							2710-0	
<b>,</b>	Depa	rtmen	90-PF at of the Treasury venue Service	or Sec	DED TO SEPTEM Return of Private ction 4947(a)(1) Trust Treat social security numbers on m 990-PF and its separate	E Foundation ed as Private Foundation this form as it may be ma	ade publiç.	OMB No 1545-0052  2016 Open to Public Inspection
	For	caler	ndar year 2016 or tax year	beginning NOV	1, 2016	, and ending	OCT 31, 201	7
	Na	me o	f foundation	_			A Employer identification	on number
			FEUERSTEIN !	MAIER FAMILY	Y			_
			NDATION INC				27-397183	8
			and street (or P O box number if i		ddress)	Room/suite	B Telephone number	000
	_		SYLVAN AVEN				201-947-1	
			own, state or province, cou LEWOOD CLIFF:				C If exemption application is	pending, check here
			all that apply:	Initial return		ormer public charity	D 1. Foreign organization	ns check here
	<b>u</b> (	JIICON		Final return	Amended return	I	J. Foreign organization	is, critical incide
			=	Address change	Name change	$\sim$ 1	Foreign organizations me check here and attach or	neeting the 85% test, computation
\	H (	Check	type of organization:	X Section 501(c)(3) ex	empt private foundation	114	E If private foundation st	tatus was terminated
,	$\Box$	Sε	ction 4947(a)(1) nonexemp	ot charitable trust	Other taxable private founda	ation	under section 507(b)(	
	l Fa	air ma	arket value of all assets at e	nd of year   J Accounti	ng method; X Cash	Accrual	F If the foundation is in a	a 60-month termination
/	-		Part II, col (c), line 16)		ther (specify)	<del></del>	under section 507(b)(	1)(B), check here 🕨 🗀
1		-\$	Analysis of Revenue and		mn (d) must be on cash b		<del> </del>	(4) 5
`	P	art i	(The total of amounts in columnecessarily equal the amounts	nns (b), (c), and (d) may not	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(0) Disbursements for charitable purposes
	—-	T •	Contributions, gifts, grants		765,618.		N/A	(cash basis only)
		2	. —	n is not required to attach Sch B	70370200	·		
		3	Interest on savings and tempor	· •				
		4	Dividends and interest from	m securities	6,874.	6,874.		STATEMENT 2
		5a	Gross rents			·····		
		ь	Net rental income or (loss)					ļ
\$	2 9	6a	Net gain or (loss) from sale of a Gross sales price for all		<9,380.>	•		STATEMENT 1
0 8 2018		1	assets on line 6a	494,008.		417,008.	,	<del>                                     </del>
00	Rev	7	Capital gain net income (from P	·		417,000.		
0		8	Net short-term capital gair Income modifications	•				_
MAR		-	Gross sales less returns and allowances			*****		
ž		١.	Less Cost of goods sold					
$\cap$		C	Gross profit or (loss)					
NED WITH		11	Other income	1			[ DECE	
\$		12	Total. Add lines 1 through	<u>111</u>	763,112.	423,882.	RECEI	
SCA区		13	Compensation of officers, direct		0.	0.	P NOV O O	1010 O
မ		14	Other employee salaries at	•			8 NOV 2 9	2018
	Ŋ	15	Pension plans, employee b Legal fees	Denetiks		<u> </u>	-	<u> </u>
	Expenses	h	Accounting fees				OGDEN	<del>vi UT - I</del>
	XO	C	Other professional fees					
	ē m	17	Interest					
	ağ.	18	Taxes	STMT 3	1,562.	0.		0.
	dministrative	19	Depreciation and depletion	a				<b></b>
	Ė	20	Occupancy					
	⋖	21	Travel, conferences, and m	neetings			<del> </del>	<del> </del>
	and	22	Printing and publications	<b>СТМШ</b> 1	1,825.	1,797.		20
	Operating and	23	Other expenses	STMT 4	1,023.	1,131.	<del>                                     </del>	28.
	erai	4	Total operating and admit expenses. Add lines 13 th		3,387.	1,797.		28.
	Ö	25	Contributions, gifts, grants		158,628.			158,628

623501 11-23-16 LHA For Paperwork Reduction Act Notice, see instructions.

Form **990-PF** (2016

28.

28. 158,628.

158,656.

3,387. 158,628.

162,015.

601,097.

N/A

1,797.

422,085.

25 Contributions, gifts, grants paid 26 Total expenses and disbursements.

b Net investment income (if negative, enter -0-)

c Adjusted net income (if negative, enter -0-)

Add lines 24 and 25 27 Subtract line 26 from line 12:

<b>-</b>	THE FEUERSTEIN	MAIEK FA	WTTA	
Form 990-PF (2016)	FOUNDATION INC			
	Attached schedules and amounts	in the description	Beginning of year	

	art	Balance Sheets Attached schedules and amounts in the description	Beginning of year	End of	year
Р	art .	column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing	67,190.	141,255.	141,255.
	2	Savings and temporary cash investments			
	3	Accounts receivable			
		Less; allowance for doubtful accounts ▶			
	4	Pledges receivable ►			
		Less; allowance for doubtful accounts			
	5	Grants receivable			
		Receivables due from officers, directors, trustees, and other			
		disqualified persons			
	7	Other notes and loans receivable			
	·	Less; allowance for doubtful accounts			
"	R	Inventories for sale or use			·
Assets		Prepaid expenses and deferred charges			<del></del>
As		Investments - U.S. and state government obligations			
		Investments - corporate stock STMT 5	0.	261,500.	268,500.
		Investments - corporate bonds			
		Investments - land, buildings, and equipment basis			
	••	Less accumulated depreciation		,	
	12	Investments - mortgage loans			
	13	Investments - other STMT 6	0.	265,532.	274,764.
		Land, buildings, and equipment basis			
	•	Less accumulated degreciation	·		
	15	Other assets (describe ►			
		Total assets (to be completed by all filers - see the		,,	
		instructions. Also, see page 1, item I)	67,190.	668,287.	684;519.
	17	Accounts payable and accrued expenses			
	18	Grants payable			
ı,	19	Deferred revenue			•
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
abil	21	Mortgages and other notes payable			j
Ë	22	Other liabilities (describe >)			
		-			
	23	Total liabilities (add lines 17 through 22)	0.	0.	•
		Foundations that follow SFAS 117, check here			
		and complete lines 24 through 26 and lines 30 and 31.			
es	24	Unrestricted			
and	25	Temporarily restricted			
Bal	26	Permanently restricted			
P		Foundations that do not follow SFAS 117, check here			
F		and complete lines 27 through 31.			
Š	27	Capital stock, trust principal, or current funds	0.	0.	
sets	28	Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.	
As	29	Retained earnings, accumulated income, endowment, or other funds	67,190.	668,287.	
Net Assets or Fund Balances	30	Total net assets or fund balances	67,190.	668,287.	
_	31	Total liabilities and net assets/fund balances	67,190.	668,287.	
三				,,=	·····
P	art	Milalysis of Changes in Net Assets of Fund Ba		·	
1	Total	net assets or fund balances at beginning of year - Part II, column (a), line	30		

1 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	67,190.
2 Enter amount from Part I, line 27a	2	601,097.
3 Other increases not included in line 2 (itemize)	3	0.
4 Add lines 1, 2, and 3	4	668,287.
5 Decreases not included in line 2 (itemize)	5	0.
6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30	6	668,287.

