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EXTENDED TO NOVEMBER 15, 2017 Return of Private Foundation

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

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

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

OMB No 1545-0052

14 Other employee salaries and wages 15 Pension plans, employee benefits 16a Legal fees b Accounting fees 17 Interest 18 Taxes 19 Depreciation and depletion 20 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications 23 Other expenses 24 Total operating and administrative expenses. Add lines 13 through 23 25 Contributions, gifts, grants paid 26 Total expenses and disbursements. Add lines 24 and 25 27 Subtract line 26 from line 12. a Excess of revenue over expenses and disbursements 2 Age of the professional fees 2 Age of the professional fees 2 Age of the professional fees 3 Age of the professional fees 4 Age of the professional fees 4 Age of the professional fees 4 Age of the professional fees 5 Age of the professi	Ford	alen	dar year 2016 or tax year beginning		, and ending		
Procedure of the Section Application in Common of most and converted addressors STATEMENT 100 STATEMENT 21 STATEMENT 21 STATEMENT 3 STA	Nan	ne of	foundation			A Employer identification	number
1700 BROADWAY, 35TH FLOOR 212-615-3442 Cit reasonpline proposition properties of the New YORK, NY 10019 Initial return of a former public charity Initial return Address change Name cha	S	EG2	AL FAMILY FOUNDATION			20-7395108	
1700 BROADWAY, 35TH FLOOR NEW YORK, NY 10019	Num	ber ar	nd street (or P O box number if mail is not delivered to street	address)	Room/suite	B Telephone number	
NEW YORK, NY 10019 6 Check all mail apply: Initial return of a former public charity Amended return Address change Initial return of a former public charity Amended return Address change Initial return of a former public charity Initial Return Initial Return Initial Return Initial Return Initial Initial Initial Return Initial In	_1	700	BROADWAY, 35TH FLOOR				42
Check all that apply:				ostal code		C If exemption application is po	ending, check here
Part Continuations gits, grants, etc., received A 815, 285.	-			Initial return of a fo	rmar nublia abarity	B 1 Foreign organizations	chack hora
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I farr market value of all assets at end of year fire framework	H C	heck				1	
Far market value of all assets at end of year I, cot (c), line 16) S 3, 162, 995. [Part II] analysis of Revenue and Exponses Someonic value of all assets at end of year I, column (d) must be on cash basis) [A 1	<u> </u>	_	· · · · · · · · · · · · · · · · · · ·		ation		
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Check			The total of amounts in columns (b), (c), and (d) may not	expenses per books		income	
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c Adjusted net income (if negative, enter -0-)		ı					

623501 11-23-16 LHA For Paperwork Reduction Act Notice, see instructions.

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	737,748.
2	Enter amount from Part I, line 27a	2	2,483,607.
3	Other increases not included in line 2 (itemize)	3	0.
4	Add lines 1, 2, and 3	4	3,221,355.
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	3,221,355.

