# Disaster Relief - GA 2017-19-101302003 8

Form **990-PF** 

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 separate instructions is at www.irs.gov/form990pf.

For	caler	dar year 2016 or tax year beginning		, and ending					
Na	ne of	foundation			A Employer identification	on number			
_T	HE	FRANK FAMILY FOUNDAT:	ION, INC		58-208298	1			
Nui	nber a	nd street (or P O box number if mail is not delivered to st	B Telephone number						
9	20	CREST VALLEY DRIVE, I	MWWI	1.81	404-255-7	112			
		own, state or province, country, and ZIP or foreig	ın postal code		C If exemption application is	pending, check here			
		ANTA, GA 30327				. $\Box$			
G (	Check	all that apply: Initial return		ormer public charity	D 1. Foreign organization	ns, check here			
		Final return	Amended return		Foreign organizations no check here and attach is	neeting the 85% test,			
	`hool	Address change	Name change  exempt private foundation	- A	check here and attach	computation			
	_	type of organization: LX   Section 501(c)(3 ction 4947(a)(1) nonexempt charitable trust	Other taxable private foundation	lation UZ	E If private foundation st	. [ - ]			
L E			unting method: X Cash	Accrual	under section 507(b)(				
		Part II, col. (c), line 16)	Other (specify)	Accidal	F If the foundation is in a under section 507(b)(				
	\$	8,382,647. (Part I, c		basis)	ander seemon sor(b)(	T)(D), GILCON HOLD			
Pa	art I	Analysis of Revenue and Expenses	(a) Revenue and	(b) Net investment	(c) Adjusted net	(d) Disbursements			
		(The total of amounts in columns (b), (c), and (d) may no necessarily equal the amounts in column (a))	expenses per books	income	income	for charitable purposes (cash basis only)			
1	1	Contributions, gifts, grants, etc., received	49,740.		N/A				
$\wedge$	2	Check fithe foundation is not required to attach Sch. B							
V	3	Interest on savings and temporary cash investments	3,626.	3,626.		STATEMENT 1			
1	4	Dividends and interest from securities	136,884.	132,492.		STATEMENT 2			
,		Gross rents							
	b	Net rental income or (loss)	450 660						
e	6a	Net gain or (loss) from sale of assets not on line 10 Gross sales price for all	-472,668.	<u> </u>					
Revenue	_D	assets on line 6a	•	0.					
æ	8	Capital gain net income (from Part IV, line 2)  Net Short-term capital gain		U •					
	-					as and as a second of the seco			
	10a	Income modifications Gross sales less feturis EIVED and allowances EVENTO							
		Less Cost of goods sold							
	C	Less Cost of goods sold  Grosspiotit of (1085) () 8 2016							
	11	Other Income							
	12	Total. Add lines Linguigh 11 1 17	-282,418.	136,118.					
	13	Compensation of officers directors, trustees, etc	0.	0.		0.			
	14	Other employee salaries and wages							
es		Pension plans, employee benefits				<u> </u>			
		Legal fees	4 500	4 500					
xpe	1	Accounting fees STMT 3 Other professional fees	4,500.	4,500.		0.			
ē E	17	Interest							
ativ		Taxes STMT 4	21,098.	1,168.		0.			
istr	19	Depreciation and depletion	21,050.	1,100.		<del>                                     </del>			
Administrative Expens	20	Occupancy							
Adi	l	Travel, conferences, and meetings							
and	22	Printing and publications							
	23	Other expenses STMT 5	1,209.	231.		0.			
Operating	24	Total operating and administrative							
) Pe		expenses Add lines 13 through 23	26,807.	5,899.		0.			
J	25	Contributions, gifts, grants paid	372,367.			372,367.			
	26	Total expenses and disbursements	200 454	5 222		200 200			
		Add lines 24 and 25	399,174.	5,899.		372,367.			
	i	Subtract line 26 from line 12:	601 500						
	l	Excess of revenue over expenses and disbursements  Net investment income (if negative, enter -0-)	-681,592.	130,219.					
	l	Adjusted net income (if negative, enter -0-)		130,419	N/A	<del>                                     </del>			
		nuluaten ner menine (n negative, enter -U-)		<u> </u>	TA / 12				

FUI	111 95	10-PF (2016) THE FRANK FAMILY FOUNDAT			U62961 Page 2
Part II Balance Sheets Attached schedules and amounts in the description column should be for and of wear amounts only		Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year	End of y	
_			(a) Book Value	(b) Book Value	(c) Fair Market Value
		Cash - non-interest-bearing	210,312.	946,038.	946,038.
	ı	Savings and temporary cash investments			
	3	Accounts receivable ► 1,636.			
		Less: allowance for doubtful accounts ▶	2,356.	1,636.	1,636.
	4	Pledges receivable ►			
		Less: allowance for doubtful accounts			
	5	Grants receivable	_ [		
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons	İ		
	7	Other notes and loans receivable			
	,	Less: allowance for doubtful accounts	]		
Ø	8	Inventories for sale or use			<del></del>
Assets	_	Prepaid expenses and deferred charges			
As		Investments - U.S. and state government obligations			<del></del>
	l	Investments - corporate stock STMT 6	6,932,455.	5,482,948.	7,434,973.
		Investments - corporate bonds	0,332,233.	3/102/3101	7720275750
	1	Investments - land, buildings, and equipment basis			<del></del>
	''		-		
	4.5	Less accumulated depreciation  Investments - mortgage loans			
	12	Investments - other		<del></del>	
	_	F	<del></del>		
	14	Land, buildings, and equipment: basis  Less accumulated depreciation			
	4-	·	<del></del>		<del></del>
,	ı	Other assets (describe )	<del></del>		
	16	Total assets (to be completed by all filers - see the	7 145 100	6,430,622.	0 202 647
_	-	instructions. Also, see page 1, item I)	7,145,123.	0,430,022.	8,382,647.
	l	Accounts payable and accrued expenses			
	18	Grants payable			
Liabilities	19	Deferred revenue		<del></del>	, make members
藚	20	Loans from officers, directors, trustees, and other disqualified persons			
Ë	21	Mortgages and other notes payable	<del></del>		
	22	Other liabilities (describe )	<del></del>	· · · · · · · · · · · · · · · · · · ·	
	20	Total liabilities (add lines 17 through 22)	0.	0.	
_	23	Foundations that follow SFAS 117, check here			
		and complete lines 24 through 26 and lines 30 and 31.			
S	24	Unrestricted			
Ĕ	25	Temporarily restricted			
3ag	26	Permanently restricted			
ğ	20	Foundations that do not follow SFAS 117, check here			
Ē		and complete lines 27 through 31.			
5	27	Capital stock, trust principal, or current funds	7,145,123.	6,430,622.	
ets	28	Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0,430,022.	
Net Assets or Fund Balances	29	Retained earnings, accumulated income, endowment, or other funds	0.	0.	
et/		Total net assets or fund balances	7,145,123.	6,430,622.	
Z	30	Total net assets of fund parances	1,143,123.	0,430,022.	
	24	Total liabilities and net assets/fund balances	7,145,123.	6,430,622.	
=				0, ±30,022 •	
LP	art	Analysis of Changes in Net Assets or Fund Ba	nances		
1	Tota	I net assets or fund balances at beginning of year - Part II, column (a), line 3	30		
		st agree with end-of-year figure reported on prior year's return)		1	7,145,123.
		r amount from Part I, line 27a		2	-681,592.
		r increases not included in line 2 (itemize)		3	0.
		lines 1, 2, and 3		4	6,463,531.
		eases not included in line 2 (itemize) BOOK/TAX ADJUST	MENT	5_	32,909.
		net assets or fund balances at end of year (line 4 minus line 5) - Part II, col		6	6,430,622.
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<u>353,009.</u>

