

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

Name of foundation THE TUTTLEMAN FOUNDATION		A Employer identification number 23-7715836	
Number and street (or P O box number if mail is not delivered to street address) 23 TETTEMER ROAD		Room/suite	B Telephone number (see instructions) (610) 667-2520
City or town, state or province, country, and ZIP or foreign postal code ERWINNA, PA 18920		C If exemption application is pending, check here <input type="checkbox"/>	
G Check all that apply <input type="checkbox"/> Initial return <input type="checkbox"/> Final return <input type="checkbox"/> Address change <input type="checkbox"/> Initial return of a former public charity <input type="checkbox"/> Amended return <input type="checkbox"/> Name change		D 1. Foreign organizations, check here <input type="checkbox"/> 2. Foreign organizations meeting the 85% test, check here and attach computation <input type="checkbox"/>	
H Check type of organization <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		E If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/>	
I Fair market value of all assets at end of year (from Part II, col (c), line 16) \$ 9,191,738	J Accounting method <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____ (Part I, column (d) must be on cash basis )	F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/>	

Part I Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions) )		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
Revenue	1 Contributions, gifts, grants, etc , received (attach schedule)	3,459,483			
	2 Check <input type="checkbox"/> if the foundation is <b>not</b> required to attach Sch B . . . . .				
	3 Interest on savings and temporary cash investments . . . . .	24,250	24,250		
	4 Dividends and interest from securities . . . . .	159,420	159,420		
	5a Gross rents . . . . .				
	b Net rental income or (loss) _____				
	6a Net gain or (loss) from sale of assets not on line 10	11,939			
	b Gross sales price for all assets on line 6a _____ 861,659				
	7 Capital gain net income (from Part IV, line 2) . . . . .		11,939		
	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 . . . . .	3,655,092	195,609		
	13 Compensation of officers, directors, trustees, etc				
	14 Other employee salaries and wages . . . . .				
	15 Pension plans, employee benefits . . . . .				
	16a Legal fees (attach schedule) . . . . .	19,534			
	b Accounting fees (attach schedule) . . . . .	4,551			
	c Other professional fees (attach schedule) . . . . .				
	17 Interest . . . . .				
	18 Taxes (attach schedule) (see instructions) . . . . .	8,220	7,020		
	19 Depreciation (attach schedule) and depletion . . . . .				
	20 Occupancy . . . . .				
	21 Travel, conferences, and meetings . . . . .	622			
	22 Printing and publications . . . . .				
	23 Other expenses (attach schedule) . . . . .	25,198	24,252		
	24 Total operating and administrative expenses. Add lines 13 through 23 . . . . .	58,125	31,272		0
	25 Contributions, gifts, grants paid . . . . .	687,074			687,074
	26 Total expenses and disbursements. Add lines 24 and 25	745,199	31,272		687,074
	27 Subtract line 26 from line 12				
	a Excess of revenue over expenses and disbursements	2,909,893			
	b Net investment income (if negative, enter -0-)		164,337		
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	End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value			
Assets	1	Cash—non-interest-bearing . . . . .					
	2	Savings and temporary cash investments . . . . .	128,749	1,614,059		1,614,059	
	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) . . . . .	4,363,524	5,369,920		5,794,023	
	c	Investments—corporate bonds (attach schedule) . . . . .	1,392,812	1,810,999		1,783,656	
	11	Investments—land, buildings, and equipment basis ▶ _____ Less accumulated depreciation (attach schedule) ▶ _____					
	12	Investments—mortgage loans . . . . .					
	13	Investments—other (attach schedule) . . . . .					
	14	Land, buildings, and equipment basis ▶ _____ Less accumulated depreciation (attach schedule) ▶ _____					
15	Other assets (describe ▶ _____)						
16	<b>Total assets</b> (to be completed by all filers—see the instructions Also, see page 1, item I)	5,885,085	8,794,978		9,191,738		
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	<b>Total liabilities</b> (add lines 17 through 22) . . . . .		0			
Net Assets or Fund Balances	<b>Foundations that follow SFAS 117, check here</b> <input type="checkbox"/> <b>and complete lines 24 through 26 and lines 30 and 31.</b>						
	24	Unrestricted . . . . .					
	25	Temporarily restricted . . . . .					
	26	Permanently restricted . . . . .					
	<b>Foundations that do not follow SFAS 117, check here</b> <input checked="" type="checkbox"/> <b>and complete lines 27 through 31.</b>						
	27	Capital stock, trust principal, or current funds . . . . .	5,885,085	8,794,978			
	28	Paid-in or capital surplus, or land, bldg , and equipment fund					
	29	Retained earnings, accumulated income, endowment, or other funds					
30	<b>Total net assets or fund balances</b> (see instructions) . . . . .	5,885,085	8,794,978				
31	<b>Total liabilities and net assets/fund balances</b> (see instructions) .	5,885,085	8,794,978				

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	5,885,085
2	Enter amount from Part I, line 27a . . . . .	2	2,909,893
3	Other increases not included in line 2 (itemize) ▶ _____	3	
4	Add lines 1, 2, and 3 . . . . .	4	8,794,978
5	Decreases not included in line 2 (itemize) ▶ _____	5	
6	Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30 .	6	8,794,978

**Part IV Capital Gains and Losses for Tax on Investment Income**

(a) List and describe the kind(s) of property sold (e g , real estate, 2-story brick warehouse, or common stock, 200 shs MLC Co )	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr )	(d) Date sold (mo , day, yr )
<b>1 a</b> PUBLICLY TRADED SECURITIES	P	2015-07-01	2016-03-03
<b>b</b> PUBLICLY TRADED SECURITIES	P	2014-07-01	2016-03-03
<b>c</b>			
<b>d</b>			
<b>e</b>			

(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)
<b>a</b> 95,679		105,268	-9,589
<b>b</b> 668,222		744,452	-76,230
<b>c</b>			
<b>d</b>			
<b>e</b>			