Form **990-PF** (2016)

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158,656.

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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.

7

See the Part VI instructions.

8 Enter qualifying distributions from Part XII, line 4

Form 990-PF (2016) FOUNDATION INC		27 205	71020	_
Form 990-PF (2016) FOUNDATION INC  Part VI Excise Tax Based on Investment Income (Section 4)	940(a) 4940(b) 4940(a) or 4	$\frac{27-397}{948-599}$		Page 4
<u> </u>		7 7 7	#ISCI GCCIOIIS	<u> </u>
1a Exempt operating foundations described in section 4940(d)(2), check here a	•			
Date of ruling or determination letter: (attach copy of letter i  b Domestic foundations that meet the section 4940(e) requirements in Part V, check here		1	8,4	42
of Part I, line 27b	and enter 1%	<del>-'</del>	0,4	<del>-2</del>
c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter	r 4% of Part 1 line 12 col /h)			
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only		2		
3 Add lines 1 and 2	y. Others enter -o-y	3	8,4	
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations on	ly. Others enter -0-)	4		0.
5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	y. outlot of the control of the cont	5	8,4	
6 Credits/Payments:				
a 2016 estimated tax payments and 2015 overpayment credited to 2016	6a   1,920.		•	
<b>b</b> Exempt foreign organizations - tax withheld at source	6b	1		
c Tax paid with application for extension of time to file (Form 8868)	6c	7		1
d Backup withholding erroneously withheld	6d	] _		
7 Total credits and payments. Add lines 6a through 6d		7	1,9	20.
8 Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is	attached	8		17.
9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	SEE STATEMENT 7 ▶	9	6,5	39.
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpa	id . ▶	10		
11 Enter the amount of line 10 to be: Credited to 2017 estimated tax	Refunded ▶	11		
Part VII-A Statements Regarding Activities			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
1a During the tax year, did the foundation attempt to influence any national, state, or local	egislation or did it participate or intervend	e in	Yes	
any political campaign?			1a	X
<b>b</b> Did it spend more than \$100 during the year (either directly or indirectly) for political pu	irposes (see instructions for the definition	1)?	1b	_X
If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities	es and copies of any materials publish	ned or	] ] ]	
distributed by the foundation in connection with the activities				
c Did the foundation file Form 1120-POL for this year?			1c	<u>X</u>
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during	·			1
(1) On the foundation. > \$ (2) On foundation mana		_		1
e Enter the reimbursement (if any) paid by the foundation during the year for political exp managers. > \$ 0 •	enditure tax imposed on foundation		1 1 1	
	no IPS2		2	 X
2 Has the foundation engaged in any activities that have not previously been reported to the	it ing,		-   -	<del>-</del>
If "Yes," attach a detailed description of the activities  3 Has the foundation made any changes, not previously reported to the IRS, in its government.	ng instrument articles of incorporation of	nr.		
bylaws, or other similar instruments? If "Yes," attach a conformed copy of the cha		"	3	X
4a Did the foundation have unrelated business gross income of \$1,000 or more during the			4a	<u>x</u>
b If "Yes," has it filed a tax return on Form 990-T for this year?	, va.	N/A	4b	
5 Was there a liquidation, termination, dissolution, or substantial contraction during the y	ear?	-	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	ed either:			
By language in the governing instrument, or				1
By state legislation that effectively amends the governing instrument so that no mand	atory directions that conflict with the state	e law		
remain in the governing instrument?			6 X	
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 X	
			1 1 1	1
8a Enter the states to which the foundation reports or with which it is registered (see instru	ictions) >		_	
ŊJ			_	Į.
<b>b</b> If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the	ne Attorney General (or designate)			
of each state as required by General Instruction G? If "No," attach explanation			8b X	
9 Is the foundation claiming status as a private operating foundation within the meaning of		ndar		(
year 2016 or the taxable year beginning in 2016 (see instructions for Part XIV)? If "Yes	•		9	<u> </u>
10 Did any persons become substantial contributors during the tax year? In "Yes," attach a so	hedule listing their names and addresses		10	<u>X</u>
		1	Form <b>990-PF</b> (	(2016)

	THE FEUERSTEIN MAIER FAMILY				
	1990-PF (2016) FOUNDATION INC	<u> 27-3971</u>	<u>.838</u>		Page 5
Pa	art VII-A   Statements Regarding Activities (continued)		<del>,</del>	,	,
			1	Yes	No
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of		ŀ		
	section 512(b)(13)? If "Yes," attach schedule (see instructions)		11		X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory p	ivileges?	}		
	If "Yes," attach statement (see instructions)		12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?		13	X	L
	Website address ► N/A				
14		<u>201-94</u>	7-1	000	
	Located at ► 140 SYLVAN AVENUE, ENGLEWOOD CLIFFS, NJ	ZIP+4 <b>▶</b> 07	632	_	
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here				ا_ا•
	and enter the amount of tax-exempt interest received or accrued during the year	15	N	/A	
16	At any time during calendar year 2016, did the foundation have an interest in or a signature or other authority over a bank,			Yes	
	securities, or other financial account in a foreign country?		16		X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the				İ
_	foreign country 🕨		<u> </u>		L
Pa	art VII-B   Statements Regarding Activities for Which Form 4720 May Be Required			,	
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.			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?	es 🗓 No			1
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)		] ]		ļ
	<del></del>	es 🗓 No			
	,, , , , , , , , , , , , , , , , , , , ,	es 🗓 No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	es 🗓 No			
	(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)?	es 🗓 No	1		
	(6) Agree to pay money or property to a government official? (Exception. Check "No"				
	if the 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.)	es 🗓 No			
b	If any answer is "Yes" to 1a(1)-(6), did any 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)?	N/A	1b		L
	Organizations relying on a current notice regarding disaster assistance check here				
C	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected				
	before the first day of the tax year beginning in 2016?		1c		Х
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private 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 6e, Part XIII) for tax year(s) beginning				'
		s X No			<b>i</b> '
	If "Yes," list the years - , , , , ,		1		
b	If "Yes," list the years ▶		1 1		1 1
	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach				
	statement - see instructions.)	N/A	2b		L
C	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			- 1	1
	<b>&gt;</b> ,,,,,,				
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time				1
	during the year?	es 🗓 No			
b	If "Yes," did it have excess business holdings in 2016 as a result of (1) any purchase by the foundation or disqualified persons after	er.			
	May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dis	spose			
	of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C	r			
	Form 4720, to determine if the foundation had excess business holdings in 2016)	N/A	3b		
	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?		48		X
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose	that			
	had not been removed from jeopardy before the first day of the tax year beginning in 2016?		4b		X
		For	m 990	-PF	(2016)

