

## 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

Form 990-PF

Department of the Treasury

Internal Revenue Service

As Filed Data -

DLN: 93491207000097

2016

OMB No 1545-0052

# **Return of Private Foundation**

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

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

Open to Public Inspection

		ndar year 2016, or tax year beginning 01-01-20	)16 , aı	nd er	nding 12-31-			
GR	RETCHEN	ındatıon N V & SAMUEL M FELDMAN PRIVATE ION INC			52-2034763	entification numbe	er	
		I street (or P O box number if mail is not delivered to street address)	Room/suite					
		ED RUN BOULEVARD NO 250	, nosm, saice		B Telephone number (see instructions)			
City	or town	, state or province, country, and ZIP or foreign postal code		(410) 356-5900				
OWI	NGS MI	LLS, MD 21117			C If exemption	application is pendin	ig, check here	
<b>G</b> Cł	neck al	I that apply $\square$ Initial return $\square$ Initial return of a $\square$ Final return $\square$ Amended return	former public charity		2. Foreign of	ganizations, check h	► L the 85% —	
		Address change Name change			· ·	ck here and attach co	· -	
_		pe of organization Section 501(c)(3) exempt private				undation status was in 507(b)(1)(A), chec		
		n 4947(a)(1) nonexempt charitable trust Ll Other taxable						
of '	year <i>(f</i> .	xet value of all assets at end from Part II, col (c), \$ 2,165,468  J Accounting method  Other (specify) (Part I, column (d) must	be on cash basis )	al		ation is in a 60-mont in 507(b)(1)(B), chec		
Pa	rt I	Analysis of Revenue and Expenses (The total	(a) Revenue and				(d) Disbursements	
		of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions) )	expenses per books	(b)	Net investment income	(c) Adjusted net income	for charitable purposes (cash basis only)	
	1	Contributions, gifts, grants, etc , received (attach schedule)	48,585					
	2	Check ► ☐ If the foundation is <b>not</b> required to attach						
	3	Sch B Interest on savings and temporary cash investments	24		24			
	4	Dividends and interest from securities	37,644		37,644			
	5a	Gross rents						
	ь	Net rental income or (loss)						
RIE	6a	Net gain or (loss) from sale of assets not on line 10	10,416					
Revenue	ь 7	Gross sales price for all assets on line 6a 1,111,687 Capital gain net income (from Part IV, line 2)			10,416			
	8	Net short-term capital gain						
	9	Income modifications						
	10a	Gross sales less returns and allowances						
	b	Less Cost of goods sold						
	11	Oth						
	12	Total. Add lines 1 through 11	96,669		48,084			
	13	Compensation of officers, directors, trustees, etc	30,003		0			
	14	Other employee salaries and wages						
S	15	Pension plans, employee benefits						
nse	16a	Legal fees (attach schedule)						
ğ.	ь	Accounting fees (attach schedule)	2,127		2,127		(	
ē E	С	Other professional fees (attach schedule)	8,879		8,879		(	
ati	17	Interest						
Operating and Administrative Expenses	18	Taxes (attach schedule) (see instructions)	1,138		638		(	
Ē	19	Depreciation (attach schedule) and depletion						
Ad	20 21	Occupancy						
n L	22	Printing and publications						
e 6	23	Other expenses (attach schedule)	<b>9</b> 517		517		(	
atı	24	Total operating and administrative expenses.						
be		Add lines 13 through 23	12,661		12,161			
0	25	Contributions, gifts, grants paid	208,613				208,613	
	26	<b>Total expenses and disbursements.</b> Add lines 24 and 25	221,274		12,161		208,613	
	27	Subtract line 26 from line 12						
	a	Excess of revenue over expenses and disbursements	-124,605					
	ь	Net investment income (If negative, enter -0-)			35,923			
	С	Adjusted net income(if negative, enter -0-)						
or	Paner	work Reduction Act Notice, see instructions.			Cat No. 11289)	/ Ea	m QQ0-DE (2016	

Investments—land, buildings, and equipment basis ▶

Less accumulated depreciation (attach schedule)

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

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

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

Analysis of Changes in Net Assets or Fund Balances

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

Decreases not included in line 2 (itemize) ▶

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

Other increases not included in line 2 (itemize)

Less accumulated depreciation (attach schedule)

Land, buildings, and equipment basis

11

12

13

14

Liabilities

Balances

Fund

ŏ

Assets

Net

2

31 Part III

15 Other assets (describe > \_ Total assets (to be completed by all filers—see the 16 instructions Also, see page 1, item I) 2,159,374 2,034,769 2,165,468 17 18 19 20 Loans from officers, directors, trustees, and other disqualified persons 21 Mortgages and other notes payable (attach schedule). . . . . . 22 Other liabilities (describe -\_ Total liabilities(add lines 17 through 22) . . . . . . . . . . . . 23 Foundations that follow SFAS 117, check here ▶ and complete lines 24 through 26 and lines 30 and 31. 24 Unrestricted . . . . 2,159,374 2,034,769 Temporarily restricted 25 26 Permanently restricted . . . Foundations that do not follow SFAS 117, check here ▶ and complete lines 27 through 31. 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 Total net assets or fund balances (see instructions) . . . . . 2,159,374 2,034,769

2,159,374

2,034,769

2

3

4

5

6

2,159,374

-124,605

2,034,769

2,034,769 Form **990-PF** (2016)

Income			
e, )	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr )	(d) Date sold (mo , day, yr )

(col (b) divided by col (c))

0 040286

0 041205

0 104713

0 085688

0 086100

0 357992

0 071598

4,994,124

357,569

357,928 208,613

Form 990-PF (2016)

359

6,039,455

4,016,555

2,084,031

2,171,529

2,180,448

2

3

4

5

6 7

8

Page 3

1aSee Addıtıonal Data Table						
b						
С						
d						
e						
<b>(e)</b> Gross sales price	<b>(f)</b> Depreciation allowed (or allowable)	Cost or o	g) ther basıs nse of sale	(h) Gain or (loss) (e) plus (f) minus (g)		
a See Additional Data Table						
b						
c						
d						
e						
Complete only for assets show	ring gain in column (h) and owned by	the foundation o	n 12/31/69	(	(1)	
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	Excess	<b>k)</b> of col(ı) (j), ıf any	Gains (Col ( col (k), but not	h) gain minus less than -0-) <b>or</b> om col (h))	
a See Additional Data Table						
b						
c						
d						
e						

If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 Capital gain net income or (net capital loss) 2 10,416 3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6) If gain, also enter in Part I, line 8, column (c) (see instructions) If (loss), enter -0-3 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 )

243,303

165,504

218,226

186,073

187,736

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

3 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

4 Enter the net value of noncharitable-use assets for 2016 from Part X, line 5

**6** Enter 1% of net investment income (1% of Part I, line 27b)

8 Enter qualifying distributions from Part XII, line 4

If section 4940(d)(2) applies, leave this part blank Yes 🗸 No Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? If "Yes," the foundation does not qualify under section 4940(e) Do not complete this part Enter the appropriate amount in each column for each year, see instructions before making any entries (a) (d) Distribution ratio Base period years Calendar Adjusted qualifying distributions Net value of noncharitable-use assets

year (or tax year beginning in)

