

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

Name of foundation THE SHAPIRO FAMILY FOUNDATION		A Employer identification number 22-6767630	
Number and street (or P O box number if mail is not delivered to street address) 252 HIGHWOOD AVENUE		Room/suite	B Telephone number (see instructions) (201) 568-0787
City or town, state or province, country, and ZIP or foreign postal code TENAFLY, NJ 07670		C If exemption application is pending, check here ☐	
G Check all that apply ☐ Initial return ☐ Final return ☐ Address change ☐ Initial return of a former public charity ☐ Amended return ☐ Name change		D 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 foundation		E 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) \$ 3,561,820	J Accounting method ☒ Cash ☐ Accrual ☐ Other (specify) _____ (Part I, column (d) must be on cash basis)	F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here ☐	

Part I Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions))		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
Revenue	1 Contributions, gifts, grants, etc , received (attach schedule)	2,037,126			
	2 Check ☐ if the foundation is not required to attach Sch B				
	3 Interest on savings and temporary cash investments				
	4 Dividends and interest from securities	53,477	53,477		
	5a Gross rents				
	b Net rental income or (loss) _____				
	6a Net gain or (loss) from sale of assets not on line 10	14,492			
	b Gross sales price for all assets on line 6a 2,446,184				
	7 Capital gain net income (from Part IV, line 2)		14,492		
	8 Net short-term capital gain				
	9 Income modifications				
	10a Gross sales less returns and allowances _____				
Operating and Administrative Expenses	b Less Cost of goods sold				
	c Gross profit or (loss) (attach schedule)				
	11 Other income (attach schedule)				
	12 Total. Add lines 1 through 11	2,105,095	67,969		
	13 Compensation of officers, directors, trustees, etc	0	0		0
	14 Other employee salaries and wages				
	15 Pension plans, employee benefits				
	16a Legal fees (attach schedule)				
	b Accounting fees (attach schedule)	4,000	2,000		0
	c Other professional fees (attach schedule)				
	17 Interest				
	18 Taxes (attach schedule) (see instructions)	3,371	3,371		0
	19 Depreciation (attach schedule) and depletion				
	20 Occupancy				
	21 Travel, conferences, and meetings				
	22 Printing and publications				
	23 Other expenses (attach schedule)	21,081	21,081		0
	24 Total operating and administrative expenses. Add lines 13 through 23	28,452	26,452		0
	25 Contributions, gifts, grants paid	552,697			552,697
	26 Total expenses and disbursements. Add lines 24 and 25	581,149	26,452		552,697
	27 Subtract line 26 from line 12				
	a Excess of revenue over expenses and disbursements	1,523,946			
	b Net investment income (if negative, enter -0-)		41,517		
c Adjusted net income (if negative, enter -0-)					

Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)			
		Beginning of year (a) Book Value	End of year (b) Book Value (c) Fair Market Value		
Assets	1	Cash—non-interest-bearing			
	2	Savings and temporary cash investments	81,896	94,050	94,050
	3	Accounts receivable ▶ _____ Less allowance for doubtful accounts ▶ _____			
	4	Pledges receivable ▶ _____ Less allowance for doubtful accounts ▶ _____			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions)			
	7	Other notes and loans receivable (attach schedule) ▶ _____ Less allowance for doubtful accounts ▶ _____			
	8	Inventories for sale or use			
	9	Prepaid expenses and deferred charges			
	10a	Investments—U S and state government obligations (attach schedule)			
	b	Investments—corporate stock (attach schedule)			
	c	Investments—corporate bonds (attach schedule)			
	11	Investments—land, buildings, and equipment basis ▶ _____ Less accumulated depreciation (attach schedule) ▶ _____			
	12	Investments—mortgage loans			
	13	Investments—other (attach schedule)	1,975,115	3,486,646	3,467,770
	14	Land, buildings, and equipment basis ▶ _____ Less accumulated depreciation (attach schedule) ▶ _____			
15	Other assets (describe ▶ _____)	0	261	0	
16	Total assets (to be completed by all filers—see the instructions Also, see page 1, item I)	2,057,011	3,580,957	3,561,820	
Liabilities	17	Accounts payable and accrued expenses			
	18	Grants payable			
	19	Deferred revenue			
	20	Loans from officers, directors, trustees, and other disqualified persons			
	21	Mortgages and other notes payable (attach schedule)			
	22	Other liabilities (describe ▶ _____)			
	23	Total liabilities (add lines 17 through 22)	0	0	
Net Assets or Fund Balances	Foundations that follow SFAS 117, check here ☐ and complete lines 24 through 26 and lines 30 and 31.				
	24	Unrestricted			
	25	Temporarily restricted			
	26	Permanently restricted			
	Foundations that do not follow SFAS 117, check here ☒ and complete lines 27 through 31.				
	27	Capital stock, trust principal, or current funds	2,057,011	3,580,957	
	28	Paid-in or capital surplus, or land, bldg , and equipment fund	0	0	
	29	Retained earnings, accumulated income, endowment, or other funds	0	0	
30	Total net assets or fund balances (see instructions)	2,057,011	3,580,957		
31	Total liabilities and net assets/fund balances (see instructions) .	2,057,011	3,580,957		

