CISBLJP62M

Form 990-PF

Return of Private Foundation

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

Department of the Treasury Internal Revenue Service

▶ Do not enter social security numbers on this form as it may be made public.

ror (calend	dar year 2017 or tax year beginning	, 2017	, and	ending		, 20
	e of four		,	, _,,_		identification number	
Bara	k Zelin	sky Foundation, Inc.				06-1510035	
		street (or P.O box number if mail is not delivered to street address)	Room	/suite	B Telephon	e number (see instruction	ons)
1366	Grassi	o Boulevard				203-787-4991	
		state or province, country, and ZIP or foreign postal code			C if exerent	on application is pendil	ng, check here ▶
New	Haven	Connecticut 06511					
			of a former public	charity	D 1. Foreign	organizations check h	icre .
		☐ Final return ☐ Amended r		•	Ĭ	-	_
		Address change Name char	nge			i örganizations meeting here and attach comput	
H C	Check	type of organization. Section 501(c)(3) exempt p	rivate foundation	19	∬E If private:	cundation status was t	
		n 4947(a)(1) nonexempt charitable trust 🔲 Other tax			section 5	17(b)(1)(A) check here	. ▶∟
F	air ma	arket value of all assets at J Accounting method	· 🛛 Cash 📋 A	coruel	F I' the four	idation is in a 60-month	tarminatura
e	end of	year (from Part II, col (c), Other (specify)				tion 507(b)(1)(B) check	here >
li	ine 16)	S 598,113 34 (Part I, column (d) must be	on cash basis)		'		
Pa	rt i	Analysis of Revenue and Expenses (The total of	(a) Revenue and				(d) Disbursements
		amounts in columns (b), (c), and (d) may not necessarily equal	expenses per		t investment ncome	(c) Adjusted net Income	for chantable purposes
		the amounts in column (a) (see instructions))	books				(cash basis only)
\Box	1	Contributions, gifts, grants, etc., received (attach schedule)	5,300.00	_			
.	2	Check ► ☐ if the foundation is not required to attach Sch. B		RC	UD	0618 20	18
4	3	Interest on savings and temporary cash investments		0			16
1	4	Dividends and interest from securities .	10, 861,90		10,861 90	10,861.90	
ŀ	5a	Grope-rents ECEIVED					
J	b	Net entalincome or (loss)					
e l	6a	Net gain or (loss) from sale of assets not on line 10					
Revenue	b	Gross sales prigo for all assets on line 82					
١٨	7	Capital gain net income (from Partiv line 2)			16,660.47		
<u>~</u>	8	Net short-term capital pain 17					
	9	Income modulications					
	10a	Gross sales less returns and allowances					
	b	Less: Cost of goods sold					
	C	Gross profit or (loss) (attach schedule)					
- 1	11	Other income (attach schedule)					
	12	Total. Add lines 1 through 11	16,161.90		27,522 37	10,861 90	
s l	13	Compensation of officers, directors, trustees, etc		l			
Se	14	Other employee salaries and wages		l			<u></u>
ē	15	Pension plans, employee benefits		<u> </u>			
X	16a	,	CEIVED				
e	ь	Accounting fees (attach schedule)	<u></u>	阿_			
dministrative Expenses	¢	Other professional fees (attach schedule)	R 1 3 2018	5/		<u></u>	
E	17	Interest		[2]		 	
<u> </u>	18	Taxes (attach schedule) (see instructions)	1,17.36	P _	117 36	117 36	117.3
盲	19	popi de la	العلولات الما	₽		<u></u>	<u></u>
	20	Occupancy		 		 	
₹ D	21	Travel, conferences, and meetings		<u> </u>		 	
핆	22	Printing and publications		 		ļ	
<u>6</u>	23	Other expenses (attach schedule)				 	<u> </u>
₩	24	Total operating and administrative expenses.	1				
Operating and		Add lines 13 through 23	117 39	<u> </u>	117,36	117.36	
ଚା	25	Contributions, gifts, grants paid	26,365.00)		ļ	26,365,0
\exists	26	Total expenses and disbursements. Add lines 24 and 25	26,482.36	<u> </u>	117 36	117.36	26,482.
J	27	Subtract line 26 from line 12				•	}
ļ	а	Excess of revenue over expenses and disbursements	(10,320 46	<u> </u>		<u> </u>	
	þ	Not investment income (if negative, enter -0-) . Adjusted net income (if negative, enter -0-) .		Ļ	27,405.01		ļ
						10,744.54	

For Paperwork Reduction Act Notice, see instructions.