2015

2014

2013

2012

2011

2 Total of line 1, column (d)

**5** Multiply line 4 by line 3

instructions

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

Form 990-PF (2016)		Page <b>7</b>
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		
		<del> </del>
2		<del> </del>
2		<del> </del>
2		
3		<del> </del>
		<del> </del>
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		<b>▶</b> 0
		Form <b>990-PF</b> (2016)

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

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

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

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

Amounts set aside for specific charitable projects that satisfy the

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

2

3

4

5

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

1a

1b

2

За 3b

4

5

208,613

208.613

208.613

Form 990-PF (2016)

2016

Page 9

248.988

208.613

40,375

Form **990-PF** (2016)

P	art XIII	Undi	istribut	ed Inc	ome (	see ins	truc	tions)
1	Distributab	le amou	nt for 20	16 from	Part X	I, line 7		
_		_	_	_			- 1	

1	Distributable	am	nour	nt f	or 2	2016	5 fro	om Pai	rt XI	., lı	ne 7
2	Undistributed	ine	com	ne,	ıf a	ny,	as o	of the	end	of	2016
а	Enter amoun	t fo	r 2	015	or	ıly.					
b	Total for prio	r y	ear	s	2	0	_ ,	20_	,	- 2	20
3	Excess distrib	uti	ons	са	rry	ove	r, ıf	any, t	o 20	16	5
а	From 2011.										80
b	From 2012.										79
С	From 2013.										116
d	From 2014.										
6	From 2015						ſ				

XII, line 4 ▶ \$

indicated below:

**b** Applied to undistributed income of prior years (Election required—see instructions). . . . . c Treated as distributions out of corpus (Election 

**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) . . .

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

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. . .

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

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

same amount must be shown in column (a) )

, 20\_\_\_\_, 20\_\_\_\_ f any, to 2016 80,758 79,205 116,416

- f Total of lines 3a through e. . . . .
- 4 Qualifying distributions for 2016 from Part
- a Applied to 2015, but not more than line 2a
  - - 276,379

40,375

236,004

40,383

195,621

79.205 116,416 (a)

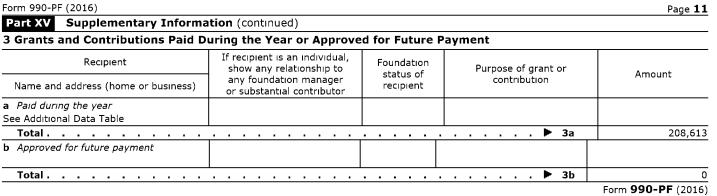
Corpus

(b)

Years prior to 2015

(c)

2015



nter gross amounts unless otherwise indicated		Unrelated bus	siness income	Excluded by section	(e) Related or exempt	
<b>1</b> Program	service revenue	(a) Business code	<b>(b)</b> Amount	(c) Exclusion code	<b>(d)</b> Amount	function income (See instructions )
d						
<b>g</b> Fees a <b>2</b> Membe	and contracts from government agencies ship dues and assessments					
ınvestı	ments			14	24	
	ds and interest from securities tal income or (loss) from real estate			14	37,644	
a Debt-i b Not de	financed property					
	ntal income or (loss) from personal property					
<b>B</b> Gain o	r (loss) from sales of assets other than ory			18	10,416	
9 Net inco	ome or (loss) from special events			10	10,110	
	rofit or (loss) from sales of inventory evenue a					
	evenue a					
c						
d						
d e			0		48,084	
d e 2 Subtota 3 Total.	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e)		0	13	48,084 	
d e 2 Subtota 3 Total. A	Add Ine 12, columns (b), (d), and (e)	ns )			<u> </u>	
de 2 Subtota 3 Total. A Gee worksh Part XVI	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e)	ns ) <b>e Accomplish</b> i income is reporte	ment of Exempled in column (e) of	ot Purposes Part XVI-A contribut	Bted importantly to	
d e 2 Subtota 3 Total. / iee worksh Part XVI Line No.	al Add columns (b), (d), and (e).  Add line 12, columns (b), (d), and (e).  neet in line 13 instructions to verify calculatio  B Relationship of Activities to th  Explain below how each activity for which the accomplishment of the foundation's ex	ns ) <b>e Accomplish</b> i income is reporte	ment of Exempled in column (e) of	ot Purposes Part XVI-A contribut	Bted importantly to	
de  2 Subtota 3 Total. / See worksh Part XVI	al Add columns (b), (d), and (e).  Add line 12, columns (b), (d), and (e).  neet in line 13 instructions to verify calculatio  B Relationship of Activities to th  Explain below how each activity for which the accomplishment of the foundation's ex	ns ) <b>e Accomplish</b> i income is reporte	ment of Exempled in column (e) of	ot Purposes Part XVI-A contribut	Bted importantly to	
de  2 Subtota 3 Total. / See worksh Part XVI	al Add columns (b), (d), and (e).  Add line 12, columns (b), (d), and (e).  neet in line 13 instructions to verify calculatio  B Relationship of Activities to th  Explain below how each activity for which the accomplishment of the foundation's ex	ns ) <b>e Accomplish</b> i income is reporte	ment of Exempled in column (e) of	ot Purposes Part XVI-A contribut	Bted importantly to	
de  2 Subtota 3 Total. / See worksh Part XVI	al Add columns (b), (d), and (e).  Add line 12, columns (b), (d), and (e).  neet in line 13 instructions to verify calculatio  B Relationship of Activities to th  Explain below how each activity for which the accomplishment of the foundation's ex	ns ) <b>e Accomplish</b> i income is reporte	ment of Exempled in column (e) of	ot Purposes Part XVI-A contribut	Bted importantly to	
de  2 Subtota 3 Total. / See worksh Part XVI	al Add columns (b), (d), and (e).  Add line 12, columns (b), (d), and (e).  neet in line 13 instructions to verify calculatio  B Relationship of Activities to th  Explain below how each activity for which the accomplishment of the foundation's ex	ns ) <b>e Accomplish</b> i income is reporte	ment of Exempled in column (e) of	ot Purposes Part XVI-A contribut	Bted importantly to	
de  2 Subtota 3 Total. / See worksh Part XVI	al Add columns (b), (d), and (e).  Add line 12, columns (b), (d), and (e).  neet in line 13 instructions to verify calculatio  B Relationship of Activities to th  Explain below how each activity for which the accomplishment of the foundation's ex	ns ) <b>e Accomplish</b> i income is reporte	ment of Exempled in column (e) of	ot Purposes Part XVI-A contribut	Bted importantly to	
de  2 Subtota 3 Total. / See worksh Part XVI	al Add columns (b), (d), and (e).  Add line 12, columns (b), (d), and (e).  neet in line 13 instructions to verify calculatio  B Relationship of Activities to th  Explain below how each activity for which the accomplishment of the foundation's ex	ns ) <b>e Accomplish</b> i income is reporte	ment of Exempled in column (e) of	ot Purposes Part XVI-A contribut	Bted importantly to	
de  2 Subtota 3 Total. / See worksh Part XVI	al Add columns (b), (d), and (e).  Add line 12, columns (b), (d), and (e).  neet in line 13 instructions to verify calculatio  B Relationship of Activities to th  Explain below how each activity for which the accomplishment of the foundation's ex	ns ) <b>e Accomplish</b> i income is reporte	ment of Exempled in column (e) of	ot Purposes Part XVI-A contribut	Bted importantly to	
de  2 Subtota 3 Total. / See worksh Part XVI	al Add columns (b), (d), and (e).  Add line 12, columns (b), (d), and (e).  neet in line 13 instructions to verify calculatio  B Relationship of Activities to th  Explain below how each activity for which the accomplishment of the foundation's ex	ns ) <b>e Accomplish</b> i income is reporte	ment of Exempled in column (e) of	ot Purposes Part XVI-A contribut	Bted importantly to	
de  2 Subtota 3 Total. / See worksh Part XVI	al Add columns (b), (d), and (e).  Add line 12, columns (b), (d), and (e).  neet in line 13 instructions to verify calculatio  B Relationship of Activities to th  Explain below how each activity for which the accomplishment of the foundation's ex	ns ) <b>e Accomplish</b> i income is reporte	ment of Exempled in column (e) of	ot Purposes Part XVI-A contribut	Bted importantly to	
de  2 Subtota 3 Total. / See worksh Part XVI	al Add columns (b), (d), and (e).  Add line 12, columns (b), (d), and (e).  neet in line 13 instructions to verify calculatio  B Relationship of Activities to th  Explain below how each activity for which the accomplishment of the foundation's ex	ns ) <b>e Accomplish</b> i income is reporte	ment of Exempled in column (e) of	ot Purposes Part XVI-A contribut	Bted importantly to	
de  2 Subtota 3 Total. / See worksh Part XVI	al Add columns (b), (d), and (e).  Add line 12, columns (b), (d), and (e).  neet in line 13 instructions to verify calculatio  B Relationship of Activities to th  Explain below how each activity for which the accomplishment of the foundation's ex	ns ) <b>e Accomplish</b> i income is reporte	ment of Exempled in column (e) of	ot Purposes Part XVI-A contribut	Bted importantly to	
de  2 Subtota 3 Total. / See worksh Part XVI	al Add columns (b), (d), and (e).  Add line 12, columns (b), (d), and (e).  neet in line 13 instructions to verify calculatio  B Relationship of Activities to th  Explain below how each activity for which the accomplishment of the foundation's ex	ns ) <b>e Accomplish</b> i income is reporte	ment of Exempled in column (e) of	ot Purposes Part XVI-A contribut	Bted importantly to	
de  2 Subtota 3 Total. / See worksh Part XVI	al Add columns (b), (d), and (e).  Add line 12, columns (b), (d), and (e).  neet in line 13 instructions to verify calculatio  B Relationship of Activities to th  Explain below how each activity for which the accomplishment of the foundation's ex	ns ) <b>e Accomplish</b> i income is reporte	ment of Exempled in column (e) of	ot Purposes Part XVI-A contribut	Bted importantly to	
de  2 Subtota 3 Total. / See worksh Part XVI	al Add columns (b), (d), and (e).  Add line 12, columns (b), (d), and (e).  neet in line 13 instructions to verify calculatio  B Relationship of Activities to th  Explain below how each activity for which the accomplishment of the foundation's ex	ns ) <b>e Accomplish</b> i income is reporte	ment of Exempled in column (e) of	ot Purposes Part XVI-A contribut	Bted importantly to	
de  2 Subtota 3 Total. / See worksh Part XVI	al Add columns (b), (d), and (e).  Add line 12, columns (b), (d), and (e).  neet in line 13 instructions to verify calculatio  B Relationship of Activities to th  Explain below how each activity for which the accomplishment of the foundation's ex	ns ) <b>e Accomplish</b> i income is reporte	ment of Exempled in column (e) of	ot Purposes Part XVI-A contribut	Bted importantly to	
de  2 Subtota 3 Total. / See worksh Part XVI	al Add columns (b), (d), and (e).  Add line 12, columns (b), (d), and (e).  neet in line 13 instructions to verify calculatio  B Relationship of Activities to th  Explain below how each activity for which the accomplishment of the foundation's ex	ns ) <b>e Accomplish</b> i income is reporte	ment of Exempled in column (e) of	ot Purposes Part XVI-A contribut	Bted importantly to	48,084

