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Form **990-PF**

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

OMB No 1545-0052

2016

► 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.

Open to Public Inspection

For cal	endar	r year 2016 or ta	ax year beginnin	g	, 2016	, and ending		,			
Name of	oundatio	on					Α	Employer identification nur	nber		
		DUNDATION					<u> </u>	<u> 26-6476207 </u>			
Number a	nd stree	et (or P O box numbe	er if mail is not delivered	i to street a	address)	Room/suite	В	Telephone number (see instri	•		
		TH_AVE				8TH FLOOR	<u> </u>	<u>(212) 218-169</u>	<u> </u>		
			and ZIP or foreign pos	stal code		10000	С	If exemption application is	nending check here		
NEW						10003		il exemption application is pending, check here.			
G Che	eck all	that apply	Initial return		Initial return of a forme	er public charity	D	D 1 Foreign organizations, check here			
	Final return				Amended return		{				
			Address chan	ge	X Name change]	2 Foreign organizations mee here and attach computation	ling the 85% test, check		
H Che	eck typ	oe of organizatio	n X Sec	tion 501	(c)(3) exempt private for	ındatıon	ĺ	nere and attack computation	""····		
[Sec	ction 4947(a)(1)	nonexempt charit	able tru	st Other taxable p	rivate foundation	E	If private foundation status			
I Fair	market	value of all assets	at end of year	J Acc	ounting method X C	ash Accrual	1	under section 507(b)(1)(A)	check here		
		II, column (c), line 1d			Other (specify)	L	F	If the foundation is in a 60-	month termination —		
► ş		44,503	.714.	(Part I,	column (d) must be on o	ash basis)	1	under section 507(b)(1)(B)			
Part	A	nalysis of Re				I			(d) Dichurnomente		
			total of amounts	ın	(a) Revenue and	(b) Net investmen	t	(c) Adjusted net	(d) Disbursements for charitable		
	co	lumns (b), (c), ai	nd (d) may not ne	ces-	expenses per books	income		income	purposes		
		rily equal the am ee instructions))	nounts in column	(a)				•	(cash basis only)		
	1 4		ts etc received (attach sch	edule)	6,433,762.		ă.	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	16. 2. A 18. W. 17. A.		
<i>^</i> -	2	ră *		· ·	0,433,702.		77.				
SCANNED~W\$W#2JU2017	1		undation is not required to a	nacii SUT B	2 3 3 3	** · · · · · · · · · · · · · · · · · ·	¥ ~	**	, 423 AM MAD 19		
\sim	3	Interest on savings and to	emporary cash investments		8.		8.				
Z	4		om securities · · ·		37,478.	37,47	8.				
2	5 a	Gross rents									
	0	Net rental income or (loss)			. w. v. 4 a	* 15 * 1 * 1 * 1 * 1 * 1 * 1 * 1 * 1 * 1	> >	Winds North Colores	<u> </u>		
Ŕ	6 a		ale of assets not on line 10		16,606,162.	L-6a Stmt					
EŽ	l b	 Gross sales price for assets on line 6a 	^{rall} _18, <u>8</u> 57,	362.		A Kraikeau	44.2	College Colleg			
Ę	7	Capital gain net inco	ome (from Part IV, line :	2) .		16,606,136	21.	EIYEU M.			
(N)	8	Net short-term capital	*		W 6	3	<u> </u>	8			
εħ	9	Income modification	s		(S N	V.	7 7617 9			
<u>~</u> 5	10 a	Gross sales less returns and				₩ M M M	1	S			
2		allowances			4 7 7 0 80 E		GC	EN, OT JE			
~	"	goods sold				. %		- 1. 223 Mar. 1823			
	1		ach schedule)			W					
	11	Other income (attack									
			COME/(LOSS) - FRO		1,585.	1,58					
	12		through 11		23,078,995.	16,645,23	33.	ļ	1 · · · · · · · · · · · · · · · · · · ·		
	13		ficers, directors, trustee			ļ		·- ·- ·- ·- ·- ·- ·- ·- ·- ·- ·- ·- ·- ·			
	14	Pension plans, empl	alaries and wages .								
	15		chedule)L-16a	Stmt							
A D	16a	Legairees (attach so	ach sch) L-16b	Stmt.	7,488.	3,74			3,744.		
М	"			שושע	0.		0.	<u> </u>	0.		
O N	1	Olher professional fees (ļ ————			
PS	17	Interest	(see Instrs) FEDERAL .EX	 יוכף שאע	7,385.	7,38		 	0.		
E T R R A A	18	•	. ,	CTOP PLY	500,000.	ļ — — —	0.		0.		
A A	19	Depreciation (attach schedule) and deple						1			
L i	20										
N V	21	· ·	, and meetings					 			
A E	22		tions								
N X D P	23	Other expenses (att	ach schedule)		·-··-		_	 			
E N	1	See Line 23 St	mt		86,835.	85,32	28.		1,507.		
Š	24	Total operating and]					
S	1.	expenses Add lines	-		601,708.	96,45	57.		5,251. 3,281,000.		
	25	Contributions, gifts, gran	its pald		3,281,000.				3,281,000.		
	26	Total expenses and			2 222 -22						
		Add lines 24 and 25		• • •	3,882,708.	96,45) / .	ļ	3,286,251.		
	27	Subtract line 26 from Excess of revenue									
	, °	and disbursements	•		19,196,287.				ļ		
	b	Net investment inc	ome (if negative, enter	-0-)	,,,,	16,548,77	16.		<u> </u>		
			ne (if negative, enter -0	•	<u> </u>	20,040,77	<u>~·</u>		1		
			tion Ant Nation			·		L	<u> </u>		

