

For calendar year 2016, or tax year beginning 01-01-2016, and ending 12-31-2016

Name of foundation THE HAJIM FAMILY FOUNDATION		A Employer identification number 13-6893956	
Number and street (or P.O. box number if mail is not delivered to street address) C/O CBIZ MHM1065 AVE OF AMERICAS		B Telephone number (see instructions) (212) 790-5700	
City or town, state or province, country, and ZIP or foreign postal code NEW YORK, NY 10018		C If exemption application is pending, check here <input type="checkbox"/>	
G Check all that apply <div><input type="checkbox"/> Initial return <input type="checkbox"/> Final return <input type="checkbox"/> Address change</div> <div><input type="checkbox"/> Initial return of a former public charity <input type="checkbox"/> Amended return <input type="checkbox"/> Name change</div>		D 1. Foreign organizations, check here <input type="checkbox"/> 2. Foreign organizations meeting the 85% test, check here and attach computation <input type="checkbox"/>	
H Check type of organization <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		E If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/>	
I Fair market value of all assets at end of year (from Part II, col (c), line 16) \$ 1,452,380	J Accounting method <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____ (Part I, column (d) must be on cash basis)	F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/>	

Part I Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions))		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
Revenue	1 Contributions, gifts, grants, etc., received (attach schedule)	7,750			
	2 Check <input type="checkbox"/> if the foundation is not required to attach Sch. B				
	3 Interest on savings and temporary cash investments				
	4 Dividends and interest from securities	49,675	49,675		
	5a Gross rents				
	b Net rental income or (loss) _____				
	6a Net gain or (loss) from sale of assets not on line 10	-10,630			
	b Gross sales price for all assets on line 6a _____ 346,876				
	7 Capital gain net income (from Part IV, line 2)		0		
	8 Net short-term capital gain				
	9 Income modifications				
	10a Gross sales less returns and allowances _____				
	b Less Cost of goods sold				
	c Gross profit or (loss) (attach schedule)				
	11 Other income (attach schedule)	1,499	0		
	12 Total. Add lines 1 through 11	48,294	49,675		
Operating and Administrative Expenses	13 Compensation of officers, directors, trustees, etc	0	0		0
	14 Other employee salaries and wages				
	15 Pension plans, employee benefits				
	16a Legal fees (attach schedule)				
	b Accounting fees (attach schedule)	7,500	3,750		3,750
	c Other professional fees (attach schedule)				
	17 Interest				
	18 Taxes (attach schedule) (see instructions)	3,088	0		0
	19 Depreciation (attach schedule) and depletion				
	20 Occupancy				
	21 Travel, conferences, and meetings				
	22 Printing and publications				
	23 Other expenses (attach schedule)	5,110	4,710		400
	24 Total operating and administrative expenses. Add lines 13 through 23	15,698	8,460		4,150
	25 Contributions, gifts, grants paid	353,356			353,356
	26 Total expenses and disbursements. Add lines 24 and 25	369,054	8,460		357,506
	27 Subtract line 26 from line 12				
	a Excess of revenue over expenses and disbursements	-320,760			
	b Net investment income (if negative, enter -0-)		41,215		
c Adjusted net income (if negative, enter -0-)					

Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)			
		Beginning of year (a) Book Value	End of year (b) Book Value (c) Fair Market Value		
Assets	1	Cash—non-interest-bearing	75,489	52,894	52,894
	2	Savings and temporary cash investments	5	1	1
	3	Accounts receivable ▶ _____ Less allowance for doubtful accounts ▶ _____			
	4	Pledges receivable ▶ _____ Less allowance for doubtful accounts ▶ _____			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions)			
	7	Other notes and loans receivable (attach schedule) ▶ _____ Less allowance for doubtful accounts ▶ _____			
	8	Inventories for sale or use			
	9	Prepaid expenses and deferred charges			
	10a	Investments—U S and state government obligations (attach schedule)			
	b	Investments—corporate stock (attach schedule)			
	c	Investments—corporate bonds (attach schedule)			
	11	Investments—land, buildings, and equipment basis ▶ _____ Less accumulated depreciation (attach schedule) ▶ _____			
	12	Investments—mortgage loans			
	13	Investments—other (attach schedule)	1,753,196	1,455,035	1,399,485
	14	Land, buildings, and equipment basis ▶ _____ Less accumulated depreciation (attach schedule) ▶ _____			
15	Other assets (describe ▶ _____)				
16	Total assets (to be completed by all filers—see the instructions Also, see page 1, item I)	1,828,690	1,507,930	1,452,380	
Liabilities	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 (attach schedule)			
	22	Other liabilities (describe ▶ _____)			
	23	Total liabilities (add lines 17 through 22)	0	0	
Net Assets or Fund Balances	Foundations that follow SFAS 117, check here <input type="checkbox"/> and complete lines 24 through 26 and lines 30 and 31.				
	24	Unrestricted			
	25	Temporarily restricted			
	26	Permanently restricted			
	Foundations that do not follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 27 through 31.				
	27	Capital stock, trust principal, or current funds	0	0	
	28	Paid-in or capital surplus, or land, bldg , and equipment fund	0	0	
	29	Retained earnings, accumulated income, endowment, or other funds	1,828,690	1,507,930	
	30	Total net assets or fund balances (see instructions)	1,828,690	1,507,930	
31	Total liabilities and net assets/fund balances (see instructions) .	1,828,690	1,507,930		

