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EXTENDED TO NOVEMBER 15, 2017

## Return of Private Foundation

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

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OMB No 1545-0052

2016

Open to Public Inspection

Form 990-PF

Department of the Treasury  
Internal Revenue Service

For calendar year 2016 or tax year beginning

, and ending

Name of foundation

A Employer identification number

DARYL &amp; STEVEN ROTH FOUNDATION

22-3339611

Number and street (or P.O. box number if mail is not delivered to street address)

Room/suite

B Telephone number

INTERSTATE PROP 210 ROUTE 4 EAST

201-587-1000

City or town, state or province, country, and ZIP or foreign postal code

PARAMUS, NJ 07652

C If exemption application is pending, check here ☐

G Check all that apply

☐ Initial return☐ Initial return of a former public charity☐ Final return☐ Amended return☐ Address change☐ Name changeD 1. Foreign organizations, check here ☐2. Foreign organizations meeting the 85% test, check here and attach computation ☐

H Check type of organization

☒ Section 501(c)(3) exempt private foundation☐ Section 4947(a)(1) nonexempt charitable trust☐ Other taxable private foundationE If private foundation status was terminated under section 507(b)(1)(A), check here ☐

I Fair market value of all assets at end of year (from Part II, col (c), line 16)

J Accounting method

☒ Cash☐ Accrual☐ Other (specify)F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here ☐

▶ \$ 640,262. (Part I, column (d) must be on cash basis.)

## 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).)

(a) Revenue and expenses per books

(b) Net investment income

(c) Adjusted net income

(d) Disbursements for charitable purposes (cash basis only)

1 Contributions, gifts, grants, etc., received

1,505,500.

2 Check ☐ if the foundation is not required to attach Sch B

3 Interest on savings and temporary cash investments

7.

7.

STATEMENT 1

4 Dividends and interest from securities

11,497.

11,497.

STATEMENT 2

5a Gross rents

b Net rental income or (loss)

1.

6a Net gain or (loss) from sale of assets not on line 10

b Gross sales price for all assets on line 6a

1.

7 Capital gain net income (from Part IV, line 2)

1.

8 Net short-term capital gain

9 Income modifications

10a Gross sales less returns and allowances

RECEIVED

b Less Cost of goods sold

c Gross profit or (loss)

11 Other income

1,517,005.

11,505.

0.

12 Total. Add lines 1 through 11

0.

0.

0.

13 Compensation of officers, directors, trustees, etc.

14 Other employee salaries and wages

15 Pension plans, employee benefits

16a Legal fees

b Accounting fees

c Other professional fees

17 Interest

18 Taxes

STMT 3

113.

0.

0.

19 Depreciation and depletion

20 Occupancy

21 Travel, conferences, and meetings

22 Printing and publications

23 Other expenses

STMT 4

-1,983.

175.

0.

24 Total operating and administrative expenses. Add lines 13 through 23

-1,870.

175.

0.

25 Contributions, gifts, grants paid

1,415,337.

26 Total expenses and disbursements. Add lines 24 and 25

1,413,467.

175.

0.

27 Subtract line 26 from line 12

103,538.

11,330.

0.

a Excess of revenue over expenses and disbursements

b Net investment income (if negative, enter -0-)

c Adjusted net income (if negative, enter -0-)