THE FEUERSTEIN MAIER FAMILY 27-3971838 Form 990-PF (2016) FOUNDATION INC Page 6 Part VII-B | Statements Regarding Activities for Which Form 4720 May Be Required (continued) •5a During the year did the foundation pay or incur any amount to: Yes X No (1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))? (2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, Yes X No any voter registration drive? Yes X No (3) Provide a grant to an individual for travel, study, or other similar purposes? (4) Provide a grant to an organization other than a charitable, etc., organization described in section Yes X No 4945(d)(4)(A)? (see instructions) (5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for Yes X No the prevention of cruelty to children or animals? b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations N/A 5b section 53.4945 or in a current notice regarding disaster assistance (see instructions)? 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 from the tax because it maintained N/A 🗌 Yes 🔲 No expenditure responsibility for the grant? If "Yes." attach the statement required by Regulations section 53 4945-5(d) 6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on Yes X No a personal benefit contract? X 6b b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? If "Yes" to 6b, file Form 8870 Yes X No 7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? 7b b If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction? Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors 1 List all officers, directors, trustees, foundation managers and their compensation. (d) Contributions to employee benefit plans and deferred compensation (c) Compensation (b) Title, and average hours per week devoted to position (e) Expense account, other (If not paid, enter -0-) (a) Name and address allowances TRUSTEE HERBERT FEUERSTEIN 140 SYLVAN AVENUE ENGLEWOOD CLIFFS, NJ 07632 0.00 0 0 0. TRUSTEE REGINA FEUERSTEIN 140 SYLVAN AVENUE 0. 0 0. 07632 0.00 ENGLEWOOD CLIFFS, NJ TRUSTEE ROBERT FEUERSTEIN 140 SYLVAN AVENUE 07632 0.00 0 0. 0. ENGLEWOOD CLIFFS, ŊJ TRUSTEE LISA MAIER 140 SYLVAN AVENUE 0 0. 0. 0.00 ENGLEWOOD CLIFFS, NJ 07632 2 Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE." (b) Title and average (d) Contributions to

(a) Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	employee benefit plans and deferred compensation	account, othe allowances
NONE				
				l.
		<del> </del>		
		<u> </u>		
	_			
Total number of other employees paid over \$50,000		<u> </u>	<u> </u>	L(

Form 990-PF (2016)

Total. Add lines 1 through 3

Form 990-PF (2016) 27-3971838 FOUNDATION INC Page 8 Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.) Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes; 516,034. a Average monthly fair market value of securities 1a 88,265. b Average of monthly cash balances 1b c Fair market value of all other assets 1c 604,299. 1d d Total (add lines 1a, b, and c) e Reduction claimed for blockage or other factors reported on lines 1a and 0. 1e 1c (attach detailed explanation) 2 Acquisition indebtedness applicable to line 1 assets 2 604.299. Subtract line 2 from line 1d 3 9,064. 4 Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions) 595,235. Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4 5 Minimum investment return. Enter 5% of line 5 29,762. PartiXI■ 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.) 29,762. Minimum investment return from Part X, line 6 8,442. Tax on investment income for 2016 from Part VI, line 5 h Income tax for 2016. (This does not include the tax from Part VI.) 8,442. c Add lines 2a and 2b 2c 320. 3 Distributable amount before adjustments. Subtract line 2c from line 1 3 Recoveries of amounts treated as qualifying distributions 4 5 320. 5 Add lines 3 and 4 Deduction from distributable amount (see instructions) 6 Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1 Part:XIII Qualifying Distributions (see instructions) Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes: 158,656. a Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26 1a 1b b Program-related investments - total from Part IX-B 2 2 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes Amounts set aside for specific charitable projects that satisfy the: a Suitability test (prior IRS approval required) 3a b Cash distribution test (attach the required schedule) 3b Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4 4 158,656. Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment 0. income. Enter 1% of Part I, line 27b 158,656. Adjusted qualifying distributions. Subtract line 5 from line 4

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

Form 990-PF (2016)

4940(e) reduction of tax in those years.

Part XIII Undistributed Income (see instructions)

<del></del>				
	(a) Corpus	(b) Years prior to 2015	(c) 2015	(d) 2016
1 Distributable amount for 2016 from Part XI,				
line 7				21,320.
2 Undistributed income, if any, as of the end of 2016				
a Enter amount for 2015 only			0.	
b Total for prior years:				
<del></del>		0.		
3 Excess distributions carryover, if any, to 2016:				
a From 2011 115,761.			ı	Ì
b From 2012 124, 046.				
c From 2013 125,031.				
d From 2014 104,790. e From 2015 169,683.				
	639,311.			
f Total of lines 3a through e  4 Qualifying distributions for 2016 from	033,311.	<u> </u>	·	
Part XII, line 4: ▶\$ 158,656.				,
a Applied to 2015, but not more than line 2a	ļ		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				21,320.
e Remaining amount distributed out of corpus	137,336.			
5 Excess distributions carryover applied to 2016	0.			0,
(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:		•		
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	776,647.			
b Prior years' undistributed income. Subtract				
line 4b from line 2b		0.		
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		0.		
assessed d Subtract line 6c from line 6b. Taxable			· ·	
amount - see instructions		0.		
e Undistributed income for 2015. Subtract line				
4a from line 2a. Taxable amount - see instr.	1		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				1
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3) (Election	_			
may be required - see instructions)	0.			
8 Excess distributions carryover from 2011	115 561			
not applied on line 5 or line 7	115,761.			
9 Excess distributions carryover to 2017.	660 006			
Subtract lines 7 and 8 from line 6a	660,886.			
10 Analysis of line 9:	j			
a Excess from 2012 124,046. b Excess from 2013 125,031.		ŀ		
404 500	ļ			
150-500	ļ			}
207 206	Í			
e Excess from 2016   137,336.	<del></del>			Form 990-PF (2016)

623581 11-23-16

Form 990-PF (2016) FOUNDATION INC

| Part-XVI | Supplementary Information (continued)

27-3971838 Page 11

3 Grants and Contributions Paid During the	Year or Approved for Future F	ayment		
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		
a Paid during the year		-		
	}			
SEE ATTACHED				
				158,628
<u> </u>				
	<u> </u>			
Total .	<del></del>		▶ 3a	158,628
<b>b</b> Approved for future payment				
<b>v</b>		i		
NONE				
	1			
<del></del>				
,			-	
			1	
Total			<u>▶ 3b</u>	0. m <b>990-PF</b> (2016

