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Form 990-PF

Department of the Treasury

Internal Revenue Service

As Filed Data -

DLN: 93491205007167

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

or	caler	ndar year 2016, or tax year beginning 05-01-20	)16 , a	nd ending 04-30	-2017	
Name of foundation THE ISRAEL ROSE HENRY & ROBERT				A Employer id	dentification numbe	er
		CHARITABLE FOUNDATION		20-1125267		
		d street (or P O box number if mail is not delivered to street address)	Room/suite	<b>B</b> Telephone n	umber (see instructio	ns)
/	+01 2W	56TH COURT		(305) 662-686	8	•
		, state or province, country, and ZIP or foreign postal code	<u> </u>	, ,	application is pendin	a shock horo
MITAI	4Ι, FL	33143		C if exemption	гаррисацон із ренані	ig, check here ►
G Cł	neck al	l that apply $\Box$ Initial return $\Box$ Initial return of a	former public charity	<b>D 1.</b> Foreign o	rganizations, check h	ere 🕨 🔲
		Final return Amended return			organizations meeting ck here and attach co	
		Address change Name change			oundation status was t	· -
_		pe of organization $\checkmark$ Section 501(c)(3) exempt private			on 507(b)(1)(A), chec	
		n 4947(a)(1) nonexempt charitable trust U Other taxable				
		from Part II col (c)	✓ Cash ☐ Accru		lation is in a 60-mont on 507(b)(1)(B), chec	
		\$ 4,790,148	he on cash hasis )			
			1	1	T	
Pa	rt I	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily	(a) Revenue and	(b) Net investment	(c) Adjusted net	(d) Disbursements for charitable
		equal the amounts in column (a) (see instructions)	expenses per books	income	income	purposes (cash basis only)
	1	Contributions, gifts, grants, etc , received (attach				,,
		schedule)				
	2	Check ► ✓ If the foundation is <b>not</b> required to attach				
	3	Sch B				
	4	Dividends and interest from securities	88,075	88,07	5	
	5a	Gross rents	,	<u>'</u>		
	ь	Net rental income or (loss)				
ne	6a	Net gain or (loss) from sale of assets not on line 10	54,977	,		
Revenue	ь	Gross sales price for all assets on line 6a 486,449				
Re	7	Capital gain net income (from Part IV, line 2)		54,97	7	
	8	Net short-term capital gain				
	9	Income modifications				
	10a	Gross sales less returns and allowances				
	b	Less Cost of goods sold				
	С	Gross profit or (loss) (attach schedule)				
	11	Other income (attach schedule)	1,813			
	12	Total. Add lines 1 through 11	144,865			
	13	Compensation of officers, directors, trustees, etc	30,000	30,000		
	14	Other employee salaries and wages	2 205	2 201	-	
ses	15 16a	Pension plans, employee benefits	2,295	2,295	7	
Ē			3,461	3,46	1	
Operating and Administrative Expenses	b c	Accounting fees (attach schedule) Other professional fees (attach schedule)	3,461	3,46.	1	
e N		,				
ī E	17 18	Interest	<b>9</b> 61	. 6:	1	
<u>:</u>	19	Taxes (attach schedule) (see instructions)  Depreciation (attach schedule) and depletion	301			
Ξ	20	Occupancy	301			
Ad	21	Travel, conferences, and meetings				
ב ב	22	Printing and publications				
ਨ <u>ਹ</u> ੋ:	23	Other expenses (attach schedule)	53,501	53,50:	1	
a <b>t</b>	24	Total operating and administrative expenses.				
<u> </u>		Add lines 13 through 23	89,619	89,318	3	
<u> </u>	25	Contributions, gifts, grants paid	238,200			238,200
	26	Total expenses and disbursements. Add lines 24 and				
		25	327,819	89,318	3	238,200
	27	Subtract line 26 from line 12				
	a	Excess of revenue over expenses and disbursements	-182,954			
	ь	Net investment income (If negative, enter -0-)		53,734	1	
	С	Adjusted net income(If negative, enter -0-)				
	D	work Deduction Act Notice and instructions		C-1 N 44333	· -	000 BE (221

4,605,292

**\*** 

753

9,948

4,662,273

4,662,273

4,662,273

4,662,273

4,440,936

4,479,052

4,479,052

4,479,052

4,479,052

2

3

4

5

6

4,662,273

-182,954

4,479,319

4,479,052

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267

452

1,000

4,752,485

1,000

4,790,148

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

Mortgages and other notes payable (attach schedule). . . . . .

Total liabilities(add lines 17 through 22) . . . . . . . . .

Less accumulated depreciation (attach schedule) ▶ 1,432

Total assets (to be completed by all filers—see the

Foundations that follow SFAS 117, check here ▶

and complete lines 24 through 26 and lines 30 and 31.

Foundations that do not follow SFAS 117, check here

Paid-in or capital surplus, or land, bldg , and equipment fund

Capital stock, trust principal, or current funds . . . . . . . . . .

Retained earnings, accumulated income, endowment, or other funds

Total net assets or fund balances (see instructions) . . . . .

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

Total net assets or fund balances at 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** 

Land, buildings, and equipment basis

instructions Also, see page 1, item I)

Other assets (describe > \_

Other liabilities (describe ▶\_

Unrestricted . . . . .

and complete lines 27 through 31.

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

Decreases not included in line 2 (itemize) ▶

Other increases not included in line 2 (itemize) -

Permanently restricted . .

