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Form 990-PF

Department of the Treasury

Internal Revenue Service

As Filed Data -

DLN: 93491131026527

2016

OMB No 1545-0052

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 instructions is at www.irs.gov/form990pf.

Open to Public

								Inspection
For	caler	ndar year 2016, or tax year	r beginning 01-01-20)16 , aı	nd er	nding 12-31-	2016	
TE		indation OF THE TIMES ION INC				A Employer Id 13-3900955	entification numbe	er
		street (or P O box number if mail is n	ot delivered to street address)	Room/suite		B Telephone nu	mber (see instructio	ns)
1	11 PLEA	SANT RIDGE ROAD				(914) 925-0022	•	,
City	or town	, state or province, country, and ZIP of	r foreign postal code			 ` 	application is pendir	ig shock horo
нак	RISON,	NY 10528				C II exemption	application is pendir	b
G C	neck al	I that apply	_	former public charity		D 1. Foreign or	ganızatıons, check h	ere 🕨 🗀
		☐ Final return	☐ Amended return				rganizations meeting k here and attach co	
		☐ Address chan	<u> </u>			_	ındatıon status was	· _
_	•	pe of organization 🔀 Section 1 4947(a)(1) nonexempt charitabl	501(c)(3) exempt private				n 507(b)(1)(A), che	
		ket value of all assets at end		Cash Accru	اد	F If the founda	ation is in a 60-mont	h termination -
of	year <i>(f</i> .	from Part II, col (c), \$ 1,151,257	Other (specify) (Part I, column (d) must		u,		n 507(b)(1)(B), chec	
Pa	rt I	Analysis of Revenue and	Expenses (The total		1			(d) Disbursements
		of amounts in columns (b), (c), and equal the amounts in column (a) (se	(d) may not necessarily	(a) Revenue and expenses per books	(b)	Net investment income	(c) Adjusted net Income	for charitable purposes (cash basis only)
	1	Contributions, gifts, grants, etc , schedule)	, received (attach					
	2	Check ► ✓ If the foundation is	not required to attach					
	3	Sch B	ary cash investments	26		26		
	4	Dividends and interest from secu	urities	47,388		47,388		
	5a	Gross rents						
•	b	Net rental income or (loss)						
3	6a	Net gain or (loss) from sale of as	ssets not on line 10					
Revenue	b	Gross sales price for all assets o	·			-		
ã	7 8	Capital gain net income (from Pa Net short-term capital gain .	•			0		
	9	Income modifications						
	10a	Gross sales less returns and allo	I					
	b	Less Cost of goods sold						
	C	Gross profit or (loss) (attach sch	nedule)					
	11	Other income (attach schedule)						
	12	Total. Add lines 1 through 11		47,414		47,414		
	13	Compensation of officers, director	· ·	0		0		(
	14	Other employee salaries and war Pension plans, employee benefit	~					
ses	15 16a	Legal fees (attach schedule) .						
E .	ь	Accounting fees (attach schedule		11,921		8,941		2,980
Ĕ	c	Other professional fees (attach s	•			, :-		,
tıve	17	Interest	,					
Operating and Administrative Expenses	18	Taxes (attach schedule) (see ins	tructions)	2,075		0		(
Ē	19	Depreciation (attach schedule) a	and depletion					
Ę	20	Occupancy						
Ψ D	21	Travel, conferences, and meetin	=					
an	22	Printing and publications		86.1				
ting	23	Other expenses (attach schedule		1,961		1,471		490
erat	24	Total operating and administ Add lines 13 through 23	<u>-</u>	15.057		10.413		3,470
ă	25	Contributions, gifts, grants paid		15,957 52,000		10,412		52,000
	26	Total expenses and disburser	ments. Add lines 24 and	32,300				32,000
		25		67,957		10,412		55,470
	27	Subtract line 26 from line 12						
	a	Excess of revenue over expendisbursements	nses and	-20,543				
	ь	Net investment income (if neg	gatıve, enter -0-)			37,002		
	С	Adjusted net income(if negative	ve, enter -0-)					
	_							

788.784

8,426

8,426

780,358

780,358

788,784

∞,]