9-23

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<b>Part II Balance Sheets</b>		Attached schedules and amounts in the description column should be for end-of-year amounts only		Beginning of year	End of year	
				(a) Book Value	(b) Book Value	(c) Fair Market Value
<b>Assets</b>	1	Cash - non-interest-bearing			-3.	-3.
	2	Savings and temporary cash investments		31,092.	134,746.	134,746.
	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				
	7	Other notes and loans receivable ▶				
		Less: allowance for doubtful accounts ▶				
	8	Inventories for sale or use				
	9	Prepaid expenses and deferred charges		8,629.	8,516.	8,516.
	10a	Investments - U.S. and state government obligations				
	b	Investments - corporate stock	STMT 5	368,575.	368,575.	457,484.
	c	Investments - corporate bonds				
<b>Liabilities</b>	11	Investments - land, buildings, and equipment basis ▶				
		Less: accumulated depreciation ▶				
	12	Investments - mortgage loans				
	13	Investments - other				
	14	Land, buildings, and equipment basis ▶				
		Less: accumulated depreciation ▶				
	15	Other assets (describe ▶ EXCHANGE )		39,519.	39,519.	39,519.
	16	Total assets (to be completed by all filers - see the instructions. Also, see page 1, item I)		447,815.	551,353.	640,262.
	17	Accounts payable and accrued expenses				
	18	Grants payable				
<b>Net Assets or Fund Balances</b>	19	Deferred revenue				
	20	Loans from officers, directors, trustees, and other disqualified persons				
	21	Mortgages and other notes payable				
	22	Other liabilities (describe ▶ )				
	23	Total liabilities (add lines 17 through 22)		0.	0.	
<b>Net Assets or Fund Balances</b>		Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31. ▶ <input type="checkbox"/>				
	24	Unrestricted				
	25	Temporarily restricted				
	26	Permanently restricted				
		Foundations that do not follow SFAS 117, check here and complete lines 27 through 31. ▶ <input checked="" type="checkbox"/>				
	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		447,815.	551,353.	
	30	Total net assets or fund balances		447,815.	551,353.	
	31	Total liabilities and net assets/fund balances		447,815.	551,353.	

**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	447,815.
2	Enter amount from Part I, line 27a	2	103,538.
3	Other increases not included in line 2 (itemize) ▶	3	0.
4	Add lines 1, 2, and 3	4	551,353.
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	551,353.

**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)
<b>1a CAPITAL GAINS DIVIDENDS</b>			
b			
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 1.			1.
b			
c			
d			
e			

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69

(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	(l) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
a			1.
b			
c			
d			
e			

2 Capital gain net income or (net capital loss)	{ If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7	2	1.
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) If (loss), enter -0- in Part I, line 8		3	N/A

**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 the 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	1,750,141.	556,062.	3.147385
2014	1,462,484.	650,095.	2.249647
2013	755,012.	551,151.	1.369882
2012	1,702,827.	470,366.	3.620217
2011	981,422.	431,920.	2.272231

2 Total of line 1, column (d)	2	12.659362
3 Average distribution ratio for the 5-year base period - divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years	3	2.531872
4 Enter the net value of noncharitable-use assets for 2016 from Part X, line 5	4	520,014.
5 Multiply line 4 by line 3	5	1,316,609.
6 Enter 1% of net investment income (1% of Part I, line 27b)	6	113.
7 Add lines 5 and 6	7	1,316,722.
8 Enter qualifying distributions from Part XII, line 4	8	1,415,337.

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)		1	113.
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			
c All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, col (b)		2	0.
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)		3	113.
3 Add lines 1 and 2		4	0.
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)		5	113.
5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-			
6 Credits/Payments			
a 2016 estimated tax payments and 2015 overpayment credited to 2016	6a	8,629.	
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	8,629.	
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		
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10	8,516.	
11 Enter the amount of line 10 to be Credited to 2017 estimated tax	11	0.	

**Part VII-A Statements Regarding Activities**

	Yes	No
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?		X
1b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the 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.		X
1c Did the foundation file Form 1120-POL for this year?		X
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: (1) On the foundation. \$ 0. (2) On foundation managers \$ 0.		
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers \$ 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.		X
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		X
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?		X
b If "Yes," has it filed a tax return on Form 990-T for this year?		
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? If "Yes," attach the statement required by General Instruction T.		X
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?	X	
7 Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV	X	
8a Enter the states to which the foundation reports or with which it is registered (see instructions) NJ		
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	X	
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		X
10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses STMT 6	X	

**Part VII-A Statements Regarding Activities** (continued)

	Yes	No
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)		X
12 Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement (see instructions)		X
13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address <b>▶ NONE</b>	X	
14 The books are in care of <b>▶ STEVEN ROTH</b> Telephone no <b>▶ 201-587-1000</b> Located at <b>▶ 210 ROUTE 4 EAST, PARAMUS, NJ</b> ZIP+4 <b>▶ 07652</b>		
15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here and enter the amount of tax-exempt interest received or accrued during the year <b>▶ 15</b>	N/A	
16 At any time during calendar year 2016, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the foreign country <b>▶</b>		X

**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) 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)? Organizations relying on a current notice regarding disaster assistance check here <b>N/A</b>	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?	1c	X
2 Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)).		
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 <b>▶</b>		
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) <b>N/A</b>	2b	
c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here <b>▶</b>		
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.) <b>N/A</b>	3b	
4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	X
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?	4b	X

**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))?

☐ Yes ☒ No

(2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive?

