Form **990-PF** Department of the Treasury Internal Revenue Service

# **Return of Private Foundation**

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

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

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

OMB No 1545-0052

For	calendar year 2016 or tax year beginning		, and ending		
Na	me of foundation Elev	A Employer identification	number		
_I	UEC LOCAL 1 OF NYC SCHOLA	13-3251442			
	mber and street (or P O box number if mail is not delivered to street	B Telephone number			
_	17-24 27TH STREET	718-767-70	04		
	y or town, state or province, country, and ZIP or foreign po LONG ISLAND CITY, NY 1110			C If exemption application is p	ending, check here
	Check all that apply: Initial return	<del></del>	ormer public charity	D 1. Foreign organizations	check here
u c	Final return	Amended return	officer public charity	i. Poreign organizations	, check here
	Address change	Name change		Foreign organizations me check here and attach co	eting the 85% test,
HC	Check type of organization. X Section 501(c)(3) exi	empt private foundation	<del></del>	E If private foundation stat	
	Section 4947(a)(1) nonexempt charitable trust	Other taxable private found		under section 507(b)(1)	
I Fa	air market value of all assets at end of year   J   Accountin	-	X Accrual	F If the foundation is in a 6	50-month termination
	from Part II, col (c), line 16)	ner (specify)	<del>, - ,</del>	under section 507(b)(1)	(B), check here
	\$ 48,237. (Part I, colur			<del></del>	[ /d\a
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	(0) Disbursements for charitable purposes
	1 Contributions, gifts, grants, etc., received	23,307.			(cash basis only)
	2 Check In the foundation is not required to attach Sch B	23,007			<del> </del>
	3 Interest on savings and temporary cash investments	74.	74.	74.	STATEMENT 1
	4 Dividends and interest from securities				
	5a Gross rents				
	b Net rental income or (loss)				
ē.	6a Net gain or (loss) from sale of assets not on line 10 . Gross sales price for all			<b></b>	
Revenue	b assets on line 6a	*		ļ	ļ
æ	7 Capital gain net income (from Part IV, line 2)		0.	0.	<del> </del>
	8 Net short-term capital gain 9 Income modifications			·	<del> </del>
	Gross sales less returns and allowances		<del></del>		
	b Less Cost of goods sold				<del></del>
	c Gross profit or (loss)				
	11 Other income				
	12 Total. Add lines 1 through 11	23,381.	74.	74.	
	13 Compensation of officers, directors, trustees, etc	0.	0.	0.	0.
	14 Other employee salaries and wages	<del></del>			
S	15 Pension plans, employee benefits EIVED			ļ	
penses	16a Legal fees	18		<del> </del>	
			<del></del>	<del></del>	<del> </del>
e E		<u> </u>		<del></del>	
aţį	18 Taxes OGOSTMT (2)	26.	0.	0.	0.
ist	19 Depreciation and depletion				
Ē	20 Occupancy				
Ä	21 Travel, conferences, and meetings				
auc	22 Printing and publications		<del></del>	<del> </del>	<del> </del>
ing	23 Other expenses STMT 3	254.	0.	0.	0.
Operating and Administrative	24 Total operating and administrative	280.	0.	0.	0.
ŏ	expenses. Add lines 13 through 23 25 Contributions, gifts, grants paid	20,000.	•	· · · · · · · · · · · · · · · · · · ·	20,000.
	26 Total expenses and disbursements.	20,000.			20,000.
	Add lines 24 and 25	20,280.	0.	0.	20,000.
	27 Subtract line 26 from line 12:		<del></del>		
	Excess of revenue over expenses and disbursements	3,101.			
	b Net investment income (if negative, enter -0-)		74.		
	c Adjusted net income (if negative, enter -0-)		<u> </u>	74.	L
6235	501 11-23-16 LHA For Paperwork Reduction Act Notice	e, see instructions.		_	Form <b>990-PF</b> (2016

IUEC LOCAL 1 OF NYC SCHOLARSHIP FUND

13-3251442

Form 990-PF (2016)

Form 990-PF (2016)