Part III Analysis of Changes in Net Assets or Fund Balances			
1	Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)	1	1,828,690
2	Enter amount from Part I, line 27a	2	-320,760
3	Other increases not included in line 2 (itemize) ▶ _____	3	0
4	Add lines 1, 2, and 3	4	1,507,930
5	Decreases not included in line 2 (itemize) ▶ _____	5	0
6	Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30 .	6	1,507,930

Part IV Capital Gains and Losses for Tax on Investment Income

(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 acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
1 a THROUGH CAPITAL GROUP-SEE ATTACHED SCHED	P		
b CAPITAL GAINS DIVIDENDS	P		
c			
d			
e			

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
a 336,927		357,506	-20,579
b 9,949			9,949
c			
d			
e			

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	
a			-20,579
b			9,949
c			
d			
e			

2 Capital gain net income or (net capital loss)	2	-10,630
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6) If gain, also enter in Part I, line 8, column (c) (see instructions) If (loss), enter -0- in Part I, line 8	3	

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

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income)

If section 4940(d)(2) applies, leave this part blank

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period?

☐ Yes ☒ No

If "Yes," the foundation does not qualify under section 4940(e) Do not complete this part

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

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col (b) divided by col (c))
2015	448,544	1,910,571	0 234770
2014	295,112	2,449,555	0 120476
2013	362,875	2,542,618	0 142717
2012	278,329	2,594,470	0 107278
2011	283,390	2,957,927	0 095807
2 Total of line 1, column (d)			0 701048
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			0 140210
4 Enter the net value of noncharitable-use assets for 2016 from Part X, line 5			1,526,560
5 Multiply line 4 by line 3			214,039
6 Enter 1% of net investment income (1% of Part I, line 27b)			412
7 Add lines 5 and 6			214,451
8 Enter qualifying distributions from Part XII, line 4			357,506

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

Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see instructions)

1a	Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter "N/A" on line 1 Date of ruling or determination letter _____ (attach copy of letter if necessary—see instructions)		
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here <input checked="" type="checkbox"/> and enter 1% of Part I, line 27b	1	412
c	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col (b)		
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2	0
3	Add lines 1 and 2.	3	412
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	412
6	Credits/Payments		
a	2016 estimated tax payments and 2015 overpayment credited to 2016	6a	
b	Exempt foreign organizations—tax withheld at source	6b	
c	Tax paid with application for extension of time to file (Form 8868)	6c	
d	Backup withholding erroneously withheld	6d	
7	Total credits and payments. Add lines 6a through 6d.	7	0
8	Enter any penalty for underpayment of estimated tax. Check here <input type="checkbox"/> if Form 2220 is attached	8	
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9	412
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 <input type="checkbox"/> Refunded <input type="checkbox"/>	11	

Part VII-A Statements Regarding Activities

1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?	1a	Yes	No
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for definition)? If the answer is "Yes" to 1a or 1b , attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities	1b		No
c	Did the foundation file Form 1120-POL for this year?	1c		No
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year (1) On the foundation <input type="checkbox"/> \$ _____ 0 (2) On foundation managers <input type="checkbox"/> \$ _____ 0			
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers <input type="checkbox"/> \$ _____ 0			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS? If "Yes," attach a detailed description of the activities	2		No
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		No
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		No
b	If "Yes," has it filed a tax return on Form 990-T for this year?	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year? If "Yes," attach the statement required by General Instruction T	5		No
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?	6	Yes	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV	7	Yes	
8a	Enter the states to which the foundation reports or with which it is registered (see instructions) <input type="checkbox"/> NY			
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? If "No," attach explanation .	8b	Yes	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2016 or the taxable year beginning in 2016 (see instructions for Part XIV)? If "Yes," complete Part XIV	9		No
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses	10		No

Part VII-A Statements Regarding Activities (continued)

11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions).	11		No
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement (see instructions)	12		No
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address N/A	13	Yes	
14	The books are in care of CO CBIZ MHM LLC Telephone no (212) 790-5700			

Located at **1065 AVE OF THE AMERICAS NEW YORK NY** ZIP+4 **10018**

15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 —Check here <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the year 15			
16	At any time during calendar year 2016, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? See instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). If "Yes," enter the name of the foreign country ▶	16	Yes	No

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

File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.