5Uh By

gr \$19

Pa	a di	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions.)	Beginning of year	End of	
			(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash—non-interest-bearing Savings and temporary cash investments	4,926.00	8,832.04	8,832 04
ĺ	2				
Į	3	Accounts receivable ►			
		Less allowance for doubtful accounts ▶			
Ì	4	Pledges receivable ►			
- !	_	Less allowance for doubtful accounts	ļ		
l	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
l	_	disqualified persons (attach schedule) (see instructions) .			
- 1	7	Other notes and loans receivable (attach schedule)			
	_	Less allowance for doubtful accounts ▶			
Assets	8	Inventories for sale or use			
SS	9	Prepaid expenses and deferred charges ,			
4	10a	Investments—U.S. and state government obligations (attach schedule)			
1	ь	Investments—corporate stock (attach schedule)			· · · · · · · · · · · · · · · · · · ·
	C	Investments—corporate bonds (attach schedule)			
	11	Investments—land, buildings, and equipment basis ▶			J
		Less: accumulated depreciation (attach schedule) ▶	ļ		
	12	Investments - mortgage loans	ļ		
	13	Investments—other (attach schedule)			
	14	Land, buildings, and equipment basis ▶			
ŀ		Less accumulated depreciation (attach schedule) ▶	ļ <u>-</u>		<u></u>
	15	Other assets (describe ▶ mutual funds)	538,447.00	589,281.30	589,281 30
	16	Total assets (to be completed by all filers—see the			
	45	instructions. Also, see page 1, item I)	543,374 00	598,113.34	598,113 34
	17	Accounts payable and accrued expenses			
Se	18	Grants payable			
Liabilities	19	Deferred revenue			i
bi	20	Loans from officers, directors, trustees, and other disqualified persons			
Ë	21	Mortgages and other notes payable (attach schedule)			
	22 23	Other liabilities (describe ►) Total liabilities (add lines 17 through 22) .	·		
	23			0	
S	1	Foundations that follow SFAS 117, check here	!]
ဋ	24	- · ·			
<u>=</u>	25	Unrestricted	<u> </u>		·
ä	26	Temporarily restricted		·	i
Fund Balances	20	·			· !
ā		Foundations that do not follow SFAS 117, check here ► 🕖 and complete lines 27 through 31.	ĺ		
	27	Capital stock, trust principal, or current funds	543,374.00	598,113 34	
ssets or	28	Paid-in or capital surplus, or land, bldg., and equipment fund	343,374.00	336,113.34	1
Se	29	Retained earnings, accumulated income, endowment, or other funds			1
As	30	Total net assets or fund balances (see instructions)	543,374 00	598,113 34	1
et	31	Total liabilities and net assets/fund balances (see	343,374 00	330,110,34	1
Z	" '	instructions)	543,374 00	598,113.34	
Pa	rt III			330,113.34	<u></u>
		al net assets or fund balances at beginning of year-Part II, colu		agree with	
		l-of-year figure reported on prior year's return)	(534,374.00
,		er amount from Part I, line 27a		2	(10,320.46)
		er increases not included in line 2 (itemize) unrealized apprecia			65,059.80
		I lines 1, 2, and 3	. ,	1 4	598,113.34
		• •		· · ·	0
6	Tota	creases not included in line 2 (itemize) > al net assets or fund balances at end of year (line 4 minus line 5)—	Part II, column (b), lin	ie 30 6	598,113.34
				······································	Form 990-PF (2017)

