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2016

OMB No 1545-0052

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

Department of the Treasury Internal Revenue Service

Form 990-PF

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	caler	ndar year 2016, or tax year	beginning 01-01-20)16 , a	nd er	nding 12-31		
		indation ly Foundation Inc				A Employer io	lentification numbe	er
	,	,				52-2135417		
		street (or P O box number if mail is no uttman PO Box 32308	ot delivered to street address)	Room/suite		B Telephone no	ımber (see ınstructio	ns)
<i>-,</i>	0 211 0	accinant to box 52500				(410) 580-050	0	
		i, state or province, country, and ZIP or 4D 21282	C If exemption	application is pendir	a, check here			
			1		" ▶ ⊔			
G Cł	neck al	I that apply Initial return	_	former public charity		D 1. Foreign o	rganızatıons, check h	ere 📗
		☐ Final return	☐ Amended return				organizations meeting ok here and attach co	
		Address chan]	undation status was	· -
_		•	501(c)(3) exempt private				on 507(b)(1)(A), che	
		n 4947(a)(1) nonexempt charitable						
of	year <i>(f</i>	ket value of all assets at end from Part II, col (c), \$ 61,385	J Accounting method ☐ Other (specify) (Part I, column (d) must	Cash L Accru	ıaı		ation is in a 60-mont on 507(b)(1)(B), ched	
Pa	rt I	Analysis of Revenue and	Expenses (The total					(d) Disbursements
		of amounts in columns (b), (c), and (•	(a) Revenue and expenses per	(b)	Net investment income	(c) Adjusted net income	for charitable purposes
		equal the amounts in column (a) (see	e instructions))	books		meome	meome	(cash basis only)
	1	Contributions, gifts, grants, etc , schedule)	received (attach	65,450				
	2	Check ▶ ☐ If the foundation is	not required to attach					
	-		· · · · · · · · ·					
	3	Interest on savings and tempora						
	4	Dividends and interest from secu	rities					
Revenue	5a	Gross rents						
	b	Net rental income or (loss)	ests not an line 10	•				
	6a	Net gain or (loss) from sale of as						
eve	b 7	Gross sales price for all assets or Capital gain net income (from Pa	<u>'</u>					
~	8	Net short-term capital gain .	•					
	9	Income modifications						
	10a	Gross sales less returns and allow	wances					
	ь	Less Cost of goods sold						
	С	Gross profit or (loss) (attach sch	edule)					
	11	Other income (attach schedule)						
	12	Total. Add lines 1 through 11		65,450		C)	
	13	Compensation of officers, directo	rs, trustees, etc					
	14	Other employee salaries and wag	jes					
es	15	Pension plans, employee benefits						
ens	16a	Legal fees (attach schedule) .						
Expenses	b	Accounting fees (attach schedule						ļ
ve l	С.	Other professional fees (attach s	chedule)				ļ	ļ
atı	17	Interest						<u> </u>
Operating and Administrative	18	Taxes (attach schedule) (see inst	,					
Ē	19	Depreciation (attach schedule) a	·					ļ
Ad	20 21	Occupancy						
pu	22	Printing and publications						
g g	23	Other expenses (attach schedule		9 63		63	3	
atın	24	Total operating and administr					1	+
Эег.		Add lines 13 through 23		63	,	63	;	0
ō	25	Contributions, gifts, grants paid		64,368	3			64,368
	26	Total expenses and disbursen	nents. Add lines 24 and	64,431		63		64,368
	27	Subtract line 26 from line 12		04,431		03		04,306
	a	Excess of revenue over expen	ses and	1,019				
	 	disbursements Net investment income (if neg	ative enter -0-1			C		-
	b c	Adjusted net income(if negative	·					
For		work Reduction Act Notice, see	<u> </u>		1	Cat No 11289	I X For	<u> </u> rm 990-PF (2016)

Analysis of Changes in Net Assets or Fund Balances

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

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

Land, buildings, and equipment basis

instructions Also, see page 1, item I)

