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Form **990-PF**  
 Department of the Treasury  
 Internal Revenue Service

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

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 ▶ **Information about Form 990-PF and its instructions is at [www.irs.gov/form990pf](http://www.irs.gov/form990pf).**

OMB No 1545-0052  
**2016**  
**Open to Public Inspection**

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

Name of foundation TZP CARES FOUNDATION		<b>A Employer identification number</b> 46-4210327	
Number and street (or P O box number if mail is not delivered to street address) Room/suite 7 TIMES SQUARE NO 4307		<b>B Telephone number (see instructions)</b> (212) 398-0300	
City or town, state or province, country, and ZIP or foreign postal code NEW YORK, NY 10036		<b>C</b> If exemption application is pending, check here <input type="checkbox"/>	
<b>G</b> Check all that apply: <input type="checkbox"/> Initial return <input type="checkbox"/> Initial return of a former public charity <input type="checkbox"/> Final return <input type="checkbox"/> Amended return <input type="checkbox"/> Address change <input type="checkbox"/> Name change		<b>D 1.</b> Foreign organizations, check here <input type="checkbox"/> <b>2.</b> Foreign organizations meeting the 85% test, check here and attach computation <input type="checkbox"/>	
<b>H</b> Check type of organization: <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		<b>E</b> If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/>	
<b>I</b> Fair market value of all assets at end of year (from Part II, col (c), line 16) ▶ \$ 33,593		<b>J</b> Accounting method: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____ (Part I, column (d) must be on cash basis)	
		<b>F</b> If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/>	

<b>Part I Analysis of Revenue and Expenses</b> <i>(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions) )</i>		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
<b>Revenue</b>	<b>1</b> Contributions, gifts, grants, etc., received (attach schedule) . . . . .	58,800			
	<b>2</b> Check <input type="checkbox"/> if the foundation is <b>not</b> required to attach Sch B . . . . .				
	<b>3</b> Interest on savings and temporary cash investments . . . . .				
	<b>4</b> Dividends and interest from securities . . . . .				
	<b>5a</b> Gross rents . . . . .				
	<b>b</b> Net rental income or (loss) _____				
	<b>6a</b> Net gain or (loss) from sale of assets not on line 10 . . . . .				
	<b>b</b> Gross sales price for all assets on line 6a _____				
	<b>7</b> Capital gain net income (from Part IV, line 2) . . . . .			0	
	<b>8</b> Net short-term capital gain . . . . .				
	<b>9</b> Income modifications . . . . .				
	<b>10a</b> Gross sales less returns and allowances _____				
<b>b</b> Less Cost of goods sold . . . . .					
<b>c</b> Gross profit or (loss) (attach schedule) . . . . .					
<b>11</b> Other income (attach schedule) . . . . .					
<b>12 Total.</b> Add lines 1 through 11 . . . . .	58,800		0		
<b>Operating and Administrative Expenses</b>	<b>13</b> Compensation of officers, directors, trustees, etc . . . . .	0		0	0
	<b>14</b> Other employee salaries and wages . . . . .				
	<b>15</b> Pension plans, employee benefits . . . . .				
	<b>16a</b> Legal fees (attach schedule) . . . . .				
	<b>b</b> Accounting fees (attach schedule) . . . . .	3,500		0	3,500
	<b>c</b> Other professional fees (attach schedule) . . . . .				
	<b>17</b> Interest . . . . .				
	<b>18</b> Taxes (attach schedule) (see instructions) . . . . .				
	<b>19</b> Depreciation (attach schedule) and depletion . . . . .				
	<b>20</b> Occupancy . . . . .				
	<b>21</b> Travel, conferences, and meetings . . . . .				
	<b>22</b> Printing and publications . . . . .				
	<b>23</b> Other expenses (attach schedule) . . . . .	1,155		0	1,180
	<b>24 Total operating and administrative expenses.</b> Add lines 13 through 23 . . . . .	4,655		0	4,680
	<b>25</b> Contributions, gifts, grants paid . . . . .	102,000			102,000
<b>26 Total expenses and disbursements.</b> Add lines 24 and 25 . . . . .	106,655		0	106,680	
<b>27</b> Subtract line 26 from line 12 . . . . .					
<b>a Excess of revenue over expenses and disbursements</b> . . . . .	-47,855				
<b>b Net investment income</b> (if negative, enter -0-) . . . . .			0		
<b>c Adjusted net income</b> (if negative, enter -0-) . . . . .					

Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)			
		Beginning of year	End of year		
		(a) Book Value	(b) Book Value	(c) Fair Market Value	
Assets	1	Cash—non-interest-bearing . . . . .	81,578	33,593	33,593
	2	Savings and temporary cash investments . . . . .			
	3	Accounts receivable ▶ _____ Less allowance for doubtful accounts ▶ _____			
	4	Pledges receivable ▶ _____ Less allowance for doubtful accounts ▶ _____	350		
	5	Grants receivable . . . . .			
	6	Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions) . . . . .			
	7	Other notes and loans receivable (attach schedule) ▶ _____ Less allowance for doubtful accounts ▶ _____			
	8	Inventories for sale or use . . . . .			
	9	Prepaid expenses and deferred charges . . . . .			
	10a	Investments—U S and state government obligations (attach schedule)			
	b	Investments—corporate stock (attach schedule) . . . . .			
	c	Investments—corporate bonds (attach schedule) . . . . .			
	11	Investments—land, buildings, and equipment basis ▶ _____ Less accumulated depreciation (attach schedule) ▶ _____			
	12	Investments—mortgage loans . . . . .			
	13	Investments—other (attach schedule) . . . . .			
	14	Land, buildings, and equipment basis ▶ _____ Less accumulated depreciation (attach schedule) ▶ _____			
15	Other assets (describe ▶ _____)				
16	<b>Total assets</b> (to be completed by all filers—see the instructions Also, see page 1, item I)	81,928	33,593	33,593	
Liabilities	17	Accounts payable and accrued expenses . . . . .	3,525	3,500	
	18	Grants payable . . . . .			
	19	Deferred revenue . . . . .			
	20	Loans from officers, directors, trustees, and other disqualified persons			
	21	Mortgages and other notes payable (attach schedule) . . . . .			
	22	Other liabilities (describe ▶ _____)	455	0	
	23	<b>Total liabilities</b> (add lines 17 through 22) . . . . .	3,980	3,500	
Net Assets or Fund Balances	<b>Foundations that follow SFAS 117, check here</b> <input checked="" type="checkbox"/> <b>and complete lines 24 through 26 and lines 30 and 31.</b>				
	24	Unrestricted . . . . .	77,948	30,093	
	25	Temporarily restricted . . . . .			
	26	Permanently restricted . . . . .			
	<b>Foundations that do not follow SFAS 117, check here</b> <input type="checkbox"/> <b>and complete lines 27 through 31.</b>				
	27	Capital stock, trust principal, or current funds . . . . .			
	28	Paid-in or capital surplus, or land, bldg , and equipment fund			
29	Retained earnings, accumulated income, endowment, or other funds				
30	<b>Total net assets or fund balances</b> (see instructions) . . . . .	77,948	30,093		
31	<b>Total liabilities and net assets/fund balances</b> (see instructions) .	81,928	33,593		

