

## See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



## Form **990-PF**

## **Return of Private Foundation**

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

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

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

Depa	rtmen	t of the Treasury	. ▶∪	o not enter s	social s	ecurity numbers of	n this form a	is it may be ma	ade public.	<b>LU 10</b>
Interr	al Re	venue Service   ndar year 2016 or tax		n about For	m 990-F	F and its separate		s is at www.ir: ending	s.gov/form990pf.	Open to Public Inspection
		f foundation	year beginning				, and	enumg	A Employer identification	number
rau		1							2 Employer Identification	
_H	OR	OWITZ FAM	ILY FOUNI	OATION					23-3036053	<u> </u>
		and street (or PO box no		vered to street	address)			Room/suite	B Telephone number	
		<u>TOWNSHIP</u>						2100	215-572-07	38
		own, state or provinc <b>KINTOWN</b> ,			ostal co	de			C if exemption application is p	pending, check here
		all that apply:	Initial return			Initial return of a f	ormer public	charity	D 1. Foreign organization:	s, check here
			Final return			Amended return			0 -	
			Address cha			Name change			Foreign organizations me check here and attach co	enting the 85% test, proputation
H C	_	type of organization				ivate foundation			E If private foundation sta	
<u> </u>		ection 4947(a)(1) non				xable private found			under section 507(b)(1	)(A), check here $ ightharpoonup$
		arket value of all asse	· 1	J Account	_		L Ac	crual	F If the foundation is in a	
	<i>≎π</i> ∙\$	Part II, col (c), line			her (spe mn (d)	must be on cash	basis )		under section 507(b)(1	)(B), check here
	irt l					Revenue and		investment	(c) Adjusted net	(d) Disbursements
		Analysis of Reven (The total of amounts necessarily equal the	n columns (b), (c), and amounts in column (a)	(d) may not )		enses per books		come	income	for charitable purposes (cash basis only)
	1	Contributions, gifts,	grants, etc., receiv	red		0.			N/A	
707	2	Check X If the fo		attach Sch B						
	3	Interest on savings and cash investments	temporary				ļ		<u> </u>	
7	4	Dividends and intere	est from securities			13,047.	 	<u>13,047.</u>		STATEMENT 1
>	1	Gross rents			<u> </u>		<del> </del>		<del> </del>	
3 .	۰.	Net rental income or (lo			<u> </u>	<5,102.			<del></del>	
_ a	oa b	Net gain or (loss) from s Gross sales price for all		, 65 <b>4</b> .		<b>V3,102.</b>				
Revenue	7	assets on line 6a Capital gain net income		70340				0.	<del> </del>	
Rever	8	Net short-term capit						<del></del> _		
	9	Income modification								
3	10a	Gross sales less returns and allowances	5							
	1	Less Cost of goods so								
	l	Gross profit or (loss	s)		<u> </u>		<del> </del>		<del> </del>	
	11	Other income  Total, Addlines 1	OF OF IVE	:n	ļ	7,945.		13,047.	<del> </del>	
	12	Compensation of office		10	<b> </b>	0.		0.		0.
	14	Other employee sala	rs, directors, trustees, aries and wages a	etc 05						<del></del>
	15	Pension plans iemp	lovee benefits	FS-						
ses	16a	i Legariees ( )		1 The last of the						
je i	b	Accounting fees	)GDEN_	UL						
Ä	C	Other professional f	ees ST	MT 2	<u> </u>	<u>3,877.</u>	<b> </b>	3,877.	<del> </del>	0.
tive	17	Interest								
stra	18	Taxes	. alaban		<u> </u>				<del> </del>	<del> </del>
ij	19	Depreciation and de Occupancy	pietion				<del> </del>			
Ag	21	Travel, conferences	and meetings							
ģ	22		_							
Operating and Administrative Expenses	23									
ʻatir	24	Total operating and	d administrative							
) Der	.	expenses. Add line	=			3,877.	ļ	3,877.		0.
O	25	Contributions, gifts,	-		<u> </u>	190,260.	<del> </del>		<del></del>	190,260.
	26	Total expenses and				104 125	ĺ	2 000	{	100 000
	-	Add lines 24 and 25				194,137.	<del> </del>	<u>3,877.</u>		190,260.
	27					<186,192.	L			
	1	Recess of revenue over  Net investment inc	•		<b>:</b>	<u> </u>	<u> </u>	9,170.		
	1	Adjusted net incom							N/A	

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

(must agree with end-of-year figure reported on prior year's return)	616,247.
2 Enter amount from Part I, line 27a 2	<186,192.>
3 Other increases not included in line 2 (itemize) ▶	0.
4 Add lines 1, 2, and 3	430,055.
5 Decreases not included in line 2 (itemize) ►	0.
6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30	430,055.

