

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



efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93491319019927 OMB No. 1545-0052

2016

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

Department of the Treasury

Internal Revenue Service

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 www.irs.gov/form990pf.

Open to Public Inspection

For calendar year 2016, or tax year beginning 01-01-2016 , and ending 12-31-2016 A Employer identification number ISRAEL & MOLLIE MYERS FOUNDATION Number and street (or P O box number if mail is not delivered to street address) Room/suite 3635 OLD COURT ROAD NO 207 B Telephone number (see instructions) (410) 653-0556 City or town, state or province, country, and ZIP or foreign postal code BALTIMORE, MD 21208 $\boldsymbol{C}\,$ If exemption application is pending, check here ☐ Initial return ☐ Initial return of a former public charity G Check all that apply D 1. Foreign organizations, check here ☐ Final return Amended return 2. Foreign organizations meeting the 85% test, check here and attach computation ☐ Name change Address change E If private foundation status was terminated under section 507(b)(1)(A), check here ✓ Section 501(c)(3) exempt private foundation **H** Check type of organization \square Section 4947(a)(1) nonexempt charitable trust \square Other taxable private foundation I Fair market value of all assets at end ✓ Cash ☐ Accrual J Accounting method F If the foundation is in a 60-month termination of year (from Part II, col (c), line 16)▶\$ 10,247,013 under section 507(b)(1)(B), check here Other (specify) (Part I, column (d) must be on cash basis) Part I Analysis of Revenue and Expenses (The total (d) Disbursements Revenue and (b) Net investment (c) Adjusted net for charitable of amounts in columns (b), (c), and (d) may not necessarily expenses per books purposes (cash basis only) income equal the amounts in column (a) (see instructions)) Contributions, gifts, grants, etc , received (attach 363.952 schedule) Check ► L If the foundation is **not** required to attach 2 3 Interest on savings and temporary cash investments 4 Dividends and interest from securities 139,675 139,675 5a Net rental income or (loss) 402,487 6a Net gain or (loss) from sale of assets not on line 10 Gross sales price for all assets on line 6a Capital gain net income (from Part IV, line 2) 402,487 Net short-term capital gain Income modifications . . 10a Gross sales less returns and allowances Less Cost of goods sold b Gross profit or (loss) (attach schedule) c Other income (attach schedule) اروه -26,433 -26,070 12 **Total.** Add lines 1 through 11 879.681 516,092 25.000 Compensation of officers, directors, trustees, etc 25.000 13 14 Other employee salaries and wages 36,67 0 0 15 1.158 1.158 Pension plans, employee benefits Operating and Administrative Expenses اروه Legal fees (attach schedule) . . 10,682 10,682 0 9 0 29,313 29,313 Accounting fees (attach schedule) Other professional fees (attach schedule) 0 42 116 42 116 17 ارچە 9,100 6,928 18 Taxes (attach schedule) (see instructions) 19 Depreciation (attach schedule) and depletion 451 45: 3,198 3,198 20 Ω 375 0 21 Travel, conferences, and meetings . 375 22 Printing and publications . 23 Other expenses (attach schedule) 157,576 157,576 24 Total operating and administrative expenses. Add lines 13 through 23 . . . 288.468 25,000 315,640 25 Contributions, gifts, grants paid 757.427 757.427 26 Total expenses and disbursements. Add lines 24 and 1,073,067 288,468 782,427 27 Subtract line 26 from line 12 Excess of revenue over expenses and -193,386 disbursements Net investment income (if negative, enter -0-) 227,624 **Adjusted net income**(If negative, enter -0-) For Paperwork Reduction Act Notice, see instructions. Cat No 11289X Form **990-PF** (2016)

7,137,446

7.231.491

130,050

130,050

7,101,441

7,101,441

7,231,491

(چە

6,935,505

7,245,429

336.868

336,868

6,908,561

6,908,561

7,245,429

7,101,441

-193,386

6,909,001

6,908,561

Form 990-PF (2016)

946

440

1

2

3

4

5

6

9,937,089

10,247,013

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

Investments—corporate bonds (attach schedule)

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

Accounts payable and accrued expenses

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 end of year (line 4 minus line 5)—Part II, column (b), line 30

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

Analysis of Changes in Net Assets or Fund Balances

Loans from officers, directors, trustees, and other disqualified persons

Mortgages and other notes payable (attach schedule).

Total liabilities(add lines 17 through 22)

Land, buildings, and equipment basis

instructions Also, see page 1, item I)

Other assets (describe > _

Other liabilities (describe ▶_

Temporarily restricted

Permanently restricted . .

Unrestricted

and complete lines 27 through 31.