THE FEUERSTEIN MAIER FAMILY FOUNDATION INC

Enter gross amounts unless otherwise indicated.		business income		ed by section 512, 513, or 514	(e)	
	(a) Business	(b) Amount	Exclu- sion code	(d) Amount	Related or exempt function income	
1 Program service revenue:	code		Code			
a	<del>                                     </del>		1			
b	<del>  </del>		+ -+			
c	1		1 1		<u>.                                      </u>	
d	<del>                                     </del>		1 1	- +		
e	<del>                                     </del>	<del></del>	1 1			
f	<del>   </del>		<del>                                     </del>			
g Fees and contracts from government agencies	<del>                                     </del>		1		<del></del>	
2 Membership dues and assessments	<del>                                     </del>		1			
3 Interest on savings and temporary cash	1 1		1			
Investments 4 Dividends and interest from securities			14	6,874.		
5 Net rental income or (loss) from real estate	+	-				
a Debt-financed property	<del>                                     </del>		1 1			
b Not debt-financed property	<del>  </del>		1 1			
6 Net rental income or (loss) from personal	<del>                                     </del>		† †			
property	1 1					
7 Other investment income			<del>                                     </del>		<u>-</u>	
8 Gain or (loss) from sales of assets other			$\Box$			
than inventory			18	<9,380.>		
9 Net income or (loss) from special events			<del>                                     </del>			
10 Gross profit or (loss) from sales of inventory		· · · · · · ·	1 1			
11 Other revenue:	<del></del>					
a						
b			1 1			
c						
d						
e		· ''				
12 Subtotal. Add columns (b), (d), and (e)		0.		<2,506.>	0.	
13 Total. Add line 12, columns (b), (d), and (e)				13	<2,506.>	
(See worksheet in line 13 instructions to verify calculations.)					-	
Part XVI-B Relationship of Activities to	the Accor	mplishment of Exe	empt l	Purposes		
Line No. Explain below how each activity for which inco			contribu	ited importantly to the accomp	lishment of	
the foundation's exempt purposes (other than	by providing tune	as for such purposes).			<del></del>	
N/A		<del></del>		<del></del>		
				<del></del>		
				<del>-</del>		
	_		-			
·	<del>-</del>					
			_			
<del></del>	<del></del>					

