
		850	1 44	5
2.	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time	1		,
Ja	during the year?		3.%	٠ ,
	of "Yes," did it have excess business holdings in 2015 as a result of (1) any purchase by the foundation or disqualified persons after		l `	
u	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,		•	'
		3b	[[
4.	Form 4720, to determine if the foundation had excess business holdings in 2015) N/A Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?		 	<u>x</u>
		4a	\vdash	 ^
0	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		x
	nau nut ucen removeu num jeupatuy ucivie uie inst uay ui nie wax year beginning in 2013:	1 40	ı	1 4

CHDI Foundation, Inc. Form 990-PF (2015) Attn: Ken Slutsky, Tax Exempt Inst Grp 73-1683871 Page 6 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: Yes X No (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? Yes X No Yes X No (3) Provide a grant to an individual for travel, study, or other similar purposes? (4) Provide a grant to an organization other than a charitable, etc., organization described in section Yes X No 4945(d)(4)(A)? (see instructions) (5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for Yes X No the prevention of cruelty to children or animals? b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations N/A 5b section 53.4945 or in a current notice regarding disaster assistance (see instructions)? Organizations relying on a current notice regarding disaster assistance check here c If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? N/A Yes 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] Yes 🗶 No a personal benefit contract? b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? If "Yes" to 6b, file Form 8870. 7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? Yes X No

If "Yes," did the foundation receive any proceeds or have any net income attr	ibutable to the transaction?		N/A	70
Part VIII Information About Officers, Directors, True Paid Employees, and Contractors	stees, Foundation Ma	anagers, Highl	y	
1 List all officers, directors, trustees, foundation managers and the	eir compensation.			
(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 account, other allowances
	_			
See Statement 8		0.	0.	0
2 Compensation of five highest-paid employees (other than those i	included on line 1). If none	enter "NONE."	·	/
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE				
			,~.	
Total number of other employees paid over \$50,000				

Paid Employees, and Contractors (continued) 3 Five highest-paid independent contractors for professional services. If none,	enter "NONE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
CHDI Mgt. Inc - 350 Seventh Ave, Suite 200,	Direct pgrm svcs except for	(0)
New York, NY 10001	\$1068149 of indr exp	25,685,229.
1011, 11 1001	VIOUTIAN OF THAT CAP	23,000,223.
		
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 number of organizations and other beneficiaries served, conferences convened, research paper	statistical information such as the rs produced, etc.	Expenses
1		
See Statement 9		133,776,840.
2		
3		
4		
Part IX-B Summary of Program-Related Investments		
Describe the two largest program-related investments made by the foundation during the tax y	ear on lines 1 and 2.	Amount
1 N/A		
2		
All other program-related investments. See instructions.		
3		
Total. Add lines 1 through 3		0.

73-1683871

Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.) Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes: 162,770,806. a Average monthly fair market value of securities 1a 1b 40 229 490. b Average of monthly cash balances 1c c Fair market value of all other assets 203,000,296. 1d d Total (add lines 1a, b, and c) e Reduction claimed for blockage or other factors reported on lines 1a and 0. 1e 1c (attach detailed explanation) Acquisition indebtedness applicable to line 1 assets 2 203,000,296. 3 Subtract line 2 from line 1d 3,045,004. Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions) 4 5 199,955,292. Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4 9,997,765. Minimum investment return Enter 5% of line 5 Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here and do not complete this part.) 9,997,765. Minimum investment return from Part X, line 6 14,337 Tax on investment income for 2015 from Part VI, line 5 2a 1 2b Income tax for 2015. (This does not include the tax from Part VI.) 14.337. 2c Add lines 2a and 2b 9 983 428, 3 Distributable amount before adjustments. Subtract line 2c from line 1 3 4 Recoveries of amounts treated as qualifying distributions 5 9,983,428. Add lines 3 and 4 5 6 0. Deduction from distributable amount (see instructions) 6 9,983,428. Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1 Part XII Qualifying Distributions (see instructions) Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes: Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26 1a 165,233,397. 1b Program-related investments - total from Part IX-B 2 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes 2 Amounts set aside for specific charitable projects that satisfy the: a Suitability test (prior IRS approval required) 3a 3b **b** Cash distribution test (attach the required schedule) 165,233,397. 4 Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4 4 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b 165,233, 6 397. Adjusted qualifying distributions. Subtract line 5 from line 4 Note The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section

