2017,
₩
<b>⊱≕</b> 7
DEC
envelope Istuark date
8
$\bigcap$

SCANNED
JAN
မာ ⊜
2018

						1	
-		_	_	_	_		

**Return of Private Foundation** 

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

2949135702018 OMB No 1545-0052

Form **390-PF** 

Do not enter social security numbers on this form as it may be

		of the Treasury nue Service	Information about	Form 990-PF and its se	parate instruction	ons is	at www	irs.gov/form	990pf.	Open	to Public Inspec	tion
Fo	r cale	ndar year 20	16 or tax year beginn		1/2016			ending		/2017		
Na	me of for	undation							identification n			
			HOPPER MEM									
			oox number if mail is not deli	vered to street address)		Room	/suite		16-618	<u>8192</u>		
		lon, NA - P (		<del> </del>				B Telephone	e number (see ins	structio	ns)	
			e, country, and ZIP or foreig									
_	tsburg		<del></del>	PA	1523				(212) 63			
FO	reign cou	untry name	Foreign pro	ovince/state/county	Foreigr	n posta	al code	C If exempt	on application is	pendir	ig, check here	▶∐
_	Check	k all that apply	<u>, Гін </u>		<del></del>							. 🗀
•	Cileci	k all that apply	=		of a former pu	blic o	charity	-	n organizations, d			▶⊔
			∐ Final return	Amended ref				_	n organizations m	_		- □
ㅠ	Chacl	k type of orga	Address change				<del>7 ()</del>		here and attach d foundation status			, P 🗀
Ä				501(c)(3) exempt pr			00	,	7(b)(1)(A), check		similated disa	`▶□
-		_	nonexempt charitable									
'				Accounting method	X Cash	_  A	ccrual		idation is in a 60-			. 🗖
			Part II, col (c),	Other (specify)				under sec	tion 507(b)(1)(B)	, check	c here	▶□
Б		6) <b>▶</b> \$		art I, column (d) must be	e on casn basis T	<del>/ 1</del>					(d) Dishurson	monte
	art I		Revenue and Expendiumns (b), (c), and (d) m		(a) Revenue a		(b) Ne	tinvestment	(c) Adjusted	net	(d) Disburser for charital	
			ounts in column (a) (see		expenses pe	r	ır	come	income		purposes	
—	1		gifts, grants, etc , received				2438820		2 ( 1 E ) ( )	1425.87	(cash basis	only)
	2	Chook N	if the foundation is <b>not</b> rec	(attach schedule)		S. 7.88						
	3		avings and temporary		8. (77% N ) 2- (88% V )	***************************************	13-14 (\$24°2"	1.00	<u> </u>			
	4		nd interest from secur		<del></del>	17		17	<del></del>			
	5a	Gross rents	id interest from secur	11103						-		
	b	Net rental in	come or (loss)			3.33	rraen.	5,348.53	ANKIY Y. M.	yns.	200000000000000000000000000000000000000	
ē	6a		loss) from sale of ass	ets not on line 10	W 20 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	17				VQ. 188	37.3	5305.7
Revenue	b		ice for all assets on line 6a		3 8 6 - 3 1 2			an de ve et		(Z)		COM.
Š	7	-	net income (from Par		O PARAMENTA	530	2.33.33	17	16. 20 cm	10.7%		0.00
ď	8	Net short-ter	m capital gain		\$3842787A1638	18.0	66279					.70
	9	Income mod	ıficatıons		15. 18. 35.			\$				3.88
	10a		ss returns and allowances		345/455	4,200					MONTH (2)	
	b	Less. Cost of		L	34353483-1		100			1.2	A	1 1
	L C		or (loss) (attach sche	dule)			Ma:ail	4.5		_	4	-5014
	11		e (attach schedule)		<b>-</b>						***	
	12		ines 1 through 11	<del></del>	ļ	34		34		0		·
Expenses	13	-	on of officers, director	·	<del></del>	9		6				3
ŝ	14 15	•	yee salaries and wag		<u> </u>							
g	16a		ns,_employee-benefits attach schedule) 🚾 {\		<del> </del>							
_	b		ees (attach schedule)	/ t = 12-7	<del></del>	<del></del> -				_	L	—
×.	c	Other profes	sional fees (attach so	hodulo) (Ø)	<del> </del>	<del></del>						
ati	17	Interest	BEC 18	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,								
str	18		h schedule) (see insti	ructions)							<del></del> ,	
ij	19		(attach schedule) an		<u> </u>						7 7 7 7	. 1
щþ	20	Occupancy	1 OGDEN									
Ā	21		erences, and meeting						-			
Operating and Administrative	22	Printing and										
g G	23	Other expen	ses (attach schedule)									
Ĕ	24	Total opera	ting and administrat	ive expenses.								<b>-</b>
rat		Add lines 13	through 23			9		6		0		3
8	25		s, gifts, grants paid			24						24
0	26	Total expense	s and disbursements. Ad	ld lines 24 and 25		33		6		0		27
	27		26 from line 12									
	а	Excess of reve	enue over expenses and	disbursements		1						
- 1	b	Net investm	ent income (if negat	ive, enter -0-)		]		28				
- 1	С	Adjusted ne	t income (if negative	enter -0-)						0		