623621 11-23-16

Form 990-PF (2016) FOUNDATION INC

1 Did the organization directly or indirectly angage in any of the following with any other organization discribed in section \$01(c) of the Code (other than section \$01(c)3) organizations) or in section \$27, relating to political organizations?  1 Transfers from the reporting floundation to a noncharitable exempt organization of (1) Cash (2) Other assets  1 Different transactions; (3) Different organization of the political organization of (1) Sales of assets to a noncharitable exempt organization (3) Perchases of assets from a noncharitable exempt organization (4) Reinbursternity arrangements (4) Reinbursternity arrangements (5) Performance of services or membership or fundrasing solicitations (5) Performance of services or membership or fundrasing solicitations (6) Performance of services or membership or fundrasing solicitations (6) Performance of services or membership or fundrasing solicitations (6) Performance of services or pre-pre-pre-pre-pre-pre-pre-pre-pre-pre-	Part XVII	Information Re Exempt Organ		sfers To a	and Transactions a	ınd Relations	hips With Nonchari	table		
Tankers from the reporting foundation to a noncharatable exempt organization of:  (1) Cash (2) Other sacess  (3) Other transactions:  (1) Sake of assets to a noncharatable exempt organization (2) Purchases of assets from a noncharatable exempt organization (3) Rental of tacilities, equipment, or other assets (4) Reimburstened transactions: (5) Surfaces of assets from a noncharatable exempt organization (5) Purchase of assets from a noncharatable exempt organization (6) Performance of services or membership or fundrating solicitations (7) Sales of dassets from a noncharatable exempt organization (8) Rental of tacilities, equipment, or other assets (8) Performance of services or membership or fundrating solicitations (8) Performance of services or membership or fundrating solicitations (9) Performance of services or membership or fundrating solicitations (9) Performance of services or membership or fundrating solicitations (9) Performance of services or membership or fundrating solicitations (9) Performance of services or membership or fundrating services of services grown by the reporting foundation. If the boundation developed contains the services of services grown by the reporting foundation. If the boundation developed contains the services of services grown by the reporting foundation. If the boundation developed contains the services of services grown by the reporting foundation. If the boundation developed contains the services of services grown by the reporting foundation. If the boundation developed contains the services received (a) Leviner (b) Amount involved (c) Name of noncharitable exempt organization (d) Description of relationships  1 In Yes, Complete the following schedule.  2 In In Yes, Complete the following schedule.  2 In Yes (Something the following schedule and submittened withing present has any transaction or relationships (f) Printing and the services of the present of the services of the ser	1 Did the or			of the following	ng with any other organizati	on described in sec	tion 501(c) of		Yes	No
a Transfers from the reporting foundation to a noncharitable exempt organization of:    13   California				,						
13   13   13   13   13   13   13   13										
Table   The sasets   Table										
Differ transactions:	• •									
(1) Sales of assets to a nonchardable exempt organization  (2) Purchases of assets from a nonchardable exempt organization  (3) Rental of facilities, equipment, or other assets.  (4) Rembursement arrangements  (5) Loans or float purarhers  (5) Loans or float purarhers  (6) Performance of services or membership or fundrasing solicitations  (6) Rental of an purarhers  (7) Loans or float purarhers  (8) Performance of services or membership or fundrasing solicitations  (8) Rental of the above is "ves, complete the following schedule. Column (a) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement. Show in column (a) have with the following schedule.  (3) Line so  (4) Amount involved  (5) Name of noncharitable exempt organization  (6) Name of noncharitable exempt organization  (6) Name of noncharitable exempt organization  (7) Amount involved  (8) Amount involved  (9) Amount involved  (9) Amount involved  (9) Amount involved  (1) Line so  (1) Amount involved  (1) Line so  (1) Amount involved  (2) Name of organization  (3) Name of organization  (4) Description of relationship  (5) Description of relationship  (6) Type of organization  (7) Description of relationship  (9) Name of organization  (1) Type of organization  (1) Type of organization  (1) Description of relationship  (2) Name of organization  (3) Name of organization  (4) Description of relationship  (5) Description of relationship  (6) Type of organization  (9) Description of relationship  (1) Type is in section 3277  (1) Type is in section 3277  (2) Name of organization  (3) Type is in section 3277  (4) Name of organization  (5) Type of organization  (6) Description of relationship  (7) Type is in section 3277  (8) Type is in section 3277  (9) Type is in section 3277  (1) Type is in section 3277  (2) Type is in section 3277  (3) Type is in section 3277  (4) Type is in section 3277  (5) Type is in s	• •									
[2] Perchases of assets from a nonchardrable exempt organization  [3] Rental of tactitues, equipment, or other assets  [4] Reimbursement arrangements  [5] Loans or loan guarantees  [6] Performance of services or membership or fundraising solicitations  [6] Services or membership or fundraising solicitations  [7] It the answer to any of the above "x-s"; complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (b) the value of the goods, other assets, or services received  [4] Una zo (b) Amount involved (c) Name of noncharitable exempt organization (d) Description of services, and description in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?  [4] Name of organization (b) Type of organization (c) Description of relationship N/A  [5] Under cereibhes of party 1 (shafe that have seemed the cream, including secondarying schedules, and distances, and to the beat of my knowledge lates in the preserve significant or the preserve has not included the prese			1b(1)		X					
Sample of tacelities, equipment, or other assets   10   X   15   15   X   16   X   X   16   X   X   16   X   X   X   16   X   X   X   X   X   X   X   X   X	, ,		• =							-
(4) Reimbursement arrangements (5) Loans or loan guarantees (5) Loans or loan guarantees (6) Loans or loan guarantees (7) Performance of services or membership or fundrasing solicitations (8) Performance of services or membership or fundrasing solicitations (8) Performance of services or sembership or fundrasing solicitations (8) If the answer to any of the above is "Yss, complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or searces sceeners (8) Line to (9) Amount involved (9) Amount involved (9) Name of noncharitable exempt organization (9) Amount involved (9) Amount involved (9) Name of organization (9) Amount involved (9) Amount involved (9) Name of organization (d) Discogration of resolutions, and driving arrangements N/A  11 Yes, complete the following schedule. (9) Amount involved (9) Amount involved (9) Name of organization (d) Discogration of resolutions, and driving arrangements (9) If Yes No (9) If Yes Organization (d) Discogration of resolutions, and driving arrangements (9) If Yes No (9) Amount involved (10) Amoun			•	<b>3</b>						-
(5) Loans or loan guarantees  (8) Performance of services or membership or fundraising solicitations  (9) Performance of services gramment, making lists, other assets, or paid employees  4 If the answer to any of the above is "Yes," complete the following schedulis. Column (b) should always show the fair market value of the goods, other assets, or services greatly be reported froundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received  (a) Name of look assets, or services received  (b) Amount involved  (c) Name of nontariable exempt organization  (d) Discorption of warders, beneations, and sharing arrangements and sharing arrangements and sharing arrangements are serviced in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?  (a) If Yes, "complete the following schedule.  (a) Name of organization  (b) Type of organization  (c) Description of relationship  N/A  Sign Indicated, in a vivo, confidency and indicated the return, including accompanying schedules and statements, and to the best of my knowledge in the property of the p					-					
(6) Performance of services or membership or fundrissing solicitations  8 Sharing of facilities, equipment, mailing lists, other assets, or paid employees  9 If the answer to any of the above is "es", compile the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (g) the value of the goods, other assets, or services received.  (a) Line inc.  (b) Amount involved  (c) Name of noncharitable exempt organization  (d) Disscription of transfers, sensearcions, and sharing arrangements.  N/A  2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than sections 501(c)(3)) or in section 527?    Yes   X   No	• •	<del>-</del>								X
Staring of facilities, equipment, mailing lists, other assets, or paid employees  It IX  If It is answer to any of the above is "Yes," complete the following schedule. Column (8) should always show the fair market value of the goods, other assets, or services received  (a) Line no (b) Amount involved (c) Nams of noncharitable exempt organization  (b) Amount involved (c) Nams of noncharitable exempt organization  (d) Description of transfers, transfers, and sharing arrangements  In IV as  2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exampt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?  b If "Yes," complete the following schedule.  (a) Marke of organization  (b) Type of organization  (c) Oescription of relationship  In IV as  If the foundation directly or indirectly affiliated with, or related to, one or more tax-exampt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?  b If "Yes," complete the following schedule.  (a) Marke of organization  (b) Type of organization  (c) Oescription of relationship  N/A  If the foundation directly or indirectly affiliated with, or related to, one or more tax-exampt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?  b If "Yes," complete the following schedule.  (a) Marke of organization  (b) Type of organizations (c) Oescription of relationship  N/A  If the foundation directly or indirectly affiliated with, or related to, one or more tax-exampt organizations described in section 501(c)(3)) or in section 527?  b If "Yes," complete the following schedule.  (a) Marke of organization  (b) Type of organizations described in schedules and schedules and schedules and schedules and schedules.  If the foundation directly or indirectly affiliated with, or related to, one or more tax-exampt organizations described in schedules.  (b) Type of organizations described in schedules.  (c	• •	=	mbership or fundrais	sing solicitatio	ons					