	(a) Ust and describe the kind	(s) of property sold (for example, real est	ent Inc	1	(b) How acquired	(c) Da	te scoured	(d) Date sold
		, or common stock, 200 sns. MLC Co.)			P-Purchase 0-Donation		.day yr)	(nio day yr)
	capital gain distribution -Fide							
b c	Fidelity 500 Index Premium F	und			Р	01	1/30/12	01/11/17
d								
θ								<u></u>
	(e) Gross sales price	(f) Depreciation allowed (or allowable)			other basis ase of sale			n or (loss) (f) minus (g))
а								5573
b	30,000 00	0			18,913 31			11086
c d								
e								
	Complete only for assets show	ing gain in column (h) and owned t	<u> </u>					i (h) gain minus
	(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69		(k) Excess over col				it less than -0-) or from cot (h))
a								
b								
đ								
8			-		·	-		
2	Capital gain net income or	IDAT CADITAL IDEEL ("			rt I, line 7 rt I, line 7	2		
art	Part I, line 8	, line 8, column (c) See instruction			. <u>J</u>	3 t Inco	me	
art or op	Part I, line 8 V Qualification Under		ced Ta	x on N	let Investmen	Inco		
r of	Part I, line 8 V Qualification Under otional use by domestic privi	er Section 4940(e) for Redu ate foundations subject to the	ced Ta	x on N	let Investmen	Inco		
r op ect is th	Part I, line 8 V Qualification Under privational use by domestic privation 4940(d)(2) applies, leave the foundation liable for the s	er Section 4940(e) for Redu ate foundations subject to the s this part blank. ection 4942 tax on the distribut	ced Ta	ax on N 4940(a)	let Investment tax on net Investant	t Inco	ncome.)	☐ Yes ☑
r op ect is th Yes	Part I, line 8 V Qualification Under ctional use by domestic privation 4940(d)(2) applies, leave the foundation liable for the start the foundation doesn't quality.	er Section 4940(e) for Redu ate foundations subject to the s this part blank.	ced Ta section of table am not con	4940(a) nount of	let Investment tax on net Investany year in the his part	t Inco	ncame.) eriod?	
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ect s th Yes	Part I, line 8 V Qualification Under Disorded Unde	this part blank. ection 4942 tax on the distributuality under section 4940(e). Do unt in each column for each year (b) Adjusted qualifying distributions	ced Ta section - table am not cor ar; see the	nount of	let Investment tax on net Investment any year in the his part fuctions before making the following t	t Incortment in base p	ncome.) eriod? any entries	(d) stribution ratio
ect ect is th Yes	Part I, line 8 V Qualification Under the private of the second 4940(d)(2) applies, leave the foundation liable for the second the foundation doesn't qualified the appropriate among the second years and ar year (or tax year beginning in) 2016 2015	er Section 4940(e) for Reduction 4940(e) for Reduction 4942 to the distribution 4940(e). Do unt in each column for each year (b) Adjusted qualifying distribution 28,3	ced Ta section a table am not cor ir; see the N 45,27	nount of	let Investment tax on net Investation net Inve	t Inco trment i base p aking a assets 899.99	ncome.) eriod? any entries	(d) stribution ratio divided by col (c)) 0.0539 0.0530
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ect us the Yes I	Part I, line 8 V Qualification Under Ditional use by domestic privation 4940(d)(2) applies, leave the foundation liable for the start the appropriate amount of the start of the number of years the formal start of the number of years the formal start of the sta	this part blank. ection 4942 tax on the distributions subject to the state of the s	ced Ta section of table am not cor ir; see the MAS,27 31.43 23.53 80.00 31.34	nount of mplete the instru	let Investment tax on net Investment tax on	base p raking a rassets 899.99 577 56 074.31 554.13 758 46	eriod? any entries (col (h)	(d) stribution ratio divided by col. (c)) 0.0539 0.0530 0.0453 0.0364 0.0263
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)-PF (2017)			ige 4
Part 1		struc	tion	5}
	Exempt operating foundations described in section 4940(d)(2), check here ▶ □ and enter "N/A" on line 1.		1	;
	Date of ruling or determination letter (attach copy of letter if necessary—see instructions)			
Ь	Domestic foundations that meet the section 4940(e) requirements in Part V, check		274	05
С	here ► ☑ and enter 1% of Part I, line 27b			
C	Part I, line 12, col. (b).		-	
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-)			0
3	Add lines 1 and 2		274	05
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)			0
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0		274	05
6	Credits/Payments			
а	2017 estimated tax payments and 2016 overpayment credited to 2017 6a			
b	Exempt foreign organizations—tax withheld at source 6b			- :
С	Tax paid with application for extension of time to file (Form 8868) 6c		ļ	
d	Backup withholding erroneously withheld 6d 6d	.		
7	Total credits and payments Add lines 6a through 6d			0
8	Enter any penalty for underpayment of estimated tax. Check here 🗌 if Form 2220 is attached			0
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed ▶ 9		274	05
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			
11	Enter the amount of line 10 to be Credited to 2018 estimated tax ▶ Refunded ▶ 11			
	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	162	- V
ь	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the	ia		
-	Instructions for the definition	1b		1
	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			1
С	Did the foundation file Form 1120-POL for this year?	1c	<u>-</u>	-
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 ► \$	l		
ę	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?	2		<u> </u>
_	If "Yes," attach a detailed description of the activities			1
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			نــرـــا
	· · · · · · · · · · · · · · · · · · ·	3		-
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		
b 5	If "Yes," has it filed a tax return on Form 990-T for this year?	5		1
3	If "Yes," attach the statement required by General Instruction T			-
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either			
•	By language in the governing instrument, or			
	By state legislation that effectively amends the governing instrument so that no mandatory directions that	ł		,
	conflict with the state law remain in the governing instrument?	6	Ĭ.	-
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	7	
8a	Enter the states to which the foundation reports or with which it is registered. See instructions.			
	Aturk			
ь	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	/	
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 tax year beginning in 2017? See the instructions for Part XIV If "Yes,"			ļ
	complete Part XIV , , , , , , , , , , , , , , , , , , ,	9		<u> </u>
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their			
	names and addresses	10		<u> </u>

Form 990-PF (2017)