(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 acquired P - Purchase D - Donation	(c) Date acquir (mo., day, yr	
1a		D Dollation				
	NE					
C			·· <del>·····</del> ··			<del></del>
d						
6						
(e) Gross sales price	(f) Depreciation allowed (or allowable)		st or other basis expense of sale		(h) Gain or (e) plus (f) m	
<u>a</u>						
<u>b</u>	<u> </u>					
<u>c</u>						<del></del>
_d	<del> </del>	<del></del>				
Complete only for assets show	ng gain in column (h) and owned	d by the foundation	on 12/31/69		(I) Counc (Col. (b)	A coup munus
(i) F.M V. as of 12/31/69	(j) Adjusted basis	(k) E)	cess of col. (1)		(I) Gains (Col. (h) ol. (k), but not les Losses (from	s than -0-) or
(1)1.11111.113.11.123.11.123	as of 12/31/69	over	col. (j), if any			
<u>a</u>	ļ					<del></del>
<u>b</u>	<del> </del>			<del></del>		
d		<del></del>		<del></del>		
e	<del> </del>			<del></del>		
	C If gain, also	enter in Part I, line	7	<del></del>		<del></del>
2 Capital gain net income or (net c		er -0- in Part I, line		) <u>2</u>		
3 Net short-term capital gain or (lo if gain, also enter in Part I, line 8. if (loss), enter -0- in Part I, line 8	, cólumn (c).	5) and (6):		}		
	Inder Section 4940(e)	for Reduced	Tax on Net	Investment In	come	
(For optional use by domestic privat	e foundations subject to the sect	tion 4940(a) tax or	net investment in	come )		<del></del>
If section 4940(d)(2) applies, leave t	·			10		Yes X No
Was the foundation liable for the sec If "Yes," the foundation does not qua 1 Enter the appropriate amount in	hify under section 4940(e). Do n	ot complete this pa	ırt.			Yes A NO
(a) Base period years	(b)			(c) ncharitable-use asset	s (col.	( <b>d)</b> Distribution ratio b) divided by col. (c))
Calendar year (or tax year beginn 2015	(ing iii)	20,000.		40,04		• 499488
2014		21,000.		27,50		.763609
2013		15,000.		26,88		.557890
2012		8,500.		24,85	7.	.341956
2011		16,000.		23,00	0.	.695652
2 Total of line 1, column (d)					2	2.858595
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	.571719
4 Enter the net value of noncharita	ble-use assets for 2016 from Par	rt X, line 5			4	47,567.
5 Multiply line 4 by line 3					5	27,195.
6 Enter 1% of net investment incom	me (1% of Part I, line 27b)				6	1.
7 Add lines 5 and 6					7	27,196.
8 Enter qualifying distributions from	m Part XII, line 4				8	20,000.
If line 8 is equal to or greater tha See the Part VI instructions.	n line 7, check the box in Part VI	, line 1b, and comp	lete that part usin	g a 1% tax rate.		

				1442		Page 4
	art VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 49	48	see	instru	ictio	ns)
, 1	Exempt operating foundations described in section 4940(d)(2), check here   and enter "N/A" on line 1.		ĺ			
	Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)	_ i	ŀ			
- 1	Domestic foundations that meet the section 4940(e) requirements in Part V, check here 🕒 🗓 and enter 1%	1	<u> </u>			1.
	of Part I, line 27b		1			
	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-)	2				0.
3	Add lines 1 and 2	3	L			1.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4				0.
5	Tax based on investment income Subtract line 4 from line 3. If zero or less, enter -0-	5				<u> 1.</u>
6	Credits/Payments;		ĺ			
1	2016 estimated tax payments and 2015 overpayment credited to 2016 6a		ľ			
t	Exempt foreign organizations - tax withheld at source					
(	Tax paid with application for extension of time to file (Form 8868)		ľ			
(	Backup withholding erroneously withheld		l			,
7	Total credits and payments. Add lines 6a through 6d	7	<u> </u>			0.
8	Enter any <b>penalty</b> for underpayment of estimated tax. Check here if Form 2220 is attached	8	L			
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9				1.
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10				
11	Enter the amount of line 10 to be: Credited to 2017 estimated tax ▶ Refunded ▶	11				
_	rt VII-A Statements Regarding Activities					
18	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in				Yes	
	any political campaign?			1a		X
t	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	d or				
	distributed by the foundation in connection with the activities					
(	Did the foundation file Form 1120-POL for this year?			1c		X
(	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:					
	(1) On the foundation. $\blacktriangleright$ \$ (2) On foundation managers. $\blacktriangleright$ \$ 0.					
6	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation			i i		
	managers > \$O.					J
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?			2		X
	If "Yes," attach a detailed description of the activities					·
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or					-
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes			3		X
48	Did the foundation have unrelated business gross income of \$1,000 or more during the year?			4a		X
	If "Yes," has it filed a tax return on Form 990-T for this year?	N	/A	4b		<u></u>
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?			5		X
	If "Yes," attach the statement required by General Instruction T			1 1		,
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either;			1 1		,
	By language in the governing instrument, or				Ì	
	By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state la	w,		]_		!
	remain in the governing instrument?			6	X	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV			7	X	
				l i		ł
88	Enter the states to which the foundation reports or with which it is registered (see instructions)					1
	NY					
t	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)				_	ļ '
	of each state as required by General Instruction G? If "No," attach explanation			86	X	<b></b>
9	Is the foundation claiming status as a private operating foundation within the meaning of section $4942(j)(3)$ or $4942(j)(5)$ for calendarian claiming status as a private operating foundation within the meaning of section $4942(j)(3)$ or $4942(j)(5)$ for calendarian claiming status as a private operating foundation within the meaning of section $4942(j)(3)$ or $4942(j)(5)$ for calendarian claiming status as a private operating foundation within the meaning of section $4942(j)(3)$ or $4942(j)(3)$ for calendarian claiming status as a private operating foundation within the meaning of section $4942(j)(3)$ or $4942(j)(3)$ for calendarian claiming status as a private operating foundation within the meaning of section $4942(j)(3)$ or $4942(j)(3)$ for calendarian claiming status as a private operating foundation within the meaning of section $4942(j)(3)$ or $4942(j)(3)$ for calendarian claiming status as a private operating foundation within the meaning of section $4942(j)(3)$ for calendarian claiming status as a private operation of $4942(j)(3)$ for calendarian claiming status as a private operation of $4942(j)(3)$ for calendarian claiming status as a private operation of $4942(j)(3)$ for $4942(j)($	lar				-
	year 2016 or the taxable year beginning in 2016 (see instructions for Part XIV)? If "Yes," complete Part XIV		_	9	X	<b></b>
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses ST	ΜŢ		10	X	
			F	orm <b>99</b> 0	PF	(2016)