2015 1,164,736. 2014 666,374. 2013 701,196. 2012 223,250.	521.	2 3 vestr	col. (Gains (Col. k), but not Losses (fr	. (h) gain t less thar rom col. (l	g) 1,747,627 minus 1-0-) or h)) 1,747,627
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Capital gain net income or (net capital loss) (If gain, also enter in Part I, line 7) 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). If (loss), enter -0- in Part I, line 8 Part V Qualification Under Section 4940(e) for Reduced Tax on for optional use by domestic private foundations subject to the section 4940(a) tax on net investment of section 4940(d)(2) applies, leave this part blank. If (loss), enter -0- in Part I, line 8 Part V Qualification Under Section 4940(e) for Reduced Tax on the foundation does not investment of the section 4940(a) tax on net investment of the foundation liable for the section 4942 tax on the distributable amount of any year in the base "Yes," the foundation does not qualify under section 4940(e). Do not complete this part. Enter the appropriate amount in each column for each year; see the instructions before making (a) Base period years (a) (b) Adjusted qualifying distributions Net value 2015 1,164,736. 2014 666,374. 2013 701,196. 2012 223,250.		3 vestr	nent Inco	ome		1,747,627
Capital gain net income or (net capital loss) If gain, also enter in Part I, line 7 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). If (loss), enter -0- in Part I, line 8 Part V Qualification Under Section 4940(e) for Reduced Tax on or optional use by domestic private foundations subject to the section 4940(a) tax on net investm section 4940(d)(2) applies, leave this part blank. If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 8 Part V		3 vestr	nent Inco	ome		1,747,627
Capital gain net income or (net capital loss) 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). If (loss), enter -0- in Part I, line 8 Part V Qualification Under Section 4940(e) for Reduced Tax on or optional use by domestic private foundations subject to the section 4940(a) tax on net investm section 4940(d)(2) applies, leave this part blank. If (loss), enter -0- in Part I, line 8 Part V Qualification Under Section 4940(e) for Reduced Tax on or optional use by domestic private foundations subject to the section 4940(a) tax on net investm section 4940(d)(2) applies, leave this part blank. If (loss), enter -0- in Part I, line 7 If (loss), enter -0- in Part I, line 7 If (loss), enter -0- in Part I, line 7 If (loss), enter -0- in Part I, line 7 If (loss), enter -0- in Part I, line 7 If (loss), enter -0- in Part I, line 7 If (loss), enter -0- in Part I, line 7 If (loss), enter -0- in Part I, line 7 If (loss), enter -0- in Part I, line 7 If (loss), enter -0- in Part I, line 7 If (loss), enter -0- in Part I, line 7 If (loss), enter -0- in Part I, line 7 If (loss), enter -0- in Part I, line 8 Part V Qualification in enterpreters in part I, line 8 Part V Qualification in enterpreters in part I, line 8 Part V Qualification in enterpreters in part I, line 8 Part V Qualification in enterpreters in part I, line 8 Part V Qualification in enterpreters in part I, line 8 Part V Qualification in enterpreters in part I, line 8 Part V Qualification in enterpreters in part I, line 8 Part V Qualification in enterpreters in part I, line 8 Part V Qualification in enterpreters in part I, line 8 Part V Qualification in enterpreters in part I, line 8 Part V Qualification in enterpreters in part I ente		3 vestr	nent Inco	ome		
If gain, also enter in Part I, line 8, column (c). If (loss), enter -0- in Part I, line 8 Part V Qualification Under Section 4940(e) for Reduced Tax on for optional use by domestic private foundations subject to the section 4940(a) tax on net investm section 4940(d)(2) applies, leave this part blank. If as the foundation liable for the section 4942 tax on the distributable amount of any year in the base "Yes," the foundation does not qualify under section 4940(e). Do not complete this part. Enter the appropriate amount in each column for each year; see the instructions before making Base period years Calendar year (or tax year beginning in) Adjusted qualifying distributions Net value 2015 1,164,736. 2014 666,374. 2013 701,196. 2012 223,250.			nent Inco	ome.	N/A	
Part V Qualification Under Section 4940(e) for Reduced Tax on or optional use by domestic private foundations subject to the section 4940(a) tax on net investm section 4940(d)(2) applies, leave this part blank. Tas the foundation liable for the section 4942 tax on the distributable amount of any year in the base. The foundation does not qualify under section 4940(e). Do not complete this part. Enter the appropriate amount in each column for each year; see the instructions before making (a) Calendar year (or tax year beginning in) Adjusted qualifying distributions 1,164,736. 2014 666,374. 2013 701,196. 2012 223,250.			nent Inco	me	N/A	
or optional use by domestic private foundations subject to the section 4940(a) tax on net investment of a section 4940(d)(2) applies, leave this part blank. Tas the foundation liable for the section 4942 tax on the distributable amount of any year in the base. The foundation does not qualify under section 4940(e). Do not complete this part. Enter the appropriate amount in each column for each year; see the instructions before making to a section 4940(e). Adjusted qualifying distributions are setting to a section 4940(e). The foundation does not qualify under section 4940(e). Do not complete this part. Enter the appropriate amount in each column for each year; see the instructions before making to a section 4940(e). The foundation does not qualify under section 4940(e)			nent Inco	nme		
section 4940(d)(2) applies, leave this part blank. If as the foundation liable for the section 4942 tax on the distributable amount of any year in the base. If a foundation does not qualify under section 4940(e). Do not complete this part. Enter the appropriate amount in each column for each year; see the instructions before making (a) (b) (b) (b) (c) (b) (c) (d) (d) (d) (d) (d) (d) (d) (d) (d) (d	ent incom			JIIIC		
(a) Base period years Calendar year (or tax year beginning in) 2015 2014 2013 2012 (b) Adjusted qualifying distributions Net value 7 1, 164, 736. 8 666, 374. 7 01, 196. 223, 250.	·					Yes X N
Calendar year (or tax year beginning in) Adjusted qualifying distributions Net value 2015 1,164,736. 2014 666,374. 2013 701,196. 2012 223,250.	any entri	es.				
2014 666,374. 2013 701,196. 2012 223,250.) of nonch		-use assets		Distrib	(d) oution ratio vided by col. (c))
2013 701,196. 2012 223,250.			9,342			1.74012
2012 223,250.		98	7,611	•		.67473
2012 223,250.		1,65	7,479			.42305
		1.69	1,576			.13197
2011 222,800.			5,971			.12545
Total of line 1, column (d)			97272	2		3.09533
Average distribution ratio for the 5-year base period - divide the total on line 2 by 5, or by the nutrie foundation has been in existence if less than 5 years	mber of y	years		3		.61906
Enter the net value of noncharitable-use assets for 2016 from Part X, line 5				4		1,164,135
Multiply line 4 by line 3				5		720,678
Enter 1% of net investment income (1% of Part I, line 27b)				6		17,760
				7		738,438
Add lines 5 and 6						
Enter qualifying distributions from Part XII, line 4 If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part See the Box VI instructions.				8		2,367,664
See the Part VI instructions.	using a	1% tax	rate.			