Add lines 1, 2, and 3

Decreases not included in line 2 (itemize)

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

BERTHA SHERWOOD HOPPER MEM Form 990-PF (2016) 16-6188192 Page 2 Attached schedules and amounts in the description column Beginning of year End of year Part II **Balance Sheets** should be for end-of-year amounts only (See instructions) (a) Book Value (b) Book Value (c) Fair Market Value Cash-non-interest-bearing 2 Savings and temporary cash investments 128 Accounts receivable 3 Less allowance for doubtful accounts Pledges receivable ▶ Less allowance for doubtful accounts 5 Grants receivable 6 Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions) Other notes and loans receivable (attach schedule) Less allowance for doubtful accounts 8 Inventories for sale or use Prepaid expenses and deferred charges 9 10a Investments—U S and state government obligations (attach schedule) b Investments—corporate stock (attach schedule) Investments—corporate bonds (attach schedule) 11 Investments—land, buildings, and equipment basis Less accumulated depreciation (attach schedule) 12 Investments—mortgage loans 13 Investments—other (attach schedule) 1.092 1,109 14 Land, buildings, and equipment basis Less accumulated depreciation (attach schedule) 15 Other assets (describe 16 Total assets (to be completed by all filers—see the instructions Also, see page 1, item I) 1,132 17 Accounts payable and accrued expenses 18 Grants payable Liabilities 19 Deferred revenue 20 Loans from officers, directors, trustees, and other disqualified persons 21 Mortgages and other notes payable (attach schedule) 22 Other liabilities (describe 23 Total liabilities (add lines 17 through 22) Foundations that follow SFAS 117, check here Assets or Fund Balances and complete lines 24 through 26 and lines 30 and 31. 24 Unrestricted 25 Temporarily restricted 26 Permanently restricted Foundations that do not follow SFAS 117, check here ▶ 🔯 and complete lines 27 through 31. 27 Capital stock, trust principal, or current funds 1,132 1,237 Paid-in or capital surplus, or land, bldg, and equipment fund 29 Retained earnings, accumulated income, endowment, or other funds 30 1.23 Total net assets or fund balances (see instructions) 1,132 Net 31 Total liabilities and net assets/fund balances (see instructions) 1,237 1,132 Part III Analysis of Changes in Net Assets or Fund Balances Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return) 1,132 1 2 Enter amount from Part I, line 27a 2 1 104 3 Other increases not included in line 2 (itemize) ► FEDERAL TAX REFUND 3 1,237

Form 990-PF (2016)

1,237

4

5

		HERWOOD HOPPER MEM				16-	6188192	Page 3
Part	V Capital Gains and L	osses for Tax on Investn	nent Income	<del></del>				
		und(s) of property sold (e g , real estat e, or common stock, 200 shs MLC Co	•	(b) How acquired P—Purchase D—Donation		ate acquired o , day, yr )	(d) Date (mo , day	
1a								-
b								
c								
<u>d</u>								
e	Capital Gains Distributions						l	
	(e) Gross sales price	(f) Depreciation allowed (or allowable)		r other basis ense of sale	(h) Gain or (loss) (e) plus (f) minus (g			
a								
<u>b</u>		<del></del>					<del></del>	
<u>c</u>						<del> </del>		
d_		<del></del>						
<u>e</u>	Complete only for a series			10/04/00			<del></del>	17
	Complete only for assets show	ving gain in column (h) and owner			ł		l (h) gain minu	
	(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	, ,	ss of col (ı) l (j), ıf any			t less than -0-) rom col (h))	
<u>a</u>								
<u>b</u>		<del></del>						<del></del>
<u>c</u>								
<u>u</u>			<del> </del>		1			17
	<del></del>	( If can	also enter in Pa	ort Line 7				
2	Capital gain net income or (r	net capital loss) 1	), enter -0- in Pa	<b>)</b>	2			17
3	Net short-term capital gain o	or (loss) as defined in sections	•		-			
-		ne 8, column (c) (see instructi						
	Part I, line 8	(3) (33) (33)	07.0) 77 (1000), 0.	}	3			0
Part		Section 4940(e) for Red	uced Tax on N	let Investment	Incor	ne		
(For c		te foundations subject to the						
						,		
If sec	tion 4940(d)(2) applies, leave	this part blank						
Was t	he foundation liable for the se s," the foundation does not qu	ection 4942 tax on the distribuialify under section 4940(e). [	table amount of o not complete	any year in the b this part	ase pe	riod?	X Yes	☐ No
1		nt in each column for each yea			king a	ny entries		
	(a)	(b)		(c)			(d)	
Cal	Base period years endar year (or tax year beginning in)	Adjusted qualifying distribution	ns Net value	of noncharitable-use a	essets		tribution ratio	(c))
	2015						0	000000
	2014						0	000000
	2013						0	000000
	2012						0	000000
	2011	<u> </u>					0	000000
					1			
2	Total of line 1, column (d)				L	2	0	0.000000
3		the 5-year base period—divi		ne 2 by 5, or by tl	he			
	number of years the foundat	ion has been in existence if le	ess than 5 years	. ,	-	3	0	000000
	_				l			
4	Enter the net value of nonch	aritable-use assets for 2016 f	rom Part X, line	5		4		
_		•						
5	Multiply line 4 by line 3	•				5		
_	<b>5</b>							
6	Enter 1% of net investment i	ncome (1% of Part I, line 27b	)	•	Ļ	6		0
_	Addison					_		_
7	Add lines 5 and 6	•			}	7		
~	Enten avalities at all to	form De AVIII I		1				_
8	Enter qualifying distributions		Danit VII. 1: 41:	and assertate 41-		8	tou roto C-	C the
		than line 7, check the box in	raπ vi, line 1b,	and complete th	at part	using a 1%	tax rate Se	e me
	Part VI instructions							