☐ Yes ☒ No

(3) Provide a grant to an individual for travel, study, or other similar purposes?

☐ Yes ☒ No

(4) Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? (see instructions)

☐ Yes ☒ 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?

☐ Yes ☒ 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)?

N/A

Organizations relying on a current notice regarding disaster assistance check here

☒

c If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?

N/A

☐ Yes ☐ No

If "Yes," attach the statement required by Regulations section 53.4945-5(d).

6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?

☐ Yes ☒ 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.

6b

X

7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?

☐ Yes ☒ No

b If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction?

N/A

7b

**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.

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
STEVEN ROTH 107 APAQUOGUE ROAD E. HAMPTON, NY 11937	TRUSTEE 0.00	0.	0.	0.

2 Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE."

(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE				

Total number of other employees paid over \$50,000

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	445,014.
b	Average of monthly cash balances	1b	82,919.
c	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	527,933.
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	527,933.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	7,919.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	520,014.
6	Minimum investment return. Enter 5% of line 5	6	26,001.

**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	26,001.
2a	Tax on investment income for 2016 from Part VI, line 5	2a	113.
b	Income tax for 2016 (This does not include the tax from Part VI)	2b	
c	Add lines 2a and 2b	2c	113.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	25,888.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	25,888.
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	25,888.

**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	1,415,337.
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	1,415,337.
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	113.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	1,415,224.

**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
<b>1</b> Distributable amount for 2016 from Part XI, line 7				25,888.
<b>2</b> Undistributed income, if any, as of the end of 2016			0.	
<b>a</b> Enter amount for 2015 only				
<b>b</b> Total for prior years		0.		
<b>3</b> Excess distributions carryover, if any, to 2016				
<b>a</b> From 2011	960,037.			
<b>b</b> From 2012	1,679,599.			
<b>c</b> From 2013	727,681.			
<b>d</b> From 2014	1,430,206.			
<b>e</b> From 2015	1,722,564.			
<b>f</b> Total of lines 3a through e	6,520,087.			
<b>4</b> Qualifying distributions for 2016 from Part XII, line 4 ▶ \$ 1,415,337.			0.	
<b>a</b> Applied to 2015, but not more than line 2a				
<b>b</b> Applied to undistributed income of prior years (Election required - see instructions)		0.		
<b>c</b> Treated as distributions out of corpus (Election required - see instructions)	0.			
<b>d</b> Applied to 2016 distributable amount				25,888.
<b>e</b> Remaining amount distributed out of corpus	1,389,449.			
<b>5</b> Excess distributions carryover applied to 2016 (If an amount appears in column (d), the same amount must be shown in column (a))	0.			0.
<b>6</b> Enter the net total of each column as indicated below:				
<b>a</b> Corpus Add lines 3f, 4c, and 4e Subtract line 5	7,909,536.			
<b>b</b> Prior years' undistributed income Subtract line 4b from line 2b		0.		
<b>c</b> 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.		
<b>d</b> Subtract line 6c from line 6b Taxable amount - see instructions		0.		
<b>e</b> Undistributed income for 2015 Subtract line 4a from line 2a Taxable amount - see instr			0.	
<b>f</b> Undistributed income for 2016 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2017				0.
<b>7</b> 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.			
<b>8</b> Excess distributions carryover from 2011 not applied on line 5 or line 7	960,037.			
<b>9</b> Excess distributions carryover to 2017. Subtract lines 7 and 8 from line 6a	6,949,499.			
<b>10</b> Analysis of line 9				
<b>a</b> Excess from 2012	1,679,599.			
<b>b</b> Excess from 2013	727,681.			
<b>c</b> Excess from 2014	1,430,206.			
<b>d</b> Excess from 2015	1,722,564.			
<b>e</b> Excess from 2016	1,389,449.			



**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
<b>a Paid during the year</b>				
SEE SCHEDULE ATTACHED - MORGAN STANLEY VARIOUS ADDRESSES FOR VARIOUS CHARITIES PARAMUS, NJ 07652	NONE	PUBLIC CHARITIES	RECOGNIZED CHARITIES	1,415,337.
<b>Total</b>			<b>3a</b>	1,415,337.
<b>b Approved for future payment</b>				
NONE				
<b>Total</b>			<b>3b</b>	0.

