DLN: 93491317017237

OMB No 1545-0052

2016

Form 990-PF Department of the Treasury

Internal Revenue Service

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

Do not enter social security numbers on this form as it may be made public.
 Information about Form 990-PF and its instructions is at <a href="www.irs.gov/form990pf">www.irs.gov/form990pf</a>.

Open to Public Inspection

or	caler	ndar year 2016, or tax year beginning 01-01-20	)16 , a	nd er	nding 12-31-	2016	
		indation ILEY AND EVE GELLER FAMILY			A Employer ıd	entification numbe	er
		ION C/O EASTER UNLIMITED INC			27-1243747		
	ber and	street (or P O box number if mail is not delivered to street address)	Room/suite		<b>B</b> Telephone nu	mber (see instructio	ns)
01	o voici	- NOAD			(516) 873-9000	)	
		, state or province, country, and ZIP or foreign postal code E, NY 11514			C If exemption	application is pendir	g, check here
- C	acek al	I that apply	former public charity		D.1 Foreign or	ganizations, check h	oro =
<b>3</b> CI	ieck ai	☐ Final return ☐ Amended return	Torrier public charity		_	rganizations, check in	▶ ∟
		☐ Address change ☐ Name change				k here and attach co	
<b>1</b> C	neck tv	pe of organization Section 501(c)(3) exempt private	foundation			undation status was	
_		$1.4947(a)(1)$ nonexempt charitable trust $\Box$ Other taxable			under sectio	n 507(b)(1)(A), che	ck nere
			☑ Cash ☐ Accru	ıal	F If the founda	ation is in a 60-mont	h termination
		from Part II, col (c), \$\frac{1}{5},080,243\$  \text{Other (specify)}{\text{(Part I, column (d) must}}			under sectio	n 507(b)(1)(B), ched	k here ▶ ∟
Pa	rt I	Analysis of Revenue and Expenses (The total					(d) Disbursements
		of amounts in columns (b), (c), and (d) may not necessarily	(a) Revenue and expenses per	(Ь)	Net investment income	(c) Adjusted net income	for charitable purposes
		equal the amounts in column (a) (see instructions) )	books		meerine	medille	(cash basis only)
	1	Contributions, gifts, grants, etc , received (attach schedule)	200,000	1			
	2	Check ► ☐ If the foundation is <b>not</b> required to attach					
	_	Sch B					
	3	Interest on savings and temporary cash investments					
	4	Dividends and interest from securities	17,864		17,864		
	5a b	Gross rents					
ө	6a	Net gain or (loss) from sale of assets not on line 10	-7,313				
Revenue	١.		,				
ek	b   7	Gross sales price for all assets on line 6a 368,055  Capital gain net income (from Part IV, line 2)			0		
~	8	Net short-term capital gain					
	9	Income modifications					
	10a	Gross sales less returns and allowances					
	ь	Less Cost of goods sold					
	c	Gross profit or (loss) (attach schedule)					
	11	Other income (attach schedule)					
	12	Total. Add lines 1 through 11	210,551		17,864		
	13	Compensation of officers, directors, trustees, etc	0		0		
	14	Other employee salaries and wages					
es	15	Pension plans, employee benefits					
ens	16a	Legal fees (attach schedule)					
ă X	ь	Accounting fees (attach schedule)					
and Administrative Expenses	C	Other professional fees (attach schedule)					
<b>≘</b>	17	Interest					
3	18	Taxes (attach schedule) (see instructions)	259		0		'
Ē	19	Depreciation (attach schedule) and depletion					
5	20	Occupancy					
פ	21	Travel, conferences, and meetings					
ਰ	22	Printing and publications	<b>66-1</b> 0.412		9 413		
Operating	23	Other expenses (attach schedule)	8,412		8,412		
era	24	•	8,671		9.412		
Š	25	Add lines 13 through 23	50,435	-	8,412		50,43
	26	Total expenses and disbursements. Add lines 24 and	30,433				30,43.
		25	59,106		8,412		50,43
	27	Subtract line 26 from line 12					
	a	Excess of revenue over expenses and disbursements	151,445				
	ь	Net investment income (if negative, enter -0-)			9,452		
	С	Adjusted net income(if negative, enter -0-)					
	Danas	work Deduction Act Notice and instructions	<u> </u>		C   N 44555		000 BE (221

804,736

837,642

837,642

837,642

837,642

728,794

989,086

989,086

989,086 989,086

1

2

3

4

5

6

819,951

1,080,243

disqualified persons (attach schedule) (see instructions) . . . . .

Investments—U S and state government obligations (attach schedule)

Investments—corporate stock (attach schedule) . . . . . . . Investments—corporate bonds (attach schedule) . . . . . . . . .

Loans from officers, directors, trustees, and other disqualified persons Mortgages and other notes payable (attach schedule). . . . . .

Total liabilities(add lines 17 through 22) . . . . . . . . . . . .

Other notes and loans receivable (attach schedule)

Prepaid expenses and deferred charges . . . . . .

Investments—land, buildings, and equipment basis ▶

Less accumulated depreciation (attach schedule) ▶

Less accumulated depreciation (attach schedule) ▶ \_\_

Total assets (to be completed by all filers—see the

Foundations that follow SFAS 117, check here ▶

and complete lines 24 through 26 and lines 30 and 31.

Foundations that do not follow SFAS 117, check here

Paid-in or capital surplus, or land, bldg, and equipment fund

Retained earnings, accumulated income, endowment, or other funds

Total net assets or fund balances (see instructions) . . . . .

Total liabilities and net assets/fund balances (see instructions) .

Total net assets or fund balances at beginning of year-Part II, column (a), line 30 (must agree with end-

Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30

Analysis of Changes in Net Assets or Fund Balances

Accounts payable and accrued expenses . . . . .

Less allowance for doubtful accounts

Land, buildings, and equipment basis

instructions Also, see page 1, item I)

Other assets (describe > \_

Other liabilities (describe -

Unrestricted . . . . . .

and complete lines 27 through 31.

of-year figure reported on prior year's return)

Decreases not included in line 2 (itemize) ▶

Enter amount from Part I, line 27a . . . . . .

Other increases not included in line 2 (itemize) -

Permanently restricted . .