Dari	- 11	Balance Sheets	Attached schedules and a column should be for end	amounts in the description	Beginning of year	End o	f year
raii		Dalance Sheets	(See instructions)	-or-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash non-interest-	bearing		58,277.	1,239,957.	1,239,957.
	2	Savings and tempora	ary cash investments		3,656,662.	4,308,440.	4,308,440.
	` 3	Accounts receivable					
		Less allowance for d	loubtful accounts			-	
	4	Pledges receivable.			,	*	/* /
		Less allowance for d	loubtful accounts				
	5	Grants receivable .					
	6	Receivables due from official		and other lions)			
	7	Other notes and loans rec		•	* ',	* * * * * * * * * * * * * * * * * * * *	** 1.2 Ps
Α	1	Less allowance for d				and the second s	
S	8	Inventories for sale o					
Ē	9	Prepaid expenses an					
T S		a Investments – US a		ŧ			
	100	obligations (attach so			{		
	l t	Investments — corporate	stock (attach schedule)	L-10b Stmt	24,200,000.	11,968,365.	11,409,816.
	1	Investments – corporate			, , , , , , , , , , , , , , , , , , , ,		
		Investments – land,			A 1/2 (%) - 38		
		equipment basis		10,750.			
		Less accumulated depred (attach schedule)		6,058.	5,409.	4,692.	4,692.
	12	Investments - mortg					
	13	Investments - other	(attach schedule)	.L-13 Stmt	14,632,326.	23,567,160.	27,540,809.
	14	Land, buildings, and Less accumulated depres	ciation				
	4.5	(
	15 16	Other assets (describ Total assets (to be of see the instructions	completed by all filers	; = ⁾ m I)	42,552,674.	41,088,614.	44,503,714.
	17				12/302/0711	11,000,017.	11,000 y 11
l	18		•				
B	19						
!	20			gualified persons			
ī	21			ıle)			
Ţ	22	Other liabilities (desc	· ·	,			
E S	23	Total liabilities (add		· '			
	 	Foundations that fo					
	24	and complete lines	0441 1-00	lines 30 and 31.		1	
N F E U	24	Unrestricted Temporarily restricted					'. **
T N D	26	Permanently restricted					, , , , , , , , , , , , , , , , , , ,
A	20					·	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\
SB		and complete lines	27 through 31.	17, check here . ► X			*
A S B S A E L	27				1 40 550 674	41 000 614	
T A S N	28	Capital stock, trust pi Paid-in or capital surplus,	•		42,552,674.	41,088,614.	
Č	1				<u> </u>		
O E R S	29	Retained earnings, accum			42.550.674	41 000 614	
K 3	30	Total liabilities and	net assets/fund bal	•	42,552,674.	41,088,614. 41,088,614.	
Par	t III	<u> </u>		ets or Fund Balanc			·
	Total	l net assets or fund ba	lances at beginning of	of year - Part II. column	(a), line 30 (must agree w	/ith	42,552,674.
2							19,196,287.
3		increases not included in the					17,150,201.
4							61,748,961.
5				NET UNREALIZED		5	20,660,347.
6					Part II, column (b), line 30		41,088,614.
•	· Uld	i nei asseis oi lunu ba	is investal city of year	,us inie 5) — F	and in, condition (b), time 30		1 41,000,014.

Part		osses for rax on investmen				,	-
		the kind(s) of property sold (e g , real use, or common stock, 200 shares ML		(b) How acq P — Purch D — Dona	ase	(C) Date acquired (mo , day, yr)	(d) Date sold (mo , dav yr)
1a (540,300 SHARES OF J	D.COM		D	0	1/01/09	12/31/16
b `@	0,000 SHARES OF COM	MERCEHUB INC - SERIES		P	0	5/23/15	11/23/16
C j	2,000 SHARES OF CO	MMERCEHUB INC - SERIES	C	P	0	5/23/15	10/25/16
d e	50,000 SHARES OF LI	BERTY VENTURES - SERIE	S A	P	. 0	5/23/15	11/07/16
	See Columns (a) thru (d)						
	(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other bas plus expense of sale			(h) Gain or (e) plus (f) mi	
а	16,553,059.			0.		16	5,553,059.
b	90,581.		68	3,375.			22,206.
С	181,135.			1,646.			46,489.
d	2,014,949.			1,949.			0.
е	See Columns (e) thru (h)			3,230.			-15,592.
		g gain in column (h) and owned by the		3,230.		/D. Carra (C-1	
	(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		gair than	(1) Gains (Col n minus col (k), bu or Losses (fro-	ut not less
а						16	5,553,059.
<u>u</u> b							22,206.
~ _							46,489.
U							0.
<u>u</u>	Con Columbia (1) that (1)						
	See Columns (i) thru (l) capital gain net income or (net c	apital loss) If gain, also e	enter in Part I, line 7 r -0- in Part I, line 7		2	1 /	-15,592.
3 N	let short-term capital gain or (lo	ss) as defined in sections 1222(5) and	_	ŀ			5,606,162.
	• •	•		1	ł		
lf 	gain, also enter in Part I, line 8	, column (c) (see instructions) If (loss), enter -0-		3		
Part		Section 4940(e) for Reduce					
		oundations subject to the section 494					
Was th		on 4942 tax on the distributable amou under section 4940(e) Do not compl	• • •	eriod?		Yes	X No
1 E	nter the appropriate amount in	each column for each year, see the in	structions before making ai	ny entries			
C	(a) Base period years alendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use ass	ets	((d) Distribution col (b) divided	
	2015	2,239,838.	21.25	1,857.			0.105395
	2014	2,780,767.		2,314.			0.142660
	2013	1,874,079.		5,681.			0.108168
	2012	1,014,317.		3,869.			0.435541
	2011	2,887.		9,205.			0.058673
2 1		2,007.			2		0.850437
3 A	verage distribution ratio for the	5-year base period — divide the total has been in existence if less than 5 ye	on line 2 by 5, or by the	Ì	3		0.170087
	·	ble-use assets for 2016 from Part X,		ſ	4	3	7,612,833.
5 N	fultiply line 4 by line 3				5		5,397,454.
6 E	Inter 1% of net investment inco						
		πe (1% of Part I, line 27b)			6		165,488.
7 A	odd lines 5 and 6			1			165,488. 6,562,942.
8 E	inter qualifying distributions from	me (1% of Part I, line 27b)			7		

Par	t VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 – see instruction	s)
1 a	Exempt operating foundations described in section 4940(d)(2), check here > and enter 'N/A' on line 1	***
	Date of ruling or determination letter (attach copy of letter if necessary – see instructions)	
b	Domestic foundations that meet the section 4940(e) requirements in Part V,	330,976.
	check here And enter 1% of Part I, line 27b	
С	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Parl I, line 12, col (b)	
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)	0.
3	Add lines 1 and 2	330,976.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	0.
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0	330,976.
6	Credits/Payments	
а	2016 estimated tax pmls and 2015 overpayment credited to 2016	
b	Exempt foreign organizations — tax withheld at source 6 b	是永剩了一
	Tax paid with application for extension of time to file (Form 8868)	
	Backup withholding erroneously withheld 6 d	
	Total credits and payments Add lines 6a through 6d	591,818.
8	Enter any penalty for underpayment of estimated tax. Check here	
9	Tax due If the total of lines 5 and 8 is more than line 7, enter amount owed	
10	Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	260,842.
11	overpayment if the 715 more than the lotter of the 57 order the amount overpare	200,042.
	Enter the amount of line 10 to be Credited to 2017 estimated tax	
		Yes No
1 a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?	1a X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for the definition)?	1 b X
	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	
С	Did the foundation file Form 1120-POL for this year?	1c X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year	
	(1) On the foundation • \$ (2) On foundation managers • \$	
	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers • \$	
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, or bylaws, or other similar instruments? If 'Yes,' attach a conformed copy of the changes	3 X
4 a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a X
b	If 'Yes,' has it filed a tax return on Form 990-T for this year?	4 b
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5 X
	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 state law remain in the governing instrument?	6 X
7	Did the foundation have at least \$5,000 in assets at any time during the year? If 'Yes,' complete Part II, col. (c), and Part XV	7 X
	Enter the states to which the foundation reports or with which it is registered (see instructions)	185
• • •	NEW YORK	(, e,) (;)
D	of the answer is 'Yes' to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? If 'No,' attach explanation	8 b X
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2016 or the taxable year beginning in 2016 (see instructions for Part XIV)? If 'Yes,' complete Part XIV	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
BAA		rm 990-PF (2016)