	0-PF (2016) BERTHA SHERWOOD HOPPER MEM	16-	6188192	Р	age 4	
art	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see in	nstruc	tions)			
1a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1  Date of ruling or determination letter (attach copy of letter if necessary—see instructions)			* '%		
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check	1	. TOTAL	1		
С	here ▶ ☐ and enter 1% of Part I, line 27b  All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of  Part I, line 12, col (b)					
2 3	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) Add lines 1 and 2	3		0 1	_	
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)	4				
5 6	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0- Credits/Payments	5 10 AC 3	38 (C) 39,	1	. 20 30 53	
a	2016 estimated tax payments and 2015 overpayment credited to 2016 6a 1					
b	Exempt foreign organizations—tax withheld at source  6b					
c	Tax paid with application for extension of time to file (Form 8868)  6c  6c					
ď	Backup withholding erroneously withheld 6d 6d		and the state of the state of	NAY.		
7	Total credits and payments Add lines 6a through 6d	7		1		
8	Enter any penalty for underpayment of estimated tax. Check here	8		-		
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9		0		
0 1	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  Refunded	10		0		
	VII-A Statements Regarding Activities			U		
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or di	d it	7,818	Yes	No	
	participate or intervene in any political campaign?	<b>-</b>	1a		Х	
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see					
	Instructions for the definition)?		1b		X	
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any ma	terials	83			
	published or distributed by the foundation in connection with the activities		100 miles			
C	Did the foundation file Form 1120-POL for this year?		1c	37255	X	
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year		7.23			
_	(1) On the foundation >\$(2) On foundation managers >\$		—			
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax important on foundation managers    \$\bigseleft\sigma\	oosea	ا الله الله الله الله الله الله الله ال			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?  If "Yes," attach a detailed description of the activities.		2		X	
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes		3		X	
4a b	Did the foundation have unrelated business gross income of \$1,000 or more during the year? If "Yes," has it filed a tax return on Form 990-T for this year?		4a 4b	N/A	Х	
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?		5	n. tour fo	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			ľij		
	By language in the governing instrument, or     By state legislation that effectively emends the governing instrument as that no mandatory directions	that				
	<ul> <li>By state legislation that effectively amends the governing instrument so that no mandatory directions conflict with the state law remain in the governing instrument?</li> </ul>	งเกสเ	6	X	فنتتح	
7	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		7	$\frac{\hat{x}}{x}$	t	
Ba	Enter the states to which the foundation reports or with which it is registered (see instructions)	•	N. R.	,}%\$?	I,	
	NY			*		
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney Ge	eneral	, ,			
	(or designate) of each state as required by General Instruction G? If "No," attach explanation		8b	Х		
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942					
	or 4942(j)(5) for calendar year 2016 or the taxable year beginning in 2016 (see instructions for Part XI	V)? If			١	
_	"Yes," complete Part XIV .	•	9		<u>X</u>	
0	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing	ng their				
	names and addresses .		10		ιX	