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

Decreases not included in line 2 (itemize) ▶ _

Other increases not included in line 2 (itemize) -

Enter amount from Part I, line 27a

Assets 10a

h c

11

12

13 14

15

16

17

18

19

20

21

22

23

24

25

28

29

31 Part III

Liabilities

Balances

Fund 26

ö

Assets 27

Net 30

2

3

4

5

	(a) the kınd(s) of property sold (e g , re ehouse, or common stock, 200 shs		(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
1 a WESTGATE			Р	1997-01-01	2016-01-01
b PARTNERSHIP CAPITAL (GAINS		Р	2000-01-01	2016-12-31
c UBIT CAPITAL GAINS			Р	2005-01-01	2016-12-31
d					
e					
(e) Gross sales price	(f) Depreciation allowed (or allowable)	Cost or	(g) other basis ense of sale	Gain d	h) or (loss) o) minus (g)
a 10	1,750		14,95		86,800
	8,178		,		308,178
c	7,509				7,509
d	, , , , , ,				.,
e					
	s showing gain in column (h) and ow	ned by the foundation	on 12/31/69		1)
(i) F M V as of 12/31/69	(j)	Excess	(k) of col (ı) (j), ıf any	Gains (Col (col (k), but not	(i) h) gain minus less than -0-) or om col (h))
а			,		86,800
b					308,178
c					7,509
d					·
e					
•	gain or (loss) as defined in sections : rt I, line 8, column (c) (see instructi	` , ` , ,	·	3	402,487
-	Jnder Section 4940(e) for Re				
(For optional use by domestic p	rivate foundations subject to the sec	ction 4940(a) tax on ne	et investment inco	me)	
If section 4940(d)(2) applies, le	eave this part blank				
If "Yes," the foundation does no	e section 4942 tax on the distributal of qualify under section 4940(e) Do	not complete this part			es 🗹 No
• • • • • • • • • • • • • • • • • • • •	nount in each column for each year,	see instructions before	making any entri		
(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitab	le-use assets	(d) Distribution rat (col (b) divided by o	
2015	661,502		10,005,039		0 066117
2014	676,322		10,233,391		0 066090
2013	696,913		9,610,669		0 072515
2012	647,597		8,909,894		0 072683
2011	545,101		9,398,753		0 057997
2 Total of line 1, column (d)		2		0 335402
number of years the four	o for the 5-year base period—divide b ndation has been in existence if less ncharitable-use assets for 2016 fron	than 5 years	, or by the		<u>0 067080</u> 9,449,806
5 Multiply line 4 by line 3		<i>'</i>	5	-	633,893
	ent income (1% of Part I, line 27b)		6	-	2,276
	ent income (170 or Part 1, line 27b)				636,169
	ions from Part XII, line 4 ,			_	782,427
	eater than line 7, check the box in Pa				<u> </u>

	If "Yes," attach the statement requir	ed b	y Regulations section 53	4945-5(d)					
6 a	Did the foundation, during the year,	rece	eive any funds, directly or	indirectly, to pay premiu	ims on				
	a personal benefit contract?				· 🗌 Yes 🗸				
b	Did the foundation, during the year,	pay	premiums, directly or ind	irectly, on a personal bei	nefit contract?	NO	6b		No
	If "Yes" to 6b, file Form 8870					Ī			
7a	At any time during the tax year, was	the	foundation a party to a p	rohibited tax shelter tran	nsaction? Yes				
b	If yes, did the foundation receive an				∟ Yes 💌	No	7b		
	Information About O		· · · · · · · · · · · · · · · · · · ·		nagers, Highly Paid Er	nplov	vees.		
Pa	and Contractors		,,		g, g ,		, ,		
1	List all officers, directors, trustee	s. f	oundation managers an	d their compensation	(see instructions).				
	List all officers, affectors, trastee	<i>5</i> ,			(d)				
	(a) Name and address		Title, and average hours per week	(c) Compensation (If not paid, enter	Contributions to employee			se acc	
	(a) mame and address	(b) devoted to position	-0-)	benefit plans and deferred	(e)	other	allowa	nces
	Addıtıonal Data Table		-	-	compensation	1			
see	Additional Data Table								
2	Compensation of five highest-pai	d er	nployees (other than th	ose included on line 1		ne, er	nter "I	NONE.	
	(a)		Title, and average		Contributions to				
Na	ame and address of each employee pa	ıd	hours per week	(c) Compensation	employee benefit plans and deferred			e acco allowar	
	more than \$50,000		(b) devoted to position		(d) compensation	(0)		anomai	1000
NON	E								
			1						
			1						
			1						
Tota	I number of other employees paid over	r¢	50,000	1					
OLA	in number of other employees paid over	н фС	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	· · · · · · · · ·		Г	004)-PF (2016
						For	пээ	,-PF	/U15

Form 990-PF (2016)		Page 7
Part VIII Information About Officers, Directors, Trustees, and Contractors (continued)	Foundation Managers, Highly Pa	aid Employees,
3 Five highest-paid independent contractors for professional service	ces (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		
Total 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 rel		r of Expenses
organizations and other beneficiaries served, conferences convened, research papers produ	uced, etc	
1		
		
2		
2		
2		
3		
		
4		
4		
Part IX-B Summary of Program-Related Investments (see	<u> </u>	
Describe the two largest program-related investments made by the foundation during t	the tax year on lines 1 and 2	Amount
1		
2		+
2		
All other program-related investments. See instructions		
all other program-related investments. See instructions		
<u> </u>		
Total. Add lines 1 through 3		▶ 0
		Form 990-PF (2016)

1a

1b

2

3a 3b

4

5

782,427

782.427

2.276

780.151

Form 990-PF (2016)

Part XII

1

2

3

4

5

Qualifying Distributions (see instructions)

Amounts set aside for specific charitable projects that satisfy the

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

Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes

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.

Expenses, contributions, gifts, etc —total from Part I, column (d), line 26.