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	2,057,011
2	Enter amount from Part I, line 27a	2	1,523,946
3	Other increases not included in line 2 (itemize) ▶ _____	3	0
4	Add lines 1, 2, and 3	4	3,580,957
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	3,580,957

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)
1a See Additional Data Table			
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 See Additional Data Table			
b			
c			
d			
e			

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	
a See Additional Data Table			
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	14,492
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6) If gain, also enter in Part I, line 8, column (c) (see instructions) If (loss), enter -0- in Part I, line 8		3	

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

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

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

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



Yes



No

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

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

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col (b) divided by col (c))
2015			
2014			
2013			
2012			
2011			

2 Total of line 1, column (d)	2	
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	
4 Enter the net value of noncharitable-use assets for 2016 from Part X, line 5	4	
5 Multiply line 4 by line 3	5	
6 Enter 1% of net investment income (1% of Part I, line 27b)	6	
7 Add lines 5 and 6	7	
8 Enter qualifying distributions from Part XII, line 4	8	

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 ☐ and enter "N/A" on line 1 Date of ruling or determination letter _____ (attach copy of letter if necessary—see instructions)		
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here ☐ and enter 1% of Part I, line 27b	1	830
c	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col (b)		
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2	0
3	Add lines 1 and 2.	3	830
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4	0
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5	830
6	Credits/Payments		
a	2016 estimated tax payments and 2015 overpayment credited to 2016	6a	1,069
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	1,069
8	Enter any penalty for underpayment of estimated tax. Check here ☐ 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	239
11	Enter the amount of line 10 to be Credited to 2017 estimated tax ▶ 239 Refunded ▶	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?	1a	No
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for definition)? If the answer is "Yes" to 1a or 1b , attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities	1b	No
c Did the foundation file Form 1120-POL for this year?	1c	No
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year (1) On the foundation ▶ \$ 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	2	No
3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3	No
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a	No
b If "Yes," has it filed a tax return on Form 990-T for this year?	4b	
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? If "Yes," attach the statement required by General Instruction T	5	No
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?	6	No
7 Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV	7	Yes
8a Enter the states to which the foundation reports or with which it is registered (see instructions) ▶ 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 .	8b	Yes
9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2016 or the taxable year beginning in 2016 (see instructions for Part XIV)? If "Yes," complete Part XIV	9	No
10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses	10	No

Part VII-A Statements Regarding Activities (continued)

11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions).	11		No
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement (see instructions).	12		No
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address N/A	13	Yes	
14	The books are in care of DIANE SHAMAS FOUNDATION MANAGER Telephone no (201) 568-0787			

Located at **252 HIGHWOOD AVENUE TENAFLY NJ** ZIP+4 **07670**

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 15		
16	At any time during calendar year 2016, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? See instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). If "Yes," enter the name of the foreign country ▶	16	Yes No

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

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

1a	During the year did the foundation (either directly or indirectly)		Yes	No
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? ☐ Yes ☒ No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? ☐ Yes ☒ No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? ☐ Yes ☒ No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? ☐ Yes ☒ 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)? ☐ Yes ☒ 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). ☐ Yes ☒ 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)? ☐ 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			No
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5))			
a	At the end of tax year 2016, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2016? ☐ Yes ☒ No If "Yes," list the years ▶ 20____, 20____, 20____, 20____			
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement—see instructions). ☐ 2b			
c	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here ▶ 20____, 20____, 20____, 20____			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? ☐ Yes ☒ 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). ☐ Yes ☒ No 3b			
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? 4a			No
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2016? 4b			No

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

5a During the year did the foundation pay or incur any amount to (1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))? ☐ 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)? ☐ Yes ☒ No 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? ☐ Yes ☐ No If "Yes," attach the statement required by Regulations section 53.4945–5(d)	5b		
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? ☐ Yes ☒ No If "Yes" to 6b, file Form 8870	6b		No
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? ☐ Yes ☒ No	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 (see instructions).				
(a) Name and address	Title, and average hours per week (b) devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	Expense account, (e) other allowances
SHIRLEY SHAPIRO 252 HIGHWOOD AVENUE TENAFLY, NJ 07670	TRUSTEE 1 00	0	0	0
DIANE SHAMAS 257 KIM HUBBARD ROAD PUTNEY, VT 05346	FOUNDATION MANAGER 2 00	0	0	0
2 Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, enter "NONE."				
(a) Name and address of each employee paid more than \$50,000	Title, and average hours per week (b) devoted to position	(c) Compensation	Contributions to employee benefit plans and deferred compensation (d)	Expense account, (e) other allowances
NONE				
Total number of other employees paid over \$50,000. ▶				0