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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				9,983,428.
2 Undistributed income, if any, as of the end of 2015	<i>3.4</i>	; <i>?</i> **4		
a Enter amount for 2014 only			0.	* * *
b Total for prior years:				# 14 m
3 Excess distributions carryover, if any, to 2015:		0.	**************************************	
aFrom 2010 108,387,946.				E. S. G. War St.
bFrom 2011 139,523,100.				
c From 2012 153,805,388.				3
dFrom 2013 161,855,927.	₹			
eFrom 2014 150,353,904.	,			
f Total of lines 3a through e	713,926,265.			
Qualifying distributions for 2015 from	713,320,203.	* * * *	2 12	
Part XII, line 4: > \$ 165, 233, 397.				
a Applied to 2014, but not more than line 2a			*	
b Applied to undistributed income of prior		× 344 3		3 3 4
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus	2,980		7. \$.	* * * * * * * * * * * * * * * * * * *
(Election required - see instructions)	0.			
d Applied to 2015 distributable amount	1 7 /	· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·	9,983,428.
e Remaining amount distributed out of corpus	155,249,969.	* * * * * * * * * * * * * * * * * * * *		*
5 Excess distributions carryover applied to 2015	0.		3 2	0.
(If an amount appears in column (d), the same amount must be shown in column (a))		· · · · · · · · · · · · · · · · · · ·	>4 · A (
6 Enter the net total of each column as indicated below;				
& Corpus Add lines 3f, 4c, and 4e Subtract line 5	869,176,234.		***	
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 instr.	**		0.	
f Undistributed income for 2015. Subtract		No. of the contract of the con		
lines 4d and 5 from line 1. This amount must		*		
be distributed in 2016	<u> </u>	<u> </u>		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.			<u> </u>
8 Excess distributions carryover from 2010				Ý.
not applied on line 5 or line 7	108,387,946.			· <u> </u>
9 Excess distributions carryover to 2016	760 700 000	, , , ,		
Subtract lines 7 and 8 from line 6a	760,788,288.) j' j		<u> </u>
10 Analysis of line 9:				
a Excess from 2011 139,523,100. b Excess from 2012 153,805,388.				
c Excess from 2012 153,805,388.				
dExcess from 2014 150, 353, 927.				
e Excess from 2015 155, 249, 969.			* * * * * * * * * * * * * * * * * * * *	, , ,
523581 11-24-15		*** . ~ * * *		Form 990-PF (2015)

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

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

c Any submission deadlines:

Attn: Ken Slutsky, Tax Exempt Inst Grp

Form 990-PF (2015)

Part XV | Supplementary Information (continued) 3 · Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, show any relationship to any foundation manager or substantial contributor Recipient Purpose of grant or Foundation Amount status of contribution Name and address (home or business) recipient a Paid during the year HUNTINGTON STUDY GROUP, LTD General Fund Purposes 2604 ELMWOOD AVE, SUITE 335 ROCHESTER, NY 14618 26,200. The Critical Path Institute ÞС General Fund Purposes 1730 E River Road #200 Tucson, AZ 85718 4,726. 30,926. **▶** 3a **b** Approved for future payment None Total **▶** 3b 0.

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated	Unrelate	d business income	Exclus	ded by section 512, 513, or 514	(0)
Enter gross amounts unless otherwise indicated.	(a) Business	(b) Amount	(C) Exclu- sion code	(d) Amount	(e) Related or exempt function income
1 Program service revenue:	code		code	741104111	
a b	-				
c	-		+-t		
d	-				
е	· 		+		
f	·		+		
g Fees and contracts from government agencies			╅		
2 Membership dues and assessments			+-+		
3 Interest on savings and temporary cash					
investments			14	2,723.	
4 Dividends and interest from securities		· · · · · · · · · · · · · · · · · · ·	14	775,555.	
5 Net rental income or (loss) from real estate:	160	7 1	1. 2		, <u>, , , , , , , , , , , , , , , , , , </u>
a Debt-financed property		* * *	 	* * * * * * * * * * * * * * * * * * * *	·
b Not debt-financed property			1		
6 Net rental income or (loss) from personal			\top		
property	1		1 1	1	
7 Other investment income		-	14	<22,823.>	
8 Gain or (loss) from sales of assets other					
than inventory			1 1		
9 Net income or (loss) from special events		_	1		
10 Gross profit or (loss) from sales of inventory		*	1		
11 Other revenue;			\top		
a					
b				-	
C					
d					
е					
12 Subtotal. Add columns (b), (d), and (e)	. 3	C).	755,455.	0.
13 Total Add line 12, columns (b), (d), and (e)				13	755,455.
(See worksheet in line 13 instructions to verify calculations.)					
Part XVI-B Relationship of Activities	to the Acco	omplishment of E	xemp	t Purposes	
Line No Explain below how each activity for which inc			A contrib	uted importantly to the accom	plishment of
the foundation's exempt purposes (other than	n by providing fui	nds for such purposes).		_	_ .
N/A					
					
					
					_ -
					
					
					
					
					·
					
					