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	
<b>a</b>			-9,589
<b>b</b>			-76,230
<b>c</b>			
<b>d</b>			
<b>e</b>			

<b>2</b> Capital gain net income or (net capital loss)	<div style="border-left: 1px solid black; border-right: 1px solid black; padding: 0 5px;">           If gain, also enter in Part I, line 7            If (loss), enter -0- in Part I, line 7         </div>	<div style="border: 1px solid black; padding: 5px;"> <b>2</b> 11,939         </div>
<b>3</b> 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	<div style="border-left: 1px solid black; border-right: 1px solid black; padding: 0 5px;">           If gain, also enter in Part I, line 8, column (c) (see instructions) If (loss), enter -0-            in Part I, line 8         </div>	<div style="border: 1px solid black; padding: 5px;"> <b>3</b> </div>

**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	397,579	6,400,221	0 062120
2014	237,100	5,043,083	0 047015
2013	191,500	4,751,607	0 040302
2012	246,500	4,363,424	0 056492
2011	288,425	4,422,350	0 065220

<b>2</b> Total of line 1, column (d)	<b>2</b>	0 271149
<b>3</b> 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	<b>3</b>	0 054230
<b>4</b> Enter the net value of noncharitable-use assets for 2016 from Part X, line 5	<b>4</b>	6,602,030
<b>5</b> Multiply line 4 by line 3	<b>5</b>	358,028
<b>6</b> Enter 1% of net investment income (1% of Part I, line 27b)	<b>6</b>	1,643
<b>7</b> Add lines 5 and 6	<b>7</b>	359,671
<b>8</b> Enter qualifying distributions from Part XII, line 4	<b>8</b>	687,074

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)**

<b>1a</b>	Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter "N/A" on line 1 Date of ruling or determination letter _____ (attach copy of letter if necessary—see instructions)		
<b>b</b>	Domestic foundations that meet the section 4940(e) requirements in Part V, check here <input checked="" type="checkbox"/> and enter 1% of Part I, line 27b . . . . .	<b>1</b>	1,643
<b>c</b>	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col (b)		
<b>2</b>	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	<b>2</b>	
<b>3</b>	Add lines 1 and 2. . . . .	<b>3</b>	1,643
<b>4</b>	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	<b>4</b>	
<b>5</b>	<b>Tax based on investment income.</b> Subtract line 4 from line 3. If zero or less, enter -0- . . . . .	<b>5</b>	1,643
<b>6</b>	Credits/Payments		
<b>a</b>	2016 estimated tax payments and 2015 overpayment credited to 2016	<b>6a</b>	4,936
<b>b</b>	Exempt foreign organizations—tax withheld at source . . . . .	<b>6b</b>	
<b>c</b>	Tax paid with application for extension of time to file (Form 8868) . . . . .	<b>6c</b>	
<b>d</b>	Backup withholding erroneously withheld . . . . .	<b>6d</b>	
<b>7</b>	Total credits and payments. Add lines 6a through 6d. . . . .	<b>7</b>	4,936
<b>8</b>	Enter any <b>penalty</b> for underpayment of estimated tax. Check here <input type="checkbox"/> if Form 2220 is attached	<b>8</b>	
<b>9</b>	<b>Tax due.</b> If the total of lines 5 and 8 is more than line 7, enter <b>amount owed</b> . . . . . <b>▶</b>	<b>9</b>	
<b>10</b>	<b>Overpayment.</b> If line 7 is more than the total of lines 5 and 8, enter the <b>amount overpaid</b> . . . . . <b>▶</b>	<b>10</b>	3,293
<b>11</b>	Enter the amount of line 10 to be <b>Credited to 2017 estimated tax</b> <b>▶</b> 3,293 <b>Refunded</b> <b>▶</b>	<b>11</b>	

**Part VII-A Statements Regarding Activities**

	Yes	No
<b>1a</b> 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? . . . . .	<b>1a</b>	No
<b>b</b> Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for definition)? . . . . . <i>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</i>	<b>1b</b>	No
<b>c</b> Did the foundation file <b>Form 1120-POL</b> for this year? . . . . .	<b>1c</b>	No
<b>d</b> Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year <b>(1)</b> On the foundation <b>▶</b> \$ _____ <b>(2)</b> On foundation managers <b>▶</b> \$ _____		
<b>e</b> Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers <b>▶</b> \$ _____		
<b>2</b> Has the foundation engaged in any activities that have not previously been reported to the IRS? . . . . . <i>If "Yes," attach a detailed description of the activities</i>	<b>2</b>	No
<b>3</b> 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? <i>If "Yes," attach a conformed copy of the changes</i> . . . . .	<b>3</b>	No
<b>4a</b> Did the foundation have unrelated business gross income of \$1,000 or more during the year? . . . . .	<b>4a</b>	No
<b>b</b> If "Yes," has it filed a tax return on <b>Form 990-T</b> for this year? . . . . .	<b>4b</b>	
<b>5</b> Was there a liquidation, termination, dissolution, or substantial contraction during the year? . . . . . <i>If "Yes," attach the statement required by General Instruction T</i>	<b>5</b>	No
<b>6</b> 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? . . . . .	<b>6</b>	Yes
<b>7</b> Did the foundation have at least \$5,000 in assets at any time during the year? <i>If "Yes," complete Part II, col (c), and Part XV</i> . . . . .	<b>7</b>	Yes
<b>8a</b> Enter the states to which the foundation reports or with which it is registered (see instructions) <b>▶</b> PA _____		
<b>b</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? <i>If "No," attach explanation</i> .	<b>8b</b>	Yes
<b>9</b> 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)? <i>If "Yes," complete Part XIV</i> . . . . .	<b>9</b>	No
<b>10</b> Did any persons become substantial contributors during the tax year? <i>If "Yes," attach a schedule listing their names and addresses</i> . . . . .	<b>10</b>	Yes