Temporarily restricted

12

13

14

18

19 20

21

22

23

24

25

28

29

30

31 Part III

Balances

Fund 26

ō

Assets 27

Net

2

3

4

		(a) nd(s) of property sold (e g , real est e, or common stock, 200 shs MLC (	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr )	(d Date : (mo , da
_	1aSee Additional Data Table				
	b				
С					
	d				
	e				
	<b>(e)</b> Gross sales price	<b>(f)</b> Depreciation allowed (or allowable)	 (g) other basis ense of sale	Gain c	<b>h)</b> r (loss) ) mınus (g)
	a See Additional Data Table				

price	(or allowable)	plus expense of sale	
ata Table			

e	
Complete only for assets show	ing gain in column (h) and o
(i) F M V as of 12/31/69	<b>(j)</b> Adjusted basis as of 12/31/69
a See Additional Data Table	

b C d

b c d е

2

Part V

(a)

Base period years Calendar

year (or tax year beginning in)

2015

2014

2013

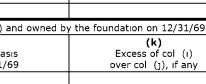
2012

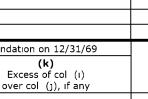
2011

2 Total of line 1, column (d)

**5** Multiply line 4 by line 3

instructions





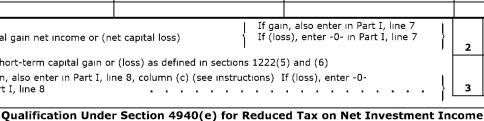


2

3

(I)  ol (h) gain minus  not less than -0-)  s (from col (h))	or

Capital gain net income or (net capital loss)
Net short-term capital gain or (loss) as defin
If gain, also enter in Part I, line 8, column (c
ın Part I, line 8



Net value of noncharitable-use assets

4,911,697

5,246,905

5,306,224

5,273,245

5,343,205

2

3

4

5

6 7

8

54,977

Page 3

(d) Date sold (mo, day, yr)



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

259,200

257,900

261,750

264,940

457,903

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

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

(k)