372,367.

7 Add lines 5 and 6

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

See the Part VI instructions.

8 Enter qualifying distributions from Part XII, line 4

	990-PF (2016) THE FRANK FAMILY FOUNDATION, INC 58-208 rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - sec	2981 instr	uctio	Page 4
	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1.			_ <del>-</del>
Ia	Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)			
	Domestic foundations that meet the section 4940(e) requirements in Part V, check here   X and enter 1%	-	1 2	02.
U	of Part I, line 27b		1, 3	02.
_				
	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b).			0.
	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)		1,3	
_	Add lines 1 and 2		1,3	
	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)		1 2	0.
	Tax based on investment income Subtract line 4 from line 3. If zero or less, enter -0-		<u> 1,3</u>	02.
	Credits/Payments:			
a	2016 estimated tax payments and 2015 overpayment credited to 2016			
þ	Exempt foreign organizations - tax withheld at source			
C	Tax paid with application for extension of time to file (Form 8868)			
d	Backup withholding erroneously withheld 6d 6d			
7	Total credits and payments. Add lines 6a through 6d			0.
8	Enter any penalty for underpayment of estimated tax. Check here X if Form 2220 is attached			<u> 39.</u>
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed SEE STATEMENT 7 > 9		1,3	41.
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			
	Enter the amount of line 10 to be; Credited to 2017 estimated tax		-	
	rt VII-A Statements Regarding Activities			
	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in		Yes	No
	any political campaign?	1a		X
	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definition)?	1b	<u> </u>	X
U		10	-	<u>A</u>
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or	ľ		
	distributed by the foundation in connection with the activities			₹.
	Did the foundation file Form 1120-POL for this year?	<u>1c</u>		X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:	-	1	
	(1) On the foundation. ► \$ 0 . (2) On foundation managers. ► \$ 0 .			
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation	-r to -	F 250	T ~ AND TE
	managers. ► \$ 0 .		1	
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		X
	If "Yes," attach a detailed description of the activities			
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or		Ì	
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3	l	X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		X
b	If "Yes," has it filed a tax return on Form 990-T for this year?  N/A	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		X
	If "Yes," attach the statement required by General Instruction T.			
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:			
Ů	By language in the governing instrument, or	1	1	
	By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law			ļ
		6	x	
_	remain in the governing instrument?	7	X	<del> </del>
,	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV	<u> </u>	<u> </u>	<del>                                     </del>
_				1
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)	-	İ	
	GA	-		}
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)			
	of each state as required by General Instruction G? If "No," attach explanation	8b	X	<u> </u>
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar		]	
	year 2016 or the taxable year beginning in 2016 (see instructions for Part XIV)? If "Yes," complete Part XIV	9		<u>x</u> 4
10_	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses	10		X
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had not been removed from jeopardy before the first day of the tax year beginning in 2016?

orm 990-PF (2016) THE FRANK FAMILY FOUNDA!  Part VII-B   Statements Regarding Activities for Which	FION, INC		<u>58-20829</u>	81 Page <b>6</b>
5a During the year did the foundation pay or incur any amount to:	rorm 4/20 May be i	required (contin	ued)	
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	nn 4945(e)\?	□ v <sub>4</sub>	s X No	
(2) Influence the outcome of any specific public election (see section 4955);	· • • •			
any voter registration drive?			s X No	1 1
(3) Provide a grant to an individual for travel, study, or other similar purpose	s?		s X No	
(4) Provide a grant to an organization other than a charitable, etc., organization				
4945(d)(4)(A)? (see instructions)		Ye	es X No	
(5) Provide for any purpose other than religious, charitable, scientific, literary	y, or educational purposes, or	for		
the prevention of cruelty to children or animals?		Ye	es X No	
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify un	nder the exceptions described	ın Regulations		
section 53.4945 or in a current notice regarding disaster assistance (see instr	ructions)?		N/A	5b
Organizations relying on a current notice regarding disaster assistance check	here			
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption				
expenditure responsibility for the grant?		I/A	es L No	
If "Yes," attach the statement required by Regulations section 53.49			ľ	
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums on	—— <u>—</u>		
a personal benefit contract?		Ye	es X No	
<b>b</b> Did the foundation, during the year, pay premiums, directly or indirectly, on a	personal benefit contract?		-	6b X
If "Yes" to 6b, file Form 8870	-h -lt t 0		es X No	
7a At any time during the tax year, was the foundation a party to a prohibited tax		Y6		7b
<u>b If "Yes," did the foundation receive any proceeds or have any net income attrit</u> Part VIII Information About Officers, Directors, Trus		nagers Highly		70
Paid Employees, and Contractors	tees, i ouridation ivie	inagers, riigin	•	
List all officers, directors, trustees, foundation managers and their	r compensation.		<del></del>	
	(b) Title, and average hours per week devoted	(c) Compensation	(d) Contributions to employee benefit plans and deferred	(e) Expense account, other
(a) Name and address	to position	(If not paid, enter -0-)	and deferred compensation	allowances
SEE STATEMENT 10		0.	0.	0.
	_			
	<u> </u>			
	4			
	_			
2 Compensation of five highest-paid employees (other than those in	cluded on line 1) If none	enter "NONE "		
	(b) Title, and average	Citer iterte.	(d) Contributions to employee benefit plans	(e) Expense
(a) Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	and deferred compensation	account, other
NONE	dovoted to position		Compensation	anomanoco
	1			
	1			
	7			
	]			
		<u> </u>		
Total number of other employees paid over \$50,000			<b></b>	0
	_		Form	990-PF (2016)