	ribe the kind(s) of pi arehouse; or commo				( <b>b)</b> H	low ac Purch Dona	quired nase tion	(c) Date ad (mo., da		(d) Date sold (mo., day, yr.)
1a HAVERFORD TRUS	T COMPANY						P	VARIO	DUS	VARIOUS
b HAVERFORD TRUS							D	VARIO	DUS	VARIOUS
C										
d										
e			<u>.                                      </u>		<u> </u>					
(e) Gross sales price	(f) Depreciation (or allow		(0)	t or other basis xpense of sale					in or (loss (f) minus	(g)
a 164,784.				170,30						<u>&lt;5,52</u> 5.
b 58,870.				58,44	<u> 17.</u>					423
c										
d										
e										
Complete only for assets showing	ig gain in column (h	) and owned by the	e foundation	on 12/31/69			(!	Gains (Co	ıl. (h) gaın	minus
(i) F.M.V. as of 12/31/69	(j) Adjuste as of 12/3			cess of col. (i) col. (j), if any			col	(k), but no Losses (t	ot less tha from col. (	n -0-) <b>or</b> (h)) —
a										<5,525
b										<5,525, 423,
C										
d					. T.					_
е										
		f gain, also enter in	Part Llina		7					
Capital gain net income or (net ca	ipital loss)	f gaın, also enter ın f (loss), enter -0- ır	n Part I. line	, 7	1	2				<5,102
Net short-term capital gain or (los	•			•	7					
If gain, also enter in Part I, line 8,		110115 1222(3) allu	(0).		1					
If (loss), enter -0- in Part I, line 8	oolullii (o).				<b>P</b>	_			/-	
					- )	3			N/A	
For optional use by domestic private section 4940(d)(2) applies, leave the	his part blank.	et to the section 494	40(a) tax on	net investment ii	ncome		ent inc	ome	<u>N/A</u>	
For optional use by domestic private f section 4940(d)(2) applies, leave the Vas the foundation liable for the sec f "Yes," the foundation does not qual Enter the appropriate amount in	e foundations subject his part blank. tion 4942 tax on the lify under section 49	t to the section 49 distributable amou	40(a) tax on unt of any ye plete this pa	net investment ii ear in the base pe rt.	ncome.	.)	ent Inc	ome	N/A	Yes X No
For optional use by domestic private f section 4940(d)(2) applies, leave the Vas the foundation liable for the sec f "Yes," the foundation does not qual	e foundations subjecting part blank.  Ition 4942 tax on the lify under section 49 each column for each	distributable amounds of the section 494  distributable amounds of the section of	40(a) tax on unt of any ye plete this patructions beloutions	net investment ii ear in the base pe rt.	riod?	.)	use assets	(1	Distril	Yes X No  (d) Sutton ratio Vided by col. (c))
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	n 990-PF (2016) HOROWITZ FAMILY FOUNDATION	23-	<u>-3036</u>	053		Page 4
	art VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or	4948	- see i	instru	ctio	<u>15)</u>
	Exempt operating foundations described in section 4940(d)(2), check here  and enter "N/A" on line 1.		1			
	Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)					
	Domestic foundations that meet the section 4940(e) requirements in Part V, check here 🕨 🗓 and enter 1%	1_1_	<del> </del>			<u>92.</u>
	of Part I, line 27b					
	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b).					_
	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2_	<del></del>			0.
	Add lines 1 and 2	3	┼	-		92.
	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4_	+			0.
	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5_	+			<u>92.</u>
	Credits/Payments*	,				
	2016 estimated tax payments and 2015 overpayment credited to 2016  6a 1,532	<u> </u>	1			
	Exempt foreign organizations - tax withheld at source  Toward with analysis of the state of the Commission (Commission Commission Co	$\dashv$				
	: Tax paid with application for extension of time to file (Form 8868)  6c	$\dashv$				
	I Backup withholding erroneously withheld  Takk and assume and Add lose So through Cd.	┥,	1		1 6	2.2
	Total credits and payments. Add lines 6a through 6d  Enter any <b>penalty</b> for underpayment of estimated tax. Check here if Form 2220 is attached	7	+		<u> </u>	<u>32.</u>
	Tax due If the total of lines 5 and 8 is more than line 7, enter amount owed	► 8 9	+	<del></del> .		
	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10	+		1 /	40.
	Enter the amount of line 10 to be: Credited to 2017 estimated tax	11	+		<u> </u>	0.
	art VII-A Statements Regarding Activities					<u> </u>
	a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervi	ene in		Т	Yes	No
	any political campaign?	3110 111		1a		X
	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definit	ion)?		1b	-	X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials pub		r	,,,		
	distributed by the foundation in connection with the activities			1		
	Did the foundation file Form 1120-POL for this year?			1c		х
d	f Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:					
		) <b>.</b>				
	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?			2		_X_
	If "Yes," attach a detailed description of the activities					
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation	n, or		Ì		
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes			3		_X_
	a Did the foundation have unrelated business gross income of \$1,000 or more during the year?			4a		<u>X</u>
	o If "Yes," has it filed a tax return on Form 990-T for this year?	1	A\N	4b		
				5		<u>X</u>
	If "Yes," attach the statement required by General Instruction T.					
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 same as	tate law			v	
	remain in the governing instrument?  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	VI /		7	X	<u> </u>
1	Did the foundation have at least \$5,000 in assets at any time during the year in test, complete Part II, cor (c), and Part	λV		<del>  '</del>		<del></del>
۵,	a Enter the states to which the foundation reports or with which it is registered (see instructions)					
Od	PA					
ь	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)	_				
U	of each state as required by General Instruction G? If "No," attach explanation			8b	х	
9		calendar		-		
·	year 2016 or the taxable year beginning in 2016 (see instructions for Part XIV)? If "Yes," complete Part XIV			9		x
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses			10		X
			Fc	rm <b>99</b> 0	)-PF	