(d) Distribution ratio

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

Yes 🗸 No

0 052772

0 049153

0 049329

0 050242

0 085698

0 287194

0 057439

4,677,061

268,646

269,183

238,200

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537

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

Adjusted qualifying distributions

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

_			Troim 4720 Hay be	• •	' /		
5a	During the year did the foundation	pay or incur any amount to					
	(1) Carry on propaganda, or otherw	vise attempt to influence legis	lation (section 4945(e))?	☐ Yes [	✓ No		
	(2) Influence the outcome of any s	pecific public election (see sec	tion 4955), or to carry	□ res i	<u> </u>		
	on, directly or indirectly, any vo	ter registration drive?		· · 🗌 Yes [	✓ No		
	(3) Provide a grant to an individual	for travel, study, or other sim	ıılar purposes?	Yes [			
	(4) Provide a grant to an organizat	on other than a charitable, et	c , organization described		Y NO		
	in section 4945(d)(4)(A)? (see	instructions)		· · □ Yes [	✓ No		
	(5) Provide for any purpose other t	han religious, charitable, scier	ntific, literary, or	⊔ Yes I	▼ No		
	educational purposes, or for the						
b	If any answer is "Yes" to $5a(1)-(5)$ ,			ceptions described in	<b>⊻</b> No		
	Regulations section 53 4945 or in a	•		•		5b	
	Organizations relying on a current r	= =	· · · · · · · · · · · · · · · · · · ·	· ·			
c	If the answer is "Yes" to question 5				Ш		
_	tax because it maintained expenditi		•				
	If "Yes," attach the statement requi	•		· ·	∐ No		
<b>6</b> a	Did the foundation, during the year	· -		ıma on			
0a	a personal benefit contract?	•			_		
<b>b</b>	Did the foundation, during the year			' Yes │	<b>✓</b> No	6b	No
D	, - ,	, pay premiums, directly or inc	directly, on a personal be	nent contract?		90	NO
_	If "Yes" to 6b, file Form 8870	a tha Carra data a sa a sa ta ta a s					
7a	At any time during the tax year, wa	• •		∟ Yes l	<b>✓</b> No	١ ـ. ا	
ь	If yes, did the foundation receive ar	· · · · · · · · · · · · · · · · · · ·				7b	
Pa	and Contractors	Officers, Directors, Trus	tees, Foundation Ma	nagers, Hignly Paid	Empi	oyees,	
1	List all officers, directors, truste	es, foundation managers a	nd their compensation	(see instructions).			
	(a) Name and address	Title, and average hours per week  (b) devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employ benefit plans and deferr compensation			se account, allowances
JOAN	ROZANSKY	DPS		compensation			0
			1 30 000		Λl		
7401	SW 56 COURT	000 00	30,000		0		
	SW 56 COURT I, FL 33143		30,000		0		
MIAM		000 00 DT	30,000		0		0
GLEN 7401	I, FL 33143 N ROZANSKY SW 56 CT	000 00					0
GLEN 7401 MIAM	I, FL 33143 N ROZANSKY SW 56 CT I, FL 33143	DT 000 00	0		0		
GLEN 7401 MIAM LYNN	I, FL 33143 N ROZANSKY SW 56 CT I, FL 33143 WIENER	000 00 DT					0
GLEN 7401 MIAM LYNN 7401	I, FL 33143 N ROZANSKY SW 56 CT I, FL 33143	DT 000 00	0		0		
MIAM GLEN 7401 MIAM LYNN 7401 MIAM	I, FL 33143 N ROZANSKY SW 56 CT I, FL 33143 WIENER SW 56 CT	DT 000 00 DV 000 00	0	—see instructions). If	0	enter "I	0
GLEN 7401 MIAM LYNN 7401 MIAM 2	I, FL 33143 N ROZANSKY SW 56 CT I, FL 33143 WIENER SW 56 CT I, FL 33143	DT 000 00 DV 000 00 id employees (other than t	hose included on line 1	Contributions to employee benefit plans and deferred	0 0 none, 4	Expens	0
MIAM GLEN 7401 MIAM LYNN 7401 MIAM 2 Na	I, FL 33143 N ROZANSKY SW 56 CT I, FL 33143 WIENER SW 56 CT I, FL 33143  Compensation of five highest-pa (a) ame and address of each employee pa more than \$50,000	DT DV 000 00  id employees (other than to a surface to the surface	hose included on line 1	Contributions to employee benefit	0 0 none, 4	Expens	O  NONE."  se account,
GLEN 7401 MIAM LYNN 7401 MIAM 2	I, FL 33143 N ROZANSKY SW 56 CT I, FL 33143 WIENER SW 56 CT I, FL 33143  Compensation of five highest-pa (a) ame and address of each employee pa more than \$50,000	DT DV 000 00  id employees (other than to a surface to the surface	hose included on line 1	Contributions to employee benefit plans and deferred	0 0 none, 4	Expens	O  NONE."  se account,
MIAM GLEN 7401 MIAM LYNN 7401 MIAM 2 Na	I, FL 33143 N ROZANSKY SW 56 CT I, FL 33143 WIENER SW 56 CT I, FL 33143  Compensation of five highest-pa (a) ame and address of each employee pa more than \$50,000	DT DV 000 00  id employees (other than to a surface to the surface	hose included on line 1	Contributions to employee benefit plans and deferred	0 0 none, 4	Expens	O  NONE."  se account,
MIAM GLEN 7401 MIAM LYNN 7401 MIAM 2 Na	I, FL 33143 N ROZANSKY SW 56 CT I, FL 33143 WIENER SW 56 CT I, FL 33143  Compensation of five highest-pa (a) ame and address of each employee pa more than \$50,000	DT DV 000 00  id employees (other than to a surface to the surface	hose included on line 1	Contributions to employee benefit plans and deferred	0 0 none, 4	Expens	O  NONE."  se account,
MIAM GLEN 7401 MIAM LYNN 7401 MIAM 2 Na	I, FL 33143 N ROZANSKY SW 56 CT I, FL 33143 WIENER SW 56 CT I, FL 33143  Compensation of five highest-pa (a) ame and address of each employee pa more than \$50,000	DT DV 000 00  id employees (other than to a surface to the surface	hose included on line 1	Contributions to employee benefit plans and deferred	0 0 none, 4	Expens	O  NONE."  se account,
MIAM GLEN 7401 MIAM LYNN 7401 MIAM 2 Na	I, FL 33143 N ROZANSKY SW 56 CT I, FL 33143 WIENER SW 56 CT I, FL 33143  Compensation of five highest-pa (a) ame and address of each employee pa more than \$50,000	DT DV 000 00  id employees (other than to a surface to the surface	hose included on line 1	Contributions to employee benefit plans and deferred	0 0 none, 4	Expens	O  NONE."  se account,
MIAM GLEN 7401 MIAM LYNN 7401 MIAM 2 Na	I, FL 33143 N ROZANSKY SW 56 CT I, FL 33143 WIENER SW 56 CT I, FL 33143  Compensation of five highest-pa (a) ame and address of each employee pa more than \$50,000	DT DV 000 00  id employees (other than to a surface to the surface	hose included on line 1	Contributions to employee benefit plans and deferred	0 0 none, 4	Expens	O  NONE."  se account,
MIAM GLEN 7401 MIAM LYNN 7401 MIAM 2 Na	I, FL 33143 N ROZANSKY SW 56 CT I, FL 33143 WIENER SW 56 CT I, FL 33143  Compensation of five highest-pa (a) ame and address of each employee pa more than \$50,000	DT DV 000 00  id employees (other than to a surface to the surface	hose included on line 1	Contributions to employee benefit plans and deferred	0 0 none, 4	Expens	O  NONE."  se account,
MIAM GLEN 7401 MIAM LYNN 7401 MIAM 2 Na	I, FL 33143 N ROZANSKY SW 56 CT I, FL 33143 WIENER SW 56 CT I, FL 33143  Compensation of five highest-pa (a) ame and address of each employee pa more than \$50,000	DT DV 000 00  id employees (other than to a surface to the surface	hose included on line 1	Contributions to employee benefit plans and deferred	0 0 none, 4	Expens	O  NONE."  se account,

Page **6** 

Form 990-PF (2016)  Information About Officers, Directors, Trustees,	Foundation Managers Highly	Page 7
and Contractors (continued)	roundation managers, riging	Palu Employees,
3 Five highest-paid independent contractors for professional service	es (see instructions). If none, en	ter "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		<b>&gt;</b>
Part IX-A Summary of Direct Charitable Activities		1
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	evant statistical information such as the nunced, etc	nber of Expenses
1		
2		
2		<del></del>
3		
		<del></del>
4		
Part IX-B Summary of Program-Related Investments (see	nstructions)	
Describe the two largest program-related investments made by the foundation during the	ne tax year on lines 1 and 2	Amount
<b>1</b> N/A		
2		
All other program-related investments See instructions		
all other program-related investments. See instructions		
-		
Total. Add lines 1 through 3		. ▶
		Form <b>990-PF</b> (2016)

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

238,200

238,200

238,200

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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

**b** Total for prior years

a From 2011. . . . **b** From 2012. . . . . c From 2013. . . **d** From 2014. . . . . e From 2015. . . . .

XII, line 4 > \$

indicated below:

Part 3

Page 9

232,778

326

232,452

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	010)	
(III	Undistributed	Incor

1 Distributable amount for 2016 from Part XI, line 7 2 Undistributed income, if any, as of the end of 2016

a Enter amount for 2015 only. . . . . .