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Part VIII Information About Officers, Directors, Trustees, Foundat Paid Employees, and Contractors (continued)	tion Managers, Highly	
3 Five highest-paid independent contractors for professional services. 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  Part IX-A   Summary of Direct Charitable Activities		▶ 0
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistic	cal information such as the	
number of organizations and other beneficiaries served, conferences convened, research papers produ	uced, etc.	Expenses
1 <u>N/A</u>		
2		
3		
4		
Det IV Dia		
Part IX-B Summary of Program-Related Investments  Describe the two largest program-related investments made by the foundation during the tax year on li	nes 1 and 2.	Amount
N/A		
2		
All other program-related investments. See instructions.		
3		
Fotal. Add lines 1 through 3		0. Form <b>990-PF</b> (2016)

P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations	idations, s	ee instructions.)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
	Average monthly fair market value of securities	1a	7,283,619.
	Average of monthly cash balances	1b	7,283,619. 429,316.
	Fair market value of all other assets	1c _	
d	Total (add lines 1a, b, and c)	1d	7,712,935.
	Reduction claimed for blockage or other factors reported on lines 1a and		-
	1c (attach detailed explanation) 1e 0.	,	
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	7,712,935.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	115,694.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	7,597,241.
6	Minimum investment return. Enter 5% of line 5	6	379,862.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations an foreign organizations check here ▶ ☐ and do not complete this part.)	d certain	
1	Minimum investment return from Part X, line 6	1	<u>379,862.</u>
2a	Tax on investment income for 2016 from Part VI, line 5		
b	Income tax for 2016. (This does not include the tax from Part VI.)		
C	Add lines 2a and 2b	2c	1,302.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	378,560.
4	Recoveries of amounts treated as qualifying distributions	4	<u> </u>
5	Add lines 3 and 4	5	378,560.
6	Deduction from distributable amount (see instructions)	6	0.
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	378,560.
P	art XII Qualifying Distributions (see Instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		252 265
a	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	372,367. 0.
b	Program-related investments - total from Part IX-B	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	<u>372,367.</u>
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		
	income. Enter 1% of Part I, line 27b	5	1,302.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	371,065.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation of	qualifies for	the section

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4940(e) reduction of tax in those years.

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2015	( <b>c)</b> 2015	(d) 2016
1 Distributable amount for 2016 from Part XI, line 7				378,560.
2 Undistributed income, if any, as of the end of 2018				<u></u>
a Enter amount for 2015 only			0.	
ь Total for prior years:				
3 Excess distributions carryover, if any, to 2016:		0.		
a From 2011				
b From 2012 91,731.				
c From 2013				
d From 2014 97, 203.				
e From 2015				
f Total of lines 3a through e	188,934.			
4 Qualifying distributions for 2016 from				
Part XII, line 4: ▶\$ 372,367.				
a Applied to 2015, but not more than line 2a			0.	
<b>b</b> Applied to undistributed income of prior	•			
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus				
(Election required - see instructions)	0.			
d Applied to 2016 distributable amount				372,367.
e Remaining amount distributed out of corpus	0.	·		<u></u>
Excess distributions carryover applied to 2016 (If an amount appears in column (d), the same amount must be shown in column (a))	6,193.			6,193.
6 Enter the net total of each column as indicated below:		The state of the s	water as well all the substance of the s	u nama, maaan ni ami
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	182,741.			
<b>b</b> Prior years' undistributed income. Subtract			, έ.	• •
line 4b from line 2b		0.	<u> </u>	
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		0.		[
d Subtract line 6c from line 6b. Taxable				
amount - see instructions		0.		
e Undistributed income for 2015. Subtract line				1
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2016. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2017				0.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				1
section 170(b)(1)(F) or 4942(g)(3) (Election				1
may be required - see instructions)	0.	{		1
8 Excess distributions carryover from 2011				
not applied on line 5 or line 7	0.			1
9 Excess distributions carryover to 2017				
Subtract lines 7 and 8 from line 6a	182,741.			
10 Analysis of line 9:				· — — — — — — — — — — — — — — — — — — —
a Excess from 2012 85,538.			]	1
b Excess from 2013				ı
c Excess from 2014 97, 203.			}	
d Excess from 2015				i
e Excess from 2016				Form <b>990-PF</b> (2016)
8225B1 11-22-18				Form MMU-PF (2016)

	NK FAMILY F				82981 Page 10
Part XIV Private Operating F			<del></del>	N/A	
1 a If the foundation has received a ruling		· · · · -			1
foundation, and the ruling is effective fo			▶ └	1	
b Check box to indicate whether the foun		ng toundation described		4942(j)(3) or4	942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year (a) 2016	(b) 2015	Prior 3 years (c) 2014	(d) 2013	(e) Total
income from Part I or the minimum	(4) 2010	(0) 2013	(6) 2014	(0) 2013	(e) Total
investment return from Part X for					
each year listed	<u> </u>	<del></del> -	<del> </del>	<del> </del>	/
<b>b</b> 85% of line 2a		<del></del>	<del> </del>	<del>                                     </del>	<b></b>
c Qualifying distributions from Part XII,					
line 4 for each year listed			<del></del>	<del>                                     </del>	<del>                                     </del>
d Amounts included in line 2c not			ļ		
used directly for active conduct of					
exempt activities	ļ		<del></del>	<del>  /                                   </del>	<del></del>
e Qualifying distributions made directly					
for active conduct of exempt activities.		}			
Subtract line 2d from line 2c 3 Complete 3a, b, or c for the		<u> </u>	<del> //-</del>	<del></del>	<del> </del>
alternative test relied upon:		}			
a "Assets" alternative test - enter:					
(1) Value of all assets	<b></b>	<del> </del>	<del>                                     </del>	<del></del>	<del> </del>
(2) Value of assets qualifying					
under section 4942(j)(3)(B)(i)  b "Endowment" alternative test - enter			<del>,/</del>	<del> </del>	<del> </del>
2/3 of minimum investment return			Í		
shown in Part X, line 6 for each year					
listed	<u> </u>		<del></del>	<del></del>	<del> </del>
c "Support" alternative test - enter:					
<ol><li>(1) Total support other than gross investment income (interest,</li></ol>					
dividends, rents, payments on					
securities loans (section					
512(a)(5)), or royalties)			<del></del>		
(2) Support from general public and 5 or more exempt					
organizations as provided in				ļ	
section 4942(j)(3)(B)(iii)			<del></del>	<del>                                     </del>	
(3) Largest amount of support from					
an exempt organization	/	<del></del>		<del> </del>	
(4) Gross investment income	rmation (Comple	to this part only	if the foundation	2 had \$5 000 or m	oro in accete
Part XV Supplementary Info			ii tile loulidatioi	i nau \$5,000 or in	ore in assets
			<del></del>		
1 Information Regarding Foundation	_	Aban 00/ afaba 4-4-1			
a List any managers of the foundation where year (but only if they have contributed in the contributed in			itributions received by th	e toundation before the cic	ise of any tax
	ποιο επαπ φο,σσο): (σσο σ	5011011 507 (4)(2).)			
SEE STATEMENT 11	an own 100/ or more of th	a stack of a somewhere	· (ar an agually large part	on of the eventorable of a	ortonehin ar
b List any managers of the foundation who other entity) of which the foundation has			(or an equally large port	ion of the ownership of a p	rarmership or
NONE					
		0-1-11		<del></del>	
2 Information Regarding Contribut Check here ► X if the foundation				not accept upoplicated resi	reate for friends. If
the foundation makes gifts, grants, etc.					
<del></del>	<del></del>		<del></del>		
a The name, address, and telephone num	iber of e-mail address of t	ne person to whom app	nications should be addre	esseo:	
h. The form in which applications chould	he submitted and informati	han and materials they	should applied at		
<b>b</b> The form in which applications should	ve submilled and imbrina	non and materials triey s	snoula include:		
Any submission deadlinest					
c Any submission deadlines:					
d Any restrictions or limitations on award	e auch as hy assaranhia	al areas, charatable fields	kinde of inctitutions or	other factors:	
a Any restrictions of initiations on award	is, such as by geographica	ar arcas, criarriable nelus	, killas ot institutions, Of	טוווטו ומטוטוא.	
	<del></del>			<del></del>	