Form **990-PF** (2016)

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?

orm 990-PF (2016) HOROWITZ FAMILY FOUNDAT			23-30360	53	Page 6
<ul> <li>Part VII-B Statements Regarding Activities for Which</li> <li>5a During the year did the foundation pay or incur any amount to: <ol> <li>Carry on propaganda, or otherwise attempt to influence legislation (section).</li> <li>Influence the outcome of any specific public election (see section 4955); any voter registration drive?</li> <li>Provide a grant to an individual for travel, study, or other similar purpose.</li> <li>Provide a grant to an organization other than a charitable, etc., organization 4945(d)(4)(A)? (see instructions).</li> <li>Provide for any purpose other than religious, charitable, scientific, literary the prevention of cruelty to children or animals?</li> <li>If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify u section 53.4945 or in a current notice regarding disaster assistance (see instructions). Organizations relying on a current notice regarding disaster assistance check.</li> <li>If the answer is "Yes" to question 5a(4), does the foundation claim exemption expenditure responsibility for the grant?</li> <li>If "Yes," attach the statement required by Regulations section 53 49-6a. Did the foundation, during the year, receive any funds, directly or indirectly, to</li> </ol> </li> </ul>	on 4945(e))? or to carry on, directly or indirectly or indirectly, or educational purposes, or funder the exceptions described in ructions)? here from the tax because it maintain in indirectly or in	ectly,  Ye  or  Regulations	es X No	5b	
a personal benefit contract?  b Did the foundation, during the year, pay premiums, directly or indirectly, on a	personal benefit contract?	Ye	es X No	6b	x
If "Yes" to 6b, file Form 8870.  7a At any time during the tax year, was the foundation a party to a prohibited tax b if "Yes," did the foundation receive any proceeds or have any net income attriberation.  Part VIII Information About Officers, Directors, Trus Paid Employees, and Contractors	butable to the transaction?			7b	
List all officers, directors, trustees, foundation managers and their	r 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		pense it, other ances
RICHARD M. HOROWITZ L28 KNIGHTSBRIDGE ROAD	PRESIDENT / D	IRECTOR /	SEC		
VYNNEWOOD, PA 19096	1.00	0.	0.		0.
RUTH FARBER-HOROWITZ	_VICE PRESIDEN	T			
128 KNIGHTSBRIDGE ROAD VYNNEWOOD, PA 19096	1.00	0.	0.		0.
Compensation of five highest-paid employees (other than those in	ncluded on line 1). If none,	enter "NONE."		<u> </u>	
(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	accour	pense nt, other ances
NONE					
Total number of other employees paid over \$50,000		l	<u> </u>		0
			Form	990-PF	(2016)

623561 11-23-16

Total. Add lines 1 through 3

HOROWITZ FAMILY FOUNDATION 23-3036053 Page 8 Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.) Part X Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes: 507,830. a Average monthly fair market value of securities 1a 25.897. b Average of monthly cash balances 16 c Fair market value of all other assets 1c 533,727. d Total (add lines 1a, b, and c) 1d e Reduction claimed for blockage or other factors reported on lines 1a and 0. 1c (attach detailed explanation) 1e Acquisition indebtedness applicable to line 1 assets 2 Subtract line 2 from line 1d 3 3 Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions) 8,006 525,721 Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4 5 Minimum investment return Enter 5% of line 5 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.) 26,286. Minimum investment return from Part X, line 6 92. Tax on investment income for 2016 from Part VI, line 5 Income tax for 2016. (This does not include the tax from Part VI.) c Add lines 2a and 2b 2c 3 Distributable amount before adjustments. Subtract line 2c from line 1 3 Recoveries of amounts treated as qualifying distributions 4 Add lines 3 and 4 26,194. 5 6 Deduction from distributable amount (see instructions) 6 Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1. 7 Part XII Qualifying Distributions (see instructions) Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes: 190,260. Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26 b Program-related investments - total from Part IX-B 1b Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes 2 Amounts set aside for specific charitable projects that satisfy the: Suitability test (prior IRS approval required) 3a Cash distribution test (attach the required schedule) 3b Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4 190,260. 4