2016.04030 SEGAL FAMILY FOUNDATION

Part VII-A Statements Regarding Activities (continued)			
		Yes	No
At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of	1		
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?	1	1	37
If "Yes," attach statement (see instructions)	12	X	X
13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	7 ~	┸——
Website address ► N/A 14 The books are in care of ► THE FOUNDATION Telephone no. ► 212-	<u> </u>	1110	, -
Located at > 1700 BROADWAY, 35TH FLOOR, NEW YORK, NY	10010	3 = = 2	
15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here	1001.		TT
and enter the amount of tax-exempt interest received or accrued during the year	1	A/N	ــــا
16 At any time during calendar year 2016, did the foundation have an interest in or a signature or other authority over a bank,			No
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>
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.		Yes	No
1a During the year did the foundation (either directly or indirectly):	1		ł
(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	,	ł	1
(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)	- 1	1	
a disqualified person?		ł	1
(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes X N		1	
(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? (5) Transfer any income or assets to a disqualified person (or make any of either available	'	1	
for the benefit or use of a disqualified person)?		ì	
(6) Agree to pay money or property to a government official? (Exception. Check "No"	´	1	1
if the foundation agreed to make a grant to or to employ the official for a period after	}	1	
termination of government service, if terminating within 90 days.)	a	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	ĺ	1	
section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	. 1b		
Organizations relying on a current notice regarding disaster assistance check here] [1	
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?	10		X
2 Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation	- 1		1
defined in section 4942(j)(3) or 4942(j)(5)):	1	1	
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	1		1
before 2016? Yes X N	'	1	
If "Yes," list the years > , , , , , , , , , , , , , , , , , ,			
valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach	1	1	
statement - see instructions.) N/A	26	1	ŀ
c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.		+	+
	1		1
3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time	ł	}	1
during the year?	0		
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	- 1	}	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	ł		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,			_
Form 4720, to determine if the foundation had excess business holdings in 2016) N/A	<u> </u>	+	+
4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	48	+	X
b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that		.	- x -
had not been removed from jeopardy before the first day of the tax year beginning in 2016?	4b Form 9 9	10-DE	
	COLUIT DE	/ T	(6010)

P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign four	ndations	, see instructions)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
	Average monthly fair market value of securities	1a	563,131.
	Average of monthly cash balances	1b	617,400.
	Fair market value of all other assets	1c	1,332.
d	Total (add lines 1a, b, and c)	10	1,181,863.
	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	1,181,863.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	17,728.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	1,164,135.
6	Minimum investment return. Enter 5% of line 5	6	58,207.
P	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and foreign organizations check here and do not complete this part.)	d certain	
1	Minimum investment return from Part X, line 6	1	58,207.
2a	Tax on investment income for 2016 from Part VI, line 5	3.3	
b	Income tax for 2016. (This does not include the tax from Part VI.)	100	
C	Add lines 2a and 2b	2c	17,760.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	40,447.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	40,447.
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	40,447.
P	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
' a	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	2,367,664.
-	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:	 - 	
-	Suitability test (prior IRS approval required)	3a	
	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	2,367,664.
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	17,760.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	2,349,904.
-	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation	qualifies 1	for the section
	4940(e) reduction of tax in those years.		
			5 000 DE (0010)

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,	Corpus	rears prior to 2015	2015	2010
line 7				40,447.
2 Undistributed income, if any, as of the end of 2016				40,447.
a Enter amount for 2015 only				
b Total for prior years:				
b rotal to provide yourg.		0.		
3 Excess distributions carryover, if any, to 2016:				
aFrom 2011 135,063.				
bFrom 2012 139,655.				
© From 2013 624,530.	·			
dFrom 2014 622, 495.	·)			
eFrom 2015 1,139,151.				
f Total of lines 3a through e	2,660,894.			•
4 Qualifying distributions for 2016 from	2,000,054.			
Part XII, line 4: ▶\$ 2,367,664.	[1		
a Applied to 2015, but not more than line 2a	·	ĺ	0.	1
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.	İ		
d Applied to 2016 distributable amount				40,447.
e Remaining amount distributed out of corpus	2,327,217.			40,447.
5 Excess distributions carryover applied to 2016	0.			0.
(If an amount appears in column (d), the same amount				
must be shown in column (a)) 6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	4,988,111.			
b Prior years' undistributed income. Subtract	±,500,111.			
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 instr.		ĺ	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	135,063.			
9 Excess distributions carryover to 2017.				
Subtract lines 7 and 8 from line 6a	4,853,048.			
10 Analysis of line 9;				
a Excess from 2012 139,655.		ļ		
b Excess from 2013 624,530.		j		
c Excess from 2014 622, 495.]		
d Excess from 2015 1,139,151.		}		
e Excess from 2016 2,327,217.				
623581 11-23-16				Form 900 DE (2016)