**Part XVI-A**      **Analysis of Income-Producing Activities**

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	
		(a) Business code	(b) Amount	(c) Exclu- sion code	(d) Amount		
<b>1</b> Program service revenue							
a _____							
b _____							
c _____							
d _____							
e _____							
f _____							
g Fees and contracts from government agencies							
<b>2</b> Membership dues and assessments							
<b>3</b> Interest on savings and temporary cash investments				14	7.		
<b>4</b> Dividends and interest from securities				14	11,497.		
<b>5</b> Net rental income or (loss) from real estate.							
a Debt-financed property							
b Not debt-financed property							
<b>6</b> Net rental income or (loss) from personal property							
<b>7</b> Other investment income							
<b>8</b> Gain or (loss) from sales of assets other than inventory				14	1.		
<b>9</b> Net income or (loss) from special events							
<b>10</b> Gross profit or (loss) from sales of inventory							
<b>11</b> Other revenue							
a _____							
b _____							
c _____							
d _____							
e _____							
<b>12</b> Subtotal. Add columns (b), (d), and (e)			0.		11,505.	0.	
<b>13</b> Total. Add line 12, columns (b), (d), and (e)						11,505.	

(See worksheet in line 13 instructions to verify calculations )

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

[illegible]



**Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations**

- | 1 Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations? |  | Yes   | No |
|---|--|-------|----|
| <b>a</b>  | Transfers from the reporting foundation to a noncharitable exempt organization of  |       |    |
|   | (1) Cash   | 1a(1) | X  |
|   | (2) Other assets   | 1a(2) | X  |
| <b>b</b>  | Other transactions   |       |    |
|   | (1) Sales of assets to a noncharitable exempt organization   | 1b(1) | X  |
|   | (2) Purchases of assets from a noncharitable exempt organization   | 1b(2) | X  |
|   | (3) Rental of facilities, equipment, or other assets   | 1b(3) | X  |
|   | (4) Reimbursement arrangements   | 1b(4) | X  |
|   | (5) Loans or loan guarantees   | 1b(5) | X  |
|   | (6) Performance of services or membership or fundraising solicitations   | 1b(6) | X  |
| <b>c</b>  | Sharing of facilities, equipment, mailing lists, other assets, or paid employees   | 1c    | X  |
| <b>d</b>  | 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 |
| N/A   |                          |                                 |
|   |                          |                                 |
|   |                          |                                 |
|   |                          |                                 |
|   |                          |                                 |

<b>Sign Here</b>	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.		May the IRS discuss this return with the preparer shown below (see instr.)? <input checked="checked" type="checkbox"/> Yes <input type="checkbox"/> No
	 Signature of officer or trustee	Date	 Title

<b>Paid Preparer Use Only</b>	Print/Type preparer's name	Preparer's signature	Date	Check <input type="checkbox"/> if self-employed	PTIN
	ALBERT E. TAYLOR	<i>Albert E. Taylor</i>	05/02/17		P00098088
	Firm's name ▶ HUNRATH, NAPOLITANO, QUIGLEY & TAYLOR, LLC				Firm's EIN ▶ 27-2601619
	Firm's address ▶ 152 CENTRAL AVENUE - 2ND FLOOR CLARK, NJ 07066-1115			Phone no. (732) 499-0707	

**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](http://www.irs.gov/form990)

OMB No 1545-0047

**2016**

Name of the organization

Employer identification number

DARYL & STEVEN ROTH FOUNDATION

22-3339611

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

- ☐ 501(c)( ) (enter number) organization
- ☐ 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation
- ☐ 527 political organization

Form 990-PF

- ☒ 501(c)(3) exempt private foundation
- ☐ 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 ... ▶ \$ \_\_\_\_\_

**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).

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)

Name of organization

Employer identification number

**DARYL & STEVEN ROTH FOUNDATION****22-3339611****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	STEVEN ROTH 107 APAQUOGUE ROAD E. HAMPTON, NY 11937	\$ 1,505,500.	Person <input checked="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.)





Name of organization

Employer identification number

**DARYL & STEVEN ROTH FOUNDATION****22-3339611****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 info once.) ► \$

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

## FORM 990-PF INTEREST ON SAVINGS AND TEMPORARY CASH INVESTMENTS STATEMENT 1

SOURCE	(A) REVENUE PER BOOKS	(B) NET INVESTMENT INCOME	(C) ADJUSTED NET INCOME
MORGAN STANLEY	7.	7.	7.
TOTAL TO PART I, LINE 3	7.	7.	7.

