Form **990-PF**

Department of the Treasury
Internal Revenue Service

Return of Private Foundation

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

▶ Do not enter social security numbers on this form as it may be made public.
▶ Information about Form 990-PF and its instructions is at *www.irs.gov/form990pf*.

OMB No 1545-0052

2017

Open to Public Inspection

For calendar year 2017, or tax year beginning 01-01-2017 , and ending 12-31-2017

Name of foundation
The Deerfield Partnership Foundation

% Deerfield Management Company

A Employer identification number
05-0618950

Number and street (or P O box number if mail is not delivered to street address)
780 third avenue 37th floor

Room/suite

B Telephone number (see instructions)
(212) 551-1600

City or town, state or province, country, and ZIP or foreign postal code
New York, NY 10017

C If exemption application is pending, check here ▶ ☐

G Check all that apply ☐ Initial return ☐ Initial return of a former public charity ☐ Final return ☐ Amended return ☐ Address change ☐ Name change

D 1. Foreign organizations, check here ▶ ☐
2 Foreign organizations meeting the 85% test, check here and attach computation ▶ ☐

H Check type of organization ☑ Section 501(c)(3) exempt private foundation ☐ Section 4947(a)(1) nonexempt charitable trust ☐ Other taxable private foundation

E If private foundation status was terminated under section 507(b)(1)(A), check here ▶ ☐

I Fair market value of all assets at end of year *(from Part II, col (c), line 16)*▶$ 12,208,319

J Accounting method ☑ Cash ☐ Accrual ☐ Other (specify)
(Part I, column (d) must be on cash basis)

F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here ▶ ☐

Part I **Analysis of Revenue and Expenses** *(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions))*

	Line	Description	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
Revenue	1	Contributions, gifts, grants, etc , received (attach schedule)	1,976,924			
	2	Check ▶ ☐ if the foundation is **not** required to attach Sch B				
	3	Interest on savings and temporary cash investments	4,801	4,801		
	4	Dividends and interest from securities				
	5a	Gross rents				
	b	Net rental income or (loss)				
	6a	Net gain or (loss) from sale of assets not on line 10	2,627,193			
	b	Gross sales price for all assets on line 6a 140,961				
	7	Capital gain net income (from Part IV, line 2)		2,682,160		
	8	Net short-term capital gain				
	9	Income modifications				
	10a	Gross sales less returns and allowances				
	b	Less Cost of goods sold				
	c	Gross profit or (loss) (attach schedule)				
	11	Other income (attach schedule)	809,575	809,594		
	12	**Total.** Add lines 1 through 11	5,418,493	3,496,555		
Operating and Administrative Expenses	13	Compensation of officers, directors, trustees, etc	0			
	14	Other employee salaries and wages				
	15	Pension plans, employee benefits				
	16a	Legal fees (attach schedule)				
	b	Accounting fees (attach schedule)				
	c	Other professional fees (attach schedule)				
	17	Interest				
	18	Taxes (attach schedule) (see instructions)	56,536			
	19	Depreciation (attach schedule) and depletion				
	20	Occupancy				
	21	Travel, conferences, and meetings				
	22	Printing and publications				
	23	Other expenses (attach schedule)	191,396	157,693		33,703
	24	**Total operating and administrative expenses.** Add lines 13 through 23	247,932	157,693		33,703
	25	Contributions, gifts, grants paid	3,310,000			3,310,000
	26	**Total expenses and disbursements.** Add lines 24 and 25	3,557,932	157,693		3,343,703
	27	Subtract line 26 from line 12				
	a	**Excess of revenue over expenses and disbursements**	1,860,561			
	b	**Net investment income** (if negative, enter -0-)		3,338,862		
	c	**Adjusted net income**(if negative, enter -0-)				

Part II	Balance Sheets — Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)	Beginning of year (a) Book Value	End of year (b) Book Value	(c) Fair Market Value
Assets	1 Cash—non-interest-bearing			
	2 Savings and temporary cash investments	2,268,766	2,538,841	2,538,841
	3 Accounts receivable ▶ Less allowance for doubtful accounts ▶			
	4 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)			
	7 Other notes and loans receivable (attach schedule) ▶ Less allowance for doubtful accounts ▶			
	8 Inventories for sale or use			
	9 Prepaid expenses and deferred charges			
	10a Investments—U S and state government obligations (attach schedule)			
	b Investments—corporate stock (attach schedule)	28,899		
	c 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)	6,668,492	8,287,877	9,669,478
	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)	8,966,157	10,826,718	12,208,319
Liabilities	17 Accounts payable and accrued expenses			
	18 Grants payable			
	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)	0	0	
Net Assets or Fund Balances	**Foundations that follow SFAS 117, check here** ▶ ☐ **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			
	28 Paid-in or capital surplus, or land, bldg , and equipment fund			
	29 Retained earnings, accumulated income, endowment, or other funds	8,966,157	10,826,718	
	30 **Total net assets or fund balances** (see instructions)	8,966,157	10,826,718	
	31 **Total liabilities and net assets/fund balances** (see instructions)	8,966,157	10,826,718	

Part III Analysis of Changes in Net Assets or Fund Balances

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	8,966,157
2	Enter amount from Part I, line 27a	2	1,860,561
3	Other increases not included in line 2 (itemize) ▶	3	
4	Add lines 1, 2, and 3	4	10,826,718
5	Decreases not included in line 2 (itemize) ▶	5	
6	Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30	6	10,826,718

Part IV Capital Gains and Losses for Tax on Investment Income

	(a) List and describe the kind(s) of property sold (e g , real estate, 2-story brick warehouse, or common stock, 200 shs MLC Co)	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
1 a	Publicly-traded Securities			
b	Passthrough K1 Capital Gain/(Loss)			
c				
d				
e				