Form 9	990-PF (2016) BERTHA SHERWOOD HOPPER MEM 16-618	8192	F	age <b>5</b>
Par	t VII-A Statements Regarding Activities (continued)			
` 11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions) .	11	Yes	No X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified			
	person had advisory privileges? If "Yes," attach statement (see instructions)	12		Х
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	
	Website address ► N/A			
14	The books are in care of ► BNY MELLON, N A Telephone no ► (212) 63	5-685	4	. <b></b> -
	Located at ► P O BOX 185, PITTSBURGH, PA ZIP+4 ► 15230-0	185	. <b></b>	
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041—Check here and enter the amount of tax-exempt interest received or accrued during the year  15 N/A			<b>▶</b> □
16	At any time during calendar year 2016, did the foundation have an interest in or a signature or other authority		Yes	No
	over a bank, securities, or other financial account in a foreign country?	16	1 2 2 2	X
	See the instructions for exceptions and filing requirements for FinCEN Form 114 If	11.00		
	"Yes," enter the name of the foreign country	9 :	37	
Par	t VII-B Statements Regarding Activities for Which Form 4720 May Be Required	1 (a) + 200		r
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.	135,431	Yes	No
1a	During the year did the foundation (either directly or indirectly)			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a	344		
	disqualified person?	132	373	
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?.	3		
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?  (5) Transfer any process of the expenses	1.29		
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)?  Yes X No			
	— — — — — — — — — — — — — — — — — — —	15		
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the	5		Garlo S.
	foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days)  Yes X No		33.5	
b	If any answer is "Yes" to 1a(1)–(6), did <b>any</b> of the acts fail to qualify under the exceptions described in			
	Regulations section 53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	1b	المتندد	X
	Organizations relying on a current notice regarding disaster assistance check here	100	3	11.23
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that	3.3		
	were not corrected before the first day of the tax year beginning in 2016?	1c		X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private		n it	34.3
	operating foundation defined in section 4942(j)(3) or 4942(j)(5))			
а	At the end of tax year 2016, did the foundation have any undistributed income (lines 6d and	2.2		
	6e, Part XIII) for tax year(s) beginning before 2016?			
	If "Yes," list the years 20, 20, 20, 20			
b	Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2)			Na.
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to	Lil	<b>1</b>	ž
	all years listed, answer "No" and attach statement—see instructions )	2b	N/A	1 1010
С	If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here			
٥.	▶ 20, 20, 20			1
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?		```'	
L	<del></del>		, ,	
b	If "Yes," did it have excess business holdings in 2016 as a result of (1) any purchase by the foundation or	Ĵ		<b>]</b> 、
	disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the	<b> </b> >	[ ]	1
	Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10-15- or 20-year first phase holding period? (Use Schodule C. Form 4720, to determine if the	1		
	of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2016)	3b	N/A	
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	<del>  '*′^</del>	X
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its	1	<del>                                     </del>	T
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2016?	4b		X
	العامل والمراقع العامل والمراقع والمراقع والمراقع والمراقع والمراقع والمراقع والمراقع والمراقع العامل العامل ا			

Form 99	00-PF (2016)	BERTHA SHERWOOD HOPPE	R MEN	1					16-61	88192	Page 6
Part	VII-B	Statements Regarding Activities for	or Whi	ch Form 47	20 Ma	y Be Requ	uired (	continue	d)		
5a		year did the foundation pay or incur an on propaganda, or otherwise attempt to			(sectio	n 4945(e))'	?	Yes	X No		
		ce the outcome of any specific public el		(see section 4	4955), d	or to carry o	on,	Yes	X No		
	(3) Provid	e a grant to an individual for travel, stud	y, or ot	her simılar pu	ırposes	?		Yes	X No	133	
		e a grant to an organization other than a n 4945(d)(4)(A)? (see instructions)	charit	able, etc , org	janızatı	on describe	ed in	☐ Yes	<b>⊠</b> No		
		e for any purpose other than religious, c les, or for the prevention of cruelty to ch			literary	, or educati	onal	☐ Yes	X No		
b		wer is "Yes" to 5a(1)–(5), did any of the is section 53 4945 or in a current notice							bed in	5b	N/A
С	If the ansv	ons relying on a current notice regardin ver is "Yes" to question 5a(4), does the maintained expenditure responsibility f	founda	tion claim exe			ax	☐ Yes	► □ □ No		
6a	Did the for on a perso	ttach the statement required by Regulat undation, during the year, receive any fundation during the year, receive any fundation.	ınds, dı	rectly or indir	ectly, to			Yes	⊠ No	Service 2	
b		undation, during the year, pay premiums 6b, file Form 8870	s, direc	tly or indirect	iy, on a	personal b	enefit c	contract?		6b	X 
		during the tax year, was the foundation a pa						Yes	X No		
		d the foundation receive any proceeds								7b	N/A
Part		formation About Officers, Directo	ors, ir	ustees, Foi	undati	on Manag	jers, H	lignly Pa	aid Em	proye	es,
1		nd Contractors ficers, directors, trustees, foundation		goro and the	is com	noncation	/coo in	etruction	ne\		
<u>-</u> -	List all OI			e, and average		mpensation	(d)	Contribution	is to	(a) Eyne	ense account,
		(a) Name and address	hou	rs per week ed to position	(If r	not paid, nter -0-)		oyee benefit erred comp			allowances
BNY N	Mellon, N A		TRUS			101 -0 1	una uo.	51,04 G511.p			
		ttsburgh, PA 15230-0185		TTACHED		21	NONE			NONE	
	dellon, N A		FEE								
PO E	3OX 185 Pr	ttsburgh, PA 15230-0185	REIME	BURSEMENT		-12	N/A			N/A	
2	Compens "NONE."	ation of five highest-paid employees	(other	than those	include	ed on line '	1—see	instructi	ons). If	none,	enter 
	(a) Name and	address of each employee paid more than \$50,00	0	(b) Title, and a hours per v devoted to po	veek	(c) Comper	nsation	(d) Contrib employee plans and compen	benefit deferred		ense account, allowances
NONE											
										_	
	•										
											4
Total	number of	other employees paid over \$50,000		·					<b>&gt;</b>	NONE	
			=								0-PF (2016)