## FORM 990-PF DIVIDENDS AND INTEREST FROM SECURITIES STATEMENT 2

SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDENDS	(A) REVENUE PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME
MORGAN STANLEY	11,498.	1.	11,497.	11,497.	11,497.
TO PART I, LINE 4	11,498.	1.	11,497.	11,497.	11,497.

## FORM 990-PF TAXES STATEMENT 3

DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
FEDERAL INCOME TAXES	113.	0.	0.	0.
TO FORM 990-PF, PG 1, LN 18	113.	0.	0.	0.

## FORM 990-PF OTHER EXPENSES STATEMENT 4

DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
INVESTMENT FEES	175.	175.	0.	0.
RETURNED FEES	-2,158.	0.	0.	0.
TO FORM 990-PF, PG 1, LN 23	-1,983.	175.	0.	0.

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FORM 990-PF	CORPORATE STOCK	STATEMENT	5
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DESCRIPTION	BOOK VALUE	FAIR MARKET VALUE
CORPORATE STOCK	368,575.	457,484.
TOTAL TO FORM 990-PF, PART II, LINE 10B	368,575.	457,484.

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FORM 990-PF	LIST OF SUBSTANTIAL CONTRIBUTORS PART VII-A, LINE 10	STATEMENT	6
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NAME OF CONTRIBUTOR	ADDRESS
DARYL AND STEVEN ROTH	PO BOX 669 EAST HAMPTON, NY 11937

**CHECKS WRITTEN**  
**CHECKS WITH NO CODE**

Date Written	Activity Date	Check Number	Activity Type	Payee	Expense Category	Credits/(Debits)
12/31/15	1/20/16	1454	Check	ANTI DEFAMATION LEAGUE		\$(10,000.00)
1/6/16	1/22/16	1455	Check	HORACE MANN SCH		(100,000.00)
1/29/16	2/11/16	1456	Check	THE DONALD J TRUMP FDN INC		(50,000.00)
2/5/16	2/16/16	1457	Check	MOUNT SINAI MEDICAL CENTER		(10,000.00)
2/19/16	3/1/16	1459	Check	GREENWICH LIBRARY		(1,000.00)
2/24/16	2/26/16	1460	Check	CHABAD CENTER FOR JEWISH DISCO		(5,000.00)
3/2/16	3/24/16	1461	Check	SISKIND FAMILY SARCOMA FUND		(1,000.00)
3/2/16	3/22/16	1462	Check	BREAST CANCER RESEARCH FDN		(2,500.00)
3/10/16	3/17/16	1463	Check	UJA FEDERATION		(100,000.00)
3/29/16	4/4/16	1464	Check	THE HASTY PUDDING INST OF 1770		(100,000.00)
4/20/16	5/4/16	1465	Check	CUNY GRADUATE SCHOOL OF JOURNA		(5,000.00)
4/20/16	4/26/16	1466	Check	MGA FOUNDATION		(1,000.00)
4/25/16	5/10/16	1467	Check	HARLEM VILLAGE ACADEMIES		(5,000.00)
4/26/16	5/6/16	1468	Check	SPONSORSHIP FOR EDUCATIONAL OP		(5,000.00)
4/26/16	5/11/16	1469	Check	NATL YIDDISH THEATRE FOLKSBIEN		(50,000.00)
5/2/16	5/13/16	1470	Check	DH-H/FNCCG		(500.00)
5/18/16	6/2/16	1471	Check	ROUNDABOUT THEATRE CO		(10,000.00)
5/19/16	5/26/16	1472	Check	BOSTON PHILHARMONIC		(100,000.00)
6/1/16	6/8/16	1473	Check	AJC		(2,500.00)
6/1/16	6/13/16	1474	Check	DAUGHTERS OF MIRIAM		(1,500.00)
6/1/16	7/25/16	1475	Check	THE JEWISH CTR OF THE HAMPTONS		(2,437.00)
6/1/16	6/9/16	1476	Check	FRIENDS OF DARTMOUTH FOOTBALL		(2,500.00)
6/30/16	7/6/16	1477	Check	TUCK ANNUAL GIVING		(100,000.00)
7/13/16	7/19/16	1478	Check	BIG APPLE CIRCUS		(50,000.00)
8/1/16	8/15/16	1479	Check	PAN MASS CHALLENGE		(1,000.00)
8/18/16	8/24/16	1480	Check	THURGOOD MARSHALL COLLEGE FUND		(1,000.00)