	AMILY FOUND			20-73	95108 Page 10
Part XIV Private Operating F	oundations (see in	structions and Part VI	I-A, question 9)	N/A	
1 a If the foundation has received a ruling of	determination letter tha	t it is a private operating			
foundation, and the ruling is effective for					
b Check box to indicate whether the found	•	•	in section	4942(j)(3) or 49	42(j)(5)
2 a Enter the lesser of the adjusted net	Tax year	1	Prior 3 years	3 10 15 (1)(0) 01	
income from Part I or the minimum	(a) 2016	(b) 2015	(c) 2014	(d) 2013	(e) Total
investment return from Part X for		· · · · · · · · · · · · · · · · · · ·	 - ``	- 	
•					
each year listed b 85% of line 2a			 	- 	
		 	 		
c Qualifying distributions from Part XII,					
line 4 for each year listed				 	
d Amounts included in line 2c not				\	
used directly for active conduct of			1		l e e e e e e e e e e e e e e e e e e e
exempt activities	<u> </u>		<u> </u>		
e Qualifying distributions made directly					
for active conduct of exempt activities.					
Subtract line 2d from line 2c			<u> </u>		
3 Complete 3a, b, or c for the					
alternative test relied upon: a "Assets" alternative test - enter:		ļ	}		
(1) Value of all assets					
(2) Value of assets qualifying					
under section 4942(j)(3)(B)(i)			Ì	Į.]
b "Endowment" alternative test - enter					
2/3 of minimum investment return	1		}		Ì
shown in Part X, line 6 for each year listed					
c "Support" alternative test - enter:		<u> </u>			
(1) Total support other than gross			Ì	}	1
investment income (interest,		ļ			}
dividends, rents, payments on					
securities loans (section					
512(a)(5)), or royalties)	}	ļ			
(2) Support from general public and 5 or more exempt					Ì
organizations as provided in	ļ	J		j	j
section 4942(j)(3)(B)(iii)		<u> </u>			
(3) Largest amount of support from		1		Ì	Ì
an exempt organization		<u> </u>	<u> </u>		
(4) Gross investment income					<u>l</u>
Part XV Supplementary Info			if the foundation	n had \$5,000 or m	ore in assets
at any time during t	the year-see inst	ructions.)			
1 Information Regarding Foundation	on Managers:				
a List any managers of the foundation wh		than 2% of the total cor	tributions received by th	ne foundation before the clo	se of any tax
year (but only if they have contributed r	nore than \$5,000). (See	section 507(d)(2).)			
SEE STATEMENT 10					
b List any managers of the foundation wh	o own 10% or more of t	he stock of a corporation	(or an equally large por	tion of the ownership of a p	artnership or
other entity) of which the foundation ha	s a 10% or greater intere	est.			
NONE					
2 Information Regarding Contribut	ion Grant Gift Loan	Scholarshin etc. F	Programs:		
Check here ► X if the foundation of				not accept upsolicited requ	iests for funds. If
the foundation makes gifts, grants, etc.					
a The name, address, and telephone num					
a The hame, address, and telephone hum	ider of e-mail address of	the person to whom app	ilications should be addi	0330u.	
h The face of which and believe about di		ation and materials that	should include:		
b The form in which applications should t	se suoinineo ano imormi	ation and materials triey	snoula include.		
					
c Any submission deadlines:					
			hada da aka aka a		
d Any restrictions or limitations on award	s, such as by geographic	cai areas, charitable field:	s, kinds of institutions, o	r other factors;	
					Farm 000 DE (0010)

Part XV Supplementary Information				
3 Grants and Contributions Paid During the Y	If recipient is an individual,	Payment		
Name and address (home or business)	show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a Paid during the year	or oddominal domentor			
BAPTIST HEALTH SOUTH FLORIDA FOUNDATION	NONE	PUBLIC CHARITY	OPERATIONS	
6855 RED ROAD CORAL GABLES, FL 33143				20,000.
		:		
NEW YORK UNIVERSITY - DAILY GIFT 726 BROADWAY, 2ND FLOOR	NONE	PUBLIC CHARITY	OPERATIONS	
NEW YORK, NY 10003	 			125,000.
SECURING AMERICAS FUTURE ENERGY 1111 19TH STREET, NW, SUITE 406	NONE	PUBLIC CHARITY	OPERATIONS	
WASHINGTON, DC 20036			,	150,000.
THE WASHINGTON INSTITUTE 1111 19TH STREET, NW, SUITE 500	NONE	PUBLIC CHARITY	OPERATIONS	
WASHINGTON, DC 20036				102,550.
AMERICAN FRIENDS OF BEIT HATFUTSOT 633 THIRD AVENUE, 21ST FLOOR	NONE	PUBLIC CHARITY	OPERATIONS	222 020
NEW YORK, NY 10017	NTINUATION SHE		▶ 3a	323,929 2,271,479
b Approved for future payment	THORITON BILL	1 107	54	2,272,375
NONE				
Total	<u> </u>	<u> </u>	▶ 3b	0,000 PF (0010

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated.		business income (b)	Excluded to	(d)	(e) Related or exempt
1 Program service revenue:	(a) Business code	Amount	sion code	Amount	function income
a					
b					
·					
<u> </u>	-				
e	- -				
g Fees and contracts from government agencies	-		- -		
2 Membership dues and assessments					
3 Interest on savings and temporary cash					
Investments	į į		14	432.	
4 Dividends and interest from securities			14	28,509.	
5 Net rental income or (loss) from real estate:					· · · · · · · · · · · · · · · · · · ·
Debt-financed property					
b Not debt-financed property					
6 Net rental income or (loss) from personal	1 1		1 }		
property					
7 Other investment income 8 Gain or (loss) from sales of assets other			- 		
than inventory	1 1		18	11,272.	
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	-		0.1	40,213.	0.
12 Subtotal. Add columns (b), (d), and (e)	L		0 •1	13	40,213.
13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.)				13	40,215.
		mplishment of	Exempt P	Purposes	
Part XVI-B Relationship of Activities					
Line No. Explain below how each activity for which in				d importantly to the accomp	olishment of
				d importantly to the accomp	olishment of
Line No. Explain below how each activity for which in				d importantly to the accomp	olishment of
Line No. Explain below how each activity for which in				d importantly to the accomp	olishment of
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Line No. Explain below how each activity for which in				d importantly to the accomp	olishment of
Line No. Explain below how each activity for which in				d importantly to the accomp	olishment of