**Part III Analysis of Changes in Net Assets or Fund Balances**

1	Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)	1	77,948
2	Enter amount from Part I, line 27a . . . . .	2	-47,855
3	Other increases not included in line 2 (itemize) ▶ _____	3	0
4	Add lines 1, 2, and 3 . . . . .	4	30,093
5	Decreases not included in line 2 (itemize) ▶ _____	5	0
6	Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30 .	6	30,093

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

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

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
<b>a</b>			
<b>b</b>			
<b>c</b>			
<b>d</b>			
<b>e</b>			

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	
<b>a</b>			
<b>b</b>			
<b>c</b>			
<b>d</b>			
<b>e</b>			

<b>2</b> Capital gain net income or (net capital loss)	2	
{ If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 }		
<b>3</b> Net short-term capital gain or (loss) as defined in sections 1222(5) and (6)	3	
{ If gain, also enter in Part I, line 8, column (c) (see instructions) If (loss), enter -0- in Part I, line 8 }		

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

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

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

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period?  Yes  No  
 If "Yes," the foundation does not qualify under section 4940(e) Do not complete this part

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

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col (b) divided by col (c))
2015	79,787	36,917	2 161254
2014	79,245	30,577	2 591654
2013	0	29,550	0 000000
2012			
2011			

<b>2</b> Total of line 1, column (d)	<b>2</b>	4 752908
<b>3</b> Average distribution ratio for the 5-year base period—divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years	<b>3</b>	1 584303
<b>4</b> Enter the net value of noncharitable-use assets for 2016 from Part X, line 5	<b>4</b>	46,003
<b>5</b> Multiply line 4 by line 3	<b>5</b>	72,883
<b>6</b> Enter 1% of net investment income (1% of Part I, line 27b)	<b>6</b>	0
<b>7</b> Add lines 5 and 6	<b>7</b>	72,883
<b>8</b> Enter qualifying distributions from Part XII, line 4	<b>8</b>	106,680

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate See the Part VI instructions

Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see instructions)

Table with 11 rows for excise tax calculations. Includes sections 1a through 11, with sub-sections 6a-6d. Columns for line numbers and amounts. Total amount owed is 0.

Part VII-A Statements Regarding Activities

Table with 10 rows for activity statements. Columns for question numbers and Yes/No responses. Includes questions 1a through 10 regarding political activities, reimbursements, and asset reporting.

Part VII-A Statements Regarding Activities (continued)

11 At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions). . . . . 11 No
12 Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement (see instructions) . . . . . 12 No
13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address HTTP //WWW TZPGROUP COM/ABOUT-TZP/TZP-CARES-3/ 13 Yes
14 The books are in care of THE FOUNDATION Telephone no (212) 398-0300

Located at C/O TZP GROUP 7 TIMES SQUARE NEW YORK NY ZIP+4 10036

15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here . . . . . 15

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

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

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

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

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

**5a** During the year did the foundation pay or incur any amount to

**(1)** Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?  Yes  No

**(2)** Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive?  Yes  No

**(3)** Provide a grant to an individual for travel, study, or other similar purposes?  Yes  No

**(4)** Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? (see instructions).  Yes  No

**(5)** Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?  Yes  No

**b** If any answer is "Yes" to 5a(1)–(5), did **any** of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)?  Yes  No

Organizations relying on a current notice regarding disaster assistance check here.

**c** If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?  Yes  No

If "Yes," attach the statement required by Regulations section 53.4945–5(d)

**6a** Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  Yes  No

**b** Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?  Yes  No

If "Yes" to 6b, file Form 8870

**7a** At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?  Yes  No

**b** If yes, did the foundation receive any proceeds or have any net income attributable to the transaction?  Yes  No

**Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors**

**1 List all officers, directors, trustees, foundation managers and their compensation (see instructions).**

(a) Name and address	Title, and average hours per week (b) devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
SAMUEL L KATZ TZP CARES FOUNDATION 7 TIMES SQUARE NEW YORK, NY 10036	CHAIRMAN OF THE BOARD, DIR 0 50	0	0	0
SHEERA MICHAEL TZP CARES FOUNDATION 7 TIMES SQUARE NEW YORK, NY 10036	DIRECTOR, VP, SECRETARY 2 00	0	0	0
VLADIMIR GUTIN TZP CARES FOUNDATION 7 TIMES SQUARE NEW YORK, NY 10036	DIRECTOR, TREASURER 0 50	0	0	0

**2 Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, enter "NONE."**

(a) Name and address of each employee paid more than \$50,000	Title, and average hours per week (b) devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE				

**Total** number of other employees paid over \$50,000.  0

**Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)**

**3 Five highest-paid independent contractors for professional services (see instructions). If none, enter "NONE".**

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

**Part IX-A Summary of Direct Charitable Activities**

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

	Expenses
<b>1</b>	
<b>2</b>	
<b>3</b>	
<b>4</b>	

**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
<b>1</b>	
<b>2</b>	
All other program-related investments. See instructions	
<b>3</b>	
<b>Total.</b> Add lines 1 through 3 . . . . . ▶	0