d If the answer to any of the above is "vis," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services green by the reporting foundation. If the following schedule.  (a) Line no (b) Amount involved (c) Name of noncharitable exempt organization (d) Description of transfers, transactions, and sharing arrangement, show in column (g) the value of the goods, other assets, or services received  (a) Line no (b) Amount involved (c) Name of noncharitable exempt organization (d) Description of transfers, transactions, and sharing arrangements  N/A  2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?  b. If Yes," complete the following schedule.  (a) Name of organization (b) Type of organization (c) Description of relationship  N/A    Under penalties of paraly 1 offully that I have exemined this return, including a econography g schedules and alternative, and to the beat of my knowledge than the transport of the property of the	· ·		,	-						_
(a) Line no (b) Amount involved (c) Name of noncharitable exempt organization (d) Description of burinfurs, bandactions, and shuring arrangements  N / A  2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 52??  If 'Yes,' complete the following schedule.  (a) Name of organization (b) Type of organization (c) Description of relationship  N / A    Under penalties of paying' i delice that I have exemined this return, including accompanying schedules and statements, and to the best of my knowledge without the following schedule.    One penalties of paying' i delice that I have exemined the return, including accompanying schedules and statements, and to the best of my knowledge without the proper what any knowledge schedule.    One penalties of paying' i delice that I have exemined the return, including accompanying schedules and statements, and to the best of my knowledge without the proper what any knowledge is companying schedules and statements and the following schedules.    One penalties of paying i delice that I have exemined the return, including accompanying schedules and statements, and to the best of my knowledge without the proper with the proper schedules and statements.    One penalties of paying i delice that I have exemined the return, including accompanying schedules and statements, and to the best of my knowledge without the proper with the proper with the proper schedules and statements.    One penalties of paying i delice that I have exemined the return, including accompanying schedules and statements, and to the best of my knowledge without the proper with the proper with the proper with the proper schedules and statements.    One penalties of the paying in t	-		- '	•		ways show the fair	market value of the goods, o	ther ass	ets,	
(8) Les no (b) Amount involved (c) Name of noncharitable exempt organization (d) Description of transfers, transactions, and sharing errangements N/A  2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?  3. If Yes, complete the following schedule.  (a) Name of organization (b) Type of organization (c) Description of relationship  N/A  Sign in the foundation of payer 3 of other than we examined this return, including accompanying schedules and statements, and to the best of my knowledge when the payer of the following schedules.  Sign in the following the following schedule.  Primy Type preparer's name  JAMES TOTO  Firm's name MAZARS USA LLP  Firm's address ▶ 135 WEST 50TH STREET  NEW YORK, NY 10020-0002  Phone no. (212) 812-7000	or service	s given by the reporting fo	oundation. If the four	ndation receive	ed less than fair market valu	ie in any transaction	n or sharing arrangement, sh	ow in		
N/A  2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 52??  b if "ves," complete the following schedule.  (a) Name of organization  (b) Type of organization  (c) Description of relationship  N/A   Under pariathes of pay any 1 debuty that I have examined the return, including excompanying schedules and statements, and to the based of my knowledge and belief, it is true, complet (includinglate) Description of relationship  N/A   Under pariathes of pay any 1 debuty that I have examined the return, including excompanying schedules and statements, and to the based of my knowledge and belief, it is true, complet (includinglate) Description of relationship  N/A  Print/Type preparer's name  Preparery Syndams  Print/Type preparer's name  Preparery Syndams  Date  II.   Y- /   X  Firm's name MAZARS USA LLP  Firm's address MAZARS USA LLP  Firm's address MAZARS USA LLP  Firm's address MAZARS USA LLP  Phone no. (212) 812–7000	column (d	t) the value of the goods,	other assets, or serv	ices received						
2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 52??  b If Yes, complete the following schedule.  (a) Name of organization  (b) Type of organization  (c) Description of relationship  N/A    Volume of organization   (c) Description of relationship    N/A	(a) Line no	(b) Amount involved	(c) Name of	noncharitable	e exempt organization	(d) Description	on of transfers, transactions, and si	aring erre	ngemen	nts
In section 501(c) of the Code (other than section 501(c)(3)) or in section 527?    Yes				N/A						
In section 501(c) of the Code (other than section 501(c)(3)) or in section 527?    Yes										
In section 501(c) of the Code (other than section 501(c)(3)) or in section 527?    Yes										
In section 501(c) of the Code (other than section 501(c)(3)) or in section 527?    Yes										
In section 501(c) of the Code (other than section 501(c)(3)) or in section 527?    Yes										
In section 501(c) of the Code (other than section 501(c)(3)) or in section 527?    Yes										
In section 501(c) of the Code (other than section 501(c)(3)) or in section 527?    Yes										
In section 501(c) of the Code (other than section 501(c)(3)) or in section 527?    Yes										
In section 501(c) of the Code (other than section 501(c)(3)) or in section 527?    Yes										
In section 501(c) of the Code (other than section 501(c)(3)) or in section 527?    Yes										
In section 501(c) of the Code (other than section 501(c)(3)) or in section 527?    Yes										
In section 501(c) of the Code (other than section 501(c)(3)) or in section 527?    Yes										
In section 501(c) of the Code (other than section 501(c)(3)) or in section 527?    Yes										
In section 501(c) of the Code (other than section 501(c)(3)) or in section 527?    Yes										
In section 501(c) of the Code (other than section 501(c)(3)) or in section 527?    Yes										
In section 501(c) of the Code (other than section 501(c)(3)) or in section 527?    Yes										
Sign   Under penalties of perput   declays that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct and/complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge   May the IRS discuss this return with the preparer shown below (see inst )?   TRUSTEE   TRUSTEE   TRUSTEE   True	2a Is the four	ndation directly or indirect	tly affiliated with, or i	elated to, one	or more tax-exempt organi	zations described				
Sign   Under penalties of perjunt 1 declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct and/complete Declaration of preparer (other than taxpayer) is based on all information of which preparer shown below (see inst )?   TRUSTEE   TRUSTEE   TRUSTEE   Truit   Tr	in section	501(c) of the Code (other	than section 501(c)	(3)) or in sect	tion 527?			Yes	X	No
(c) Description of relationship  N/A  Under penalties of perpural additions that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct and complete Dectaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge  TRUSTEE  TRUSTEE  TRUSTEE  Print/Type preparer's name  Preparer's signature  Print/Type preparer's name  JAMES TOTO  Firm's name ► MAZARS USA LLP  Firm's address ► 135 WEST 50TH STREET  NEW YORK, NY 10020-0002  Phone no. (212) 812-7000		• • •		, ,,				_		_
Sign Here    Under penalties of perjuny   I declars that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct find complete Declaration of prepare (other than taxpayer) is based on all information of which prepare has any knowledge return with the prepare shown below (see in str.)?   TRUSTEE   May the IRS discuss this return with the prepare shown below (see in str.)?   X yes   No					(b) Type of organization	1	(c) Description of relationsh	ıp		
Sign   Here   Signature of officer or trustee   Date   Title		N/A								
Sign   Here   Signature of officer or trustee   Date   Title										
Sign Here    Name							<u></u>			
Sign Here    Name							-			
Sign   Here   Signature of officer or trustee   Date   Title		1								
Here    And belief, it is true, correct and complete Dectaration of preparer (other than taxpayer) is based on all information of which preparer shown below (see inst.)?   TRUSTEE	L L							the IRS d	servise th	nie
Paid Print/Type preparer's name  Preparer Use Only  Paid Print/Type preparer's Name  Preparer's signature Print/Type preparer's name Print/T	Sign	elief, it is true, correct and com	plete Declaration of prej	parer (other than	taxpayer) is based on all informa	tion of which preparer i	retur	n with the	prepare	ar .
Paid Print/Type preparer's name  Preparer's signature  Print/Type preparer's name  Preparer's signature  Date  Check if PTIN self- employed  Proparer's signature  Print's elin ► 13-1459550  Firm's address ► 135 WEST 50TH STREET  NEW YORK, NY 10020-0002  Phone no. (212) 812-7000	Here					TRUST		_		7 I
Paid Preparer Use Only    Image: Name   Nazars   Usa LLP   Image: Name   Nazars   Name   Nazars   Name   Nazars   Name   Nazars	Sigr	nature of officer or trustee			Date	. ———				,
Paid JAMES TOTO   11-14-18   P00229579		Print/Type preparer's na	me	Preparer's s	guature	Date	Check If PTIN			
Preparer Use Only         Firm's name         ► MAZARS USA LLP         Firm's EIN         ► 13-1459550           Firm's address         ► 135 WEST 50TH STREET         Phone no. (212) 812-7000		·			W .		self- employed			
Preparer Use Only         Firm's name         ► MAZARS USA LLP         Firm's EIN         ► 13-1459550           Firm's address         ► 135 WEST 50TH STREET         Phone no. (212) 812-7000	Paid	JAMES TOTO				11-14-18	P00	229!	579	
Use Only   Firm's address ► 135 WEST 50TH STREET   Phone no. (212) 812-7000	Preparer		ARS USA L	LP	<u> </u>	·				
NEW YORK, NY 10020-0002 Phone no. (212) 812-7000	•		·	-					-	
NEW YORK, NY 10020-0002 Phone no. (212) 812-7000	•	Firm's address ▶ 13	5 WEST 50	TH STR	EET		<del> </del>			
							Phone no (212)	812-	-700	0.0
	<del></del>				- <u> </u>					