Control of the contro				
3 Grants and Contributions Paid During the Y	If recipient is an individual,	Payment		
Name and address (home or business)	show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
	or substantial contributor	recipient		
a Paid during the year	+			
AA SYNAGOGUE	NONE	PUBLIC CHARITY	UNRESTRICTED	
600 PEACHTREE BATTLE AVENUE NW			•	
ATLATNA, GA 30327_	<del> </del>	<u> </u>	ļ	2,420.
	}			
AGAPE	NONE	PUBLIC CHARITY	INTO DOMO I CMDD	
2353 BOLTON ROAD NW	NONE	FUBLIC CHARITI	UNKESTRICIED	
ATLANTA, GA 30318				100.
AJWS - AMERICAN JEWISH WORLD SERVICE	NONE	PUBLIC CHARITY	UNRESTRICTED	
45 WEST 36TH STREET				
NEW YORK, NY 10018				22,000.
AMEINU	NONE	PUBLIC CHARITY	UNRESTRICTED	
424 W. 33RD ST			)	
NEW YORK, NY 10001	· · · · · · · · · · · · · · · · · · ·	<u> </u>	ļ	150.
			İ	
AMEINU	NONE	PUBLIC CHARITY	FIND DOMD TOWNS	
424 W. 33RD ST	NONE	FUBLIC CHARITI	DIRESTRICTED	
NEW YORK NY 10001		<u> </u>		1 000
Total SEE CO	NTINUATION SHEE	T(S)	<b>▶</b> 3a	372 367.
<b>b</b> Approved for future payment				
NONE			ļ	
NONE				
			:	
		<del> </del>		
	<u> </u>	<u> </u>		
Total			<b>▶</b> 3b	0.
			Fe	orm <b>990-PF</b> (2016)

# Part XVI-A Analysis of Income-Producing Activities

Form 990-PF (2016)

Enter gross amounts unless otherwise indicated.	Unrelated business income			ed by section 512, 513, or 514	(e)		
1 Program service revenue:	(a) Business code	(b) Amount	(C) Exclu- sion code	(d) Amount	Related or exempt function income		
•	0000						
ab	-	<del>-</del>	+		<u> </u>		
			<del> </del>				
c			+-+		·		
		<del> </del>	+		<del> </del>		
f							
g Fees and contracts from government agencies		-					
2 Membership dues and assessments							
3 Interest on savings and temporary cash investments			14	3,626.			
4 Dividends and interest from securities			14	3,626. 136,884.			
5 Net rental income or (loss) from real estate: a Debt-financed property							
<ul><li>b Not debt-financed property</li><li>6 Net rental income or (loss) from personal</li></ul>							
property							
7 Other investment income					<del></del>		
8 Gain or (loss) from sales of assets other							
than inventory			18	-472,668.			
9 Net income or (loss) from special events							
10 Gross profit or (loss) from sales of inventory							
11 Other revenue:							
a							
b							
C		<u> </u>			a a		
d	1 1						
e							
12 Subtotal. Add columns (b), (d), and (e)		0	).	-332,158.	0.		
13 Total Add line 12, columns (b), (d), and (e)				13	-332,158.		
(See worksheet in line 13 instructions to verify calculations.)							

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

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

Form **990-PF** (2016)

Form **990-PF** (2016)

Pa	rt XVII			ers To a	and Transactions a	and Relationsh	nips With Nonchar	itable	)	
	Did tho o	Exempt Organ		ha fallawan	a with any other areas are				Yes	No
1		organization directly or indir of (other than section 501(c)	on 501(c) or		162	140				
a		s from the reporting founda				iizations				
u	(1) Casi			ozonipi org	gamzation of.			1a(1)		_x
	(2) Othe							1a(2)		X
b	• •	nsactions:						(_,		
	(1) Sale	s of assets to a noncharital	ble exempt organization	l				1b(1)		X
		chases of assets from a no						1b(2)		X
	(3) Ren	tal of facilities, equipment,	or other assets					1b(3)		X
	(4) Rein	nbursement arrangements						1b(4)		X
	(5) Loa	ns or loan guarantees						1b(5)		X
	(6) Perf	formance of services or me	mbership or fundraising	g solicitatio	ns			1b(6)		<u> </u>
	_	of facilities, equipment, ma						1c		X
d							arket value of the goods, o		ets,	
		es given by the reporting to ( <b>d)</b> the value of the goods,			ed less than tair market vall	ie in any transaction	or sharing arrangement, sh	ow in		
(a)∟	ine no	(b) Amount involved			exempt organization	(d) Description	of transfers, transactions, and s	naring an	angeme	nts
		· · ·	, ,	N/A	<u> </u>					
					· · · · · · · · · · · · · · · · · · ·					
					<del></del>		<del></del>			
	<del>-  </del>									
						-				
2a	Is the fo	undation directly or indirect	tly affiliated with, or rela	ted to, one	or more tax-exempt organi	zations described				
	ın sectio	n 501(c) of the Code (other	r than section 501(c)(3)	) or in secti	on 527 <b>?</b>			Yes	X	No
b	If "Yes," (	complete the following sch				ī				
		(a) Name of org	anization		(b) Type of organization	(	c) Description of relationsh	þ		
		N/A			·				_	
-	Unde	er penalties of perjury, I declare t	that I have examined this ret	turn, includin	g accompanying schedules and	statements, and to the I	pest of my knowledge			
Sig	gn and I	belief, it is true, correct, and con	nplete Declaration of prepar	er (other than	taxpayer) is based on all inform	nation of which preparer	nas any knowledge return	the IRS o	e prepar	er
He		toestrank	/ Laurine /	h. tr	12/27/11	PRESID		n below Yes	(see ins	]″No
	Sig	nature of officer or trustee	/		Date /	Title				
	_	Print/Type preparer's na	ıme Pr	eparer's si	gnature / /	Date / /	Check if PTIN		-	
_		CHRISTOPHE	RB.	//			self- employed			
Pa		DAVIS, CPA			OPHER B. DA	11/15/17		<u>546</u>		
	eparer e Only	Firm's name ► HA+	W   APRIO 1	LLP		,	Firm's EIN ► 57-11	575	23	
US	e Only		THE CONTROLLE	יבת קד	DELINE CITTE	1000				
					RKWAY, SUITE	TOOO	Dhono no 404 90	<b>ე_</b> 0	<b>6</b> E 1	
		AT.	LANTA, GA	<u>, , , , , , , , , , , , , , , , , , , </u>			Phone no. 404-89	<u>4-3</u>	<u> </u>	