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

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

Part IX-A Summary of Direct Charitable Activities

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

	Expenses
1	
2	
3	
4	

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

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

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

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes		
a	Average monthly fair market value of securities.	1a	79,106
b	Average of monthly cash balances.	1b	3,819
c	Fair market value of all other assets (see instructions).	1c	0
d	Total (add lines 1a, b, and c).	1d	82,925
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	82,925
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions).	4	1,244
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4.	5	81,681
6	Minimum investment return. Enter 5% of line 5.	6	4,084

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	4,084
2a	Tax on investment income for 2016 from Part VI, line 5.	2a	830
b	Income tax for 2016 (This does not include the tax from Part VI).	2b	
c	Add lines 2a and 2b.	2c	830
3	Distributable amount before adjustments. Subtract line 2c from line 1.	3	3,254
4	Recoveries of amounts treated as qualifying distributions.	4	0
5	Add lines 3 and 4.	5	3,254
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	3,254

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	552,697
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	552,697
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b (see instructions).	5	0
6	Adjusted qualifying distributions. Subtract line 5 from line 4.	6	552,697

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

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2015	(c) 2015	(d) 2016
1 Distributable amount for 2016 from Part XI, line 7				3,254
2 Undistributed income, if any, as of the end of 2016				
a Enter amount for 2015 only.			0	
b Total for prior years 20____, 20____, 20____		0		
3 Excess distributions carryover, if any, to 2016				
a From 2011.	264,039			
b From 2012.	267,591			
c From 2013.	296,756			
d From 2014.	506,461			
e From 2015.	503,678			
f Total of lines 3a through e.	1,838,525			
4 Qualifying distributions for 2016 from Part XII, line 4 ▶ \$ 552,697				
a Applied to 2015, but not more than line 2a			0	
b Applied to undistributed income of prior years (Election required—see instructions).		0		
c Treated as distributions out of corpus (Election required—see instructions).	0			
d Applied to 2016 distributable amount.				3,254
e Remaining amount distributed out of corpus	549,443			
5 Excess distributions carryover applied to 2016 (If an amount appears in column (d), the same amount must be shown in column (a))	0			0
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	2,387,968			
b Prior years' undistributed income Subtract line 4b from line 2b		0		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed.		0		
d Subtract line 6c from line 6b Taxable amount—see instructions		0		
e Undistributed income for 2015 Subtract line 4a from line 2a Taxable amount—see instructions			0	
f Undistributed income for 2016 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2017				0
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions).	0			
8 Excess distributions carryover from 2011 not applied on line 5 or line 7 (see instructions).	264,039			
9 Excess distributions carryover to 2017. Subtract lines 7 and 8 from line 6a	2,123,929			
10 Analysis of line 9				
a Excess from 2012.	267,591			
b Excess from 2013.	296,756			
c Excess from 2014.	506,461			
d Excess from 2015.	503,678			
e Excess from 2016.	549,443			

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

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

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

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

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

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

a "Assets" alternative test—enter

(1) Value of all assets

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

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

c "Support" alternative test—enter

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

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

(3) Largest amount of support from an exempt organization

(4) Gross investment income

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

1 Information Regarding Foundation Managers:

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

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

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

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

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

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

c Any submission deadlines

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

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i> See Additional Data Table				
Total			3a	552,697
b <i>Approved for future payment</i>				
Total			3b	0

Enter gross amounts unless otherwise indicated

Enter gross amounts unless otherwise indicated		Unrelated business income		Excluded by section 512, 513, or 514		(e) Related or exempt function income (See instructions)
		(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	
1	Program service revenue					
a	_____					
b	_____					
c	_____					
d	_____					
e	_____					
f	_____					
g	Fees and contracts from government agencies					
2	Membership dues and assessments. . . .					
3	Interest on savings and temporary cash investments					
4	Dividends and interest from securities. . . .					53,477
5	Net rental income or (loss) from real estate					
a	Debt-financed property.					
b	Not debt-financed property.					
6	Net rental income or (loss) from personal property					
7	Other investment income.					
8	Gain or (loss) from sales of assets other than inventory					14,492
9	Net income or (loss) from special events					
10	Gross profit or (loss) from sales of inventory					
11	Other revenue a _____					
b	_____					
c	_____					
d	_____					
e	_____					
12	Subtotal Add columns (b), (d), and (e). .		0		0	67,969
13	Total. Add line 12, columns (b), (d), and (e).			13		67,969

(See worksheet in line 13 instructions to verify calculations)

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

[illegible]

Part XVII

- | | Yes | No |
|-------|-----|----|
| 1a(1) | | No |
| 1a(2) | | No |
| 1b(1) | | No |
| 1b(2) | | No |
| 1b(3) | | No |
| 1b(4) | | No |
| 1b(5) | | No |
| 1b(6) | | No |
| 1c | | No |