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

<b>11</b>	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).	<b>11</b>		<b>No</b>
<b>12</b>	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)	<b>12</b>		<b>No</b>
<b>13</b>	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address <b>NONE</b>	<b>13</b>	<b>Yes</b>	
<b>14</b>	The books are in care of <b>THE FOUNDATION'S OFFICERS</b> Telephone no <b>(610) 294-9440</b>			

Located at **23 TETTEMER RD ERWINNA PA** ZIP+4 **189209259**

<b>15</b>	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of <b>Form 1041</b> —Check here . . . . . <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the year . . . . . <b>15</b>			
<b>16</b>	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 <b>▶</b>	<b>16</b>	<b>Yes</b>	<b>No</b>

**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.**

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

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

<p><b>5a</b> During the year did the foundation pay or incur any amount to</p> <p><b>(1)</b> Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))? <span style="float:right"><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</span></p> <p><b>(2)</b> Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive? <span style="float:right"><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</span></p> <p><b>(3)</b> Provide a grant to an individual for travel, study, or other similar purposes? <span style="float:right"><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</span></p> <p><b>(4)</b> Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? (see instructions). <span style="float:right"><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</span></p> <p><b>(5)</b> Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals? <span style="float:right"><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</span></p> <p><b>b</b> If any answer is "Yes" to 5a(1)–(5), did <b>any</b> 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)? <span style="float:right"><input type="checkbox"/></span></p> <p>Organizations relying on a current notice regarding disaster assistance check here. <span style="float:right">▶ <input type="checkbox"/></span></p> <p><b>c</b> 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? <span style="float:right"><input type="checkbox"/> Yes <input type="checkbox"/> No</span></p> <p><i>If "Yes," attach the statement required by Regulations section 53.4945–5(d)</i></p> <p><b>6a</b> Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? <span style="float:right"><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</span></p> <p><b>b</b> Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? <span style="float:right"><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</span></p> <p><i>If "Yes" to 6b, file Form 8870</i></p> <p><b>7a</b> At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? <span style="float:right"><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</span></p> <p><b>b</b> If yes, did the foundation receive any proceeds or have any net income attributable to the transaction? <span style="float:right"><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</span></p>	<p><b>5b</b></p> <p><b>6b</b></p> <p><b>7b</b></p>		
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**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
STEVEN M TUTTLEMAN 23 TETTEMER RD ERWINNA, PA 18920	TRUSTEE 1 00	0	0	0
DAVID Z TUTTLEMAN 23 TETTEMER RD ERWINNA, PA 18920	TRUSTEE 1 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	(d) Contributions to employee benefit plans and deferred compensation	Expense account, (e) other allowances
NONE				

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

## Part VIII

**3 Five hig**

Total number

## Part IX-A

List the foundation organizations and

---

**1**

**Part IX-B**

Describe the

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

<b>1</b>	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes		
<b>a</b>	Average monthly fair market value of securities.	<b>1a</b>	6,100,687
<b>b</b>	Average of monthly cash balances.	<b>1b</b>	601,882
<b>c</b>	Fair market value of all other assets (see instructions).	<b>1c</b>	0
<b>d</b>	<b>Total</b> (add lines 1a, b, and c).	<b>1d</b>	6,702,569
<b>e</b>	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation).	<b>1e</b>	
<b>2</b>	Acquisition indebtedness applicable to line 1 assets.	<b>2</b>	
<b>3</b>	Subtract line 2 from line 1d.	<b>3</b>	6,702,569
<b>4</b>	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions).	<b>4</b>	100,539
<b>5</b>	<b>Net value of noncharitable-use assets.</b> Subtract line 4 from line 3. Enter here and on Part V, line 4.	<b>5</b>	6,602,030
<b>6</b>	<b>Minimum investment return.</b> Enter 5% of line 5.	<b>6</b>	330,102

**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.)

<b>1</b>	Minimum investment return from Part X, line 6.	<b>1</b>	330,102
<b>2a</b>	Tax on investment income for 2016 from Part VI, line 5.	<b>2a</b>	1,643
<b>b</b>	Income tax for 2016 (This does not include the tax from Part VI).	<b>2b</b>	
<b>c</b>	Add lines 2a and 2b.	<b>2c</b>	1,643
<b>3</b>	Distributable amount before adjustments. Subtract line 2c from line 1.	<b>3</b>	328,459
<b>4</b>	Recoveries of amounts treated as qualifying distributions.	<b>4</b>	
<b>5</b>	Add lines 3 and 4.	<b>5</b>	328,459
<b>6</b>	Deduction from distributable amount (see instructions).	<b>6</b>	
<b>7</b>	<b>Distributable amount</b> as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1.	<b>7</b>	328,459

**Part XII Qualifying Distributions** (see instructions)

<b>1</b>	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
<b>a</b>	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26.	<b>1a</b>	687,074
<b>b</b>	Program-related investments—total from Part IX-B.	<b>1b</b>	
<b>2</b>	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes.	<b>2</b>	
<b>3</b>	Amounts set aside for specific charitable projects that satisfy the		
<b>a</b>	Suitability test (prior IRS approval required).	<b>3a</b>	
<b>b</b>	Cash distribution test (attach the required schedule).	<b>3b</b>	
<b>4</b>	<b>Qualifying distributions.</b> Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4.	<b>4</b>	687,074
<b>5</b>	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).	<b>5</b>	1,643
<b>6</b>	<b>Adjusted qualifying distributions.</b> Subtract line 5 from line 4.	<b>6</b>	685,431