Part XVII		egarding Trans		ind Transactions	and Relations		charitable		ge 13
	Exempt Organ								
				g with any other organizat		tion 501(c) of		Yes	No
				7, relating to political orga	anizations?			ł	
	from the reporting found:	ation to a noncharitat	ble exempt org	janization of:			10/1		X
(1) Cash (2) Other	acceta						1a(1) 1a(2)		$\frac{\Lambda}{X}$
b Other trans							18(2)		<u> </u>
	of assets to a noncharita	ble exempt organizat	non				1b(1)		X
	ases of assets from a no						16(2)		X
	I of facilities, equipment,						1b(3)		X
(4) Reimt	oursement arrangements						1b(4)		X
(5) Loans	s or loan guarantees						1b(5)		X
(6) Perfo	rmance of services or me	mbership or fundrais	sing solicitatio	ns			1b(6)		X
	facilities, equipment, ma						10		X
			_	dule. Column (b) should a		-		ets,	
	s given by the reporting to I) the value of the goods,			ed less than fair market va	liue in any transactio	n or snaring arrangem	ent, snow in		
	(b) Amount involved			exempt organization	(d) Description	on of transfers, transactions	and sharing arr	angeme	nts
(4)2.110.110	(b)/Allount involved	(0) ((0))	N/A	oxompt or gameanon	(5) Description	or or danaters, danadodorio	, and onlining and		
									
									
									
									
		 			_				
					+				
		 							
ın section	501(c) of the Code (other	r than section 501(c)	-	or more tax-exempt orga ion 527?	nizations described		Yes	X] No
b if "Yes," co	omplete the following sch (a) Name of org	edule.		(b) Type of organization	· · · · · · · · · · · · · · · · · · ·	(c) Description of rela	tionship		
	N/A			(O) Type of organization	`- 	(0) 500011511011 51 1010			
									
								_	
Sign Here	elief, it is true, correct, and co	mplete Declaration of pr		ng accompanying schedules ai n taxpayer) is based on all info	TRUST	er has any knowledge	May the IRS of return with the shown below X Yes	prepare (see inst	er
	nature of officer or trustee Print/Type preparer's n		Preparer's s	Date	Title Date	Check If F	PTIN		
	Transcrypt preparer Sil	ans	, repair 55	ignature	Date	self- employed	. 414		
Paid	GEORGE YAG	FER	GEORGE	YAGER	11/10/17		P00167	689	
Preparer Use Only	Firm's name VNT		LY LLC		<u> </u>	Firm's EIN ► 22			
200 Oiny	Firm's address ▶ 32	25 COLUMBI	A TURN	PIKE, SUITE	202	 			
		ORHAM PAR		-		Phone no. 973	-408-6	700	

Capital Gains and Losses for Tax on Investment Income (b) How acquired P - Purchase (a) List and describe the kind(s) of property sold, e.g., real estate, (c) Date acquired (d) Date sold (mo., day, yr.) 2-story brick warehouse; or common stock, 200 shs. MLC Co. (mo., day, yr.) D - Donation 1a THROUGH GOLDMAN SACHS 09/22/1609/22/16 12/31/1409/22/16 b THROUGH GOLDMAN SACHS P c 23,709 SHS -DR HORTON D 12/11/1203/28/16 2,158 SHS - LENNAR CORP 09/12/1103/28/16 D 09/12/1111/23/16 19,858 SHS - LENNAR CORP D 12/11/1203/28/16 560 SHS -NVR INC D 12/11/1203/28/16 4,892 SHS - TOLL BROTHERS $\overline{\mathbf{D}}$ h 36,390 SHS - DR HORTON 12/11/1211/23/16 D 12/11/12/11/23/16 699 SHS - NVR INC D k m n 0 (f) Depreciation allowed (g) Cost or other basis (h) Gain or (loss) (e) Gross sales price (e) plus (f) minus (g) (or allowable) plus expense of sale 13. 13. 13. 13. 267,707. 707,342. 439,635. 78,594. 22,089. 100,683 869,303. 724,379. 144,924. 506,704. 463,421. 970,125. -1,267. 142,002. 140,735 1,046,195. 674,822. 371,373. 1,111,739. 632,385. 479,354. n 0 Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 (I) Losses (from col. (h)) Gains (excess of col. (h) gain over col. (k), (j) Adjusted basis (k) Excess of col. (I) but not less than "-0-") (i) F.M.V. as of 12/31/69 as of 12/31/69 over col. (j), if any 13. 13. 267,707. 22,089. d 144,924. 463,421. -1,267. 371,373. 479,354. m n 0 { If gain, also enter in Part I, line 7 If (loss), enter "-0-" in Part I, line 7 } 1,747,627. 2 Capital gain net income or (net capital loss) 2 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). N/A If (loss), enter "-0-" in Part I, line 8