[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

Print/Type preparer's name CATHERINE J O'BRIEN	Preparer's Signature	Date	Check if self-employed ☐	PTIN P00387420
Firm's name ► BARISH & O'BRIEN				Firm's EIN ► 13-3341682
Firm's address ► 572 NORTH BROADWAY WHITE PLAINS, NY 10603				Phone no (914) 428-8600

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d			
List and describe the kind(s) of property sold (e g , real estate, (a) 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)
611 SHS DEUTSCHE X-TRACKERS MSCI EAF		2015-04-17	2016-03-18
1098 SHS ISHARES CORE MSCI EMERGING		2016-01-01	2016-01-02
11 SHS ISHARES IBOXX \$ H/Y COR BD ETF		2015-02-25	2016-01-22
4940 SHS ISHARES MSCI JAPAN ETF		2016-01-01	2016-01-02
455 SHS ISHARES RUSSELL MIDCAP V ETF		2016-01-22	2016-12-22
459 SHS ISHARES RUSSELL 1000 VALUE ETF		2016-01-22	2016-12-12
99 SHS ISHARES TIPS BOND ETF		2016-01-01	2016-01-02
260 SHS PIMCO ENHANCED SHRT MTRT EXC		2016-01-01	2016-01-02
163 SHS VANGUARD TOTAL BOND MARKET		2015-10-14	2016-09-14
741 SHS VANGUARD TOTAL INTL BOND ETF		2016-01-01	2016-01-02

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h

(e) Gross sales price	Depreciation allowed (f) (or allowable)	Cost or other basis (g) plus expense of sale	Gain or (loss) (h) (e) plus (f) minus (g)
15,716		18,663	-2,947
42,515		55,656	-13,141
862		1,010	-148
58,353		54,989	3,364
37,345		37,578	-233
52,149		52,211	-62
11,042		11,410	-368
26,319		26,221	98
13,616		13,405	211
40,160		39,305	855

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - l

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(I) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
(i) F M V as of 12/31/69	Adjusted basis (j) as of 12/31/69	Excess of col (i) (k) over col (j), if any	
			-2,947
			-13,141
			-148
			3,364
			-233
			-62
			-368
			98
			211
			855

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d			
List and describe the kind(s) of property sold (e g , real estate, (a) 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)
334 SHS WISDOMTREE JAPN HEDGE EQ		2016-01-01	2016-01-02
2762 SHS DEUTSCHE X-TRACKERS MSCI EAF		2014-01-01	2016-01-02
1456 SHS ISHARES CORE MSCI EAFE ETF		2014-01-01	2016-01-02
741 SHS ISHARES CORE MSCI EMERGING		2014-01-01	2016-01-02
529 SHS ISHARES RUSSELL MIDCAP G ETF		2014-01-01	2016-01-02
1492 SHS ISHARES RUSSELL MIDCAP V ETF		2014-01-01	2016-01-02
5603 SHS ISHARES RUSSELL 1000 GRW ETF		2014-01-01	2016-01-02
6409 SHS ISHARES RUSSELL 10000 VALUE ETF		2014-01-01	2016-01-02
751 SHS ISHARES RUSSELL 2000 GRWTH ETF		2014-01-01	2016-01-02
344 SHS ISHARES RUSSELL 2000 VALUE ETF		2014-01-01	2016-01-02

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h

(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)
15,815		13,877	1,938
72,873		83,305	-10,432
78,132		86,337	-8,205
31,885		35,572	-3,687
45,838		48,911	-3,073
115,967		112,108	3,859
589,041		576,318	12,723
707,857		674,476	33,381
115,001		116,605	-1,604
36,446		33,204	3,242

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - l

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	
			1,938
			-10,432
			-8,205
			-3,687
			-3,073
			3,859
			12,723
			33,381
			-1,604
			3,242

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d			
List and describe the kind(s) of property sold (e g , real estate, (a) 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)
101 SHS ISHARES TIPS BOND ETF		2014-01-01	2016-01-02
764 SHS VANGUARD SHORT TERM BND		2014-01-01	2016-01-02
563 SHS VANGUARD TOTAL BOND MARKET		2014-01-01	2016-01-02
779 SHS ISHARES RUSSELL 1000 GRW ETF		2014-01-01	2016-01-02
810 SHS ISHARES RUSSELL 1000 VALUE ETF		2014-01-01	2016-01-02
82 SHS ISHARES RUSSELL 2000 GRWTH ETF		2014-01-01	2016-01-02
105 SHS ISHARES RUSSELL 2000 VALUE ETF		2014-01-01	2016-01-02
89 SHS POWERSHARES QQQ TR		2012-01-17	2016-09-08
386 SHS ISHARES IBOXX \$ H/Y COR BD ETF		2014-01-01	2016-01-02
CAPITAL GAINS DIVIDENDS	P		

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h

(e) Gross sales price	Depreciation allowed (f) (or allowable)	Cost or other basis (g) plus expense of sale	Gain or (loss) (h) (e) plus (f) minus (g)
11,591		11,640	-49
61,444		61,456	-12
46,451		44,684	1,767
75,525		76,077	-552
82,350		79,598	2,752
10,147		11,551	-1,404
8,704		10,070	-1,366
10,337		10,022	315
32,548		35,433	-2,885
155			155

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - l

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(I) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
(i) F M V as of 12/31/69	Adjusted basis (j) as of 12/31/69	Excess of col (i) (k) over col (j), if any	
			-49
			-12
			1,767
			-552
			2,752
			-1,404
			-1,366
			315
			-2,885
			155

Form 990PF Part XV Line 1a - List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000).