768,241

8,426

8,426

759,815

759,815 768,241

2

3

4

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6

780,358

-20,543

759,815

759,815

Form **990-PF** (2016)

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1,151,257

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21

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23

24

25

26

28 29

31

Part III

2 3

Liabilities

Balances

Fund

ō

Assets 27

Net 30 Land, buildings, and equipment basis

instructions Also, see page 1, item I)

Other assets (describe > _

Other liabilities (describe -_

Unrestricted

Temporarily restricted

Permanently restricted .

and complete lines 27 through 31.

of-year figure reported on prior year's return)

Decreases not included in line 2 (itemize) ▶

Enter amount from Part I, line 27a

Other increases not included in line 2 (itemize) ▶ _____

Less accumulated depreciation (attach schedule)

Loans from officers, directors, trustees, and other disqualified persons

Mortgages and other notes payable (attach schedule).

Total liabilities(add lines 17 through 22)

Total assets (to be completed by all filers—see the

Foundations that follow SFAS 117, check here ▶

and complete lines 24 through 26 and lines 30 and 31.

Foundations that do not follow SFAS 117, check here

Paid-in or capital surplus, or land, bldg, and equipment fund

Retained earnings, accumulated income, endowment, or other funds

Total net assets or fund balances (see instructions)

Total liabilities and net assets/fund balances (see instructions) .

Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30

Total net assets or fund balances at beginning of year-Part II, column (a), line 30 (must agree with end-

Analysis of Changes in Net Assets or Fund Balances

5a During the year did the foundation pay or incur any amount to

Page **6**

	(1) Carry on propaganda, or otherw(2) Influence the outcome of any sp	pecific public election (see sect	cion 4955), or to carry	☐ Yes ✓	No		
	on, directly or indirectly, any void (3) Provide a grant to an individual	=		· · Yes 🛂	No		
	(4) Provide a grant to an individual	**		∐ Yes ⊻	No		
	ın section 4945(d)(4)(A)? (see ii		· •		No		
	(5) Provide for any purpose other th						
	educational purposes, or for the			∟ Yes 💌	No		
D	If any answer is "Yes" to 5a(1)–(5), Regulations section 53 4945 or in a					ь	
	Organizations relying on a current n	• •	•	•		-	
С	If the answer is "Yes" to question 5a						
	tax because it maintained expenditu			· · □ Yes □	No		
	If "Yes," attach the statement requir	red by Regulations section 53	4945-5(d)	□ les □	10		
6а	Did the foundation, during the year,	receive any funds, directly or	indirectly, to pay premit	ıms on			
	a personal benefit contract?			· 🗌 Yes 🗸			
b	Did the foundation, during the year,	pay premiums, directly or ind	lirectly, on a personal be	nefit contract?	6	ь	No
7 _	If "Yes" to 6b, file Form 8870	- 4b - 5-, , , d-4, , , , , , , , , , , , , , , , , , ,					
7a h	At any time during the tax year, was If yes, did the foundation receive an			∟ tes 💌		ь	
		Officers, Directors, Trust					
Pa	and Contractors	incers, Directors, Trust	ices, roundation ric	magers, mgmy raid Er	прюус	-3,	
1	List all officers, directors, trustee	es, foundation managers an	nd their compensation	(see instructions).			
	(a) Name and address	Title, and average hours per week (b) devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred		pense ac her allow	
See /	Additional Data Table	(B) devoted to position		compensation			
2	Compensation of five highest-pai	d employees (other than th	hose included on line 1	L—see instructions). If no	ne, ente	r "NONE	."
Na	(a) ame and address of each employee pa more than \$50,000	Title, and average hours per week	(c) Compensation	Contributions to employee benefit plans and deferred		ense acc er allowa	,
IONI	· '	(-,		(d) compensation			
ION	<u> </u>						
	I number of allers are also as						_
ota	I number of other employees paid over	er \$50,000			Fa 4	000 PF	(2016)