	(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
a	140,961		87,842	53,119
b				2,629,041
c				
d				
e				

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69

	(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	(l) Gains (Col (h) gain minus col (k), but not less than -0-) **or** Losses (from col (h))
a				53,119
b				
c				
d				
e				

2 Capital gain net income or (net capital loss) { If gain, also enter in Part I, line 7 / If (loss), enter -0- in Part I, line 7 } **2** 2,682,160

3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6)
If gain, also enter in Part I, line 8, column (c) (see instructions) If (loss), enter -0- in Part I, line 8 . . . . } **3**

Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income

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

If section 4940(d)(2) applies, leave this part blank

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? ☐ Yes ☑ No
If "Yes," the foundation does not qualify under section 4940(e) Do not complete this part

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

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col (b) divided by col (c))
2016	3,532,571	9,275,398	0 380854
2015	3,635,674	10,117,786	0 359335
2014	3,373,578	6,756,209	0 49933
2013	2,390,550	4,167,472	0 573621
2012	2,522,073	2,768,098	0 911121

2	**Total** of line 1, column (d)	2	2 724261
3	Average distribution ratio for the 5-year base period—divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years	3	0 544852
4	Enter the net value of noncharitable-use assets for 2017 from Part X, line 5	4	6,223,087
5	Multiply line 4 by line 3	5	3,390,661
6	Enter 1% of net investment income (1% of Part I, line 27b)	6	33,389
7	Add lines 5 and 6	7	3,424,050
8	Enter qualifying distributions from Part XII, line 4	8	3,343,703

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

Part VI **Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see instructions)**

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 here ▶ ☐ and enter 1% of Part I, line 27b		1	66,777
c	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, col (b)			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)		2	
3	Add lines 1 and 2.		3	66,777
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)		4	
5	**Tax based on investment income.** Subtract line 4 from line 3 If zero or less, enter -0-		5	66,777
6	Credits/Payments			
a	2017 estimated tax payments and 2016 overpayment credited to 2017	**6a** 56,734		
b	Exempt foreign organizations—tax withheld at source	**6b**		
c	Tax paid with application for extension of time to file (Form 8868)	**6c**		
d	Backup withholding erroneously withheld	**6d**		
7	Total credits and payments Add lines 6a through 6d.		7	68,437
8	Enter any **penalty** for underpayment of estimated tax Check here ☑ if Form 2220 is attached		8	269
9	**Tax due.** If the total of lines 5 and 8 is more than line 7, enter **amount owed** ▶		9	
10	**Overpayment.** If line 7 is more than the total of lines 5 and 8, enter the **amount overpaid** ▶		10	1,391
11	Enter the amount of line 10 to be **Credited to 2018 estimated tax** ▶ 1,391	**Refunded** ▶	11	

Part VII-A **Statements Regarding Activities**

			Yes	No
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?	1a		No
b	Did it spend more than $100 during the year (either directly or indirectly) for political purposes (see Instructions for definition)?.	1b		No
	*If the answer is "Yes" to **1a** or **1b**, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities*			
c	Did the foundation file **Form 1120-POL** for this year?.	1c		No
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year **(1)** On the foundation ▶ $ ________ **(2)** On foundation managers ▶ $ ________			
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers ▶ $ ________			
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		No
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		No
4a	Did the foundation have unrelated business gross income of $1,000 or more during the year?.	4a		No
b	If "Yes," has it filed a tax return on **Form 990-T** for this year?.	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year? *If "Yes," attach the statement required by General Instruction T*	5	Yes	
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?	6	Yes	
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	Yes	
8a	Enter the states to which the foundation reports or with which it is registered (see instructions) ▶ NY			
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? *If "No," attach explanation* .	8b	Yes	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2017 or the taxable year beginning in 2017 (see instructions for Part XIV)? *If "Yes," complete Part XIV*	9		No
10	Did any persons become substantial contributors during the tax year? *If "Yes," attach a schedule listing their names and addresses*	10		No

Part VII-A Statements Regarding Activities (continued)

			Yes	No
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		No
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		No
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Yes	

Website address ▶

14 The books are in care of ▶ Deerfield Management Company Telephone no ▶ (212) 551-1600

Located at ▶ 780 Third Avenue 37th floor New York NY ZIP+4 ▶ 10017

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 |

			Yes	No
16	At any time during calendar year 2017, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country?	16		No
	See instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) If "Yes", enter the name of the foreign country ▶			

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required

				Yes	No
	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?	☐ Yes ☑ No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?	☐ Yes ☑ No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	☐ Yes ☑ No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	☐ Yes ☑ 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)?	☐ Yes ☑ No			
	(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).	☐ Yes ☑ 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)?		1b		
	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 2017?		1c		No
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))				
a	At the end of tax year 2017, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2017?	☐ Yes ☑ No			
	If "Yes," list the years ▶ 20____ , 20____ , 20____ , 20____				
b	Are there any years listed in 2a for which the foundation is **not** applying the provisions of section 4942(a)(2) (relating to incorrect 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)		2b		
c	If the provisions of section 4942(a)(2) are being applied to **any** of the years listed in 2a, list the years here ▶ 20____ , 20____ , 20____ , 20____				
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?	☐ Yes ☑ No			
b	If "Yes," did it have excess business holdings in 2017 as a result of **(1)** any purchase by the foundation or disqualified persons after May 26, 1969, **(2)** the lapse of the 5-year period (or longer period approved by the 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 Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2017).*		3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?		4a		No
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 2017?		4b		No