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

470.214

470.214

Form 990-PF (2016)

Form 990-PF (2	016)
Part XIII	Und

b Total for prior years

From 2011. . . .

b From 2012. . . . c From 2013. .

d From 2014. . . .

XII, line 4 > \$

indicated below:

e From 2015.

1 Distributable amount for 2016 from Part XI, line 7

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

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

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

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

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 —see instructions 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

4 Qualifying distributions for 2016 from Part

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 required—see instructions).

88,363 206,228

229.624 176,561

165,278

206.228

229,624

176.561

165,278

312,213

Form 990-PF (2016)				Page S	
Part XIII	Undistributed Income (see instruc	ctions)			
			(1.)	/)	/ 13

t XIII	Undistributed Income (see instructions)							
		(a)	(b)	(c)	(d)			
		Corpus	Years prior to 2015	2015	2016			

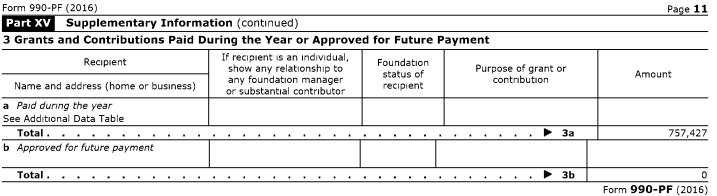
866,054

312.213

1.178.267

88,363

1,089,904



Part XVI-A Analysis of Income-Producing Enter gross amounts unless otherwise indicated		usiness income	Excluded by sectio	n 512, 513, or 514	(e) Related or exempt
1 Program service revenue	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	function income (See instructions)
a					
b					
c					
e					
f					
g Fees and contracts from government agencies					
2 Membership dues and assessments3 Interest on savings and temporary cash					
investments					
4 Dividends and interest from securities			14	139,675	
5 Net rental income or (loss) from real estate a Debt-financed property					
b Not debt-financed property					
6 Net rental income or (loss) from personal property					
7 Other investment income					
8 Gain or (loss) from sales of assets other than inventory	523000	7,509	18	394,978	
9 Net income or (loss) from special events	323000	7,303	10	354,570	
10 Gross profit or (loss) from sales of inventory					
11 Other revenue					
a PTNSHIP K-1 INCOME (LOSS) b OTHER K-1 LOSSES	523000 523000	-363	14 14	-16,714 -9,356	
C	323000		14	3,330	
d					
e					
12 Subtotal Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e)		7,146		508,583 L 3	515,729
(See worksheet in line 13 instructions to verify calculation				.3	313,729
Part XVI-B Relationship of Activities to th	e Accomplish	nment of Exem	pt Purposes		
Explain below how each activity for which the accomplishment of the foundation's exinstructions)					

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

Part	XVII	Exempt Organia	zations									
		ganization directly or in- Code (other than sectio	directly enga							501	Yes	No
a Transfers from the reporting foundation to a noncharitable exempt organization of								-				
(1)	Cash.									1a(1)		No
(2)) Other	assets								. 1a(2)		No
b Oth	ner tran	sactions										
(1)	Sales	of assets to a nonchari	table exempt	t orga	ınızatıon.					. 1b(1)		No
(2)) Purch	ases of assets from a n	oncharitable	exem	npt organiz	zation				. 1b(2)		No
		il of facilities, equipmer	•							. 1b(3)		No
		oursement arrangemen								1b(4)		No
		or loan guarantees.								. 1b(5)		No
		mance of services or m	•		-					1b(6)		No
	_	facilities, equipment, n			•							No
		ver to any of the above ds, other assets, or serv										
		saction or sharing arra										
7-3 L	. N I	(1.) A						> December of				
(a) Line	e INO	(b) Amount involved	(c) Name of	noncna	aritable exe	mpt organization	(a) Description of	transfers, transactions, a	nd snaring arra	ngemen	ts
	_											
	_											
	+											
	-											
2a Is t	he four	dation directly or indire	ectly affiliated	d with	, or relate	d to, one or mor	e tax-e	exempt organi	zations			
des	cribed	n section 501(c) of the	Code (other	than	section 50)1(c)(3)) or in se	ction 5	527?		. 🗆 Yes	✓ N	0
b If "	Yes," co	omplete the following so	chedule									
		(a) Name of organization	n		(1	Type of organiza	tion		(c) Description of	f relationship		
	Unde	er penalties of perjury,	I declare that	t I hav	ve examın	ed this return, in	cludin	a accompanyii	ng schedules and stat	ements, and	to the	best
	of m	y knowledge and belief	, it is true, co									
Sign		h preparer has any kno	wledge			1						
Here) \ '	*****				2017-11-15		*****		y the IRS discu h the preparer		
		Signature of officer or ti	rustee			Date		Title		e instr)? 🗹		
		<u> </u>							(30	e iiisti , 🗀		
		Print/Type preparer's	name	Prep	arer's Sıgı	nature	Dat	:e	Check if self-	IN		
									employed ▶ □	P0052	5980	
D-:4		DAWN D EBELING					2	2017-11-14	employed F			
Paid												
	arer	Firm's name ► GRO	SS MENDELS	ОНИ	& ASSOCI	ATES PA			Fir	m's EIN ▶52	-09824	13
use	Only	Firm's address ▶ 36	SOUTH CHA	DIEC	CT 10TLI	FLOOP						
		i iiiii s auuress ► 30	JOUIN CHA	KLES	21 TOLU 1	LOOK			DI	ana na /416) 60F F	EE12
		ВА	LTIMORE, MI	D 212	201				Ph	one no (410	7 005-5	2217