Temporarily restricted

•	2000	ASSEIS

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13 14

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18

19

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21 22

23

24

25

28 29

31 Part III

Liabilities

Balances

Fund 26

ŏ

Assets 27

Net 30

2

3

4

5

837,642 151,445 0 989,087 1 989,086 Form 990-PF (2016) (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 )

(mo , day, yr )

Page **3** 

			D-Dollation		
1 a SALE OF SECURITIES			Р	2015-01-01	2016-12-31
<b>b</b> CAPITAL GAINS DIVIDENDS			Р		
С					
d					
e					
(e) Gross sales price	(f) Depreciation allowed (or allowable)	Cost or	( <b>g)</b> other basis ense of sale	Gain d	( <b>h)</b> or (loss) f) minus (g)
a 361,0	01		375,368		-14,367
<b>b</b> 7,0	54				7,054
С					
d					
e					
Complete only for assets sh	owing gain in column (h) and ow	ned by the foundation (	on 12/31/69		(I)
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	Excess	( <b>k)</b> of col (ı) (j), ıf any	Gains (Col ( col (k), but not	(h) gain minus : less than -0-) <b>or</b> ·om col (h))
a					-14,367
b					7,054
С					
d					
e					
· -	or (loss) as defined in sections : , line 8, column (c) (see instructions :		ļ	3	-7,313
Part V Qualification Und	der Section 4940(e) for Re	duced Tax on Net	Investment In	come	
(For optional use by domestic priva	ate foundations subject to the sec	tion 4940(a) tax on ne	t investment incom	ne )	
	-	, ,		,	
If section 4940(d)(2) applies, leave	e this part blank			_	_
Was the foundation liable for the se If "Yes," the foundation does not q			in the base period	? L Y	′es 🔽 No
1 Enter the appropriate amou	nt ın each column for each year,	see instructions before	making any entrie	s	
(a) Base period years Calendar year (or tax year beginning in)	<b>(b)</b> Adjusted qualifying distributions	(c) Net value of noncharitab	e-use assets	<b>(d)</b> Distribution rat (col (b) divided by o	
2015	52,576		903,821		0 058171
2014	65,432		886,191		0 073835
2013	59,495		900,525		0 066067
2012	53,929		914,541		0 058968
2011	34,440		959,774	1	0 035883
					0 292924
number of years the foundat	r the 5-year base period—divide t tion has been in existence if less aritable-use assets for 2016 fron	than 5 years 🔒 🐍	or by the 3		0 058585 890,790
		*	5		52,187
	income (1% of Part I, line 27b)		6		95
	` '				52,282
	from Part XII, line 4 ,		· · · · <del>7</del>	<u> </u>	50,435
	er than line 7, check the box in Pa			ng a 1% tax rate Se	<u> </u>
-				F	orm <b>990-PF</b> (2016)

(b)

How acquired P—Purchase

D-Donation

(c) Date acquired

(mo , day, yr )

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Part VIII  Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid and Contractors (continued)	d Employees,
3 Five highest-paid independent contractors for professional services (see instructions). If none, enter "N	NONE".
(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
NONE	
Total number of others receiving over \$50,000 for professional services	0
Part IX-A Summary of Direct Charitable Activities	<u>,                                    </u>
List the foundation's four largest direct charitable activities during the tax year Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc	Expenses
1	
	4
2	$\dashv$
	+
3	+
4	
	_
Pour IV D. Common of Discourse Deleted Toursetments (see instructions)	
Part IX-B Summary of Program-Related Investments (see instructions)  Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1	Amount
2	
All other program-related investments See instructions	
3	
Total. Add lines 1 through 3	<u> </u>
Iotal. Add lines 1 through 3	Form <b>990-PF</b> (2016)

1b

2

3a 3h

4

5

50.435

50.435

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Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4

Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for

Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,

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

Adjusted qualifying distributions. Subtract line 5 from line 4. . . . . . . . . .

Amounts set aside for specific charitable projects that satisfy the

the section 4940(e) reduction of tax in those years

2

3

4

5

44,351

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0

Page 9

90-PF (	2016)
XIII	Un

**b** Total for prior years

a From 2011. . . . . **b** From 2012. . . . c From 2013. . . d From 2014. . . . .

e From 2015. . . . .

Excess distributions carryover, if any, to 2016

f Total of lines 3a through e. . . . . . . . .

**d** Applied to 2016 distributable amount. . . . e Remaining amount distributed out of corpus

same amount must be shown in column (a) )

5 Excess distributions carryover applied to 2016

a Corpus Add lines 3f, 4c, and 4e Subtract line 5

(If an amount appears in column (d), the

6 Enter the net total of each column as

b Prior years' undistributed income Subtract line 4b from line 2b . . . . . . . . . . c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed. . . . . . d Subtract line 6c from line 6b Taxable amount e Undistributed income for 2015 Subtract line 4a from line 2a Taxable amount—see instructions . . . . . . f Undistributed income for 2016 Subtract lines 4d and 5 from line 1. This amount must be distributed in 2017 . . . . . 7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions) . . . . . . . . . 8 Excess distributions carryover from 2011 not applied on line 5 or line 7 (see instructions) . . .

9 Excess distributions carryover to 2017.

10 Analysis of line 9

a Excess from 2012. . . **b** Excess from 2013. .

c Excess from 2014. . . .

d Excess from 2015. . .

e Excess from 2016. . .

Subtract lines 7 and 8 from line 6a . . . .

indicated below:

4 Qualifying distributions for 2016 from Part XII, line 4 ▶ \$ a Applied to 2015, but not more than line 2a **b** Applied to undistributed income of prior years (Election required—see instructions). . . . . c Treated as distributions out of corpus (Election 

15.362 7,903

15.362

7.903

6.084

- idistributed Income (see instructions) (a) (b) (c) (d)

- Years prior to 2015 2015 2016 Corpus

23.265

6.084

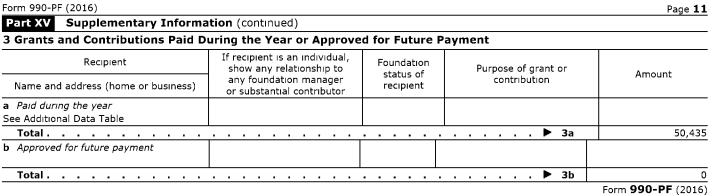
29,349

29,349

0

- 1 Distributable amount for 2016 from Part XI, line 7 44,351

- 2 Undistributed income, if any, as of the end of 2016
- a Enter amount for 2015 only. . . . . .