CONTINUATION FOR 990-PF, PART IV FOUNDATION INC
Part IV | Capital Gains and Losses for Tax on Investment Income 27-3971838 PAGE 1 OF 1

Part IV   Capital Gains and Los	sses for Tax on Investment Income				
	d describe the kind(s) of property sole rick warehouse; or common stock, 20		(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a 1500 SH CONNEC	TONE BANCORP INC		D	VARIOUS	03/17/17
	TONE BANCORP INC		D	VARIOUS	03/17/17
	TONE BANCORP INC		D	VARIOUS	03/17/17
d 500 SH CONNEC	TONE BANCORP INC		D	VARIOUS	03/17/17
e 4000 SH CONNEC	TONE BANCORP INC		D	VARIOUS	06/09/17
f 7500 SH CONNECT	TONE BANCORP INC		D	VARIOUS	10/26/17
	TONE BANCORP INC		D		12/16/16
h 900 SH CONNECTO	ONE BANCORP INC		D	VARIOUS	12/16/16
				<u></u>	<u> </u>
				<u> </u>	
<u>k</u>				<u> </u>	
	<u> </u>			ļ	<u> </u>
m				ļ	<del> </del>
n					ļ
0				<u> </u>	<u> </u>
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		) Gain or (loss) plus (f) minus (g)	
a 36,262.		6,000.			30,262.
b 24,181.		4,000.		<u> </u>	20,181.
c 18,174.		3,000.		<u> </u>	15,174.
d 12,107.		2,000.	· <del></del>		10,107.
e 99,828.		16,000.			83,828.
f 199,621.		30,000.			169,621.
g 80,436.		12,400.		<del>_</del>	68,036.
h 23,399.		3,600.			19,799.
<del></del>					
<u>k</u>					
<u>-</u>				<u> </u>	
m n					<del></del>
0				_	
	g gain in column (h) and owned by t	ne foundation on 12/31/69	(1) 1 09	ses (from col. (h)	1
	(j) Adjusted basis	(k) Excess of col. (i)	Gains (excess o	of col. (h) gain òve	
(i) F.M.V. as of 12/31/69	as of 12/31/69	over col. (j), if any	but n	ot less than "-0-")	
a		****			30,262.
b					20,181.
c					15,174.
d					10,107.
е					83,828.
<u>f</u>					169,621.
<u>g</u>					68,036.
h					19,799.
1					
k					
m					
<u>n</u>					
0	l		·	<u> </u>	
2 Capital gain net income or (net ca	pital loss) { If gain, also enter If (loss), enter "-0-	in Part I, line 7 " in Part I, line 7	2		417,008.
3 Net short-term capital gain or (los					_
If gain, also enter in Part I, line 8,	column (c).	``		A.F. 1-	
If (loss), enter "-0-" in Part I, line 8	· · · · · · · · · · · · · · · · · · ·		3	N/A	

623591 04-01-16

## 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 qov/form990.

2016

OMB No 1545-0047

Name of the organization

THE FEUERSTEIN MAIER FAMILY FOUNDATION INC

**Employer identification number** 

27-3971838

Organization type (check o	ne)
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
	4947(a)(1) nonexempt charitable trust treated as a private foundation
	501(c)(3) taxable private foundation
Note: Only a section 501(c)(	covered by the <b>General Rule</b> or a <b>Special Rule</b> .  7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions
General Rule	
	filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.
Special Rules	
sections 509(a)(1) a any one contributo	described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from r, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, line 1. Complete Parts I and II.
year, total contribu	described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the tions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for ruelty to children or animals. Complete Parts I, II, and III
year, contributions is checked, enter h purpose Don't con	described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the exclusively for religious, chantable, etc., purposes, but no such contributions totaled more than \$1,000. If this box ere the total contributions that were received during the year for an exclusively religious, chantable, etc., applete any of the parts unless the General Rule applies to this organization because it received nonexclusively except the contributions totaling \$5,000 or more during the year.
but it must answer "No" on	at isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to be 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
THE FEUERSTEIN MAIER FAMILY
FOUNDATION INC

Employer identification number

27-3971838

Part I	Contributors (See instructions) Use duplicate copies of Part I if additional	ıl space ıs needed	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	HERBERT FEUERSTEIN  1530 PALISADES AVENUE  FORT LEE, NJ 07024	\$ 255,206.	Person Payroll Noncash X (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	ROBERT FEUERSTEIN  14 RIO VISTA DRIVE PO BOX 698  ALPINE, NJ 07620	\$ <u>255,206.</u>	Person Payroli Noncash X (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3	LISA & GARY FEUERSTEIN  60 MAYFLOWER DRIVE  TENAFLY, NJ 07670	\$ <u>255,206.</u>	Person Payroli 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 Oncash Complete Part II for noncash contributions )
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
623452 10-18	1.16	\$Schedule B (Forms	Person Payroll Noncash (Complete Part II for noncash contributions)  990, 990-EZ, or 990-PF) (2016)

Name of organization
THE FEUERSTEIN MAIER FAMILY
FOUNDATION INC

Employer identification number

27-3971838

?art II	Noncash Property (See instructions) Use duplicate copies of Part	<del></del> _	<del></del>
(a) No. from Part I	(b)  Description of noncash property given	·- (c) FMV (or estimate) (See instructions)	(d) Date received
1	9,750 SHS CONNECTONE BANCORP, INC.	_	
			12/16/16
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
2	9,750 SHS CONNECTONE BANCORP, INC.		
<del>-</del>		sss	12/16/16
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
3	9,750 SHS CONNECTONE BANCORP, INC.	_	
		\$\$\$	12/16/16
(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
		_	

Schedule B (Form 990, 990-EZ, or 990-PF) (2016) Page 4 **Employer identification number** Name of organization THE FEUERSTEIN MAIER FAMILY 27-3971838 FOUNDATION INC Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations Rart III completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year (Enter this info once) Use duplicate copies of Part III if additional space is needed (a) No. (d) Description of how gift is held from Part I (c) Use of gift (b) Purpose of gift (e) Transfer of gift Relationship of transferor to transferee Transferee's name, address, and ZIP + 4 (a) No. from Part I (d) Description of how gift is held (b) Purpose of gift (c) Use of gift (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from Part I (d) Description of how gift is held (c) Use of gift (b) Purpose of gift (e) Transfer of gift Relationship of transferor to transferee Transferee's name, address, and ZIP + 4 (a) No. (d) Description of how gift is held (c) Use of gift from (b) Purpose of gift (e) Transfer of gift