1a	During the year did the foundation (either directly or indirectly)		Yes	No
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days). <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
b	If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)? <input type="checkbox"/> 1b			
c	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2016? <input type="checkbox"/> 1c			No
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5))			
a	At the end of tax year 2016, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2016? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "Yes," list the years ▶ 20____, 20____, 20____, 20____			
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement—see instructions). <input type="checkbox"/> 2b			
c	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here ▶ 20____, 20____, 20____, 20____			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
b	If "Yes," did it have excess business holdings in 2016 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2016). <input type="checkbox"/> 3b			
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? <input type="checkbox"/> 4a			No
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2016? <input type="checkbox"/> 4b			No

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

5a During the year did the foundation pay or incur any amount to				
(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
(2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
(3) Provide a grant to an individual for travel, study, or other similar purposes?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
(4) Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? (see instructions).	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
b If any answer is "Yes" to 5a(1)–(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)?		<input type="checkbox"/>	5b	
Organizations relying on a current notice regarding disaster assistance check here.		<input type="checkbox"/>		
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? If "Yes," attach the statement required by Regulations section 53.4945–5(d)		<input type="checkbox"/> Yes <input type="checkbox"/> No		
6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	6b	No
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?		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	7b	
b If yes, did the foundation receive any proceeds or have any net income attributable to the transaction?				

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors

1 List all officers, directors, trustees, foundation managers and their compensation (see instructions).				
(a) Name and address	Title, and average hours per week (b) devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	Expense account, (e) other allowances
BARBARA HAJIM C/O CBIZ 1065 AVE OF AMERICAS NEW YORK, NY 10018	TRUSTEE 2 00	0	0	0
EDMUND A HAJIM C/O CBIZ 1065 AVE OF AMERICAS NEW YORK, NY 10018	TRUSTEE 0 50	0	0	0
2 Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, enter "NONE."				
(a) Name and address of each employee paid more than \$50,000	Title, and average hours per week (b) devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	Expense account, (e) other allowances
NONE				
Total number of other employees paid over \$50,000.				0

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)
3 Five highest-paid independent contractors for professional services (see instructions). If none, enter "NONE".

(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services. ►		0

Part IX-A Summary of Direct Charitable Activities

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

	Expenses
1	
2	
3	
4	

Part IX-B Summary of Program-Related Investments (see instructions)

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

Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.)

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes		
a	Average monthly fair market value of securities.	1a	1,498,597
b	Average of monthly cash balances.	1b	51,210
c	Fair market value of all other assets (see instructions).	1c	0
d	Total (add lines 1a, b, and c).	1d	1,549,807
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation).	1e	0
2	Acquisition indebtedness applicable to line 1 assets.	2	0
3	Subtract line 2 from line 1d.	3	1,549,807
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions).	4	23,247
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4.	5	1,526,560
6	Minimum investment return. Enter 5% of line 5.	6	76,328

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

1	Minimum investment return from Part X, line 6.	1	76,328
2a	Tax on investment income for 2016 from Part VI, line 5.	2a	412
b	Income tax for 2016 (This does not include the tax from Part VI).	2b	
c	Add lines 2a and 2b.	2c	412
3	Distributable amount before adjustments. Subtract line 2c from line 1.	3	75,916
4	Recoveries of amounts treated as qualifying distributions.	4	0
5	Add lines 3 and 4.	5	75,916
6	Deduction from distributable amount (see instructions).	6	0
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1.	7	75,916

Part XII Qualifying Distributions (see instructions)

1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
a	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26.	1a	357,506
b	Program-related investments—total from Part IX-B.	1b	0
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes.	2	
3	Amounts set aside for specific charitable projects that satisfy the		
a	Suitability test (prior IRS approval required).	3a	
b	Cash distribution test (attach the required schedule).	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4.	4	357,506
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b (see instructions).	5	412
6	Adjusted qualifying distributions. Subtract line 5 from line 4.	6	357,094

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

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2015	(c) 2015	(d) 2016
1 Distributable amount for 2016 from Part XI, line 7				75,916
2 Undistributed income, if any, as of the end of 2016				
a Enter amount for 2015 only.			0	
b Total for prior years 20____, 20____, 20____		0		
3 Excess distributions carryover, if any, to 2016				
a From 2011. 284,070				
b From 2012. 280,156				
c From 2013. 240,043				
d From 2014. 180,006				
e From 2015. 353,987				
f Total of lines 3a through e.	1,338,262			
4 Qualifying distributions for 2016 from Part XII, line 4 ▶ \$ 357,506				
a Applied to 2015, but not more than line 2a			0	
b Applied to undistributed income of prior years (Election required—see instructions).		0		
c Treated as distributions out of corpus (Election required—see instructions).	0			
d Applied to 2016 distributable amount.				75,916
e Remaining amount distributed out of corpus	281,590			
5 Excess distributions carryover applied to 2016 (If an amount appears in column (d), the same amount must be shown in column (a))	0			0
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	1,619,852			
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 2015 Subtract line 4a from line 2a Taxable amount—see instructions			0	
f Undistributed income for 2016 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2017				0
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions).	0			
8 Excess distributions carryover from 2011 not applied on line 5 or line 7 (see instructions).	284,070			
9 Excess distributions carryover to 2017. Subtract lines 7 and 8 from line 6a	1,335,782			
10 Analysis of line 9				
a Excess from 2012. 280,156				
b Excess from 2013. 240,043				
c Excess from 2014. 180,006				
d Excess from 2015. 353,987				
e Excess from 2016. 281,590				