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) ▶ ____

Other assets (describe > _

	6
	7
cs	8
Assets	9
As	10a
	Ь
	С
	11

12

13

14

15

16

17

18

19

Liabilities

Balances

Fund

ŏ

Assets

Net

Part III

2

```
20
      Loans from officers, directors, trustees, and other disqualified persons
                                                                                                             24,926
21
      Mortgages and other notes payable (attach schedule). . . . . .
22
      Other liabilities (describe -_
      Total liabilities(add lines 17 through 22) . . . . . . . . . . . . .
23
                                                                                         24,926
                                                                                                             24,926
      Foundations that follow SFAS 117, check here ▶
      and complete lines 24 through 26 and lines 30 and 31.
24
      Unrestricted . . . . . .
                                                                                        42,573
                                                                                                            43,592
      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) . . . . .
                                                                                        42,573
                                                                                                            43,592
                                                                                                             68,518
      Total liabilities and net assets/fund balances (see instructions) .
                                                                                         67,499
31
```

1,000

67,499

24,926

1,000

68,518

1,000

61,385

42,573

1,019

43,592

43,592 Form 990-PF (2016)

2

3

4

5

6

b Did the foundation, during the year,	6b No							
If "Yes" to 6b, file Form 8870								
7a At any time during the tax year, was	No							
b If yes, did the foundation receive any	proceeds or have any net in	come attributable to the	transaction?	7b No				
Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors								
1 List all officers, directors, trustee	s, foundation managers ar	nd their compensation		<u> </u>				
(a) Name and address	Title, and average hours per week (b) devoted to position	(c) Compensation (If not paid, enter -0-) (d) Contributions to employee benefit plans and deferred compensation		Expense account, (e) other allowances				
	Director	0						
502 Washington Ave Towson, MD 21204	0 00							
	Director	0						
PO Box 32308 Baltımore, MD 21282	0 00							
2 Compensation of five highest-paid	d employees (other than t	hose included on line 1	.—see instructions). If no	ne, enter "NONE."				
(a) Name and address of each employee par more than \$50,000	Title, and average hours per week (b) devoted to position	(c) Compensation	Contributions to employee benefit plans and deferred (d) compensation	Expense account, (e) other allowances				
NONE								
Total number of other employees paid ove	r \$50,000		· >					
				Form 990-PF (2016)				

Form 990-PF (2016)		Page 7
Part VIII Information About Officers, Directors, Trustees, and Contractors (continued)	Foundation Managers, Highly P	aid Employees,
3 Five highest-paid independent contractors for professional service	es (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	<u> </u>	>
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include rele organizations and other beneficiaries served, conferences convened, research papers produ		er of Expenses
1	iced, etc	
2		
3		
4		
Part IX-B Summary of Program-Related Investments (see	instructions)	
Describe the two largest program-related investments made by the foundation during the	ne tax year on lines 1 and 2	Amount
1		
2		
All other program-related investments See instructions		
3		
Takal Addition of the control 2		
Total. Add lines 1 through 3		
		Form 990-PF (2016)

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

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

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

1b

2

За 3b

4

5

64.368

64,368

Form 990-PF (2016)

b Total for prior years

Page 9

2.999

2.999

Form **990-PF** (2016)

a From 2011.

b From 2012. c From 2013. . .

d From 2014.

e From 2015.

XII, line 4 > \$

indicated below:

	ait VIII	onaistribatea .	riicoille (see ilist
1	Dietributah	ole amount for 2016 f	rom Part VI line 7
-	Distributab	he amount for 2010 in	ioni rait XI, inie /
2	Undistribut	ted income, if any, as	of the end of 2016

(a) (b) (c)

203,446

61.369

264.815

41.926

222,889

Years prior to 2015

2015

Corpus

Part XIII Undistributed Income (see instructions)

41,926 39.251

48.876 35.465

37,928

39.251 48,876

35.465

37.928

61.369

a Enter amount for 2015 only.

Excess distributions carryover, if any, to 2016

f Total of lines 3a through e.

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). d Applied to 2016 distributable amount.

e Remaining amount distributed out of corpus

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

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. . .