	1990-PF (2016) RISE8 FOUNDATION 26-647620	7	Р	age 5
Pa	rt VII-A Statements Regarding Activities (continued)			
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' attach schedule (see instructions)	11	Yes	No X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If 'Yes,' attach statement (see instructions)	12	ı	х
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Х	
14	The books are in care of JOHN T. ABLAMSKY Telephone no (516)	883	-430	6
15	Located at 63 REID AVENUE PORT WASHINGTON, NY ZIP + 4 11050 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 — Check here		, -	
16	At any time during calendar year 2016, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country?	16	Yes	No X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If 'Yes,'		Y .	· .
Da	enter the name of the foreign country	1 (1 4)	* %.	1 20 1
Pa	rt VII-B Statements Regarding Activities for Which Form 4720 May Be Required File Form 4720 if any Item is checked in the 'Yes' column, unless an exception applies.	× - 🚜]	Yes	No
4 -	•	24 Mg	162	NO
	During the year did the foundation (either directly or indirectly)			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes X No		7 A	\$ 7Z
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes X No		\$,28%	
	(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)?			
	(6) Agree to pay money or property to a government official? (Exception. Check 'No' if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days)			
ļ	b If any answer is 'Yes' to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	1 b	ممد شا	
	Organizations relying on a current notice regarding disaster assistance check here	3 ·	/ b 3	
(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?	د ما 1 c	21	X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5))			
i	At the end of tax year 2016, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2016? Yes X	, `		*
	If 'Yes,' list the years 20 , 20 , 20 , 20 , 20 , 20 , 20	٧.	k # 12	
ı	b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to	2 h	3 /2	
	all years listed, answer 'No' and attach statement – see instructions)	2 b	-	ļ
'	to the provisions of section 4942(a)(z) are being applied to any of the years listed in za, list the years here 20 , 20 , 20 , 20			
3	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?			
	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).	3 b		
4	a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?			V
	Grandanic purposes /	4 a	ļ <u>.</u>	X
	b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2016?	4 b		

Form 990-PF (2016) RISE8 FOUNDATION			26-647	76207 Page 6						
Part VII-B Statements Regarding Activit	ies for Which Form	4720 May Be Req		<u> </u>						
5 a During the year did the foundation pay or incur a	•									
(1) Carry on propaganda, or otherwise attempt t	o influence legislation (se	ection 4945(e))?	Yes X	No						
(2) Influence the outcome of any specific public on, directly or indirectly, any voter registratio	n drive?`	."		No .						
(3) Provide a grant to an individual for travel, stu	idy, or other similar purpo	oses?	· · Yes X	No 🚶						
(4) Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? (see instructions)										
(5) Provide for any purpose other than religious educational purposes, or for the prevention of	, charitable, scientific, lite of cruelty to children or ai	erary, or nımals?	· · · · Yes X	No (
b If any answer is 'Yes' to 5a(1)—(5), did any of the described in Regulations section 53 4945 or in a (see instructions)?	current notice regarding	disaster assistance		5b						
Organizations relying on a current notice regardi				§ 2.1						
c If the answer is 'Yes' to question 5a(4), does the tax because it maintained expenditure responsib	foundation claim exemplifility for the grant?	tion from the	Yes	No ()						
If 'Yes,' attach the statement required by Regula										
6 a Did the foundation, during the year, receive any on a personal benefit contract?	funds, directly or indirect	ly, to pay premiums	Yes X	No						
b Did the foundation, during the year, pay premiun If 'Yes' to 6b, file Form 8870	ns, directly or indirectly, o	on a personal benefit con	tract?	6b X						
7 a At any time during the tax year, was the foundation	ion a party to a prohibited	d tax shelter transaction?	' Yes 🛚 💮	No S						
b If 'Yes,' did the foundation receive any proceeds										
Part VIII Information About Officers, D and Contractors	irectors, Trustees,	Foundation Manag	gers, Highly Paid E	mployees,						
1 List all officers, directors, trustees, foundation										
(a) Name and address	(b)Title, and average hours per week devoted to position	(c)Compensation (If not paid, enter -0-)	(d)Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances						
FEROZ DEWAN 119 FIFTH AVE, 8TH FLOOR NEW YORK NY 10003	TRUSTEE 5.00	0.	0.	0.						
ERICA DEWAN	3.00	<u>~.</u>	<u>~</u>	<u>-</u>						
119 FIFTH AVE, 8TH FLOOR	TRUSTEE									
NEW YORK NY 10003	5.00	0.	0.	0.						
			ı							
2 Compensation of five highest-paid employed	es (other than those inc	luded on line 1 – see ii	nstructions). If none, e	nter 'NONE.'						
(a) Name and address of each employee paid more than \$50,000	(b)Title, and average hours per week devoted to position	(c) Compensation	(d)Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances						
NONE										
	1									
	l									

Form 990-PF (2016) RISE8 FOUNDATION	26-647	
Part VIII Information About Officers, Directors, Trustees, Foun and Contractors (continued)	dation Managers, Highly Paid E	mployees,
3 Five highest-paid independent contractors for professional services (see in	nstructions). If none, enter 'NONE.'	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONÈ		
		
Total number of others receiving over \$50,000 for professional services		None
Part IX-A Summary of Direct Charitable Activities	-	
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical organizations and other beneficiaries served, conferences convened, research papers produced, etc.	information such as the number of	Expenses
1 NOT APPLICABLE		
		0.
2		
	~	
3		
4		
Part IX-B Summary of Program-Related Investments (see instru		
Describe the two largest program-related investments made by the foundation during 1	the tax year on lines 1 and 2	Amount
2		
All other program-related investments. See instructions		
3		
Total. Add lines 1 through 3		
RAA	<u> </u>	Form 990-PF (2016)

Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, Part X see instructions) Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes 1 a 10,080,803. a Average monthly fair market value of securities 1 b b Average of monthly cash balances 8,259,249. 1 c c Fair market value of all other assets (see instructions) . 19,845,565. 1 d 38, 185, 617. e Reduction claimed for blockage or other factors reported on lines 1a and 8 2 2 Acquisition indebtedness applicable to line 1 assets . 3 Subtract line 2 from line 1d 38,185,617. Cash deemed held for charitable activities Enter 1-1/2% of line 3 4 572,784. 5 Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4. . . 37,612,833. Minimum investment return. Enter 5% of line 5 6 1,880,642. 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) Minimum investment return from Part X line 6 1 1,880,642. 2 a Tax on investment income for 2016 from Part VI, line 5. . . 2 a **b** Income tax for 2016 (This does not include the tax from Part VI)... 2 b 2 c 330,976. 3 Distributable amount before adjustments Subtract line 2c from line 1 3 549,666. Recoveries of amounts treated as qualifying distributions 4 5 1,549,666. 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 1,549,666. Part XII Qualifying Distributions (see instructions) Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes a Expenses, contributions, gifts, etc — total from Part I, column (d), line 26 1 a 3,286,251. 1 b 2 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 3 a **b** Cash distribution test (attach the required schedule) 3 b Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4. 4 3,286,251. Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income 5 Adjusted qualifying distributions. Subtract line 5 from line 4 6 3,286,251 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

BAA

Form 990-PF (2016)

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				
2	Undistributed income, if any, as of the end of 2016				1,549,666.
	a Enter amount for 2015 only				
	b Total for prior years 20 , 20 , 20			0.	
3	· — — —				
	a From 2011				
	b From 2012 965, 427.				
	c From 2013				
	d From 2014 1,884,306.			,	,
	e From 2015	<u> </u>	2 1	, , ,	,
	f Total of lines 3a through e	5,072,899.	٠	*	
4	Qualifying distributions for 2016 from Part				<u> </u>
	XII, line 4 \$3,286,251.	* _	* * * * *		
	Applied to 2015, but not more than line 2a		i.	mark der et man en mer en samme a sur han a sur hallen de la se	
	Applied to undistributed income of prior years	. * .			
	(Election required – see instructions)	\$4.	2200		
•	c Treated as distributions out of corpus (Election required — see instructions)				
(d Applied to 2016 distributable amount	41 14 14	185 - 286 - S		1,549,666.
(e Remaining amount distributed out of corpus	1,736,585.			# / 545 / 000.
5	Excess distributions carryover applied to 2016		20 20 E		
	(If an amount appears in column (d), the same amount must be shown in column (a))	1	- X X-		
	came amount must be snown in column (a))				
6	Enter the net total of each column as				
	indicated below:				
á	Corpus Add lines 3f, 4c, and 4e Subtract line 5	6,809,484.			
ı	Prior years' undistributed income Subtract line 4b from line 2b	₹	0.		
(Enter the amount of prior years' undistributed		0.	* **	· · · · · · · · · · · · · · · · · · ·
	income for which a notice of deficiency has been issued, or on which the section 4942(a)			*, .	
	tax has been previously assessed			. "*	
	Subtract line 6c from line 6b Taxable	. "			
	amount – see instructions		0.1	ŕ	
e	Undistributed income for 2015 Subtract line 4a from				
	line 2a Taxable amount — see instructions			0.	
f	Undistributed income for 2016 Subtract lines				
•	4d and 5 from line 1. This amount must be				
_	distributed in 2017				0.
′	Amounts treated as distributions out of corpus to satisfy requirements imposed by				
	section 170(b)(1)(F) or 4942(a)(3) (Flection				į
	may be required — see instructions)				
8	Excess distributions carryover from 2011 not applied on line 5 or line 7 (see instructions)				1
	·	427.			
9	Excess distributions carryover to 2017. Subtract lines 7 and 8 from line 6a	6,809,057.			
0	Analysis of line 9				
а	Excess from 2012 965, 427.				!
b	Excess from 2013 . 1,015,827.				!
	Excess from 2014 . 1,884,306.			ļ	
d	Excess from 2015 1,206,912.			ſ	
е	Excess from 2016 . 1,736,585.				1

Part XIV Private Operating Foundation	ione (see instri	ictions and Dart	VIII. A. guestion O	26-64/620	
1 a If the foundation has received a ruling or dete	ermination letter tha	t it is a private opera	ating foundation, and		N/A
is effective for 2016, enter the date of the ruli	•				4042(1)(5)
b Check box to indicate whether the foundation 2 a Enter the lesser of the adjusted net		Ing roundation descr		4942(J)(3) or	4942(j)(5)
income from Part I or the minimum investment return from Part X for each year listed	Tax year (a) 2016	(b) 2015	Prior 3 years (c) 2014	(d) 2013	(e) Total
b 85% of line 2a	·		 		
c Qualifying distributions from Part XII, line 4 for each year listed					
d Amounts included in line 2c not used directly for active conduct of exempt activities					
e Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the alternative test relied upon					
a 'Assets' alternative test — enter					
(1) Value of all assets			 		
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b 'Endowment' alternative test — enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed					
c 'Support' alternative test — enter					
(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties) · · · · · · ·					
(2) Support from general public and 5 or more exempt organizations as provided in section 4942()(3)(B)(iii)					
(3) Largest amount of support from an exempt organization					
(4) Gross investment income					
Part XV Supplementary Information assets at any time during the	e year — see in		foundation had	l \$5,000 or more	in
a List any managers of the foundation who hav close of any tax year (but only if they have co	e contributed more	than 2% of the total n \$5,000) (See sect	contributions receive ion 507(d)(2))	ed by the foundation b	efore the
FEROZ DEWAN; ERICA DEWAN					
b List any managers of the foundation who owr a partnership or other entity) of which the fou ${\rm N/A}$	n 10% or more of th ndation has a 10%	e stock of a corpora or greater interest	tion (or an equally lar	ge portion of the own	ership of
2 Information Regarding Contribution, Gran Check here X if the foundation only ma requests for funds If the foundation makes g complete items 2a, b, c, and d	kes contributions to	preselected charita	ble organizations and	I does not accept uns ons under other cond	solicited itions,
a The name, address, and telephone number of	r e-mail address of	the person to whom	applications should	be addressed	
b The form in which applications should be sub	mitted and informati	tion and materials th	ey should include		
c Any submission deadlines					
d Any restrictions or limitations on awards, such	n as by geographica	al areas, charitable f	ields, kinds of institut	ons, or other factors	
		·			

Part XV | Supplementary Information (continued)