Part XV Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual. Recipient Foundation Purpose of grant or show any relationship to Amount any foundation manager status of contribution Name and address (home or business) recipient or substantial contributor PUBLIC CHARITY UNRESTRICTED AMERICAN PARDES FOUNDATION NONE 5 W 37TH STREET #802 5,000, NEW YORK, NY 10018 PUBLIC CHARITY UNRESTRICTED AMERICAN PARDES FOUNDATION NONE 5 W 37TH STREET #802 5,000. NEW YORK, NY 10018 ATLANTA FOOD BANK (HUNGER WALK) NONE PUBLIC CHARITY UNRESTRICTED 732 JOSEPH EAST LOWERY BLVD 2,615. ATLANTA GA 30318 ATLANTA JEWISH FILM FESTIVAL NONE PUBLIC CHARITY UNRESTRICTED 6 PIEDMONT CENTER 501 1,620. ATLANTA GA 30305 BERKWOOD HEDGE SCHOOL NONE PUBLIC CHARITY UNRESTRICTED 1809 BANCROFT WAY 250. BERKELEY, CA 94703 CANINE ASSISTANTS PUBLIC CHARITY UNRESTRICTED NONE 3160 FRANCIS ROAD <u>250.</u> MILTON, GA 30004 PUBLIC CHARITY UNRESTRICTED NONE 151 ELLIS STREET NE ATLANTA GA 30303 3,000. CENTER FOR IRSRAEL EDUCATION NONE PUBLIC CHARITY UNRESTRICTED P.O. BOX 15129 ATLANTA GA 30333 10,000. DAVIS ACADEMY NONE PUBLIC CHARITY UNRESTRICTED 8105 ROBERTS DRIVE ATLANTA GA 30350 <u> 18.867.</u> PUBLIC CHARITY UNRESTRICTED GEORGIA BUDGET AND POLICY NONE 100 EDGEWOOD AVENUE NE SUITE 950 ATLANTA GA 30303 2,500. Total from continuation sheets 346 697

Part XV Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual. Recipient Foundation Purpose of grant or show any relationship to Amount any foundation manager contribution status of Name and address (home or business) recipient or substantial contributor PUBLIC CHARITY UNRESTRICTED GEORGIANS FOR HEALTHY FUTURE NONE 100 EDGEWOOD AVENUE SUITE 815 500. ATLANTA, GA 30303 INTERFAITH COMMUNITY INITIATIVES NONE PUBLIC CHARITY UNRESTRICTED 669 EAST SIDE AVE SE 1,148. ATLANTA GA 30316 JERUSALEM SOCIETY FOR PREVENTION OF NONE PUBLIC CHARITY UNRESTRICTED CRUELTY TO ANIMALS 630 THIRD AVENUE 5,750. NEW YORK, NY 10017 JEWISH FAMILY & CAREER SERVICES NONE PUBLIC CHARITY UNRESTRICTED 4549 CHAMBLEE DUNWOODY RD 8,800. ATLANTA GA 30338 JEWISH FAMILY & CAREER SERVICES NONE PUBLIC CHARITY UNRESTRICTED 4549 CHAMBLEE DUNWOODY RD 3,500. ATLANTA GA 30338 PUBLIC CHARITY UNRESTRICTED JEWISH FEDERATION GREATER ATLANTA NONE 1440 SPRING STREET NW 18. ATLANTA, GA 30309 PUBLIC CHARITY UNRESTRICTED JEWISH NATIONAL FUND NONE 42 EAST 69TH STREET 1,000. NEW YORK, NY 10021 PUBLIC CHARITY UNRESTRICTED JEWISH NATIONAL FUND NONE 42 EAST 69TH STREET 2,500. NEW YORK, NY 10021 MASORTI FOUNDATION NONE PUBLIC CHARITY UNRESTRICTED 475 RIVERSIDE DRIVE 7,000. NEW YORK, NY 10115 PUBLIC CHARITY UNRESTRICTED MAZON NONE 10495 SANTA MONICA BLVD SUITE 100 75,000. LOS ANGELES, CA 90025 Total from continuation sheets

Supplementary Information Part XV Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient Purpose of grant or Foundation show any relationship to Amount contribution status of any foundation manager Name and address (home or business) recipient or substantial contributor ORT AMERICA NONE PUBLIC CHARITY UNRESTRICTED 75 MIADEN LANE, 10TH FLOOR NEW YORK, NY 10038 1,200. PEF FOR LEV RAMOT NONE PUBLIC CHARITY UNRESTRICTED 630 THIRD AVENUE 14,000. NEW YORK, NY 10017 PUBLIC CHARITY UNRESTRICTED NONE SHADES 500 NEW JERSEY AVENUE 1,000. WASHINGTON DC 20001 SOCIETY FOR ADVANCEMENT OF EDUCATION NONE PUBLIC CHARITY UNRESTRICTED PO BOX 16252 1,560, JERUSALEM, ISRAEL 91162 SUSAN KOMEN NONE PUBLIC CHARITY UNRESTRICTED 505005 LBJ FREEWAY SUITE 250 <u>500.</u> DALLAS, TX 75244 YEMIN ORDE NONE PUBLIC CHARITY UNRESTRICTED 4340 EAST-WEST HWY 2,000. BETHESDA, MD 20814 PUBLIC CHARITY UNRESTRICTED AYEKA LMT NONE POB 28376 2,500. JERUSALEM, ISRAEL 9128302 NONE PUBLIC CHARITY UNRESTRICTED MJCC 5432 TILLY MILL ROAD 1,000. ATLANTA, GA 30338 NONE PUBLIC CHARITY UNRESTRICTED KEHILLA OF SANDY SPRINGS 5075 ROSWELL ROAD NE 1,000. ATLANTA, GA 30342 PUBLIC CHARITY UNRESTRICTED ATLANTA HUMANE SOCIETY NONE 981 HOWELL MILL ROAD 3,000. ATLANTA GA 30318 Total from continuation sheets