SEGAL FAMILY FOUNDATION

3 Grants and Contributions Paid During the	Tear (Continuation)			
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient	CONTRIBUTION	
WORLD JEWISH CONGRESS	NONE	PUBLIC CHARITY	OPERATIONS	
501 MADISON AVENUE				
NEW YORK, NY 10022				750,000
MADISON SQUARE PARK CONSERVATORY	NONE	PUBLIC CHARITY	ODERATIONS	
11 MADISON AVENUE	NONE	FOBILC CHARITI	DERATIONS	
NEW YORK, NY 10010				25,000
UNITED JEWISH APPEAL FEDERATION	NONE	PUBLIC CHARITY	OPERATIONS	
130 E 59TH STREET		j	ļ	}
NEW YORK, NY 10022				400,000
MEOR	NONE	PUBLIC CHARITY	OPERATIONS	1
1560 BROADWAY, STE 316 NEW YORK, NY 10036				25,000
Total, HI 10000				25,000
IR FOUNDATION/CITY OF DAVID	NONE	PUBLIC CHARITY	OPERATIONS	
575 LEXINGTON AVENUE, 4TH FL	100.2		{	1
NEW YORK, NY 10022				50,000
JDRF INTERNATIONAL	NONE	PUBLIC CHARITY	OPERATIONS	
26 BROADWAY, 14TH FLOOR		ĺ		
NEW YORK, NY 10004				100,000
JEWISH AGENCY FOR ISRAEL	NONE	PUBLIC CHARITY	OPERATIONS	
633 3RD AVE 21ST FLOOR	NO.NE		DI BIGILLOND	[
NEW YORK, NY 10017				75,000
UJA FEDERATION OF NEW YORK	NONE	PUBLIC CHARITY	OPERATIONS	1
130 E 59TH STREET NEW YORK, NY 10022				125,000
10KK, N1 10022				
	 		 	<u> </u>
		<u>L</u>	<u> </u>	1,550,000

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

Employer identification number Name of the organization 20-7395108 SEGAL FAMILY FOUNDATION Organization type (check one) Filers of: Section: ____ 501(c)(Form 990 or 990-EZ) (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization 501(c)(3) exempt private foundation Form 990-PF 4947(a)(1) nonexempt charitable trust treated as a private foundation 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 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 General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2016)

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

SEGAL FAMILY FOUNDATION

20-7395108

Part I	Contributors (See instructions). Use duplicate copies of Part I if add	ditional space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	MIKHAIL & SOFIA SEGAL 1700 BROADWAY, 35TH FL NEW YORK, NY 10019	\$657,061.	Person X Payroll X Noncash X (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	MIKHAIL & SOFIA SEGAL 1700 BROADWAY, 35TH FL NEW YORK, NY 10019	\$93,733.	Person X Payroll X Noncash X (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3	MIKHAIL & SOFIA SEGAL 1700 BROADWAY, 35TH FL NEW YORK, NY 10019	\$ 907,558.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4	MIKHAIL & SOFIA SEGAL 1700 BROADWAY, 35TH FL NEW YORK, NY 10019		Person X Payroll X Noncash X (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5	MIKHAIL & SOFIA SEGAL 1700 BROADWAY, 35TH FL NEW YORK, NY 10019	s1,044,029.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
6	MIKHAIL & SOFIA SEGAL 1700 BROADWAY, 35TH FL	\$\$	Person X Payroll X Noncash X (Complete Part II for noncash contributions.)
	NEW YORK, NY 10019		noncash contributions.)

Schedule B (Form 990, 990-EZ, or 990-PF) (2016) Page 2 Employer identification number Name of organization SEGAL FAMILY FOUNDATION 20-7395108 Part I Contributors (See instructions). Use duplicate copies of Part I if additional space is needed (a) (b) (d) Type of contribution No. **Total contributions** Name, address, and ZiP + 4 7 MIKHAIL & SOFIA SEGAL Person Payroli 1700 BROADWAY, 35TH FL 1,118,047. Noncash (Complete Part II for NEW YORK, NY 10019 noncash contributions) (d) (a) (c) **Total contributions** Type of contribution No. Name, address, and ZIP + 4 Person Payroll Noncash (Complete Part II for noncash contributions.) (c) (d) (a) (b) Total contributions Type of contribution No. Name, address, and ZIP + 4 Person Payroll Noncash (Complete Part II for noncash contributions) (c) (a) Name, address, and ZIP + 4 **Total contributions** Type of contribution No. Person Payroll Noncash (Complete Part II for noncash contributions.) (d) (c) (b) **Total contributions** Type of contribution No. Name, address, and ZIP + 4 Person Payroll Noncash (Complete Part II for noncash contributions) (d) (a) (b) (c) Type of contribution **Total contributions** No. Name, address, and ZIP + 4

Schedule B (Form 990, 990-EZ, or 990-PF) (2016)

Person **Payroll** Noncash (Complete Part II for noncash contributions.)