Form 990	PF (2016) BERTHA SHERWOOD HOPPER MEM 16-6	188192 Page <b>7</b>
Part	Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid E and Contractors (continued)	mployees,
3	ive highest-paid independent contractors for professional services (see instructions). If none, enter	"NONE."
	(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
NONE		
Total n	umber of others receiving over \$50,000 for professional services	NONE
Part	IX-A Summary of Direct Charitable Activities	
	e foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of zations and other beneficiaries served, conferences convened, research papers produced, etc.	Expense
1 NO	DNE	
		-
2		
		-
3		
		-
4		
		-
Part	X-B Summary of Program-Related Investments (see instructions)	
Descn	be the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1 NO	)NE	
		-
2		-
		-
All oth	er program-related investments. See instructions	
3 <u>N</u> Q	<u>NE</u>	-
		-
Total.	Add lines 1 through 3	NONE
		Form 990-PF (2016)

	90-PF (2016) BERTHA SHERWOOD HOPPER MEM	16-6188192	Page 8
Part	Minimum Investment Return (All domestic foundations must complete this part. Foreig	n foundations.	
	see instructions )	•	
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purposes		
а	Average monthly fair market value of securities .	1a	1,327
b	Average of monthly cash balances .	1b	94
С	Fair market value of all other assets (see instructions)	1c	
d	Total (add lines 1a, b, and c)	1d	1,421
е	Reduction claimed for blockage or other factors reported on lines 1a and	Q1.79	
	1c (attach detailed explanation) 1e		
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	1,421
4	Cash deemed held for charitable activities Enter 1½ % of line 3 (for greater amount, see		
	instructions)	4	21
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	1,400
6	Minimum investment return. Enter 5% of line 5	6	70
Part	XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating		
	foundations and certain foreign organizations check here   and do not complete this part )		
1	Minimum investment return from Part X, line 6	1	70
2a	Tax on investment income for 2016 from Part VI, line 5	1	*,
b	Income tax for 2016 (This does not include the tax from Part VI)		
C	Add lines 2a and 2b	2c	1
3	Distributable amount before adjustments Subtract line 2c from line 1	3	69
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	69
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII,	1 !	
	line 1	<u> 7                                      </u>	69
Part	XII Qualifying Distributions (see instructions)		
	dumying bistributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
а	Expenses, contributions, gifts, etc —total from Part I, column (d), line 26	1a	27
b	Program-related investments—total from Part IX-B	1b NONE	
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	3-8/2	
а	Suitability test (prior IRS approval required)	3a	
þ	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	27
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 (see instructions)	5	
6	Adjusted qualifying distributions. Subtract line 5 from line 4	_6	27
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating w	hether the found:	ation
	qualifies for the section 4940(e) reduction of tax in those years		

Form **990-PF** (2016)

	m 990-PF (2016) BERTHA SHERWOOD HOPPER I	MEM		10	6400400
Pa	art XIII Undistributed Income (see instructions	s)		10	-6188192 Page
1	Distributable amount for 2016 from Part XI,	(a) Corpus	(b) Years pnor to 2015	(c) 2015	(d) 2016
2	•			V4 - 1. 18 1 8 1 8 1 8 1 8 1 8 1 8 1 8 1 8 1	69
	a Enter amount for 2015 only			<u> </u>	
	b Total for prior years 20 , 20 , 20		<u> </u>		0
3	Excess distributions carryover, if any, to 2016				
	a From 2011				
	b From 2012 .				
	c From 2013				
	d From 2014 e From 2015				
,	<u> </u>				
4	Qualifying distributions for 2016 from Part XII,	1	6	22 4 3 444	
	line 4 > \$ 27				
á	<u></u>			<u> </u>	
ŀ	Applied to undistributed income of prior years			1 / 1 / 1 / 1 / 1 / 1 / 1 / 1 / 1 / 1 /	
	(Election required—see instructions)				
C	Treated as distributions out of corpus (Election	37 4 389 W. TY US. THE R. T.			(
	required—see instructions)				
	Applied to 2016 distributable amount				27
6 5	arributed out of corpus				
3	Excess distributions carryover applied to 2016	16		10年 1983年	16
	(If an amount appears in column (d), the same amount must be shown in column (a))				
6	Enter the net total of each column as				* * * * * * * * * * * * * * * * * * * *
	indicated below:				
а	Corpus Add lines 3f, 4c, and 4e Subtract line 5	<u> </u>			
b	Prior years' undistributed income Subtract				
	line 4b from line 2b		0		
С	and amount of prior years undistributed		Ü		
	income for which a notice of deficiency has				
	been issued, or on which the section 4942(a)				
d	tax has been previously assessed Subtract line 6c from line 6b Taxable				
_	amount—see instructions				
е	Undistributed income for 2015 Subtract line		3 (88 ) (-88 ) (3 ) (88 ) (4 ) (88 ) (4 )		
	4a from line 2a Taxable amount—see				
	Instructions				
f	Undistributed income for 2016 Subtract lines			(4) (4) (4) (4) (4) (4) (4) (4) (4) (4)	
	4d and 5 from line 1. This amount must be				
_	distributed in 2017				26
7	Amounts treated as distributions out of corpus	-			TAR INC. VIII.
	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.				
	Subtract lines 7 and 8 from line 6a				<b>\$</b> : %
10	Analysis of line 9				
	Excess from 2012				
	Excess from 2013			1	
	Excess from 2014				·
	Excess from 2015				
	Excess from 2016	l l		i	