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

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

Form **990-PF** (2016)

168.

6

income. Enter 1% of Part I, line 27b

Adjusted qualifying distributions. Subtract line 5 from line 4

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				26,194.
2 Undistributed income, if any, as of the end of 2016				
a Enter amount for 2015 only			0.	
<b>b</b> Total for prior years:				
		0.		
3 Excess distributions carryover, if any, to 2016:				
a From 2011				
<b>b</b> From 2012				
c from 2013 77,189.				
dFrom 2014 88,119.	,			
e from 2015 205,005.				
f Total of lines 3a through e	370,313.			
4 Qualifying distributions for 2016 from	3,0,313.			
Part XII, line 4: ▶ \$ 190, 260.				
a Applied to 2015, but not more than line 2a			0.	
<b>b</b> Applied to undistributed income of prior				
years (Election required - see instructions)		0.		
- ' '		<u>0 •</u>		
c Treated as distributions out of corpus	0.			
(Election required - see instructions)				26,194.
d Applied to 2016 distributable amount	164,066.			20,194.
e Remaining amount distributed out of corpus	0.			0.
Excess distributions carryover applied to 2016     (ff an amount appears in column (d), the same amount must be shown in column (a) )				<b>U</b> •
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	534,379.		·	
<b>b</b> Prior years' undistributed income. Subtract				
fine 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		0.		
assessed				
d Subtract line 6c from line 6b. Taxable		0.		,
amount - see instructions  e Undistributed income for 2015. Subtract line				
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2016. Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2017				0.
<del>}</del>	<del></del>	· · · · · · · · · · · · · · · · · · ·		
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3) (Election	0.			
may be required - see instructions)			<u> </u>	
8 Excess distributions carryover from 2011	0.			
not applied on line 5 or line 7				
9 Excess distributions carryover to 2017	534,379.			
Subtract lines 7 and 8 from line 6a	334,373.			
10 Analysis of line 9:				
a Excess from 2012				
b Excess from 2013 77, 189. c Excess from 2014 88, 119.				
d Excess from 2015 205,005.				
e Excess from 2016 164,066.				Form <b>990-PF</b> (2016)

Part XIV Private Operating For	oundations (see ins		II-A. guestion 9)	N/A	-3030033 Tage 10
1 a If the foundation has received a ruling or		<del></del>	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	N/A	
foundation, and the ruling is effective for					
<b>b</b> Check box to indicate whether the foundation	•	<u> </u>	in section	4942(j)(3) or	4942(J)(5)
2 a Enter the lesser of the adjusted net	Tax year	g louildulon described	Prior 3 years	+3+2( <u>))(0) 01                                </u>	1 4042())(0)
income from Part I or the minimum	(a) 2016	<b>(b)</b> 2015	(c) 2014	(d) 2013	(e) Total
investment return from Part X for			(-7		(-,
each year listed					
<b>b</b> 85% of line 2a		· · · · · · · · · · · · · · · · · · ·	<del> </del>		<del></del>
c Qualifying distributions from Part XII,				<del></del>	
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			<del>-</del>	<del></del>	
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	Ì				
` ′					
(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		
(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				i	
section 4942(j)(3)(B)(iii)			<u> </u>		
(3) Largest amount of support from					
an exempt organization					
(4) Gross investment income		u data	 	1 45 000	
Part XV Supplementary Information at any time during the	•	•	if the foundation	on had \$5,000 or	r more in assets
	<del>-</del>	<u>uctions.</u> ;			
1 Information Regarding Foundation		.h 00/ of the tetal		h - 6dak h -6 il	
a List any managers of the foundation who year (but only if they have contributed m			itributions received by t	ne toundation before tr	ie close of any tax
RUTH FARBER-HOROWITZ	570 than \$6,000). (000 00	, di di (d) (d) (d) (d)			
b List any managers of the foundation who	own 10% or more of the	e stock of a corporation	(or an equally large po	rtion of the ownership	of a partnership or
other entity) of which the foundation has			(	,	
NONE					
2 Information Regarding Contribution	on, Grant, Gift, Loan,	Scholarship, etc., P	rograms:		
Check here 🕨 🔙 if the foundation or					
the foundation makes gifts, grants, etc. (	see instructions) to indivi	iduals or organizations	under other conditions,	complete items 2a, b,	c, and d.
a The name, address, and telephone number	er or e-mail address of the	he person to whom app	lications should be add	ressed:	
N/A					
b The form in which applications should be	submitted and informat	ion and materials they s	should include:		
N/A					
c Any submission deadlines:					
N/A	anab an buran and	danaa shaasa saasa	- Include of the state of		
d Any restrictions or limitations on awards	, such as by geographica	ii areas, charitable fields	s, kinds of institutions, (	or other factors:	
N/A					
e22601 11 22 16			<del></del>	<del></del>	Form <b>990-DF</b> (2016)