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

1a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2016, enter the date of the ruling. ▶

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

2a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed

	Tax year	Prior 3 years			(e) Total
	(a) 2016	(b) 2015	(c) 2014	(d) 2013	
b 85% of line 2a					
c Qualifying distributions from Part XII, line 4 for each year listed					
d Amounts included in line 2c not used directly for active conduct of exempt activities					
e Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c					

3 Complete 3a, b, or c for the alternative test relied upon

a "Assets" alternative test—enter

(1) Value of all assets

(2) Value of assets qualifying under section 4942(j)(3)(B)(i)

b "Endowment" alternative test— enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed.

c "Support" alternative test—enter

(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)

(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii).

(3) Largest amount of support from an exempt organization

(4) Gross investment income

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

1 Information Regarding Foundation Managers:

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

EDMUND A HAJIM

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

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

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

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

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

c Any submission deadlines

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

Part XV **Supplementary Information** (continued)**3 Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient Name and address (home or business)	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
a <i>Paid during the year</i> See Additional Data Table				
Total			▶ 3a	353,356
b <i>Approved for future payment</i>				
Total			▶ 3b	0

Enter gross amounts unless otherwise indicated

Enter gross amounts unless otherwise indicated	Unrelated business income		Excluded by section 512, 513, or 514		(e) Related or exempt function income (See instructions)
	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	
1 Program service revenue					
a _____					
b _____					
c _____					
d _____					
e _____					
f _____					
g Fees and contracts from government agencies					
2 Membership dues and assessments.					
3 Interest on savings and temporary cash investments					
4 Dividends and interest from securities.			14	49,675	
5 Net rental income or (loss) from real estate					
a Debt-financed property.					
b Not debt-financed property.					
6 Net rental income or (loss) from personal property					
7 Other investment income.			01	1,499	
8 Gain or (loss) from sales of assets other than inventory			18	-10,630	
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue a _____					
b _____					
c _____					
d _____					
e _____					
12 Subtotal Add columns (b), (d), and (e). . .		0		40,544	0
13 Total. Add line 12, columns (b), (d), and (e).			13		40,544

(See worksheet in line 13 instructions to verify calculations)

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

[illegible]

Part XVII

- c** Sharing of facilities, equipment, mailing lists, other assets, or paid employees. **1c**
- d** If the answer to any of the above is "Yes," complete the following schedule. Column **(b)** should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column **(d)** the value of the goods, other assets, or services received.

[illegible]

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

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

**Sign
Here**

Signature of officer or trustee _____ Date 2017-05-09 Title _____

**Paid
Preparer
Use Only**

Form 990FP Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
ARTISTS ASSOCIATION OF NANTUCKET POBOX 1104 NANTUCKET, MA 02554	NONE	EXEMPT ORG	CHARITABLE	5,250
BRUNSWICK SCHOOL 100 MAHER AVE GREENWICH, CT 06830	NONE	EXEMPT ORG	CHARITABLE	2,500
CENTRAL PARK CONSERVANCY 14 EAST 60TH STREET NEW YORK, NY 10022	NONE	EXEMPT ORG	CHARITABLE	250
CITY SQUASH 602 EAST 187TH STREET BRONX, NY 10458	NONE	EXEMPT ORG	CHARITABLE	500
DRAMATIST'S GUILD FUND 1501 BROADWAY SUITE 701 NEW YORK, NY 10036	NONE	EXEMPT ORG	CHARITABLE	1,000
ETHICAL CULTURAL FIELDSTON SCHOOL 33 CENTRAL PARK WEST NEW YORK, NY 10023	NONE	EXEMPT ORG	CHARITABLE	5,000
EPISCOPAL CHARITIES NEW YORK 1047 AMSTERDAM AVE NEW YORK, NY 10025	NONE	EXEMPT ORG	CHARITABLE	1,000
FOUNTAIN HOUSE 425 WEST 47TH STREET NEW YORK, NY 10036	NONE	EXEMPT ORG	CHARITABLE	250
FRIENDS OF NHA POBOX 1016 NANTUCKET, MA 02554	NONE	EXEMPT ORG	CHARITABLE	2,750
GRAYVIK ANIMAL CARE CENTER HOME OF ORCAT 97 SOUTH HARBOR DR KEY LARGO, FL 33037	NONE	EXEMPT ORG	CHARITABLE	240
GREENWICH ACADEMY 200 NORTH MAPLE AVENUE GREENWICH, CT 06830	NONE	EXEMPT ORG	CHARITABLE	100
GREENWICH COUNTRY DAY SCHOOL PO BOX 623 OLD CHURCH ROAD GREENWICH, CT 06836	NONE	EXEMPT ORG	CHARITABLE	100
GREENWICH HOUSE 224 WEST 30TH STREET SUITE 302 NEW YORK, NY 10001	NONE	EXEMPT ORG	CHARITABLE	1,000
HARVARD UNIVERSITY - HARVARD BUSINESS SCHOOL 124 AUBURN STREET CAMBRIDGE, MA 02138	NONE	EXEMPT ORG	CHARITABLE	5,000
HORATIO ALGER ASSOCIATION 99 CANAL CENTER PLZ STE 320 ALEXANDRIA, VA 22314	NONE	EXEMPT ORG	CHARITABLE	25,000
Total ► 3a				353,356