	90-PF (2016) BERTHA SHERWOOI	D HOPPER MEM			16-6188	192 Page <b>10</b>
Part	XIV Private Operating Foundation	<b>ons</b> (see instruc	tions and Part V	II-A, question 9)	<u>N</u>	I/A
1a	If the foundation has received a ruling	or determination le	etter that it is a priv	vate operating		
	foundation, and the ruling is effective for			•		
b	Check box to indicate whether the foundation	on is a private opera	ting foundation desc	cribed in section	4942(J)(3)	or 4942(J)(5)
2a	Enter the lesser of the adjusted net	Tax year		Prior 3 years		(e) Total
	income from Part I or the minimum investment return from Part X for	(a) 2016	(b) 2015	(c) 2014	(d) 2013	(e) Total
	each year listed					0
b	85% of line 2a					0
С	Qualifying distributions from Part XII,					
	line 4 for each year listed	1		Ì		0
d	Amounts included in line 2c not used directly					
	for active conduct of exempt activities	ì				0
е	Qualifying distributions made directly					
•	for active conduct of exempt activities			, ,		
	Subtract line 2d from line 2c					0
3	Complete 3a, b, or c for the			/		
•	alternative test relied upon	}				
а	"Assets" alternative test—enter	İ	/	1		
	(1) Value of all assets	1				0
	(2) Value of assets qualifying under					•
L	section 4942(j)(3)(B)(i)					0
b	"Endowment" alternative test—enter 2/3 of minimum investment return shown in	1		,		
	Part X, line 6 for each year listed			'		0
C	"Support" alternative test—enter		/			
	(1) Total support other than gross	1	<b>/</b>	1	1	
	investment income (interest, dividends, rents, payments on	/		1		
	securities loans (section					
	512(a)(5)), or rovalties)					0
	(2) Support from general public and 5 or more exempt			1		
	organizations as provided in					
	section 4942(j)(3)(B)(iii)					0
	(3) Largest amount of support from			}		
	an exempt organization	/				0
	(4) Gross investment income	¥	<u> </u>	<u> </u>		0
Part	XV Supplementary Information	n (Complete thi	s part only if th	e foundation ha	d \$5,000 or more	in assets at
	any time during the year—	see instruction	s.)		<del></del>	
1	Information Regarding Foundation I	Managers:				
а	List any managers of the foundation w					foundation
	before the close of any tax year (but or	nly if they have co	ntributed more tha	an \$5,000) (See se	ction 507(d)(2))	
<u>NONE</u>	<u> </u>				<u></u>	
b	List any managers of the foundation w					on of the
	ownership of a partnership or other en	tity) of which the f	oundation has a 1	0% or greater inter	est	
<u>NONE</u>						
2	Information Regarding Contribution					
	Check here ► 🛛 If the foundation or	nly makes contribi	utions to preselect	ed charitable orgar	lizations and does n	ot accept
	unsolicited requests for funds If the fo		ifts, grants, etc. (s	ee instructions) to i	ndividuals or organi	zations
	under other conditions, complete items					
а	The name, address, and telephone nu	mber or e-maıl ad	dress of the perso	n to whom applicat	ions should be addr	essed
	APPLICABLE	L L		-4		
D	The form in which applications should	be submitted and	information and m	naterials they shoul	a incluae	4
NOT A	APPLICABLE					•
	Any submission deadlines		-			
	APPLICABLE			<del></del>		
d	Any restrictions or limitations on award	ls, such as by geo	graphical areas, c	haritable fields, kin	ds of institutions, or	other
	factors			•		
NOT A	APPLICABLE		<del></del>			000 DE :::::
					Fo	rm <b>990-PF</b> (2016)

BERTHA SHERWOOD HOPPER MEM

Form 990-PF (2016)

Total

Part XV Supplementary Information (cont 3 Grants and Contributions Paid During	inued)	ed for Futi	ire Payment	<del></del>
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient	contribution	
a Paid during the year				1
See Attached Statement		1		
		ļ		ļ
		ļ		ļ
				l
	1			
	1			
	}			
				- 1
	Į		,	
		i i		, ,
		1 1		
		i i		
		}	•	
	İ	}		
		į į		
		}		
		}		
		1		
	1			
	<b>\</b> .			
Total			. •	3a :
b Approved for future payment				
NONE				
		]		1
		1		
		1		1
				Į.
	1	[		
				ý
•	1	}		
	I	1		1