Part XV Supplementary Information (continued) Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Foundation Purpose of grant or show any relationship to status of contribution Amount any foundation manager Name and address (home or business) recipient or substantial contributor a Paid during the year ABINGTON HEALTH FOUNDATION NONE SUPPORT THE CHARITABLE 1200 OLD YORK ROAD PURPOSES AND ABINGTON, PA 19001 TAX-EXEMPT ACTIVITIES OF ABINGTON MEMORIAL HOSPITAL AND LANSDALE 500. AMERICAN FRIENDS OF JAMAICA INC NONE SUPPORT OF THE 1697 BROADWAY, SUITE 502 ORGANIZATION'S MISSION NEW YORK, NY 10019 TO SUPPORT THE EFFORTS OF LOCAL NON GOVERNMENTAL 1,000. BIRTHRIGHT ISRAEL FOUNDATION NONE SUPPORT OF THE 33 EAST 33RD STREET, 7TH FLOOR ORGANIZATION'S MISSION NEW YORK, NY 10016 TO BUILD A BASE OF FINANCIAL SUPPORT TO ASSURE THAT THE GIFT 500. CEASEFIRE PA NONE SUPPORT CEASEFIRE PA'S 1518 WALNUT STREET MISSION FOR BETTER PHILADELPHIA, PA 19102 ENFORCEMENT OF CURRENT LAWS AGAINST ILLEGAL GUN TRAFFICERS AND FOR 1,000. CHILDREN'S CRISIS TREATMENT CENTER NONE SUPPORT OF THE 1080 NORTH DELAWARE AVENUE, STE 600 ORGANIZATION'S MISSION PHILADELPHIA, PA 19125 TO PASSIONATELY SERVE THE EMOTIONAL NEEDS OF CHILDREN AND FAMILIES 5.000. SEE CONTINUATION SHEET(S) Total ➤ 3a 190 260. b Approved for future payment NONE Total **▶** 3b

Form **990-PF** (2016)

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated.	(a) Business	business income (b) Amount	(C) Exclu- sion	oy section 512, 513, or 514 (d) Amount	(e) Related or exempt function income
1 Program service revenue:	code	AIIIUUIII	code	Alliount	Tunction alcome
a					
b					
C					
d					
e	·				
f					
g Fees and contracts from government agencies	-	<del></del>	_		
2 Membership dues and assessments					
3 Interest on savings and temporary cash	1				
investments			1.4	12 047	
4 Dividends and interest from securities			14	13,047.	
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			<del></del>		
7 Other investment income					
8 Gain or (loss) from sales of assets other			18	<5,102.	
than inventory			10	<5,102.	·
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory 11 Other revenue:			<del></del>		
a	I I		<del></del>		
b	1 1		<del></del>		
d	1				
d	-				
12 Subtotal. Add columns (b), (d), and (e)		(	).	7,945.	0.
13 Total. Add line 12, columns (b), (d), and (e)	<u> </u>		-1 -1	13	
(See worksheet in line 13 instructions to verify calculations.)					- · · · · · · · · · · · · · · · · · · ·
Part XVI-B Relationship of Activities	to the Acco	mplishment of	Evemnt E	urnoses	
Part XVI-B Relationship of Activities	to the Acco	inpusiment of	LXemptr	ui poses	
Line No. Explain below how each activity for which inc				d importantly to the accom	plishment of
the foundation's exempt purposes (other than	n by providing fun	ds for such purposes).			
					<u></u>
	<del></del> _				
					<del></del>
					<del></del>
					<del></del>
			<del></del>		
					<del></del>
1					