•	Exempt Organ		and management a					
1 Did the or		rectly engage in any of the following	ng with any other organizatio	n described in section	on 501(c) of		Yes	No
		(3) organizations) or in section 52				1 1		
	• • •	ation to a noncharitable exempt or					,	1
(1) Cash			guille and the			1a(1)	» l	X
(2) Other	assets					1a(2)	_	х
b Other tran						(-/		,
	of assets to a noncharital	hle evernt organization				1b(1)	4	x
		ncharitable exempt organization				1b(2)		x
						1b(3)		x
(3) Rental of facilities, equipment, or other assets (4) Reimbursement arrangements								x
	·					1b(4)		x
	s or loan guarantees					1b(5)		x
		mbership or fundraising solicitation				1b(6)	-	x
		iling lists, other assets, or paid em	•			10		
		"Yes," complete the following sche					eis,	
		oundation. If the foundation received		e iii any transaction	or snaring arrangement, sr	iow in		
	(b) Amount involved	other assets, or services received.		(d) D	of transfers, transactions, and s			
(a)Line no	(U) Amount involved	(c) Name of noncharitable	e exempt organization	(u) Description	or transfers, transactions, and s	naring arr	angeme	nis
		N/A		 				
				 				
				 				
			<u> </u>					
								
								
					-			
			_					
	·	<u> </u>						
	 		<u> </u>					
								
								
								
		lly affiliated with, or related to, one		ations described	F			٦
		than section 501(c)(3)) or in sec	tion 527?		L.	Yes	X	_i No
b if "Yes," co	mplete the following sche							
_	(a) Name of org	anization	(b) Type of organization	(c) Description of relationsh	ip		
	N/A							
_	·				<u> </u>			
		·						
and be		that I have examined this return, including pplete Declaration of preparer (other that			■ Mav	the IRS d	iscuss	this
Sign	W -0-e/) a	. 1	Lion or timen proper a	- I Giui	rn with the	e prepar (see <u>ins</u>	er tr)?
Here	(W)	<i>A</i>	19/11/13	Vice Pres	ident	_ Yes	Х	J No
Sign	ature of officer of trustee	<u> </u>	Date	Title				
	Print/Type preparer's na	me Preparer's s	ignature		Check If PTIN			
	1 12000	cillo Sam	1/3 (10 ₋	8-16-17	self- employed			
Paid	Jumes Fa	11110	- 1 ansen	8-16-17	P012	98313		
Preparer	Firm's name ► KPMG	LLP			Firm's EIN ▶ 13-5565	207		_
Use Only	L							
	Firm's address > 345	Park Avenue						_
	New	York, NY 10154			Phone no. 212-758-9	3 700		
					Fo	rm 990	-PF	(2015)

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

Department of the Treasury Internal Revenue Service

Schedule of Contributors

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

OMB No 1545-0047

Name of the organization		Employer identification number					
CHDI Foundation, Inc.							
	tn: Ken Slutsky, Tax Exempt Inst Grp	73-1683871					
Organization type (check of	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	x 501(c)(3) exempt private foundation						
	4947(a)(1) nonexempt charitable trust treated as a private foundation						
	501(c)(3) taxable private foundation						
•	s covered by the General Rule or a Special Rule. (7), (8), or (10) organization can check boxes for both the General Rule and a Special Ru	ıle. See ınstructions.					
General Rule							
	n filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling one contributor. Complete Parts I and II See instructions for determining a contributor						
Special Rules							
sections 509(a)(1) any one contribute	n described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a or, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amou, line 1. Complete Parts I and II.	, or 16b, and that received from					
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.							
but it must answer "No" on	hat is not covered by the General Rule and/or the Special Rules does not file Schedule l Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its F the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).						
HA For Paperwork Redu	action Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule	B (Form 990, 990-EZ, or 990-PF) (2015)					

Name of organization

CHDI Foundation, Inc.

Attn: Ken Slutsky, Tax Exempt Inst Grp

Employer identification number

73-1683871

Part ! Contrib	utors (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	VBS Holdings LLC c/o Lowenstein Sandler, TEIG One Lowenstein Drive Roseland, NJ 07068	\$\$	Person X Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	Lotsa LLC C/o Lowenstein Sandler, TEIG One Lowenstein Drive Roseland, NJ 07068	\$	Person X Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a)	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)

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

Name of organization

CHDI Foundation, Inc.