Form 990PF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation (a) Name and address Title, and average (c) Compensation (If Expense account, (d) hours per week not paid, enter (e) other allowances Contributions to (b) devoted to position -0-) employee benefit plans and deferred compensation JEFFREY ABERBANEL DIRECTOR ۵ 0 1 00 36 SOUTH CHARLES STREET BALTIMORE, MD 21201 JONATHAN P MYERS PRESIDENT 0 0 10 00 3635 OLD COURT ROAD SUITE 207 BALTIMORE, MD 21208 DAVID GOLDNER **TREASURER** 0 1 00 36 SOUTH CHARLES ST 18TH FL BALTIMORE, MD 21201 HERSCHEL L LANGENTHAL VICE PRESIDENT 0 0 10 00 3635 OLD COURT ROAD SUITE 207 BALTIMORE, MD 21208 JUDITH LANGENTHAL **PRESIDENT** 0 10 00 3635 OLD COURT ROAD SUITE 207 BALTIMORE, MD 21208 **BEVERLY MYERS** VICE PRESIDENT 0 0 10 00 3635 OLD COURT ROAD SUITE 207 BALTIMORE, MD 21208 CAROL ROGERS SECRETARY 0 0 1 00 3635 OLD COURT ROAD SUITE 207 BALTIMORE, MD 21208 JENNIFER MYERS 0 0 DIRECTOR 1 00 3635 OLD COURT ROAD SUITE 207 BALTIMORE, MD 21208 DAVID MYERS DIRECTOR 0 0 1 00 3635 OLD COURT ROAD SUITE 207 BALTIMORE, MD 21208 JEFFREY MYERS 25,000 0 DIRECTOR 1 00 3635 OLD COURT ROAD SUITE 207 BALTIMORE, MD 21208 DANIEL LANGENTHAL DIRECTOR 0 0 1 00 3635 OLD COURT ROAD SUITE 207 BALTIMORE, MD 21208 JOSHUA LANGENTHAL DIRECTOR 0 0 1 00 3635 OLD COURT ROAD SUITE 207 BALTIMORE, MD 21208

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

BEVERLY MYERS

JUDITH LANGENTHAL

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Foundation Purpose of grant or Amount Recipient 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 ACTIVE MINDS NONE PUBLIC. UNRESTRICTED 20,000 2001 S STREET NW SUITE 450 WASHINGTON, DC 20009 NONE 175,600 ASSOCIATED JEWISH CENTER PUBLIC UNRESTRICTED 101 WEST MOUNT ROYAL AVENUE BALTIMORE, MD 21201 NONE PUBLIC 7,000 BALTIMORE EDUCATIONAL UNRESTRICTED SCHOLARSHIP TRUST 808 N CHARLES STREET SUITE 200C 1,150 49,015

BETH AM ANNUAL EUND	NONE	DUDLIC	LINDECTRICTED	
BALTO COMMUNITY FDN(RECOGNIZE GIL SANDLER) 2 EAST READ STREET 9TH FLOOR BALTIMORE, MD 21202	NONE	PUBLIC	UNRESTRICTED	
BALITMORE, MD 21201				

BETH AM ANNUAL FUND NONE PUBLIC UNRESTRICTED

2501 EUTAW PLACE BALTIMORE, MD 21217

757,427 Total .

3a

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 BETH EL CONGREGATION NONE **PUBLIC** UNRESTRICTED 4,615

8101 PARK HEIGHTS AVENUE BALTIMORE, MD 21208				
BNAI VAIL 19 VAIL ROAD VAIL, CO 81657	NONE	PUBLIC	UNRESTRICTED	885

VAIL, CO 81657				
BOSTON LATIN SCHOOL 78 LOUIS PASTOR AVENUE BOSTON, MA 02115	NONE	PUBLIC	UNRESTRICTED	1,000
BRANDEIS UNIVERSITY	NONE	PUBLIC	UNRESTRICTED	65,000

78 LOUIS PASTOR AVENUE BOSTON, MA 02115				
BRANDEIS UNIVERSITY 415 SOUTH STREET MD 122 WALTHAM MA 022549110	NONE	PUBLIC	UNRESTRICTED	65,

	BRANDEIS UNIVERSITY 415 SOUTH STREET MD 122 WALTHAM, MA 022549110	NONE	PUBLIC	UNRESTRICTED	65,
ĺ	CAMP GREENTOP	NONE	PUBLIC	UNRESTRICTED	10.