Part XV Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient Purpose of grant or Foundation show any relationship to Amount contribution status of any foundation manager Name and address (home or business) recipient or substantial contributor CLIMATE REALITY PROJECT NONE PUBLIC CHARITY UNRESTRICTED 750 9TH STREET NW 4,000, WASHINGTON, DC 20001 ALEXANDER MUSS HIGH SCHOOL IN ISRAEL NONE PUBLIC CHARITY UNRESTRICTED 78 RANDALL AVE 3,500. ROCKVILLE CENTRE, NY 11570 PUBLIC CHARITY UNRESTRICTED FRIENDS OF IDF NONE PO BOX 4224 1,500. NEW YORK, NY 10163 NONE PUBLIC CHARITY UNRESTRICTED ART START 526 WEST 26TH STREET, SUITE 501 1,000. NEW YORK, NY 10001 NONE PUBLIC CHARITY UNRESTRICTED ROSE LIBRARY 201 DOWMAN DRIVE 100. ATLANTA, GA 30322 PUBLIC CHARITY UNRESTRICTED SHAMAYUM V'ARETZ NONE 914 SOUTH STREET 5,000. SACRAMENTO, CA 95811 FAITH ALLIANCE METRO ATLANTA NONE PUBLIC CHARITY UNRESTRICTED 1589 PEACHTREE ST NE 350. ATLANTA GA 30309 CAMP TWIN LAKES NONE PUBLIC CHARITY UNRESTRICTED 1100 SPRING ST NW #260 1,000, ATLANTA, GA 30309 PUBLIC CHARITY UNRESTRICTED JEWISH LEADERSHIP INSTITUTE NONE 111 ALISON HALL 5,000. NEWARK, DE 19716 PUBLIC CHARITY UNRESTRICTED RHIZE NONE 402 EASTERN PARKWAY #4H 1,000. BROOKLYN, NY 11225 Total from continuation sheets

Part XV Supplementary Information				
3 Grants and Contributions Paid During the Y	ear (Continuation)			
Recipient  Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (nome of business)	or substantial contributor	recipient		
SOJOURN 1530 DEKALB AVE SUITE A ATLANTA, GA 30307	NONE	PUBLIC CHARITY	UNRESTRICTED	365.
WABE/90.1 PBA 740 BISMARK RD NE ATLANTA, GA 30324	NONE	PUBLIC CHARITY	UNRESTRICTED	365.
JEWISH COUNCIL FOR PUBLIC AFFAIRS 116 E 27TH ST 10TH FL NEW YORK, NY 10016	NONE	PUBLIC CHARITY	UNRESTRICTED	500.
GEORGIA HILLEL 735 GATEWOOD ROAD NE ATLANTA, GA 30322	NONE	PUBLIC CHARITY	UNRESTRICTED	1,000.
JEWISH COMMUNITY RELATIONS COUNCIL 1440 SPRING STREET NW ATLANTA, GA 30309	NONE	PUBLIC CHARITY	UNRESTRICTED	100.
DEKALB MEDICAL FOUNDATION 2701 NORTH DECATUR ROAD DECATUR, GA 30033	NONE	PUBLIC CHARITY	UNRESTRICTED	1,000.
GRADY HEALTH FOUNDATION 191 PEACHTREE STREET NE SUITE 820 ATLANTA, GA 30303	NONE	PUBLIC CHARITY	UNRESTRICTED	2,005.
LEUKEMIA & LYMPHOMA SOCIETY 3715 NORTHSIDE PARKWAY ATLANTA, GA 30327	NONE	PUBLIC CHARITY	UNRESTRICTED	1,000.
SUSAN KOMEN 5005 LBJ FREEWAY SUITE 250 DALLAS, TX 75244	NONE	PUBLIC CHARITY	UNRESTRICTED	2,505.
PEF FOR AMI NESHIMA/RVACH NACHOW 317 MADISON AVE SUITE 607 NEW YORK, NY 10017	NONE	PUBLIC CHARITY	UNRESTRICTED	5,000.

Part XV Supplementary Information 3 Grants and Contributions Paid During the	·		<del></del>	
Recipient	If recipient is an individual,			
Name and address (home or business)	show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
<u> </u>	or substantial contributor	recipient		
MATZOH FOR MITZVAH	NONE	PUBLIC CHARITY	UNRESTRICTED	
4200 BISCAYNE BLVD				
MIAMI, FL 33137				518
AUXILLARY OF BREMAN HOME	NONE	PUBLIC CHARITY	UNRESTRICTED	
3150 HOWELL MILL RD NW				
ATLANTA, GA 30327				100
A CONTROL OF THE SAME				į
LEADERSHIP ATLANTA 10 PEACHTREE PL NE	NONE	PUBLIC CHARITY	UNRESTRICTED	
ATLANTA, GA 30309				100
AA SISTERHOOD	NONE	PUBLIC CHARITY	UNRESTRICTED	
600 PEACHTREE BATTLE AVENUE NW				110
ATLANTA, GA 30327				118
UNITED WAY	NONE	PUBLIC CHARITY	UNRESTRICTED	
100 EDGEWOOD AVENUE NE				
ATLANTA, GA 30303			-	301.
HADASSAH MISSION FUND	NONE	PUBLIC CHARITY	UNRESTRICTED	
40 WALL STREET				
NEW YORK, NY 10005				56,250,
UNITED STATES HOLOCAUST MEMORIAL	NONE	PUBLIC CHARITY	UNRESTRICTED	
MUSERUM 100 RAOUL WALLENBERG PL SW				
WASHINGTON, DC 20024				1,800
EMORY INSTITUTE FOR STUDY OF MODERN	NONE	PUBLIC CHARITY	UNRESTRICTED	
ISRAEL				
201 DOWMAN DRIVE ATLANTA, GA 30322				2,500
				2,500
AMERICAN CANCER SOCIETY	NONE	PUBLIC CHARITY	UNRESTRICTED	
250 WILLIAMS STREET NW				
ATLANTA, GA 30303				1,000
AMERICARES	NONE	PUBLIC CHARITY	UNRESTRICTED	
88 HAMILTON AVENUE				
STAMFORD, CT 06902	<u> </u>	<u> </u>	L	250
Total from continuation sheets				