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

Part	XVII	Exempt Organi	zations						•				
		ganization directly or in Code (other than sectio	dırectly enga							on 501		Yes	No
<b>a</b> Tra	nsfers	from the reporting foun	dation to a n	oncha	ırıtable ex	empt organizatio	on o	of	_				
(1)	Cash.									. 1	1(1)		No
(2)	) Other	rassets								. 1	1(2)		No
<b>b</b> Oth	ner tran	sactions											
		of assets to a nonchar	•	-						. 11	(1)		No
(2)	) Purch	nases of assets from a r	noncharitable	exem	npt organiz	zation				11	(2)		No
		al of facilities, equipmer	•								(3)		No
		bursement arrangemen									(4)		No
٠.	(5) Loans or loan guarantees									_	(5)		No
(6) Performance of services or membership or fundraising solicitations									(6)		No		
	-				•						1c		No
		wer to any of the above ds, other assets, or ser									e		
ın a	any tran	nsaction or sharing arra	ngement, sh	ow in	column (c	<b>d)</b> the value of th	he g	goods, other asse	ets, or services receiv	/ed			
(a) Line	No I	(b) Amount involved	(c) Name of	nonch:	aritable eve	mpt organization	ı	(d) Description of	transfers, transactions,	and charing	arrai	naemen	tc
(a) Eme	110	(b) Amount involved	(c) Name of	Honene	arrable exe	inprorganization		(a) Description of	transfers, transactions,	and sharing	unu	igernen	
2n In t	ho four	adation directly or indire	antly affiliates	ط در بر	or rolato	dta ana ar mar		av everent ergan	rations				
		ndation directly or indire in section 501(c) of the	•		•	•				. 🗆	<b>'</b> 05	<b>☑</b> N	•
		` '	•	ulan	section 50	)1(c)(3))	ecuc	on 52/1		. Ш	es	IV IV	O
D II	res, c	omplete the following si (a) Name of organization			l a	<b>b)</b> Type of organiza	ation	, 1	(c) Description	of relations	מור		
		(2) Hame or organization			·	<b>27</b> 17 pe er ergamza			(C) Dosenipelon	0. 10.00.00	p		
	_												
		er penalties of perjury, ly knowledge and belief											
Sign		ch preparer has any kno		Jii ect,	, and com	piete Deciaration	11 01	i preparer (otrier	than taxpayer) is ba	iseu on an	IIIIOI	mation	1 01
Here		****	•			2017-07-19		*****		lay the IRS			
	<b>│</b>	<u> </u>				<u> </u>		— D —		ith the prep			
	<b>'</b>	Signature of officer or to	rustee			Date		Title	(5	see ınstr )?	<b>✓</b> Y	es ⊔ N	lo
		Print/Type preparer's	name	Prep	arer's Sıgı	nature		Date	P	PTIN			
					_				Check if self-	pn	0087	387	
		BARRY B BONDRO	FF CPA						employed ▶ 📙	, 0	0007	307	
Paid													
	arer		FINE SCHILL	ER & (	GARDYN F	PA				Firm's EIN	<b></b>	.12210	001
Use	Only									IIII 2 ETIA	- 52-	12319	.01
		Firm's address ► 10	0045 RED RU	N BLV	ט SUITE 2	250							
		0/	WINGS MILLS	S, MD	21117				P	Phone no	(410)	356-5	5900