ter gross	amounts unless otherwise indicated	Unrelated bu	isiness income	Excluded by section	512, 513, or 514	(e) Related or exempt
Program	service revenue	(a) Business code	<b>(b)</b> Amount	(c) Exclusion code	(d) Amount	function income (See instructions
	and contracts from government agencies					
_	rship dues and assessments					
Intere	st on savings and temporary cash					
	ments					
	ds and interest from securities			14	17,864	
	tal income or (loss) from real estate					
	financed property					
	ntal income or (loss) from personal property					
	nvestment income					
	r (loss) from sales of assets other than					
	ory			18	-7,313	
	ome or (loss) from special events					
	rofit or (loss) from sales of inventory					
Other r	evenue <b>a</b>					
D						
_		1				
d						
d e			0		10 551	
d e Subtota	al Add columns (b), (d), and (e).		0	13	10,551	
d e Subtota Total. e worksl	Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e)	ns )		13	10,551	
d e Subtota Total. e worksl	al Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  neet in line 13 instructions to verify calculatio  Relationship of Activities to the	ns ) le Accomplish	ment of Exem	ot Purposes	3	10,551
d e Subtota Total. e worksl	Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e)	ins ) l <b>e Accomplish</b> income is reporto	ment of Exempled in column (e) of	13  pt Purposes  Part XVI-A contribut	ted importantly to	10,551
d e Subtota Total. e works art XVI ne No.	al Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  neet in line 13 instructions to verify calculation.  B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex	ins ) l <b>e Accomplish</b> income is reporto	ment of Exempled in column (e) of	13  pt Purposes  Part XVI-A contribut	ted importantly to	10,55:
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(2010)	
Information Regarding Transfers To and T Exempt Organizations	ransactions and Relationships With Noncharitable

Part XVII	Information Reg		ansters To	and Transactio	ns and Re	elations	ships With Non	charitable		
	anization directly or inclode (other than section	directly engag						n 501	Yes	No
	rom the reporting found		•	•			<b>3</b>			
								.   1a(1)		No
(2) Other	assets							. 1a(2)		No
<b>b</b> Other trans	sactions									
(1) Sales	of assets to a noncharit	table exempt	organization.					. 1b(1)		No
(2) Purcha	ases of assets from a no	oncharitable e	exempt organı	zation				. 1b(2)		No
	of facilities, equipment	•						. 1b(3)		No
	oursement arrangement							1b(4)		No
	or loan guarantees							. 1b(5)		No
` '	nance of services or me facilities, equipment, m		3					.   1b(6) .   1c		No No
-	er to any of the above		•							140
of the good	ls, other assets, or serv	rices given by	the reporting	foundation If the	foundation i	received l	less than fair mark	et value		
in any tran	saction or sharing arrar	ngement, sho	w in column (	<b>d)</b> the value of the	goods, othe	er assets,	, or services receive	ed		
(a) Line No	(b) Amount involved	(c) Name of n	oncharitable exe	empt organization	(d) Descri	ption of tra	ansfers, transactions, a	and sharing arra	ngemen	its
	dation directly or indire	•	•	•		-		_	_	
	n section 501(c) of the	•	han section 5	01(c)(3)) or in sect	ion 527?.			. ∐Yes	<b>✓</b> N	lo
<b>b</b> If "Yes," co	mplete the following sc		i .		ı					
	(a) Name of organization	n	(	<b>b)</b> Type of organization	n l		(c) Description o	of relationship		
	r penalties of perjury, I									
1	/ knowledge and belief, n preparer has any knov		rect, and com	iplete Declaration	of preparer	(other th	an taxpayer) is bas	sed on all infoi	mation	n of
Jigii	****			2017-11-13	***	***	Ma	ay the IRS discu	s this r	eturn
Here *					— <b>)</b> —		wı	th the preparer	shown b	elow
/ S	ignature of officer or tr	ustee		Date	Title	2	(se	ee instr )? 🗹 ነ	es 🗆 N	lo
	Print/Type preparer's	name	Preparer's Sig	nature	Date		D.	TIN		
	, , , , , , , , , , , , , , , , , ,		-,				heck if self-	P01350	1803	
	SUSAN JACOBINI-					e	mployed ▶ 🏻 📗	P01330	1093	
Paid	HARRINGTON									
Preparer	Firm's name ► MARG	GOLIN WINER	. & EVENS LLP			ı	E	ırm's EIN ▶11	-15588	868
Use Only	F 1 11 5 1-1	0.0100000000000000000000000000000000000	T/DIAT:					2 LIN F 11	13300	,,,,,
	Firm's address ► 400	O GARDEN CI	IY PLAZA						<b></b>	
	GA	RDEN CITY, N	NY 11530332	3			Pi	hone no (516	) /47-2	2000
	Ì						1			

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

EVE GELLER

STANLEY GELLER

# Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year

WASHINGTON, DC 20049	N/A	CHARITY	UNRESTRICTED	
ACIJ (AM CTR FOR LAW & JUSTICE) PO BOX 90555 WASHINGTON DC 20090	N/A	PUBLIC CHARITY	UNRESTRICTED	

WASHINGTON, DC 20090		CHARITY		
ADL 605 3RD AVENUE NEW YORK, NY 10158	N/A	PUBLIC CHARITY	UNRESTRICTED	500
ADOPT A CHARGER INC 22714 GAYCREST AVENUE TORRANCE, CA 90505	N/A	PUBLIC CHARITY	UNRESTRICTED	1,000

350

100

11211 101111,111 10150		eri) (terr		
ADOPT A CHARGER INC 22714 GAYCREST AVENUE TORRANCE, CA 90505	N/A	PUBLIC CHARITY	UNRESTRICTED	1,000
ALZHEIMERS ASSOCIATION 225 NORTH MICHIGAN AVENUE FLOOR 17 CHICAGO IL 60601	N/A	PUBLIC CHARITY	UNRESTRICTED	600

				i
ALZHEIMERS ASSOCIATION 225 NORTH MICHIGAN AVENUE FLOOR 17 CHICAGO, IL 60601	N/A	PUBLIC CHARITY	UNRESTRICTED	600
Total				50,435

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year AMERICAN CIVIL LIBERTIES UNION N/A PUBLIC UNRESTRICTED 500 **FOUNDATION** CHARITY 125 BROAD STREET 18TH FLOOR

NEW TORK, NY 10004				
AMERICAN COMMITTEE FOR THE WEIZMANN INSTITUTE OF SCIENCE INC 633 3RD AVENUE NEW YORK, NY 10017	N/A	PUBLIC CHARITY	UNRESTRICTED	

NEW YORK NY 10004

Total.