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

(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))? ☐ Yes ☑ No

(2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive? ☐ Yes ☑ No

(3) Provide a grant to an individual for travel, study, or other similar purposes? ☐ Yes ☑ No

(4) Provide a grant to an organization other than a charitable, etc , organization described in section 4945(d)(4)(A)? (see instructions) ☑ Yes ☐ No

(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals? ☐ Yes ☑ No

b If any answer is "Yes" to 5a(1)–(5), did **any** of the transactions fail to qualify under the exceptions described in Regulations section 53 4945 or in a current notice regarding disaster assistance (see instructions)? **5b** No

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 expenditure responsibility for the grant? ☑ Yes ☐ No

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 a personal benefit contract? ☐ Yes ☑ No

b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? **6b** No

If "Yes" to 6b, file Form 8870

7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? ☐ Yes ☑ No

b If yes, did the foundation receive any proceeds or have any net income attributable to the transaction? **7b**

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 (see instructions).

(a) Name and address	Title, and average hours per week **(b)** devoted to position	**(c)** Compensation **(If not paid, enter -0-)**	**(d)** Contributions to employee benefit plans and deferred compensation	**(e)** Expense account, other allowances
See Additional Data Table				

2 Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, enter "NONE."

(a) Name and address of each employee paid more than $50,000	Title, and average hours per week **(b)** devoted to position	**(c)** Compensation	**(d)** Contributions to employee benefit plans and deferred compensation	**(e)** Expense account, other allowances
Total number of other employees paid over $50,000. . . . . ▶				

3 Five 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
Total number of others receiving over $50,000 for professional services. . . . . ▶		

Part IX-A **Summary of Direct Charitable Activities**

List the foundation's four largest direct charitable activities during the tax year Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc	Expenses
1	
2	
3	
4	

Part IX-B **Summary of Program-Related Investments** (see instructions)

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1	
2	
All other program-related investments See instructions	
3	
Total. Add lines 1 through 3 . . . . ▶	

Part X Minimum Investment Return (All domestic foundations must complete this part Foreign foundations,see instructions)

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc , purposes		
a	Average monthly fair market value of securities.	1a	0
b	Average of monthly cash balances.	1b	2,450,124
c	Fair market value of all other assets (see instructions).	1c	3,867,731
d	**Total** (add lines 1a, b, and c).	1d	6,317,855
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation). 1e		
2	Acquisition indebtedness applicable to line 1 assets.	2	0
3	Subtract line 2 from line 1d.	3	6,317,855
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see instructions).	4	94,768
5	**Net value of noncharitable-use assets.** Subtract line 4 from line 3 Enter here and on Part V, line 4	5	6,223,087
6	**Minimum investment return.** Enter 5% of line 5.	6	311,154

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	311,154
2a	Tax on investment income for 2017 from Part VI, line 5.	2a	66,777		
b	Income tax for 2017 (This does not include the tax from Part VI).	2b			
c	Add lines 2a and 2b.			2c	66,777
3	Distributable amount before adjustments Subtract line 2c from line 1.			3	244,377
4	Recoveries of amounts treated as qualifying distributions.			4	
5	Add lines 3 and 4.			5	244,377
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, line 1.			7	244,377

Part XII Qualifying Distributions (see instructions)

1	Amounts paid (including administrative expenses) to accomplish charitable, etc , purposes		
a	Expenses, contributions, gifts, etc —total from Part I, column (d), line 26.	1a	3,343,703
b	Program-related investments—total from Part IX-B.	1b	0
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc , purposes.	2	0
3	Amounts set aside for specific charitable projects that satisfy the		
a	Suitability test (prior IRS approval required).	3a	0
b	Cash distribution test (attach the required schedule).	3b	0
4	**Qualifying distributions.** Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	3,343,703
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	3,343,703

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 4940(e) reduction of tax in those years

Part XIII Undistributed Income (see instructions)

		(a) Corpus	(b) Years prior to 2016	(c) 2016	(d) 2017
1 Distributable amount for 2017 from Part XI, line 7					244,377
2 Undistributed income, if any, as of the end of 2017					
a Enter amount for 2016 only.					
b Total for prior years 2015 , 2014 , 2013					
3 Excess distributions carryover, if any, to 2017					
a From 2012.	2,437,344				
b From 2013.	2,210,521				
c From 2014.	3,106,508				
d From 2015.	3,210,788				
e From 2016.	3,102,200				
f **Total** of lines 3a through e.		14,067,361			
4 Qualifying distributions for 2017 from Part XII, line 4 ▶ $ 3,343,703					
a Applied to 2016, but not more than line 2a					
b Applied to undistributed income of prior years (Election required—see instructions).					
c Treated as distributions out of corpus (Election required—see instructions).					
d Applied to 2017 distributable amount.					244,377
e Remaining amount distributed out of corpus		3,099,326			
5 Excess distributions carryover applied to 2017 *(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		17,166,687			
b Prior years' undistributed income Subtract line 4b from line 2b					
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed.					
d Subtract line 6c from line 6b Taxable amount —see instructions					
e Undistributed income for 2016 Subtract line 4a from line 2a Taxable amount—see instructions					
f Undistributed income for 2017 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2018					0
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions)					
8 Excess distributions carryover from 2012 not applied on line 5 or line 7 (see instructions) . . .		2,437,344			
9 **Excess distributions carryover to 2018.** Subtract lines 7 and 8 from line 6a		14,729,343			
10 Analysis of line 9					
a Excess from 2013. . . .	2,210,521				
b Excess from 2014. . . .	3,106,508				
c Excess from 2015. . . .	3,210,788				
d Excess from 2016. . . .	3,102,200				
e Excess from 2017. . . .	3,099,326				