3 Grants and Contributions Pard During the Ye		T	1	<u> </u>
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)	or substantial contributor	Tecipient		
a Paid during the year				
TEACH FOR AMERICA				1
315 West 36th Street 7TH FLOOR		509(a)1	l e e e e e e e e e e e e e e e e e e e	
NEW YORK NY 10018		170 (b) (1) (2)	EDUCATION	1,110,000.
CHARACTER LAB				
266 W. 37th St, 23rd floor		509 (a) 1		
NEW YORK NY 10018		170 (b) (1) (A)	EDUCATION	1,000,000.
CHILDREN'S HOPE				
11780 Borman Drive		509(a)1		
SAINT LOUIS MO 63141		170 (b) (1) (²)	HUMANITARIAN	5,000.
COLUMBIA CHILDREN GALA FUND				
630 West 168th Street		509 (a) 1	[
NEW YORK NY 10032		170 (b) (1) (2)	MEDICAL	50,000.
KHAN ACADEMY				
PO Box 1630		509(a)1		
MOUNTAINVIEW CA 94042		170 (b) (1) (A)	EDUCATION	50,000.
KIPP NEW YORK INC.				
201 E 144TH ST		509(a)1		
BRONX NY 10451		170 (b) (1) (A)	EDUCATION	325,000.
LIBERTY SCIENCE CENTER				
222 Jersey City Boulevard		509(a)1		
JERSEY CITY NJ 07305	ı	170 (b) (1) (A)	EDUCATION	1,000.
SINGAPORE AMERICAN SCHOOL FOUNDATION	1			
PO BOX 5910		509 (a) 1	1	
PRINCETON NJ 08543		170 (b) (1) (A)	EDUCATION	30,000.
THE BRIGHAM AND WOMENS HOSPITAL		l		
75 Francis St		509(a)1		
BOSTON MA 02115		170 (b) (1) (A)	MEDICAL	150,000.
See Line 3a statement				
				5.60.000
				560,000.
Total	<u> </u>	1	<u> </u> 	2 201 000
b Approved for future payment	 			3,281,000.
b Approved for future payment				
			1	
		1		
			1	
	1	1	1	I

nter aross :	amounts unless otherwise indicated	ACTIVITIES Unrelate	ed business income	Exclude	d by section 512, 513, or 514	(-)
Ü		(a) Business code	(b) Amount	(c) Exclu- sion	(d) Amount	(e) Related or exempt function income (See instructions)
•	im service revenue		<u> </u>	code		
a `				<u> </u>		
b				<u> </u>	·	
c				<u> </u>		
d						
e	- 			<u> </u>	<u> </u>	
f				_		<u></u>
-	and contracts from government agencies.			ļ	<u></u>	
2 Memb	ership dues and assessments		<u> </u>			
3 Interest	on savings and temporary cash investments	L		14	8.	
4 Divide	nds and interest from securities			14	37,478.	
	ntal income or (loss) from real estate	/; - ·,. ·	7			
a Debt-fi	inanced property			<u> </u>	' 	<u> </u>
b Not de	ebt-financed property			<u> </u>	<u></u>	<u> </u>
6 Net rent	tal income or (loss) from personal property					
7 Other	investment income			-		
8 Gain or	(loss) from sales of assets other than inventory			18	16,606,162.	
9 Net ind	come or (loss) from special events					
10 Gross	profit or (loss) from sales of inventory			Ţ		
11 Other	revenue	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	W - A . F . 30	283	18. 36. 36. 36. 37.	
a PARTI	NERSHIP INCOME/(LOSS) FROM K-1'S			14	1,585.	
b	Butter Troots (2000) Troots Troots			†—- <u>-</u> -		
С						
d						
е						
40 =	al Add columns (b), (d), and (e)	* 300 5		1 2 1	16 645 222	
32 Subtot	ai Add Columns (b), (d), and (e)	l . * *		3	I IN. NA 7 / 3 3	
	Add line 12, columns (b), (d), and (e)				16,645,233.	16,645,233.
13 Total.		- · · · ·		<u> </u>		16,645,233.
13 Total. See worksh	Add line 12, columns (b), (d), and (e)				13	16,645,233.
13 Total. See worksh Part XVI-	Add line 12, columns (b), (d), and (e) eet in line 13 instructions to verify calculations	Accomp	lishment of Exem	pt Purp	ooses	the
13 Total. See worksh Part XVI- Line No.	Add line 12, columns (b), (d), and (e)	Accomp	lishment of Exem	pt Purp	ooses	the
13 Total. See worksh Part XVI- Line No.	Add line 12, columns (b), (d), and (e)	Accomp	lishment of Exem	pt Purp	ooses	the
13 Total. See worksh Part XVI- Line No.	Add line 12, columns (b), (d), and (e)	Accomp	lishment of Exem	pt Purp	ooses	the
13 Total. See worksh Part XVI- Line No.	Add line 12, columns (b), (d), and (e)	Accomp	lishment of Exem	pt Purp	ooses	the
13 Total. See worksh Part XVI- Line No.	Add line 12, columns (b), (d), and (e)	Accomp	lishment of Exem	pt Purp	ooses	the
13 Total. See worksh Part XVI- Line No.	Add line 12, columns (b), (d), and (e)	Accomp	lishment of Exem	pt Purp	ooses	the
13 Total. See worksh Part XVI- Line No.	Add line 12, columns (b), (d), and (e)	Accomp	lishment of Exem	pt Purp	ooses	the
13 Total. See worksh Part XVI- Line No.	Add line 12, columns (b), (d), and (e)	Accomp	lishment of Exem	pt Purp	ooses	the
13 Total. See worksh Part XVI- Line No.	Add line 12, columns (b), (d), and (e)	Accomp	lishment of Exem	pt Purp	ooses	the
13 Total. See worksh Part XVI- Line No.	Add line 12, columns (b), (d), and (e)	Accomp	lishment of Exem	pt Purp	ooses	the
13 Total. See worksh Part XVI- Line No.	Add line 12, columns (b), (d), and (e)	Accomp	lishment of Exem	pt Purp	ooses	the
13 Total. See worksh Part XVI- Line No.	Add line 12, columns (b), (d), and (e)	Accomp	lishment of Exem	pt Purp	ooses	the
13 Total. See worksh Part XVI- Line No.	Add line 12, columns (b), (d), and (e)	Accomp	lishment of Exem	pt Purp	ooses	the
13 Total. See worksh Part XVI- Line No.	Add line 12, columns (b), (d), and (e)	Accomp	lishment of Exem	pt Purp	ooses	the
13 Total. See worksh Part XVI- Line No.	Add line 12, columns (b), (d), and (e)	Accomp	lishment of Exem	pt Purp	ooses	the
13 Total. See worksh Part XVI- Line No.	Add line 12, columns (b), (d), and (e)	Accomp	lishment of Exem	pt Purp	ooses	the
13 Total. See worksh Part XVI- Line No.	Add line 12, columns (b), (d), and (e)	Accomp	lishment of Exem	pt Purp	ooses	the
13 Total. See worksh Part XVI- Line No.	Add line 12, columns (b), (d), and (e)	Accomp	lishment of Exem	pt Purp	ooses	the
13 Total. See worksh Part XVI- Line No.	Add line 12, columns (b), (d), and (e)	Accomp	lishment of Exem	pt Purp	ooses	the
13 Total. See worksh Part XVI- Line No.	Add line 12, columns (b), (d), and (e)	Accomp	lishment of Exem	pt Purp	ooses	the
13 Total. See worksh Part XVI- Line No.	Add line 12, columns (b), (d), and (e)	Accomp	lishment of Exem	pt Purp	ooses	the
13 Total. See worksh Part XVI- Line No.	Add line 12, columns (b), (d), and (e)	Accomp	lishment of Exem	pt Purp	ooses	the
13 Total. See worksh Part XVI- Line No.	Add line 12, columns (b), (d), and (e)	Accomp	lishment of Exem	pt Purp	ooses	the
13 Total. See worksh Part XVI- Line No.	Add line 12, columns (b), (d), and (e)	Accomp	lishment of Exem	pt Purp	ooses	the