	art VII-A   Statements Regarding Activities (continued)	1442		Page 3
<u> </u>	it VII-A   Statements Regarding Activities (continued)	<del></del>		
			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		X
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		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	
	Website address ► N/A			
14	The books are in care of ► LOCAL 1 SCHOLARSHIP FUND Telephone no. ► (718)		<u>700</u>	4
	Located at ► 47-24 27TH STREET, LONG ISLAND CITY, NY ZIP+4 ►1	<u>1101</u>		
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	/A	
16	At any time during calendar year 2016, did the foundation have an interest in or a signature or other authority over a bank,		Yes	ı
	securities, or other financial account in a foreign country?	16		X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the			
	foreign country 🕨	<u> </u>		
Pa	ert 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.	Ţ	Yes	No
1 a	During the year did the foundation (either directly or indirectly):			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	) /		
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)	) /		)
	a disqualified person? Yes X No	] ]		
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	1 1		j
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes X No			1
	(5) Transfer any income or assets to a disqualified person (or make any of either available	1 !		ĺ
	for the benefit or use of a disqualified person)?	) !		
	(6) Agree to pay money or property to a government official? (Exception. Check "No"	1 !		İ
	if the foundation agreed to make a grant to or to employ the official for a period after	1 7		
	termination of government service, if terminating within 90 days.)	1 1		1
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)?  N/A	1b		
	Organizations relying on a current notice regarding disaster assistance check here			
c	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected	1 !		
	before the first day of the tax year beginning in 2016?	1c		X
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 $4942(j)(5)$ ).	1 !		
8	At the end of tax year 2016, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning	1 !		
	before 2016? Yes X No	1 !		
	If "Yes," list the years  , , , ,	}		
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	1 !		
	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach	1 !	'	
	statement - see instructions.) N/A	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.			
	<b>•</b> , , , , , , , , , , , , , , , , , , ,	1 !		
3 a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			
	during the year?	·		
b	of "Yes," did it have excess business holdings in 2016 as a result of (1) any purchase by the foundation or disqualified persons after	1		}
-	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	1		
	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,	1		1
	Form 4720, to determine if the foundation had excess business holdings in 2016) N/A	3b		1
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		X
	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 2016?	4b	-	х
		orm <b>99</b> 0	)-PF	

Form 990-PF (2016) IUEC LOCAL 1 OF NYC SCHO			13-3251	442	Page 6
Part VII-B Statements Regarding Activities for Which I	Form 4/20 May Be	Required (contin	ued)	<del></del>	<del></del>
5a During the year did the foundation pay or incur any amount to:	- 4045(-110	,,	es X No	}	}
<ol> <li>(1) Carry on propaganda, or otherwise attempt to influence legislation (section</li> <li>(2) Influence the outcome of any specific public election (see section 4955); or</li> </ol>	· · · ·		S LALINO	1	}
any voter registration drive?	ii to carry on, directly or muii		es X No	- 1	į
(3) Provide a grant to an individual for travel, study, or other similar purposes	2		es X No		-
(4) Provide a grant to an organization other than a charitable, etc., organization		L 11	53 [22] 110		-{
4945(d)(4)(A)? (see instructions)	ii acsonoca iii section		es X No		1
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational nurnoses, or	=	100	i	1.
the prevention of cruelty to children or animals?	or account purposes, or		es X No	į	1
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und	der the exceptions described				ĺ
section 53.4945 or in a current notice regarding disaster assistance (see instru	ctions)?	J	N/A	5b	1
Organizations relying on a current notice regarding disaster assistance check h	ere		▶□ [		
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fr	rom the tax because it mainta	ined	Ì	j	}
expenditure responsibility for the grant?	ì	√I/A 🗀 Y	es 🔲 No		1 '
If "Yes," attach the statement required by Regulations section 53 4945	5-5(d)		1		
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums on			- {	
a personal benefit contract?		Y	es X No		}
<b>b</b> Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal benefit contract?		{	6b	X
If "Yes" to 6b, file Form 8870			[		T
7a At any time during the tax year, was the foundation a party to a prohibited tax s	helter transaction?	Y	es 🗓 No	l_	Ш
<b>b</b> If "Yes," did the foundation receive any proceeds or have any net income attribu			N/A	7b	
Part VIII Information About Officers, Directors, Trust	ees, Foundation Ma	anagers, Highly	У		
1 List all officers, directors, trustees, foundation managers and their	companyation				
List all officers, directors, trustees, foundation managers and their		(c) Compensation	(d) Contributions to	(a) F	vnanca
(a) Name and address	(b) Title, and average hours per week devoted	(If not paid,	(d) Contributions to employee benefit plans and deferred compensation	accou	xpense nt, other
	to position	enter -0-)	compensation	allow	vances
		}	ē	ł	
SEE STATEMENT 7		0.	0.	<u>.</u> İ	0.
			<del></del>	<del></del>	
	I		:	ļ	
	I			}	
				†	
			•	}	
				}	
				Į.	
				<u> </u>	
2 Compensation of five highest-paid employees (other than those inc	<del></del>	enter "NONE."	(d)	T	
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week	(c) Compensation	(d) Contributions to employee benefit plans	(e) E	xpense nt, other
	devoted to position	(0)	and deterred compensation	allov	vances
NONE				ł	
		<b>}</b>	<u></u>	ļ	
		j		ľ	
		<del> </del>		<del> </del>	
	ı	(			
	<del></del>	<del> </del>		<del> </del>	
				}	
		<del> </del>		+	
		}		1	
Total number of other employees paid over \$50,000	<del></del>	<del></del>	<u> </u>	ــــــــــــــــــــــــــــــــــــــ	0
		<del></del>	Forn	1990-P	