WALTHAM, MA 022549110				
CAMP GREENTOP 1111 EAST COLD SPRING LANE	NONE	PUBLIC	UNRESTRICTED	10,000

WALTHAM, MA 022549110				I
CAMP GREENTOP 1111 EAST COLD SPRING LANE BALTIMORE MD 21239	NONE	PUBLIC	UNRESTRICTED	10,0

WALITIAN, NA 022343110				
CAMP GREENTOP	NONE	PUBLIC	UNRESTRICTED	.1
1111 EAST COLD SPRING LANE				
BALITMORE, MD 21239				

3a

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 CHARLES RIVER CONSERVANCY NONE PUBLIC UNRESTRICTED 1,000 4 BRATTLE STREET CAMBRIDGE, MA 02138 CHESTNUT RIDGE FIRE DEPARTMENT NONE PUBLIC 1,000 UNRESTRICTED 12020 GREENSPRING AVENUE OWINGS MILLS, MD 21117 NONE PUBLIC UNRESTRICTED 3,000 CITY SPROUTS 678 MASSACHUSETTES AVENUE CAMBRIDGE, MA 02139 COLORADO ROCKY MOUNTAIN SCHOOL NONE PUBLIC UNRESTRICTED 1,000 1493 COUNTY ROAD 106 CARBONDALE. CO 81623

PUBLIC

UNRESTRICTED

11,000

757,427

COMMUNITY FOOD SHARE

6363 HORIZON LANE LONGMONT, CO 80503

Total . .

3a

NONE

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					
CREATIVE ALLIANCE 3134 EASTERN AVENUE BALTIMORE, MD 21224	NONE	PUBLIC	UNRESTRICTED	15,000	
FOOD BANK OF WESTCHESTER 200 CLEARBROOK ROAD ELMSFORD, NY 10523	NONE	PUBLIC	UNRESTRICTED	1,000	
FRIENDS OF GREAT KIDS FARM 6601 BALTIMORE NATIONAL PIKE CATONSVILLE, MD 21228	NONE	PUBLIC	UNRESTRICTED	10,000	
FRIENDS OF THE JEWISH CHAPEL 5700 PARK HEIGHTS AVENUE BALTIMORE, MD 21215	NONE	PUBLIC	UNRESTRICTED	1,000	
GOODWILL OF WESTERN & NORTHERN CT 165 OCEAN TERRACE BRIDGEPORT, CT 06605	NONE	PUBLIC	UNRESTRICTED	1,000	

За

757,427

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

GROUNDWORK HUDSON VALLEY 22 MAIN STREET 2ND FLOOR YONKERS, NY 10701	NONE	PUBLIC	UNRESTRICTED	2,000
HARBOUR SCHOOL	NONE	PUBLIC	UNRESTRICTED	1,000

HARBOUR SCHOOL 11251 DOLFIELD ROAD OWINGS MILLS, MD 21117	NONE	PUBLIC	UNRESTRICTED	1,000
HARVARD 124 MOUNT AUBURN STREET CAMBRIDGE, MA 021385795	NONE	PUBLIC	UNRESTRICTED	1,000

HARVARD 124 MOUNT AUBURN STREET CAMBRIDGE, MA 021385795	NONE	PUBLIC	UNRESTRICTED	1,000
HINEINI HAVURAH 17 LEXINGTON AVENUE 1 EXINGTON MA 02421	NONE	PUBLIC	UNRESTRICTED	2,000

HINEINI HAVURAH 17 LEXINGTON AVENUE LEXINGTON, MA 02421	NONE	PUBLIC	UNRESTRICTED	2,00
INNTERIM HOUSING CORPORATION	NONE	PUBLIC	UNRESTRICTED	10,00

LEXINGTON AVENUE LEXINGTON, MA 02421				
INNTERIM HOUSING CORPORATION 112 SUDBROOK LANE	NONE	PUBLIC	UNRESTRICTED	10,000

INNTERIM HOUSING CORPORATION	NONE	PUBLIC	UNRESTRICTED	
112 SUDBROOK LANE				I
BALTIMORE, MD 21208				I

Total .

3a

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 ITINERIS 2050A ROCKROSE AVENUE NONE PUBLIC UNRESTRICTED 69,250 BALTIMORE, MD 21211 JCC EAST BAY 1414 WALNUT STREET NONE **PUBLIC** UNRESTRICTED 28,500 REDUCI EV CA 04700

JEWISH STUDIO PROJECT	NONE	DUDLIC	LINDEGERAGES	12.000
JEWISH MUSEUM OF MARYLAND (BOARD LEADERSHIP) 15 LLOYD STREET BALTIMORE, MD 21202	NONE	PUBLIC	UNRESTRICTED	5,000
JEMICY SCHOOL 11 CELADON ROAD OWINGS MILLS, MD 21117	NONE	PUBLIC	UNRESTRICTED	5,000
BERRELET, CA 94709				

NONE PUBLIC UNRESTRICTED 13,000

JEWISH STUDIO PROJECT 2643 DANA STREET

BERKELEY, CA 94704

Total . . 757,427

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				
JOHNS HOPKINS UNIVERSITY - HEART & VASCULAR INSTITUTE 100 N CHARLES STREET321 BALITMORE, MD 21201	NONE	PUBLIC	UNRESTRICTED	13,000
JULIA MORGAN SCHOOL FOR GIRLS 5000 MACARTHUR BOULEVARD OAKLAND, CA 94613	NONE	PUBLIC	UNRESTRICTED	2,250
JUVENILE DIABETES RESEARCH 120 WALL STREET 19TH FLOOR NEW YORK, NY 100054001	NONE	PUBLIC	UNRESTRICTED	1,000
KESHET 284 AMORY STREET JAMAICA PLAIN, MA 02130	NONE	PUBLIC	UNRESTRICTED	1,000
LAGOND MUSIC SCHOOL 9 HAVEN STREET	NONE	PUBLIC	UNRESTRICTED	2,500