623452 10-18-16

Employer identification number

SEGAL FAMILY FOUNDATION

20-7395108

ert II	Noncash Property (See instructions). Use duplicate copies of Part II i	if additional space is needed	
(a) No. rom Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
1	22,198 SHARES OF DR HORTON	-	
		\$657,061.	03/28/16
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
2	2,020 SHARES OF LENNAR CORPORATION	-	
		93,733.	03/28/16
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
3	524 SHARES OF NVR INC	-	
		\$ 907,558.	03/28/16
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
4	4,580 SHARES OF TOLL BROTHERS	-	
		\$ 130,736.	03/28/16
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
5	36,390 SHARES OF DR HORTON	-	
		\$ 1,044,029.	11/21/16
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
6	19,858 SHARES OF LENNAR CORPORATION	-	
		\$ 864,121.	11/21/16 990, 990-EZ, or 990-PF) (

Employer identification number

SEGAL FAMILY FOUNDATION

20-7395108

(b) Description of noncash property given S OF NVR INC (b) Description of noncash property given (b) Description of noncash property given	(c) FMV (or estimate) (See instructions) \$ 1,118,047. (c) FMV (or estimate) (See instructions) \$ (c) FMV (or estimate) (See instructions)	(d) Date received 11/21/16 (d) Date received (d) Date received
(b) Description of noncash property given (b)	(c) FMV (or estimate) (See instructions) \$ (c) FMV (or estimate)	(d) Date received
Description of noncash property given (b)	(c) FMV (or estimate) (See instructions) \$ (c) FMV (or estimate)	(d) Date received
Description of noncash property given (b)	FMV (or estimate) (See instructions) \$	Date received
	(c) FMV (or estimate)	
	FMV (or estimate)	
	\$	
(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
	 \$	i i
(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
	\$	
(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
	Description of noncash property given	Description of noncash property given (See instructions) \$ (c) FMV (or estimate)

ame of orga	nization		Employer identification number		
EGAL 1	FAMILY FOUNDATION		20-7395108		
Part III	Exclusively religious, charitable, etc., contrib the year from any one contributor. Complete col completing Part III, enter the total of exclusively religious, of Use duplicate copies of Part III if additional	umns (a) through (e) and the follov charitable, etc., contributions of \$1,000 or	in section 501(c)(7), (8), or (10) that total more than \$1,000 for ying line entry. For granizations		
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		
a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held		
	Transferee's name, address, and	(e) Transfer of gift	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		
	Transferee's name, address, and	(e) Transfer of gif	r of gift 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	t		
}	Transferee's name, address, and	1 ZIP + 4	Relationship of transferor to transferee		

623454 10-18-16

FORM 99	0-PF	GAIN	OR	(LOSS)	FROM	SALE	OF	' AS	SSETS		STA	TEMENT	1
DESCRIP	(A) TION OF PROPERT	ΥΥ							ANNER QUIRED		ATE JIRED	DATE S	SOLD
THROUGH	GOLDMAN SACHS						P	URC	CHASED	09/2	22/16	09/22	2/16
	(B) GROSS SALES PRICE		COSI		EX	(D) PENSE SALE	OF	י	(E) DEPRE		CATN	(F)	70
	SALES PRICE			0	•	SALE	0	<u> </u>	DEPRE	0.	GAIN	OK BOX	13.
DESCRIP	(A) TION OF PROPERT	ry							ANNER QUIRED		ATE JIRED	DATE S	SOLD
THROUGH	GOLDMAN SACHS						P	PUR	CHASED	12/3	31/14	09/22	2/16
	(B) GROSS SALES PRICE			C) COR BASIS	EX	(D) PENSE SALE	OF	7	(E) DEPRE		GAIN	(F)	SS
	13	•		0	•		0	· ·		0.			13.
DESCRIF	(A) TION OF PROPER	ΓY							ANNER QUIRED		ATE JIRED	DATE S	SOLD
23,709	SHS - DR HORTO	N					-	DO	NATED	12/	11/12	03/2	8/16
	(B)		(((D)	0.	_	(E)			(F)	
	GROSS SALES PRICE			JE AT OF ACQ.		PENSE SALE		!	DEPRE	c.	GAIN	OR LO	ss
	707,342		-	702,784			().		0.		4,	558.

DESCRIP	(A) TION OF PROPERTY					ANNER QUIRED	DA ACQU	TE IRED	DATE SOL
2,158 S	HS - LENNAR CORP	_		_	DO	NATED	09/1	2/11	03/28/1
	(B) GROSS SALES PRICE	(C) VALUE AT TIME OF ACQ.	(D) EXPENSE SALE	OF	7	(E)	c.	GAIN	(F)
	100,683.	100,622.		- ().		0.		61
DESCRIP	(A) TION OF PROPERTY					ANNER QUIRED	DA ACQU	TE IRED	DATE SOL
19,858	SHS - LENNAR COR	P		_	DO	NATED	09/1	2/11	11/23/1
	(B) GROSS SALES PRICE	(C) VALUE AT TIME OF ACQ.	(D) EXPENSE SALE	OF	Ţ	(E)	c.	GAIN	(F)
	869,303.	864,121.		().		0.		5,182
DESCRIF	(A) PTION OF PROPERTY					ANNER QUIRED		TE IRED	DATE SOL
560 SHS	S - NVR INC	_		-	DO	NATED	12/1	1/12	03/28/1
	(B) GROSS SALES PRICE	(C) VALUE AT TIME OF ACQ.	(D) EXPENSE SALE	OI	ŗ	(E) DEPRE	c.	GAIN	(F) OR LOSS
	970,125.	963,271.		() ·		0.		6,854
DESCRIE	(A) PTION OF PROPERTY					ANNER QUIRED		TE VIRED	DATE SOI
4,892 5	SHS - TOLL BROTHE	RS		-	DO	NATED	12/1	1/12	03/28/1
	(B) GROSS SALES PRICE	(C) VALUE AT TIME OF ACQ.	(D) EXPENSE SALE	OI	F	(E) DEPRE	c.	GAIN	(F) OR LOSS
	140,735.	142,002.		(<u> </u>		0.		-1,267