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

<b>1</b>	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes		
<b>a</b>	Average monthly fair market value of securities.	<b>1a</b>	0
<b>b</b>	Average of monthly cash balances.	<b>1b</b>	46,704
<b>c</b>	Fair market value of all other assets (see instructions).	<b>1c</b>	0
<b>d</b>	<b>Total</b> (add lines 1a, b, and c).	<b>1d</b>	46,704
<b>e</b>	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation).	<b>1e</b>	0
<b>2</b>	Acquisition indebtedness applicable to line 1 assets.	<b>2</b>	0
<b>3</b>	Subtract line 2 from line 1d.	<b>3</b>	46,704
<b>4</b>	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions).	<b>4</b>	701
<b>5</b>	<b>Net value of noncharitable-use assets.</b> Subtract line 4 from line 3. Enter here and on Part V, line 4.	<b>5</b>	46,003
<b>6</b>	<b>Minimum investment return.</b> Enter 5% of line 5.	<b>6</b>	2,300

**Part XI Distributable Amount** (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here  and do not complete this part.)

<b>1</b>	Minimum investment return from Part X, line 6.	<b>1</b>	2,300
<b>2a</b>	Tax on investment income for 2016 from Part VI, line 5.	<b>2a</b>	
<b>b</b>	Income tax for 2016 (This does not include the tax from Part VI).	<b>2b</b>	
<b>c</b>	Add lines 2a and 2b.	<b>2c</b>	0
<b>3</b>	Distributable amount before adjustments. Subtract line 2c from line 1.	<b>3</b>	2,300
<b>4</b>	Recoveries of amounts treated as qualifying distributions.	<b>4</b>	0
<b>5</b>	Add lines 3 and 4.	<b>5</b>	2,300
<b>6</b>	Deduction from distributable amount (see instructions).	<b>6</b>	0
<b>7</b>	<b>Distributable amount</b> as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1.	<b>7</b>	2,300

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

<b>1</b>	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
<b>a</b>	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26.	<b>1a</b>	106,680
<b>b</b>	Program-related investments—total from Part IX-B.	<b>1b</b>	0
<b>2</b>	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes.	<b>2</b>	
<b>3</b>	Amounts set aside for specific charitable projects that satisfy the		
<b>a</b>	Suitability test (prior IRS approval required).	<b>3a</b>	
<b>b</b>	Cash distribution test (attach the required schedule).	<b>3b</b>	
<b>4</b>	<b>Qualifying distributions.</b> Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4.	<b>4</b>	106,680
<b>5</b>	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b (see instructions).	<b>5</b>	0
<b>6</b>	<b>Adjusted qualifying distributions.</b> Subtract line 5 from line 4.	<b>6</b>	106,680

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

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

	(a) Corpus	(b) Years prior to 2015	(c) 2015	(d) 2016
<b>1</b> Distributable amount for 2016 from Part XI, line 7				2,300
<b>2</b> Undistributed income, if any, as of the end of 2016				
<b>a</b> Enter amount for 2015 only. . . . .			0	
<b>b</b> Total for prior years 20___, 20___, 20___		0		
<b>3</b> Excess distributions carryover, if any, to 2016				
<b>a</b> From 2011. . . . .				
<b>b</b> From 2012. . . . .				
<b>c</b> From 2013. . . . .				
<b>d</b> From 2014. . . . .			76,238	
<b>e</b> From 2015. . . . .			76,412	
<b>f</b> Total of lines 3a through e. . . . .	152,650			
<b>4</b> Qualifying distributions for 2016 from Part XII, line 4 ▶ \$ <u>106,680</u>				
<b>a</b> Applied to 2015, but not more than line 2a			0	
<b>b</b> Applied to undistributed income of prior years (Election required—see instructions). . . . .		0		
<b>c</b> Treated as distributions out of corpus (Election required—see instructions). . . . .	0			
<b>d</b> Applied to 2016 distributable amount. . . . .				2,300
<b>e</b> Remaining amount distributed out of corpus	104,380			
<b>5</b> Excess distributions carryover applied to 2016 (If an amount appears in column (d), the same amount must be shown in column (a) )				0
<b>6</b> Enter the net total of each column as indicated below:				
<b>a</b> Corpus Add lines 3f, 4c, and 4e Subtract line 5	257,030			
<b>b</b> Prior years' undistributed income Subtract line 4b from line 2b . . . . .		0		
<b>c</b> Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed. . . . .		0		
<b>d</b> Subtract line 6c from line 6b Taxable amount—see instructions . . . . .		0		
<b>e</b> Undistributed income for 2015 Subtract line 4a from line 2a Taxable amount—see instructions . . . . .			0	
<b>f</b> Undistributed income for 2016 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2017 . . . . .				0
<b>7</b> Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions). . . . .	0			
<b>8</b> Excess distributions carryover from 2011 not applied on line 5 or line 7 (see instructions). . . . .	0			
<b>9</b> Excess distributions carryover to 2017. Subtract lines 7 and 8 from line 6a . . . . .	257,030			
<b>10</b> Analysis of line 9				
<b>a</b> Excess from 2012. . . . .				
<b>b</b> Excess from 2013. . . . .				
<b>c</b> Excess from 2014. . . . .			76,238	
<b>d</b> Excess from 2015. . . . .			76,412	
<b>e</b> Excess from 2016. . . . .			104,380	

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

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

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

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

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

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

**a** "Assets" alternative test—enter

**(1)** Value of all assets . . . . .

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

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

**c** "Support" alternative test—enter

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

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

**(3)** Largest amount of support from an exempt organization

**(4)** Gross investment income

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

**1 Information Regarding Foundation Managers:**

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

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

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

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

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

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

---

**c** Any submission deadlines

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

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i> See Additional Data Table				
<b>Total . . . . .</b> ▶ <b>3a</b>				102,000
<b>b</b> <i>Approved for future payment</i>				
<b>Total . . . . .</b> ▶ <b>3b</b>				0

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated

Table with 5 main columns: (a) Business code, (b) Amount, (c) Exclusion code, (d) Amount, (e) Related or exempt function income. Rows include categories like Program service revenue, Fees and contracts from government agencies, Membership dues and assessments, Interest on savings and temporary cash investments, Dividends and interest from securities, Net rental income, Other investment income, Gain or (loss) from sales of assets, Net income from special events, Gross profit from sales of inventory, and Other revenue.