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Part	VII-A Statements Regarding Activities (continued)			<u> </u>
	•		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		
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		
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	1	
14	Website address ▶ n/a			
,,,	***************************************	37874		
15	Located at ► 1366 Grasso Boulevard, New Haven, Ct ZIP+4 ► 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	0651	.)
16	At any time during calendar year 2017, did the foundation have an interest in or a signature or other authority		Yes	No
	over a bank, securities, or other financial account in a foreign country?	16		1
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes " enter the name of the foreign country ▶			
Part	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				
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?			;
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes			!
	(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)?			
	(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.)			
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		<u> </u>
	Organizations relying on a current notice regarding disaster assistance, check here	\ <u> </u>	-	
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		
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))	10		
а	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?			
	If "Yes," list the years ▶ 20 , 20 , 20 , 20	ļ		
ь	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) If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.	2b		
3a	▶ 20 , 20 , 20 , 20 Old the foundation hold more than a 2% direct or indirect interest in any business enterprise			
	at any time during the year?			
D	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 b	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its	4a		-
_	charitable purpose that had not been removed from Jeopardy before the first day of the tax year beginning in 2017?	4b		17
	<u></u>		O DI	(2017)

Part	VII-B Statements Regarding Activities	for W	hich Form	4720 N	lay Be R	equire	d <i>(contii</i>	nued)			
	Ouring the year, did the foundation pay or incur a					_		<i>-</i>		Yes	No
	(1) Carry on propaganda, or otherwise attempt to(2) Influence the outcome of any specific public		•				Yes	√ No			İ
	directly or indirectly, any voter registration dri			JII 455.	., or to ca		Yes	₽No			
	(3) Provide a grant to an individual for travel, stu			urpose			Yes	☑ No		'	!
	(4) Provide a grant to an organization other than	•				ibed in	_	_			
	section 4945(d)(4)(A)? See instructions .			•			☐ Yes	√ No	} }		1 1
	(5) Provide for any purpose other than religious purposes, or for the prevention of cruelty to compare the prevention of cruelty to compare the prevention of cruelty to compare the prevention.				-			[7] No.	} }		1
h	If any answer is "Yes" to 5a(1)—(5), did any of the						∐Yes ons desca	No 💽	1		li
-	Regulations section 53 4945 or in a current notice								5b		ر ا
	Organizations relying on a current notice regardi	ng disa	ster assistan	ce, che	ck her o			▶ 🔲			
c	If the answer is "Yes" to question 5a(4), does t			exemp	tion from	the tax] '		
	because it maintained expenditure responsibility		-			• •	Yes	☐ No			1
6a	If "Yes," attach the statement required by Reguli Did the foundation, during the year, receive any					muume					
Va	on a personal benefit contract?	101105,1			· · ·		Yes	[7] No		Ì	
b	Did the foundation, during the year, pay premiur	ns, dire	ctly or indired	tly, on	a personal	benefit	_		6b		
	If "Yes" to 6b, file Form 8870.							_			
	At any time during the tax year, was the foundation										
	If "Yes," did the foundation receive any proceed Information About Officers, Direct								7b	1005	<u> </u>
	and Contractors	1015, 1	Tustees, I	Junua	uon wan	agers,	inginy i	- a.a -	прісу	· · · · · · · · · · · · · · · · · · ·	
1	List all officers, directors, trustees, and found	lation r	nanagers ar	d their	compens	ation. S	ee instr	uctions			
	(a) Name and address	(b) Title	and average		npensation of paid,		Contribution		(e) Expe	ense ac	
	3-E-1	devote	ed to position	en	ter -0-)	and defe	erred comp	ensation	uinei	allOwal	
06511	Zelinsky, 1366 Grasso Boulevard, New Haven, CL	preside	ent, er, director		0				1		0
	d A. Zelinsky, 1366 Grasso Boulevard, New Haven	licasui	er, director								
Ct. 06	511	secreta	ry, director		0			0			
Natha	niel Zelinsky, 1366 Grasso Boulevard, New Haven,										
Ct. 06		directo	r		0	<u> </u>		0			
50010	a Zelinsky, Apt 6, 811 Clark Avenue, Ames, Iowa	directo	r	ļ	0			0	ĺ		
2	Compensation of five highest-paid employe	es (oth	er than tho	se incl	uded on li	ne 1-	see inst	ruction	s). If n	ione,	ente
	"NONE."										
	to the second address of south and to see the second and the second	00	(b) Title, and		(a) Camaa	neatlen	(d) Contrib employer			ense er	ccourst,
	(a) Name and address of each employee paid more than \$50,0	00	devoted to p		(c) Compe	nsation	plans and comper	deferred		allowa	
none	 						<u> </u>				
			İ		·			_	}		
							}				
			ļ		 						
							(1		
			 		 		 		 		
			<u> </u>				l				
							[
			<u> </u>		<u> </u>		<u></u>		<u> </u>		
otal	number of other employees paid over \$50,000 .	 	 -	· · ·	-:	· · · -	-:	. ▶	Earm Of	90-P	F (2017
									· Outri 3	JU-11	. (2017