3b NONE

16-6188192

Page **11** 

Forn	990-PF (2016) BERTHA SHERWOOD HOPPE	R MEM			16-61	88192 Page <b>12</b>
,—	rt XVI-A Analysis of Income-Producing Ac	tivities				
Ent	er gross amounts unless otherwise indicated	Unrelated bu	isiness income	Excluded by sect	ion 512, 513, or 514	(e)
1	Program service revenue	(a) Business code	( <b>b)</b> Amount	(c) Exclusion code	(d) Amount	Related or exempt function income (See instructions)
	a					
	b	<del> </del>				
	<u></u>	<u> </u>		<u> </u>	<del> </del>	<u> </u>
	d	<del></del>	<b></b>	<del></del>		
	e		<del></del>			
	g Fees and contracts from government agencies	<del></del>	<del></del>	<del> </del>		<del></del>
2	Membership dues and assessments .	<del></del>		<del> </del>	<del> </del>	<del> </del>
3	Interest on savings and temporary cash investments					
4	Dividends and interest from securities			14	17	
5	Net rental income or (loss) from real estate	131 (2000)				N. 729 T. 1994 (A)
	a Debt-financed property	200 27 30 3 3 3 3 3 4 5 4 5 4 5	18.	. K		
	b Not debt-financed property					
6	Net rental income or (loss) from personal property					
7	Other investment income					
8	Gain or (loss) from sales of assets other than inventory			18	17	
9	Net income or (loss) from special events					
10	Gross profit or (loss) from sales of inventory					
11	Other revenue a			<u></u> _		
	b					
	c					
	d					
	e			- 1920 w 20 12 / 92 000	ļ	
	Subtotal Add columns (b), (d), and (e)		]0	Z. (1) (1) (2)		
	Total. Add line 12, columns (b), (d), and (e)	,			13	34
	e worksheet in line 13 instructions to verify calculation it XVI-B Relationship of Activities to the A		ent of Evennet	Burnoses		·
Lin	e No. Explain below how each activity for which incom	e is reported in o	column (e) of Part 2	XVI-A contribute	d importantly to the	)
	- decomplication of the realidation a exempt part	ooses (other than	by providing tuna	s for such purpo	ses) (See instruct	ions /
	NOT APPLICABLE					<del></del>
	<del></del>					
	<del></del>	<del></del>				
	<del></del>	<del></del>				
		-				
			<del></del>			
					<del></del>	
			<del></del>	<del>-</del>	<del></del>	
	1					_

Form 990-PF (2016) BERTHA SHERWOOD HOPPER MEM

Part	XVII	Information Exempt Org		sfers To and Transa	ctions and R	elationship	s With No	ncharitable
1	ın se		e Code (other than s	engage in any of the fol section 501(c)(3) organ				nbed Yes No
а	Tran (1) C	sfers from the rep Cash		a noncharitable exem .	pt organization	of		1a(1) X
		Other assets						1a(2) X
b		er transactions						
			a noncharitable exe		•	•		1b(1) X
				ible exempt organization	on	•		1b(2) X
			equipment, or other	r assets	•			1b(3) X 1b(4) X
		Reimbursement ai oans or loan gua	_		•			1b(4) X 1b(5) X
				up or fundraising solicit	ations			1b(6) X
С				sts, other assets, or pa				1c X
				nplete the following sche		should always	show the fai	r market
				given by the reporting fou ent, show in column (d) the				
(a) Line	no	(b) Amount involved	(c) Name of nonc	chantable exempt organization	n (d) Des	scription of transf	ers, transaction	s, and shanng arrangements
			NOT APPLICABLE					
	$\rightarrow$							
	$\dashv$							
	$\dashv$	<del></del>	<u> </u>	<del></del>				<del></del>
	$\neg +$		<del></del>	<del></del>	<del></del>	<del></del>		
					<del></del>			
			<del></del>		· <del>-  </del> -			
			<del>                                     </del>	<del></del>				
						<u>.</u>		
		<del></del>						
	+							
	+	<del></del>						
	desc	ribed in section 5	Letly or indirectly affili 01(c) of the Code (c following schedule	ated with, or related to other than section 501(	one or more ta c)(3)) or in secti	x-exempt org on 527?	ganizations	☐ Yes ☒ No
		(a) Name of organ	ization	(b) Type of orga	inization		(c) Description	n of relationship
		<del></del>		<u> </u>	·	ļ		
				<del> </del>				
			<del></del>	<u> </u>				
						<del> </del>		
	Under	r penalties of perjury, I deci	are that I have examined this re	tum, including accompanying sche	dules and statements, ar	nd to the best of my	knowledge and bel	lef, it is true
Sign				yer) is based on all information of v			, i	May the IRS discuss this return
Here	6	مسح		12/5/2017	VICE PRES	IDENT .		with the preparer shown below
	Sigi	nature of officer or trus	stee	Date	Title			(see instructions)? XYes No
Paid		Print/Type preparer's	s name	Preparer's signature		Date	Check	X If PTIN
Prepar	rer	Shawn P Hanlo	n	TO310 "	124	12/5/20		mployed P00965923
Use O			PRICEWATERHOL				Firm's EIN	
<u> </u>	y	Firm's address	600 GRANT STREE	T, PITTSBURGH, PA	15219		Phone no	(412) 355-6000
								Form <b>990-P</b> : (2016)