Form 990-PF (2016) RISE8 FOUNDATION 26-6476207 Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

											Yes	No
describe	organization directly or ed in section 501(c) of to political organization	the Code (other	age in any of er than section	the followi n 501(c)(3)	ing with any organizati	y other ons) or	organization in section 527,					
J	rs from the reporting for		noncharitable	exempt or	roanization	of					: ,	
	sh			•	_					1 a (1)	احتضم	X
` '	erassets								-	1 a (2)		X
	ansactions								L	,	\$** %\$	
*	es of assets to a nonch	naritable evem	nt organizatio	ın					aice	1 b (1)		X
	chases of assets from								_	1 b (2)		X
	ital of facilities, equipm									1 b (3)		X
`	mbursement arrangem	•								1 b (4)		X
	ns or loan guarantees									1 b (5)		X
- 1	formance of services of									1 b (6)		X
	of facilities, equipmen	· ·	•	=						1 c		X
- Onamig	or racinties, equipmen	t, mailing nots,	Other assets,	, or paid cr	ripioyees.							
the good	iswer to any of the abo ds, other assets, or sei saction or sharing arra	rvices given by	the reporting	foundatio	n If the fou	ındatioi	n received less t	han fair marke	t value in	e of		
(a) Line no	(b) Amount involved	(c) Name	of noncharitable	exempt orga	nızatıon	(0	d) Description of tra	nsfers, transactio	ns, and share	ng arrang	ements	5
						_						
		·										
												
									 			
											_	
											_	
												
				 								
describe	oundation directly or inc ed in section 501(c) of complete the following	the Code (other	d with, or rela er than section	ated to, one n 501(c)(3)	e or more to)) or in sect	ax-exer ion 527	mpt organization	s 		Yes	X	No
	ı) Name of organization		(b) T	ype of org	anization			c) Description	of relations	ship		
								-				
	-							-				
Under p	penalties of perjury, I declare and complete Declaration of	that I have examine	ed this return, inclu an taxpaver) is ba	uding accompa	anying schedu	les and st	tatements, and to the	best of my knowled	ige and belief,	, it is true,		
Sign	0 ^	propercy (outer an	3// (d/pa) d/ / 10 da	000 000 000	THE COLUMN	оп рісраі	ci rias any kilomicagi	•	П	May the IF	RS discu	ss
Here	7 2)	_		111/	00/17		mp.u.cmpp		11	this return preparer s	with the	. 1
Signa	ture of officer or trustee		A	Date	09/17		TRUSTEE Title		³	(see instru	ictions)2	<u>'</u>
	Print/Type preparer's name	<u>-</u>	Pepa	-			Date	10:	l l, leti		Yes	No
Doid			_[1]	TYTT	N (X)_	1)	.	Check self-employ	U"		0.61	•
Paid	John T. Abla					الريحية	11/09/17	1 '	en IB(01379	ΩρΙ	
Preparer			lamsky	MBA, C	CPA, PF	<u>s</u>		Firm's EIN				
Use Only		3 Reid Av					1050 3503	- Bhong as	/F16\ :		200	
BAA	<u> Р</u>	<u>ort Washi</u>	ngton		<u>N</u>	Y 1:	<u>1050-3507</u>	Phone no		883-4		
DAM									Fo	orm 990	-PF (2	(110)

Schedule B

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Schedule of Contributors

► Attach to Form 990, Form 990-EZ, or Form 990-PF.
► Information about Schedule B (Form 990, 990-EZ, 990-PF) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2016

Name of the organization		Employer Identification number					
RISE8 FOUNDATION		26-6476207					
Organization type (check one)							
Filers of:	Section:						
Form 990 or 990-EZ	501(c)() (enter numbe	501(c)() (enter number) organization					
	4947(a)(1) nonexempt charita	4947(a)(1) nonexempt charitable trust not treated as a private foundation					
	527 political organization						
Form 990-PF	X 501(c)(3) exempt private foun	dation					
	4947(a)(1) nonexempt charita	able trust treated as a private foundation					
	501(c)(3) taxable private foun	dation					
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	e General Rule and a Special Rule. See instructions					
General Rule X For an organization filing Form 99 property) from any one contributor	0, 990-EZ, or 990-PF that received, during the Complete Parts I and II. See instructions for C	year, contributions totaling \$5,000 or more (in money or determining a contributor's total contributions					
Special Rules							
under sections 509(a)(1) and 170(received from any one contributor.	b)(1)(A)(vi), that checked Schedule A (Form 99	t met the 33-1/3% support test of the regulations 90 or 990-EZ), Part II, line 13, 16a, or 16b, and that atter of (1) \$5,000 or (2) 2% of the amount on (i)					
during the year, total contributions	ection 501(c)(7), (8), or (10) filing Form 990 or of more than \$1,000 exclusively for religious, cruelty to children or animals. Complete Parts						
during the year, contributions excl \$1,000 If this box is checked, enti- charitable, etc., purpose Don't coi	ection 501(c)(7), (8), or (10) filing Form 990 or usively for religious, charitable, etc., purposes, er here the total contributions that were receive mplete any of the parts unless the General Ruis, charitable, etc., contributions totaling \$5,000	ed during the year for an exclusively religious, le applies to this organization because					
990-PF), but it must answer 'No' on P	vered by the General Rule and/or the Special F art IV, line 2, of its Form 990, or check the box neet the filing requirements of Schedule B (For	Rules doesn't file Schedule B (Form 990, 990-EZ, or on line H of its Form 990-EZ or on its Form 990-PF, m 990-90-EZ or 990-PF)					

•			
Schedule Name of org	B (Form 990, 990-EZ, or 990-PF) (2016)	Page Employe	1 of 1 of Part
	FOUNDATION	1	476207
Part I	Contributors (see instructions) Use duplicate copies of Part I if additional space	e is needed	
(a)` Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	FEROZ DEWAN 119 FIFTH AVE, 8TH FLOOR	\$2 <u>0</u> ,0 <u>00</u> .	Person X Payroll Noncash
	NEW YORK NY 10003	_	(Complete Part II for noncash contributions)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	FEROZ DEWAN 119 FIFTH AVE, 8TH FLOOR NEW YORK NY 10003	- _\$6 <u>_413</u> _7 <u>62</u> .	Person X Payroll Noncash X (Complete Part II for noncash contributions)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		- \$	Person Payroll Complete Part II for noncash contributions)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		- - - -	Person Payroll Complete Part II for noncash contributions)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		_	Person