Page 6

Form 990 PF (2017)

Form 990			Page 7
Part \		Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Em and Contractors (continued)	ployees,
3	Five h	ighest-paid independent contractors for professional services. See instructions. If none, enter "NONE	л
		(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
none			
			
	••		
Total n	umbe	r of others receiving over \$50,000 for professional services	
Part	X-A	Summary of Direct Charitable Activities	
		dation's four largest direct charitable activities during the tax year include relevant statistical information such as the number of sand other beneficiaries served, conferences convened research papers produced letc.	Expenses
		the foundation did not engage in direct charitable activities but only made grants to 501(c)(3) organizations	
1 22	0110. 1	in roundation and not engage in one of changage activities but only intake grains to so (c)(s) organizations	
2			
••)
3 _			
4 -			
٠-			
			<u></u>
Part		Summary of Program-Related Investments (see instructions)	Amount
	one	two largest program-related investments made by the foundation during the tax year on Fines 1 and 2	Allount
' ::			}
2			
All of	ther pro	gram-related investments. See instructions	
3			
Total.	Add li	nes 1 through 3	

Form 990-PF (2017)

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Form 990-PF (2017)

Form 990-PF (2017)

Part :	XIII Undistributed Income (see instruction	ns)			
1 .	Distributable amount for 2017 from Part XI,	(a) Corpus	(b) Years prior to 2016	(c) 2016	(d) 2017
_	line 7				27,835.05
2	Undistributed income, if any, as of the end of 2017)		;
a	Enter amount for 2016 only				
_	Total for prior years. 20,20,20		~ 		
3 a					
b	5 0040)
C					
d					1
e	From 2016				}
ť	Total of lines 3a through e				!
4	Qualifying distributions for 2017 from Part XII, line 4 > \$ 26,482.36				
а	Applied to 2016, but not more than line 2a .		-		1
b	Applied to undistributed income of prior years (Election required—see instructions)				
С	Treated as distributions out of corpus (Election required—see instructions)				
d	Applied to 2017 distributable amount				26,482.36
9	Remaining amount distributed out of corpus				2.0,402.30
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 b	Corpus. Add lines 3f, 4c, and 4e. Subtract line 5 Prior years' undistributed income. Subtract line 4b from line 2b				
С	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				
е	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.				1352.60
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)				
9	Excess distributions carryover to 2018. Subtract lines 7 and 8 from line 6a				
10	Analysis of line 9 ⁻				
а	Excess from 2013		[,
ь	Excess from 2014				
C	Excess from 2015] [
d	Excess from 2016				
9	Excess from 2017				<u> </u>
					Form 990-PF (2017)

art	XIV Private Operating Foundat	i ons (see instru	ctions and Part	VII-A, question 9	<u> </u>	
	If the foundation has received a ruling			private operating		
•	foundation, and the ruling is effective for		-	▶ [n/	
þ	Check box to indicate whether the found	dation is a private	operating founda	tion described in se	ction 🔲 4942(j)(3) or 4942(j)(
2a	Enter the lesser of the adjusted net	Tax year		Frior 3 years		(e) Total
	income from Part I or the minimum investment return from Part X for	(a) 2017	(b) 2016	(c) 2015	(d) 2014	(6) 104
	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 .					
е	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			/		
а	"Assets" alternative test—enter					
<u> </u>	(1) Value of all assets					
	(2) Value of assets qualifying under			1/		
	section 4942(i)(3)(B)(i) .					
b	"Endowment" alternative test-enter 2/3		 /			
	of minimum investment return shown in					Ì
С	Part X, line 6 for each year listed		· /			
·			/			•
	(1) Total support other than gross investment income (interest,		/			İ
	dividends, rents, payments on		(/			Î
	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	7				
	an exempt organization		1		•	
	(4) Gross investment income .	<u> </u>				
Part	XV Supplementary Informatio	n (Complete th	nis part only if	the foundation h	ad \$5,000 or m	ore in assets
•	any time during the year-					
1	Information Regarding Foundation I					
а	List any managers of the foundation v		uted more than 2	% of the total contr	ributions received	by the foundation
	before the close of any tax year (but o	nly if they have c	ontributed more t	han \$5,000). (See s	ection 507(d)(2) }	
dwa	d Zelinsky and Doris Zelinsky					
b	List any managers of the foundation	who own 10% o	r more of the sto	ock of a corporation	n (or an equally la	arge portion of the
	ownership of a partnership or other er	itity) of which the	foundation has a	10% or greater int	erest.	
one	·					
2	Information Regarding Contribution	, Grant, Gift. Loa	an, Scholarship.	etc., Programs		-
	Check here ▶ ☑ If the foundation				organizations and	does not acce
	unsolicited requests for funds. If the fe	•	·		_	
	complete items 2a, b, c, and d. See in				_	
a			dress of the pers	on to whom applica	tions should be a	ddressed.
						· -

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

c Any submission deadlines.