Excess distributions carryover, if any, to 2016

f Total of lines 3a through e. . . . . . . 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 **5** Excess distributions carryover applied to 2016 (If an amount appears in column (d), the

6 Enter the net total of each column as

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 applied on line 5 or line 7 (see instructions) . . .

9 Excess distributions carryover to 2017.

10 Analysis of line 9

a Excess from 2012. . . **b** Excess from 2013. . c Excess from 2014. . . . d Excess from 2015. . e Excess from 2016. . .

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

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

same amount must be shown in column (a) )

PF (20	016)	
111	Undistributed Income (see instruc	tions)
		(a)

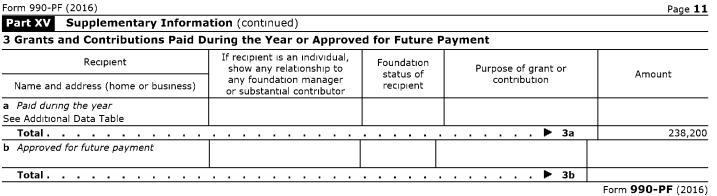
ctions)	
(a)	(b)
Corpus	Years prior to 2015

(c)

2015

237,874

237,874



Part XV	I-A Analysis of Income-Producing	Activities				Page 12
			usiness income	Evaluded by section	o 512 512 or 514	(e)
Enter gros	s amounts unless otherwise indicated	(a)	(b)	Excluded by sectio	(d)	Related or exempt function income
_	n service revenue	Business code	Amount	Exclusion code	Amount	(See instructions )
2 Membe	and contracts from government agencies ership dues and assessments est on savings and temporary cash					
inves	tments					
5 Net re	nds and interest from securities			14	88,075	
	-financed property debt-financed property					
6 Net re	ental income or (loss) from personal property					
	investment income					
8 Gain	or (loss) from sales of assets other than					
	tory			14	25,415	29,56
	come or (loss) from special events profit or (loss) from sales of inventory					
L1 Other						
a <sub>SETTI</sub>	LEMENT INCOME					1,81
b						
	al Add columns (b), (d), and (e).				113,490	31,37
.3 Total.	Add line 12, columns (b), (d), and (e)			1	3	144,865
	sheet in line 13 instructions to verify calculation					
Part XV	I-B Relationship of Activities to th					
Line No. ▼	Explain below how each activity for which the accomplishment of the foundation's ex instructions )					
	+					
	<u> </u>					
	1					

Part	XVII	Information Re Exempt Organia		ransi	fers To	and Transac	tio	ns and Relation	onships With No	oncharita	ole		
		janization directly or in Code (other than sectio	directly enga							tion 501		Yes	No
<b>a</b> Tran	Transfers from the reporting foundation to a noncharitable exempt organization of												
(1) Cash								. 1	a(1)		No		
(2)	Other	assets								1	a(2)		No
<b>b</b> Othe	er trans	sactions											
(1)	Sales	of assets to a nonchar	itable exemp	t orga	nızatıon.					1	b(1)		No
(2)	Purch	ases of assets from a n	oncharitable	exem	pt organi	zation				<u>1</u>	b(2)		No
(3)	Renta	l of facilities, equipmer	nt, or other a	ssets.						_	b(3)		No
(4)	Reimb	oursement arrangemen	ts							. 1	b(4)		No
		or loan guarantees.									b(5)		No
٠,		mance of services or m	•		_						b(6)		No
	-	facilities, equipment, n								_	1c		No
of th	ne good ny tran	ver to any of the above ds, other assets, or ser- saction or sharing arra (b) Amount involved	vices given b ngement, sh	y the ow in	reporting column (	foundation If t	he f	oundation receiv goods, other ass	ed less than fair ma	arket value eived		ngemen	ts
							+						
							╁						
							+						
							1						
							╄						
							+						
							+						
							+						
							1						
							╄						
desc	cribed i	dation directly or indire in section 501(c) of the implete the following so (a) Name of organization	Code (other chedule		section 50	•	ect	on 527?		on of relations		<b>☑</b> N	0
											—		
Sign	of m whic	er penalties of perjury, y knowledge and belief h preparer has any kno	, it is true, co			plete Declaratı I		_ ,	_	based on all	ınfor	mation	n of
Here	_	:****				2017-07-20				May the IRS with the pre			
	<b>7</b> s	Signature of officer or to	rustee			Date		Title		(see ınstr )?	<u>□</u>	es 🗆 N	lo
		Print/Type preparer's		Preparer's Sign		nature	Date		Check if self- employed ▶ □	PTIN PO	0125	5975	
Paid Prepa Use (			OL L SOKOLO	DW CP	'A PA			2017-07-20		Fırm's EIN	<b>▶</b> 59·	-35420	003
USE (	JIIIY	Firm's address ▶ 95	00 S DADEL	AND B	SLVD STE	700							
MIAMI, FL 331562849						Phone no	(305)	357-3	3700				