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

Table with 2 columns: Line No. and Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes) (See instructions).



Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
BRIDGEPORT HOSPITAL FOUNDATION BURN UNIT 1 NORTH WATER STREET 302 NORWALK, CT 06854	NONE	PC	RESIDENTS OF FAIRFIELD COUNTY WHO ARE BURN VICTIMS	1,500
JUMPSTART FOR CHILDREN 505 EIGHT AVENUE SUITE 1100 NEW YORK, NY 10018	NONE	PC	EARLY EDUCATION ORGANIZATION FOCUSED ON HELPING PRE-SCHOOL CHILDREN IN LOW-INCOME NEIGHBORHOODS DEVELOP THE LANGUAGE AND LITERACY SKILLS THEY NEED TO BE READY FOR KINDERGARTEN, SETTING THEM ON A PATH TO CLOSE THE ACHIEVEMENT GAP BEFORE IT IS TOO LATE RECRUITS AND TRAINS COLLEGE STUDENTS AND COMMUNITY MEMBERS AS VOLUNTEERS	1,500
TRINITY'S SERVICES AND FOOD FOR THE HOMELESS 602 E 9TH STREET NEW YORK, NY 10009	NONE	PC	FUNDS WILL BE USED TO PROVIDE FOOD FOR THE SAFH SOUP KITCHEN AND FOOD PANTRY, SERVING HOMELESS AND LOW-INCOME PEOPLE ON LOWER EAST SIDE IN 2015, THEY SERVED NEARLY 200,000 MEALS THROUGH THEIR SOUP KITCHEN AND FOOD PANTRY	1,500
BREAKTHROUGH OPTIONS FOR FAMILIES 4 VILLAWAY ROAD NORWALK, CT 06855	NONE	PC	GRANT WILL SUPPORT THE EMERGENCY REQUESTS FUND FOR SINGLE PARENT FAMILIES LIVING BELOW THE FEDERAL POVERTY LINE EXS OF EMERGENCY FUNDING THREAT OF UTILITIES BEING DISCONTINUED, FOOD, BASIC NEEDS (TOILETRIES), CHILD CARE TO ALLOW PARENT TO WORK	1,500
SPARK 101A CLAY STREET 118 SAN FRANCISCO, CA 94111	NONE	PC	A PHILANTHROPIC NETWORK OF YOUNG PROFESSIONALS WHO INVEST TO IMPROVE THE LIVES OF WOMEN AROUND THE WORLD THROUGH INITATIVES SUCH AS CROWD-SOURCED GRANTS, PRO BONO PROFESSIONAL SERVICES AND CONNECTIONS FOR INVESTMENT IN GRASSROOTS WOMEN'S ORGANIZATIONS	1,500
<b>Total . . . . .</b> ▶				102,000
<b>3a</b>				

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
PREP FOR PREP 328 W 71ST STREET NEW YORK, NY 10023	NONE	PC	PREP FOR PREP IDENTIFIES NEW YORK CITY'S MOST PROMISING STUDENTS OF COLOR AND PREPARES THEM FOR PLACEMENT AT INDEPENDENT SCHOOLS IN THE CITY & THROUGHOUT THE NORTHEAST, ALSO OFFERS SUPPORT AND OPPORTUNITIES TO ENSURE THE ACADEMIC ACCOMPLISHMENT AND PERSONAL GROWTH	1,500
CATS VS CANCER 300 NEWARK STREET 6B HOBOKEN, NJ 07030	NONE	PC	CATS VS CANCER PROVIDES A CURATED COLLECTION OF THE MOST HILARIOUS, ADORABLE, AND CAPTIVATING CAT-THINGS FROM AROUND THE WEB THE MONEY RAISED THROUGH ADS SOLD ON THE SITE, AS WELL AS DONATIONS THROUGH THE SITE, ARE GIVEN TO CANCER CHARITIES	1,000
INJURED POLICE OFFICERS FUND 9330 W LAKE MEAD BLVD SUITE 130 LAS VEGAS, NV 89134	NONE	PC	THE MISSION OF THE INJURED POLICE OFFICERS FUND IS TO HELP REDUCE THE FINANCIAL BURDEN SUFFERED BY POLICE OFFICERS AND THEIR FAMILIES IN THE EVENT OF A LINE OF DUTY INJURY OR DEATH BY PROVIDING MONETARY ASSISTANCE TO THESE OFFICERS AND THEIR FAMILIES	3,000
NAVY SEAL FOUNDATION 1619 D STREET VIRGINIA BEACH, VA 23459	NONE	PC	PROVIDES A COMPREHENSIVE SET OF PROGRAMS SPECIFICALLY DESIGNED TO REDUCE THE STRESSORS ASSOCIATED WITH THE TREMENDOUS AMOUNT OF UNCERTAINTY AND PRESSURE THAT COMES WITH LIFE IN NAVAL SPECIAL WARFARE (NSW)	3,000
NEVADA MILITARY SUPPORT ALLIANCE 9525 HILLWOOD DRIVE SUITE 140 LAS VEGAS, NV 89134	NONE	PC	THE MISSION OF THE NEVADA MILITARY SUPPORT ALLIANCE IS TO ORGANIZE AND PROMOTE THE RECOGNITION AND SUPPORT OF NEVADA'S MEN AND WOMEN OF OUR ARMED FORCES, VETERANS AND THEIR FAMILIES	3,000
<b>Total . . . . .</b> ▶				102,000
<b>3a</b>				