SHIRLEY SHAPIRO
DIANE SHAMAS

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
AIDS PROJECT OF VERMONT 15 GROVE STREET BRATTLEBORO, VT 05302	NONE	OTHER PUBLIC CHARITY	GENERALGENERAL	500
AMERICAN BALLET THEATRE 890 BROADWAY NEW YORK, NY 10003	NONE	OTHER PUBLIC CHARITY	GENERAL	6,500
CANCERCARE INC 275 SEVENTH AVENUE NEW YORK, NY 10001	NONE	OTHER PUBLIC CHARITY	GENERAL	250
ARTBRIDGE 526 W 26TH AT NEW YORK, NY 10001	NONE	OTHER PUBLIC CHARITY	GENERAL	1,000
BERGEN PERFORMING ARTS 30 NORTH VAN BRUNT STREET ENGLEWOOD, NJ 07631	NONE	OTHER PUBLIC CHARITY	GENERAL	1,500
Total ▶ 3a				552,697

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
DISABLED AMERICAN VETERANS 79 MIDDLEVILLE ROAD NORTHPORT, NY 11768	NONE	OTHER PUBLIC CHARITY	GENERALGENERAL	50
NYC BALLET 20 LINCOLN CENTER PLAZA NEW YORK, NY 10023	NONE	OTHER PUBLIC CHARITY	GENERAL	1,000
CAMP SUNSHINE AND CAMP SNOWFLAKE PO BOX 99 RIDGEWOOD, NJ 07451	NONE	OTHER PUBLIC CHARITY	GENERAL	10,000
CENTER FOR FOOD ACTION 192 WEST DEMAREST AVE ENGLEWOOD, NJ 07631	NONE	OTHER PUBLIC CHARITY	GENERAL	10,000
CHAI LIFELINE 151 WEST 30TH STREET NEW YORK, NY 10001	NONE	OTHER PUBLIC CHARITY	GENERAL	500
Total ▶ 3a				552,697

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
CHILDREN'S THERAPY CENTER 29-01 BERKSHIRE ROAD FAIR LAWN, NJ 07410	NONE	OTHER PUBLIC CHARITY	GENERAL	196,817
NURSE PRACTITIONER ASSOCIATION 12 CORPORATE DRIVE CLIFTON PARK, NY 12065	NONE	OTHER PUBLIC CHARITY	GENERAL	100
COLUMBIA UNIVERSITY 635 W 165TH ST NEW YORK, NY 10032	NONE	OTHER PUBLIC CHARITY	GENERAL	1,000
COMMUNITY CHEST 122 SOTH VANBRUNT ST ENGLEWOOD, NJ 07631	NONE	OTHER PUBLIC CHARITY	GENERAL	500
CONGREGATION ADATH ISRAEL 115 HUNTINGTON RD NEWTON, CT 06470	NONE	OTHER PUBLIC CHARITY	GENERAL	10,000
Total ► 3a				552,697

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
DOCTORS WITHOUT BORDERS 6 EAST 39TH STREET NEW YORK, NY 10016	NONE	OTHER PUBLIC CHARITY	GENERAL	3,000
ENGLEWOOD HOSPITAL AND MEDICAL CENTER FOUNDATION (EHMC) 350 ENGLE ST E ENGLEWOOD, NJ 07631	NONE	OTHER PUBLIC CHARITY	GENERAL	50,200
HADASSAH 50 W 58ST NEW YORK, NY 10019	NONE	OTHER PUBLIC CHARITY	GENERAL	200
PALM BEACH COUNTY COUNCIL OF FIREFIGHTERS PO BOX 7177 WEST PALM BEACH, FL 33405	NONE	OTHER PUBLIC CHARITY	GENERAL	25
HOLY APOSTLES SOUP KITCHEN 296 9TH AVE NEW YORK, NY 10001	NONE	OTHER PUBLIC CHARITY	GENERAL	4,000
Total ► 3a				552,697