Transferee's name, address, and ZIP + 4

Relationship of transferor to transferee

FORM 99	0-PF G	AIN OR (LOSS) F	FROM SALE	OF	ASSETS	STA	ATEMENT 1
DESCRIF	(A) TION OF PROPERTY	•		F	MANNER CQUIRED	DATE ACQUIRED	DATE SOLD
1500 SH	CONNECTONE BANC	ORP INC				VARIOUS	03/17/17
	(B). GROSS SALES PRICE	(C) VALUE AT TIME OF ACQ.	(D) EXPENSE SALE	OF	(E) DEPRE	C. GAIN	(F) IOR LOSS
	36,262.	39,225.		0.		0.	<2,963.>
DESCRIP	(A) TION OF PROPERTY			P	MANNER CQUIRED	DATE ACQUIRED	DATE SOLD
1000 SH	CONNECTONE BANC	ORP INC		_		VARIOUS	03/17/17
	(B) GROSS SALES PRICE	(C) VALUE AT TIME OF ACQ.	(D) EXPENSE SALE	OF	(E) DEPRE	•	(F) I OR LOSS
	24,181.	26,150.		0.		0.	<1,969.>
DESCRIF	(A) TION OF PROPERTY	,		P	MANNER CQUIRED	DATE ACQUIRED	DATE SOLD
750 SH	CONNECTONE BANC	- CORP INC				VARIOUS	03/17/17
	(B) GROSS	(C) VALUE AT	(D) EXPENSE	OF	(E)		(F)
			SALE		DEPRE	C. GAIN	OR LOSS
	SALES PRICE 18,174.	TIME OF ACQ. 19,613.		0.		0. GAIN	OR LOSS <1,439.>
DESCRIP	SALES PRICE	19,613.					
	SALES PRICE 18,174. (A)	19,613.			MANNER	0.	<1,439.>
	SALES PRICE  18,174.  (A) TION OF PROPERTY	19,613.			MANNER	DATE ACQUIRED VARIOUS	<1,439.>

DESCRIP	(A) TION OF PROPERTY	r.			MANNER CQUIRED		ATE JIRED	DATE SOLD
4000 SH	CONNECTONE BANG	CORP INC				VARI	ous	06/09/17
	(B) GROSS SALES PRICE	(C) VALUE AT TIME OF ACQ.	(D) EXPENSE SALE	OF	(E) DEPRE	c.	GAIN	(F)
·	99,828.	104,600.		0.		0.		<4,772.>
DESCRIP	(A) TION OF PROPERTY	7			MANNER CQUIRED		ATE JIRED	DATE SOLD
7500 SH	CONNECTONE BANG	CORP INC				VARI	ous	10/26/17
	(B)	(C)	(D)		(E)			(F)
	GROSS SALES PRICE	VALUE AT TIME OF ACQ.	EXPENSE SALE	OF	DEPRE	c.	GAIN	OR LOSS
,	199,621.	196,125.		0.		0.		3,496.
DESCRIP	(A) TION OF PROPERTY	<u>-</u>			MANNER CQUIRED		TE VIRED	DATE SOLD
3100 SH	CONNECTONE BANC	CORP INC				VARI	OUS	12/16/16
	(B) GROSS SALES PRICE	(C) VALUE AT TIME OF ACQ.	(D) EXPENSE SALE	OF	(E) DEPRE	c.		(F) OR LOSS
•	80,436.	81,065.		0.		0.		<629.>
DESCRIP	(A) TION OF PROPERTY	7			MANNER CQUIRED		TE VIRED	: DATE SOLD
900 SH	CONNECTONE BANCO	PRP INC				VARI	ous	12/16/16
	(B) GROSS SALES PRICE	(C) VALUE AT TIME OF ACQ.	(D) EXPENSE SALE	OF	(E) DEPRE	c.		(F)
	23,399.	23,535.		0.		0.		<136.>
							· -	<del></del>
CAPITAL	GAINS DIVIDENDS	FROM PART IV						0.

FORM 990-PF DIVIDE	NDS AN	D INTER	EST	FROM SECUR	ITIES S'	PATEMENT 2
GROSS SOURCE AMOUN		CAPITAL GAINS IVIDEND		(A) REVENUE PER BOOKS	(B) NET INVEST- MENT INCOME	
MORGAN STANLEY 6,8	74.	<u> </u>	0.	6,874.	6,874.	
TO PART I, LINE 4 6,8	74.	0. 6,8		6,874.	6,874.	
FORM 990-PF		TAX	ES		S	FATEMENT 3
DESCRIPTION	EXP	(A) ENSES BOOKS		(B) F INVEST- WT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
FEDERAL EXCISE TAX		1,562.		0.		0.
TO FORM 990-PF, PG 1, LN 18		1,562.		0.	•	0.
FORM 990-PF		OTHER E	XPEN	ISES	S	PATEMENT 4
DESCRIPTION	EXP:	(A) ENSES BOOKS		(B) T INVEST- NT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
FILING FEES OTHER EXPENSES INVESTMENT MANAGEMENT FEES		28. 728. 1,069.	-	0. 728. 1,069.		28. 0. 0.
TO FORM 990-PF, PG 1, LN 23		1,825.		1,797.		28.

FORM 990-PF CORPORATE ST	POCK	STATEMENT 5
DESCRIPTION	BOOK VALUE	FAIR MARKET VALUE
MORGAN STANLEY - STOCK	261,500.	268,500.
TOTAL TO FORM 990-PF, PART II, LINE 10B	261,500.	268,500.

FORM 990-PF OT	THER INVESTMENTS		STATEMENT 6
DESCRIPTION	VALUATION METHOD	BOOK VALUE	FAIR MARKET VALUE
MORGAN STANLEY - FUNDS MORGAN STANLEY - MUTUAL FUNDS	COST	225,026. 40,506.	234,159. 40,605.
TOTAL TO FORM 990-PF, PART II, LI	NE 13	265,532.	274,764.

FORM 990-PF	INTER	EST AND	PENALT	'IES		STA	ATEMENT 7
TAX DUE FROM FORM 99 UNDERPAYMENT PENAL LATE PAYMENT INTER LATE PAYMENT PENAL	TY EST	VI					6,522 17: 234: 293:
TOTAL AMOUNT DUE							7,066
FORM 990-PF	Li	ATE PAY	MENT PE	CNALTY		STA	ATEMENT 8
·. DESCRIPTION	DA.	re	AMOUNT	BAL	ANCE	MONTHS	PENALTY
TAX DUE DATE FILED	03/1! 12/01				6,522. 6,522.		293
TOTAL LATE PAYMENT PE	NALTY			•			293.
FORM 990-PF	L	ATE PAY	MENT IN	TEREST		STA	TEMENT 9
DESCRIPTION	DATE	AMOU	NT	BALANCE	RAT	E DAYS	INTEREST
TAX DUE INTEREST RATE CHANGE DATE FILED	03/15/18 03/31/18 12/01/18	6	,522.	6,52 6,53 6,75	305		
TOTAL LATE PAYMENT IN	TEREST		•				234.

FORM 990-PF PART XV - LINE 1A STATEMENT 10
LIST OF FOUNDATION MANAGERS

NAME OF MANAGER

HERBERT FEUERSTEIN REGINA FEUERSTEIN ROBERT FEUERSTEIN LISA MAIER