За

NEW YORK, NY 10017				
AMERICAN DIABETES ASSOCIATION 1701 NORTH BEAUREGARD STREET ALEXANDRIA, VA 22311	N/A	PUBLIC CHARITY	UNRESTRICTED	
AMERICAN FRIENDS OF THE HEBREW	N/A	PUBLIC	UNRESTRICTED	

300

300

ALEXANDRIA, VA 22311				
AMERICAN FRIENDS OF THE HEBREW UNIVERSITY	N/A	PUBLIC CHARITY	UNRESTRICTED	400
ONE BATTERY PARK PLAZA 25TH FLOOR NEW YORK, NY 10004				

AMEDICAN HEADT ACCOCIATION	N/A	DUDLIC	LINDECTRICTED	
ONE BATTERY PARK PLAZA 25TH FLOOR NEW YORK, NY 10004				
UNIVERSITY		CHARITY	ONKESTRICTED	

UNIVERSITY		CHARITY		
ONE BATTERY PARK PLAZA 25TH FLOOR NEW YORK, NY 10004				
AMERICAN HEART ASSOCIATION	N/Δ	DUBLIC	LINRESTRICTED	

NE BATTERY PARK PLAZA 25TH FLOOR EW YORK, NY 10004				
MERICAN HEART ASSOCIATION	N/A	PUBLIC	UNRESTRICTED	5

AMERICAN HEART ASSOCIATION N/A PUBLIC UNRESTRICTED 500 7272 GREENVILLE AVENUE CHARITY DALLAS, TX 75231

#### Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager recipient Name and address (home or business) or substantial contributor

a Paid during the year

a Paid during the year				
AMERICAN JEWISH COMMITTEE 165 EAST 56TH STREET NEW YORK, NY 10022	N/A	PUBLIC CHARITY	UNRESTRICTED	750
AMERICAN RED CROSS 431 18TH STREET NW WASHINGTON, DC 20006	N/A	PUBLIC CHARITY	UNRESTRICTED	100
		1	,	

WASHINGTON, DC 20006				
AMERICAN SOCIETY FOR YAD VASHEM INC 500 5TH AVENUE 42 NEW YORK, NY 10110	N/A	PUBLIC CHARITY	UNRESTRICTED	300
AMERICARES 88 HAMILTON AVENUE	N/A	PUBLIC	UNRESTRICTED	300

INC 500 5TH AVENUE 42 NEW YORK, NY 10110		CHARITY		
AMERICARES 88 HAMILTON AVENUE STAMFORD, CT 06902	N/A	PUBLIC CHARITY	UNRESTRICTED	300
AMFAR 120 WALL STREET 13TH FLOOR	N/A	PUBLIC	UNRESTRICTED	500

	NEW YORK, NY 10110				
	AMERICARES 88 HAMILTON AVENUE STAMFORD, CT 06902	N/A	PUBLIC CHARITY	UNRESTRICTED	
ĺ	AMEAR 120 WALL STREET 13TH FLOOR	N/A	PUBLIC	UNRESTRICTED	

•				
AMERICARES 88 HAMILTON AVENUE STAMFORD, CT 06902	N/A	PUBLIC CHARITY	UNRESTRICTED	300
AMFAR 120 WALL STREET 13TH FLOOR NEW YORK, NY 10005	N/A	PUBLIC CHARITY	UNRESTRICTED	500

STAMFORD, CT 06902		CHARITY		
AMFAR 120 WALL STREET 13TH FLOOR NEW YORK, NY 10005	N/A	PUBLIC CHARITY	UNRESTRICTED	500

Ÿ		1		1
AMFAR 120 WALL STREET 13TH FLOOR NEW YORK, NY 10005	N/A	PUBLIC CHARITY	UNRESTRICTED	
Total				50,435

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year AMNESTY INTERNATIONAL N/A PUBLIC UNRESTRICTED 400 FIVE PENN PLAZA CHARITY NEW YORK, NY 10001 ARTHRITIS FOUNDATION N/A UNRESTRICTED 500 PUBLIC 1330 WEST PEACHTREE STREET SUITE CHARITY 100 ATLANTA, GA 30309 B'NAI BRITH N/A PUBLIC: UNRESTRICTED 750 1120 20TH STREET NW SUITE 300 N CHARITY WASHINGTON, DC 20036 BBYO 800 EIGHTH STREET NW N/A PUBLIC. UNRESTRICTED 300 WASHINGTON, DC 20001 CHARITY

PUBLIC

CHARITY

UNRESTRICTED

500

50,435

BROOK JACKMAN FOUNDATION

230 PARK AVENUE

3a

NEW YORK, NY 10169

N/A

# Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year

CAMERA PO BOX 35040 BOSTON, MA 35040	N/A	PUBLIC CHARITY	UNRESTRICTED	
CANCER CARE FOUNDATION PO BOX 4651	N/A	PUBLIC CHARITY	UNRESTRICTED	

CANCER CARE FOUNDATION PO BOX 4651 SKOKIE, IL 60076	N/A	PUBLIC CHARITY	UNRESTRICTED	400
COMMON CAUSE 1133 19TH STREET NW 9TH FLOOR WASHINGTON DC 20036	N/A	PUBLIC CHARITY	UNRESTRICTED	300

500

50,435

COMMON CAUSE 1133 19TH STREET NW 9TH FLOOR NASHINGTON, DC 20036	N/A	PUBLIC CHARITY	UNRESTRICTED	30
COMPASSION & CHOICES PO BOX 101810	N/A	PUBLIC CHARITY	UNRESTRICTED	50

WASHINGTON, DC 20036		CHART		
COMPASSION & CHOICES PO BOX 101810 DENVER, CO 80250	N/A	PUBLIC CHARITY	UNRESTRICTED	500

PO BOX 101810 DENVER, CO 80250		CHARITY		
DARTHMOUTH HILLEL THE ROTH CENTER 5 OCCOM RIDGE	N/A	PUBLIC CHARITY	UNRESTRICTED	500

DENVER, CO 80250				
DARTHMOUTH HILLEL THE ROTH CENTER 5 OCCOM RIDGE HANOVER, NH 03755	N/A	PUBLIC CHARITY	UNRESTRICTED	50

Total .

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year DARTMOUTH COLLEGE N/A PUBLIC. UNRESTRICTED 5,000 6016 MCNUTT HALL DARTMOUTH CHARITY COLLEGE HANOVER, NH 03755 N/A DEATH WITH DIGNITY PUBLIC: UNRESTRICTED 200 520 SW 6TH AVE SUITE 1220 CHARITY DODTI AND OR 07204

PORTLAND, OR 9/204				
DOCTORS WITHOUT BORDERS 333 7TH AVENUE 2ND FLOOR NEW YORK, NY 10001	N/A	PUBLIC CHARITY	UNRESTRICTED	500
DON MONTI MEMORIAL RESEARCH FOUNDATION 1 BUNGTOWN ROAD COLD SPRING HARBOR, NY 11724	N/A	PUBLIC CHARITY	UNRESTRICTED	300

300

EASTER SEALS PUBLIC UNRESTRICTED

N/A

CHARITY

233 SOUTH WACKER DRIVE SUITE 2400

CHICAGO, IL 60606 Total .