# Morgan Stanley

Page 14 of 16

## CLIENT STATEMENT

Fiscal Review Ending 12/31/16

Active Assets Account  
618-122404-110

THE DARYL & STEVEN ROTH FOUNDATION  
ATTENTION: STEVEN ROTH

### CHECKS WRITTEN (CONTINUED)

#### CHECKS WITH NO CODE (CONTINUED)

Date Written	Activity Date	Check Number	Activity Type	Payee	Expense Category	Credits/(Debits)
8/18/16	8/26/16	1481	Check	THE UCLA FNDN		(2,500.00)
8/18/16	8/23/16	1482	Check	PROSTATE CANCER FDN		(50,000.00)
9/7/16	9/16/16	1483	Check	PARTNERSHIP FOR PUBLIC SERVICE		(10,000.00)
9/7/16	9/13/16	1484	Check	PECONIC LAND TRUST		(2,500.00)
9/7/16	9/26/16	1485	Check	BRONX COMM COLLEGE FDN		(25,000.00)
9/23/16	10/5/16	1486	Check	THE ROCKEFELLER UNIV		(1,000.00)
9/23/16	10/11/16	1487	Check	HUTCHINS CTR		(10,000.00)
10/3/16	10/12/16	1488	Check	AIC		(10,000.00)
10/3/16	10/11/16	1489	Check	INTL RESCUE COMM		(2,000.00)
10/3/16	11/1/16	1490	Check	HIGHER ACHIEVEMENT		(10,000.00)
10/3/16	10/17/16	1491	Check	LIVINGSTON SYMPHONY ORCHESTRA		(1,000.00)
10/5/16	10/14/16	1492	Check	FOOD ALLERGY RESEARCH AND ED		(25,000.00)
10/25/16	10/31/16	1493	Check	NY HISTORICAL SOCIETY MUSEUM O		(10,000.00)
10/25/16	11/2/16	1494	Check	LINCOLN CENTER FOR THE PERFORM		(25,000.00)
10/24/16	11/21/16	1495	Check	METROPOLITAN YMCA OF THE ORANG		(5,000.00)
11/8/16	12/7/16	1496	Check	HORACE MANN SCHOOL		(100,000.00)
11/16/16	11/22/16	1497	Check	THE JEWISH CTR OF THE HAMPTONS		(50,000.00)
11/16/16	11/29/16	1498	Check	CHILD MIND INSTITUTE		(25,000.00)
11/18/16	12/1/16	1499	Check	CENTRAL PARK CONSERVANCY		(25,000.00)
11/18/16	12/6/16	1500	Check	DUBIN BREAST CTR		(50,000.00)
11/23/16	12/7/16	1501	Check	HORACE MANN SCHOOL		(10,000.00)
12/21/16	12/29/16	1502	Check	THE ANTI DEFAMATION LEAGUE		(4,000.00)
4/12/16	4/20/16	5051	Check	CANCER RESEARCH INSTITUTE		(2,500.00)
4/19/16	4/29/16	5052	Check	THE GOOD DOG FDN INC		(2,500.00)
5/10/16	5/18/16	5053	Check	SOUTH FORK NATURAL HISTORY MUS		(2,500.00)
5/10/16	5/17/16	5054	Check	NY CITY CENTER		(25,000.00)
5/10/16	5/23/16	5055	Check	MOSAIC THEATRE CO OF DC		(2,500.00)
5/24/16	6/6/16	5056	Check	NY FDN FOR THE ARTS		(25,000.00)
5/31/16	6/20/16	5058	Check	THE CITY COLLEGE OF NEW YORK		(1,000.00)
6/28/16	7/18/16	5059	Check	BROADWAY BARKS		(10,000.00)
7/5/16	7/19/16	5060	Check	LARK PLAY DEV CTR		(1,000.00)
7/5/16	7/11/16	5061	Check	PRIMARY STAGES		(1,000.00)
7/5/16	7/11/16	5062	Check	ATLANTIC THEATRE CO		(1,000.00)
7/21/16	7/29/16	5063	Check	ROUNDABOUT THEATRE CO		(15,000.00)
8/9/16	8/15/16	5065	Check	GOD'S LOVE WE DELIVER		(5,000.00)
8/11/16	8/17/16	5066	Check	AMER COM FOR WEIZMANN INST OF		(5,000.00)
8/23/16	8/29/16	5067	Check	SIGNATURE THEATER COMPANY		(1,000.00)
8/30/16	9/27/16	5068	Check	YOUNG WOMEN'S LEADERSHIP NETWO		(2,500.00)
8/30/16	9/8/16	5069	Check	THEATRE OF NEW AUDIENCE		(2,500.00)
9/16/16	9/12/16	5070	Check	ANIMAL MEDICAL CENTER		(1,000.00)