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) How acquired (a) 2-story brick warehouse, or common stock, 200 shs MLC Co ) Date acquired Date sold P-Purchase (mo, day, yr) (mo, day, yr) D-Donation DIAMOND HILL LONG SHORT Р 2009-12-04 2017-04-04 Р PEPSICO INCORPORATE 2010-07-27 2016-11-01 PARAMETRIC TAX MGD Р 2013-03-04 2016-07-08 RIO TINTO FN U Ρ 2015-02-26 2016-09-28 **GATEWAY FUND** Р 2011-03-09 2017-04-04 Р 2017-03-21 ROYAL BANK OF CA 2013-08-21 ISHARES CORE S&P Р 2006-03-24 2017-04-04 VAR GOVERNMENT BOND PUR ABOVE PAR Р SCHWAB FUNDAMENTAL US LARGE Ρ 2015-02-10 2016-07-08 **BOSTON PARTNERS** Р 2014-03-24 2017-04-04 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) (f) (or allowable) (g) plus expense of sale (h) (e) plus (f) minus (g) 50,000 31,107 18,893 26,506 25,616 890 14,685 17,721 -3,036 26,266 25,136 1,130 50,000 42,119 7,881 29,985 29,906 79 40,162 22,292 17,870 19.005 -19,005 20,000 20,211 -211 50,000 45,883 4,117 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)) (k) over col (j), if any (j) as of 12/31/69 18,893 890 -3,036 1,130 7,881 79 17,870 -19,005 -211 4,117

Gains and Losses for Tax on	Investment I	ncome - Colum	ns a - d		
List and describe the kind(s) of property sold (e g , real estate, (a) 2-story brick warehouse, or common stock, 200 shs MLC Co )				(d) Date sold (mo , day, yr )	
		Р	2014-11-06	2017-04-04	
		Р	2015-08-11	2016-05-31	
		Р	2013-01-24	2016-09-09	
		Р	2016-04-07	2016-10-28	
		Р	2013-05-09	2016-12-16	
		Р	2013-05-09	2016-12-27	
		Р	2013-05-09	2016-09-30	
		Р	2012-02-16	2016-07-05	
		Р	2015-06-18	2017-04-01	
		Р	2011-06-03	2017-01-23	
Gains and Losses for Tax on	Investment I	ncome - Colum	ns e - h	1	
Depreciation allowed <b>(f)</b> (or allowable)			Gain <b>(h)</b> (e) plus	or (loss) (f) minus (g)	
		25,754		-754	
		2,039	129		
		4,315	-174		
		24,998	2		
		5,003	-3		
		5,003	-3		
		10,006			
		25,000			
		25,000			
		25,358	1,763		
Gains and Losses for Tax on	Investment I	ncome - Colum	ns i - I		
ring gain in column (h) and owned b	y the foundation	on 12/31/69		(h) gain minus	
Adjusted basis <b>(j)</b> as of 12/31/69				rom col (h))	
				-754	
				129	
				-174	
				2	
				-3	
				-3	
				-6	
				1,763	
	Gains and Losses for Tax on  Depreciation allowed  (f) (or allowable)  Gains and Losses for Tax on  Adjusted basis	Gains and Losses for Tax on Investment I  (g) plus ex  Gains and Losses for Tax on Investment I  Depreciation allowed (f) (or allowable)  Gains and Losses for Tax on Investment I  Representation allowed (g) plus ex  Gains and Losses for Tax on Investment I  Representation allowed (g) plus ex  Gains and Losses for Tax on Investment I  Representation allowed Representation allowed (g) plus ex  Gains and Losses for Tax on Investment I  Representation allowed (g) plus ex  Gains and Losses for Tax on Investment I  Representation allowed (g) plus ex  Gains and Losses for Tax on Investment I  Representation allowed (g) plus ex  Gains and Losses for Tax on Investment I  Representation allowed (g) plus ex  Gains and Losses for Tax on Investment I  Representation allowed (g) plus ex  Gains and Losses for Tax on Investment I  Representation allowed (g) plus ex  Gains and Losses for Tax on Investment I  Representation allowed (g) plus ex  Gains and Losses for Tax on Investment I  Representation allowed (g) plus ex  Gains and Losses for Tax on Investment I  Representation allowed (g) plus ex  Gains and Losses for Tax on Investment I  Representation allowed (g) plus ex  Gains and Losses for Tax on Investment I  Representation allowed (g) plus ex  Gains and Losses for Tax on Investment I  Representation allowed (g) plus ex  Gains and Losses for Tax on Investment I  Representation allowed (g) plus ex  Gains and Losses for Tax on Investment I  Representation allowed (g) plus ex  Gains and Losses for Tax on Investment I  Representation allowed (g) plus ex  Gains and Losses for Tax on Investment I  Representation allowed (g) plus ex  Gains and Losses for Tax on Investment I  Representation allowed (g) plus ex  Gains and Losses for Tax on Investment I  Representation allowed (g) plus ex  Gains and Losses for Tax on Investment I  Representation allowed (g) plus ex  Gains and Losses for Tax on Investment I  Representation allowed (g) plus ex  Gains and Losses for Tax on Investment I  Representation allowed (g) plus ex  Gains and Los	kind(s) of property sold (e g , real estate, use, or common stock, 200 shs MLC Co )  How acquired P—Purchase D—Donation  P  P  P  P  P  P  P  P  P  P  P  P  P	How acquired P—Purchase D—Donation   P   2014-11-06     P   2015-08-11     P   2013-01-24     P   2013-05-09     P   2015-06-18     P   2011-06-03     Gains and Losses for Tax on Investment Income - Columns e - h     Cost or other basis (g) plus expense of sale (h) (e) plus     (f) (or allowable) (g) plus expense of sale (h) (e) plus     25,754     2,039     4,315     24,998     5,003     5,003     5,003     5,003     5,003     5,003     5,003     5,003     5,003     5,003     5,000     25,000     25,358     Gains and Losses for Tax on Investment Income - Columns i - I     Ing gain in column (h) and owned by the foundation on 12/31/69     Gains (Col (k), but no losses (for Col (k), but no losses (for Col (k), but no losses (for Col (k))     Col (k), but no losses (for Col (k))	

### 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 ALPERT JEWISH & CHILDREN FAMILY NONE 501(C)(3) DONATION 52,000 SER 5841 CORPORATE WAY WEST PALM BEACH, FL 33407