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



**Part XIII Undistributed Income** (see instructions)

		(a) Corpus	(b) Years prior to 2015	(c) 2015	(d) 2016
<b>1</b>	Distributable amount for 2016 from Part XI, line 7				328,459
<b>2</b>	Undistributed income, if any, as of the end of 2016				
<b>a</b>	Enter amount for 2015 only. . . . .				
<b>b</b>	Total for prior years 20____, 20____, 20____				
<b>3</b>	Excess distributions carryover, if any, to 2016				
<b>a</b>	From 2011. . . . . 70,457				
<b>b</b>	From 2012. . . . . 32,145				
<b>c</b>	From 2013. . . . .				
<b>d</b>	From 2014. . . . .				
<b>e</b>	From 2015. . . . . 87,210				
<b>f</b>	<b>Total</b> of lines 3a through e. . . . .	189,812			
<b>4</b>	Qualifying distributions for 2016 from Part XII, line 4 ▶ \$ 687,074				
<b>a</b>	Applied to 2015, but not more than line 2a				
<b>b</b>	Applied to undistributed income of prior years (Election required—see instructions). . . . .				
<b>c</b>	Treated as distributions out of corpus (Election required—see instructions). . . . .				
<b>d</b>	Applied to 2016 distributable amount. . . . .				328,459
<b>e</b>	Remaining amount distributed out of corpus	358,615			
<b>5</b>	Excess distributions carryover applied to 2016 (If an amount appears in column (d), the same amount must be shown in column (a) )				
<b>6</b>	<b>Enter the net total of each column as indicated below:</b>				
<b>a</b>	Corpus Add lines 3f, 4c, and 4e Subtract line 5	548,427			
<b>b</b>	Prior years' undistributed income Subtract line 4b from line 2b . . . . .				
<b>c</b>	Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed. . . . .				
<b>d</b>	Subtract line 6c from line 6b Taxable amount—see instructions . . . . .				
<b>e</b>	Undistributed income for 2015 Subtract line 4a from line 2a Taxable amount—see instructions . . . . .				
<b>f</b>	Undistributed income for 2016 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2017 . . . . .				0
<b>7</b>	Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions). . . . .				
<b>8</b>	Excess distributions carryover from 2011 not applied on line 5 or line 7 (see instructions). . . . .	70,457			
<b>9</b>	<b>Excess distributions carryover to 2017.</b> Subtract lines 7 and 8 from line 6a . . . . .	477,970			
<b>10</b>	Analysis of line 9				
<b>a</b>	Excess from 2012. . . . . 32,145				
<b>b</b>	Excess from 2013. . . . .				
<b>c</b>	Excess from 2014. . . . .				
<b>d</b>	Excess from 2015. . . . . 87,210				
<b>e</b>	Excess from 2016. . . . . 358,615				

**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>b</b> 85% of line 2a . . . . .					
<b>c</b> Qualifying distributions from Part XII, line 4 for each year listed . . . . .					
<b>d</b> Amounts included in line 2c not used directly for active conduct of exempt activities . . . . .					
<b>e</b> Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c . . . . .					
<b>3</b> Complete 3a, b, or c for the alternative test relied upon					
<b>a</b> "Assets" alternative test—enter					
<b>(1)</b> Value of all assets . . . . .					
<b>(2)</b> Value of assets qualifying under section 4942(j)(3)(B)(i)					
<b>b</b> "Endowment" alternative test— enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed. . . . .					
<b>c</b> "Support" alternative test—enter					
<b>(1)</b> Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties) . . . . .					
<b>(2)</b> Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii). . . . .					
<b>(3)</b> Largest amount of support from an exempt organization					
<b>(4)</b> 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) )

**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)				
<b>a</b> <i>Paid during the year</i> See Additional Data Table				
<b>Total</b> . . . . .			<b>3a</b>	687,074
<b>b</b> <i>Approved for future payment</i>				
<b>Total</b> . . . . .			<b>3b</b>	

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	
<b>1</b> Program service revenue					
<b>a</b> _____					
<b>b</b> _____					
<b>c</b> _____					
<b>d</b> _____					
<b>e</b> _____					
<b>f</b> _____					
<b>g</b> Fees and contracts from government agencies					
<b>2</b> Membership dues and assessments. . . . .					
<b>3</b> Interest on savings and temporary cash investments . . . . .			14	24,250	
<b>4</b> Dividends and interest from securities. . . . .			14	159,420	
<b>5</b> Net rental income or (loss) from real estate					
<b>a</b> Debt-financed property. . . . .					
<b>b</b> Not debt-financed property. . . . .					
<b>6</b> Net rental income or (loss) from personal property					
<b>7</b> Other investment income. . . . .					
<b>8</b> Gain or (loss) from sales of assets other than inventory . . . . .			14	11,939	
<b>9</b> Net income or (loss) from special events					
<b>10</b> Gross profit or (loss) from sales of inventory					
<b>11</b> Other revenue <b>a</b> _____					
<b>b</b> _____					
<b>c</b> _____					
<b>d</b> _____					
<b>e</b> _____					
<b>12</b> Subtotal. Add columns (b), (d), and (e). . .				195,609	
<b>13 Total.</b> Add line 12, columns (b), (d), and (e). . . . .			<b>13</b>		195,609

(See worksheet in line 13 instructions to verify calculations )

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

[illegible]

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

- |  |  |            |           |
|--|--|------------|-----------|
| <b>1</b> Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?   |  | <b>Yes</b> | <b>No</b> |
| <b>a</b> Transfers from the reporting foundation to a noncharitable exempt organization of   |  |            |           |
| <b>(1)</b> Cash.   |  |            | <b>No</b> |
| <b>(2)</b> Other assets.   |  |            | <b>No</b> |
| <b>b</b> Other transactions  |  |            |           |
| <b>(1)</b> Sales of assets to a noncharitable exempt organization.   |  |            | <b>No</b> |
| <b>(2)</b> Purchases of assets from a noncharitable exempt organization.   |  |            | <b>No</b> |
| <b>(3)</b> Rental of facilities, equipment, or other assets.   |  |            | <b>No</b> |
| <b>(4)</b> Reimbursement arrangements.   |  |            | <b>No</b> |
| <b>(5)</b> Loans or loan guarantees.   |  |            | <b>No</b> |
| <b>(6)</b> Performance of services or membership or fundraising solicitations.   |  |            | <b>No</b> |
| <b>c</b> Sharing of facilities, equipment, mailing lists, other assets, or paid employees.   |  |            | <b>No</b> |
| <b>d</b> If the answer to any of the above is "Yes," complete the following schedule. Column <b>(b)</b> should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column <b>(d)</b> the value of the goods, other assets, or services received |  |            |           |