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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	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
ENDOMETRIOSIS ASSOC INC 8585 NORTH 76TH PLACE MILWAUKEE, WI 53223	N/A	PUBLIC CHARITY	UNRESTRICTED	300
FINCA INTERNATIONAL 1101 14TH STREET NW WASHINGTON, DC 20005	N/A	PUBLIC CHARITY	UNRESTRICTED	400
FOUNDATION FOR BARNES JEWISH HOSPITAL 1001 HIGHLANDS PLAZA DR WEST SUITE 140 ST LOUIS, MO 63110	N/A	PUBLIC CHARITY	UNRESTRICTED	300
FOUNDATION FOR THE NATIONAL INSTITUTES OF HEALTH 9650 ROCKVILLE PIKE BETHESDA, MD 20814	N/A	PUBLIC CHARITY	UNRESTRICTED	1,000
GLAUCOMA FOUNDATION INC	N/A	PUBLIC	UNRESTRICTED	300

CHARITY

80 MAIDEN LANE NEW YORK, NY 10038

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Total . . 50,435

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year GMHC 446 WEST 33RD STREET N/A PUBLIC UNRESTRICTED 500 NEW YORK, NY 10001 CHARITY HIAS 333 7TH AVENUE 16TH FLOOR N/A UNRESTRICTED 350 PUBLIC NEW YORK NY 10001 CHARITY

THE IT TOTAL , INT 10001		CITATO		
HILLEL 800 EIGHTH STREET NW WASHINGTON, DC 20001	N/A	PUBLIC CHARITY	UNRESTRICTED	300
HOLOCAUST MEMORIAL & TOLERANCE CENTER OF NASSAU COUNTY 100 CRESCENT ROAD GLEN COVE, NY 11542	N/A	PUBLIC CHARITY	UNRESTRICTED	500
INTERFAITH ALLIANCE 1212 NEW YORK AVE NW SUITE 1250	N/A	PUBLIC CHARITY	UNRESTRICTED	250

50,435

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	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
JBI INTERNATIONAL 110 EAST 30TH STREET NEW YORK, NY 10016	N/A	PUBLIC CHARITY	UNRESTRICTED	300
JERUSALEM FOUNDATION 11 RIVKA STREET POB 10185 JERUSALEM IS	N/A	PUBLIC CHARITY	UNRESTRICTED	400
JEWISH FOUNDATION FOR THE RIGHTEOUS INC 305 7TH AVENUE 1900 NEW YORK, NY 10001	N/A	PUBLIC CHARITY	UNRESTRICTED	250
JEWISH GUILD FOR THE BLIND 15 WEST 65TH STREET NEW YORK, NY 10023	N/A	PUBLIC CHARITY	UNRESTRICTED	300
JEWISH MUSEUM 1109 5TH AVENUE NEW YORK, NY 10128	N/A	PUBLIC CHARITY	UNRESTRICTED	500

За

If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
any foundation manager or substantial contributor	recipient		
N/A	PUBLIC CHARITY	UNRESTRICTED	300
N/A	PUBLIC CHARITY	UNRESTRICTED	1,000
N/A	PUBLIC CHARITY	UNRESTRICTED	1,250
N/A	PUBLIC CHARITY	UNRESTRICTED	300
N/A	PUBLIC CHARITY	UNRESTRICTED	250
	show any relationship to any foundation manager or substantial contributor  N/A  N/A  N/A  N/A	show any relationship to any foundation manager or substantial contributor  N/A  PUBLIC CHARITY  PUBLIC CHARITY  N/A  PUBLIC CHARITY  PUBLIC CHARITY	show any relationship to any foundation manager or substantial contributor  N/A  PUBLIC CHARITY  N/A  PUBLIC CHARITY  UNRESTRICTED  N/A  PUBLIC CHARITY  UNRESTRICTED  UNRESTRICTED

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### Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor

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

a Paid during the year				
MEMORIAL SLOAN KETTERING HOSPITAL 1275 YORK AVENUE	N/A	PUBLIC CHARITY	UNRESTRICTED	1,300

MEMRI PO BOX 27837 WASHINGTON, DC 20038	N/A	PUBLIC CHARITY	UNRESTRICTED	300
1275 YORK AVENUE NEW YORK, NY 10065				

WASHINGTON, DC 20038	N/A	CHARITY	ONKESTRICTED	300
METROPOLITAN MUSEUM OF ART 1000 5TH AVENUE NEW YORK, NY 10028	N/A	PUBLIC CHARITY	UNRESTRICTED	250

1000 5TH AVENUE NEW YORK, NY 10028		CHARITY	ONNESTRICIES	250
MUSEUM OF MODERN ART 11 WEST 53RD STREET NEW YORK, NY 10019	N/A	PUBLIC CHARITY	UNRESTRICTED	300

MUSEUM OF MODERN ART 11 WEST 53RD STREET NEW YORK, NY 10019	N/A	PUBLIC CHARITY	UNRESTRICTED	300
NAACP 4805 MT HOPE DRIVE	N/A	PUBLIC	UNRESTRICTED	250

NEW YORK, NY 10019				
NAACP 4805 MT HOPE DRIVE BALTIMORE, MD 21215	N/A	PUBLIC CHARITY	UNRESTRICTED	250

BALTIMORE, MD 21215	N/A	CHARITY	UNRESTRICTED	250
Total				50,435

#### Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year NASSAU MUSEUM ONE MUSEUM DRIVE N/A PUBLIC UNRESTRICTED 500 ROSLYN, NY 11576 CHARITY N/A NATIONAL 9-11 MEMORIAL AND PUBLIC UNRESTRICTED 350

MUSEUM ONE LIBERTY PLAZA 20TH FLOOR NEW YORK, NY 10006		CHARITY		
NATIONAL AIDS FOUNDATION 3350 E ST	N/A	PUBLIC CHARITY	UNRESTRICTED	

0 E ST I DIEGO, CA 92102		CHARITY	
TONAL COALITION AGAINST ISORSHIP FULTON STREET SUITE 407 V YORK, NY 10038	N/A	PUBLIC CHARITY	UNRESTRICTED

Total.