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
KEY'S CHILDREN FOUNDATION 24 DOCKSIDE LANE PMB 139 KEY LARGO, FL 33037	NONE	EXEMPT ORG	CHARITABLE	500
MARIA MITCHELL ASSOCIATION 4 VESTAL STREET NANTUCKET, MA 02554	NONE	EXEMPT ORG	CHARITABLE	500
MIDDLESEX SCHOOL 1400 LOWELL ROAD CONCORD, MA 01742	NONE	EXEMPT ORG	CHARITABLE	15,000
NANTUCKET ANTHENEUM POBOX 808 NANTUCKET, MA 02554	NONE	EXEMPT ORG	CHARITABLE	21,920
NANTUCKET BOYS & GIRLS CLUB INC PO BOX 269 NANTUCKET, MA 02554	NONE	EXEMPT ORG	CHARITABLE	13,700
NANTUCKET CONSERVATION FOUNDATION POBOX 13 NANTUCKET, MA 02554	NONE	EXEMPT ORG	CHARITABLE	5,000
NANTUCKET COTTAGE HOSPITAL 57 PROSPECT STREET NANTUCKET, MA 02554	NONE	EXEMPT ORG	CHARITABLE	29,250
NANTUCKET DREAMLAND FOUNDATION 17 SOUTH WATER STREET NANTUCKET, MA 02554	NONE	EXEMPT ORG	CHARITABLE	10,250
NANTUCKET GOLF CLUB FOUNDATION 250 MILESTONE RD SIASCONSET, MA 02564	NONE	EXEMPT ORG	CHARITABLE	49,500
NANTUCKET HISTORICAL ASSOCIATION POBOX 1016 NANTUCKET, MA 02554	NONE	EXEMPT ORG	CHARITABLE	21,005
NANTUCKET LIGHTHOUSE SCHOOL 1 RUGGED ROAD NANTUCKET, RI 02554	NONE	EXEMPT ORG	CHARITABLE	100
NANTUCKET NEW SCHOOL 15 NOBADEER FARM ROAD NANTUCKET, MA 02554	NONE	EXEMPT ORG	CHARITABLE	100
OCEAN REEF CULTURAL CENTER 200 ANCHOR DR KEY LARGO, FL 33037	NONE	EXEMPT ORG	CHARITABLE	53,000
OCEAN REEF COMMUNITY FOUNDATION INC 35 OCEAN REEF DRIVE STE 148 KEY LARGO, FL 33037	NONE	EXEMPT ORG	CHARITABLE	15,000
ROCKY MOUNTAIN REPERTORY THEATER 5311 WESTERN AVE BOULDER, CO 80301	NONE	EXEMPT ORG	CHARITABLE	4,000
Total ▶ 3a				353,356

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
ST ANNE'S EPISCOPAL SCHOOL 2701 SOUTH YORK STREET DENVER, CO 80210	NONE	EXEMPT ORG	CHARITABLE	2,500
THE COLORADO CHILDREN'S CAMPAIGN 1580 LINCOLN STREET SUITE 420 DENVER, CO 80203	NONE	EXEMPT ORG	CHARITABLE	1,000
THE FESSENDEN SCHOOL 250 WALTHAM STREET WEST NEWTON, MA 02465	NONE	EXEMPT ORG	CHARITABLE	100
UNIVERSITY OF DENVER 2190 EAST ASBURY AVENUE DENVER, CO 80208	NONE	EXEMPT ORG	CHARITABLE	500
UNIVERSITY OF ROCHESTER PO BOX 270251 ROCHESTER, NY 14627	NONE	EXEMPT ORG	CHARITABLE	59,491
WATERSIDE SCHOOL 770 PACIFIC STREET STAMFORD, CT 06902	NONE	EXEMPT ORG	CHARITABLE	1,000
Total 3a				353,356

TY 2016 Accounting Fees Schedule**Name:** THE HAJIM FAMILY FOUNDATION**EIN:** 13-6893956

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
TAX PREPARATION FEE	7,500	3,750		3,750

TY 2016 Investments - Other Schedule**Name:** THE HAJIM FAMILY FOUNDATION**EIN:** 13-6893956