3 Grants and Contributions Paid During the Y	7			
Recipient	If recipient is an individual, show any relationship to	Foundation	Purpose of grant or	
Name and address (home or business)	any foundation manager or substantial contributor	status of recipient	contribution	Amount
YISE - UGANDA DENTAL	NONE	PUBLIC CHARITY	UNRESTRICTED	
NURSERY 1132 ARCOLA AVE SILVER SPRING, MD 20902				1,00
ASSOCIATION OF AMERICANS & CANADIANS IN ISRAEL 21 EAST CHESTNUT SUITE 3 C	NONE	PUBLIC CHARITY	UNRESTRICTED	
CHICAGO, IL 60611				50
N'EMANU TORAH VA AVODAH KIBBUTZ BE'EROT	NONE	PUBLIC CHARITY	UNRESTRICTED	
YITZCHAK, ISRAEL 6090500				10,00
HADASSAD 47 PERMIMETER CENTER E #210 ATLANTA, GA 30346	NONE	PUBLIC CHARITY	UNRESTRICTED	1,36
FREE TO BREATHE 1 POINT PLACE SUITE 200 MADISON, WI 53719	NONE	PUBLIC CHARITY	UNRESTRICTED	4,02
AFLAC CANCER AND BLOOD DISORDERS CENTER 5455 MERIDIAN MARK RD SUITE 400	NONE	PUBLIC CHARITY	UNRESTRICTED	
ATLANTA, GA 30342				4,01
NATIONAL FOUNDATION FOR CANCER RESEARCH 4600 EAST WEST HWY SUITE 525	NONE	PUBLIC CHARITY	UNRESTRICTED	
BETHESDA, MD 20814				4,00
BE THE MATCH 3001 BROADWAY STREET NE SUITE 601	NONE	PUBLIC CHARITY	UNRESTRICTED	
MINNEAPOLIS, MN 55413				4,00
JEWISH COUNCIL FOR PUBLIC AFFAIRS 116 E 27TH ST 10TH FL NEW YORK, NY 10016	NONE	PUBLIC CHARITY	UNRESTRICTED	14,34
FRIENDS OF JCC KRAKOW 74 LAFAYETTE AVE. SUITE 101 SUFFERN. NY 10901	NONE	PUBLIC CHARITY	UNRESTRICTED	54

Part XV **Supplementary Information** Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient Purpose of grant or Foundation show any relationship to Amount contribution status of any foundation manager Name and address (home or business) recipient or substantial contributor SOLAR ELECTRIC LIGHT FUND NONE PUBLIC CHARITY UNRESTRICTED 1612 K STREET NE SUITE 300 WASHINGTON, DC 20006 5.000. GIFT OF LIFE NONE PUBLIC CHARITY UNRESTRICTED 800 YAMATO ROAD 1,000. BOCA RATON, FL 33431 PUBLIC CHARITY UNRESTRICTED AIRLINK NONE 915 FRONT ST 251, SAN FRANCISCO CA 94111 NORTH FULTON COMMUNITY CHARITIES NONE PUBLIC CHARITY UNRESTRICTED 11270 ELKINS ROAD 900. ROSWELL GA 30076 MOISHE HOUSE NONE PUBLIC CHARITY UNRESTRICTED 5007 PROVIDENCE ROAD SUITE E216 1,800. CHARLOTTE, NC 28226 GEORGIA TRANSPLANT FOUNDATION NONE PUBLIC CHARITY UNRESTRICTED 50 SUGAR MILL ROAD SUITE 170-A 1,500. ATLANTA GA 30350 PUBLIC CHARITY UNRESTRICTED CYSTIC FIBROSIS FOUNDATION NONE 4550 MONTGOMERY AVE SUITE 1100 N 250. BETHESDA, MD 20814 ANTI DEFAMATION LEAGUE NONE PUBLIC CHARITY UNRESTRICTED 3490 PIEDMONT RD NE #610 1,200. ATLANTA, GA 30305 NONE PUBLIC CHARITY UNRESTRICTED ARAVA INSTITUTE 1320 CENTRE ST SUITE 206 200. NEWTON CENTRE, MA 02459 BIRTHRIGHT ISRAEL NONE PUBLIC CHARITY UNRESTRICTED PO BOX 5892 5,000. HICKSVILLE, NY 11802 Total from continuation sheets

Part XV **Supplementary Information** Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient Foundation Purpose of grant or show any relationship to Amount contribution status of any foundation manager Name and address (home or business) recipient or substantial contributor MACABBI US NONE PUBLIC CHARITY UNRESTRICTED 1511 WALNUT STRET SUITE 401 500. PHILADELPHIA, PA 19102 KOTEL CHABAD NONE PUBLIC CHARITY UNRESTRICTED PO BOX 119 500. KFAR CHABAD, ISRAEL 72915 INNOCENCE PROJECT NONE PUBLIC CHARITY UNRESTRICTED 40 WORTH STREET SUITE 701 NEW YORK, NY 10013 500. PUBLIC CHARITY UNRESTRICTED HUMANE SOCIETY NONE 981 HOWELL MILL ROAD ATLANTA, GA 30318 3,000. Total from continuation sheets

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

Department of the Treasury Internal Revenue Service

**Schedule of Contributors** 

Attach to Form 990, Form 990-EZ, or Form 990-PF. Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at www.irs.gov/form990 .

OMB No 1545-0047

Name of the organization

**Employer identification number** 

TH	IE FRANK FAMILY FOUNDATION, INC	58-2082981
Filers of:	Section:	
Form 990 or 990-EZ	501(c)( ) (enter number) organization	
	4947(a)(1) nonexempt charitable trust not treated as a private foundation	
	527 political organization	
Form 990-PF	X 501(c)(3) exempt private foundation	
	anization type (check one):  **rs of: Section:  **n 990 or 990 EZ	
	501(c)(3) taxable private foundation	
-	•	e See instructions.
Special Rules		
sections 509(a)(1) any one contributo	and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or, during the year, total contributions of the greater of <b>(1)</b> \$5,000 or <b>(2)</b> 2% of the amoun	or 16b, and that received from
year, total contribu	tions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educa-	
year, contributions is checked, enter h purpose Don't cor	exclusively for religious, charitable, etc., purposes, but no such contributions totaled monere the total contributions that were received during the year for an exclusively religious, inplete any of the parts unless the <b>General Rule</b> applies to this organization because it re	re than \$1,000. If this box charitable, etc.,
out it <b>must</b> answer "No" on	at isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (For Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its For he filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).	·

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2016)

Name of organization •

Employer identification number

### THE FRANK FAMILY FOUNDATION, INC

58-2082981

Part I Cor	ntributors (See instructions	) Use duplicate copies of Part	I if additional space is needed.
------------	------------------------------	--------------------------------	----------------------------------

(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
1	AARON FRANK 920 CREST VALLEY DRIVE NW ATLANTA, GA 30327	ss	Person X Payroll X Noncash X (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$\$	Person Payroll Noncash (Complete Part II for noncash contributions)

Name of organization .