ELMSFORD, NY 10523

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, 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				
LAKE ST LOUIS WATER SKI CLUB (RZESZOTKO)	NONE	PUBLIC	UNRESTRICTED	2,250
6290 RONALD REAGAN DRIVE SUITE 105 LAKE SAINT LOUIS, MO 63367				
LARCHMONT HUNGER PO BOX 112 LARCHMONT, NY 10538	NONE	PUBLIC	UNRESTRICTED	1,000
LEFT HAND FIRE DISTRICT 900 LEFTHAND CANYON DRIVE BOULDER, CO 80302	NONE	PUBLIC	UNRESTRICTED	500
LEVINDALE HEBREW GERIATRIC CENTER & HOSPITAL	NONE	PUBLIC	UNRESTRICTED	2,500
DEPARTMENT OF DEVELOPMENT 2401 W BELVEDERE AVENUE BALTIMORE, MD 212159950				
MARYLAND SCHOOL FOR THE BLIND 3501 TAYLOR AVENUE BALTIMORE, MD 21236	NONE	PUBLIC	UNRESTRICTED	5,000

Total . 3a 757,427

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 MCDANIEL COLLEGE 2 COLLEGE HILL NONE PUBLIC UNRESTRICTED 2,000 WESTMINSTER, MD 211574390 MCDONOGH SCHOOL PO BOX 380 NONE PUBLIC UNRESTRICTED 2,500 OWINGS MILLS, MD 21117

MENTORING MALE TEENS IN THE HOOD 8 MARKET PLACE 5TH FLOOR BALITMORE, MD 21202	NONE	PUBLIC	UNRESTRICTED	5,000
MERIT HOPKINS BAYVIEW MEDICAL CENTER 5200 EASTERN AVENUE BALITMORE, MD 21224	NONE	PUBLIC	UNRESTRICTED	7,500

MERIT HOPKINS BAYVIEW MEDICAL CENTER 5200 EASTERN AVENUE BALITMORE, MD 21224	NONE	PUBLIC	UNRESTRICTED	7,5
MIRIAM LODGE KSB	NONE	PUBLIC	UNRESTRICTED	7,5

5200 EASTERN AVENUE BALITMORE, MD 21224				
MIRIAM LODGE KSB	NONE	PUBLIC	UNRESTRICTED	7,

MEITHORE, TIB EIZET				
1IRIAM LODGE KSB	NONE	PUBLIC	UNRESTRICTED	7,500
310 PARK HEIGHTS AVE				1
BALITMORE, MD 21208				1

			_	
BALITMORE, MD 21208				
7310 PARK HEIGHTS AVE				
MIRIAM LODGE KSB	NONE	PUBLIC	UNRESTRICTED	·

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 MISSION OF MERCY NONE **PUBLIC** UNRESTRICTED 7,500

FREDERICK, MD 21701				
MOVEABLE FEAST PO BOX 2298 BALTIMORE, MD 212032298	NONE	PUBLIC	UNRESTRICTED	12,500
MYERBERG SR CENTER	NONE	PUBLIC	UNRESTRICTED	500

YERBERG SR CENTER 101 FALLSTAFF ROAD ALTIMORE, MD 212092967	NONE	PUBLIC	UNRESTRICTED	
ATIONAL CENTER FOR JEWISH FILM	NONE	PUBLIC	UNRESTRICTED	

1					
	NATIONAL CENTER FOR JEWISH FILM LOWN 120 MS053 WALTHAM, MA 02454	NONE	PUBLIC	UNRESTRICTED	(
	BALTIMORE, MD 212092967				

LOWN 120 MS053 WALTHAM, MA 02454				
NATIONAL GLAUCOMA RESEARCH 22512 GATEWAY CENTER DRIVE	NONE	PUBLIC	UNRESTRICTED	1,000

900

*				
NATIONAL GLAUCOMA RESEARCH	NONE	PUBLIC	UNRESTRICTED	
22512 GATEWAY CENTER DRIVE				
CLARKSBURG, MD 20871				

NATIONAL GLAUCOMA RESEARCH	NONE	PUBLIC	UNRESTRICTED	
22512 GATEWAY CENTER DRIVE CLARKSBURG, MD 20871				
22 11 (1.02 01 1.07 1.12				

3a

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 **NEHAR SHALOM** NONE PUBLIC UNRESTRICTED 2,000 43 LOCHSTEAD AVENUE JAMAICA PLAIN, MA 02130 NONE PUBLIC UNRESTRICTED 75,000 NEW ISRAEL FUND (MABAT) PO BOX 96712 2,500 1,000

WASHINGTON, DC 200777438				
PLANNED PARENTHOOD HUDSON VALLEY 7 COATES DRIVE GOSHEN, NY 10924	NONE	PUBLIC	UNRESTRICTED	
ROXBURY LATIN SCHOOL 101 ST THERESA AVENUE	NONE	PUBLIC	UNRESTRICTED	

WEST ROXBURY, MA 021323496

NONE PUBLIC. UNRESTRICTED

SEED SCHOOL 200 FONT HILL AVENUE BALITMORE, MD 21223

12,500

Total .