Part XIV **Private Operating Foundations** (see instructions and Part VII-A, question 9)

1a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2017, enter the date of the ruling. . . . . . . ▶

b Check box to indicate whether the organization is a private operating foundation described in section ☐ 4942(j)(3) or ☐ 4942(j)(5)

	Tax year	Prior 3 years			(e) Total
	(a) 2017	**(b)** 2016	**(c)** 2015	**(d)** 2014	
2a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed					
b 85% of line 2a					
c Qualifying distributions from Part XII, line 4 for each year listed					
d Amounts included in line 2c not used directly for active conduct of exempt activities					
e Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the alternative test relied upon					
a "Assets" alternative test—enter **(1)** Value of all assets					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test— enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed					
c "Support" alternative test—enter **(1)** Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from an exempt organization					
(4) Gross investment income					

Part XV **Supplementary Information (Complete this part only if the organization had $5,000 or more in assets at any time during the year—see instructions.)**

1 Information Regarding Foundation Managers:

a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than $5,000) (See section 507(d)(2))

NONE

b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest

2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:

Check here ▶ ☑ if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds If the foundation makes gifts, grants, etc (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d

a The name, address, and telephone number or email address of the person to whom applications should be addressed

b The form in which applications should be submitted and information and materials they should include

c Any submission deadlines

d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors

Part XV Supplementary Information (continued)

3 Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year* See Additional Data Table				
Total . . . . ▶ **3a**				3,310,000
b *Approved for future payment*				
Total . . . . ▶ **3b**				

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated	Unrelated business income		Excluded by section 512, 513, or 514		(e) Related or exempt function income (See instructions)
	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	
1 Program service revenue					
a					
b					
c					
d					
e					
f					
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash investments			14	4,801	
4 Dividends and interest from securities					
5 Net rental income or (loss) from real estate					
a Debt-financed property					
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	2,627,193	
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue					
a K-1 Inc/Loss	525990	-19	14	809,594	
b					
c					
d					
e					
12 Subtotal Add columns (b), (d), and (e)		-19		3,441,588	

13 **Total.** Add line 12, columns (b), (d), and (e) 13 3,441,569

(See worksheet in line 13 instructions to verify calculations)

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

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

Part XVII **Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations**

		Yes	No
1 Did the organization directly or indirectly engage in any of the following with any other organization described in section 501 (c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?			
a Transfers from the reporting foundation to a noncharitable exempt organization of			
(1) Cash.	1a(1)		No
(2) Other assets.	1a(2)		No
b Other transactions			
(1) Sales of assets to a noncharitable exempt organization.	1b(1)		No
(2) Purchases of assets from a noncharitable exempt organization.	1b(2)		No
(3) Rental of facilities, equipment, or other assets.	1b(3)		No
(4) Reimbursement arrangements.	1b(4)		No
(5) Loans or loan guarantees.	1b(5)		No
(6) Performance of services or membership or fundraising solicitations.	1b(6)		No
c Sharing of facilities, equipment, mailing lists, other assets, or paid employees.	1c		No

d If the answer to any of the above is "Yes," 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 services received

(a) Line No	**(b)** Amount involved	**(c)** Name of noncharitable exempt organization	**(d)** Description of transfers, transactions, and sharing arrangements

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? ☐ Yes ☑ No

b If "Yes," complete the following schedule

(a) Name of organization	**(b)** Type of organization	**(c)** Description of relationship

Sign Here

Under penalties of perjury, I 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 has any knowledge

******	2018-10-31	******
Signature of officer or trustee	Date	Title

May the IRS discuss this return with the preparer shown below (see instr)? ☑ Yes ☐ No

Paid Preparer Use Only

Print/Type preparer's name	Preparer's Signature	Date	Check if self-employed ▶ ☐	PTIN
Jeffrey D Haskell				P01345770
Firm's name ▶ Foundation Source				Firm's EIN ▶
Firm's address ▶ One Hollow Ln Ste 212 Lake Success, NY 11042				Phone no (800) 839-1754

Form 990PF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
Alexis Caze 780 third avenue 37th floor New York, NY 10017	Pres 1 0	0	0	0
Libin Chen 780 third avenue 37th floor New York, NY 10017	Assistant Sec 1 0	0	0	0
David Clark 780 third avenue 37th floor New York, NY 10017	Dir 1 0	0	0	0
James Flynn 780 third avenue 37th floor New York, NY 10017	Dir 1 0	0	0	0
Howie Furst 780 third avenue 37th floor New York, NY 10017	VP 1 0	0	0	0
Jonathan Isler 780 third avenue 37th floor New York, NY 10017	Dir 1 0	0	0	0
Jonathan Leff 780 third avenue 37th floor New York, NY 10017	VP 1 0	0	0	0
Christine Livoti 780 third avenue 37th floor New York, NY 10017	VP 1 0	0	0	0
Dina Lucchesi 780 third avenue 37th floor New York, NY 10017	VP 1 0	0	0	0
Allison Miyake 780 third avenue 37th floor New York, NY 10017	Treas 1 0	0	0	0
Shannon Plumstead 780 third avenue 37th floor New York, NY 10017	Sec 1 0	0	0	0
Bryan Sendrowski 780 third avenue 37th floor New York, NY 10017	Treas 0	0	0	0
Paul Takats 780 third avenue 37th floor New York, NY 10017	VP 1 0	0	0	0
Charlotte Williamson 780 third avenue 37th floor New York, NY 10017	Assistant Sec 1 0	0	0	0
Jim Zenker 780 third avenue 37th floor New York, NY 10017	VP 1 0	0	0	0