Part	XVII	Information Re		sfers To a	and Transac	ctions a	nd Relations	hips With None	charitable	•	•
1 Du	I the ore	Exempt Organ panization directly or indirectly		of the followin	a with any other	organizatio	an described in secti	on 501(c) of		Yes	Nο
		other than section 501(c)						011 50 1(0) 01		163	140
		rom the reporting founda				ilioai organ	izations.				
	Cash	rom and roporting rounds		ono unompt or t	gamzanon on				1a(1)		Х
٠.	Other	assets							1a(2)		X
		sactions:									
(1)	Sales	of assets to a noncharita	ble exempt organizat	ion					1b(1)		X
(2)	Purch	ases of assets from a no	ncharitable exempt o	rganization					1b(2)	=	Х
(3)	Renta	of facilities, equipment,	or other assets						1b(3)		_X_
		ursement arrangements							1b(4)		<u> </u>
		or loan guarantees							1b(5)		<u>X</u>
		mance of services or me							1b(6)		X
		facilities, equipment, ma							1c		Х
		er to any of the above is given by the reporting fo								sets,	
		) the value of the goods,			eo less man ian i	iiai ket vaiu	ie in any transaction	or snaring arrangem	eiii, Siiow iii		
(a) Line r		(b) Amount involved			exempt organiz	ation	(d) Description	of transfers, transactions	i. and sharing ar	rangeme	nts
(-,		<b>1-7</b>	(-,	N/A			(-,,		,		
				,,,							
	_										
	-										
							-				
					i.						
2a Is	the four	dation directly or indirec	tly affiliated with, or r	elated to, one	or more tax-exe	mpt organiz	zations described				_
		501(c) of the Code (othe		(3)) or in sect	ion 527?				Yes	LX	No
<b>b</b> If "	Yes," co	mplete the following sch			( ) T t		<del> </del>	( ) D ( -l-	l		
		(a) Name of org	janization		(b) Type of org	anization	1	(c) Description of rela	tionsnip		
		N/A					•				
			<u> </u>								
											-
	1	penalties of perjury, declare	that I beve examined this	s return, ıncludın	ig accompanying so	hedules and	statements, and to the	best of my knowledge	May the IRS	discuss :	this
Sign		lief, it is true, correct, and cor	nplete. <u>Declaratio</u> n of pro	eparer (other tha	n taxpayer) is based	on all inform	nation of which preparer	r has any knowledge	return with the	e prepar	er
Here		- ye c			1/10	1/17	PRESII	DENT	X Yes		Νο
	Sign	ature of officer or trustee			Date	<i>,</i> ,	Title		<u> </u>		
		Print/Type preparer'	ame	Preparer's s	ignature		Date		PTIN		
Doid					$\sim 20$		1/10/17	self- employed	-04005		
Paid Prep	aror	JOHN F. PI		1 / Neg	MILM	$\nu$	17'0 7'		P01385		
Use		Firm's name ► RAF	' INDUSTRI	ES, IN	C.			Firm's EIN ► 51	-024/9	83	
	<b>y</b>	Firm's address ▶ 16	5 TOWNSHT	P LINE	ROAD	SUTTE	2100				
			NKINTOWN,					Phone no. 215	-572-0	738	

Form 990-PF Part XV Supplementary Information (continued)	FAMILY FOUNDATION ontinued)		23-3036053	Page 11
3a Grants and Contributions Paid During the Year				
	If recipient is an individual,	Foundation	Purpose of grant or	
Name and address (home or business)	any foundation manager or substantial contributor	status of recipient	contribution	Amount
FREE LIBRARY OF PHILADELPHIA 1901 VINE STREET PHILADELPHIA, PA 19103	NONE		SUPPORT OF THE ORGANIZATION'S MISSION TO PROVIDE THE CITIZENS OF PHILADELPHIA FREE ACCESS TO INFORMATION,	1,000
1 2 2 1	NONE		SUPPORT CHILDREN AND TEENS WITH SPECIAL NEEDS SO THEY CAN ENJOY MANY OF THE SOCIAL AND RECREATIONAL OPPORTUNITIES AFFORDED TO THE COMMUNITY AT LARGE,	3,600
. 4:	NONE		SUPPORT OF THE ORGANIZATION'S MISSION TO ENGAGE WOMEN IN PHILANTHROPY AND COLLECTIVELY FUND GRANTS TO CHARITABLE INITIATIVES IN THE PHILADELPHIA REGION,	1,150,
	NONE		SUPPORT IGD'S MISSION TO TRAIN GUIDE DOGS AND TEACH BLIND INDIVIDUALS HOW TO USE GUIDE DOGS.	1,000,
JEWISH FAMILY AND CHILDREN'S SERVICES 2100 ARCH STREET, 5TH FLOOR PHILADELPHIA, PA 19104	NONE		SUPPORT OF THE ORGANIZATION'S MISSION TO STRENGTHEN FAMILIES AND INDIVIDUALS ACROSS GENERATIONS AND CULTURES TO ACHIEVE STABILITY, INDEPENDENCE AND COMMUNITY,	3,600,
JEWISH FEDERATION OF GREATER PHILADELPHIA 2100 ARCH STREET PHILADELPHIA, PA 19103	NONE		SUPPORT OF THE ORGANIZATION'S MISSION TO ENSURE JEWISH PEOPLE OF EVERY AGE CAN POOL RESOURCES, ENERGY AND COMMITMENT SO THAT NO COMMUNITY MEMBER IS IN NEED.	2,300.
JEWISH RELIEF AGENCY 10980 DUTTON ROAD PHILADELPHIA, PA 19154	NONE		SUPPORT OF THE ORGANIZATION'S MISSION TO BRING VITAL FOOD SUPPORT TO HUNGRY, DISADVANTAGED FAMILIES IN THE COMMUNITY.	1,000,
Total from continuation sheets 623841 04-01-16		14		182,260.