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			l I	
DNAL COALITION AGAINST ORSHIP ULTON STREET SUITE 407 YORK, NY 10038	N/A	PUBLIC CHARITY	UNRESTRICTED	
DNAL MUSEUM OF AMERICCAN SH	N/A	PUBLIC CHARITY	UNRESTRICTED	
OUTHN INDEPENDENCE MALL				

NATIONAL COALITION AGAINST CENSORSHIP 19 FULTON STREET SUITE 407 NEW YORK, NY 10038	N/A	PUBLIC CHARITY	UNRESTRICTED	250
NATIONAL MUSEUM OF AMERICCAN JEWISH	N/A	PUBLIC CHARITY	UNRESTRICTED	360
101 SOUTHN INDEPENDENCE MALL EAST BHILADELPHIA PA 19106				

NEW YORK, NY 10038				
NATIONAL MUSEUM OF AMERICCAN JEWISH	N/A	PUBLIC CHARITY	UNRESTRICTED	360
101 SOUTHN INDEPENDENCE MALL EAST PHILADELPHIA, PA 19106				

250

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	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
NATIONAL WORLD WAR II MUSEUM 945 MAGAZINE STREET NEW ORLEANS, LA 70130	N/A	PUBLIC CHARITY	UNRESTRICTED	400
NORTH COUNTRY REFORM TEMPLE 86 CRESCENT BEACH ROAD GLEN COVE, NY 11542	N/A	PUBLIC CHARITY	UNRESTRICTED	750
NORTH SHORE LIJ HEALTH FOUNDATION 125 COMMUNITY DRIVE GREAT NECK, NY 11021	N/A	PUBLIC CHARITY	UNRESTRICTED	1,000
NEW YORK PUBLIC RADIO 160 VARICK STREET NEW YORK, NY 10013	N/A	PUBLIC CHARITY	UNRESTRICTED	250
OXFAM 226 CAUSEWAY STREET 5TH FLOOR BOSTON, MA 02114	N/A	PUBLIC CHARITY	UNRESTRICTED	250

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Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year PLUG IN AMERICA N/A PUBLIC UNRESTRICTED 1,000 2370 MARKET STREET 419 CHARITY SAN FRANCISCO, CA 94114 PROSTATE CANCER FOUNDATION N/A UNRESTRICTED 500 PUBLIC 1250 FOURTH STREET CHARITY

SANTA MONICA, CA 90401				
PUBLIC CITIZEN 1600 20TH STREET NW WASHINGTON, DC 20009	N/A	PUBLIC CHARITY	UNRESTRICTED	450
RESCUE HOOK & LADDER 155 MINEOLA AVENUE ROSLYN HEIGHTS, NY 11577	N/A	PUBLIC CHARITY	UNRESTRICTED	100

PUBLIC

CHARITY

UNRESTRICTED

300

50,435

RONALD MCDONALD HOUSE NEW YORK | N/A

405 EAST 73RD STREET

NEW YORK, NY 10021

Total . .

## Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager recipient Name and address (home or business) or substantial contributor

a Paid during the year				
ROSLYN HIGHLAND FIRE DEPARTMENT 270 WARNER AVE ROSLYN HEIGHTS, NY 11577	N/A	PUBLIC CHARITY	UNRESTRICTED	100
SAVE FILIS ISLAND INC	N/A	PUBLIC	UNRESTRICTED	200

'				
SAVE ELLIS ISLAND INC 500 INTERNATIONAL DRIVE 120 BUDD LAKE, NJ 07828	N/A	PUBLIC CHARITY	UNRESTRICTED	200
SID JACOBS JCC 300 FOREST DRIVE EAST HILLS, NY 11548	N/A	PUBLIC CHARITY	UNRESTRICTED	750

500 INTERNATIONAL DRIVE 120 BUDD LAKE, NJ 07828		CHARITY		
SID JACOBS JCC 300 FOREST DRIVE EAST HILLS, NY 11548	N/A	PUBLIC CHARITY	UNRESTRICTED	750
SIMON WIESENTHAL CENTER 1399 SOUTH ROXBURY DRIVE	N/A	PUBLIC CHARITY	UNRESTRICTED	500

EAST HILLS, NY 11548	N/A	CHARITY	UNRESTRICTED	750
SIMON WIESENTHAL CENTER 1399 SOUTH ROXBURY DRIVE LOS ANGELES, CA 90035	N/A	PUBLIC CHARITY	UNRESTRICTED	500
MEALS ON WHEELS	N/A	PUBLIC	UNRESTRICTED	300

1399 SOUTH ROXBURY DRIVE LOS ANGELES, CA 90035		CHARITY		-
MEALS ON WHEELS 50 CLINTON STREET HEMPSTEAD.NY 11550	N/A	PUBLIC CHARITY	UNRESTRICTED	3

LOS ANGELES, CA 90035				
MEALS ON WHEELS 50 CLINTON STREET HEMPSTEAD, NY 11550	N/A	PUBLIC CHARITY	UNRESTRICTED	300

MEALS ON WHEELS 50 CLINTON STREET HEMPSTEAD, NY 11550	N/A	PUBLIC CHARITY	UNRESTRICTED	
Total				50,435

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	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
SMILE TRAIN 41 MADISON AVENUE 28TTH FLOOR NEW YORK, NY 10010	N/A	PUBLIC CHARITY	UNRESTRICTED	300
SOUTH POVERTY LAW 400 WASHINGTON AVENUE MONTGOMERY, AL 36104	N/A	PUBLIC CHARITY	UNRESTRICTED	300
ST FRANCIS HOSPITAL FOUNDATION 100 PORT WASHINGTON BLVD ROSLYN, NY 11576	N/A	PUBLIC CHARITY	UNRESTRICTED	1,200
ST JUDES CHILDREN'S RESEARCH	N/A	PUBLIC	UNRESTRICTED	300

400 WASHINGTON AVENUE MONTGOMERY, AL 36104		CHARITY		
ST FRANCIS HOSPITAL FOUNDATION 100 PORT WASHINGTON BLVD ROSLYN, NY 11576	N/A	PUBLIC CHARITY	UNRESTRICTED	1,200
ST JUDES CHILDREN'S RESEARCH HOSPITAL 262 DANNY THOMAS PLACE MEMPHIS TN 38105	N/A	PUBLIC CHARITY	UNRESTRICTED	300