Part VIII Information About Officers, Directors, Trustees, Foundation Ma Paid Employees, and Contractors (continued)	nagers, Highly	1442 Page 7
3 Five highest-paid independent contractors for professional services. If none, enter "NONE."	<del></del>	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
	<del></del>	
Total number of others receiving over \$50,000 for professional services  Part IX-A   Summary of Direct Charitable Activities		<u> </u>
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	ition such as the	Expenses
1 N/A		
2		<del></del>
3		
4		
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	<del>,</del>	Amount
1 N/A		7,110011
2		
All other program-related investments. See instructions.  3		
Total. Add lines 1 through 3	<b>&gt;</b>	0.
		orm <b>990-PF</b> (2016)

F	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations	ındatıons, se	e instructions )
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:	7-7	
	Average monthly fair market value of securities	1a	0.
b	Average of monthly cash balances	1b	48,291.
C	Fair market value of all other assets	1c	<del></del>
d	Total (add lines 1a, b, and c)	10	48,291.
е	Reduction claimed for blockage or other factors reported on lines 1a and		<del></del>
	1c (attach detailed explanation) 1e 0.	] ]	
2	Acquisition indebtedness applicable to line 1 assets	1 2	0.
3	Subtract line 2 from line 1d	3	48,291.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	724.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	47,567.
6	Minimum investment return. Enter 5% of line 5	6	2,378.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations are foreign organizations check here	nd certain	
1	Minimum investment return from Part X, line 6	1	
2a	Tax on investment income for 2016 from Part VI, line 5	T-1	
p	Income tax for 2016. (This does not include the tax from Part VI.)	1	
C	Add lines 2a and 2b	2c	
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	
P	art XII Qualifying Distributions (see instructions)		<del></del>
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:	$T^{-}T^{-}$	
а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	20,000.
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:		
а	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	20,000.
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	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	20,000.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation 4940(e) reduction of tax in those years.	qualifies for th	e section

Form **990-PF** (2016)

Part XIII Undistributed Income (se	ee instructions)			Pag
		N/A		
	(a) Corpus	(b) Years prior to 2015	(c)	(d)
Distributable amount for 2016 from Part XI, line 7		7 cars prior to 2013	2015	2016
2 Undistributed income, if any, as of the end of 2016		<del> </del>	<del></del>	
a Enter amount for 2015 only				
b Total for prior years:			<del> </del>	
3 Excess distributions carryover, if any, to 2016:				
a From 2011				
<b>b</b> From 2012				
c From 2013				
d From 2014				
e From 2015				
f Total of lines 3a through e	-			1
4 Qualifying distributions for 2016 from		<del></del>	<del> </del>	
Part XII, line 4; ►\$				
a Applied to 2015, but not more than line 2a				
<b>b</b> Applied to undistributed income of prior				
years (Election required - see instructions)				
c Treated as distributions out of corpus				
(Election required - see instructions)				
d Applied to 2016 distributable amount				
e Remaining amount distributed out of corpus				
Excess distributions carryover and the coas				
must be shown in column (a), the same amount				
Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5				
b Prior years' undistributed income. Subtract			<del></del>	
line 4b from line 2b				
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				
d Subtract line 6c from line 6b. Taxable				
amount - see instructions	j			
e Undistributed income for 2015. Subtract line				
4a from line 2a Taxable amount - see instr.				
f Undistributed income for 2016. Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2017				
Amounts treated as distributions out of				
corpus to satisfy requirements imposed by	İ			
section 170(b)(1)(F) or 4942(g)(3) (Election				
may be required - see instructions)				
Excess distributions carryover from 2011				
not applied on line 5 or line 7	İ			
Excess distributions carryover to 2017.				
Subtract lines 7 and 8 from line 6a				
Analysis of line 9:				
Excess from 2012				
b Excess from 2013				
Excess from 2014				
Excess from 2015	1		1	
	1		1	
e Excess from 2016			1	

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 e-mail address of the person to whom applications should be addressed:

SE	ישוי	CIT	λп	EM	ואים	m ·	Q
5 r	115	$\mathbf{z}_{\mathrm{T}}$	$\mathbf{A}.\mathbf{I}$	. EM	LL1	L. T.	0