Category/ Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value
THRU CAPITAL GROUP-AMERICAN HIGH-INCOME TRUST CL F2	AT COST	147,083	139,758
THRU CAPITAL GROUP-CAPITAL GROUP CORE BOND FUND	AT COST	208,894	204,636
THRU CAPITAL GROUP-CAPITAL INCOME BUILDER CL F2	AT COST	365,728	349,355
THRU CAPITAL GROUP-CAPITAL WORLD GROWTH & INCOME FD CL F2	AT COST	376,332	349,842
THRU CAPITAL GROUP-INCOME FUND OF AMERICA FD CL F2	AT COST	356,998	355,894

TY 2016 Other Expenses Schedule**Name:** THE HAJIM FAMILY FOUNDATION**EIN:** 13-6893956**Other Expenses Schedule**

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
NYS FILING FEE	250	0		250
NY LAW JOURNAL	150	0		150
BANK FEES	4,710	4,710		0

TY 2016 Other Income Schedule

Name: THE HAJIM FAMILY FOUNDATION

EIN: 13-6893956

Other Income Schedule

Description	Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income
FEDERAL REFUND	1,499	0	1,499

TY 2016 Taxes Schedule**Name:** THE HAJIM FAMILY FOUNDATION**EIN:** 13-6893956

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
NY CORP TAX	250	0		0
US TREASURY	1,648	0		0
OTHER EXPENDITURES	1,190	0		0

Schedule B (Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service	Schedule of Contributors ▶ Attach to Form 990, 990-EZ, or 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 THE HAJIM FAMILY FOUNDATION	Employer identification number 13-6893956

Organization type (check one)

Filers of:	Section:
Form 990 or 990-EZ	<input type="checkbox"/> 501(c)() (enter number) organization
	<input type="checkbox"/> 4947(a)(1) nonexempt charitable trust not treated as a private foundation
	<input type="checkbox"/> 527 political organization
Form 990-PF	<input checked="" type="checkbox"/> 501(c)(3) exempt private foundation
	<input type="checkbox"/> 4947(a)(1) nonexempt charitable trust treated as a private foundation
	<input type="checkbox"/> 501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.
Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

☒ For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or other property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

☐ For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33¹/₃% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.

☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.

☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Do not complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year. . . . ▶ \$ _____

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

Name of organization THE HAJIM FAMILY FOUNDATION	Employer identification number 13-6893956
--	---

Part I	Contributors (see instructions) Use duplicate copies of Part I if additional space is needed		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	EDMUND HAJIM C/O CBIZ 1065 AVE OF AMERICAS NEW YORK, NY 10018	\$ 7,750	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)

Name of organization THE HAJIM FAMILY FOUNDATION	Employer identification number 13-6893956
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Part II Noncash Property			
(a) No. from Part I	(b) Description of noncash property given <small>(see instructions) Use duplicate copies of Part II if additional space is needed</small>	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
		\$	
		\$	
		\$	
		\$	
		\$	
		\$	

Name of organization THE HAJIM FAMILY FOUNDATION	Employer identification number 13-6893956
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Part III	Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once. See instructions.) ► \$ _____ Use duplicate copies of Part III if additional space is needed
-----------------	--

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

Realized Gain (Loss) Detail

HAJIM FAMILY FOUNDATION

Account Number XXXX08500

For the Period January 1, 2016 - January 31, 2016
Reporting Currency USD

Purchase		Description	Quantity	Proceeds	Cost	Realized	
Sale Date	Date					Gain (Loss)	ST/LT
Sales							
Equity							
01/21/2016	02/05/2015	CAPITAL INCOME BUILDER CL F2	24.30	1,280 39	1,478 41	(198 02)	ST

	Period ended	Year to date*
	01/31/2016	01/31/2016
Total net short-term gain (loss)	(198 02)	(198 02)
Total net long-term gain (loss)	0 00	0 00
Total Gain (Loss)	(198.02)	(198.02)

* Fiscal year ending December 31



Realized Gain (Loss) Detail

HAJIM FAMILY FOUNDATION

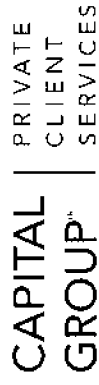
Account Number XXXX08500

For the Period February 1, 2016 - February 29, 2016
Reporting Currency USD

Sale Date	Purchase Date	Description	Quantity	Proceeds	Cost	Realized Gain (Loss)	ST/LT
Sales							
Fixed Income							
02/22/2016	04/02/2015	CAPITAL GROUP CORE BOND FUND	1,221.12	12,467 58	12,601 91	(134 33)	ST
Equity							
02/22/2016	03/05/2015	CAPITAL INCOME BUILDER CL F2	129.02	7,128 18	7,841 65	(713 47)	ST

	Period ended 02/29/2016	Year to date* 02/29/2016
Total net short-term gain (loss)	(1,464 50)	(1,662 52)
Total net long-term gain (loss)	0 00	0 00
Total Gain (Loss)	(1,464.50)	(1,662.52)

* Fiscal year ending December 31



HAJIM FAMILY FOUNDATION

For the Period March 1, 2016 - March 31, 2016
Reporting Currency USD

	Period ended 03/31/2016	Year to date* 03/31/2016
Total net short-term gain (loss)	(1,242.29)	(2,904.81)
Total net long-term gain (loss)	0.00	0.00
Total Gain (Loss)	(1,242.29)	(2,904.81)