Form 990-PF (2016)		Page 7
Part VIII Information About Officers, Directors, Trustees, and Contractors (continued)	Foundation Managers, Highly Pa	aid Employees,
3 Five highest-paid independent contractors for professional service	ces (see instructions). If none, enter	"NONE".
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services		• 0
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include rel		r of Expenses
organizations and other beneficiaries served, conferences convened, research papers produ	ucea, etc	
1		
2		
2		
3		
4		
4		
Part IX-B Summary of Program-Related Investments (see	· · · · · · · · · · · · · · · · · · ·	
Describe the two largest program-related investments made by the foundation during t	ne tax year on lines 1 and 2	Amount
1		
2		
2		
All other program-related investments. See instructions		
3		
Total. Add lines 1 through 3		▶ 0
<u> </u>		Form 990-PF (2016)

1a

1b

2

За 3b

4

5

55,470

55.470

55,100

Form 990-PF (2016)

370

Expenses, contributions, gifts, etc —total from Part I, column (d), line 26.

Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,

Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment

Adjusted qualifying distributions. Subtract line 5 from line 4.

Amounts set aside for specific charitable projects that satisfy the

the section 4940(e) reduction of tax in those years

2

3

4

5

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

income Enter 1% of Part I, line 27b (see instructions).

Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for

2016

Page 9

52.775

48.748

4,027

Form **990-PF** (2016)

Distributable amount for 2016 from Part XI, line 7
 Undistributed income, if any, as of the end of 2016

a Enter amount for 2015 only.

Excess distributions carryover, if any, to 2016

a Applied to 2015, but not more than line 2a

 b Applied to undistributed income of prior years (Election required—see instructions). . . .
 c Treated as distributions out of corpus (Election required—see instructions).

5 Excess distributions carryover applied to 2016 (If an amount appears in column (d), the

6 Enter the net total of each column as

9 Excess distributions carryover to 2017.

10 Analysis of line 9

a Excess from 2012. . . .
 b Excess from 2013. . . .
 c Excess from 2014. . . .
 d Excess from 2015. . . .
 e Excess from 2016. . . .

Subtract lines 7 and 8 from line 6a

d Applied to 2016 distributable amount. e Remaining amount distributed out of corpus

same amount must be shown in column (a))

(a)

Corpus

0

(b)

Years prior to 2015

(c)

2015

6,722

6,722

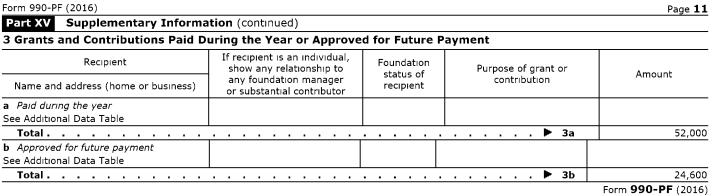
Form	990-PF (2	016)
Pa	rt XIII	Und

b Total for prior years

XII, line 4 > \$

indicated below:

a From 2011.
b From 2012. . . .
c From 2013.
d From 2014.
e From 2015.



Form 990-						Page 12
Part XV	I-A Analysis of Income-Producing	Activities				
Enter gross	s amounts unless otherwise indicated	Unrelated bu	usiness income	Excluded by section	512, 513, or 514	(e) Related or exempt
	m service revenue	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	function income (See instructions)
-						
_	and contracts from government agencies					
	ership dues and assessments eest on savings and temporary cash					
inves	tments			14	26	
	nds and interest from securities			14	47,388	
	-financed property.					
b Not o	debt-financed property					
6 Net re	ental income or (loss) from personal property					
	investment income					
	or (loss) from sales of assets other than tory					
9 Net ind	come or (loss) from special events					
	profit or (loss) from sales of inventory					
	revenue a					
d						
	tal Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e)		0		47,414	
	sheet in line 13 instructions to verify calculation				3	77,717
Part XV	I-B Relationship of Activities to th					
Line No. ▼	Explain below how each activity for which the accomplishment of the foundation's exinstructions)					
		-				

• Information Regarding Transfers To and Transactions and Relationships With Noncharitable