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) 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 BRITNEY PENNA (PAID TO SIENA COLLEGE) ACTIVE EDUCATION 515 LONDON ROAD LONDONVILLE, NY 12211 2,000. BROOK MEGNA (PAID TO BINGHAMTON EDUCATION ACTIVE UNIVERSITY) 4400 VESTAL PARKWAY E. BINGHAMTON, NY 13902 3,000. EVAN NOONE (PAID TO THE COLLEGE OF ACTIVE EDUCATION NJ) PO BOX 7718 EWING, NJ 08628-0718 2,000. HEATHER M. LINDEMAN (PAID TO QUEENS ACTIVE EDUCATION COLLEGE) 65-30 KISSENA BLVD. FLUSHING NY 11367-1597 1,000. JAKE MEGNA (PAID TO UNIVERSITY OF ACTIVE EDUCATION BUFFALO) 12 CAPEN HALL BUFFALO, NY 14260 1,500. SEE CONTINUATION SHEET(S) Total → 3a 20,000. **b** Approved for future payment NONE **▶** 3b 0. Total

# Part XVI-A Analysis of Income-Producing Activities

· · · · · · · · · · · · · · · · · · ·					
Enter gross amounts unless otherwise indicated.	Unrelate (a) Business	d business income (b)	(C) Exclu-	(d)	(e) Related or exempt
1 Program service revenue;	code	Amount	sion	Amount	function income
a					
b				<del></del>	<del></del>
C			1		
d			<del>                                     </del>		<del></del>
е	<del>                                     </del>		-		
,	<del>  </del>	<del></del>	┼──	<del></del>	<del></del>
g Fees and contracts from government agencies	<del> </del>		┼	<del></del>	
	<del> </del>		┼		
2 Membership dues and assessments	} <del></del>	<del></del>	<b>├</b> ─	<del> </del>	<del></del>
3 Interest on savings and temporary cash	}		1 1 4	77.4	
investments	<del></del>		14	74.	
4 Dividends and interest from securities	ļ———	<del></del>	<b>↓</b>		
5 Net rental income or (loss) from real estate.	ļ				
Debt-financed property	ļ	<del></del>		<u></u>	 
b Not debt-financed property			<u> </u>	<u></u>	
6 Net rental income or (loss) from personal	1		1		
property			<u> </u>		
7 Other investment income					
8 Gain or (loss) from sales of assets other					
than inventory	1 1		1		
9 Net income or (loss) from special events			1		<del></del>
10 Gross profit or (loss) from sales of inventory					
11 Other revenue:	t		†		<del></del>
9	1 1		1	j	
			<del> </del>	<del>                                     </del>	<del></del>
b			┼		<del></del>
			┼		<del></del>
d			<del>├</del>		
e			┼	71	<del></del>
e 12 Subtotal. Add columns (b), (d), and (e)		0.		74.	0.
e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e)		0.		74. 13_	0. 74.
e 12 Subtotal. Add columns (b), (d), and (e)		0.		<del></del>	
e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.)  Part XVI-B Relationship of Activities t		omplishment of E	xemp	13_ t Purposes	74.
e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.)  Part XVI-B Relationship of Activities t  Line No. Explain below how each activity for which inco	me is reported i	omplishment of E.	xemp	13_ t Purposes	74.
e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.)  Part XVI-B Relationship of Activities t	me is reported i	omplishment of E.	xemp	13_ t Purposes	74.
e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.)  Part XVI-B Relationship of Activities t  Line No. Explain below how each activity for which inco	me is reported i	omplishment of E.	xemp	13_ t Purposes	74.
e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.)  Part XVI-B Relationship of Activities t  Line No. Explain below how each activity for which inco	me is reported i	omplishment of E.	xemp	13_ t Purposes	74.
e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.)  Part XVI-B Relationship of Activities t  Line No. Explain below how each activity for which inco	me is reported i	omplishment of E.	xemp	13_ t Purposes	74.
e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.)  Part XVI-B Relationship of Activities t  Line No. Explain below how each activity for which inco	me is reported i	omplishment of E.	xemp	13_ t Purposes	74.
e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.)  Part XVI-B Relationship of Activities t  Line No. Explain below how each activity for which inco	me is reported i	omplishment of E.	xemp	13_ t Purposes	74.
e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.)  Part XVI-B Relationship of Activities t  Line No. Explain below how each activity for which inco	me is reported i	omplishment of E.	xemp	13_ t Purposes	74.
e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.)  Part XVI-B Relationship of Activities t  Line No. Explain below how each activity for which inco	me is reported i	omplishment of E.	xemp	13_ t Purposes	74.
e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.)  Part XVI-B Relationship of Activities t  Line No. Explain below how each activity for which inco	me is reported i	omplishment of E.	xemp	13_ t Purposes	74.
e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.)  Part XVI-B Relationship of Activities t  Line No. Explain below how each activity for which inco	me is reported i	omplishment of E.	xemp	13_ t Purposes	74.
e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.)  Part XVI-B Relationship of Activities t  Line No. Explain below how each activity for which inco	me is reported i	omplishment of E.	xemp	13_ t Purposes	74.
e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.)  Part XVI-B Relationship of Activities t  Line No. Explain below how each activity for which inco	me is reported i	omplishment of E.	xemp	13_ t Purposes	74.
e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.)  Part XVI-B Relationship of Activities t  Line No. Explain below how each activity for which inco	me is reported i	omplishment of E.	xemp	13_ t Purposes	74.
e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.)  Part XVI-B Relationship of Activities t  Line No. Explain below how each activity for which inco	me is reported i	omplishment of E.	xemp	13_ t Purposes	74.
e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.)  Part XVI-B Relationship of Activities t  Line No. Explain below how each activity for which inco	me is reported i	omplishment of E.	xemp	13_ t Purposes	74.
e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.)  Part XVI-B Relationship of Activities t  Line No. Explain below how each activity for which inco	me is reported i	omplishment of E.	xemp	13_ t Purposes	74.
e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.)  Part XVI-B Relationship of Activities t  Line No. Explain below how each activity for which inco	me is reported i	omplishment of E.	xemp	13_ t Purposes	74.
e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.)  Part XVI-B Relationship of Activities t  Line No. Explain below how each activity for which inco	me is reported i	omplishment of E.	xemp	13_ t Purposes	74.
e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.)  Part XVI-B Relationship of Activities t  Line No. Explain below how each activity for which inco	me is reported i	omplishment of E.	xemp	13_ t Purposes	74.
e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.)  Part XVI-B Relationship of Activities t  Line No. Explain below how each activity for which inco	me is reported i	omplishment of E.	xemp	13_ t Purposes	74.