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
HOPKINS SCHOOL 986 FORREST RD NEW HAVEN, CT 06333	NONE	OTHER PUBLIC CHARITY	GENERAL	2,000
HOSPITAL FOR SPECIAL SURGERY 535 EAST 70TH STREET NEW YORK, NY 10021	NONE	OTHER PUBLIC CHARITY	GENERAL	1,000
ISRAEL 20 8 HAMPTON ROAD CLIFTON, NJ 07012	NONE	OTHER PUBLIC CHARITY	GENERAL	17,000
JCC THURNAUER SCHOOL OF MUSIC 411 E CLINTON AVENUE TENAFLY, NJ 07670	NONE	OTHER PUBLIC CHARITY	GENERAL	10,000
FLORIDA SCHOOL OF HOLISTIC LIVING 1109 E CONCORD ST ORLANDO, FL 32803	NONE	OTHER PUBLIC CHARITY	GENERAL	500
Total ▶ 3a				552,697

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
JEWISH FAMILY SERVICE 1485 TEANECK RD TEANECK, NJ 07666	NONE	OTHER PUBLIC CHARITY	GENERAL	1,500
JEWISH FEDERATION OF NORTHERN NJ 50 EISENHOWER DR PARAMUS, NJ 07652	NONE	OTHER PUBLIC CHARITY	GENERAL	17,000
JEWISH FEDERATION OF PALM BEACH 4601 COMMUNITY DRIVE WEST PALM BEACH, FL 33417	NONE	OTHER PUBLIC CHARITY	GENERAL	1,000
JEWISH MUSEUM 1109 5TH AVE NEW YORK, NY 10128	NONE	OTHER PUBLIC CHARITY	GENERAL	1,500
JEWISH NATIONAL FUND 42 EAST 69TH STREET NEW YORK, NY 10021	NONE	OTHER PUBLIC CHARITY	GENERAL	1,000
Total ► 3a				552,697

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
JEWISH THEOLOGICAL SEMINARY OF AMERICA 3080 BROADWAY NEW YORK, NY 10027	NONE	OTHER PUBLIC CHARITY	GENERAL	50,100
LEAGUE OF WOMEN VOTERS OF NJ EDUCATION FUND 204 W STATE STREET TRENTON, NJ 08608	NONE	OTHER PUBLIC CHARITY	GENERAL	250
MARBEATZE TORAH INSTITUTE 1719 AVENUE P BROOKLYN, NY 11229	NONE	OTHER PUBLIC CHARITY	GENERAL	280
MARCH OF DIMES 1275 MAMARONECK AVENUE WHITE PLAINS, NY 10605	NONE	OTHER PUBLIC CHARITY	GENERAL	100
MASORTI FOUNDATION FOR CONSERVATIVE JUDAISM OF ISRAEL 475 RIVERSIDE DR 832 NEW YORK, NY 10115	NONE	OTHER PUBLIC CHARITY	GENERAL	1,200
Total 				552,697
3a				

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
MEMORIAL SLOAN KETTERING 1275 YORK AVE NEW YORK, NY 10021	NONE	OTHER PUBLIC CHARITY	GENERAL	500
METROPOLITAN OPERA LINCOLN CENTER NEW YORK, NY 10023	NONE	OTHER PUBLIC CHARITY	GENERAL	7,500
MORRIS ARTS 14 MAPLE AVENUE MORRISTOWN, NJ 07960	NONE	OTHER PUBLIC CHARITY	GENERALGENERAL	1,000
MUSEUM OF MODERN ART 11 WEST 53RD STREET NEW YORK, NY 10001	NONE	OTHER PUBLIC CHARITY	GENERAL	1,200
PBS 825 EIGHT AVENUE NEW YORK, NY 10019	NONE	OTHER PUBLIC CHARITY	GENERAL	500
Total 				552,697
3a				

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
NATIONAL PARKS CONSERVATION ASSOC 777 6TH STREET NW WASHINGTON, DC 20001	NONE	OTHER PUBLIC CHARITY	GENERAL	100
NATL MUSEUM OF AMERICAN INDIANS PO BOX 23473 WASHINGTON, DC 20026	NONE	OTHER PUBLIC CHARITY	GENERAL	1,000
NATIONAL CENTER FOR LESBIAN RIGHTS (NCLR) 870 MARKET STREET SAN FRANCISCO, CA 94102	NONE	OTHER PUBLIC CHARITY	GENERAL	300
NEW ENGLAND YOUTH THEATRE PO BOX 6394 BRATTLEBORO, VT 05302	NONE	OTHER PUBLIC CHARITY	GENERAL	10,000
WBGO 54 PARK PLACE NEWARK, NJ 07102	NONE	OTHER PUBLIC CHARITY	GENERAL	500
Total ► 3a				552,697