Form 990PF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation

(a) Name and address	**(b)** Title, and average hours per week devoted to position	**(c)** Compensation **(If not paid, enter -0-)**	**(d)** Contributions to employee benefit plans and deferred compensation	**(e)** Expense account, other allowances
sumner anderson 780 third avenue 37th floor new york, NY 10017	pres 1 0	0	0	0

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

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
COALITION FOR THE HOMELESS INC 129 FULTON ST NEW YORK, NY 10038	N/A	PC	to Support the Child Advocate Program	70,000
FAMILY CENTER INC 493 NOSTRAND AVE STE 3 BROOKLYN, NY 11216	N/A	PC	2017 Harvest Ball Scholarship fund	25,000
IVUMED3269 S MAIN ST STE 230 SALT LAKE CITY, UT 84115	N/A	PC	Building Sustainable Access to Surgical Care for Children Wordwide project	75,000
Total . . . . ▶ **3a**				3,310,000

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

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
JACARANDA HEALTH 3041 MISSION ST PMB 602 SAN FRANCISCO, CA 94110	N/A	PC	Prenatal and Postpartum group classes for Mothers program	50,000
LAST MILE HEALTHPO BOX 130122 BOSTON, MA 02113	N/A	PC	Community Health Assistants in Liberia project	100,000
LITTLE SISTERS OF THE ASSUMPTION FAMILY HEALTH SER 333 E 115TH ST NEW YORK, NY 10029	N/A	PC	Maternal Outreach Program	180,000
Total . . . . ▶ **3a**				3,310,000

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

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
LITTLE SISTERS OF THE ASSUMPTION FAMILY HEALTH SER 333 E 115TH ST NEW YORK, NY 10029	N/A	PC	Charitable Event	50,000
LIVING GOODS 220 HALLECK ST THE PRESIDIO SAN FRANCISCO, CA 94129	N/A	PC	Pioneering Innovative Financing Strategies to Reduce Child Mortality and Attract Long-Term Financing for Community Health	100,000
LWALA COMMUNITY ALLIANCE INC PO BOX 60688 NASHVILLE, TN 37206	N/A	PC	Strengthening Migori County's health system (Kenya) for one million people Project	80,000
Total . . . . ▶ 3a				3,310,000

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

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
MANY HOPES INC 67 TROTTING PARK RD TEATICKET, MA 02536	N/A	PC	Healthy Children at Home and School in Kenya Project	50,000
MEDIC MOBILE INC3254 19TH ST SAN FRANCISCO, CA 94110	N/A	PC	Supporting a Path to Scale Government Adoption of Mobile Health in Nepal Project	100,000
MIFAN MAMA 1533 HUQINGPING RD HOUSE NO 28 QINGPU DISTRICT, SHANGHAI CH	N/A	NC	Expenditure Responsibility Grant	50,000
Total . . . . ▶ 3a				3,310,000

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

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
MOTT HAVEN ACADEMY CHARTER SCHOOL 170 BROWN PL BRONX, NY 10454	N/A	PC	Development of Health program for middle schoolers, PNP Support and Digitalization of medical records Project	145,000
MUSO INC3254 19TH ST 2ND FL SAN FRANCISCO, CA 94110	N/A	PC	Scaling Proactive Care to Rural Mali with an Embedded RCT Program	150,000
NORTHSIDE CENTER FOR CHILD DEVELOPMENT INC 1301 5TH AVE NEW YORK, NY 10029	N/A	PC	Tele-psychiatry Program	150,000
Total . . . . ▶ 3a				3,310,000

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

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
NYAYA HEALTH A NONPROFIT CORPORATION - POSSIBLE 30 BROAD ST 9TH FL NEW YORK, NY 10004	N/A	PC	to ensure efficient service at Bayalpata & Charikot hospitals	600,000
PARTNERS IN HEALTH A NONPROFIT CORPORATION PO BOX 996 FREDERICK, MD 21705	N/A	PC	to enable Zanmi Beni to continue providing around the clock care for 64 vulnerable children, including primary and mental healthcare, physical therapy, education and social services	200,000
RESEAU DES ENTREPRENEURS SOLIDAIRES CHEMIN DU JARA 3 MIES CH-1295 SZ	N/A	NC	Expenditure Responsibility Grant	50,000
Total . . . . ▶ **3a**				3,310,000

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

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
ST BONIFACE HAITI FOUNDATION INC 383 ELLIOT ST NEWTON UPPER FALLS, MA 02464	N/A	PC	Expanding Access to Life-Saving Care for Vulnerable Children in Southern Haiti at St Boniface Hospital and the Villa Clinic	75,000
SUSTAINABLE HEALTH ENTERPRISES INC 175 VARICK ST 6TH FL NEW YORK, NY 10014	N/A	PC	SHE28 Program	50,000
THE CHILDRENS HEALTH FUND 215 W 125TH ST STE 301 NEW YORK, NY 10027	N/A	PC	New York Flagship Program	400,000
Total . . . . ▶ 3a				3,310,000

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

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
THE WATER TRUST INCPO BOX 4668 NEW YORK, NY 10163	N/A	PC	From pilot to scale healthy, resilient communities in rural Uganda Project	300,000
UNDER 21460 W 41ST ST NEW YORK, NY 10036	N/A	PC	Covenant House NY Wellness Center, Therapeutic Services and Training Program	160,000
VILLAGE HEALTH WORKS 45 W 36TH ST 8TH FL NEW YORK, NY 10018	N/A	PC	Life-Saving Access to Blood Transfusions in Kigutu, Burundi Project	100,000
Total . . . . ▶ **3a**				3,310,000