# 6) IUEC LOCAL 1 OF NYC SCHOLARSHIP FUND 13-3251442 Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations Part XVII

1	Dia the or	ganization directly or indi	rectly engage in any	of the followin	g with any other organizati	on described in secti	on 501(c) of	1	Yes	NO
	the Code	(other than section 501(c)	)(3) organizations) o	r in section 52	7, relating to political organ	nizations?				
a	Transfers	from the reporting founda	ation to a noncharita	ible exempt or	ganization of:					
	(1) Cash							1a(1)		X
	(2) Other	assets						1a(2)		X
b	Other tran	isactions;								
	(1) Sales	of assets to a noncharita	ble exempt organiza	tion				1b(1)		X
	(2) Purcl	hases of assets from a no	ncharitable exempt (	organization				1b(2)		X
	(3) Renta	al of facilities, equipment,	or other assets					1b(3)		X
	(4) Reim	bursement arrangements						1b(4)		X
	(5) Loan	s or loan guarantees						1b(5)		X
	(6) Perfo	rmance of services or me	mbership or fundrai	ısıng solicitatio	ns			1b(6)		X
C	Sharing o	f facilities, equipment, ma	iling lists, other asse	ets, or paid em	ployees			1c	X	
d	If the answ	wer to any of the above is	"Yes," complete the	following sche	dule. Column (b) should al	lways show the fair m	arket value of the goods, ot	her ass	ets,	
					ed less than fair market vali	ue in any transaction	or sharing arrangement, sh	ow in		
	column (d	d) the value of the goods,	other assets, or serv	rices received.						
a)⊾	ne no	(b) Amount involved			exempt organization	(d) Description	of transfers, transactions, and sh	arıng ar	rangeme	nts
C		0.	IUEC LOCA	L UNIO	N NO. 1	SEE STA	TEMENT 9			
							_			
2a	is the fou	ndation directly or indirect	tly affiliated with, or	related to, one	or more tax-exempt organ	izations described		_		
	in section	501(c) of the Code (other	r than section 501(c	)(3)) or in sect	ion 527 <b>?</b>		X	Yes		] No
b	If "Yes," co	omplete the following sch	edule.							
		(a) Name of org	janization		(b) Type of organization		c) Description of relationship	р		
Ū	EC LC	CAL 1			501(C)5	SEE STAT	EMENT 10			
					g accompanying schedules and n taxpayer) is based on all inform		May	the IRS		
Si	gn	ener, it is true, for ect, and con	Higher Declaration of pr	· ·	. /		show	n with th in below	e prepar (see ins	er tr )?
He	re	MAWA			5/3/17	Scareto		🛚 Yes		No
	Sigi	nature of officer or trustee	!		Date	Title				
		Print/Type preparer's na		Preparer's s	gnature / /	Date	Check if PTIN			
		DANIEL A.	WINTERS,	/// .	raul L.	1 de l	self- employed			
Pa		CPA		JH anuf	Wester Cla	17/18/17		<u>175</u>		
	eparer	Firm's name ► DAN	IEL A. WI	NTERS	& COMPANY, C	CPAS	Firm's EIN ► 23 - 25	867	36	
Us	e Only				<u>=</u>					
		Firm's address ▶ 6								
		CHCH	ADDS FORI	), PA 1	9317		Phone no. 610 – 35	8 – 2	000	
							For	m 001	)-PF	(2016)