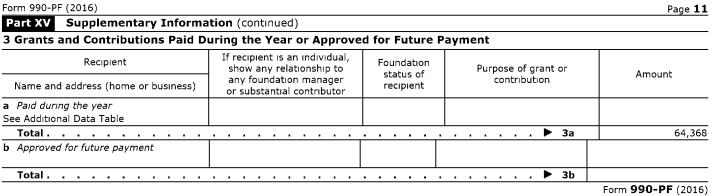
c Excess from 2014. . . .

d Excess from 2015. . .

e Excess from 2016. . .

b Excess from 2013. .

same amount must be shown in column (a))



	amounts unless otherwise indicated	Unrelated bu	isiness income	Excluded by sectio	n 512, 513, or 514	(e) Related or exemp
_	service revenue	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	function income (See instructions
-	nd contracts from government agencies					
Member Interes	ship dues and assessments st on savings and temporary cash					
	nents					
Net rent	al income or (loss) from real estate					
	inanced property					
	bt-financed property natal income or (loss) from personal property					
	vestment income.					
Gain o	r (loss) from sales of assets other than					
	ory					
Gross p	rofit or (loss) from sales of inventory					
	evenue a					
	Add line 12, columns (b), (d), and (e)					
Tatal /				1	.3	
	eet in line 13 instructions to verify calculation	ns)				
ee worksh	eet in line 13 instructions to verify calculatio Relationship of Activities to th	e Accomplish				
ee worksh art XVI	eet in line 13 instructions to verify calculatio	e Accomplish	ed in column (e) o	of Part XVI-A contrib)
ee worksh art XVI ine No.	eet 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	e Accomplish	ed in column (e) o	of Part XVI-A contrib)
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Part	XVII	Exempt Organi		I allo	1613 10 6	and mansact	1011	is and Relation	nsinps with Non	iciiai itabie		
		ganization directly or in Code (other than sectio								on 501	Yes	No
a Tra	nsfers f	rom the reporting foun	dation to a n	oncha	ırıtable ex	empt organizatio	on o	of				
(1)	Cash.									. 1a(1)	No
(2)	Other	assets								. 1a(2		No
b Oth	er tran	sactions										
(1)	Sales	of assets to a nonchar	ıtable exemp	t orga	inization.					. 1b(1)	No
(2)	Purch	ases of assets from a r	noncharitable	exem	pt organi	zation				1b(2)	No
(3)	Renta	l of facilities, equipmer	nt, or other a	ssets.						1b(3)	No
(4)	Reiml	oursement arrangemen	ts							. 1b(4)	No
(5)	Loans	or loan guarantees.								. 1b(5)	No
(6)	Perfor	mance of services or m	embership o	r fund	raising so	licitations				. 1b(6)	No
c Sha	ring of	facilities, equipment, r	nailing lists,	other	assets, or	paid employees				. 1c		No
		ver to any of the above										
		ds, other assets, or ser Isaction or sharing arra										
III d	ny uan	isaction or snaring arra	ngement, sn	OW III	column (c	u) the value of the	ne ç	joods, other asse	is, or services receiv	vea		
(a) Line	No	(b) Amount involved	(c) Name of	nonch	arıtable exe	mpt organization		(d) Description of	transfers, transactions,	and sharing arr	angemen	its
							_					
2a Is t	he four	idation directly or indire	ectly affiliate	d with	, or relate	d to, one or mor	re ta	ax-exempt organi	zations			
des	cribed	n section 501(c) of the	Code (other	than	section 50	01(c)(3)) or in se	ectio	on 527?		. 🗆 Yes	☑ N	lo
		omplete the following s				. , , , ,						
	,	(a) Name of organization			(1	b) Type of organiza	ation	ı	(c) Description	of relationship		
	_											
		er penalties of perjury,										
Cian		y knowledge and belief h preparer has any kno		orrect	, and com	piete Deciaratio	n oi	r preparer (otner	tnan taxpayer) is ba	ised on all into	ormation	1 от
Sign		·****				2017-06-23		\ *****	M	lay the IRS disc	uss this r	eturn
Here	_					2017-06-23		_)		with the prepare		
	7 9	Signature of officer or t	rustee			Date		Title	(:	see instr)? 🗹	Yes 🗆 N	lo
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		Print/Type preparer's	name	Prep	arer's Sıgı	nature		Date	Check if self-	PTIN		
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Prep	aror											
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									,	Phone no (41	በ) ፈደ4	2142
		BA	ALTIMORE, M	D 21	2092611					Hone no (41	U) TUT-	-174
		1										