Noncash

(Complete Part II for noncash contributions)

1 to

2 of Part II

Name of organization

Employer identification number

RISE8 FOUNDATION

26-6476207

(a) No.	(b)	(c)	(d)
from Part I	Description of noncash property given	(c) FMV (or estimate) (see instructions)	Date received
	50,000 SHARES OF JD.COM		
2			
		\$1,284,500.	12/21/16
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
2	600 SHARES OF JD.COM		
2			
		515,420.	12/22/16
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
2	59,400 SHARES OF JD.COM		
-		6 1 500 640	10/02/16
		\$1,520,640.	12/23/16
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
2	60,000 SHARES OF JD.COM		
=		\$ 1.540.000	10/07/16
		\$1,549,800.	12/2//16
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
2_	41,200 SHARES OF JD.COM		
=		5 1 067 400	10/00/16
		\$1,067,492.	12/28/16
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
2	25,000 SHARES OF JD.COM		
<u></u> -			
	ļ	\$643,500.	12/29/16

Page

2 to

of Part II

Name of organization

RISE8 FOUNDATION

26-6476207

Employer identification number

Part II Noncash Property (see instructions) Use duplicate copies of Part II if additional space is needed (d) Date received (a) No. (b) Description of noncash property given (c) FMV (or estimate) (see instructions) from Part I OF JD.COM 2___ 332,410. 12/30/16 (d) Date received (c) FMV (or estimate) (see instructions) (a) No. (b) Description of noncash property given from Part I (a) No. from (d) (b) (c) FMV (or estimate) Description of noncash property given Date received (see instructions) Part I (a) No. from Part I (b) Description of noncash property given (c) FMV (or estimate) (see instructions) (d) Date received (a) No. from (b) Description of noncash property given (d) Date received (c) FMV (or estimate) (see instructions) Part I (a) No. from Part I (b) Description of noncash property given (c) FMV (or estimate) (see instructions) (d) Date received

Net Gain or Loss From Sale of Assets

2016

Name Employer Identification Number RISE8 FOUNDATION 26-6476207 Asset Information: Description of Property 640,300 SHARES OF JD.COM Date Acquired . 01/01/09 How Acquired . . Donated Date Sold . . 12/31/16 Name of Buyer . . Sales Price . 16,553,059. Valuation Method . . . Sales Expense . Total Gain (Loss) . 16,553,059. Accumulation Depreciation . . Description of Property 6,000 SHARES OF COMMERCEHUB INC - SERIES A Date Acquired . 05/23/16____ How Acquired . . Purchased Date Sold . 11/23/16 Name of Buyer . . Cost or other basis (do not reduce by depreciation) . . . 68, 375. Sales Price 90,581. Sales Expense . . Valuation Method . . . Total Gain (Loss) . . 22,206. Accumulation Depreciation . . . Description of Property 12,000 SHARES OF COMMERCEHUB INC - SERIES C How Acquired . . . Purchased Date Acquired 05/23/16 Date Sold . . . 10/25/16 Name of Buyer . . . Sales Price . . 181, 135. Cost or other basis (do not reduce by depreciation) . . . 134, 646. Sales Expense . . Valuation Method . . . Total Gain (Loss) . . 46,489. Accumulation Depreciation . . Description of Property 60,000 SHARES OFF LIBERTY VENTURES - SERIES A Date Acquired . 05/23/16 How Acquired . . Purchased Date Sold . . 11/07/16 Name of Buyer . . Sales Price . . 2,014,949. Cost or other basis (do not reduce by depreciation) . . . 2,014,949. Sales Expense . . Valuation Method . . . Total Gain (Loss) . O. Accumulation Depreciation . . . Description of Property 801 WEST CAPITAL FUND LP - FROM K-1 Date Acquired How Acquired . . . Date Sold . . Name of Buyer . . . Sales Price . . Cost or other basis (do not reduce by depreciation) . . . 2,036. Sales Expense . . Valuation Method . . Total Gain (Loss) . -2,036. Accumulation Depreciation . . Description of Property 801 WEST CAPITAL FUND LP - FROM K-1 Date Acquired How Acquired Date Sold . . . Name of Buyer . . Sales Price . . 5,225. Cost or other basis (do not reduce by depreciation) . . . Valuation Method . . Sales Expense . 5,225. Accumulation Depreciation . . Total Gain (Loss) . Description of Property ADW CAPITAL PARTNERS LP - FROM K-1 Date Acquired Date Sold . . Name of Buyer . Cost or other basis (do not reduce by depreciation) . . . Sales Price . . 12,398. Sales Expense . . Valuation Method . . . Total Gain (Loss) . 12,398. Accumulation Depreciation . . . Description of Property See Net Gain or Loss from Sale of Assets How Acquired . . Date Acquired . Date Sold . . . Name of Buyer . . Cost or other basis (do not reduce by depreciation) . . . Sales Price . . Sales Expense . . Valuation Method . . . Total Gain (Loss) . . _____ Accumulation Depreciation . . .

RISE8 FOUNDATION 26-6476207 1

Form 990-PF, Part I, Lines 6a Net Gain or Loss from Sale of Assets
Asset Information:
Description of Property ADW CAPITAL PARTNERS LP - FROM K-1
Business Code . Exclusion Code 18
Date Acquired How Acquired
Date Sold Name of Buyer
Check Box, if Buyer is a Business
Sales Price Cost or other basis (do not reduce by depreciation)
Sales Expense Valuation Method
Total Gain (Loss)31, 194. Accumulated Depreciation
Description of Property ARENA HOLDINGS GROUP LP - FROM K-1
Business Code . Exclusion Code 18
Date Acquired
Date Sold Name of Buyer
Check Box, if Buyer is a Business
Sales Price 15. Cost or other basis (do not reduce by depreciation) .
Sales Expense . Valuation Method
Total Gain (Loss)

Form 990-PF, Page 1, Part I, Line 23 Line 23 Stmt

Other expenses	Rev/Exp Book	Net Inv Inc	Adj Net Inc	Charity Disb
BANK CHARGES	40.	0.		40.
FILING FEES	750.	_0.		750.
OTHER DEDUCTIONS - FROM K-1'S	69,412.	69,412.		0.
INVESTMENT EXPENSES	15,916.	15,916.		0.
Amortization	717.	0.		717.

Total 86,835. 85,328. 1,507.