757,427 3a

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 SHRIVER HALL CONCERT SERIES NONE PUBLIC UNRESTRICTED 500 3400 N CHARLES STREET BALITMORE, MD 212182698 SISTERS CIRCLE PO BOX 84 NONE PUBLIC UNRESTRICTED 10,000

TIMONIUM, MD 21094				
TALMAR 1994 CROMWELL BRIDGE RD PARKVILLE, MD 21234	NONE	PUBLIC	UNRESTRICTED	7,500
TEMPLE BETH ZION 1566 BEACON STREET BROOKLINE, MA 02446	NONE	PUBLIC	UNRESTRICTED	600

1566 BEACON STREET BROOKLINE, MA 02446	NONE	POBLIC	UNKESTRICIED	
THE FAMILY TREE	NONE	PUBLIC	UNRESTRICTED	

Total.

3a

1566 BEACON STREET BROOKLINE, MA 02446	IVONE	FOBLIC	ONNESTRICIES	
THE FAMILY TREE	NONE	PUBLIC	UNRESTRICTED	7

BROOKLINE, MA 02446				
THE FAMILY TREE 2108 N CHARLES STREET 3ALTIMORE, MD 21218	NONE	PUBLIC	UNRESTRICTED	7,500

757,427

THE FAMILY TREE	NONE	PUBLIC	UNRESTRICTED	7,5
2108 N CHARLES STREET				,
BALTIMORE, MD 21218				

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					
THE LEAGUE FOR PEOPLE WITH DISABILITIES 1111 EAST COLD SPRING LANE BALTIMORE, MD 21239	NONE	PUBLIC	UNRESTRICTED	1,000	
THE THREAD INC PO BOX 1584 BALTIMORE, MD 21203	NONE	PUBLIC	UNRESTRICTED	12,000	
UMMC CHILDREN'S HOSPITAL NICU 110 S PACA STREET 9TH FLOOR BALITMORE, MD 21201	NONE	PUBLIC	UNRESTRICTED	10,000	
UNIV MD GREENEBAUM CANCER CENTER 22 S GREEN ST BALTIMORE, MD 21201	NONE	PUBLIC	UNRESTRICTED	10,000	
UNIVERSTY OF TOLEDO FOUNDATION PO BOX 586 TOLEDO, OH 43697	NONE	PUBLIC	UNRESTRICTED	3,250	

За

757,427

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 VARIOUS PASSTHROUGH ENTITIES NONE PUBLIC. UNRESTRICTED 162 ADDRESS OF RECIPIENTS - VARIOUS

BALTIMORE, MD 21208				
WILMER MEMORIAL FUND - JOHNS HOPKINS MEDICAL INSTITUTE 600 N WOLFE WILMER 112 BALITMORE, MD 212879015	NONE	PUBLIC	UNRESTRICTED	7,500

600 N WOLFE WILMER 112 BALITMORE, MD 212879015				
ZICHRON CHAIM YAAKOV 4011 BROOKHILL ROAD BALTIMORE, MD 21215	NONE	PUBLIC	UNRESTRICTED	500

Total . За

efile GRAPHIC print - DO NOT PROCESS As Filed Data - DLN: 93491319019927 TY 2016 Accounting Fees Schedule							
Name: ISRAEL & MOLLIE MYERS FOUNDATION EIN: 52-1314430							
Category	Amou	unt Ne	t Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes		

ACCOUNTING FEES

29,313 29,313

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491319019927
TY 2016 Investments - Other S	Schedule	_

Name: ISRAEL & MOLLIE MYERS FOUNDATION

EIN: 52-			
Category/ Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value
WESTGATE INTERNATIONAL	AT COST	158,547	1,375,112
M/L THREE, LLC	AT COST	4,811,038	5,581,608
JMD PARTNERSHIP	AT COST	1,007,716	987,266
MDM PARTNERS FUND, LLC	AT COST	575,389	796,949
CRP EXEMPT FUND	AT COST	101,750	176,000
HIGHFIELDS CAPITAL LTD	AT COST	281,065	1,020,154

efile GRAPHIC print - DO NOT PROCE	SS As Filed Data	-	DLI	N: 93491319019927	
TY 2016 Legal Fees Schedu	ule				
_					
Name: ISRAEL & MOLLIE MYERS FOUNDATION EIN: 52-1314430					
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes	
LEGAL FEES	10,682	10,682		0	

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN: 934913190	19927			
TY 2016 Other Decreases Schedule							
Name:	ISRAEL & MOL	LIE MYERS FOUNDATION					
EIN:	52-1314430						
De	escription		Amount				
PASSTHROUGH NONDEDUCTIBLE EXPEN	SES			440			

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN	: 93491319019927		
TY 2016 Other Expenses Schedule						
Name:	ISRAEL & MOLL	IE MYERS FOUND	PATION			
EIN:	52-1314430					
Other Expenses Schedule				,		
Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes		
INVESTMENT FEES	71,822	71,822		0		