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 Agudath Israel Charity Fund None None Charity 17,525 6202 Park Heights Avenue Baltimore, MD 21215 Agudath Israel of Greenspring None None Religious 7,830 6107 Greenspring Avenue Baltimore, MD 21209 Ahavas Yısroel None None Charity 150 6400 Cross Country Boulevard Baltimore, MD 21215 American Friends of Chochmat Shlomo None None Education 250 1160 E 90th St Brooklyn, NY 11230 Bais Medrash Mesivta of Baltimore None None Education 2,000 6823 Old Pimlico Road Baltimore, MD 21209 Bais Yaakov 11111 Park Heights Avenue None None Education 3,660 Owings Mills, MD 21117 Ezras Torah 235 East Broadway None None Education 125 New York, NY 10002 Friends of Hadar Zion None None Education 500 30 Yechezkel St POB 57 Jerusalem 91000 IS Hatzola Darom 1271 45th Street None 300 None Charity Brooklyn, NY 11219 Keren YY Inc 805-A Roosevelt Cour None None Charity 100 Far Rockaway, NY 11691 Nachlat Naftalı Foundation None None Charity 200 1081 E 27th Street Brooklyn, NY 11210 Ner Israel Rabbinical College Education None None 1,100 400 Mount Wilson Lane Baltimore, MD 21208 New England Rabbinical College None None Education 360 262 Blackstone Boulevard Providence, RI 02906 Pischei Shearim 300 None None Education 6202 Park Heights Avenue Baltimore, MD 21215 25 Rabbi Meir Baal Hanes None None Charity 4802-A 12th Avenue Brooklyn, NY 11219 Total . 64,368

За

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year RDF-SIC 6202 Park Heights Avenue None None Education 50 Baltimore, MD 21215 Shomrei Emuna None None Religious 288 6221 Greenspring Avenue Baltimore, MD 21209 Ta of Bayswater Unknown None None Education 50 Far Rockaway, NY 11691 Talmudical Academy None None Education 3,710 4445 Old Court Road Baltimore, MD 21208 Yeshiva Dvar Torah 125 None None Education 6202 Park Heights Avenue Baltimore, MD 21215 Yeshivath Bais Moshe 200 None None Education 930 Hickory Street Scranton, PA 18505 Yesodei HaTorah of Baltimore None None Education 1,300 2416 Taney Road Baltimore, MD 21209 Agudath Israel of America None None Charity 54 6202 Park Heights Avenue Baltimore, MD 21215 Arachim 1521 51st Street None None Education 150 Brooklyn, NY 11219 Congregation Mkor Baruch Inc 250 None None Education 4811 13th Avenue Brooklyn, NY 11219 Knesset Mordechai Unknown None Education 500 None Jerusalem 91000 Mıfal Chessed Inc 1933 50th Street None None Education 600 Brooklyn, NY 11204 Mosdos Beth Yosef Zvi None None Education 1,800 543 Bedford Ave Suite 113 No 113 Brooklyn, NY 11211 Ohr Somayach None None Education 200 244 Route 306/ PO Box 334 Monsey, NY 10952 Rabbinical Seminary of America None None Education 100 7601 147th Street

64,368

Flushing, NY 11367

За

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual. Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year United Institutions of Karlin Stoli None None Education 100 c/o 1436 42 Street Brooklyn, NY 11219 Bnos Yisroel of Baltimore None None Education 100 5713 Park Heights Avenue Baltimore, MD 21215 Gemilas Chesed Unknown None 1,100 None Charity Jerusalem 91000 IS Keser Dovid Unknown None Education 72 None Jerusalem 91000 IS Orthodox Union Unknown None None Religious 54 New York, NY 11230 Ahavas Torah Unknown None None 75 Charity Baltimore, MD 21209 American Friends of Koidenov Inc. None Education 100 None 2409 Ave U Brooklyn, NY 11229 Yeshivas Mir 5227 New Utrecht Ave 2,500 None None Education Brooklyn, NY 11219 Beth Jacob Unknown None None Religious 900 Brooklyn, NY 11219 Bikur Cholim 2808 Steele Rd 256 None None Charity Baltimore, MD 21209 Congregation Darchei Tzedek Unknown None None Religious 600 Baltimore, MD 21208 Jewish Caring Network Unknown None None Charity 115 Baltimore, MD 21205 Keren Ahavas Chessed 425 E 9th Street 50 None None Charity Brooklyn, NY 11218 500 Mechon Ruth Unknown None None Education Brooklyn, NY 11219 2,000 Yad Ezra 3470 Wilshire Blvd Suite 1020 None None Charity Los Angeles, CA 90010 Total . 64,368 За