Recipient	If recipient is an individual	Foundation	Purpose of grant or	
Name and address (home or business)	show any relationship to any foundation manager or substantial contributor	status of recipient	contribution	Amount
a Paid during the year				
ewish High School of Connecticut 1937 West Main Street, Stamford, Ct. 06902	n/a	public	education	14,90
Planned Parenthood, 345 Whitney Ave, New Haven, Ct.	n/a	public	medical	1,00
lewish Historical Society, PO Box 3251, New Haven, Ct. 06515	n/a	public	education	1,00
Summit Foundation, PO 4000, Breckenridge, Colorado 80424	nla	public	charitable	5!
Jriv. of Ct. Foundation, 2390 Alumni Drive, Storrs, Ct. 06269	in/a	public	education	11
Nomen's Health Research at Yale, Suite 220, 135 College St, New Haven, Ct. 06510	ln/a	public	medical	2:
Philadelphia Region Ronald McDonald House, 10th		ľ		
loor, 200 S. Broad St., Philadelphia, Penn. 19102 Slifka Center at Yale. 80 Wall Street, New Haven, Ct,	n/a	public	charitable	10
06511	n/a	public	religious	5,00
Tower 1-Tower East, 18 Tower Lane, New Haven, Ct.	n/a	public	charitable	1
The Stone Trust, PO Box 201592, New Haven, Ct. 06520	n/a	public	charitable	2
Jewish Women's Archive, 1 Harvard Avc, Brookline, Massachusetts	n/a	public	education	5
My Hero Fund c/o Biehn Travel, 831 Boston Post Road, Madison, Ct. 06443	n/a	public	charitable	1
Yale University, New Haven, Ct. 06520	nla	public	education	1,0
Westville Village, PO Box 3004, Westville Station, New Haven, Ct. 06515	n/a	public	charitable	1
Friends of Edgewood Park, 720 Edgewood Avenue, New Haven, Ct, 06515	n/a	public	charitable	1
attached schedule		1		1,2
Total			▶ 3a	26,3
b Approved for future payment				
Total	<u> </u>		3b	