(A) DESCRIPTION OF PROPERTY					MANNER CQUIRED	DA ACQU	TE IRED	DATE SO	DLD
36,390 SHS - DR HORTON	-			DO	ONATED	12/1	1/12	11/23/	16
(B) GROSS SALES PRICE	(C) VALUE A TIME OF A		(D) EXPENSE SALE	OF	(E) DEPRE		GAIN	(F)	5
1,046,195.	1,044,	029.		0.		0.		2,16	56.
(A) DESCRIPTION OF PROPERTY	_				MANNER CQUIRED	DA ACQU	TE IRED	DATE SO	OLD
699 SHS - NVR INC	_			D	ONATED	12/1	1/12	11/23/	/16
(B) GROSS SALES PRICE	(C) VALUE A TIME OF A		(D) EXPENSE SALE	OF	(E) DEPRE		GAIN	(F) I OR LOSS	3
1,111,739.	1,118,	047.	· 	0.		0.		-6,30	08.
CAPITAL GAINS DIVIDENDS TOTAL TO FORM 990-PF, P.								11,2	0.
FORM 990-PF INTEREST O	N SAVINGS	AND	TEMPORARY	CAS	H INVEST	MENTS	STA	ATEMENT	2
SOURCE			(A) EVENUE R BOOKS	NE	(B) I INVEST INCOME			(C) ADJUSTED ET INCOM	E
THROUGH GOLDMAN SACHS THROUGH JP MORGAN	_	-	420. 12.			420.			
TOTAL TO PART I, LINE 3	=		432.			432.			

SOURCE THROUGH GOLDMAN SACHS THROUGH GOLDMAN SACHS	GROSS AMOUNT	CAPITAL GAINS	(A) REVENUE	(B)	(C)
SACHS THROUGH GOLDMAN		DIVIDENDS		NET INVEST- MENT INCOME	ADJUSTED NET INCOM
	14,434.	(14,434.	14,434.	
THROUGH JP MORGAN THROUGH JP MORGAN	8,868. 3,989. 1,218.	(8,868. 3,989. 1,218.	3,989.	
TO PART I, LINE 4	28,509.	(28,509.	28,509.	
FORM 990-PF		ACCOUNTI	NG FEES	ទា	PATEMENT
DESCRIPTION		(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLI PURPOSES
ACCOUNTING FEES		3,700.	0.		3,700
TO FORM 990-PF, PG 1,	LN 16B	3,700.	0.		3,700
FORM 990-PF	OT	HER PROFES	SIONAL FEES	Si	TATEMENT
DESCRIPTION		(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABL PURPOSES
OTHER PROFESSIONAL FE	ES	92,435.	0.		92,435
TO FORM 990-PF, PG 1,	LN 16C	92,435.	0.		92,435

FORM 990-PF	TAX	ES		STATEMENT 6	
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME			
FOREIGN TAXES FEDERAL EXCISE TAXES	477. 3,700.	477.		0.	
TO FORM 990-PF, PG 1, LN 18	4,177.	477.	,	0.	
FORM 990-PF	OTHER E	XPENSES		STATEMENT 7	
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME			
NEW YORK ANNUAL FILING FEES	100.	50	•	50	
TO FORM 990-PF, PG 1, LN 23	100.	50		50.	
FORM 990-PF	CORPORAT	E STOCK		STATEMENT 8	
DESCRIPTION		В	OOK VALUE	FAIR MARKET VALUE	
GOLDMAN SACHS - SEE ATTACHMENT DR HORTON INC LENNAR CORP-A NVR INC TOLL BROTHERS INC	NT		421,418. 0. 0. 0. 0.	368,360. 0. 0. 0.	
TOTAL TO FORM 990-PF, PART I	I, LINE 10B		421,418.	368,360.	

FORM 990-PF

LIST OF SUBSTANTIAL CONTRIBUTORS PART VII-A, LINE 10

STATEMENT

NAME OF CONTRIBUTOR

MIKHAIL & SOFIA SEGAL

ADDRESS

1700 BROADWAY, 35TH FLOOR

NEW YORK, NY 10019

FORM 990-PF

PART XV - LINE 1A LIST OF FOUNDATION MANAGERS

STATEMENT 10

NAME OF MANAGER

MIKHAIL SEGAL SOFIA SEGAL