TY 2017 Compensation Explanation

Name: The Deerfield Partnership Foundation

EIN: 05-0618950

Person Name	Explanation
Bryan Sendrowski	* removed from foundation in 2017
sumner anderson	* removed from foundation in 2017

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

TY 2017 Depreciation Schedule

Name: The Deerfield Partnership Foundation

EIN: 05-0618950

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

TY 2017 Expenditure Responsibility Statement

Name: The Deerfield Partnership Foundation

EIN: 05-0618950

Grantee's Name	Grantee's Address	Grant Date	Grant Amount	Grant Purpose	Amount Expended By Grantee	Any Diversion By Grantee?	Dates of Reports By Grantee	Date of Verification	Results of Verification
LA CHAINE DE L'ESPOIR	96 RUE DIDOT PARIS 75014 FR	2015-08-20	75,000	TO SUPPORT THE OPEN HEART SURGERY PROJECT	75,000	NO	05/18/2016 and 09/04/2017		NONE NECESSARY
RESEAU DES ENTREPRENEURS SOLIDAIRES	CHEMIN DU JURA 3 MIES CH-1295 SZ	2015-08-17	50,000	TO PROVIDE MEDICAL SUPPORT TO PEOPLE IN NEED ACROSS MADAGASCAR	49,200	NO	5/23/16, 7/11/17		none necessary
SHANGHAI SOONG CHING LING FOUNDATION	369 NORTH SHAANXI ROAD SHANGHAI 200040 CH	2015-12-18	75,000	TO SUPPORT CHILD HEALTH IMPROVEMENT RESEARCH PROJECT	75,000	NO	5/24/16 AND 7/19/17		none necessary
RESEAU DES ENTREPRENEURS SOLIDAIRES	CHEMIN DU JARA 3 MIES CH-1295 SZ	2016-07-07	50,000	TO PROVIDE MEDICAL SUPPORT TO PEOPLE IN NEED ACROSS MADAGASCAR	50,000	NO	07/11/2017		NONE NECESSARY
FONDATION TERRE DES HOMMES	AVENUE DE MONTCHOISI 15 LAUSANNE 1006 SZ	2016-07-22	48,500	IMPROVEMENT OF URBAN HEALTH ACCESS FOR MOTHERS AND CHILDREN IN MAURITANIA	48,500	NO	7/10/18		NONE NECESSARY
LA CHAINE DE L'ESPOIR	96 RUE DIDOT PARIS 75014 FR	2016-07-26	75,000	TO SUPPORT THE OPEN HEART SURGERY PROJECT	75,000	NO	09/04/17		NONE NECESSARY
MIFAN MAMA	1533 HUQINGPING ROAD HOUSE NO 28 QINGPU DISTRICT, SHANGHAI CH	2016-08-03	83,000	TO SUPPORT THE COMMUNITY HEALTH NURSE PROJECT	83,000	NO	08/29/2017, 10/3/18		NONE NECESSARY
MIFAN MAMA	1533 HUQINGPING ROAD HOUSE NO 28 QINGPU DISTRICT, SHANGHAI CH	2017-12-06	50,000	To support the Enhanced Outreach eye care project	5,436	NO	10/3/18		none necessary
RESEAU DES ENTREPRENEURS SOLIDAIRES	CHEMIN DU JURA 3 MIES CH-1295 SZ	2017-12-06	50,000	TO PROVIDE MEDICAL SUPPORT TO PEOPLE IN NEED ACROSS madagascar	0	NO	expected in 2018		none necessary

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TY 2017 Investments - Other Schedule

Name: The Deerfield Partnership Foundation

EIN: 05-0618950

Investments Other Schedule 2

Category/ Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value
DEERFIELD EMPLOYEES DP LLC		3,874,331	4,788,810
DEERFIELD EMPLOYEES DSS LLC		954,984	1,037,137
DEERFIELD MGMT III LP		900,978	1,340,855
DEERFIELD MGMT IV LP			7,744
DEERFIELD MGMT LP		2,557,584	2,494,932

TY 2017 LiquidationExplanationStmt

Name: The Deerfield Partnership Foundation

EIN: 05-0618950

Statement: As explained below, the Foundation has no plans for dissolution. This statement is submitted to report the distribution of certain assets during the year. The distributions resulted in a substantial contraction of assets. The following information is submitted in accordance with Treasury Regulation Section 1.6043-3(a)(1) and the Form 990-PF instructions: During the taxable year ending December 31, 2017, the Foundation made distributions from assets from sources other than current income. Collectively, the distributions in excess of current income totaled $3,310,000. This amount represents over 25% of the Foundation's net assets of $9,952,383 (as measured by fair market value) at the beginning of the Foundation's taxable year ending December 31, 2017. Although the Foundation technically experienced a substantial contraction, it will continue in existence and has no plans for dissolution. The Foundation made distributions of cash to the grantees listed in the attachment to Part XV, Line 3a; each such grant was made solely for the charitable purpose specified therein.