ARSHT CENTER FOR THE PERFORMING ART 1300 BISCAYNE BLVD MIAMI, FL 33132	NONE	501(C)(3)	DONATION	
BAPTIST HEALTH SOUTH FOUND 8900 N KENDALL DR MIAMI, FL 33176	NONE	501(C)(3)	DONATION	

17,000

5,000

APTIST HEALTH SOUTH FOUND 900 N KENDALL DR IAMI, FL 33176	NONE	501(C)(3)	DONATION	
EARTOOTH HOSPITAL AND HEALTH ENTE PO BOX 1290	NONE	501(C)(3)	DONATION	

BEARTOOTH HOSPITAL AND HEALTH CENTE PO BOX 1290 RED LODGE, MT 59068	NONE	501(C)(3)	DONATION	1,000
CENTER FOR ADVANCEMENT OF JEWISH	NONE	501(C)(3)	DONATION	1,000

PO BOX 1290 RED LODGE, MT 59068				
CENTER FOR ADVANCEMENT OF JEWISH ED 4200 BISCAYNE BLVD MIAMI, FL 33137	NONE	501(C)(3)	DONATION	1,00

l	RED 20002,111 33000				
I	CENTER FOR ADVANCEMENT OF JEWISH ED 4200 BISCAYNE BLVD MIAMI, FL 33137	NONE	501(C)(3)	DONATION	
Į	,				

### 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 COMMUNITIES IN SCHOOLS OF MIAMI E01 (C) (2) NONE DONATION 1,000

11965 SW 142ND TERRACE MIAMI, FL 33186	NONE	501 (C) (3)	DONATION	1,1
CONGREGATION BETH AARON PO BOX 187	NONE	501(C)(3)	DONATION	1,0

CONGREGATION BETH AARON PO BOX 187 BILLINGS, MT 59013	NONE	501(C)(3)	DONATION	1,000
CONGREGATION ETZ CHAIM 1881 NE 26TH ST WILTON MANORS, FL 33305	NONE	501(C)(3)	DONATION	3,600

BILLINGS, MT 59013				
CONGREGATION ETZ CHAIM 1881 NE 26TH ST WILTON MANORS, FL 33305	NONE	501(C)(3)	DONATION	3,600
FRIENDS OF THE MARCH OF THE LIVING	NONE	501(C)(3)	DONATION	1,000

1881 NE 26TH ST WILTON MANORS, FL 33305	NONE	301(0)(3)	DONATION	3,000
FRIENDS OF THE MARCH OF THE LIVING 7500 SW 120 ST PINECREST, FL 33156	NONE	501(C)(3)	DONATION	1,000

WIETON MANORS, TE 35505				
FRIENDS OF THE MARCH OF THE LIVING 7500 SW 120 ST PINECREST, FL 33156	NONE	501(C)(3)	DONATION	1,000
GREATER MIAMI JEWISH FEDERATION	NONE	501 (C) (3)	DONATION	16,850

FRIENDS OF THE MARCH OF THE LIVING 7500 SW 120 ST PINECREST, FL 33156	NONE	501(C)(3)	DONATION	1,000
GREATER MIAMI JEWISH FEDERATION 4200 BISCAYNE BLVD	NONE	501 (C) (3)	DONATION	16,850

PINECREST, FL 33156				
GREATER MIAMI JEWISH FEDERATION 4200 BISCAYNE BLVD MIAMI, FL 33137	NONE	501 (C) (3)	DONATION	16,850

GREATER MIAMI JEWISH FEDERATION 4200 BISCAYNE BLVD MIAMI, FL 33137	NONE	501 (C) (3)	DONATION	16,850
Total				238,200

# 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 HEALTH INFORMATION PROJECT NONE 501(C)(3) DONATION 3,600

4601 PONCE DE LEON BLVD CORAL GABLES, FL 33146				
HILLEL INTERNATIONAL 800 EIGTH ST NW WASHINGTON, DC 20001	NONE	501(C)(3)	DONATION	7,200
HILLEL OF BROWARD AND PALM BCH	NONE	501(C)(3)	DONATION	25,000

NW WASHINGTON, DC 20001	NONE	501(C)(3)	DONATION	7,200
HILLEL OF BROWARD AND PALM BCH 777 GLADES RD BOCA RATON, FL 33431	NONE	501(C)(3)	DONATION	25,000
JEWISH COMMUNITY SERVICES 735 NE 125 STREET BORTH MIAMI, FL 33161	NONE	501(C)(3)	DONATION	3,600

777 GLADES RD BOCA RATON, FL 33431				
JEWISH COMMUNITY SERVICES 735 NE 125 STREET BORTH MIAMI, FL 33161	NONE	501(C)(3)	DONATION	3,600
JEWISH FEDERATION OF PALM BCH COUNT 4601 COMMUNITY DR	NONE	501(C)(3)	DONATION	42,000

JEWISH FEDERATION OF PALM BCH NONE 501(C)(3) DONATION 42	JEWISH COMMUNITY SERVICES 735 NE 125 STREET BORTH MIAMI, FL 33161	NONE	501(C)(3)	DONATION	3,600
4601 COMMUNITY DR WEST PALM BEACH, FL 33417	COUNT 4601 COMMUNITY DR	NONE	501(C)(3)	DONATION	42,000

238,200

Total . .