ST JUDES CHILDREN'S RESEARCH HOSPITAL 262 DANNY THOMAS PLACE MEMPHIS,TN 38105	N/A	PUBLIC CHARITY	UNRESTRICTED	300
STANDWITHUS PO BOX 341069	N/A	PUBLIC	UNRESTRICTED	300

262 DANNY THOMAS PLACE MEMPHIS, TN 38105		CHARITY		
STANDWITHUS PO BOX 341069	N/A	PUBLIC	UNRESTRICTED	

MEMPHIS, TN 38105				
STANDWITHUS PO BOX 341069 LOS ANGELES, CA 90034	N/A	PUBLIC CHARITY	UNRESTRICTED	300

50,435 За

# Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager recipient Name and address (home or business) or substantial contributor

TECHNOCEDVE	NI/A	DUDLIC	LINDECTRICTED	275
SUSAN G KOMEN FOR THE CURE 5005 LBJ FREEWAY SUITE 250 DALLAS, TX 75244	N/A	PUBLIC CHARITY	UNRESTRICTED	300
a Paid during the year				

'				
TECHNOSERVE 1120 19TH STREET NW 8TH FLOOR WASHINGTON, DC 20036	N/A	PUBLIC CHARITY	UNRESTRICTED	375
THIRTEEN 825 EIGHTH AVENUE	N/A	PUBLIC	UNRESTRICTED	500

WASHINGTON, DC 20036		CID WALL		
THIRTEEN 825 EIGHTH AVENUE NEW YORK, NY 10019	N/A	PUBLIC CHARITY	UNRESTRICTED	50
TOYS FOR TOTS FOUNDATION	N/A	PUBLIC	UNRESTRICTED	20

TOYS FOR TOTS FOUNDATION 18251 QUANTICO GATEWAY DRIVE TRIANGLE, VA 22172	N/A	PUBLIC CHARITY	UNRESTRICTED	200
NEW YORK, NY 10019		CHARITY	OMESTRICIED	300

TOYS FOR TOTS FOUNDATION 18251 QUANTICO GATEWAY DRIVE TRIANGLE, VA 22172	N/A	PUBLIC CHARITY	UNRESTRICTED	200
TUCK ANN GIVING	N/A	GROUP	UNRESTRICTED	5,000

TRIANGLE, VA 22172		CHARITI		
TUCK ANN GIVING 6154 S FAIRBANKS HALL HANOVER, NH. 03755	N/A	GROUP	UNRESTRICTED	5,000

TUCK ANN GIVING 6154 S FAIRBANKS HALL HANOVER, NH 03755	N/A	GROUP	UNRESTRICTED	5,000
Total				50,435

#### Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year UJA 130 EAST 59TH STREET N/A PUBLIC UNRESTRICTED

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

900 NEW YORK, NY 10022 CHARITY UNITED STATES HOLOCAUST MEMORIAL N/A 1,000 PUBLIC UNRESTRICTED MUSEUM CHARITY

100 RAOUL WALLENBERG PLACE SW WASHINGTON, DC 20024 N/A PUBLIC UNRESTRICTED CHARITY

UNITED STATES NAVY MEMORIIAL 300 701 PENNSYLVANIA AVENUE WASHINGTON DC 20004

WASHINGTON, BC 20004				
US OLYMPIC COMMITTEE ONE OLYMPIC PLAZA COLORADO SPRINGS, CO 80909	N/A	PUBLIC CHARITY	UNRESTRICTED	200
USO PO BOX 96322	N/A	PUBLIC	UNRESTRICTED	300

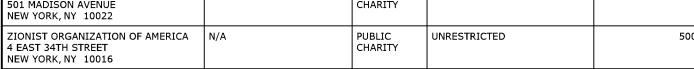
ONE OLYMPIC PLAZA COLORADO SPRINGS, CO 80909		CHARITY		
USO PO BOX 96322 WASHINGTON DC 20090	N/A	PUBLIC CHARITY	UNRESTRICTED	

COLOT(NDO STRINGS, CO 00303				
USO PO BOX 96322 WASHINGTON, DC 20090	N/A	PUBLIC CHARITY	UNRESTRICTED	

50,435

Total . . 3a

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient Foundation Purpose of grant or If recipient is an individual, Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year WORLD JEWISH CONGRESS N/A PUBLIC UNRESTRICTED 1,000 501 MADISON AVENUE CHARITY N/A PUBLIC UNRESTRICTED 500 CHARITY



Total . . . . . . . .

За

# **TY 2016 Investments - Other Schedule**

Name: THE STANLEY AND EVE GELLER FAMILY

FOUNDATION C/O EASTER UNLIMITED INC

**EIN:** 27-1243747

Category/ Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value
CULLEN HIGH DIVIDEND EQ	AT COST	25,881	36,761
JPM EQUITY INCOME FUND	AT COST	23,904	39,233
JPM LARGE CAP GROWTH FUND	AT COST	7,896	10,712
PRIMECAP ODYSSEY STOCK FUND	AT COST	38,226	42,796
SPDR S&P 500 ETF TRUST	AT COST	55,500	81,588
ISHARES CORE S&P MID-CAP ETF	AT COST	36,174	65,144
TRIBUTARY SMALL CO-INST PLUS	AT COST	9,167	10,898
ARTISAN INTL VALUE FUND	AT COST	18,938	22,488
DODGE & COX INTL STOCK FUND	AT COST	38,526	39,790
OAKMARK INTERNATIONAL	AT COST	8,500	8,349
DEUTSCHE X-TRACKERS MSCI EUR	AT COST	24,857	24,939
DEUTSCHE X-TRACKERS MSCI	AT COST	17,346	20,136
ISHARES MSCI ALL COUNTRY ASI	AT COST	8,430	8,789
MATTHEWS ASIA DIVIDEND-INS	AT COST	20,027	22,149
ISHARES MSCI INDIA ETF	AT COST	11,965	11,394
NEUBERGER BER GR CHINA EQ-IS	AT COST	8,500	8,914
VANGUARD FTSE EMERGING MARKETS ETF	AT COST	21,575	18,963
AQR EQUITY MARKET NEUTRAL- R6	AT COST	20,000	20,656
EATON VANCE GLOBAL MACRO	AT COST	16,386	15,440
EQUINOX CAMPBELL STRATEGY	AT COST	19,174	15,323
GATEWAY FUND	AT COST	19,174	19,698
PRUDENTIAL ABS RET BND-Z	AT COST	17,800	17,818
THE ARBITRAGE FUND	AT COST	37,053	37,241
JPM REALTY INCOME FUND	AT COST	33,506	30,408
TORTOISE MLP & PIPELINE-INST	AT COST	17,000	18,879
SPDR GOLD SHARES	AT COST	17,007	14,797
DODGE & COX INCOME FUND	AT COST	12,555	12,518
PIMCO FD PAC INV MGMT SERIES	AT COST	50,500	52,280
ISHARES BARCLAYS TIPS BOND FUND	AT COST	24,917	24,332
JPM CORE BOND FUND	AT COST	43,278	43,039