[illegible]

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

- | <b>b</b> If "Yes," complete the following schedule |                                 |  |
|--|---------------------------------|--|
| <b>(a)</b> Name of organization                    | <b>(b)</b> Type of organization | <b>(c)</b> Description of relationship |
|  |                                 |  |
|  |                                 |  |
|  |                                 |  |
|  |                                 |  |

<b>Sign Here</b>	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.		
	***** _____ Signature of officer or trustee	2017-07-18 _____ Date	***** _____ Title

May the IRS discuss this return with the preparer shown below  
 (see instr.)? ☒ **Yes** ☐ **No**

<b>Paid Preparer Use Only</b>	Print/Type preparer's name	Preparer's Signature	Date	Check if self-employed <input type="checkbox"/>	PTIN
	ROBERT W DOWNEY CPA		2017-07-18		P00198966
	Firm's name ► DOWNEY SPEVAK & ASSOCIATES LTD				Firm's EIN ► 23-2438473
	Firm's address ► 2 PENN CENTER PLAZA SUITE 803 PHILADELPHIA, PA 19102				Phone no (215) 564-1300

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)				
<b>a</b> Paid during the year				
FRIENDS OF THE ISRAEL DEFENSE FORCE FRIENDS OF THE ISRAEL DEFENSE FORCE 1430 BROADWAY STE 1301 NEW YORK, NY 10018	NONE	501(C)(3)	CHARITABLE, ETC	6,000
BBYO BBYO 800 8TH STREET NW WASHINGTON, DC 20001	NONE	501(C)(3)	CHARITABLE, ETC	6,000
WILMINGTON FRIENDS SCHOOL INC WILMINGTON FRIENDS SCHOOL INC 101 SCHOOL ROAD WILMINGTON, DE 19803	NONE	501(C)(3)	CHARITABLE, ETC	20,000
PHILADELPHIA MUSEUM OF ART PHILADELPHIA MUSEUM OF ART 2600 BENJ FRANKLIN PKWY PHILADELPHIA, PA 19130	NONE	501(C)(3)	CHARITABLE, ETC	3,000
CULTIVATE COMMUNITY CULTIVATE COMMUNITY 222 KAREN AVE UNIT 3305 LAS VEGAS, NV 89109	NONE	501(C)(3)	CHARITABLE, ETC	2,500
<b>Total . . . . .</b> ► <b>3a</b>				687,074


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)				
<b>a</b> <i>Paid during the year</i>				
CHILDREN'S MIRACLE NETWORK HOSPITAL CHILDREN'S MIRCALE NETWORK HOSPITAL 205 WEST 700 SOUTH SALT LAKE CITY, UT 84101	NONE	501(C)(3)	CHARITABLE, ETC	500
LEGACY YOUTH TENNIS AND EDUCATION LEGACY YOUTH TENNIS AND EDUCATION 4842 RIDGE AVE PHILADELPHIA, PA 19129	NONE	501(C)(3)	CHARITABLE, ETC	1,500
MAPS MAPS 1115 MISSION STREET SANTA CRUZ, CA 95060	NONE	501(C)(3)	CHARITABLE, ETC	10,000
MARIJUANA POLICY PROJECT MARIJUANA POLICY PROJECT 2370 CHAMPLIAN ST NW 12 WASHINGTON, DC 20009	NONE	501(C)(3)	CHARITABLE, ETC	5,000
PHILADELPHIA 30 PHILADELPHIA 30 30 SOUTH 15TH ST PHILADELPHIA, PA 19122	NONE	501(C)(3)	CHARITABLE, ETC	12,500
<b>Total</b> . . . . . <b>3a</b>				687,074

**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)				
<b>a</b> <i>Paid during the year</i>				
DOCTORS FOR CANNABIS REGULATION DOCTORS FOR CANNABIS REGULATION PO BOX 40183 WASHINGTON, DC 20016	NONE	501(C)(3)	CHARITABLE, ETC	5,000
JOHN BARTRAM ASSOCIATION JOHN BARTRAM ASSOCIATION 54TH ST LINDBERGH BLVD PHILADELPHIA, PA 19143	NONE	501(C)(3)	CHARITABLE, ETC	10,000
WHYY WHYY 150 N 6TH ST PHILADELPHIA, PA 19106	NONE	501(C)(3)	CHARITABLE, ETC	15,000
EPIDERMOLYSIS BULLOSA MED RES FD EPIDERMOLYSIS BULLOSA MED RES FD 2757 ANCHOR AVE LOS ANGELES, CA 90064	NONE	501(C)(3)	CHARITABLE, ETC	5,000
PEOPLE'S EMERGENCY CENTER PEOPLE'S EMERGENCY CENTER 3939 WARREN STREET PHILADELPHIA, PA 19104	NONE	501(C)(3)	CHARITABLE, ETC	1,500
<b>Total . . . . . ►</b> <b>3a</b>				687,074



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)				
<b>a</b> Paid during the year				
PAWS PAWS 100 NORTH 2ND ST PHILADELPHIA, PA 19106	NONE	501(C)(3)	CHARITABLE, ETC	2,500
MAKE THE WORLD BETTER FOUNDATION MAKE THE WORLD BETTER FOUNDATION 126 4TH AVE 9D BROOKLYN, NY 11217	NONE	501(C)(3)	CHARITABLE, ETC	5,000
PREVENTION POINT PHILADELPHIA PREVENTION POINT PHILADELPHIA PO BOX 60990 PHILADELPHIA, PA 19133	NONE	501(C)(3)	CHARITABLE, ETC	2,500
THE FUND FOR SCHOOL DIST OF PHILA THE FUND FOR SCHOOL DIST OF PHILA 30 S 17TH ST 11TH FL PHILADELPHIA, PA 19103	NONE	501(C)(3)	CHARITABLE, ETC	2,500
SOUTH HILLS CHURCH COMMUNITY SOUTH HILLS CHURCH COMMUNITY 9220 MANHATTEN ROAD HENDERSON, NV 89074	NONE	501(C)(3)	CHARITABLE, ETC	5,000
<b>Total . . . . .</b> ▶ <b>3a</b>				687,074