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
SPRINGFIELD SCHOOL VOLUNTEERS 1550 MAIN STREET 3RD FLOOR SPRINGFIELD, MA 01103	NONE	PC	SPRINGFIELD SCHOOL VOLUNTEERS (SSV) IS A NON-PROFIT ORGANIZATION THAT MATCHES THE RESOURCES OF THE COMMUNITY WITH THE NEEDS OF THE SPRINGFIELD PUBLIC SCHOOLS WITH A FOCUS ON PROVIDING ACADEMIC SUPPORT THROUGH MENTORING, TUTORING, AND EARLY LITERACY PROGRAMS	2,500
JUNIOR ACHIEVEMENT OF WESTERN MASSACHUSETTS 1500 MAIN STREET SUITE 217 SPRINGFIELD, MA 01115	NONE	GROUP	PROVIDES A VARIETY OF ECONOMIC EDUCATION AND FINANCIAL LITERACY PROGRAMS TO THE ELEMENTARY TO HIGH SCHOOL-AGE YOUTH OF WESTERN MASSACHUSETTS AND VERMONT COMMUNITY VOLUNTEERS DELIVER THE CURRICULUM WHILE SHARING THEIR EXPERIENCES WITH STUDENTS	2,500
OPEN PANTRY COMMUNITY SERVICES 287 STATE STREET SPRINGFIELD, MA 01101	NONE	PC	PROVIDES MEANINGFUL SERVICES AND PROCESSES, WITH HUMANITY AND DIGNITY, TO ASSIST PEOPLE WHO ARE HUNGRY, HOMELESS OR DISADVANTAGED TO IMPROVE THE QUALITY OF THEIR LIVES THROUGH A VARIETY OF PROGRAMS	2,500
SPRINGFIELD LADY BALLERS 100 ACORN STREET SPRINGFIELD, MA 01109	NONE	PC	GRANT FUNDS WOULD BE AWARDED TO BOYS & GIRLS CLUB FAMILY CENTER, EARMARKED FOR THE SUPPORT OF THE SPRINGFIELD LADY BALLERS SPRINGFIELD LADY BALLERS IS FOCUSED ON TEACHING AND TRAINING GIRLS IN THE FUNDAMENTALS OF BASKETBALL WITH AN EMPHASIS ON PREPARING THEM FOR THE NEXT LEVEL OF PLAY IN HIGH SCHOOL AND COLLEGE THEY FIELD AAU TEAMS AND RUN SKILLS CLINICS	2,500
TREE HOUSE 5666 LINCOLN DRIVE SUITE 201 MINNEAPOLIS, MN 55436	NONE	PC	PROVIDES PROGRAMS TO SUPPORT TROUBLED TEENS WITH MENTORING, ACTIVITIES, SUPPORT GROUPS, AND SERVICE PROJECTS	2,500
<b>Total . . . . .</b> ▶				102,000
<b>3a</b>				

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
FOLD OF HONOR MINNESOTA 5800 PATRIOT DRIVE OWASSO, OK 740558267	NONE	PC	PROVIDES ANNUAL EDUCATIONAL SCHOLARSHIPS TO THE MILITARY FAMILIES OF THOSE WHO HAVE BEEN KILLED OR DISABLED WHILE IN ACTIVE DUTY	2,500
FAMILIES MOVING FORWARD PROGRAM (RUN BY BEACON INTERFAITH HOUSING COOPERATI 1808 EMERSON AVENUE NORTH MINNEAPOLIS, MN 55411	NONE	PC	BEACON'S FAMILIES MOVING FORWARD PROGRAM OFFERS FAMILIES EXPERIENCING HOMELESSNESS HOSPITALITY, EMERGENCY SHELTER AND A PATH TO HOME WITH SUPPORT FOR STABILITY	2,500
SHARING AND CARING HANDS 525 N 7TH STREET MINNEAPOLIS, MN 55405	NONE	PC	SHARING AND CARING HANDS IS A SAFETY-NET ORGANIZATION TO HELP THOSE WHO COULD NOT OBTAIN HELP FROM THE WELFARE SYSTEM WE EXIST AS A VEHICLE FOR VOLUNTEERS TO COMMIT THEIR TIME AND RESOURCES TO MAKE A DIFFERENCE IN THE LIVES OF THE PEOPLE OF THE COMMUNITY	2,500
FRIENDSHIP CIRCLE PROGRAM (RUN BY CHABAD JEWISH CENER OF SOUTH METRO DENVER 9950 LOAN TREE PARKWAY LONE TREE, CO 801248947	NONE	PC	A NON-PROFIT ORGANIZATION DEDICATED TO MAKING A DRAMATIC DIFFERENCE IN THE LIVES OF CHILDREN & YOUNG ADULTS WITH SPECIAL NEEDS, AND THEIR FAMILIES, THROUGH ONE-TO-ONE PEER MENTORING AND SOCIAL-RECREATIONAL PROGRAMS	3,000
JEWISH FAMILY SERVICE OF COLORADO FOR JEWISH DISABILITIES NETWORK 3201 SOUTH TAMARAC DRIVE DENVER, CO 80231	NONE	PC	MISSION TO STRENGTHEN THE COMMUNITY BY PROVIDING VITAL SERVICES TO PEOPLE IN NEED, INCLUDING HELPING SENIORS LIVE INDEPENDENTLY AT HOME, PROVIDING QUALITY MENTAL HEALTH COUNSELING, TRAINING AND JOB PLACEMENT FOR THOSE WITH DEVELOPMENTAL DISABILITIES AND OTHER BARRIERS TO EMPLOYMENT, AND PROVIDES FOOD AND FINANCIAL AID TO PEOPLE IN CRISIS	2,000
<b>Total</b> . . . . . <b>3a</b>				102,000