TY 2017 Other Expenses Schedule

Name: The Deerfield Partnership Foundation

EIN: 05-0618950

Other Expenses Schedule

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
Administrative Fees	33,453			33,453
K-1 Exp DEERFIELD MGMT III LP	68,764	68,764		
K-1 Exp DEERFIELD MGMT LP	88,929	88,929		
State or Local Filing Fees	250			250

TY 2017 Other Income Schedule

Name: The Deerfield Partnership Foundation

EIN: 05-0618950

Other Income Schedule

Description	Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income
K-1 Inc/Loss DEERFIELD MGMT III LP	306,845	306,845	
K-1 Inc/Loss DEERFIELD MGMT LP	502,730	502,749	

TY 2017 Taxes Schedule

Name: The Deerfield Partnership Foundation

EIN: 05-0618950

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
990-PF Estimated Tax for 2017	55,900			
990-PF Extension for 2016	636			

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Schedule B
(Form 990, 990-EZ, or 990-PF)
Department of the Treasury
Internal Revenue Service

Schedule of Contributors

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

OMB No 1545-0047

2017

Name of the organization
The Deerfield Partnership Foundation

Employer identification number
05-0618950

Organization type (check one)

Filers of:	**Section:**
Form 990 or 990-EZ	☐ 501(c)( ) (enter number) organization
	☐ 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation
	☐ 527 political organization
Form 990-PF	☑ 501(c)(3) exempt private foundation
	☐ 4947(a)(1) nonexempt charitable trust treated as a private foundation
	☐ 501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule.**
Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See instructions

General Rule

☑ For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling $5,000 or more (in money or other property) from any one contributor Complete Parts I and II See instructions for determining a contributor's total contributions

Special Rules

☐ For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) 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 any one contributor, 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, or (ii) Form 990-EZ, line 1 Complete Parts I and II

☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than $1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals Complete Parts I, II, and III

☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc , purposes, but no such contributions totaled more than $1,000 If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc , purpose Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc , contributions totaling $5,000 or more during the year . . . . ▶ $ ____________

Caution. An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Form 990PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

Name of organization	Employer identification number
The Deerfield Partnership Foundation	05-0618950

Part I **Contributors** (See Instructions) Use duplicate copies of Part I if additional space is needed

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	See Additional Data Table	$	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contribution)
		$	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contribution)
		$	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contribution)
		$	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contribution)
		$	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contribution)
		$	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contribution)

Name of organization
The Deerfield Partnership Foundation

Employer identification number
05-0618950

Part II **Noncash Property** (See instructions) Use duplicate copies of Part II if additional space is needed

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
18	UNIV HEALTH REAL EST UHT, 1000 sh	$ 74,145	2017-12-20

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
21	AMERICAN TOWER REIT INC AMT, 45 sh	$ 6,624	2017-11-17

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
29	NUANCE COMMUNICATIONS, INC NUAN, 2000 sh	$ 33,140	2017-12-20

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		$	

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		$	

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		$	

Name of organization	**Employer identification number**
The Deerfield Partnership Foundation	05-0618950

Part III ***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 completing Part III, enter the total of** ***exclusively*** **religious, charitable, etc., contributions of $1,000 or less for the year. (Enter this information once. See instructions.)** ▶ **$** ____________
Use duplicate copies of Part III if additional space is needed

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift

Transferee's name, address, and ZIP 4	Relationship of transferor to transferee

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift

Transferee's name, address, and ZIP 4	Relationship of transferor to transferee

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift

Transferee's name, address, and ZIP 4	Relationship of transferor to transferee

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift

Transferee's name, address, and ZIP 4	Relationship of transferor to transferee

Additional Data

Software ID:
Software Version:
EIN: 05-0618950
Name: The Deerfield Partnership Foundation

Form 990 Schedule B, Part I - Contributors (see Instructions) Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	Anderson Sumner 14 East 90th Street apt 7c New York, NY10128	$ 15,000	Person ☑ Payroll ☐ Noncash ☐ (Complete Part II for noncash contribution)
2	Atinsky Lawrence 122 E 82nd Street Apt 3A New York, NY10028	$ 25,000	Person ☑ Payroll ☐ Noncash ☐ (Complete Part II for noncash contribution)
3	Berg Kevin 79 Fairway Ave Rye, NY10580	$ 20,018	Person ☑ Payroll ☐ Noncash ☐ (Complete Part II for noncash contribution)
4	Bernstein Brent 43-25 Hunter Street apt 338e Forest Hills, NY11101	$ 15,000	Person ☑ Payroll ☐ Noncash ☐ (Complete Part II for noncash contribution)
5	Bishop Nicholas 217 W 110th St apt 9 New York, NY10026	$ 8,500	Person ☑ Payroll ☐ Noncash ☐ (Complete Part II for noncash contribution)
6	Bizoza Brian 357 Henry St Brooklyn, NY11201	$ 35,000	Person ☑ Payroll ☐ Noncash ☐ (Complete Part II for noncash contribution)

Form 990 Schedule B, Part I - Contributors (see Instructions) Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7	Brancaccio Marian 350 W 57th St 11F New York, NY10019	$ 40,000	Person ☑ Payroll ☐ Noncash ☐ (Complete Part II for noncash contribution)
8	Bukowczyk Steven 88 Leonard Street APT 1709 New York, NY10013	$ 10,000	Person ☑ Payroll ☐ Noncash ☐ (Complete Part II for noncash contribution)
9	Caze Alexis 1079 Orienta Avenue Mamoroneck, NY10543	$ 40,000	Person ☑ Payroll ☐ Noncash ☐ (Complete Part II for noncash contribution)
10	Clark David 336 East 53rd Steet 5th Floor New York, NY10022	$ 50,000	Person ☑ Payroll ☐ Noncash ☐ (Complete Part II for noncash contribution)
11	Coan Timothy 20 Prospect Place Croton on Hudson, NY10520	$ 5,000	Person ☑ Payroll ☐ Noncash ☐ (Complete Part II for noncash contribution)
12	Deerfield Management Company LP 780 Third Avenue 37th fl New York, NY10017	$ 752,321	Person ☑ Payroll ☐ Noncash ☐ (Complete Part II for noncash contribution)