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)				
<b>a</b> <i>Paid during the year</i>				
LUTHERAN SETTLEMENT HOUSE LUTHERAN SETTLEMENT HOUSE 1340 FRANKFORD AVE PHILADELPHIA, PA 19125	NONE	501(C)(3)	CHARITABLE, ETC	1,500
CHABAD OF MORGANTOWN INC CHABAD OF MORGANTOWN INC 424 BROCKWAY AVE MORGANTOWN, WV 26501	NONE	501(C)(3)	CHARITABLE, ETC	5,000
DELAWARE COMMUNITY FOUNDATION DELAWARE COMMUNITY FOUNDATION PO BOX 1636 WILMINGTON, DE 19899	NONE	501(C)(3)	CHARITABLE, ETC	5,000
CENTER CITY DISTRICT FOUNDATION CENTER CITY DISTRICT FOUNDATION 660 CHESTNUT ST PHILADELPHIA, PA 19106	NONE	501(C)(3)	CHARITABLE, ETC	12,500
HENDERSON COMMUNITY FOUNDATION HENDERSON COMMUNITY FOUNDATION 2756 N GREEN VALLEY PKWY HENDERSON, NV 89014	NONE	501(C)(3)	CHARITABLE, ETC	8,000
<b>Total</b> . . . . . 				687,074
<b>3a</b>				

**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)				
<b>a</b> <i>Paid during the year</i>				
CANDLELIGHTERS CHILDHOOD CANCER FD CANDLELIGHTERS CHILDHOOD CANCER FD 8990 SPANISH RIDGE AVE LAS VEGAS, NV 89148	NONE	501(C)(3)	CHARITABLE, ETC	7,500
THOMAS JEFFERSON UNIVERSITY THOMAS JEFFERSON UNIVERSITY 125 S 9TH ST STE 700 PHILADELPHIA, PA 19107	NONE	501(C)(3)	CHARITABLE, ETC	125,000
STEPPINGSTONE SCHOLARS INC STEPPINGSTONE SCHOLARS INC 1301 CECIL B MOORE AVE PHILADELPHIA, PA 19122	NONE	501(C)(3)	CHARITABLE, ETC	20,000
SHINING HOPE FOR COMMUNITIES SHINING HOPE FOR COMMUNITIES 175 VARICK STREET 5TH FL NEW YORK, NY 10014	NONE	501(C)(3)	CHARITABLE, ETC	5,000
TRICYCLE TRICYCLE 89 FIFTH AVE STE 301 NEW YORK, NY 10023	NONE	501(C)(3)	CHARITABLE, ETC	10,000
<b>Total . . . . .</b> ► <b>3a</b>				687,074

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)				
<b>a</b> <i>Paid during the year</i>				
BARNARD COLLEGE BARNARD COLLEGE 3009 BROADWAY NEW YORK, NY 10027	NONE	501(C)(3)	CHARITABLE, ETC	5,000
PHILADELPHIA UNIVERSITY PHILADELPHIA UNIVERSITY 4201 HENRY AVE PHILADELPHIA, PA 19144	NONE	501(C)(3)	CHARITABLE, ETC	10,000
FREEDOM FOR ALL FREEDOM FOR ALL PO BOX 536 NEW YORK, NY 10014	NONE	501(C)(3)	CHARITABLE, ETC	2,500
HANG A TALE HANG A TALE 693 PUTNAM AVENUE BROOKLYN, NY 11221	NONE	501(C)(3)	CHARITABLE, ETC	1,500
NEW YORK PRESBYTERIAN FUND NEW YORK PRESBYTERIAN FUND 525 E 68TH ST BOX 123 NEW YORK, NY 10065	NONE	501(C)(3)	CHARITABLE, ETC	2,500
<b>Total . . . . .</b> ► <b>3a</b>				687,074

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)				
<b>a</b> <i>Paid during the year</i>				
JEWISH FEDERATION OF GREATER PHILA JEWISH FEDERATION OF GREATER PHILA 2100 ARCH STREET PHILADELPHIA, PA 19103	NONE	501(C)(3)	CHARITABLE, ETC	40,000
TEMPLE ADATH ISRAEL TEMPLE ADATH ISRAEL 250 NORTH HIGHLAND AVE MERION STATION, PA 19066	NONE	501(C)(3)	CHARITABLE, ETC	71,500
UNITED SYNAGOGUE OF CONS JUDASIM UNITED SYNAGOGUE OF CONS JUDASIM 120 BROADWAY STE 1540 NEW YORK, NY 10271	NONE	501(C)(3)	CHARITABLE, ETC	20,000
JEWISH FAM & CHILDREN'S SERVICES JEWISH FAM & CHILDREN'S SERVICES 2100 ARCH STREET 5TH FL PHILADELPHIA, PA 19103	NONE	501(C)(3)	CHARITABLE, ETC	20,000
INSIGHT MEDITATION SOCIETY INSIGHT MEDITATION SOCIETY 1230 PLEASANT STREET BARRE, MA 01005	NONE	501(C)(3)	CHARITABLE, ETC	3,324
<b>Total</b> . . . . . <b>3a</b>				687,074