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year Yeshiva Chaim Berlin East 13th St None None Education 800 Brooklyn, NY 11230 Yeshivas Nachlas Bnei Shimon, Unknown None None Education 300 Brooklyn, NY 11210 Zichron Yehuda Unknown None None Charity 100 Brooklyn, NY 11219 Keren Yesomim Unknown None None Charity 400 Monsey, NY 10952 Kol Torah Unknown 500 None None Education Teaneck, NJ 07666 Ohr Simcha Unknown None None Education 180 Brooklyn, NY 11219 Yad Eliezer 1102 E 26th St None None Charity 100 Brooklyn, NY 11210 American Friends Halichos Haaretz None None 50 Charity Unknown Jerusalem 91000 IS American Friends of Mishkan Meir None None Charity 25 Unknown Jerusalem 91000 IS Ateres Hatorah Unknown None None Charity 100 Brooklyn, NY 11219 Bais UlpanaBais Aron Unknown None None 360 Charity Jerusalem 91000 IS Baltimore Community Kollel for Mech None None Education 500 6200 Park Heights Ave Baltimore, MD 21208 Bnai Yerushalayim Unknown None None Charity 250 Jerusalem 91000 IS Central Fund of Israel Unknown None None Charity 75 Brooklyn, NY 11219 Chai Lifeline Uknown None None Charity 256 Brooklyn, NY 11219

Total . . 3a 64,368

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 Chofetz Chaim Heritage Foundation None None Charity 100 Unknown Brooklyn, NY 11219 Chomos Yerusalavım Unknown None None Charity 600 Jerusalem 91000 IS COOP Unknown None None Charity 16 Brooklyn, NY 11219 Friends of Nachlas Tzvi Unknown None None 25 Charity Brooklyn, NY 11219 Hachasas Orchim of Baltimore Unknown None None Charity 250 Baltimore, MD 21208 JEM Unknown 75 None None Charity Brooklyn, NY 11219 Jewels School Unknown 100 None None Charity Baltimore, MD 21208 KCY Unknown None 375 None Charity Brooklyn, NY 11219 Kollel Yesod Unknown 100 None None Charity Brooklyn, NY 11219 Ladies of Bikur Cholim of Satmar None None Charity 300 Unknown Brooklyn, NY 11219 Lev Malka Unknown None None Charity 300 Brooklyn, NY 11219 Mechina of South Florida Unknown None None 100 Charity Miami, FL 33126 Mesivta of Long Beach Unknown None None 36 Charity Long Beach, NY 11561 Mishkan Yitchak Unknown None None Charity 250 Brooklyn, NY 11219 Mosdos Byad Yemin Unknown None 600 None Charity Jerusalem 91000 IS Total . 64,368

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Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year Shearith Israel Unknown None None Charity 2,500 Baltimore, MD 21208 None Shuvu Return Unknown Charity 250 None Brooklyn, NY 11219 Taf I'taf Unknown Charity 250 None None Jerusalem 91000 The Associated Unknown None None Charity 300 Baltimore, MD 21208 The Chesed Fund Unknown None None 60 Charity Baltimore, MD 21208 Torah School of Greater Maryland None None Charity 36 Unknown Silver Spring, MD 20904 Tzır Chesed Unknown None None Charity 300 Jerusalem 91000 We Love To Help Inc Unknown None None 750 Charity Brooklyn, NY 11219 Yeshiva Lavreichim Metzuvanım None None Charity 125 Unknown Brooklyn, NY 11219 Youth Motivation for Education None None Charity 150 Unknown Brooklyn, NY 11219 Zichron Yehuda Unknown None Charity 100 None Jerusalem 91000 IS

Total . . 3a

64,368

TY 2016 Other Assets Schedule							
Name:	Gemsy Zay	Foundation Inc					
EIN:	52-2135417	,					
Software ID:	16000303						
Software Version:	2016v3.0						
Other Assets Schedule							
Description		Beginning of Year - Book Value	End of Year - Book Value	End of Year - Fair Market Value			