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Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
NATIONAL SPORTS CENTER FOR THE DISABLED  1801 MILE HIGH STADIUM CIRCLE 1500 DENVER, CO 80204	NONE	PC	WORLD-RECOGNIZED THERAPEUTIC RECREATION ORGANIZATION, PROVIDING LEADERSHIP AND EXPERTISE IN ADAPTIVE SPORTS OFFERS A VARIETY OF YEAR-ROUND SPORTS AND RECREATIONAL ADVENTURES	1,000
SADDLE UP FOUNDATION 39850 SWIFT CREEK CIRCLE ELIZABETH, CO 80107	NONE	PC	A PREMIER FACILITY THAT PROVIDES INCLUSIVE AND INTEGRATED THERAPEUTIC ACTIVITIES AND EDUCATIONAL PROGRAMS FOR INDIVIDUALS WITH OR WITHOUT SPECIAL NEEDS AS WELL AS THEIR FAMILIES AND CAREGIVERS	1,000
SPECIAL OLYMPICS OF COLORADO 384 INVERNESS PARKWAY SUITE 100 ENGLEWOOD, CO 80112	NONE	PC	MISSION IS TO IMPROVE THE LIVES OF PEOPLE WITH INTELLECTUAL DISABILITIES THROUGH QUALITY SPORTS TRAINING AND COMPETITION ONE OF 50 US STATE CHAPTERS SANCTIONED BY SPECIAL OLYMPICS OF NORTH AMERICA & SPECIAL OLYMPICS INTERNATIONAL	3,000
AMERICAN CAMPUS CHARITIES 12700 HILL COUNTRY BLVD SUITE T-200 AUSTIN, TX 78738	NONE	PF	SUPPORT PHILANTHROPIES THAT PROMOTE EDUCATION, SHELTER AND WELL-BEING FOR CHILDREN AND ADOLESCENTS, AND TO CONTRIBUTE TO THE CHARITABLE EFFORTS OF AMERICAN CAMPUS COMMUNITIES NATIONWIDE	3,000
GREEN LEAF LEARNING FARM PROGRAM (RUN BY KNOWLEDGE QUEST) 590 JENNETTE PLACE MEMPHIS, TN 38126	NONE	PC	GREEN LEAF LEARNING FARM IS 2/3-ACRE URBAN, USDA-CERTIFIED ORGANIC MICRO-FARM , FOCUSING ON STUDENT EDUCATION, COMMUNITY/ECONOMIC DEVELOPMENT, AND FOOD ACCESS/SECURITY ON THE FARM, KQ STUDENTS AND COMMUNITY MEMBERS LEARN HOW TO GROW FOOD IN WAYS THAT BUILD COMMUNITY AND INCREASE THE NEIGHBORHOOD'S ACCESS TO HEALTHY FOODS	3,000
<b>Total . . . . .</b>				102,000
<b>3a</b>				

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a Paid during the year</b>				
CAMINAR LATINO PO BOX 48623 DORAVILLE, GA 30362	NONE	PC	CAMINAR LATINO IS GEORGIA'S FIRST AND ONLY COMPREHENSIVE DOMESTIC-VIOLENCE INTERVENTION PROGRAM FOR LATINO FAMILIES A GRANT WOULD ASSIST VICTIMS WITH OBTAINING A TEMPORARY PROTECTIVE ORDER, CONTRIBUTE TO INDIVIDUAL COUNSELING SESSIONS FOR CHILDREN WHO HAVE BEEN SEXUALLY ABUSED, AND FUND SUPPORT GROUPS FOR SURVIVORS WHERE THEY LEARN ABOUT DOMESTIC VIOLENCE, THEIR RIGHTS, AND HOW TO INCREASE THEIR SAFETY	3,000
FLORIDA COLLEGE ACADEMY 7032 TEMPLE TERRACE HIGHWAY TEMPLE TERRACE, FL 33637	NONE	PC	FLORIDA COLLEGE ACADEMY IS A PRIVATE ELEMENTARY AND MIDDLE SCHOOL SERVING TEMPLE TERRACE AND NORTHEAST TAMPA, FLORIDA THE SCHOOL IS IN DESPERATE NEED OF PURCHASING NEW PERCUSSION INSTRUMENTS FOR THEIR MUSIC EDUCATION PROGRAM THE CURRENT BUDGET WILL NOT ALLOW FOR THIS EXTRA EXPENDITURE, SO THE SCHOOL IS TRYING TO RAISE THE FUNDS FOR THE PURCHASE	3,000
PROJECT KIDS IDAHO 3669 S CAPULET AVENUE MERIDIAN, ID 83642	NONE	PC	HELPING HOMELESS AND DISADVANTAGED CHILDREN IN THE WEST ADA SCHOOL DISTRICT WITH BASIC NEEDS, SUCH AS CLOTHING, SHOES, AND FOOD, OR EMERGENCY FUNDS TO ASSIST WITH FAMILY BILLS	3,000
ST MARYS CHILD CENTER 901 DR MARTIN LUTHER KIND JR STREET INDIANAPOLIS, IN 46202	NONE	PC	PROVIDES PRE-K CHILDREN WITH HIGHEST QUALITY EARLY CHILDHOOD LEARNING EXPERIENCES AND SOCIAL SERVICE SUPPORT FOR CHILDREN LIVING IN POVERTY	3,000
LONG ISLAND ALZHEIMERS FOUNDATION 5 CHANNEL DRIVE PT WASHINGTON, NY 11050	NONE	PC	WORKS TO HELP LIGHTEN THE BURDEN AND IMPROVE THE QUALITY OF LIFE FOR THOSE SUFFERING WITH ALZHEIMER'S DISEASE AND RELATED DEMENTIAS, THEIR CAREGIVERS AND THEIR FAMILIES INITIAL EFFORTS INCLUDED AN INFORMATION HOTLINE, PRODUCTION OF THE AREA'S FIRST COMPREHENSIVE RESOURCE DIRECTORY, AND A SOCIAL-MODEL ADULT DAY SERVICES PROGRAM	2,500
<b>Total . . . . . ▶</b>				102,000
<b>3a</b>				