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)				
<b>a</b> Paid during the year				
FRIENDS SEMINARY FRIENDS SEMINARY 222 EAST 16TH STREET NEW YORK, NY 10003	NONE	501(C)(3)	CHARITABLE, ETC	100,000
NY INSIGHT MEDITATION CENTER NY INSIGHT MEDITATION CENTER 28 WEST 27TH ST 10TH FL NEW YORK, NY 10001	NONE	501(C)(3)	CHARITABLE, ETC	5,000
MAGEE REHABILITATION HOSPITAL MAGEE REHABILITATION HOSPITAL 1513 RACE STREET PHILADELPHIA, PA 19102	NONE	501(C)(3)	CHARITABLE, ETC	40,000
FRACTURED ATLAS FRACTURED ATLAS 248 W 35TH ST 10TH FL NEW YORK, NY 10001	NONE	501(C)(3)	CHARITABLE, ETC	5,000
NYU TISCH SCHOOL OF ARTS NYU TISCH SCHOOL OF ARTS 721 BROADWAY 12TH FL NEW YORK, NY 10003	NONE	501(C)(3)	CHARITABLE, ETC	5,000
<b>Total . . . . .</b> ► <b>3a</b>				687,074

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)				
<b>a</b> <i>Paid during the year</i>				
FRIENDS OF DUANE PARK FRIENDS OF DUANE PARK 55 HUDSON STREET NEW YORK, NY 10013	NONE	501(C)(3)	CHARITABLE, ETC	250
URBAN ROOTS URBAN ROOTS 1233A NORTH 3RD ST PHILADELPHIA, PA 19122	NONE	501(C)(3)	CHARITABLE, ETC	12,500
JOYFUL HEART FOUNDATION JOYFUL HEART FOUNDATION 32 WEST 22ND ST 4TH FL NEW YORK, NY 10010	NONE	501(C)(3)	CHARITABLE, ETC	2,500
FRINGE ARTS FRINGE ARTS 140 N COLUMBUS BLVD PHILADELPHIA, PA 19106	NONE	501(C)(3)	CHARITABLE, ETC	15,000
JEFFERSON AWARDS FOUNDATION JEFFERSON AWARDS FOUNDATION 100 WEST STREET STE 125 WILMINGTON, DE 19801	NONE	501(C)(3)	CHARITABLE, ETC	5,000
<b>Total . . . . . ▶</b> <b>3a</b>				687,074

**TY 2016 Accounting Fees Schedule****Name:** THE TUTTLEMAN FOUNDATION**EIN:** 23-7715836

<b>Category</b>	<b>Amount</b>	<b>Net Investment Income</b>	<b>Adjusted Net Income</b>	<b>Disbursements for Charitable Purposes</b>
INDIRECT ACCOUNTING FEES	4,551			



**TY 2016 Investments Corporate Bonds Schedule****Name:** THE TUTTLEMAN FOUNDATION**EIN:** 23-7715836

<b>Name of Bond</b>	<b>End of Year Book Value</b>	<b>End of Year Fair Market Value</b>
DEUTSCHE BANK - SEE STATEMENT 8	1,810,999	1,783,656

**TY 2016 Investments Corporate Stock Schedule****Name:** THE TUTTLEMAN FOUNDATION**EIN:** 23-7715836

<b>Name of Stock</b>	<b>End of Year Book Value</b>	<b>End of Year Fair Market Value</b>
DEUTSCHE BANK-SEE STATEMENT 8	5,369,917	5,794,023
JP MORGAN-40 SHS NORTEL NETWORKS CRP	3	

**TY 2016 Legal Fees Schedule****Name:** THE TUTTLEMAN FOUNDATION**EIN:** 23-7715836

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
INDIRECT LEGAL FEES	19,534			

**TY 2016 Other Expenses Schedule****Name:** THE TUTTLEMAN FOUNDATION**EIN:** 23-7715836**Other Expenses Schedule**

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
EXPENSES				
INVEST COMMISSIONS/BROKER FE	24,252	24,252		
BANK FEES	30			
POSTAGE AND SHIPPING	46			
WEBSITE/COMPUTER	870			

**TY 2016 Taxes Schedule****Name:** THE TUTTLEMAN FOUNDATION**EIN:** 23-7715836

<b>Category</b>	<b>Amount</b>	<b>Net Investment Income</b>	<b>Adjusted Net Income</b>	<b>Disbursements for Charitable Purposes</b>
FOREIGN TAXES	7,020	7,020		
FORM 990-PF EXCISE TAX	1,200			

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

<b>Name of the organization</b> THE TUTTLEMAN FOUNDATION	<b>Employer identification number</b> 23-7715836
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**Organization type** (check one)

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

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

**General Rule**

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

**Special Rules**

☐ For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33<sup>1</sup>/<sub>3</sub>% 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).

<b>Name of organization</b> THE TUTTLEMAN FOUNDATION	<b>Employer identification number</b> 23-7715836
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<b>Part I</b> <b>Contributors</b> (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	THE TUTTLEMAN ART TRUST DTD 32103 23 TETTEMER ROAD  ERWINNA, PA189209259	 \$ 3,459,483  	<b>Person</b> <input checked="" type="checkbox"/> <b>Payroll</b> <input type="checkbox"/> <b>Noncash</b> <input type="checkbox"/> <small>(Complete Part II for noncash contributions )</small>
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
-	   	 \$  	<b>Person</b> <input type="checkbox"/> <b>Payroll</b> <input type="checkbox"/> <b>Noncash</b> <input type="checkbox"/> <small>(Complete Part II for noncash contributions )</small>
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
-	   	 \$  	<b>Person</b> <input type="checkbox"/> <b>Payroll</b> <input type="checkbox"/> <b>Noncash</b> <input type="checkbox"/> <small>(Complete Part II for noncash contributions )</small>
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
-	   	 \$  	<b>Person</b> <input type="checkbox"/> <b>Payroll</b> <input type="checkbox"/> <b>Noncash</b> <input type="checkbox"/> <small>(Complete Part II for noncash contributions )</small>
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
-	   	 \$  	<b>Person</b> <input type="checkbox"/> <b>Payroll</b> <input type="checkbox"/> <b>Noncash</b> <input type="checkbox"/> <small>(Complete Part II for noncash contributions )</small>
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
-	   	 \$  	<b>Person</b> <input type="checkbox"/> <b>Payroll</b> <input type="checkbox"/> <b>Noncash</b> <input type="checkbox"/> <small>(Complete Part II for noncash contributions )</small>
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
-	   	 \$  	<b>Person</b> <input type="checkbox"/> <b>Payroll</b> <input type="checkbox"/> <b>Noncash</b> <input type="checkbox"/> <small>(Complete Part II for noncash contributions )</small>