#### 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.irs.gov/form990.

OMB No 1545-0047

2016

Name of the organization

Employer identification number

II	JEC LOCAL 1 OF NYC SCHOLARSHIP FUND	13-3251442						
Organization type (check of	one)							
Filers of: Section:								
Form 990 or 990-EZ								
4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private foundation								
	527 political organization							
Form 990-PF	X 501(c)(3) exempt private foundation							
	4947(a)(1) nonexempt charitable trust treated as a private foundation							
	501(c)(3) taxable private foundation							
• •	s covered by the <b>General Rule</b> or a <b>Special Rule.</b> (7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule	e See instructions						
General Rule								
For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor Complete Parts I and II See instructions for determining a contributor's total contributions								
Special Rules								
For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1 Complete Parts I and II								
For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, 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. Don't complete any of the parts unless the <b>General Rule</b> applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year.								
Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)								

Name of organization

Employer identification number

#### IUEC LOCAL 1 OF NYC SCHOLARSHIP FUND

13-3251442

TOEC	DOCAL I OF NIC SCHOLLARSHIP FUND	<del> </del>	5-3251442
Part I	Contributors (See instructions) Use duplicate copies of Part I if additional and the second s	tional space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	LOCAL NO. 1 ELEVATOR CONSTRUCTORS UNION OF NEW YORK AND VICI  47-24 27TH STREET  LONG ISLAND CITY, NY 11101		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	THYSSENKRUPP ELEVATOR  2600 NETWORK BLVD., SUITE 450  FRISCO, TX 75034	\$6,600.	Person X Payroli
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		<b>\$</b>	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
623452 10-1	8-16	\$Schedule B (Form	Person Payroll Noncash (Complete Part II for noncash contributions) 990, 990-EZ, or 990-PF) (2016)

Employer identification number

# IUEC LOCAL 1 OF NYC SCHOLARSHIP FUND

13-3251442

Part II	Noncash Property (See instructions) Use duplicate copies of P	art II if additional space is needed	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		•	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
-			
-   -		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
-			
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
_		 	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
-			
-		  \$	
(2)			
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
-			
<u>_</u>	6		990, 990-EZ, or 990-PF)

lame of orga	anization	<del></del>	Employer identification number				
	OCAL 1 OF NYC SCHOLARSH	IIP FUND	13-3251442				
Part III	the year from any one contributor. Complete co completing Part III, enter the total of exclusively religious, Use duplicate copies of Part III if additiona	plumns (a) through (e) and the follow, charitable, etc., contributions of \$1,000 or	in section 501(c)(7), (8), of (10) that total more than \$1,000 to twing line entry. For organizations riess for the year (Enter this info once) \$				
(a) No. from	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held				
Part I	(b) i dipose oi giit	(c) osc or gri	(a) Description of now girt is iteld				
		(e) Transfer of gif	it .				
_	Transferee's name, address, an	d ZIP + 4	Relationship of transferor to transferee				
(a) No. from	(h) Dungago of cife	(a) Use of mft	/d\ Decorieties of how sit is 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 gif	ft				
	Transferee's name, address, an	d ZIP + 4	Relationship of transferor to transferee				
(a) No. from	(1) D		(d) Description of how gift 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, an	d ZIP + 4	Relationship of transferor to transferee				

FORM 990-PF INTEREST ON SAVI	INGS AND TEM	PORARY CASH IN	IVESTMENTS	STATEMENT 1
SOURCE	(A REVE PER B	NUE NET IN	(B) IVESTMENT ICOME	(C) ADJUSTED NET INCOME
AMALAGAMATED BANK		74.	74.	74.
TOTAL TO PART I, LINE 3		74.	74.	74.
FORM 990-PF	TAX	ES		STATEMENT 2
DESCRIPTION	(A) EXPENSES PER BOOKS	NET INVEST-		
NEW YORK STATE DEPARTMENT OF LAW UNITED STATES TREASURY	25. 1.	0.		0. 0.
TO FORM 990-PF, PG 1, LN 18	26.	0.	(	0.
FORM 990-PF	OTHER E	XPENSES		STATEMENT 3
DESCRIPTION	(A) EXPENSES PER BOOKS			
BANK SERVICE CHARGE INSURANCE	4. 250.	0.		0. 0.
TO FORM 990-PF, PG 1, LN 23	254.	0.	1	0. 0.
FORM 990-PF OTHER DECREASI	ES IN NET AS	SETS OR FUND 1	BALANCES	STATEMENT 4
DESCRIPTION				AMOUNT
ADJUSTMENT FOR SCHOLARSHIPS	PREVIOUSLY D	ISBURSED	-	3,375.
TOTAL TO FORM 990-PF, PART I	II, LINE 5		-	3,375.

FORM 990-PF OTHI	ER LIABILITIES	<del></del>	STATEMENT 5
DESCRIPTION		BOY AMOUNT	EOY AMOUNT
SCHOLARSHIPS PAYABLE	_	45,800.	49,175.
TOTAL TO FORM 990-PF, PART II, LINE	E 22	45,800.	49,175.
	TANTIAL CONTRIBU		STATEMENT 6
LOCAL NO. 1 ELEVATOR CONSTRUCTORS UNION OF NEW YORK AND VICINITY	47-24 27TH STI		
SCHINDLER ELEVATOR	20 WHIPPANY ROMORRISTOWN, N		
THYSSENKRUPP ELEVATOR	2600 NETWORK I	BLVD., SUITE 45	50