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Page 11 6053 Form 990-PF HOROWITZ FAMILY FOUNDATION Part XV Supplementary Information (continued)

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sa Grants and Contributions Paid During the Tear	If recipient is an individual.			
Name and address (home or business)	show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
LIVING BEYOND BREAST CANCER 40 MONUMENT ROAD, NO 104 BALA CYNWYD PA 19004	NONE		SUPPORT MISSION TO CONNECT PEOPLE WITH TRUSTED BREAST CANCER INFORMATION AND A COMMUNITY OF SUPPORT.	1,250.
Y WRITERS CHRISTIAN S	NONE		SUPPORT MIGHTY WRITER'S MISSION TO TEACH KIDS TO WRITE AND THINK WITH CLARITY SO THEY CAN ACHEIVE SUCCESS AT WORK, AT HOME AND IN LIFE,	500
E OF ART AND THE , PA 191	NONE		SUPPORT MCAD'S MISSION TO REMAIN THE FIRST AND ONLY WOMEN'S VISUAL ART COLLEGE IN THE NATION ADVANCING THE ROLE OF WOMEN IN THE VISUAL ARTS BY PROVIDING A DUALITY. CAREER-FOCUSED BFA EDUCATION,	2,500,
NATIONAL CONSTITUTION CENTER 525 ARCH STREET PHILADELPHIA, PA 19106	NONE		25 15	27,000.
BB"	NONE		SUPPORT THE RESEARCH OF DISEASE OF THE PANCREAS AND TO PROVIDE INFORMATION AND HUMANITARIAN SERVICES TO THOSE PEOPLE WHO ARE SUFFERING FROM SUCH ILLNESSES,	200.
, ,	NONE		SUPPORT TO ENABLE CHILDREN WITH DIVERSE SPECIAL NEEDS TO ATTEND JEWISH DAY SCHOOLS IN THE PHILADELPHIA AREA.	5005
SPCA E AVE	NONE		SUPPORT TO PROTECT ANIMALS, PREVENT CRUELTY, AND IMPROVE THE HEALTH AND QUALITY OF LIFE FOR ANIMALS IN PENNSYLVANIA,	2,500.
Total from continuation sheets				
623641 04-01-16		15		

Form 990-PF HOROWITZ FAMII Part XV Supplementary Information (continued)	FAMILY FOUNDATION ontnued)		23-3036053	Page 11
3a Grants and Contributions Paid During the Year				
Recipient	If recipient is an individual,	Foundation	Durang of arout or	•
Name and address (home or business)	any foundation manager or substantial contributor	status of recipient	Contribution	Amount
PERELMAN JEWISH DAY SCHOOL 49 HAVERFORD ROAD WYNNEWOOD, PA 19096	NONE		SUPPORT OF PERELMEN'S MISSION TO PROVIDE STUDENTS WITH JEWISH-VALUES BASED EDUCATION.	26,660.
PHILADELPHIA MURIAL ARTS ADVOCATES INC 1729 MT VERNON STREET PHILADELPHIA, PA 19130	NONE		SUPPORT PMAA'S MISSION TO UNITE ARTISTS AND COMMUNITIES THROUGH A COLLABORATEIVE PROCESS ROOTED IN THE TRADITIONS OF MURAL MAKING, TO CREATE ART THAT TRANSFORMS PUBLIC SPACES AND INDIVIDUAL LIVES.	1 000
PHILADELPHIA MUSEUM OF ART 2600 BENJAMIN FRANKLIN PARKWAY PHILADELPHIA, PA 19130	NONE		SUPPORT OF THE ORGANIZATION'S MISSION BY RAISING FUNDS TO PURCHASE WORKS OF ART AND CRAFT FOR THE PERMENANT COLLECTIONS OF THE PHILADELPHIA MUSEUM OF ART THROUGH AN ANNUAL CRAFT SHOW.	700.
SUPPORT CENTER FOR CHILD ADVOCATES 1900 CHERRY STREET PHILADELPHIA, PA 19103	NONE		SUPPORT SCCA'S MISSION TO ADVOCATE FOR VICTIMS OF CHILD ABUSE AND NEGLECT WITH THE GOAL OF SECURING SAFETY, JUSTICE, WELL-BEING AND A PERMANENT, NURTURING ENVIRONMENT FOR EVERY CHILD.	000 s
UNIVERSITY OF PENNSYLVANIA 3451 WALNUT STREET PHILADELPHIA, PA 19103	NONE		SUPPORT UNIVERSITY OF PENNSYLVANIA'S MISSION TO PROVIDE EDUCATION, RESEARCH AND CHARITABLE PATIENT CARE SERVICES,	
WISTAR INSTITUTE 3601 SPRUCE STREET PHILADELPHIA, PA 19104	NONE		SUPPORT OF WISTAR'S COMMITMENT TO CONDUCTING BASIC RESEARCH TO BENEFIT SOCIETY AND TO TRAINING THE NEXT GENERATION OF SCIENTISTS,	40 000
Total from continuation sheets 623641 04-01-16		16		