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d List and describe the kind(s) of property sold (e g , real estate, (b) (c) (d) (a) 2-story brick warehouse, or common stock, 200 shs MLC Co ) How acquired Date acquired Date sold P-Purchase (mo, day, yr) (mo, day, yr) D-Donation Р PNC SHORT TERM COVERED 2016-03-02 2016-12-09 PNC LONG TERM COVERED Р 2014-11-12 2016-12-31 WELLS FARGO ST COVERED Ρ 2016-01-01 2016-12-31 WELLS FARGO LT COVERED Р 2014-11-06 2016-12-31 Ρ PNC LONG TERM COVERED - SECURITIES LITIGATION 2009-09-01 2016-11-21 ARTWORK D 2001-01-01 2016-12-31 Ρ CAPITAL GAINS DIVIDENDS Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h (e) Gross sales price Depreciation allowed Cost or other basis Gain or (loss) (g) plus expense of sale (f) (or allowable) (h) (e) plus (f) minus (g) 17.959 17,000 959 219,611 235,808 -16,197217,330 223,460 -6,130599.145 612.388 -13,24330.000 12,615 17,385 6,550 6,550 21.092 21,092 Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - I Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 Gains (Col (h) gain minus col (k), but not less than -0-) or (i) F M V as of 12/31/69 Adjusted basis Excess of col (i) **(I)** Losses (from col (h)) (j) as of 12/31/69 (k) over col (j), if any 959 -16,197-6.130-13.24317,385 6,550 21,092

#### 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 ACE MV INC 35 GREENWOOD AVE NONE 501(C)(3) CHARITABLE 1,000

VINEYARD HAVEN, MA 02568				,
ACHILLES TRACK CLUB 42 WEST 38TH ST 4TH FLOOR NEW YORK, NY 10018	NONE	501(C)(3)	CHARITABLE	1,000
AMERICAN JEWISH COMMITTEE	NONE	501(C)(3)	CHARITABLE	100

NEW YORK, NY 10018				
AMERICAN JEWISH COMMITTEE 165 E 56TH STREET NEW YORK, NY 10022	NONE	501(C)(3)	CHARITABLE	10
AMERICAN MUSEUM OF NATURAL	NONE	501(C)(3)	CHARITABLE	20

165 E 56TH STREET NEW YORK, NY 10022		002(0)(0)		
AMERICAN MUSEUM OF NATURAL HISTORY CENTRAL PARK WEST AT 79TH STREET NEW YORK, NY 100245192	NONE	501(C)(3)	CHARITABLE	200

HISTORY CENTRAL PARK WEST AT 79TH STREET NEW YORK, NY 100245192				
BIG BROTHERS BIG SISTERS OF MV 684 MAIN ST	NONE	501(C)(3)	CHARITABLE	500

208,613

NEW YORK, NY 100245192				
BIG BROTHERS BIG SISTERS OF MV 584 MAIN ST	NONE	501(C)(3)	CHARITABLE	5
HYANNIS MA 02601				ı

1002+3132				
BIG BROTHERS BIG SISTERS OF MV 684 MAIN ST HYANNIS, MA 02601	NONE	501(C)(3)	CHARITABLE	

Total .

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

1 '				
BODHI PATH 21 LAURAND DRIVE VINEYARD HAVEN, MA 02568	NONE	501(C)(3)	CHARITABLE	500
BONE MARROW FOUNDATION	NONE	501(C)(3)	CHARITABLE	300

515 MADISON AVE SUITE 1130 NEW YORK, NY 10022	NONE	501(C)(3)	CHARITABLE	300
BROOKLYN PUBLIC LIBRARY 10 GRAND ARMY PLAZA BROOKLYN, NY 11238	NONE	501(C)(3)	CHARITABLE	2,500

ROOKLYN PUBLIC LIBRARY I GRAND ARMY PLAZA ROOKLYN, NY 11238	NONE	501(C)(3)	CHARITABLE	
ENTRAL PARK CONSERVANCY EAST 60TH STREET 8TH FLOOR EW YORK, NY 10022	NONE	501(C)(3)	CHARITABLE	

BROOKLYN, NY 11238				
CENTRAL PARK CONSERVANCY 14 EAST 60TH STREET 8TH FLOOR NEW YORK, NY 10022	NONE	501(C)(3)	CHARITABLE	2,5

CENTRAL PARK CONSERVANCY 14 EAST 60TH STREET 8TH FLOOR NEW YORK, NY 10022	NONE	501(C)(3)	CHARITABLE	2,500
CENTRAL SYNAGOGUE	NONE	501(C)(3)	CHARITABLE	6,525

NEW 10RK, NT 10022				
CENTRAL SYNAGOGUE 123 EAST 55TH ST NEW YORK, NY 10022	NONE	501(C)(3)	CHARITABLE	6,525

CENTRAL SYNAGOGUE 123 EAST 55TH ST NEW YORK, NY 10022	NONE	501(C)(3)	CHARITABLE	6,5
Total				208,613

#### 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 CHILMARK VOLUNTEER FIREMAN'S NONE 501(C)(3) CHARITABLE 500 ASSOC PO BOX 119 3 MENEMSHA CROSSROAD CHILMARK, MA 02535 CLEVELAND CLINIC NONE 501(C)(3) **CHARITABLE** 2,500 2950 CLEVELAND CLINIC BOULEVARD WESTON, FL 33331 COOPER HEWIT MUSEUM NONE 501(C)(3) CHARITABLE 125 2 EAST 91ST STREET

501(C)(3)

501(C)(3)

**CHARITABLE** 

**CHARITABLE** 

500

10,000

208,613

NEW YORK, NY 10128

1641 3RD AVE 21A NEW YORK, NY 10128

1611 HARBOR RD SHELBURNE, VT 05482

> Total . . 3a

DANIEL'S MUSIC FOUNDATION

FARM BASED EDUCATION ASSOCIATION

NONE

NONE

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

NONE	501(C)(3)	CHARITABLE

FARM INSTITUTE PO BOX 1868 EDGARTOWN, MA 02539	NONE	501(C)(3)	CHARITABLE	2,274
FEATHERSTONE PO BOX 1145 OAK BLUFFS, MA 02557	NONE	501(C)(3)	CHARITABLE	1,000
FELIX NECK WILDLIFE SANCTUARY	NONE	501(C)(3)	CHARITABLE	500

	OAK BLUFFS, MA 02557	NONE	501(C)(3)	CHARITABLE	1,000
	FELIX NECK WILDLIFE SANCTUARY PO BOX 494 VINEYARD HAVEN, MA 02568	NONE	501(C)(3)	CHARITABLE	500
1					