Employer identification number

### THE FRANK FAMILY FOUNDATION, INC

58-2082981

art II	Noncash Property (See instructions) Use duplicate copies of Pa		-2082981
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
1	750 SHARES OF AIG ON 12/28/16	 s49,740.	12/28/16
		\$\$ <u>49,740.</u>	12/28/16
(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

Name of org	anization .		Employer identification number
THE FR	RANK FAMILY FOUNDATION,	INC	58-2082981
Part III	Exclusively religious, charitable, etc., contri	butions to organizations described in	n section 501(c)(7), (8), or (10) that total more than \$1,000 for
	completing Part III, enter the total of exclusively religious.	, charitable, etc., contributions of \$1,000 or t	less for the year (Enter this info once)
(a) No.	Use duplicate copies of Part III if additiona	I space is needed	
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, an	d ZIP + 4	Relationship of transferor to transferee
(a) No.			
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
		(e) Transfer of gift	
	Transferor's name address on	al 710 . A	Deletionship of transferor to transferor
-	Transferee's name, address, an	<u> </u>	Relationship of transferor to transferee
		\	
(a) No. from	(h) Pourson of wife	(-) 11 4 -:44	(A) Description of hours sittle hold
_Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-			
-		(e) Transfer of gift	
L	Transferee's name, address, an	d ZIP + 4	Relationship of transferor to transferee
(a) No. from	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
Part I			(,,====================================
_			
}		(a) Transfer of eift	
		(e) Transfer of gift	
	Transferee's name, address, an	d ZIP + 4	Relationship of transferor to transferee
}			
ļ			•

FORM 990-PF INTERES	ST ON SAVI	NGS AND	TEMPOR.	ARY CAS	H IN	VESTMENTS	STATEMENT	1
SOURCE			(A) REVENUE ER BOOK	ENUE NET INVESTMENT		(C) ADJUSTED NET INCOME		
CHARLES SCHWAB			3,6	26.	_	3,626.		
TOTAL TO PART I, LII	NE 3		3,6	26.		3,626.		
FORM 990-PF	DIVIDEND	S AND IN	ITEREST	FROM S	ECUR	ITIES	STATEMENT	2
SOURCE	GROSS AMOUNT	CAPI GAI DIVII	NS	(A) REVEN PER BO	Œ	(B) NET INVES MENT INCO		
CHARLES SCHWAB	138,519	. 1	,635.	136,	884.	132,49	2.	
TO PART I, LINE 4	138,519	1	,635.	136,	884.	132,49	2.	
FORM 990-PF		ACCOU	NTING	FEES			STATEMENT	3
DESCRIPTION		(A) EXPENSE PER BOO		(B) T INVES NT INCO		(C) ADJUSTED NET INCOM		
	_	4,5	500.	4,5	00.			0.
TO FORM 990-PF, PG	1, LN 16B	4,5	500.	4,5	00.			0.
			-					
FORM 990-PF			TAXES				STATEMENT	4
FORM 990-PF DESCRIPTION		(A) EXPENSE PER BOO	es ne	(B) T INVES		(C) ADJUSTED NET INCOM	(D) CHARITA	ABLE
		EXPENSE PER BOO	ES NE	T INVES		ADJUSTED	(D) CHARITA	ABLE

FORM 990-PF	OTHER E	EXPENSES		STAT	EMENT	5		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST MENT INCOM		red C	(D) HARITAI PURPOSI			
BANK CHARGES LICENSE FEE NONDEDUCTIBLE EXPENSES	30.	30.		30.			0 0	
TO FORM 990-PF, PG 1, LN 23	DRM 990-PF, PG 1, LN 23 1,209. 231.				0.			
FORM 990-PF	CORPORAT	TE STOCK		STAT	EMENT	6		
DESCRIPTION		:	BOOK VALUE		R MARKE! ALUE	Г		
CHARLES SCHWAB 5,482,					7,434,973.			
TOTAL TO FORM 990-PF, PART	II, LINE 10B	<del></del>	5,482,948	3. 7	,434,9	73.		
FORM 990-PF I	NTEREST AND I	PENALTIES		STAT	EMENT	7		
TAX DUE FROM FORM 990-PF, UNDERPAYMENT PENALTY	PART VI				:	02. 39. 27.		
LATE PAYMENT INTEREST LATE PAYMENT PENALTY TOTAL AMOUNT DUE					1,40	39.		
LATE PAYMENT PENALTY	LATE PAYME	ENT PENALTY		STAT		39.		
LATE PAYMENT PENALTY  TOTAL AMOUNT DUE			BALANCE	STAT MONTHS	1,40	39.		
LATE PAYMENT PENALTY  TOTAL AMOUNT DUE  FORM 990-PF			BALANCE 1,302. 1,302.	<del></del>	1,40 PEMENT	39.		

FORM 990-PF	LA	TE PAYMENT II	NTERES	T		STAT	EMENT	
DESCRIPTION	DATE	AMOUNT	BALA	NCE	RATE	DAYS	INTER	ES1
TAX DUE DATE FILED	05/15/17 11/15/17	1,302.		1,302. 1,329.	.0400	184		27.
TOTAL LATE PAYMENT IN	TEREST					=		27.
FORM 990-PF PAR		ST OF OFFICE D FOUNDATION			8	STAT	EMENT	10
NAME AND ADDRESS		TITLE AN			1- BE	PLOYEE N PLAN ONTRIB	EXPEN	
LOIS FRANK 920 CREST VALLEY DRIV ATLANTA, GA 30327	E, NW	PRESIDENT 0.00			0.	0.		0
LARRY FRANK 920 CREST VALLEY DRIV ATLANTA, GA 30327	E, NW	CHAIRMAN (	OF BOA	RD	0.	0.		0
ISAAC FRANK 920 CREST VALLEY DRIV ATLANTA, GA 30327	E, NW	DIRECTOR 0.00			0.	0.		0
M. JOSHUA FRANK 920 CREST VALLEY DRIV ATLANTA, GA 30327	E, NW	TREASURER 0.00			0.	0.		0
ADAM FRANK 920 CREST VALLEY DRIV ATLANTA, GA 30327	E, NW	SECRETARY 0.00			0.	0.		0
AARON FRANK 920 CREST VALLEY DRIV ATLANTA, GA 30327	E, NW	DIRECTOR 0.00			0.	0.		0
TOTALS INCLUDED ON 99	O DE DACE	6 DADM VITT			<u> </u>	0.		0

FORM 990-PF

PART XV - LINE 1A LIST OF FOUNDATION MANAGERS

STATEMENT 11

NAME OF MANAGER

ADAM FRANK AARON FRANK

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