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
NEW FAIRFIELD VOLUNTEER FIRE DEPT PO BOX 8307 NEW FAIRFIELD, CT 06333	NONE	OTHER PUBLIC CHARITY	GENERAL	249
NEW HORIZON SERVICE DOGS 1590 LAUREL PARK CT ORANGE CITY, FL 32763	NONE	OTHER PUBLIC CHARITY	GENERAL	1,000
NEW YORK-PRESBYTERIAN HOSPITAL 622 WEST 168TH STREET NEW YORK, NY 10032	NONE	OTHER PUBLIC CHARITY	GENERAL	1,500
ORT AMERICA 315 PARK AVE S NEW YORK, NY 10010	NONE	OTHER PUBLIC CHARITY	GENERAL	2,500
PLANNED PARENTHOOD 810 7TH AVE NEW YORK, NY 10019	NONE	OTHER PUBLIC CHARITY	GENERAL	500
Total 				552,697
3a				

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
PREP FOR PREP 325 WEST 71ST STREET NEW YORK, NY 10023	NONE	OTHER PUBLIC CHARITY	GENERAL	10,000
SMILE TRAIN 245 5TH AVENUE NEW YORK, NY 10016	NONE	OTHER PUBLIC CHARITY	GENERAL	4,000
SOLOMON SCHECHTER DAY SCHOOL OF BERGEN COUNTY BERGEN AVENUE NEW MILFORD, NJ 07646	NONE	OTHER PUBLIC CHARITY	GENERAL	50,000
SPECTRUM FOR LIVING DEVELOPMENT INC 210 RIVERDALE RD 3 RIVER VALE, NJ 07675	NONE	OTHER PUBLIC CHARITY	GENERAL	3,500
TEMPLE EMANU-EL 180 PIERMONT ROAD CLOSTER, NJ 07624	NONE	OTHER PUBLIC CHARITY	GENERAL	47,726
Total ► 3a				552,697

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
TENAFLY FIREMANS ASSOC PO BOX 511 TENAFLY, NJ 07670	NONE	OTHER PUBLIC CHARITY	GENERAL	250
TENAFLY NATURE CENTER 313 HUDSON AVENUE TENAFLY, NJ 07670	NONE	OTHER PUBLIC CHARITY	GENERAL	100
TENAFLY VOLUNTEER AMBULANCE PO BOX 355 TENAFLY, NJ 07670	NONE	OTHER PUBLIC CHARITY	GENERAL	300
THE ART SCHOOL AT THE OLD CHURCH 561 PIERMONT RD DEMAREST, NJ 07627	NONE	OTHER PUBLIC CHARITY	GENERAL	100
THIRTEENWNET 450 WEST 33RD STREET NEW YORK, NY 10001	NONE	OTHER PUBLIC CHARITY	GENERAL	1,500
Total ▶ 3a				552,697

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
UNITED SYNAGOGUE OF CONSERVATIVE JUDAISM 820 SECOND AVENUE NEW YORK, NY 10017	NONE	OTHER PUBLIC CHARITY	GENERAL	100
VANTAGE HEALTH SYSTEM 93 WEST PALISADE AVENUE ENGLEWOOD, NJ 07631	NONE	OTHER PUBLIC CHARITY	GENERAL	1,000
WLIW21 825 EIGHT AVENUE NEW YORK, NY 10019	NONE	OTHER PUBLIC CHARITY	GENERAL	500
WNYC 160 VARICK ST NEW YORK, NY 10013	NONE	OTHER PUBLIC CHARITY	GENERAL	500
WORLD WILDLIFE FUND 1250 24TH ST NW WASHINGTON, DC 20090	NONE	OTHER PUBLIC CHARITY	GENERAL	500
Total ► 3a				552,697

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year				
YES FOUNDATION 30600 THELGRAPH RD BINGHAM FARMS, MI 48025	NONE	OTHER PUBLIC CHARITY	GENERAL	1,200
YIDDISH BOOK CENTER 1021 WEST ST AMHERST, MA 01002	NONE	OTHER PUBLIC CHARITY	GENERAL	1,500
Total ▶ 3a				552,697

TY 2016 Accounting Fees Schedule**Name:** THE SHAPIRO FAMILY FOUNDATION**EIN:** 22-6767630

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
ACCOUNTING	4,000	2,000		0

TY 2016 Investments - Other Schedule**Name:** THE SHAPIRO FAMILY FOUNDATION**EIN:** 22-6767630

Category/ Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value
ISHARES RUSSELL 1000 GRW FUND	AT COST	355,801	345,436
ISHARES RUSSELL 1000 VALUE FUND	AT COST	419,978	413,503
ISHARES RUSSELL 2000 GRW FUND	AT COST	32,809	34,175
ISHARES RUSSELL 2000 VALUE FUND	AT COST	64,053	68,272
ISHARES RUSSELL MIDCAP G	AT COST	68,554	68,465
ISHARES RUSSELL MIDCAP V ETF	AT COST	70,014	68,205
VANGUARD ST BOND	AT COST	423,224	418,702
VANGUARD TOTAL BOND MKT	AT COST	466,515	455,979
DEUTSCHE X-TRACKERS	AT COST	302,038	316,405
ISHARES CORE EAFE	AT COST	315,784	309,821
ISHARES CORE EMERGING	AT COST	245,761	237,126
ISHARES IBOXX	AT COST	276,987	279,297
ISHARES TIPS BOND	AT COST	140,707	140,104
PIMCO ENHANCED SHRT MKT	AT COST	244,015	244,509
VANGUARD TOTAL INTL BOND	AT COST	0	0
POWERSHARES	AT COST	0	0
WISDOMTREE TRUST JAPAN HEDGE EQ	AT COST	60,406	67,771