3,130

13,465

36,205

259

681

767

12

2,045

14,318

3,130

13,465

36,205

259

681

767

12

2,045

MANAGEMENT FEES

EMPLOYEE BENEFITS

POSTAGE & SHIPPING

REPAIRS & MAINTENANCE

CUSTODIAL FEES

OFFICE EXPENSE

INSURANCE

TELEPHONE

AMORTIZATION

Description
Revenue and Expenses per Books

Revenue and Expenses per Books

Net Investment Income Income

Adjusted Net Income
Charitable Purposes

0

6.848

7,713

6.848

AUTOMOBILE	
BROKER FEES	

Other Expenses Schedule

MISCELLANEOUS

Description

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

Name: ISRAFI & MOLLIF MYERS FOUNDATION

EO 4044400

OTHER K-1 LOSSES

PTNSHIP K-1 INCOME (LOSS)

	EIN: 52-1314430	
Other Income Schedule		

Revenue And

-17,077

-9,356

Expenses Per Books

Net Investment

Income

-16,714

-9,356

Adjusted Net Income

DLN: 93491319019927

-17,077

-9,356

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491319019927
TY 2016 Other Increases Sche	edule	
Name:	ISRAEL & MOLLIE MYERS	FOUNDATION
EIN:	52-1314430	
De	escription	Amount
TAX EXEMPT INTEREST		946

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		D	LN: 93491319019927		
TY 2016 Other Liabilities Schedule						
Name:	ISRAEL & MOL	LIE MYERS F	OUNDATION			
EIN:	52-1314430					
Description	n		Beginning of Year - Book Value	End of Year - Book Value		
DUE TO INVESTMENT PARTNERSHIP			101,000	336,000		
EXCISE TAX PAYABLE			4,050	868		
CASH CLEARING			25,000	0		

efile GRAPHIC print - DO NOT PROCESS	S As Filed Data	-	DL	N: 93491319019927	
TY 2016 Taxes Schedule					
Name: ISRAEL & MOLLIE MYERS FOUNDATION					
EIP	N: 52-1314430				
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes	
PAYROLL TAX	2,650	2,650		0	
TAXES & LICENSE	124	124		0	
ML 3 STATE TAXES PAID	390	390		0	
JMD STATE TAXES PAID	160	160		0	
FOREIGN TAXES PAID	3,604	3,604		0	

EXCISE TAX

efile GRAPHIC print - DO NOT PROCESS As Filed Data - DLN: 93491319019927							
Schedule B (Form 990, 990-EZ,	Schedule o	of Contributors		OMB No 1545-0047			
or 990-PF) Department of the Treasury Internal Revenue Service							
Name of the organizat ISRAEL & MOLLIE MYERS			Employer id	entification number			
Organization type (ch	ook ana)		52-1314430				
Organization type (Cir	eck one)						
Filers of:	Section:						
Form 990 or 990-EZ	EZ ☐ 501(c)() (enter number) organization						
	4947(a)(1) nonexempt charitable	trust not treated as a private found	atıon				
	☐ 527 political organization						
Form 990-PF		on					
	4947(a)(1) nonexempt charitable	trust treated as a private foundation	ו				
	501(c)(3) taxable private foundat	on					
	ation filing Form 990, 990-EZ, or 990-PF tha r property) from any one contributor Comple						
Special Rules							
under sections received from a	tion described in section 501(c)(3) filing Form 509(a)(1) and 170(b)(1)(A)(vi), that checked by one contributor, during the year, total conne 1h, or (ii) Form 990-EZ, line 1 Complete	Schedule A (Form 990 or 990-EZ), tributions of the greater of (1) \$5,00	Part II, line 13,	16a, or 16b, and that			
during the year,	tion described in section 501(c)(7), (8), or (1 total contributions of more than \$1,000 exclute the prevention of cruelty to children or anim	usively for religious, charitable, scie					
during the year, If this box is che purpose Do no	tion described in section 501(c)(7), (8), or (1 contributions <i>exclusively</i> for religious, charit cked, enter here the total contributions that complete any of the parts unless the Gener ible, etc., contributions totaling \$5,000 or mo	able, etc., purposes, but no such co were received during the year for ar al Rule applies to this organization	ntributions tota n <i>exclusively</i> re because it rece	led more than \$1,000 ligious, charitable, etc ,			
990-EZ, or 990-PF), bu	on that is not covered by the General Rule ai thit must answer "No" on Part IV, line 2, of its form 990PF, Part I, line 2, to certify that it do	Form 990, or check the box on line	H of its				
For Paperwork Reduction for Form 990, 990-EZ, or 9	Act Notice, see the Instructions 0-PF	Cat No 30613X Scheo	dule B (Form 990,	, 990-EZ, or 990-PF) (2016)			

Schedule B (Form 99	0, 990-EZ, or 990-PF) (2016)		Page 3
Name of organization ISRAEL & MOLLIE MYE		Employer ident	ification number
		52-13	314430
Part II	Noncash Property		
(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
=			
(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
=			
<u> </u>		Schedule B (Form	990, 990-EZ, or 990-PF) (2016)

Schedule B (Form 9	990, 990-EZ, or 990-PF) (2016)		Page 4
Name of organization ISRAEL & MOLLIE MYERS FOUNDATION			Employer identification number 52-1314430
than \$1, organiza the year	000 for the year from any one contributo	r. Complete columns (a) thro of exclusively religious, chari actions.) ▶ \$	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	t 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	t 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	t 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		
			Schedule B (Form 990, 990-EZ, or 990-PF) (2016)