Employer identification number

23-7715836

<b>Part II</b>	<b>Noncash Property</b>
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[illegible]



<b>Name of organization</b> THE TUTTLEMAN FOUNDATION	<b>Employer identification number</b> 23-7715836
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<b>Part III</b>	<b>Exclusively</b> 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 <b>exclusively</b> religious, charitable, etc., contributions of <b>\$1,000 or less</b> 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	

# The Tuttleman Foundation EIA: 23-7715836

## Investments - Corporate Stocks

### Form 990-PF - Part II - Line 10b

Deutsche Bank ☒

Detailed Portfolio Information

As of December 31, 2016

Account Name: TF FDN  
Account Number: 247313  
Base Currency: USD

List of Holdings - Equities (STOCKS)

Quantity	Security Description Security ID	% of Category	Local Unit Cost	Price in USD Local Price	Adjusted Cost Basis in USD	Market Value in USD	Accrued Income in USD	Estimated Annual Income in USD	Annual Yield %
<b>Equity Investment Funds</b>									
50,344.95	HC CAPITAL TRUST COMMODITY RELATED SECURITIES PORTFOLIO TICKER: HCCSX	9.03%	USD 9.540	8.660	580,291.18 M	526,917.28		7,768.15	1.48%
57,302.51	HC CAPITAL TRUST EMERGING MKTS PORTFOLIO TICKER: HCEMX	15.36%	USD 17.480	15.550	1,001,740.33 M	891,054.03			
61,920.51	HC CAPITAL TRUST GROWTH PORTFOLIO TICKER: HCEOX	19.60%	USD 13.220	18.340	818,846.34 M	1,135,622.10		10,218.88	0.90%
23,006.48	HC CAPITAL TRUST INSTITUTIONAL INTERNATIONAL EQUITY PORTFOLIO TICKER: HCINX	3.72%	USD 9.390	9.360	216,022.06 M	216,340.65		8,211.75	2.88%
205,341.84	HC CAPITAL TRUST INTERNATIONAL EQUITY PORTFOLIO TICKER: HCEIX	33.60%	USD 9.340	9.480	1,918,872.44 M	1,948,640.61		56,283.66	2.89%
37,492.68	HC CAPITAL TRUST REAL ESTATE SECURITIES TICKER: HCREX	1.86%	USD 2.900	2.880	108,863.39 M	107,978.62		1,263.12	1.17%
61,293.34	HC CAPITAL TRUST VALUE EQUITY PORTFOLIO TICKER: HCVEX	16.76%	USD 14.140	18.920	725,278.70 M	970,470.07		18,875.95	1.95%
<b>Total Equity Investment Funds</b>			100.00%		5,369,917.44	5,794,023.36		100,618.51	1.74%
<b>Total Equities</b>					5,369,917.44	5,794,023.36		100,618.51	1.74%
<b>Total Accrued Income</b>									
<b>Total Equities including Accrued Income</b>						5,794,023.36			

A "M" follow

STMT # 8 1/2

# The Tuttleman Foundation EIN: 23-7715836

## Investments - Corporate Bonds

### Form 990-PF - Part II - Line 10c

Deutsche Bank ☒

Detailed Portfolio Information

As of December 31, 2016

Account Name: TF FDN  
Account Number: 247313  
Base Currency: USD

List of Holdings - Fixed Income (Bonds)

Quantity	Security Description Security ID	Moody's/S&P Rating	% of Category	Local Unit Cost	Price in USD Local Price	Adjusted Cost Basis in USD	Market Value In USD	Accrued Income in USD	Estimated Annual Income in USD	Yield to Maturity %
<b>Investment Funds</b>										
87,740.25	HC CAPITAL TRUST FIXED INCOME OPPORTUNITY PORTFOLIO Ticker: HCHYX		25.64%	USD 6.844	6.750	483,553.32 M	457,246.69		25,944.52	5.67%
41,301.08	HC CAPITAL TRUST THE INFLATION PROTECTED SECURITIES PORTFOLIO HCS Ticker: HCPBX		23.22%	USD 10.158	10.030	419,450.77 M	414,249.78		10,077.46	2.43%
34,972.72	HC CAPITAL TRUST US CORPORATE FIXED INCOME SECURITIES PORTFOLIO Ticker: HCSX		19.29%	USD 9.939	9.840	347,690.28 M	344,131.54		9,652.47	2.80%
30,854.14	HC CAPITAL TRUST US GOVERNMENT FIXED INCOME SECURITIES PORTFOLIO Ticker: HCUSX		16.76%	USD 8.932	9.750	304,470.04 M	298,877.85		4,230.27	1.47%
28,065.71	HC CAPITAL TRUST US MORTGAGE/ASSET BACKED FIXED INCOME SECURITIES PORTFOLIO Ticker: HCASX		15.09%	USD 9.831	9.590	275,904.36 M	269,150.18		7,577.74	2.82%
<b>Total Investment Funds</b>							1,783,856.02		57,482.46	3.22%
<b>Total Fixed Income</b>							1,783,856.02		57,482.46	3.22%
<b>Total Accrued Income</b>										
<b>Total Fixed Income including Accrued Income</b>							1,783,856.02	85.1		

A "M" following the amount displayed in the Adjusted Cost Basis column indicates multiple lots, a "U" indicates undetermined cost.  
For Investment Funds, Annual Yield is reported in the Yield to Maturity column