TY 2016 Other Assets Schedule

Name: THE SHAPIRO FAMILY FOUNDATION

EIN: 22-6767630

Other Assets Schedule

Description	Beginning of Year - Book Value	End of Year - Book Value	End of Year - Fair Market Value
DIVIDEND RECEIVABLE	0	261	

TY 2016 Other Expenses Schedule**Name:** THE SHAPIRO FAMILY FOUNDATION**EIN:** 22-6767630**Other Expenses Schedule**

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
ADVISORY FEES	21,081	21,081		0

TY 2016 Taxes Schedule**Name:** THE SHAPIRO FAMILY FOUNDATION**EIN:** 22-6767630

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
EXCISE TAX	2,000	2,000		0
FOREIGN TAX	1,371	1,371		0

Schedule B (Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service	Schedule of Contributors ▶ Attach to Form 990, 990-EZ, or 990-PF ▶ Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at <u>www.irs.gov/form990</u>	OMB No 1545-0047 2016

Name of the organization THE SHAPIRO FAMILY FOUNDATION	Employer identification number 22-6767630
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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 other property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

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

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

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

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

Name of organization THE SHAPIRO FAMILY FOUNDATION	Employer identification number 22-6767630
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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	SHIRLEY SHAPIRO 252 HIGHWOOD AVENUE TENAFLY, NJ 07670	 \$ 2,037,126 	Person ☐ Payroll ☐ Noncash ☒ (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
-	 	 \$ 	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
-	 	 \$ 	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
-	 	 \$ 	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
-	 	 \$ 	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
-	 	 \$ 	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
-	 	 \$ 	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions)

Name of organization THE SHAPIRO FAMILY FOUNDATION	Employer identification number 22-6767630
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Part II **Noncash Property** (see Instructions) Use duplicate copies of Part II if additional space is needed

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
_____	See Additional Data Table	\$ _____	_____
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
_____		\$ _____	_____
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
_____		\$ _____	_____
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
_____		\$ _____	_____
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
_____		\$ _____	_____
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
_____		\$ _____	_____
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
_____		\$ _____	_____
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
_____		\$ _____	_____

Name of organization THE SHAPIRO FAMILY FOUNDATION	Employer identification number 22-6767630
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Part III	Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once. See instructions.) ► \$ _____ Use duplicate copies of Part III if additional space is needed
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(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	_____	_____	_____
	_____	_____	_____
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4	Relationship of transferor to transferee	
	_____	_____	_____
	_____	_____	_____
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4	Relationship of transferor to transferee	
	_____	_____	_____
	_____	_____	_____
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4	Relationship of transferor to transferee	
	_____	_____	_____
	_____	_____	_____
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4	Relationship of transferor to transferee	
	_____	_____	_____
	_____	_____	_____
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4	Relationship of transferor to transferee	
	_____	_____	_____
	_____	_____	_____
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4	Relationship of transferor to transferee	
	_____	_____	_____
	_____	_____	_____
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4	Relationship of transferor to transferee	
	_____	_____	_____
	_____	_____	_____
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4	Relationship of transferor to transferee	

Additional Data

Software ID:

Software Version:

EIN: 22-6767630

Name: THE SHAPIRO FAMILY FOUNDATION

Form 990 Schedule B, Part II - Noncash Property (see Instructions) Use duplicate copies of Part II if additional space is needed

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
<u>1</u>	5917 SHS ISHARES RUSSELL 1000 GRW	<u>\$ 621,699</u>	<u>2016-08-19</u>
<u>1</u>	3762 SHS ISHARES RUSSELL 1000 VALUE	<u>\$ 400,465</u>	<u>2016-08-19</u>
<u>1</u>	228 SHS ISHARES RUSSELL MIDCAP GRW	<u>\$ 22,713</u>	<u>2016-12-09</u>
<u>1</u>	1701 SHS ISHARES RUSSELL MIDCAP VALUE	<u>\$ 140,486</u>	<u>2016-12-09</u>
<u>1</u>	1307 SHS ISHARES RUSSELL 1000 GRW	<u>\$ 138,843</u>	<u>2016-12-09</u>
<u>1</u>	5000 SHS ISHARES RUSSELL 1000 VALUE	<u>\$ 568,750</u>	<u>2016-12-09</u>
<u>1</u>	710 SHS ISHARES RUSSELL 2000 GRW	<u>\$ 112,336</u>	<u>2016-12-09</u>
<u>1</u>	261 SHS ISHARES RUSSELL 2000 VALUE	<u>\$ 31,834</u>	<u>2016-12-09</u>