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Realized Gain (Loss) Detail

HAJIM FAMILY FOUNDATION

Account Number XXXX08500

For the Period April 1, 2016 - April 30, 2016
Reporting Currency USD

Sale Date	Purchase Date	Description	Quantity	Proceeds	Cost	Realized Gain (Loss)	ST/LT
Sales							
Fixed Income							
04/05/2016	03/31/2016	AMERICAN HIGH-INCOME TRUST CL F2	651.57	6,157.32	6,542.31	(384.99)	ST
04/05/2016	02/05/2015	CAPITAL GROUP CORE BOND FUND	869.37	8,954.47	8,989.24	(34.77)	LT
Equity							
04/05/2016	06/17/2015	CAPITAL INCOME BUILDER CL F2	69.78	3,972.81	4,163.31	(190.50)	ST
04/05/2016	03/16/2016	CAPITAL WORLD GROWTH & INCOME FD CL F2	361.08	15,349.51	16,076.78	(727.27)	ST
04/05/2016	06/17/2015	INCOME FUND OF AMERICA CL F2	175.98	3,612.87	3,790.62	(177.75)	ST



Realized Gain (Loss) Detail

HAJIM FAMILY FOUNDATION

Account Number XXXX08500

For the Period April 1, 2016 - April 30, 2016
Reporting Currency USD

Sale Date	Purchase Date	Description	Quantity	Proceeds	Cost	Realized Gain (Loss)	ST/LT																																								
<table> <tr> <td colspan="2"></td><td>Period ended</td><td colspan="2"></td><td colspan="3">Year to date*</td></tr> <tr> <td colspan="2"></td><td>04/30/2016</td><td colspan="2"></td><td colspan="3">04/30/2016</td></tr> <tr> <td colspan="2"></td><td>(1,480.51)</td><td colspan="2"></td><td colspan="3">(4,385.32)</td></tr> <tr> <td colspan="2"></td><td>(2,660.15)</td><td colspan="2"></td><td colspan="3">(2,660.15)</td></tr> <tr> <td colspan="2"></td><td>(4,140.66)</td><td colspan="2"></td><td colspan="3">(7,045.47)</td></tr> </table>										Period ended			Year to date*					04/30/2016			04/30/2016					(1,480.51)			(4,385.32)					(2,660.15)			(2,660.15)					(4,140.66)			(7,045.47)		
		Period ended			Year to date*																																										
		04/30/2016			04/30/2016																																										
		(1,480.51)			(4,385.32)																																										
		(2,660.15)			(2,660.15)																																										
		(4,140.66)			(7,045.47)																																										
Total net short-term gain (loss)																																															
Total net long-term gain (loss)																																															
Total Gain (Loss)																																															

* Fiscal year ending December 31



Realized Gain (Loss) Detail

HAJIM FAMILY FOUNDATION

Account Number XXXX08500

For the Period May 1, 2016 - May 31, 2016
Reporting Currency USD

Sale Date	Purchase Date	Description	Quantity	Proceeds	Cost	Realized Gain (Loss)	ST/LT
Sales							
Fixed Income							
05/05/2016	04/29/2016	AMERICAN HIGH-INCOME TRUST CL F2	82.93	806 89	811 87	(4 98)	ST
05/20/2016	07/24/2014	AMERICAN HIGH-INCOME TRUST CL F2	554.46	5,389 37	6,365 22	(975 85)	LT
05/20/2016	02/05/2015	CAPITAL GROUP CORE BOND FUND	788.05	8,093 29	8,148 45	(55 16)	LT
Equity							
05/05/2016	02/05/2015	CAPITAL INCOME BUILDER CL F2	191.12	10,989 24	11,629 47	(640 23)	LT
05/05/2016	03/05/2015	CAPITAL WORLD GROWTH & INCOME FD CL F2	225.83	9,724.23	10,819.52	(1,095.29)	LT
05/05/2016	03/05/2015	INCOME FUND OF AMERICA CL F2	570.13	11,818 76	12,571 32	(752 56)	LT



Realized Gain (Loss) Detail

HAJIM FAMILY FOUNDATION

Account Number XXXX08500

For the Period May 1, 2016 - May 31, 2016
Reporting Currency USD

Sale Date	Purchase Date	Description	Quantity	Proceeds	Cost	Realized Gain (Loss)	ST/LT
<div> <div> Period ended 05/31/2016 </div> <div> Year to date* 05/31/2016 </div> </div>							
Total net short-term gain (loss)				(5 56)		(4,390 88)	
Total net long-term gain (loss)				(8,148 35)		(10,808 50)	
Total Gain (Loss)				(8,153.91)		(15,199.38)	