Pari	XVI	11	Exempt Organiz	-	iaiisi	1613 10 6	and Iransact	1011	is and Relatio	iisiiips Witii NO	iiciiaiic	abic		
			nization directly or in- de (other than sectio	directly enga							ion 501		Yes	No
a Transfers from the reporting foundation to a noncharitable exempt organization of										Ī				
(1) Cash										.	1a(1)		No	
(2	Oth	er as	ssets								F	1a(2)		No
b Oth	ner tra	ansa	ctions								Ì	, ,		
(1) Sale	es of	assets to a nonchari	table exemp	t orga	nization.						1b(1)		No
(2) Pur	chas	es of assets from a n	oncharitable	exem	pt organiz	zation				[1b(2)		No
(3) Ren	ntal c	of facilities, equipmen	nt, or other a	ssets.						[1b(3)		No
(4) Reii	mbui	rsement arrangemen	ts							. [1b(4)		No
(5) Loa	ns o	r loan guarantees.								[1b(5)		No
(6) Perf	orma	ance of services or m	embership oi	fund	raising sol	licitations				. [1b(6)		No
c Sh	arıng	of fa	cilities, equipment, n	nailing lists, d	other .	assets, or	paid employees				. [1c		No
			r to any of the above											
			, other assets, or serviction or sharing arra									9		
111 (ally ci-	ansa	iction of sharing arra	ngement, sin	0 00 111	column (c	a) the value of the	iie ç	goods, other asse	is, or services rece	iveu			
(a) Lin	e No	(b) Amount involved	(c) Name of	noncha	arıtable exe	mpt organization		(d) Description of	transfers, transactions	s, and shar	ıng arra	ngemen	ts
	-+													
	_													
	_													
2a Is t	he fo	unda	ation directly or indire	ectly affiliated	d with	, or relate	d to, one or mor	re ta	ax-exempt organ	zations				
des	cribe	d in :	section 501(c) of the	Code (other	than	section 50	01(c)(3)) or in se	ectio	on 527?		\square] Yes	✓ N	0
b If '	Yes,"	com	plete the following so	chedule										
			(a) Name of organization	n		(1	b) Type of organiza	ation	1	(c) Descriptio	n of relatio	nship		
	11	٠ لـ		T J	- T I						L-L		L - 41 - 1	l t
			penalties of perjury, knowledge and belief											
Sign			preparer has any kno			,			. р. оранон (оанон					
Here		**	****				2017-05-11		*****		May the IR			
	1	_					L		—) — — —		with the pr	· —		
		Sig	nature of officer or ti	rustee			Date		/ Title		(see instr)	12 🔨 A	es ⊔ N	lo
		T_{I}	Print/Type preparer's	name	Pren	arer's Sıgı	nature		Date		PTIN			
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			JAMES D D'ADCANA	CELO					2017 27 11	employed ▶ 🔲	1	200836	204	
Paid			JAMES R D'ARCAN	GELU					2017-05-11					
Prep		r	irm's name ► D'AR	.CANGELO &	CO 11	P				l				
Use			Shamer DAN	.c.,							Fırm's EI	N ►13	-25501	.03
			rm's address ► 80	0 WESTCHES	STER /	AVE SUITE	E N-400							
			D.V	E BDOOK N	V 105	721201					Phone no	(914	694-4	4600
RYE BROOK, NY 105731301														

(a) Name and address Title, and average (c) Compensation (If (d) Expense account, Contributions to hours per week not paid, enter (e) other allowances (b) devoted to position -0-) employee benefit plans and deferred compensation VITA NELSON PRESIDENT, DIRECTOR 0 0 00

Form 990PF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation

HARRISON, NY 10528				
LESTER NELSON	SECRETARY, DIRECTOR	0	0	0
111 PLEASANT RIDGE ROAD HARRISON, NY 10528	0 00			

LESTER NELSON	SECRETARY, DIRECTOR	0	0	0
111 PLEASANT RIDGE ROAD HARRISON, NY 10528	0 00			
CARA R NELSON	VICE PRESIDENT, EXEC	0	0	0
	1 DIREC			

111 PLEASANT RIDGE ROAD HARRISON, NY 10528	0 00			
CARA R NELSON	VICE PRESIDENT, EXEC	0	0	0
1034 MONROE STREET MISSOULA, MT 59802	DIREC 4 50			