Form 990 Schedule B, Part I - Contributors (see Instructions) Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
13	ElBardissi Andrew 290 Third Avenue apt 23b New York, NY10010	$ 15,000	Person ☑ Payroll ☐ Noncash ☐ (Complete Part II for noncash contribution)
14	Furst Howie 7 Luckenbach Lane Port Washington, NY11050	$ 75,000	Person ☑ Payroll ☐ Noncash ☐ (Complete Part II for noncash contribution)
15	Greene Adam 19 Oak Ave Larchmont, NY10538	$ 20,000	Person ☑ Payroll ☐ Noncash ☐ (Complete Part II for noncash contribution)
16	Grossman Adam 7609 Rossdhu Ct Chevy Chase, MD20815	$ 10,000	Person ☑ Payroll ☐ Noncash ☐ (Complete Part II for noncash contribution)
17	Heidelberger Retzler Karen 315 East 83rd Street ph2 New York, NY10028	$ 25,000	Person ☑ Payroll ☐ Noncash ☐ (Complete Part II for noncash contribution)
18	Henshaw Leslie 22 Garden Place Brooklyn, NY11201	$ 74,145	Person ☐ Payroll ☐ Noncash ☑ (Complete Part II for noncash contribution)

Form 990 Schedule B, Part I - Contributors (see Instructions) Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
19	Hochberg Steven 428 Columbus Ave Apt 4F New York, NY10024	$ 25,000	Person ☑ Payroll ☐ Noncash ☐ (Complete Part II for noncash contribution)
20	Huber Ted 5 Woodland Dr Westport, CT06880	$ 50,000	Person ☑ Payroll ☐ Noncash ☐ (Complete Part II for noncash contribution)
21	Isler Jonathan 780 Third Avenue Floor 37 New York, NY10017	$ 6,624	Person ☐ Payroll ☐ Noncash ☑ (Complete Part II for noncash contribution)
22	Jackson Robert 12 Phillips Lane Rye, NY10580	$ 50,000	Person ☑ Payroll ☐ Noncash ☐ (Complete Part II for noncash contribution)
23	Kaplan Jeffrey 195 Meadowview Avenue Hewlett, NY11557	$ 150,000	Person ☑ Payroll ☐ Noncash ☐ (Complete Part II for noncash contribution)
24	Karnal Alexander 1061 Esplanade Pelham, NY10803	$ 30,000	Person ☑ Payroll ☐ Noncash ☐ (Complete Part II for noncash contribution)

Form 990 Schedule B, Part I - Contributors (see Instructions) Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
25	Karnal Terence 604 Madison St Hoboken, NJ 07030	$ 20,000	Person ☑ Payroll ☐ Noncash ☐ (Complete Part II for noncash contribution)
26	Kim Jean 137 Riverside Dr Apt 6bc new york, NY 10024	$ 15,000	Person ☑ Payroll ☐ Noncash ☐ (Complete Part II for noncash contribution)
27	Kometz Avi 205 East 92nd Street apt 30e New York, NY 10128	$ 15,000	Person ☑ Payroll ☐ Noncash ☐ (Complete Part II for noncash contribution)
28	Kristofcak Alexander 201 N 11th Street Apt 3 Brooklyn, NY 11211	$ 10,000	Person ☑ Payroll ☐ Noncash ☐ (Complete Part II for noncash contribution)
29	Leff Jonathan 102 Cliff Avenue Pelham, NY 10803	$ 33,140	Person ☐ Payroll ☐ Noncash ☑ (Complete Part II for noncash contribution)
30	Mellet Vincent 24 Locust Lane Rye, NY 10580	$ 30,000	Person ☑ Payroll ☐ Noncash ☐ (Complete Part II for noncash contribution)

Form 990 Schedule B, Part I - Contributors (see Instructions) Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
31	Olan Rob 74 Bellevue Ave Rumson, NY10128	$ 25,000	Person ☑ Payroll ☐ Noncash ☐ (Complete Part II for noncash contribution)
32	Sendrowski Bryan 5 Stony Point Rd Oakland, NJ07436	$ 20,000	Person ☑ Payroll ☐ Noncash ☐ (Complete Part II for noncash contribution)
33	Slattery William 780 Third Avenue 37th Floor New York, NY10017	$ 100,000	Person ☑ Payroll ☐ Noncash ☐ (Complete Part II for noncash contribution)
34	Snetiker Robert 330 W 58th St apt 16k New York, NY10019	$ 5,000	Person ☑ Payroll ☐ Noncash ☐ (Complete Part II for noncash contribution)
35	Steelman Peter 8226 Bar Harbor Lane Charlotte, NC28210	$ 5,000	Person ☑ Payroll ☐ Noncash ☐ (Complete Part II for noncash contribution)
36	Su Zheng 1450 Washington St Apt PH1 Hoboken, NJ07030	$ 25,000	Person ☑ Payroll ☐ Noncash ☐ (Complete Part II for noncash contribution)

Form 990 Schedule B, Part I - Contributors (see Instructions) Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
37	Takats Paul 695 Washington St 2A New York, NY10014	$ 32,500	Person ☑ Payroll ☐ Noncash ☐ (Complete Part II for noncash contribution)
38	Wang Elise 160 West 86th St Apt PH2 New York, NY10024	$ 10,000	Person ☑ Payroll ☐ Noncash ☐ (Complete Part II for noncash contribution)
39	Wheeler Cameron 114 W 73rd St apt a New York, NY10023	$ 45,000	Person ☑ Payroll ☐ Noncash ☐ (Complete Part II for noncash contribution)