#### 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)

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

	or substantial contributor			
a Paid during the year				
MARGAUX'S MIRACLE FOUNDATION 2601 NW 29TH DRIVE BOCA RATON, FL 33434	NONE	501(C)(3)	DONATION	1,000

2601 NW 29TH DRIVE 3OCA RATON, FL 33434				
EWISH NATIONAL FUND 902 CLINT MOORE RD 128	NONE	501(C) (3)	DONATION	1,800

902 CLINT MOORE RD 128 BOCA RATON, FL 33487	inone			1,000
MIAMI CITY BALLET 2200 LIBERTY AVE MIAMI BEACH, FL 33139	NONE	501(C)(3)	DONATION	1,500
MONTANA SHAVESDEADE IN THE DADKS	NONE	501(C)(3)	DONATION	1 000

BOCA RATON, FL 33487				
MIAMI CITY BALLET 2200 LIBERTY AVE MIAMI BEACH, FL 33139	NONE	501(C)(3)	DONATION	1,500
MONTANA SHAKESPEARE IN THE PARKS PO BOX 174120 BOZEMAN MT 59717	NONE	501(C)(3)	DONATION	1,000

MIAMI BEACH, FL 33139				
MONTANA SHAKESPEARE IN THE PARKS PO BOX 174120 BOZEMAN, MT 59717	NONE	501(C)(3)	DONATION	1,000
NESHAMA CULTURAL ARTS SOCIETY 11155 SW 112TH AVE	NONE	501(C)(3)	DONATION	1,000

BOZEMAN, MT 59717				
NESHAMA CULTURAL ARTS SOCIETY 11155 SW 112TH AVE MIAMI, FL 33176	NONE	501(C)(3)	DONATION	1,000
Total	238,200			

#### 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

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

a Paid during the year				
NEW WORLD SYMPHONY 500 17TH ST MIAMI BEACH, FL 33139	NONE	501(C)(3)	DONATION	1,500
PAMM ATTN LEANN STANDISH	NONE	501(X)(3)	DONATION	3,600

PAMM ATTN LEANN STANDISH 1103 BISCAYNE BLVD MIAMI, FL 33132	NONE	501(X)(3)	DONATION	3,6
PATRICIA & PHILLIP FROST ART MUSEU 10975 SW 17TH STREET MIAMI, FL 33199	NONE	501(C)(3)	DONATION	1,5

PATRICIA & PHILLIP FROST ART MUSEU 10975 SW 17TH STREET MIAMI, FL 33199	NONE	501(C)(3)	DONATION	1,500
RANSOM EVERGLADES 3575 MAIN HIGHWAY MIAMI, FL 33133	NONE	501(C)(3)	DONATION	1,000

RANSOM EVERGLADES 3575 MAIN HIGHWAY MIAMI, FL 33133	NONE	501(C)(3)	DONATION	1,000
TEMPLE BETH AM	NONE	501(C)(3)	DONATION	1,300

MIAMI, FL 33133				
TEMPLE BETH AM 5950 NORTH KENDALL DRIVE PINECREST, FL 33156	NONE	501(C)(3)	DONATION	1,30

238,200

Total			_	
TEMPLE BETH AM 5950 NORTH KENDALL DRIVE PINECREST, FL 33156	NONE	501(C)(3)	DONATION	
TEMPLE DETLIAM	NONE	E01(C)(2)	LOCALATION	

#### 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

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

a Paid during the year				
TEMPLE JUDEA 5500 GRANADA BLVD CORAL GABLES, FL 33146	NONE	501(C)(3)	DONATION	6,800
UNITED WAY OF MIAMI DADE 3250 SW 3RD AVE MIAMI, FL 33129	NONE	501(C)(3)	DONATION	1,000

MIAMI, FL 33129				
UNIV OF MIAMI FROST SCL OF MUSIC 1314 MILLER DRIVE CORAL GABLES, FL 33146	NONE	501(C)(3)	DONATION	6,000
UNIV OF MIAMI MILLER SCL OF MED PO BOX 016960 R-100	NONE	501(C)(3)	DONATION	5,000

1314 MILLER DRIVE CORAL GABLES, FL 33146				
UNIV OF MIAMI MILLER SCL OF MED PO BOX 016960 R-100 MIAMI, FL 33101	NONE	501(C)(3)	DONATION	5,000
UNIVERSITY OF MIAMI HILLEL 1100 STANFORD DRIVE	NONE	501 (C) ( 3)	DONATION	8,750

UNIV OF MIAMI MILLER SCL OF MED PO BOX 016960 R-100 MIAMI, FL 33101	NONE	501(C)(3)	DONATION	5,000
UNIVERSITY OF MIAMI HILLEL 1100 STANFORD DRIVE CORAL GABLES, FL 33146	NONE	501 (C) ( 3)	DONATION	8,750
Total				238,200

## 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 1 000

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

100 RAOUL WALLENBERG PL WASHINGTON, DC 200242126	NONE	501 (C) (3)	DONATION	1,800
CONGREGATION DOR CHADASH 9400 SW 87TH AVE			DONATION	1,000

MIAMI, FL 33176			
DIASPORA VIBE CULTURAL ARTS INCUBAT 686 NE 56 ST MIAMI, FL 33137		DONATION	2,000

686 NE 56 ST MIAMI, FL 33137			
BETH DAVID REFORM CONGREGATION 1130 VAUGHAN LANE GLADWYNE, PA 19035		DONATION	1,000

BETH DAVID REFORM CONGREGATION 1130 VAUGHAN LANE GLADWYNE, PA 19035		DONATION	1,000
BARRY UNIVERSITY 11300 NE 2ND AVE		DONATION	1,000