FELIX NECK WILDLIFE SANCTUARY PO BOX 494 VINEYARD HAVEN, MA 02568	NONE	501(C)(3)	CHARITABLE	500
FRACTURED ATLAS	NONE	501(C)(3)	CHARITABLE	500

VINEYARD HAVEN, MA 02568				
FRACTURED ATLAS 12718 VEIRS MILL RD ROCKVILLE, MD 20853	NONE	501(C)(3)	CHARITABLE	500

FRACTURED ATLAS 12718 VEIRS MILL RD ROCKVILLE, MD 20853	NONE	501(C)(3)	CHARITABLE	500
FRAME CENTER	NONE	501(C)(3)	CHARITABLE	5,516

12718 VEIRS MILL RD ROCKVILLE, MD 20853				
FRAME CENTER 455 STATE ROAD UNIT 20	NONE	501(C)(3)	CHARITABLE	5,516

ROCKVILLE, MD 20033				
FRAME CENTER 455 STATE ROAD UNIT 20 VINEYARD HAVEN, MA 02568	NONE	501(C)(3)	CHARITABLE	5,51

#### 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 FRIENDS OF FAMILY PLANNING NONE 501(C)(3) CHARITABLE 250 PO BOX 909 VINEYADD HAVEN MA COECO

VINETARD HAVEN, MA 02566				
FRIENDS OF MVY RADIO PO BOX 1148 VINEYARD HAVEN, MA 02568	NONE	501(C)(3)	CHARITABLE	4,000
FRIENDS OF THE CHILMARK LIBRARY PO BOX 434	NONE	501(C)(3)	CHARITABLE	500

FRIENDS OF THE CHILMARK LIBRARY PO BOX 434 CHILMARK, MA 02535	NONE	501(C)(3)	CHARITABLE	
FRIENDS OF UP-ISLAND COUNCIL ON AGING	NONE	501(C)(3)	CHARITABLE	

CHILMARK, MA 02535				
FRIENDS OF UP-ISLAND COUNCIL ON AGING PO BOX 3174 WEST TISBURY, MA 02575	NONE	501(C)(3)	CHARITABLE	

FRIENDS OF UP-ISLAND COUNCIL ON AGING PO BOX 3174 WEST TISBURY, MA 02575	NONE	501(C)(3)	CHARITABLE	500
HOSPICE OF MARTHA'S VINEYARD	NONE	501(C)(3)	CHARITABLE	300

PO BOX 3174 WEST TISBURY, MA 02575				
HOSPICE OF MARTHA'S VINEYARD	NONE	501(C)(3)	CHARITABLE	;

WEST TISBURY, MA 02575				
HOSPICE OF MARTHA'S VINEYARD PO BOX 2549	NONE	501(C)(3)	CHARITABLE	

•				i
OSPICE OF MARTHA'S VINEYARD O BOX 2549 AK BLUFFS, MA 02557	NONE	501(C)(3)	CHARITABLE	
				i

PO BOX 2549 DAK BLUFFS, MA 02557														$\perp$			
Total													<b>&gt;</b>		208	3,613	

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

a Palu during the year				
ISLAND FOOD PANTRY PO BOX 1874 VINEYARD HAVEN, MA 02568	NONE	501(C)(3)	CHARITABLE	250
KIDS DREAMS INC PO BOX 3947	NONE	501(C)(3)	CHARITABLE	1,000

KIDS DREAMS INC PO BOX 3947 WEST PALM BEACH, FL 33402	NONE	501(C)(3)	CHARITABLE	1,000
LEAGUE OF WOMEN VOTERS OF MV PO BOX 1107 VINEYARD HAVEN, MA 02568	NONE	501(C)(3)	CHARITABLE	140

LEAGUE OF WOMEN VOTERS OF MV PO BOX 1107 VINEYARD HAVEN, MA 02568	NONE	501(C)(3)	CHARITABLE	140
LIVE LIKE BLAINE FOUNDATION	NONE	501(C)(3)	CHARITABLE	500

LIVE LIKE BLAINE FOUNDATION TWO BALA PLAZA SUITE 401 BALA CYNWYD, PA 19004	NONE	501(C)(3)	CHARITABLE	500
VINEYARD HAVEN, MA 02568				

LIVE LIKE BLAINE FOUNDATION TWO BALA PLAZA SUITE 401 BALA CYNWYD, PA 19004	NONE	501(C)(3)	CHARITABLE	500
LUNGEVITY 6917 ARLINGTON ROAD SUITE 352	NONE	501(C)(3)	CHARITABLE	1,000

BALA CYNWYD, PA 19004				
LUNGEVITY 6917 ARLINGTON ROAD SUITE 352 BETHESDA, MD 20814	NONE	501(C)(3)	CHARITABLE	1,000

LUNGEVITY 6917 ARLINGTON ROAD SUITE 352 BETHESDA, MD 20814	NONE	501(C)(3)	CHARITABLE	1,000
Takal				200 612

6917 ARLINGTON ROAD SUITE 352 BETHESDA, MD 20814		
Total	 	 208,613

### 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 MARINE & PALEOBIOLOGICAL NONE 501(C)(3) CHARITABLE. 250 RESEARCH PO BOX 1016 VINEYARD HAVEN, MA 02568 MARTHA'S VINEYARD DONOR'S NONE 501(C)(3) CHARITABLE 13.231

COLLABORATIVE PO BOX 326 CHILMARK, MA 02535	NONE	301(0)(3)	CHARTABLE	13,231
MASS AUDOBON 208 SOUTH GREAT ROAD LINCOLN, MA 01773	NONE	501(C)(3)	CHARITABLE	100
MASSACHUSETTS DOT	NONE	501(C)(3)	CHARITABLE	80

501(C)(3)

CHARITABLE

300

208,613

NONE

VINEYARD HAVEN, MA 02568 METROPOLITAN MUSEUM OF ART

1000 FIFTH AVENUE NEW YORK, NY 100280198

Total . 3a

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

<u> </u>				
MICHAEL HOEFFLIN FOUNDATION 26470 RUETHER AVE UNIT 101 SANTA CLARITA, CA 91350	NONE	501(C)(3)	CHARITABLE	660
MV CANCER SUPPORT GROUP INC	NONE	501(C)(3)	CHARITABLE	5,000

PO BOX 2214 VINEYARD HAVEN, MA 02568	NONE	301(0)(3)	GIVILLY MOLE	3,000
MV CEREBRAL PALSY CAMP INC PO BOX 1357 VINEYARD HAVEN, MA 02568	NONE	501(C)(3)	CHARITABLE	250

MV CEREBRAL PALSY CAMP INC PO BOX 1357 VINEYARD HAVEN, MA 02568	NONE	501(C)(3)	CHARITABLE	250
MV CHAMBER MUSIC SOCIETY PO BOX 4189	NONE	501(C)(3)	CHARITABLE	10,000

MV CHAMBER MUSIC SOCIETY PO BOX 4189 VINEYARD HAVEN, MA 02568  NONE  501(C)(3)  CHARITABLE  10,000	VINEYARD HAVEN, MA 02568				
	PO BOX 4189	NONE	501(C)(3)	CHARITABLE	10,000