FORM 990-PF		ST OF OFFICERS, D D FOUNDATION MANA		STATI	EMENT 7
NAME AND ADDRESS		TITLE AND AVRG HRS/WK	COMPEN- SATION	EMPLOYEE BEN PLAN CONTRIB	
JOSEPH HOULAHAN 47-24 27TH STREET LONG ISLAND CITY,	NY 11101	PRESIDENT 1.00	0.	0.	0.
MICHAEL RIEGGER 47-24 27TH STREET LONG ISLAND CITY,	NY 11101	SECRETARY - TR 1.00	EASURER 0.	0.	0.
WILLIAM BULGER 47-24 27TH STREET LONG ISLAND CITY,	NY 11101	TRUSTEE 1.00	0.	0.	0.
JOHN HOOK 47-24 27TH STREET LONG ISLAND CITY,	NY 11101	TRUSTEE 1.00	0.	0.	0.
BRIAN FIELDER 47-24 27TH STREET LONG ISLAND CITY,	NY 11101	TRUSTEE 1.00	0.	0.	0.
PHILIP DUCATELLI 47-24 27TH STREET LONG ISLAND CITY,	NY 11101	TRUSTEE 1.00	0.	0.	0.
TOTALS INCLUDED ON	1 990-PF, PAGE	6, PART VIII	0.	0.	0.

FORM 990-PF

GRANT APPLICATION SUBMISSION INFORMATION PART XV, LINES 2A THROUGH 2D

**STATEMENT** 

=

NAME AND ADDRESS OF PERSON TO WHOM APPLICATIONS SHOULD BE SUBMITTED

MICHAEL RIEGGER 47-24 27TH STREET LONG ISLAND CITY, NY 11101

TELEPHONE NUMBER

718-767-7004

#### FORM AND CONTENT OF APPLICATIONS

WRITTEN FORM, INCLUDE COPY OF LETTER OF ACCEPTANCE FROM THE COLLEGE THE INDIVIDUAL PLANS TO ATTEND

#### ANY SUBMISSION DEADLINES

DECEMBER 31, 2016

#### RESTRICTIONS AND LIMITATIONS ON AWARDS

COLLEGE MUST BE ACCREDITED AND GRANT AN ASSOCIATE'S OR BACHELOR'S DEGREE

990-PF INVOLVEMENT WITH NONCHARITABLE ORGANIZATIONS STATEMENT PART XVII, LINE 1, COLUMN (D)

NAME OF NONCHARITABLE EXEMPT ORGANIZATION

IUEC LOCAL UNION NO. 1

DESCRIPTION OF TRANSFERS, TRANSACTIONS, AND SHARING ARRANGEMENTS

IUEC LOCAL UNION NO. 1 SHARED OFFICE SPACE WITH THE LOCAL NO. 1 SCHOLARSHIP FUND

10

990-PF

AFFILIATION WITH TAX-EXEMPT ORGANIZATIONS PART XVII, LINE 2, COLUMN (C)

STATEMENT

NAME OF AFFILIATED OR RELATED ORGANIZATION

IUEC LOCAL 1

DESCRIPTION OF RELATIONSHIP WITH AFFILIATED OR RELATED ORGANIZATION

ALL OF THIS FUND'S TRUSTEES ARE OFFICERS OF LOCAL 1

3 Grants and Contributions Paid During the Ye			<del></del>	
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
- <del></del>	or substantial contributor	Tecipient	<del>- </del>	
JESSICA PULIS (PAID TO CHESTNUT HILL		ACTIVE	EDUCATION	
COLLEGE)		Relive	EDUCATION	
9601 GERMANTOWN AVENUE		1		
PHILADELPHIA PA 19118		}	1	1 5
PHILADELPHIA, PA 19116		<del> </del>	<del></del>	1,50
THEMTH MEANS / DATE TO SUMMINGE		NOTTIVE .	EDVICA ELON	
JUSTIN MEGNA (PAID TO DUTCHESS		ACTIVE	EDUCATION	
COMMUNITY COLLEGE)	1	}	1	
53 PENDELL ROAD				
POUGHKEEPSIE, NY 12601				2,50
			Ì	
MICHAEL P. PETINO (PAID TO BINGHAMTON	]	ACTIVE	EDUCATION	
JNIVERSITY			Ï	
4400 VESTAL PARKWAY E.	J	J	1	
BINGHAMTON, NY 13902				3,00
SAMANTHA R. GUZMAN (PAID TO RUTGERS		ACTIVE	EDUCATION	
UNIVERSITY			}	
520 GEORGE STREET				
NEW BRUNSWICK, NJ 08901				2,50
THOMAS DEROSA (PAID TO SUNY INSTITUTE	ĺ	ACTIVE	EDUCATION	
OF TECHNOLOGY)	1		}	i
100 SEYMOUR ROAD	j	1	1	
JTICA, NY 13502			İ	1,00
			Ĭ	
		}		ł
		ł	}	1
		<u> </u>		
	l	1	l	ŀ
	ł		ł	1
		<u> </u>		
		1	(	İ
	1			1
				ì
		<u> </u>		
			- · · ·	
		1		1
				1
	1			l .
	<u> </u>	<u> </u>		1
Total from continuation sheets				10,5