Attn: Ken Slutsky, Tax Exempt Inst Grp

Employer identification number

73-1683871

Part II								
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received					
		\$						
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received					
		\$						
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received					
		\$						
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received					
		\$						
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received					
		\$						
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received					
		\$						

	B (Form 990, 990-EZ, or 990-PF) (2015)		Page 4				
Name of org	=		Employer identification number				
	indation, Inc.						
Part III	in Slutsky, Tax Exempt Inst Grp Exclusively religious, charitable, etc., counties the year from any one contributor. Complete completing Part III, enter the total of exclusively religions.	columns (a) through (e) and the follow	73-1683871 In section 501(c)(7), (8), or (10) that total more than \$1,000 for ring line entry. For organizations less for the year (Enter this info once)				
(a) No. I	Use duplicate copies of Part III if addition	nal space is needed.					
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held				
-	H-47A	(e) Transfer of gift					
-	Transferee's name, address, a	and ZIP + 4	Relationship of transferor to transferee				
(a) No.	(h) Dumana of sife	(a) Hea of sife	(d) December of how wife in held				
_ 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, a	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, a	and ZIP + 4	Relationship of transferor to transferee				
523454 10-26	i-15		Schedule B (Form 990, 990-EZ, or 990-PF) (2015)				

Form.990-PF Intere	st on Saving	s and T	empora	ary Cash	Inve	stments	Sta	atement	1
Source	Re	(a) Revenue Net Per Books		(b) Met Investment Income			(c) Adjusted Net Income		
Int Income - Other Total to Part I, line 3			2,723.		2,723.				
Form 990-PF	Dividends	and Int	erest	from Sec	uriti	les	Sta	atement	2
Source	Gross Amount	Capital Gains Dividends		(a) Revenue Per Book		(b) Net Invest- ment Income			
Dividend Income - Money Funds Int Income - US Treasury	53,273.	0.			53,273.		53,273.		
Obligations To Part I, line 4	722,282.		0. 0.	722,2					
· · · · · · · · · · · · · · · · · · ·			=	=		<u> </u>		:	
Form 990-PF		Other	Incor	ne			Sta	atement	3
Description			Rev	(a) zenue Books		(b) Invest- Income		(c) Adjusteo Net Incor	
Other Income Unrealized MTM on U	ST	•		29. <22,852.			0. 0.		
Total to Form 990-P	F, Part I, 1	ine 11		<22,823.	>		0.		

Form .990-PF	Accounti	ng Fees	Statement 4			
Description	(a) Expenses Per Books	(b) Net Invest- ment Income	(c) Adjusted Net Income	(d) Charitable Purposes		
Accounting Fees	48,000.	48,000.		0.		
To Form 990-PF, Pg 1, ln 16b	48,000.	48,000.		0.		
Form 990-PF	Taxes		Statement 5			
Description	(a) Expenses Per Books	(b) Net Invest- ment Income	(c) Adjusted Net Income	(d) Charitable Purposes		
Current year taxes	13,637.	0.		0.		
To Form 990-PF, Pg 1, ln 18	13,637.	0.		0.		
Form 990-PF Other		xpenses	S	tatement 6		
Description	(a) Expenses Per Books	(b) Net Invest- ment Income	(c) Adjusted Net Income	(d) Charitable Purposes		
Contract Research Expenses G & A Expenses Direct pgrm svcs except for	133,776,840.			138,579,302.		
\$1068149 of indr exp Custody Fees	25,685,229. 13,434.			26,617,326. 0.		
To Form 990-PF, Pg 1, ln 23	159,485,435.	13,434.		165,202,471.		

Form.990-PF U.S. and State	/City Gov	ernment	Obligation	ons	Stat	ement	7
Description	U.S. Gov't	Other Gov't	Book Value		Fair Market Value		
Investment in US Treasury Obligations	x		130,3	06,645.	130,306,645.		
Total U.S. Government Obligations		_	130,3	,	130,306,645.		
Total State and Municipal Government	ent Oblig	ations			· ·		
Total to Form 990-PF, Part II, li	ne 10a	=	130,30	130,306,645.			
Form 990-PF Part VIII - Lis Trustees and				-	State	 ement	8
Name and Address	Title Avrg H		Compen- sation	Ве	ployee n Plan ontrib		
Allen Levithan One Lowenstein Drive Roseland, NJ 07068	Preside:	nt/Secre	-	0.	0.		0.
Kenneth J Slutsky One Lowenstein Drive Roseland, NJ 07068	VP/Trea			0.	0.		0.
David Mills One Lowenstein Drive Roseland, NJ 07068	Asst Sec	_		0.			0.
Triplet Investment Company, L.L.C One Lowenstein Drive Roseland, NJ 07068	. Member	0		0.	0.		Ο.
Robi Blumenstein-pd thru CHDI Mgt Inc 305 Seventh Ave Suite 200 New York, NY 10001	Presiden		_	0.	0.		0.

Form, 990-PF

Summary of Direct Charitable Activities

Statement

9

Activity One

Medical(neurodegenerative)research performed on contract basis on behalf and at direction of Foundation, plus workshops, conferences, advice, & dissemination of data&info to research community. Does not include "programmatic pmts" in Section VIII.

Expenses

To Form 990-PF, Part IX-A, line 1

133,776,840.