Form 990-PF, Part IV, Capital Gains and Losses for Tax on Investment Income Columns (a) thru (d)

(a) List and describe the kind(s) of property sold (e g , real estate, 2-story brick warehouse, or common stock, 200 shs MLC Company)	(b) How acquired P — Purchase D — Donation	(c) Date acquired (month, day, year)	(d) Date sold (month, day, year)
801 WEST CAPITAL FUND LP - FROM K-1	P	09/01/13	12/31/16
801 WEST CAPITAL FUND LP - FROM K-1 ADW CAPITAL PARTNERS LP - FROM K-1	P P	09/01/13 05/01/15	12/31/16 12/31/16
ADW CAPITAL PARTNERS LP - FROM K-1 ARENA HOLDINGS GROUP LP - FROM K-1	P	05/01/15 12/30/15	12/31/16 12/31/16

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

(e) ross 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)
0.		2,036.	-2,036.
5,225.		0.	5,225.
2,398.		0.	12,398.
0.		31,194.	-31,194.
15.		0.	15.
Total		33,230.	-15,592.

Form 990-PF, Part IV, Capital Gains and Losses for Tax on Investment Income Columns (i) thru (I)

Complete only for asse	(I) Gains (Column (h)		
(i) Fair Market Value as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of column (i) over column (j), if any	gain minus column (k), but not less than -0-) or losses (from column (h))
			-2,036. 5,225. 12,398. -31,194.

Form 990-PF, Part IV, (Columns (i) thru (I)	Capital Gains a	and Losses for T	Tax on Investm	ent Income		Continued
Complete only for asse by the foundation on 12		n ın column (h)	and owned)	(I) (Column (h)
(i) Fair Market Value as of 12/31/69	Adjuste	(j) (k) gain minus column (l) but not less than -0- Adjusted basis Excess of column (i) or losses (from as of 12/31/69 over column (j), if any column (h))			less than -0-) osses (from	
						15.
Total	-					-15,592.
Form 990-PF, Page 11 Line 3a statement	, Part XV, line	3a				
Recipie		If recipient is an individua	l, dation	Purpo grant or co	ose of	Person or Business
Name and ac (home or bus	ddress	1	I, dation status o of re-	,		1
Name and ad (home or bus	ddress siness)	an individua show any relationship t any foundatio manager or substantial	I, dation status o of re-	,		Business Checkbox
Name and ac (home or bus	ddress siness)	an individua show any relationship t any foundatio manager or substantial	dation status o of re- on cipient	,		Business Checkbox Amount
Name and action (home or buse) Paid during the year he Trustees of Princet One Nassau Hall	ddress siness) r con University	an individua show any relationship t any foundatio manager or substantial	dation status of recon cipient 509(a) 1	grant or co	ontribution	Business Checkbox Amount Person or Business X
Name and achieve of business of Princet Die Nassau Hall	ddress siness) r con University NJ 08544	an individua show any relationship t any foundatio manager or substantial	dation status o of re- on cipient	,	ontribution	Business Checkbox Amount Person or Business X 10,000.
Name and ac (home or bus a Paid during the year he Trustees of Princet Dne Nassau Hall PRINCETON	ddress siness) r con University NJ 08544	an individua show any relationship t any foundatio manager or substantial	dation status of recon cipient 509 (a) 1	grant or co	ontribution	Business Checkbox Amount Person or Business X
Name and ac (home or bus a Paid during the year he Trustees of Princet Dne Nassau Hall PRINCETON PIGER FOUNDATION OF PARK AVE	ddress siness) r con University NJ 08544	an individua show any relationship t any foundatio manager or substantial	dation status of recon cipient 509(a) 1	grant or co	ontribution	Business Checkbox Amount Person or Business X 10,000. Person or
Name and ac (home or bus a Paid during the year the Trustees of Princet One Nassau Hall PRINCETON TIGER FOUNDATION 101 PARK AVE NEW YORK	ddress siness) r con University NJ 08544	an individua show any relationship t any foundatio manager or substantial	dation status of recon cipient 509 (a) 1	grant or co	ontribution	Person or Business X 10,000. Person or Business X
Name and a	ddress siness) r con University NJ 08544	an individua show any relationship t any foundatio manager or substantial	dation status of recon cipient 509 (a) 1	grant or co	ontribution	Person or Business X 10,000. Person or Business X 50,000.

560,000.

Form 990-PF, Page 1, Part I Line 16a - Legal Fees

Name of Provider	Type of Service Provided	Amount Paid Per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
BRICK & PATEL	LEGAL	7,488.	3,744.		3,744.

Total <u>7,488.</u> <u>3,744.</u> <u>3,744.</u>

Form 990-PF, Page 1, Part I Line 16b - Accounting Fees

Name of Provider	Type of Service Provided	Amount Paid Per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
JOHN T ABLAMSKY	TAX, ACCOUNTING, CONSULTING, ETC.	0.	0.		0.
Total		0.	0.		0.

Form 990-PF, Page 2, Part II, Line 10b L-10b Stmt

End of Year		
Book Value	Fair Market Value	
3,539,653.	2,790,768.	
6,413,762.	6,339,648.	
856,654.	952,080.	
1,158,296.	1,327,320.	
	Book Value 3,539,653. 6,413,762. 856,654.	

Total <u>11,968,365.</u> <u>11,409,816.</u>

Form 990-PF, Page 2, Part II, Line 13 L-13 Stmt

	End of Year	
Line 13 - Investments - Other:	Book	Fair Market
	Value	Value
12 WEST CAPITAL FUND	2,000,000.	1,582,286.
3G SPECIAL SITUATIONS FD III, LP	1,266,964.	4,671,977.
801 WEST CAPITAL FUND L.P.	244,449.	278,925.
ADW CAPITAL, LLC	956,104.	1,162,981.
ARENA HOLDINGS GROUP	9,972,626.	9,974,737.
ARISAIG AFRICAN CONSUMER FUND LIMITED	250,000.	135,251.
ARISAIG LATIN AMERICA FUND LIMITED	250,000.	167,545.
ECHINUS PARTNERS, LTD.	1,000,000.	1,694,003.
KEY SQUARE INTERNATIONAL FUND	500,000.	553,853.
POINTSTATE HOLDINGS - STEELMILL FUND	2,500,000.	2,340,937.
THINK INVESTMENTS	2,000,000.	2,068,283.
TOTEM POINT OFFSHORE FUND LTD.	1,000,000.	1,297,226.
VALIANT CAPITAL PARTNERS	1,000,000.	957,580.
VALUEACT CAPITAL INTERNATIONAL	2,000,000.	2,095,285.
SHORT EXPEDIA - 9,600 SHARES	-1,080,695.	-1,087,488.
SHORT FTD COMPANIES INC - 4,200 SHARES	-107,453.	-100,128.
SHORT ILG, INC - 7,200 SHARES	-98,474.	-130,824.
SHORT LENDING TREE INC - 1,200 SHARES	-86,361.	-121,620.