MV CHAMBER MUSIC SOCIETY PO BOX 4189 VINEYARD HAVEN, MA 02568	NONE	501(C)(3)	CHARITABLE	10,000
MV CHARTER SCHOOL PO BOX 1150	NONE	501(C)(3)	CHARITABLE	12,500

VINEYARD HAVEN, MA 02568				
MV CHARTER SCHOOL PO BOX 1150 WEST TISBURY, MA 02575	NONE	501(C)(3)	CHARITABLE	12,500
·				

MV CHARTER SCHOOL PO BOX 1150 WEST TISBURY, MA 02575	NONE	501(C)(3)	CHARITABLE	12,500
Total				208,613

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 - David diament blooms

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

a Paid during the year				
MV COMMUNITY SERVICES 111 EDGARTOWN ROAD CHILMARK, MA 02568	NONE	501(C)(3)	CHARITABLE	1,600

CHILMANN, MA 02500				
MV FILM FESTIVAL PO BOX 592 VINEYARD HAVEN, MA 02535	NONE	501(C)(3)	CHARITABLE	250
MV FILM SOCIETY PO BOX 4423	NONE	501(C)(3)	CHARITABLE	6,000

VINEYARD HAVEN, MA 02535				
MV FILM SOCIETY PO BOX 4423 VINEYARD HAVEN, MA 02568	NONE	501(C)(3)	CHARITABLE	6,000

VINEYARD HAVEN, MA 02568	NONE	301(0)(3)	CHARTABLE	0,000
MV HEBREW CENTER PO BOX 692 VINEYARD HAVEN, MA 02568	NONE	501(C)(3)	CHARITABLE	3,750

MV HEBREW CENTER PO BOX 692 VINEYARD HAVEN, MA 02568	NONE	501(C)(3)	CHARITABLE	3,750
MV PRESERVATION TRUST	NONE	501(C)(3)	CHARITABLE	500

VINEYARD HAVEN, MA 02568				
MV PRESERVATION TRUST PO BOX 5277	NONE	501(C)(3)	CHARITABLE	500

MV PRESERVATION TRUST	NONE	501(C)(3)	CHARITABLE	500
PO BOX 5277				
EDGARTOWN, MA 02539				

Total		 209 612
PO BOX 5277 EDGARTOWN, MA 02539		

#### 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 MV TABLE TENNIS CLUB INC NONE 501(C)(3) CHARITABLE 500 30 WINTERGREEN WAY CHILMARK, MA 02535 100

NATIONAL COALITION AGAINST CENSORSHIP 19 FULTON ST SUITE 407 NEW YORK, NY 10038	NONE	501(C)(3)	CHARITABLE	
NATIONAL TRUST FOR HISTORIC PRESERVATION	NONE	501(C)(3)	CHARITABLE	

NATIONAL TRUST FOR HISTORIC PRESERVATION PO BOX 5043 HAGERSTOWN, MD 217419823	NONE	501(C)(3)	CHARITABLE	150
NATIONAL WIDOWERS ORGANIZATION INC 14 EARL RD EAST	NONE	501(C)(3)	CHARITABLE	15,000

11/102/10/10/1/15 22/12/02/				
NATIONAL WIDOWERS ORGANIZATION INC 14 EARL RD EAST SANDWICH, MA 02537	NONE	501(C)(3)	CHARITABLE	15,000
PALM BEACH FELLOWSHIP OF CHRISTIANJEWS	NONE	501(C)(3)	CHARITABLE	1,000

14 EARL RD EAST SANDWICH, MA 02537				
PALM BEACH FELLOWSHIP OF CHRISTIANJEWS PO BOX 507	NONE	501(C)(3)	CHARITABLE	1,00

14 EARL RD EAST SANDWICH, MA 02537				
PALM BEACH FELLOWSHIP OF CHRISTIANJEWS PO BOX 507	NONE	501(C)(3)	CHARITABLE	

PALM BEACH FELLOWSHIP OF CHRISTIANJEWS PO BOX 507 PALM BEACH, FL 33480	NONE	501(C)(3)	CHARITABLE	1,000
Total				208,613

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

77 4TH AVE NEEDHAM, MA 02494				
PERMANENT ENDOWMENT FOR MV PO BOX 243	NONE	501(C)(3)	CHARITABLE	7,00

PERMANENT ENDOWMENT FOR MV PO BOX 243 WEST TISBURY, MA 02575	NONE	501(C)(3)	CHARITABLE	7,000
POLLY HILL ARBORETUM PO BOX 561 WEST TISBURY, MA 02575	NONE	501(C)(3)	CHARITABLE	10,000

WEST TISBURY, MA 02575				
POLLY HILL ARBORETUM PO BOX 561 WEST TISBURY, MA 02575	NONE	501(C)(3)	CHARITABLE	10,000
RIE 6720 MELROSE AVENUE	NONE	501(C)(3)	CHARITABLE	100

POLLY HILL ARBORETUM PO BOX 561 WEST TISBURY, MA 02575	NONE	501(C)(3)	CHARITABLE	10,000
RIE 6720 MELROSE AVENUE LOS ANGELES, CA 90038	NONE	501(C)(3)	CHARITABLE	100

RIE 6720 MELROSE AVENUE LOS ANGELES, CA 90038	NONE	501(C)(3)	CHARITABLE	100
SHERIFF'S MEADOW FOUNDATION 57 DAVID AVE	NONE	501(C)(3)	CHARITABLE	500

LOS ANGELES, CA 90038				
SHERIFF'S MEADOW FOUNDATION 57 DAVID AVE VINEYARD HAVEN, MA 02568	NONE	501(C)(3)	CHARITABLE	50

208,613

SHERIFF'S MEADOW FOUNDATION 57 DAVID AVE VINEYARD HAVEN, MA 02568	NONE	501(C)(3)	CHARITABLE	
	•			

Total.

Form 990PF Part XV Line 3 - Gran	ts and Contributions Paic	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				
SMITH CENTER FOR HEALING AND THE ARTS 1632 U ST NW WASHINGTON, DC 20009	NONE	501(C)(3)	CHARITABLE	10,000
SOLOMON R GUGGENHEIM FOUNDATION 1071 FIFTH AVENUE NEW YORK, NY 10128	NONE	501(C)(3)	CHARITABLE	135
SWEET READERS INC PO BOX 1119 NEW YORK, NY 10028	NONE	501(C)(3)	CHARITABLE	200
THE ACTORS FUND 729 SEVENTH AVENUE 10TH FLOOR NEW YORK, NY 10019	NONE	501(C)(3)	CHARITABLE	1,000
THE ARNOLD P GOLD FOUNDATION 619 PALISADE AVE ENGLEWOOD CLIFFS. NJ 07632	NONE	501(C)(3)	CHARITABLE	10,000

SWEET READERS INC PO BOX 1119 NEW YORK, NY 10028	NONE	501(C)(3)	CHARITABLE	200
THE ACTORS FUND 729 SEVENTH AVENUE 10TH FLOOR NEW YORK, NY 10019	NONE	501(C)(3)	CHARITABLE	1,000
THE ARNOLD P GOLD FOUNDATION	NONE	501(C)(3)	CHARITABLE	10,000