GLADWYNE, PA 19035			
BARRY UNIVERSITY 11300 NE 2ND AVE MIAMI, FL 33161		DONATION	1,0

BARRY UNIVERSITY 11300 NE 2ND AVE MIAMI, FL 33161	DONATION		1,0
Total	 	•	238,200

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
DAVE & MARY ALPER JCC 11155 SW 112 AVE MIAMI, FL 33176			DONATION	1,800
FAIRCHILD TROPICAL BOTANIC GARDEN 10901 OLD CUTLER ROAD CORAL GABLES, FL 33156			DONATION	1,000
THE FIRST TEE MIAMI DADE 1802 NW 37TH AVE MIAMI, FL 33125			DONATION	2,000
MUSICAL ARTS ASSOC OF MIAMI 200 S BISCAYNE BLVD STE 3300 MIAMI, FL 33131			DONATION	1,000
FEEDING SOUTH FLORIDA 2501 SW 32ND TERRACE PEMBROKE PINES, FL 33023			DONATION	1,000

238,200

За

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient

1,000

a Paid during the year			
AMERICAN RED CROSS PO BOX 37839		DONATION	

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

BOONE, IA 50037

or substantial contributor

Name and address (home or business)

SOONE, IA 30037		
Total	 	 238,200

efile GRAPHIC print - DO NOT P	ROCESS	As Filed D	ata -		DLN: 93491205007167
TY 2016 Accounting Fe	es Sch	edule			_
_					
	Name:	THE ISRA	AEL ROSE HENRY &	ROBERT	
		_	CHARITABLE FOUN	_	
		VVILIVLIX	CHARTIABLE I OUN	DATION	
	EIN:	20-1125	267		
Category	Amo	ount	Net Investment	Adjusted Net	Disbursements
			Income	Income	for Charitable Purposes
ACCOUNTING FEES		3,461	3,461		

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.  TY 2016 Depreciation Schedule			
•			
Name:	THE ISRAEL ROSE HENRY & ROBERT		
	WIENER CHARITABLE FOUNDATION		
EIN:	20-1125267		

DLN: 93491205007167

efile GRAPHIC print - DO NOT PROCESS As Filed Data -

<b>EIN:</b> 20-1125267									
Description of Property	Date Acquired	Cost or Other Basis	Prior Years' Depreciation	Computation Method	Rate / Life (# of years)	Current Year's Depreciation Expense	Net Investment Income	Adjusted Net Income	Cost of Goods Sold Not Included
COMPUTER	2015-09-15	1,884	1,131	200DB	5 0000	301	_		

TY 2016 Investments - Other	Schedule
Name:	THE ISRAEL ROSE HENRY & ROBERT

DLN: 93491205007167

1,192,979

1,199,303

WIENER CHARITABLE FOUNDATION

FTN:

20-1125267

SCHWAB 5125-4646

LIN. 20-1123207							
Category/ Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value				
SCHWAB 2065-7255	AT COST	3,241,633	3,559,506				

AT COST

Category / Item	Cos	t / Other	Accumulated	Book Value	End of Vear Fair
	<b>EIN:</b> 20	0-1125267			
	W	IENER CHARIT	ABLE FOUNDAT	ION	
N	ame: Ti	HE ISRAEL ROS	SE HENRY & RO	BERT	
TY 2016 Land, Etc. Schedule					
eme GRAPHIC PIME - DO NOT PR	OCE33	AS FIIEU Data	<u> </u>	Di	<u>.N. 93491203007107</u>
efile GRAPHIC print - DO NOT PR	OCESS I	As Filed Data	. 1	DI	N: 93491205007167

20 1123207							
Category / Item	Cost / Other Basis	Accumulated Depreciation	Book Value	End of Year Fair Market Value			
COMPUTER	1,884	1,432	452				

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491205007167
TY 2016 Other Assets Schedule	<b>.</b>	

Name: THE ISRAEL ROSE HENRY & ROBERT

WIENER CHARITABLE FOUNDATION

EIN:	20-1125267

Other Assets Schedule						
Description	Beginning of Year - Book Value	End of Year - Book Value	End of Year - Fair Market Value			
ESTIMATED TAXES	8,800	1,000	1,000			
OVERPAID PAYROLL TAXES	1,148					

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN: 934912050	07167				
TY 2016 Other Decreases Schedule								
Name:	THE ISRAEL R	OSE HENRY & ROBERT						
	WIENER CHAR	RITABLE FOUNDATION						
EIN:	20-1125267							
De	escription		Amount					
INCOME TAXES				267				

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN	: 93491205007167			
TY 2016 Other Expenses Sche	dule						
<del>-</del>							
Name:	Name: THE ISRAEL ROSE HENRY & ROBERT						
I	WIENER CHARI	TABLE FOUNDATI	ION				
EIN:	<b>EIN:</b> 20-1125267						
Other Expenses Schedule	,						
Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes			
EXPENSES			1				
INSURANCE	1,163	1,163	1				
INVESTMENT ADVISORY FEES	52,321	52,321	1				
BANK CHARGES	17	17					

ellie drapilic print - Do Not Process   As the Data -	DEN. 95491205007107
TV 204 C Other Treeses Cohedule	
TY 2016 Other Income Schedule	
Name: THE ISRAEL ROSE HENRY & ROB	BERT

DI N. 93491205007167

# WIENER CHARITABLE FOUNDATION

efile CPAPHIC print - DO NOT PPOCESS | As Filed Data -

**EIN:** 20-1125267

Other Income Schedule							
Description	Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income				
SETTLEMENT INCOME	1,813						

efile GRAPHIC print - DO NOT PROCESS	As Filed Data	-	DLI	N: 93491205007167
TY 2016 Taxes Schedule				
Name: THE ISRAEL ROSE HENRY & ROBERT				
	WIENER CHARITABLE FOUNDATION			
<b>EIN:</b> 20-1125267				
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
ANNUAL FILING FEE	61	61		