* Fiscal year ending December 31



Realized Gain (Loss) Detail

HAJIM FAMILY FOUNDATION

Account Number XXXX08500

For the Period June 1, 2016 - June 30, 2016
Reporting Currency USD

Sale Date	Purchase Date	Description	Quantity	Proceeds	Cost	Realized Gain (Loss)	ST/LT
Sales							
Equity							
06/09/2016	02/05/2015	CAPITAL INCOME BUILDER CL F2	44.69	2,633.73	2,719.08	(85.35)	LT
06/09/2016	03/05/2015	INCOME FUND OF AMERICA CL F2	73.83	1,568.20	1,628.00	(59.80)	LT

	Period ended 06/30/2016	Year to date* 06/30/2016
Total net short-term gain (loss)	0.00	(4,390.88)
Total net long-term gain (loss)	(588.03)	(11,396.53)
Total Gain (Loss)	(588.03)	(15,787.41)

* Fiscal year ending December 31

Realized Gain (Loss) Detail

HAJIM FAMILY FOUNDATION

Account Number XXXX08500

For the Period July 1, 2016 - July 31, 2016
Reporting Currency USD

Purchase		Description	Quantity	Proceeds	Cost	Realized	
Sale Date	Date					Gain (Loss)	ST/LT
Sales							
Equity							
07/21/2016	03/05/2015	INCOME FUND OF AMERICA CL F2	52.13	1,129.22	1,149.55	(20.33)	LT

	Period ended	Year to date*
	07/31/2016	07/31/2016
Total net short-term gain (loss)	0.00	(4,390.88)
Total net long-term gain (loss)	(20.33)	(11,416.86)
Total Gain (Loss)	(20.33)	(15,807.74)

* Fiscal year ending December 31



Realized Gain (Loss) Detail

HAJIM FAMILY FOUNDATION

Account Number XXXX08500

For the Period September 1, 2016 - September 30, 2016
Reporting Currency USD

Sale Date	Purchase Date	Description	Quantity	Proceeds	Cost	Realized Gain (Loss)	ST/LT
Sales							
Fixed Income							
09/28/2016	03/05/2015	AMERICAN HIGH-INCOME TRUST CL F2	871.69	8,847.62	9,701.70	(854.08)	LT
Equity							
09/28/2016	02/05/2015	CAPITAL INCOME BUILDER CL F2	226.12	13,352.22	13,759.22	(407.00)	LT
09/28/2016	03/05/2015	INCOME FUND OF AMERICA CL F2	717.44	15,424.94	15,819.54	(394.60)	LT

	Period ended 09/30/2016	Year to date* 09/30/2016
Total net short-term gain (loss)	0.00	(4,390.88)
Total net long-term gain (loss)	(2,679.41)	(14,096.27)
Total Gain (Loss)	(2,679.41)	(18,487.15)

* Fiscal year ending December 31



Realized Gain (Loss) Detail

HAJIM FAMILY FOUNDATION

Account Number XXXX08500

For the Period October 1, 2016 - October 31, 2016
Reporting Currency USD

Sale Date	Purchase Date	Description	Quantity	Proceeds	Cost	Realized Gain (Loss)	ST/LT
Sales							
Fixed Income							
10/25/2016	03/05/2015	AMERICAN HIGH-INCOME TRUST CL F2	855.21	8,800 06	9,381 60	(581 54)	LT
10/25/2016	09/29/2016	CAPITAL GROUP CORE BOND FUND CL F2	79.61	822 39	825 29	(2 90)	ST
Equity							
10/25/2016	09/14/2016	CAPITAL INCOME BUILDER CL F2	57.87	3,343 51	3,359 14	(15 63)	ST
10/25/2016	03/05/2015	CAPITAL WORLD GROWTH & INCOME FD CL F2	275.42	12,377 47	13,195 47	(818 00)	LT
10/25/2016	03/05/2015	INCOME FUND OF AMERICA CL F2	567.23	12,093 24	12,440 12	(346 88)	LT

	Period ended 10/31/2016	Year to date* 10/31/2016
Total net short-term gain (loss)	(18 53)	(4,409 41)
Total net long-term gain (loss)	(2,073 02)	(16,169 29)
Total Gain (Loss)	(2,091.55)	(20,578.70)

* Fiscal year ending December 31





Realized Gain (Loss) Detail

HAJIM FAMILY FOUNDATION

Account Number XXXX08500

For the Period December 1, 2016 - December 31, 2016
Reporting Currency USD

Sale Date	Purchase Date	Description	Quantity	Proceeds	Cost	Realized Gain (Loss)	ST/LT
Capital Gain Distributions							
Fixed Income							
12/30/2016		CAPITAL GROUP CORE BOND FUND				421 33	LT
Equity							
12/22/2016		CAPITAL WORLD GROWTH & INCOME FD CL F2				9,528 12	LT

	Period ended 12/31/2016	Year to date* 12/31/2016
Total net short-term gain (loss)	0.00	(4,409.41)
Total net long-term gain (loss)	0 00	(16,169 29)
Total long-term capital gain distributions	9,949 45	9,949 45
Total Gain (Loss)	9,949.45	(10,629.25)

* Fiscal year ending December 31