Total . 208,613

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

a raid darning the year				
THE BROWNING SCHOOL 52 E 62ND ST NEW YORK, NY 10065	NONE	501(C)(3)	CHARITABLE	5,300
THE DANCER'S ALCHEMY	NONE	501(C)(3)	CHARITABLE	1,000

THE DANCER'S ALCHEMY 1203 KNUTH ROAD BOYNTON BEACH, FL 33436	NONE	501(C)(3)	CHARITABLE	1,000
THE 1EWISH MUSEUM	NONE	501(C)(3)	CHARITABI E	65

BOYNTON BEACH, FL 33436				
THE JEWISH MUSEUM 1109 5TH AVE 92ND ST NEW YORK, NY 10128	NONE	501(C)(3)	CHARITABLE	65

THE JEWISH MUSEUM 1109 5TH AVE 92ND ST NEW YORK, NY 10128	NONE	501(C)(3)	CHARITABLE	65
THE SPENCE SCHOOL 22 EAST 91ST STREET	NONE	501(C)(3)	CHARITABLE	15,000

NEW YORK, NY 10128				
THE SPENCE SCHOOL 22 EAST 91ST STREET NEW YORK, NY 10128	NONE	501(C)(3)	CHARITABLE	15,000

22 EAST 91ST STREET NEW YORK, NY 10128	NONE	501(C)(3)	CHARITABLE	15,000
THE YARD PO BOX 405	NONE	501(C)(3)	CHARITABLE	10,000

NEW YORK, NY 10128				
THE YARD PO BOX 405 CHILMARK, MA 02535	NONE	501(C)(3)	CHARITABLE	

CHILMARK, MA 02535		
Total	 	208,613

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

TISBURY PRINTER 25 OSPREY LANE CHILMARK, MA 02535	NONE	501(C)(3)	CHARITABLE	672
TRUSTEES OF RESERVATIONS 464 ABBOTT AVENUE LEOMINSTER, MA 01453	NONE	501(C)(3)	CHARITABLE	1,165

TRUSTEES OF THE UNIVERISTY OF PENNSYLVANIA 3535 MARKET ST SUITE 750 PHILADELPHIA, PA 19104	NONE	501(C)(3)	CHARITABLE	2,500
464 ABBOTT AVENUE LEOMINSTER, MA 01453				-,

PENNSYLVANIA 3535 MARKET ST SUITE 750 PHILADELPHIA, PA 19104				·
US SLAVE SONG PROJECT PO BOX 3425 OAK BLUFFS, MA 02557	NONE	501(C)(3)	CHARITABLE	500

PHILADELPHIA, PA 19104				
US SLAVE SONG PROJECT PO BOX 3425 OAK BLUFFS, MA 02557	NONE	501(C)(3)	CHARITABLE	500
VINEYARD CONSERVATION SOCIETY	NONE	501(C)(3)	CHARITABLE	500

OAK BLUFFS, MA 02557	NONE	501(C)(3)	CHARITABLE	500
VINEYARD CONSERVATION SOCIETY PO BOX 2189	NONE	501(C)(3)	CHARITABLE	500

OAK BLUFFS, MA UZ557				
VINEYARD CONSERVATION SOCIETY PO BOX 2189 VINEYARD HAVEN, MA 02568	NONE	501(C)(3)	CHARITABLE	500

/INEYARD CONSERVATION SOCIETY PO BOX 2189 /INEYARD HAVEN, MA 02568	NONE	501(C)(3)	CHARITABLE	!
Total				208,613

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 VINEYARD HOUSE PO BOX 4599 NONE 501(C)(3) CHARITABLE 500 VINEYARD HAVEN, MA 02568 VINEYARD PLAYHOUSE PO BOX 2452 NONE 501(C)(3) **CHARITABLE** 500 VINEYARD HAVEN, MA 02568 WGBH PO BOX 55875 NONE 501(C)(3) CHARITABLE 100 BOSTON, MA 022055875

VIIVE ITAKS TITALER, FIRE GESGO				
WCAIWNAN PO BOX 8200 WOODS HOLE, MA 02543	NONE	501(C)(3)	CHARITABLE	500
WEST TISBURY LIBRARY FOUNDATION PO BOX 1238 WEST TISBURY, MA 02575	NONE	501(C)(3)	CHARITABLE	500

208,613

Total .

#### Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year WHITNEY MUSEUM OF AMERICAN ART NONE 501(C)(3) CHARITABLE 250

945 MADISON AVENUE NEW YORK, NY 10021		. , , , ,		
WINDEMERE PO BOX 1747 OAK BLUFFS, MA 02557	NONE	501(C)(3)	CHARITABLE	500
WNYC PO BOX 1550	NONE	501(C)(3)	CHARITABLE	100

OAK BLUFFS, MA 02557	NONE	501(C)(3)	CHARITABLE	500
WNYC PO BOX 1550 NEW YORK, NY 101161550	NONE	501(C)(3)	CHARITABLE	100
WXEL 3401 S CONGRESS AVE BOYNTON BEACH, FL 33426	NONE	501(C)(3)	CHARITABLE	125
YMCA OF MARTHA'S VINEYARD	NONE	501(C)(3)	CHARITABLE	11,600

14E44 10KK, 141 101101550				
WXEL 3401 S CONGRESS AVE BOYNTON BEACH, FL 33426	NONE	501(C)(3)	CHARITABLE	125
YMCA OF MARTHA'S VINEYARD 111R EDGARTOWN VINEYARD HAVEN ROAD	NONE	501(C)(3)	CHARITABLE	11,600

WXEL 3401 S CONGRESS AVE BOYNTON BEACH, FL 33426	NONE	501(C)(3)	CHARITABLE	1
YMCA OF MARTHA'S VINEYARD 111R EDGARTOWN VINEYARD HAVEN ROAD	NONE	501(C)(3)	CHARITABLE	11,6

BOYNTON BEACH, FL 33426		(-,(-,		[
YMCA OF MARTHA'S VINEYARD 111R EDGARTOWN VINEYARD HAVEN ROAD	NONE	501(C)(3)	CHARITABLE	11

YMCA OF MARTHA'S VINEYARD 111R EDGARTOWN VINEYARD HAVEN ROAD VINEYARD HAVEN, MA 02568	NONE	501(C)(3)	CHARITABLE	11,600

Total	 	 208,613
ROAD VINEYARD HAVEN, MA 02568		

efile GRAPHIC print - DO NOT F	ROCESS	As Filed D	ata -		D	LN: 93491207000097	
TY 2016 Accounting Fo	ees Sch	edule					
_							
Name: GRETCHEN V & SAMUEL M FELDMAN PRIVATE							
FOUNDATION INC							
	FTN:	52-2034 <sup>°</sup>	763				
	-11V.	J2 20J <del>1</del>	, UJ			1	
Category	Am	ount	Net :	Investment	Adjusted Net	Disbursements	
]			]	Income	Income	for Charitable	
	Purposes						
ACCOUNTING FEES		1,700		1,700		0	
OTHER PROFESSIONAL FEES		427		427		0	