CARA R NELSON	VICE PRESIDENT, EXEC	0	0	0
1034 MONROE STREET MISSOULA, MT 59802	DIREC 4 50			
LUCY BANKER	DIRECTOR	0	0	0

1034 MONROE STREET MISSOULA, MT 59802	4 50			
LUCY BANKER	DIRECTOR	0	0	0
726 FOREST AVENUE	0 00			

MISSOULA, MT 59802				
LUCY BANKER	DIRECTOR	0	0	0
726 FOREST AVENUE	0 00			

LUCY BANKER	DIRECTOR	0	0	0
726 FOREST AVENUE MAMARONECK, NY 10543	0 00			

DIRECTOR 0 00

LEE R NELSON

1805 MELHILL

LOS ANGELES, CA 90049

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year **BLOCK ISLAND CONSERVANCY** NONE **PUBLIC GENERAL** 12,000 P O BOX 643 CHARITY BLOCK ISLAND, RI 02807 ASSATEAGUE COSTAL TRUST NONE **PUBLIC GENERAL** 7,500 P O BOX 731 CHARITY BERLIN. MD 21811 ORANGE COUNTY COASTKEEPERS NONE **PUBLIC GENERAL** 7,000 3151 AIRWAY AVENUE SUITE F-110 CHARITY COSTA MESA, CA 92626 NONE **PUBLIC** CONSERVATION NORTHWEST **GENERAL** 4,500 1829 10TH AVE W SUITE B CHARITY SEATTLE, WA 98119 GRAND CANYON WOLF RECOV LOBO NONE **PUBLIC GENERAL** 3,500 COALITION. CHARITY 3010 BRENDA LOOP FLAGSTAFF, AZ 86001 RAPTORS ARE THE SOLUTION NONE **PUBLIC GENERAL** 5,500 2150 ALLSTON WAY SUITE 460 CHARITY BERKELEY, CA 94704 TURTLE ISLAND RESTORATION NONE PUBLIC **GENERAL** 7,500 **NETWORK** CHARITY P O BOX 370 FOREST KNOLLS, CA 94933 NONE **PUBLIC GENERAL** 4.500 YELLOWSTONE TO YUKON CONSERVATION INITIATIVE CHARITY P O BOX 157 BOZEMAN, MT 59771

52,000

Total . .

3a

EIN: 13-3900955	Investment Adjusted Net Disbursements						
EIN: 13-3900955							
FOUNDATION INC							
Name: TEMPER OF THE TIMES							
TY 2016 Accounting Fees Schedule							
efile GRAPHIC print - DO NOT PROCESS As Filed Data - DLN: 93491131026527							

8,941

11,921

Purposes

2,980

Category	Amount

PROFESSIONAL FEES

Income

Name: TEMPER OF THE TIMES FOUNDATION INC EIN: 13-3900955	Name of Stock		End of Voor Book	End of Voor Enix
Name: TEMPER OF THE TIMES	EIN:	13-3900955		
		FOUNDATION INC		
	Name:	TEMPER OF THE TIMES		
TY 2016 Investments Corporate Stock Schedule	·			
	efile GRAPHIC print - DO NOT PROCESS	As Filed Data - I	D	LN: 93491131026527

EIN: 13-3900955		
Name of Stock	End of Year Book Value	End of Year Fair Market Value
MARKETABLE SECURITIES	32,248	33,749

MP63 FUND

1,094,576

713,061

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN	l: 93491131026527	
TY 2016 Other Expenses Schedule					
-					
Name:	TEMPER OF THE	TIMES			
	FOUNDATION IN	NC			
EIN:	13-3900955				
Other Expenses Schedule					
Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes	
OFFICE EXPENSES	47	35		12	
POSTAGE	340	255		85	
TELEPHONE	1,574	1,181		393	

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	D	LN: 93491131026527
TY 2016 Other Liabilities Sche	dule		_
Name:	TEMPER OF TH	IE TIMES	
	FOUNDATION	INC	
EIN:	13-3900955		
Description	n	Beginning of Year - Book Value	End of Year - Book Value
		8,426	8,426

efile GRAPHIC print - DO NOT	PROCESS	As Filed Data	-	DLI	N: 93491131026527
TY 2016 Taxes Sched	ule				_
	Name:	TEMPER OF	THE TIMES		
		FOUNDATIO	N INC		
	EIN:	13-3900955			
Category	An	nount	Net Investment	Adiusted Not	
		iount	Income	Adjusted Net Income	Disbursements for Charitable Purposes