Page 11

## HOROWITZ FAMILY FOUNDATION

Part XV Supplementary Information

3a Grants and Contributions Paid During the Year Continuation of Purpose of Grant or Contribution

NAME OF RECIPIENT - ABINGTON HEALTH FOUNDATION

SUPPORT THE CHARITABLE PURPOSES AND TAX-EXEMPT ACTIVITIES OF ABINGTON

MEMORIAL HOSPITAL AND LANSDALE HOSPITAL CORPORATION RELATED TAX-EXEMPT

ORGANIZATIONS.

NAME OF RECIPIENT - AMERICAN FRIENDS OF JAMAICA INC

SUPPORT OF THE ORGANIZATION'S MISSION TO SUPPORT THE EFFORTS OF LOCAL

NON GOVERNMENTAL ORGANIZATIONS THAT PROVIDE ASSISTANCE TO JAMAICANS IN

NEED.

NAME\_OF\_RECIPIENT - BIRTHRIGHT ISRAEL FOUNDATION

SUPPORT OF THE ORGANIZATION'S MISSION TO BUILD A BASE OF FINANCIAL

SUPPORT TO ASSURE THAT THE GIFT OF A 10-DAY BIRTHRIGHT ISRAEL

EDUCATIONAL TRIP IS AVAILABLE TO EVERY JEWISH YOUNG ADULT.

NAME OF RECIPIENT - CEASEFIRE PA

SUPPORT CEASEFIRE PA'S MISSION FOR BETTER ENFORCEMENT OF CURRENT LAWS

AGAINST ILLEGAL GUN TRAFFICERS AND FOR STRONGER, COMMONSENSE HANDGUN

SAFETY LAWS THROUGH EDUCATION AND ADVOCACY IN COMMUNITIES ACROSS

PENNSYLVANIA.

NAME OF RECIPIENT - CHILDREN'S CRISIS TREATMENT CENTER

SUPPORT OF THE ORGANIZATION'S MISSION TO PASSIONATELY SERVE THE

EMOTIONAL NEEDS OF CHILDREN AND FAMILIES BEGINNING IN EARLY CHILDHOOD.

FORM 990-PF	DIVIDEND	S AND INTER	EST FROM	SECUR	ITIES	STATEMENT	1
SOURCE	GROSS E AMOUNT		REVI	A) ENUE BOOKS	(B) NET INVEST MENT INCOM		
HAVERFORD TRUST	13,047		0. 1	3,047.	13,047	•	
TO PART I, LINE 4 =	13,047	•	0. 1:	3,047.	13,047		
FORM 990-PF	0'	THER PROFES	SIONAL FI	EES		STATEMENT	2
DESCRIPTION		(A) EXPENSES PER BOOKS	(B) NET INV MENT IN	EST- COME	(C) ADJUSTED NET INCOME	(D) CHARITA PURPOSI	
ADVISORY FEES CUSTODIAL FEES		3,480. 397.	3	,480. 397.			0.
TO FORM 990-PF, PG 1	, LN 16C	3,877.	3	,877.			0.
FORM 990-PF		OTHER INV	ESTMENTS			STATEMENT	3
DESCRIPTION			LUATION ETHOD	воо	K VALUE	FAIR MARKE	Г
HAVERFORD TRUST COMP	<u></u>	COST		399,366.	455,5	455,525.	
TOTAL TO FORM 990-PF, PART II, LINE 13					399,366. 455,525.		