DLN: 93491174002247

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Rounding

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN	l: 93491174002247			
TY 2016 Other Expenses Sche	dule						
-							
Name:	Name: Gemsy Zay Foundation Inc						
EIN:	52-2135417						
Software ID:	16000303						
Software Version:	2016v3.0						
Other Expenses Schedule							
Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes			
Bank fees	63	63					

efile GRAPHIC print - I	OO NOT PROCESS As Filed Data -		DLN: 93491174002247				
Schedule B (Form 990, 990-EZ,		OMB No 1545-0047					
or 990-PF) Department of the Treasury Internal Revenue Service	ns ıs at	2016					
Name of the organizat Gemsy Zay Foundation I		Employer id	entification number				
	!	52-2135417					
Organization type (che	eck one)						
Filers of:	Section:						
Form 990 or 990-EZ	☐ 501(c)() (enter number) organization						
	4947(a)(1) nonexempt charitable trust not treated as a private foundation	on					
	☐ 527 political organization						
Form 990-PF	501(c)(3) exempt private foundation						
	4947(a)(1) nonexempt charitable trust treated as a private foundation	4947(a)(1) nonexempt charitable trust treated as a private foundation					
	☐ 501(c)(3) taxable private foundation						
•	ation filing Form 990, 990-EZ, or 990-PF that received, during the year, contribution r property) from any one contributor. Complete Parts I and II. See instructions for d	_	•				
Special Rules							
under sections a received from a	tion described in section $501(c)(3)$ filing Form 990 or 990-EZ that met the $33^13\%$ si $509(a)(1)$ and $170(b)(1)(A)(vi)$, that checked Schedule A (Form 990 or 990-EZ), Par one contributor, during the year, total contributions of the greater of (1) \$5,000 one 1h, or (ii) Form 990-EZ, line 1 Complete Parts I and II	rt II, line 13,	16a, or 16b, and that				
during the year,	tion described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that receive total contributions of more than \$1,000 exclusively for religious, charitable, scientification the prevention of cruelty to children or animals. Complete Parts I, II, and III						
during the year, If this box is che purpose Do no	tion described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received contributions exclusively for religious, charitable, etc., purposes, but no such contributions enter here the total contributions that were received during the year for an excomplete any of the parts unless the General Rule applies to this organization betable, etc., contributions totaling \$5,000 or more during the year	ributions total xclusively rel ecause it rece	led more than \$1,000 igious, charitable, etc , eived <i>nonexclusively</i>				
990-EZ, or 990-PF), bu	on that is not covered by the General Rule and/or the Special Rules does not file So tit must answer "No" on Part IV, line 2, of its Form 990, or check the box on line H Form 990PF, Part I, line 2, to certify that it does not meet the filing requirements of S	l of its					
For Paperwork Reduction for Form 990, 990-EZ, or 9		e В (Form 990,	990-EZ, or 990-PF) (2016)				

Schedule B (For	m 990, 990-EZ, or 990-PF) (2016)		Page 2				
Name of organi Gemsy Zay Foun		Employer identification 52-2135417	Employer identification number 52-2135417				
Part I	Contributors (see instructions) Use duplicate copies of Part I if add	idditional space is needed					
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution				
1			Person 🗸				
7	Zvi Guttman PO Box 32308		Payroll				
	FO BOX 32300	\$ 62,950	Noncash				
	Baltimore, MD21282		(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) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution				
			Person				
-			Payroll				
		\$	Noncash				
			(Complete Part II for noncash contributions)				
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution				
			Person				
-			Payroll				
		\$	Noncash				
			(Complete Part II for noncash contributions)				
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution				
			Person				
-			Payroll				
		\$	Noncash				
			(Complete Part II for noncash contributions)				
	1	Schedule B (F	orm 990, 990-EZ, or 990-PF) (2016)				

Schedule B (Form 99	0, 990-EZ, or 990-PF) (2016)		Page 3		
Name of organization Gemsy Zay Foundation		Employer identification number			
Cernsy Zay Foundation	THE	52-21	135417		
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		
		s			
<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 Gemsy Zay Foundation Inc			Employer identification number 52-2135417
than \$1,0 organiza the year.	000 for the year from any one contribut	or. Complete columns (a) thro I of exclusively religious, chari ructions.) ▶ \$	d in section 501(c)(7), (8), or (10) that total more ugh (e) and the following line entry. For itable, 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 gif d ZIP 4	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 gif	t
_	Transferee's name, address, and	d 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
-	Transferee's name, address, and	(e) Transfer of gif	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)