16-6188192

Page 13

BERTHA SHERWOOD HOPPER	MEM			16-618	8192 Page 1 of 1
Continuation of Part XV, L	ine 3a (990-PF) -	Gran	ts and Cont	ributions Paid	During the Year
Recipient(s) paid during the year					
Name EAST RAMPO CSD					
Street	<del></del>				
105 S MADISON AVE					
City			Zip Code	Foreign Coun	try
SPRING VALLEY		NY_	10977-5479		
Relationship NONE	Foundation Status				
Purpose of grant/contribution	IPC	<del></del>			Amount
GENERAL OPERATING PURPOSES	<b>;</b>				24
Name					
Street		<del></del>			
City		State	Zip Code	Foreign Coun	try
Relationship	Foundation Status		<del></del>		
Purpose of grant/contribution					Amount
Name					
Street		<del></del>			
City		State	Zip Code	Foreign Coun	try
Relationship	Foundation Status	<u> </u>	<del>-</del>	- <u></u>	
Purpose of grant/contribution					Amount
Name					
Street					·
City		State	Zip Code	Foreign Coun	try
Relationship	Foundation Status		<u> </u>		
Purpose of grant/contribution					Amount
Name			_		
Street	<del></del>		<del></del>		
City	<del></del>	State	Zip Code	Foreign Coun	try
Relationship	Foundation Status	 ;			
Purpose of grant/contribution	<del></del>			-	Amount
Name					
Street	<del></del>				·
City		State	Zip Code	Foreign Coun	itry
Relationship	Foundation Status	<del>1</del> ;	<del></del>		
Purpose of grant/contribution		_		<del></del>	Amount

Attachment to Form 990PF Part VIII, Column (b) Title and Average Hours Per Week Devoted To Position

The compensation reported in column (b) paid to BNY Mellon, N.A. as Corporate Trustee is calculated based on market value and current fee schedule. It is not determined on an hourly basis. Corporate Trustee services include administrative responsibilities, grant requirements, recordkeeping, investment management, income collection, statement and accounting services, and regulatory reporting.

12/5/2017 10.38:45 AM - XXXXXXXX9700 - 468 - BOS - BERTHA SHERWOOD HOPPER MEM

Part I, Line 6 (990-PF) - Gain/Loss from Sale of Assets Other Than Inventory

Gross Cost or Other Basis, Expenses, Net Gain Sales Deprecation and Adjustments or Loss	17	ales 0		Expense of Sale	Cost or Valuation	Other Basis Method Improvements Degreciation Adjustments
Totals	Capital Gams/Losses	Other sales			Gross Sales	Price
	Ö				Date	Sold
					Date	Acquired
				_	Acquisition	Method
			Check "X" If	Purchaser	B 2	Business
						Purchaser
-				Check "X"	to modude	In Part IV
Amount	17	0				CUSIP #
	Long Term CG Distributions	Short Lerm CG Distributions				Description

1

12/5/2017 10:38:45 AM - XXXXXXXX9700 - 468 - BOS - BERTHA SHERWOOD HOPPER MEM

Part II, Line 13 (990-PF) - Investments - Other

			1,092	1,109	1,403
		Basis of	Book Value	Book Value	FMV
ļ	Asset Description	Valuation	Beg of Year	End of Year	End of Year
_					
7	BNY MELLON INTERMEDIATE BOND FD C		C	900	AOR
١,			)	100	400
ار	IUNEYFUS UC ECOLLY FUND-Y			2007	800
				20.	330
J				c	
				>	

ş

ζ

12/5/2017 10:38:45 AM - XXXXXXXX9700 - 468 - BOS - BERTHA SHERWOOD HOPPER MEM

Part IV (990-PF) - Capital Gains and Losses for Tax on Investment Income

0	Garns Minus	Excess FMV Over	Adj Basis or Losses	
0	Excess of FMV	Over	Adjusted Basis	
O <sub>1</sub>	Adjusted Basis	as of	12/31/69	
0	<b>₩</b>	as of	12/31/89	
0			Gain or Loss	
0	Cost or Other	Basis Plus	Expense of Sale	
0			Adjustments	
0		Depreciation	Allowed	
0		Gross	Sales Price	
		Date	Sold	
		Date	Acquired	
<b>.</b>		Acquisition	Method	
71			CUSIP#	
Long Term CG Distributions Short Term CG Distributions			Description of Property Sold	

- 57.4

Ç

12/5/2017 10:38·45 AM - XXXXXXXX9700 - 468 - BOS - BERTHA SHERWOOD HOPPER MEM

Part VIII, Line 1 (990-PF) - Compensation of Officers, Directors, Trustees and Foundation Managers

Name	Check "X" if Business	Street	Ą.	State	Zip Code	Foreign Country	Title	Avg Hrs Per Week	Title Per Week Compensation Be	Benefits	Expense
BNY Mellon, N A	×	P O BOX 185	1	PA 15	PA 15230-0185		TRUSTEE	SEE ATTAC	21		NONE
BNY Mellon, N A	×	P O BOX 185	Pittsburgh	PA 15	15230-0185		FEE	REIMBURSI	-12 N/A		N/A

12/5/2017 10.38:45 AM - XXXXXXX9700 - 468 - BOS - BERTHA SHERWOOD HOPPER MEM

Part VI, Line 6a (990-PF) - Estimated Tax Payments

			Date	Amount
٠ 1	Credit from prior year return .	_	1	1
	First quarter estimated tax payment		2	
	Second quarter estimated tax payment		3	
	Third quarter estimated tax payment	-	4	
5	Fourth quarter estimated tax payment		5	
6	Other payments		6	
_7	Total	_	7	1