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Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
SPECIAL OLYMPICS-NY LONG ISLAND REGION 560 BROADHOLLOW ROAD SUITE 106 MELVILLE, NY 11747	NONE	PC	SPECIAL OLYMPICS NEW YORK (SONY) PROVIDES YEAR-ROUND SPORTS TRAINING AND ATHLETIC COMPETITION IN A VARIETY OF OLYMPIC-STYLE SPORTS FOR ALL CHILDREN AND ADULTS WITH INTELLECTUAL DISABILITIES SONY IS THE LARGEST PROGRAM OF ITS TYPE IN THE US, SERVING 67,162 ATHLETES WITH THE SUPPORT OF OVER 33,000 VOLUNTEERS	2,500
AMERICAN CANCER SOCIETY-MAKING STRIDES OF LONG ISLAND 250 WILLIAMS STREET NW ATLANTA, GA 30303	NONE	GROUP	COMMUNITY-BASED VOLUNTARY HEALTH ORGANIZATION DEDICATED TO ELIMINATING CANCER AS A MAJOR HEALTH PROBLEM BY PREVENTING CANCER, SAVING LIVES, AND DIMINISHING SUFFERING FROM CANCER, THROUGH RESEARCH, EDUCATION, ADVOCACY, AND SERVICE	2,500
ISLAND HARVEST 40 MARCUS BLVD HAUPPAUGE, NY 11788	NONE	PC	ISLAND HARVEST WORKS TO END HUNGER AND REDUCE FOOD WASTE ON LONG ISLAND BY SERVING AS THE BRIDGE BETWEEN THOSE WHO HAVE SURPLUS FOOD AND THOSE WHO NEED IT THE ORGANIZATION COLLECTS SURPLUS FOOD FROM OVER 800 LOCAL RESTAURANTS, CATERERS, FARMERS, AND OTHER FOOD BUSINESSES AND THEN DISTRIBUTES IT TO A NETWORK OF MORE THAN 570 SOUP KITCHENS, FOOD PANTRIES, AND OTHER PLACES ACCESSIBLE TO THOSE IN NEED ISLAND HARVEST ALSO CONDUCTS EDUCATIONAL PROGRAMS TO INCREASE HUNGER AWARENESS AND REDUCE FOOD WASTE ON LONG ISLAND	2,500
GIVE KIDS THE WORLD 210 SOUTH BASS ROAD KISSIMMEE, FL 34746	NONE	PC	GIVE KIDS THE WORLD VILLAGE IS A 74-ACRE RESORT THAT EXISTS ONLY FOR THE FULFILLMENT OF WISHES GRANTED TO CHILDREN (AGE 3-18) WITH LIFE-THREATENING ILLNESSES WHO HAVE BEEN GRANTED A WISH THROUGH A PARTNERING WISH-GRANTING ORGANIZATION (EX MAKE A WISH OF ILLINOIS & A SPECIAL WISH OF CHICAGO)	3,000
JDRF-JUVENILE DIABETES RESEARCH FOUNDATION 26 BROADWAY 14TH FLOOR NEW YORK, NY 10004	NONE	PC	JDRF'S GOAL IS TO PROGRESSIVELY REMOVE THE IMPACT OF T1D FROM PEOPLE'S LIVES UNTIL WE ACHIEVE A WORLD WITHOUT T1D	3,000
<b>Total . . . . .</b> ▶				102,000
<b>3a</b>				

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a Paid during the year</b>				
UW CARBONE CANCER CENTER 600 HIGHLAND AVENUE MADISON, WI 53792	NONE	PC	THE UNIVERSITY OF WISCONSIN CARBONE CANCER CENTER IS RECOGNIZED THROUGHOUT THE MIDWEST AND THE NATION AS ONE OF THE LEADING INNOVATORS IN CANCER RESEARCH, QUALITY PATIENT CARE AND ACTIVE COMMUNITY INVOLVEMENT UW CARBONE CANCER CENTER IS THE ONLY COMPREHENSIVE CANCER CENTER IN WISCONSIN, AS DESIGNATED BY THE NATIONAL CANCER INSTITUTE	3,000
HOMEFRONT INC 88 HAMILTON AVENUE STAMFORD, CT 06902	NONE	PC	HOMEFRONT IS A COMMUNITY-BASED, VOLUNTEER-DRIVEN HOME REPAIR PROGRAM THAT PROVIDES FREE REPAIRS TO LOW-INCOME HOMEOWNERS, THUS ENABLING THEM TO REMAIN IN THEIR HOMES WITH AN IMPROVED QUALITY OF LIFE	3,000
A BETTER CHANCE INC OF NEW CANAAN PO BOX 355 NEW CANAAN, CT 06840	NONE	PC	EACH YEAR, ABC OF NEW CANAAN SELECTS PROMISING SCHOLARS FROM THE TRI-STATE AREA TO ATTEND NEW CANAAN HIGH SCHOOL DURING THE ACADEMIC YEAR, THE STUDENTS LIVE IN A HOUSE OWNED AND MAINTAINED BY THE ORGANIZATION FUNDS ARE REQUESTED FOR MAINTENANCE OF THE RESIDENCE AND FOR A SUMMER PROGRAM FOR JUNIORS AND SENIORS	3,000
SOUNDWATERS INC 1281 COVE ROAD STAMFORD, CT 06902	NONE	PC	SOUNDWATERS'S MISSION IS TO PROTECT LONG ISLAND SOUND THROUGH EDUCATION, TEACHING 28,000 STUDENTS (9,000 UNDERSERVED) IN 64 COMMUNITIES ACROSS CT & NY ABOUT THE LONG ISLAND SOUND ENVIRONMENT FUNDS REQUESTED TO SUPPORT HARBORFEST 16, A DAY-LONG FESTIVAL AND CELEBRATION OF STAMFORD HARBOR	1,000
MIKROWEWORKS FOUNDATION 1207 4TH STREET PH I SANTA MONICA, CA 90401	NONE	PC	THROUGH ITS SCHOLARSHIP PROGRAMS, INCLUDING THE WORK ETHIC SCHOLARSHIP PROGRAM, THE FOUNDATION PROVIDES FINANCIAL ASSISTANCE TO QUALIFIED INDIVIDUALS WITH A DESIRE TO LEARN A SKILL THAT IS IN DEMAND THE FOUNDATION HAS BEEN INSTRUMENTAL IN GRANTING MORE THAN \$3 MILLION IN EDUCATION FOR TRADE SCHOOLS ACROSS THE COUNTRY	3,000
<b>Total . . . . . ▶</b>				102,000