Security Mark  
at Right



# Morgan Stanley

## CLIENT STATEMENT

Fiscal Review Ending 12/31/16

Active Assets Account  
618-122404-110

THE DARYL & STEVEN ROTH FOUNDATION  
ATTENTION: STEVEN ROTH

### CHECKS WRITTEN (CONTINUED)

#### CHECKS WITH NO CODE (CONTINUED)

Date Written	Activity Date	Check Number	Activity Type	Payee	Expense Category	Credits/(Debits)
9/20/16	9/30/16	5072	Check	LINCOLN CENTER-THEATER		(17,500.00)
9/26/16	10/3/16	5075	Check	NEW YORK CITY CENTER		(10,000.00)
10/4/16	10/18/16	5076	Check	NEW YORK STAGE AND FILM		(5,000.00)
10/25/16	11/2/16	5077	Check	CITYMEALS ON WHEELS		(1,200.00)
11/15/16	12/2/16	5079	Check	THE DRAMA LEAGUE		(5,000.00)
11/21/16	12/12/16	5080	Check	AMER THEATRE WING		(2,500.00)
12/6/16	12/14/16	5081	Check	JEWISH ASSN SERVING THE AGING		(1,000.00)
12/6/16	12/16/16	5082	Check	CENTRAL PARK CONSERVANCY		(2,500.00)
12/13/16	12/23/16	5083	Check	DAUGHTERS OF MIRIAM		(2,500.00)
2/9/16	2/25/16	5117	Check	ART NEW YORK		(5,000.00)
2/16/16	2/23/16	5118	Check	ALBERT EINSTEIN COLLEGE OF MED		(1,200.00)
2/23/16	3/4/16	5119	Check	PROJECT KESHER		(1,000.00)
2/25/16	3/1/16	5122	Check	EDUCATIONAL ALLIANCE		(1,000.00)
2/25/16	3/14/16	5123	Check	LIVE OUT LOUD		(10,000.00)
2/25/16	3/2/16	5124	Check	FAMILY EQUITY COUNCIL		(25,000.00)
3/8/16	3/21/16	5125	Check	THEATRE DEVELOPMENT FUND		(3,000.00)
3/8/16	3/16/16	5126	Check	SIGNATURE THEATER COMPANY		(5,000.00)
3/10/16	4/1/16	5127	Check	NORTHSIDE CENTER FOR CHILD DEV		(1,000.00)
3/22/16	4/5/16	5128	Check	NEW DRAMATISTS		(6,000.00)
3/31/16	4/7/16	5129	Check	FOOD ALLERGY RESEARCH & ED		(1,000.00)
3/31/16	5/5/16	5130	Check	WIN		(2,500.00)
4/5/16	4/15/16	5131	Check	GIFT OF LIFE BONE MARROW FOUND		(5,000.00)
4/12/16	6/17/16	5132	Check	THE TREVOR PROJECT		(15,000.00)
2/2/16	2/10/16	5133	Check	SECOND STAGE THEATER		(3,500.00)
2/2/16	2/12/16	5134	Check	WILLIAMSTOWN THEATRE		(1,000.00)
2/9/16	3/11/16	5135	Check	THE JEWISH MUSEUM		(2,500.00)
2/9/16	2/23/16	5136	Check	CROHNS & COLITIS FOUNDATION OF		(1,000.00)

TOTAL CHECKS WITH NO CODE

\$(1,415,337.00)

### TOTAL CHECKS WRITTEN

\$(1,415,337.00)

### TOTAL DEBIT CARD/CHECK ACTIVITY

\$(1,415,337.00)