Category/ Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value
DOBLINE TOTL RET BND-I	AT COST	25,032	24,479

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN: 93491317017	237
TY 2016 Other Decreases Schedule				
Name:	THE STANLEY	AND EVE GELLER FAMILY		
	FOUNDATION	C/O EASTER UNLIMITED INC		
EIN:	27-1243747			
De	escription		Amount	
ADJUSTED BASIS OF INVESTMENTS				1

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN	: 93491317017237
TY 2016 Other Expenses Schedule				
Name:	THE STANLEY A	ND EVE GELLER	FAMILY	
	FOUNDATION C	O EASTER UNLI	MITED INC	
EIN:	27-1243747			
Other Expenses Schedule				
Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
COMMISSIONS AND FEES	6,249	6,249		0

2,163

2,163

Other Expenses Schedule	
Description	Revenue Expense

MISC EXPENSES

efile GRAPHIC print - DO NOT PROCESS	As Filed Data	-	DL	N: 93491317017237
TY 2016 Taxes Schedule				
Name:	THE STANLE	Y AND EVE GELLE	R FAMILY	
	FOUNDATION C/O EASTER UNLIMITED INC			
EIN:	27-1243747	,		
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
FEDERAL TAX ON INVESTMENT INCOME	259	0		0

efile GRAPHIC print - I	O NOT PROCESS As Filed Data -		DLN: 93491317017237	
Schedule B (Form 990, 990-EZ,	Schedule o	f Contributors	OMB No 1545-0047	
or 990-PF)  Department of the Treasury Internal Revenue Service	► Information about Schedule B (Form 9	990, 990-EZ, or 990-PF 90, 990-EZ, or 990-PF) and its instructi <u>gov/form990</u>		
Name of the organizat THE STANLEY AND EVE O			Employer identification number	
FOUNDATION C/O EASTE	R UNLIMITED INC		27-1243747	
Organization type (che	ck one)			
Filers of:	Section:			
Form 990 or 990-EZ	501(c)( ) (enter number) organiz	ation		
	4947(a)(1) nonexempt charitable	trust <b>not</b> treated as a private founda	tion	
	☐ 527 political organization			
Form 990-PF	✓ 501(c)(3) exempt private foundation	on		
	4947(a)(1) nonexempt charitable	trust treated as a private foundation		
	501(c)(3) taxable private foundati	on		
	ation filing Form 990, 990-EZ, or 990-PF tha property) from any one contributor. Comple			
Special Rules				
under sections to under sections to under sections to the under sections at	ion described in section 501(c)(3) filing Forn 09(a)(1) and 170(b)(1)(A)(vi), that checked s by one contributor, during the year, total cont e 1h, or (ii) Form 990-EZ, line 1 Complete F	Schedule A (Form 990 or 990-EZ), P ributions of the greater of <b>(1)</b> \$5,000	art II, line 13, 16a, or 16b, and that	
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				
during the year, If this box is che purpose Do not	non described in section 501(c)(7), (8), or (10 contributions exclusively for religious, charitacked, enter here the total contributions that vector complete any of the parts unless the <b>Gener</b> ble, etc., contributions totaling \$5,000 or mo	able, etc , purposes, but no such con vere received during the year for an al Rule applies to this organization b	ntributions totaled more than \$1,000 exclusively religious, charitable, etc., because it received nonexclusively	
990-EZ, or 990-PF), bu	n that is not covered by the General Rule ar it <b>must</b> answer "No" on Part IV, line 2, of its orm 990PF, Part I, line 2, to certify that it do	Form 990, or check the box on line	H of its	
For Paperwork Reduction of for Form 990, 990-EZ, or 99	ct Notice, see the Instructions 0-PF	Cat No 30613X Schedu	ule B (Form 990, 990-EZ, or 990-PF) (2016)	

	ation EVE GELLER FAMILY EASTER UNLIMITED INC	Employer identification 27-1243747	number
Part I	Contributors (see instructions) Use duplicate copies of Part I if ac	dditional space is needed	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	STANLEY GELLER 80 VOICE ROAD  CARLE PLACE, NY11514	\$ 200,000	Person  Payroll  Noncash  (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution Person
		\$	Payroll  Noncash  (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person  Payroll  Noncash  (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
-		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
-		\$	Person  Payroll  Noncash  (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person  Payroll  Noncash  (Complete Part II for noncash contributions)  prm 990. 990-EZ, or 990-PF) (2016)

Schedule B (Form 99	0, 990-EZ, or 990-PF) (2016)		Page <b>3</b>
Name of organization THE STANLEY AND EVE GELLER FAMILY		Employer identification number	
FOUNDATION C/O EAS	TER UNLIMITED INC	27-12	43747
Part II	Noncash Property	<u> </u>	
(a) No.from Part I	(see instructions) Use duplicate copies of Part II if additional space is needed (b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
=		\$	
(a) No.from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
=			
(a) No.from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
<u>=</u>			
(a) No.from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
=		\$	
(a) No.from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
=			
(a) No.from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
=			
	-	Schedule B (Form 9	990, 990-EZ, or 990-PF) (2016)

Schedule B (Form 99	90, 990-EZ, or 990-PF) (2016)		Page <b>4</b>
Name of organization THE STANLEY AND EVEROUNDATION C/O EAS	'E GELLER FAMILY		Employer identification number 27-1243747
than \$1,0 organizat the year.	00 for the year from any one contributo	or. Complete columns (a) throu of exclusively religious, charituctions.) > \$	d in section 501(c)(7), (8), or (10) that total more ugh (e) and the following line entry. For table, etc., contributions of \$1,000 or less for
(a) No.from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	Transferee's name, address, and	(e) Transfer of gift ZIP 4	Relationship of transferor to transferee
(a) No.from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	Transferee's name, address, and	(e) Transfer of gift ZIP 4	lelationship of transferor to transferee
(a) No.from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	Transferee's name, address, and	(e) Transfer of gift ZIP 4	Relationship of transferor to transferee
(a) No.from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	Transferee's name, address, and	(e) Transfer of gift ZIP 4	Relationship of transferor to transferee

Schedule B (Form 990, 990-EZ, or 990-PF) (2016)