nte	_	as amounts unless otherwise indicated.		siness income	Excluded by sect	ion 512, 513, or 514	
	,		(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	(e) Related or exempt function income (See instructions.)
1	Prog	gram service revenue		<u>.</u> .			
	a <u>r</u>	n/a			<u> </u>		
	b _				 		<u></u>
	°		<u> </u>		ļ		ļ
	d .				 	 	
	θ.						
	1 -			<u></u>	 		
	-	Fees and contracts from government agencies			 		
		nbership dues and assessments			 	ļ <u></u>	
3		est on savings and temporary cash investments					
4		dends and interest from securities			<u> </u>		 -
5		rental income or (loss) from real estate	·		 	}	ļ
		Debt-financed property			<u> </u>		 -
		Not debt-financed property	ļ	ļ	- 	ļ <u> </u>	ļ
		rental income or (loss) from personal property	ļ		 	 	
7		er Investment income		 	 	ļ	
8		or (loss) from sales of assets other than inventory		ļ	 	ļ	ļ
		Income or (loss) from special events .				<u> </u>	
		ss profit or (loss) from sales of inventory	\			ļ	
11		er revenue. a		<u> </u>			 -
	b.		<u> </u>		 	}	
	C .		<u> </u>			 	}
	d.				<u> </u>	 	 -
	•					ļ 	
		itotal. Add columns (b), (d), and (e)	L	<u> </u>		J	<u> </u>
		al. Add line 12, columns (b), (d), and (e) .				13	
13	FOT	un van inte 12, columns (o), (a), and (c)	·				
See	worl	ksheet in line 13 instructions to verify calculation		and of Fuers	-4 D		
See Pa	worl	ksheet in line 13 instructions to verify calculation /I-B Relationship of Activities to the A	Accomplishm				umportanthy to the
See Pa	worl	ksheet in line 13 instructions to verify calculation /I-B Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt pu	ncome is reproses (other that	arted in column on by providing fu	(e) of Part XV	/I-A contributed poses). (See instru	
See Pa	worl rt XV e No.	ksheet in line 13 instructions to verify calculation /I-B Relationship of Activities to the A	ncome is reproses (other that	arted in column on by providing fu	(e) of Part XV	/I-A contributed poses). (See instru	
See Pa	worl rt XV e No.	ksheet in line 13 instructions to verify calculation /I-B Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt pu	ncome is reproses (other that	arted in column on by providing fu	(e) of Part XV	/I-A contributed poses). (See instru	
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See Pa	worl rt XV e No.	ksheet in line 13 instructions to verify calculation /I-B Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt pu	ncome is reproses (other that	arted in column on by providing fu	(e) of Part XV	/I-A contributed poses). (See instru	
See Pa	worl rt XV e No.	ksheet in line 13 instructions to verify calculation /I-B Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt pu	ncome is reproses (other that	arted in column on by providing fu	(e) of Part XV	/I-A contributed poses). (See instru	
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See Pa	worl rt XV e No.	ksheet in line 13 instructions to verify calculation /I-B Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt pu	ncome is reproses (other that	arted in column on by providing fu	(e) of Part XV	/I-A contributed poses). (See instru	
See Pa	worl rt XV e No.	ksheet in line 13 instructions to verify calculation /I-B Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt pu	ncome is reproses (other that	arted in column on by providing fu	(e) of Part XV	/I-A contributed poses). (See instru	
See Pa	worl rt XV e No.	ksheet in line 13 instructions to verify calculation /I-B Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt pu	ncome is reproses (other that	arted in column on by providing fu	(e) of Part XV	/I-A contributed poses). (See instru	
See Pa	worl rt XV e No.	ksheet in line 13 instructions to verify calculation /I-B Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt pu	ncome is reproses (other that	arted in column on by providing fu	(e) of Part XV	/I-A contributed poses). (See instru	
See Pa	worl rt XV e No.	ksheet in line 13 instructions to verify calculation /I-B Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt pu	ncome is reproses (other that	arted in column on by providing fu	(e) of Part XV	/I-A contributed poses). (See instru	
See Pa	worl rt XV e No.	ksheet in line 13 instructions to verify calculation /I-B Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt pu	ncome is reproses (other that	arted in column on by providing fu	(e) of Part XV	/I-A contributed poses). (See instru	
See Pa	worl rt XV e No.	ksheet in line 13 instructions to verify calculation /I-B Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt pu	ncome is reproses (other that	arted in column on by providing fu	(e) of Part XV	/I-A contributed poses). (See instru	
See Pa	worl rt XV e No.	ksheet in line 13 instructions to verify calculation /I-B Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt pu	ncome is reproses (other that	arted in column on by providing fu	(e) of Part XV	/I-A contributed poses). (See instru	
See Pa	worl rt XV e No.	ksheet in line 13 instructions to verify calculation /I-B Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt pu	ncome is reproses (other that	arted in column on by providing fu	(e) of Part XV	/I-A contributed poses). (See instru	
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See Pa	worl rt XV e No.	ksheet in line 13 instructions to verify calculation /I-B Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt pu	ncome is reproses (other that	arted in column on by providing fu	(e) of Part XV	/I-A contributed poses). (See instru	
See Pa	worl rt XV e No.	ksheet in line 13 instructions to verify calculation /I-B Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt pu	ncome is reproses (other that	arted in column on by providing fu	(e) of Part XV	/I-A contributed poses). (See instru	
See Pa	worl rt XV e No.	ksheet in line 13 instructions to verify calculation /I-B Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt pu	ncome is reproses (other that	arted in column on by providing fu	(e) of Part XV	/I-A contributed poses). (See instru	
See Pa	worl rt XV e No.	ksheet in line 13 instructions to verify calculation /I-B Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt pu	ncome is reproses (other that	arted in column on by providing fu	(e) of Part XV	/I-A contributed poses). (See instru	
See Pa	worl rt XV e No.	ksheet in line 13 instructions to verify calculation /I-B Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt pu	ncome is reproses (other that	arted in column on by providing fu	(e) of Part XV	/I-A contributed poses). (See instru	
See Pa	worl rt XV e No.	ksheet in line 13 instructions to verify calculation /I-B Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt pu	ncome is reproses (other that	arted in column on by providing fu	(e) of Part XV	/I-A contributed poses). (See instru	
See Pa	worl rt XV e No.	ksheet in line 13 instructions to verify calculation /I-B Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt pu	ncome is reproses (other that	arted in column on by providing fu	(e) of Part XV	/I-A contributed poses). (See instru	