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Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
ANGEL FLIGHT 3161 DONALD DOUGLAS LOOP SOUTH SANTA MONICA, CA 90405	NONE	PC	ANGEL FLIGHT WEST (AFW) ARRANGES FREE, NON-EMERGENCY AIR TRANSPORTATION WITHIN THE 13 WESTERN STATES FOR CHILDREN AND ADULTS WITH SERIOUS MEDICAL CONDITIONS AND OTHER COMPELLING NEEDS AFW MATCHES UP VOLUNTEER PILOTS TO PEOPLE IN NEED, ENABLING THEM TO RECEIVE MEDICAL TREATMENT AND OTHER VITAL CARE THAT MIGHT OTHERWISE BE INACCESSIBLE BECAUSE OF FINANCIAL, MEDICAL, OR GEOGRAPHIC LIMITATIONS LAC'S COO FLIES FOR THIS ORGANIZATION	3,000
EVERYBODY WINS DC 1920 N STREET NW WASHINGTON DC, DC 20036	NONE	PC	EVERYBODY WINS! DC'S MISSION IS TO BRING THE JOY OF READING TO LOW-INCOME ELEMENTARY SCHOOL STUDENTS IN THE DC METRO AREA	3,000
<b>Total</b> . . . . . <b>3a</b>				102,000

**TY 2016 Accounting Fees Schedule****Name:** TZP CARES FOUNDATION**EIN:** 46-4210327

<b>Category</b>	<b>Amount</b>	<b>Net Investment Income</b>	<b>Adjusted Net Income</b>	<b>Disbursements for Charitable Purposes</b>
ACCOUNTING FEES	3,500	0		3,500

**TY 2016 Other Expenses Schedule****Name:** TZP CARES FOUNDATION**EIN:** 46-4210327**Other Expenses Schedule**

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
FILING FEES	235	0		260
INSURANCE	920	0		920

**TY 2016 Other Liabilities Schedule****Name:** TZP CARES FOUNDATION**EIN:** 46-4210327

<b>Description</b>	<b>Beginning of Year - Book Value</b>	<b>End of Year - Book Value</b>
DUE TO TZP MANAGEMENT ASSOCIATES, LLC	455	0

**Schedule B**  
(Form 990, 990-EZ,  
or 990-PF)  
Department of the Treasury  
Internal Revenue Service

**Schedule of Contributors**  
▶ Attach to Form 990, 990-EZ, or 990-PF  
▶ Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at  
[www.irs.gov/form990](http://www.irs.gov/form990)

OMB No 1545-0047  
**2016**

**Name of the organization**  
TZP CARES FOUNDATION

**Employer identification number**  
46-4210327

**Organization type** (check one)

**Filers of:**

**Section:**

Form 990 or 990-EZ

501(c)( ) (enter number) organization

4947(a)(1) nonexempt charitable trust **not** treated as a private foundation

527 political organization

Form 990-PF

501(c)(3) exempt private foundation

4947(a)(1) nonexempt charitable trust treated as a private foundation

501(c)(3) taxable private foundation

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

**General Rule**

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

**Special Rules**

For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33<sup>1</sup> 3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1 Complete Parts I and II

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

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

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

<b>Name of organization</b> TZP CARES FOUNDATION	<b>Employer identification number</b> 46-4210327
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**Part I** **Contributors** (see instructions) Use duplicate copies of Part I if additional space is needed

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	VLADIMIR GUTIN	\$ 15,000	Person <input checked="" type="checkbox"/>
	440 WEST END AVENUE APT 7B		Payroll <input type="checkbox"/>
	NEW YORK, NY10024		Noncash <input type="checkbox"/>
			(Complete Part II for noncash contributions )
2	TZP MANAGEMENT ASSOCIATES LLC	\$ 26,000	Person <input checked="" type="checkbox"/>
	7 TIMES SQUARE SUITE 4307		Payroll <input type="checkbox"/>
	NEW YORK, NY10036		Noncash <input type="checkbox"/>
			(Complete Part II for noncash contributions )
3	ROWAN FAMILY FOUNDATION	\$ 11,000	Person <input checked="" type="checkbox"/>
	927 5TH AVENUE		Payroll <input type="checkbox"/>
	NEW YORK, NY100212650		Noncash <input type="checkbox"/>
			(Complete Part II for noncash contributions )
.		\$	Person <input type="checkbox"/>
			Payroll <input type="checkbox"/>
			Noncash <input type="checkbox"/>
			(Complete Part II for noncash contributions )
.		\$	Person <input type="checkbox"/>
			Payroll <input type="checkbox"/>
			Noncash <input type="checkbox"/>
			(Complete Part II for noncash contributions )
.		\$	Person <input type="checkbox"/>
			Payroll <input type="checkbox"/>
			Noncash <input type="checkbox"/>
			(Complete Part II for noncash contributions )

<b>Name of organization</b> TZP CARES FOUNDATION	<b>Employer identification number</b> 46-4210327
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**Part II** **Noncash Property**

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
<small>(see instructions) Use duplicate copies of Part II if additional space is needed</small>			
		\$	
		\$	
		\$	
		\$	
		\$	
		\$	
		\$	
		\$	
		\$	
		\$	
		\$	
		\$	
		\$	
		\$	
		\$	

<b>Name of organization</b> TZP CARES FOUNDATION	<b>Employer identification number</b> 46-4210327
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**Part III** Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once. See instructions.) ▶ \$ \_\_\_\_\_  
Use duplicate copies of Part III if additional space is needed

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift Transferee's name, address, and ZIP 4	Relationship of transferor to transferee

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift Transferee's name, address, and ZIP 4	Relationship of transferor to transferee

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift Transferee's name, address, and ZIP 4	Relationship of transferor to transferee

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift Transferee's name, address, and ZIP 4	Relationship of transferor to transferee