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	[	LN: 93491207000097
TY 2016 Investments Corpora	te Stock Schedule		
Name:	GRETCHEN V & SAMUE	L M FELDMAN PRIVATE	
	FOUNDATION INC		
EIN:	52-2034763		
Name of Charl	_	Food of Vacus Books	Ford of Many Fair

<b>EIN:</b> 52-2034763		
Name of Stock	End of Year Book Value	End of Year Fair Market Value
PNC	528,261	628,406
WACHOVIA	1,485,970	1,516,524

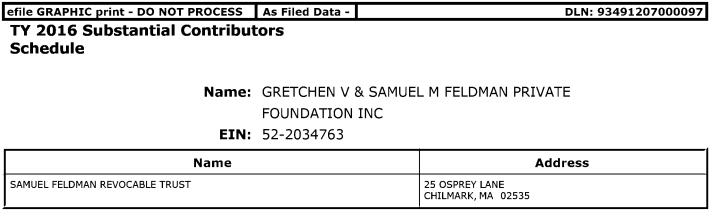
efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN:	93491207000097	
TY 2016 Other Expenses Sche	dule			_	
Name:	GRETCHEN V &	SAMUEL M FELDI	MAN PRIVATE		
	FOUNDATION INC				
EIN:	52-2034763				
Other Expenses Schedule					
Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes	
OFFICE EXPENSE	517	517		0	

efile GRAPHIC print - DO NOT PROCES	SS As Filed Data	-	DLN	N: 93491207000097		
TY 2016 Other Professional Fees Schedule						
Nam	ле: GRETCHEN \	V & SAMUEL M FEL	_DMAN PRIVATE			
I	FOUNDATIO	N INC				
EJ	<b>EIN:</b> 52-2034763					
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes		

8,879

8,879

INVESTMENT FEES



efile GRAPHIC print - DO NOT PROCESS	As Filed Data	-	DLI	N: 93491207000097
TY 2016 Taxes Schedule				
Name:	GRETCHEN \	V & SAMUEL M FEL	_DMAN PRIVATE	
	FOUNDATION INC			
EIN:	52-2034763			
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
FOREIGN TAX ON DIVIDEND INCOME	638	638		0
EXCISE TAXES	500	0		0

efile GRAPHIC print - I	OO NOT PROCESS As Filed Data -			DLN: 93491207000097		
Schedule B (Form 990, 990-EZ,	Schedu	le of Contributors		OMB No 1545-0047		
or 990-PF) Department of the Treasury Internal Revenue Service	► Information about Schedule B (Fo	Form 990, 990-EZ, or 990-PF orm 990, 990-EZ, or 990-PF) and its instruct ow irs gov/form990	uons is at	2016		
Name of the organizat GRETCHEN V & SAMUEL			Employer id	entification number		
FOUNDATION INC	nak ana)		52-2034763			
Organization type (cho	eck one)					
Filers of:	Section:					
Form 990 or 990-EZ	form 990 or 990-EZ 501(c)( ) (enter number) organization					
4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private foundation						
	☐ 527 political organization					
Form 990-PF	501(c)(3) exempt private fou	indation				
	4947(a)(1) nonexempt charm	table trust treated as a private foundation	ו			
	☐ 501(c)(3) taxable private fou	ndation				
•	•	F that received, during the year, contribumplete Parts I and II See instructions fo	•	•		
Special Rules						
under sections a received from a	509(a)(1) and 170(b)(1)(A)(vi), that chec	Form 990 or 990-EZ that met the 33 <sup>1</sup> 3% ked Schedule A (Form 990 or 990-EZ), I contributions of the greater of <b>(1)</b> \$5,00 lete Parts I and II	Part II, line 13,	16a, or 16b, and that		
during the year,		or (10) filing Form 990 or 990-EZ that recexclusively for religious, charitable, scient animals Complete Parts I, II, and III				
during the year, If this box is che purpose Do no	contributions exclusively for religious, c cked, enter here the total contributions complete any of the parts unless the <b>G</b>	or (10) filing Form 990 or 990-EZ that recharitable, etc., purposes, but no such conthat were received during the year for an eneral Rule applies to this organization or more during the year	ntributions tota n <i>exclusively</i> rel because it rece	led more than \$1,000 ligious, charitable, etc , eived <i>nonexclusively</i>		
990-EZ, or 990-PF), bu	t it <b>must</b> answer "No" on Part IV, line 2,	ule and/or the Special Rules does not file of its Form 990, or check the box on line it does not meet the filing requirements	e H of its			
For Paperwork Reduction for Form 990, 990-EZ, or 9	Act Notice, see the Instructions 10-PF	Cat No 30613X Scheo	Jule B (Form 990,	, 990-EZ, or 990-PF) (2016)		

Name of organi SRETCHEN V & S OUNDATION INC	AMUEL M FELDMAN PRIVATE	Employer identification 52-2034763	number
Part I	Contributors (see instructions) Use duplicate copies of Part I if a	dditional space is needed	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	SAMUEL FELDMAN		Person 🗸
1			Payroll
	25 OSPREY LANE	\$ 48,976	Namaaah
	CHILMARK, MA 02535		(Complete Part II for noncash
(=)	(6)	(0)	contributions )
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	SAMUEL FELDMAN		Person 🗸
2	25 OSPREY LANE		Payroll
	25 OSPRET LAINE	\$ 10,500	Noncash
	CHILMARK, ME02535		(Complete Part II for noncash contributions )
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
			Person
-			Payroll
		\$	Noncash
			(Complete Part II for noncash contributions )
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person
-			Payroll
		\$	Noncash
			(Complete Part II for noncash contributions )
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
			Person
-	-		Payroll
		\$	│ Noncash
			☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐
(-)	(1)	(2)	(Complete Part II for noncash contributions )
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person
-			Payroll
		\$	Noncash
			(Complete Part II for noncash
			contributions )

Schedule B (Forn	n 990, 990-EZ, or 990-PF) (2016)		Page 3
Name of organiz GRETCHEN V & SA	ation MUEL M FELDMAN PRIVATE	Employer identi	fication number
FOUNDATION INC		52-20	34763
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
1	130 SHARES OF ISAHRES S&P	\$ 19 325	2016-12-13
(a) No.from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
1	354 SHARES OF VANGUARD REIT	\$ 29 651	2016-12-13
(a) No.from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		s	
(a) No.from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No.from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(a) No.from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		Schedule B (Form 9	990, 990-EZ, or 990-PF) (2016)

Schedule B (Form	990, 990-EZ, or 990-PF) (2016)		Page <b>4</b>
Name of organization GRETCHEN V & SAMUEL M FELDMAN PRIVATE FOUNDATION INC			Employer identification number 52-2034763
than \$1, organiz the year	000 for the year from any one contributor	r. Complete columns (a) thro of exclusively religious, chari ctions.) ▶ \$	d in section 501(c)(7), (8), or (10) that total more ugh <b>(e) and</b> the following line entry. For table, etc., contributions of <b>\$1,000 or less</b> for
(a) No.from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	Transferee's name, address, and	(e) Transfer of gift ZIP 4 F	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
	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)