art XVII	Information	n Regarding Tran	nsfers to and Transacti	ons and P	Relationships With Noncha	ritable	Exe	emr
	Organizatio							
					v other organization described	`) }-	Yes	No
		ther than section	501(c)(3) organizations) of	or in secti	ion 527, relating to political	1	- 1	
_	anizations?					1	- 1	
	-	orting foundation to	to a noncharitable exempt o	rganizat on	i of.	11		.
	Cash					1a(1)		↓ ✓
٠,٠	Other assets .	• • • • • •				1a(2)		✓
	er transactions.	trestable av	•			45/43		
		a noncharitable exe	· •			1b(1)		1
		ets from a noncharit , equipment, or other	table exempt organization		•	1b(2)		+ -
	-	rangements				1b(4)		+;
		rantees				15(5)		+
			ship or fundraising solicitation	, , . ms		1b(6)	i	+
			lists, other assets, or paid er			1c		+,
	-		·		Column (b) should always sho	للتبا	fair n	mar
					of the foundation received les			
		-			of the goods, other assets, or s			
Line no	(b) Amount Involved	(c) Name of nonc	charitable exempt organization	(d) Desc	oription of transfers transactions and s	haring arra	angem	nent:
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7- ie t	ha foundation dire	anthu or indirectly a	-Wilmand with or related to	222 or mr	ore tax-exempt organizations			_
		•	amiliated with, or related to, section 501(c)(3)) or in sectio		, ,	☐ Yes	- 171	. N
		e following schedule		11 021		LJ 100	ر_ا د	15
	(a) Name of organ		(b) Type of organizati		(c) Description of relat	tionship		
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Un	der penalties of perjury i	I declare that I have examin	ned this return, including accompanys	na schedules an	nd statements and to the best of my know	ledge and	belief,	ιtk

CIS IMAGE DO NOT CORRESPOND FOR SIGNATURE

Date

Check il il self-employed

Form 990-PF (2017)

Firm's EIN ▶

Preparer's signature

Paid

Preparer Use Only

Pnnt/Type preparer's name

Firm's address 🕨

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. ► Go to www irs.gov/Form990 for the latest information. OMB No 1545-0047

Employer identification number Name of the organization 06-1510035 Barak Zelinsky Foundation, Inc. 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 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 331/3% 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, chantable, 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, chantable, 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-PP), 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 990-PF, Part I, line 2, to certify that it doesn't meet the filling requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

Name of drganization	Employer identification number
Barak Zelinsky Foundation, Inc	06-1510035

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	Doris Zelinsky 1366 Grasso Boulevard	\$ 5,000	Person Payroll Noncash				
	New Haven, Ct 06511		(Complete Part II for noncash contributions)				
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution				
2	Melvyn Leff 79 Nancy Blvd Merrick, NY 11566	\$	Person				
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution				
		\$	Person				
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution				
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)				
(a) No,	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution				
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)				
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution				
		\$	Person Payroll Noncash Complete Part II for noncash contributions)				

Name of organization Barak Zelinsky Foundation, Inc. Employer identification number

06-1510035 Noncash Property (see instructions) Use duplicate copies of Part II if additional space is needed. Part II (a) No. (c) FMV (or estimate) (b)

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

Description of noncash property given (d) from Date received Part ((See instructions.) (a) No. (c) FMV (or estimate) (b)
Description of noncash property given (d) from Date received Part 1 (See instructions.) (a) No. (c) (d) Date received (b) FMV (or estimate) from Description of noncash property given Part I (See instructions.)

	rganization			Employer identification number			
	nsky Foundation, Inc			06-1510035			
Part III		the year from any o ons completing Par e year. (Enter this int	one contributor. (t III, enter the total formation once Se	Complete columns (a) through (e) and of exclusively religious, charitable, etc.,			
(a) No.				to St. St. and the state of the best of			
from Part I	(b) Purpose of gift	(c) Use o	of gift	(d) Description of how gift is held			
	n/a						
Ì	Transferacio aomo addresa on	(e) Transf		ochin al transferor to transferor			
	Transferee's name, address, an	0 217 + 4	Helation	ship of transferor to transferee			
(a) No.							
from Part I	(b) Purpose of gift	(b) Purpose of gift (c) Use of gift		(d) Description of how gift is held			
	(e) Transfer of gift						
	Transferee's name, address, an	d ZIP + 4	Relation	nship 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, ar	nd ZIP + 4	Relatio	nship of transferor to transferee			
(a) No.							
from Part I	(b) Purpose of gift (c) Use		of gift	ft (d) Description of how gift is held			
	(e) Transfer of gift						
	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee				
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	<u> </u>		<u> </u>	Schedule B (Form 890, 980-EZ, or 990-PF) (2017			

Part VIII(1) officers and directors continued

Name and address	title	compensation	contributions	expense acct.
Aaron Zelinsky Apt. 3 313 N. Charles St. Baltimore, Md. 21201	director	0	0	0
Jacoba Urist 13B Sagamore Cove Road Branford, Ct. 0640	director	0	0	0

Part XV(3)(a) grants and contributions continued

Name and address	individual	foundation status	purpose	amount
Temple Beth Sholam 1809 Whitney Avenue Hamden, Ct. 06517	n/a	public	religious	\$185
New Haven Jewish Federation 360 Amity Road Woodbridge, Ct. 06525	n/a	public	religious	50
Tujenge Africa Fund 81 Wall Street New Haven, Ct. 06511	n/a	public	education	500
Yale Law School 127 Wall Street New Haven, Ct. 0652	n/a 5	public	education	500