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As Filed Data -

Return of Private Foundation

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

DLN: 93491306004008 OMB No 1545-0052

2017

Form 990-PF Department of the Treasury

Internal Revenue Service

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.

Open to Public Inspection

or	caler	ndar year 2017, or tax year beginning 01-01-20)17 , aı	nd ending 12-31-	2017	
		indation V AND RITA MARMURSTEIN CHARITABLE		A Employer id	entification numbe	er
FC	UNDAT:	TON TRUST ARMURSTEIN CHARITABLE ARMURSTEIN		11-6532361		
Num	ber and	I street (or P O box number if mail is not delivered to street address) H AVENUE	Room/suite	B Telephone nu	mber (see instructio	ns)
		, state or province, country, and ZIP or foreign postal code NY 11204	L	C If exemption	application is pendir	ng, check here
G Ch	neck al	I that apply	former public charity	D 1. Foreign or	ganizations, check h	ere . \square
		☐ Final return ☐ Amended return			ganizations meeting k here and attach co	
		Address change Name change			undation status was	· -
_		pe of organization Section 501(c)(3) exempt private			n 507(b)(1)(A), che	
		1 4947(a)(1) nonexempt charitable trust U Other taxabl				
of	year <i>(f</i>	set value of all assets at end from Part II, col (c), \$ 8,770,609	Cash Accru		ation is in a 60-mont n 507(b)(1)(B), ched	
Pa	rt I	Analysis of Revenue and Expenses (The total	(a) Revenue and			(d) Disbursements
		of amounts in columns (b), (c), and (d) may not necessarily	expenses per	(b) Net investment income	(c) Adjusted net income	for charitable purposes
		equal the amounts in column (a) (see instructions))	books			(cash basis only)
	1	Contributions, gifts, grants, etc , received (attach schedule)	53,985			
	2	Check ▶ ☐ If the foundation is not required to attach Sch B				
	3	Interest on savings and temporary cash investments	15,284	15,284		
	4	Dividends and interest from securities				
	5a	Gross rents	635,037	635,037		
	ь	Net rental income or (loss)63,652				
<u>e</u>	6a	Net gain or (loss) from sale of assets not on line 10				
Revenue	ь	Gross sales price for all assets on line 6a				
ž	7	Capital gain net income (from Part IV, line 2)		0		
	8	Net short-term capital gain				
	9	Income modifications				
	10a	Gross sales less returns and allowances				
	b	Less Cost of goods sold				
	С	Gross profit or (loss) (attach schedule)				
	11	Other income (attach schedule)				
	12	Total. Add lines 1 through 11	704,306	650,321		
	13	Compensation of officers, directors, trustees, etc	0			
	14	Other employee salaries and wages				
es	15	Pension plans, employee benefits				
ens	16a	Legal fees (attach schedule)				
×	ь	Accounting fees (attach schedule)				
e L	С	Other professional fees (attach schedule)				
⋛	17	Interest				
<u> </u>	18	Taxes (attach schedule) (see instructions)				
Ξ	19	Depreciation (attach schedule) and depletion	127,096	127,096		
Ę	20	Occupancy				
⊄	21	Travel, conferences, and meetings				
a	22	Printing and publications				
<u>b</u>	23	Other expenses (attach schedule)	508,407	444,464		1,500
Operating and Administrative Expenses	24	Total operating and administrative expenses.				
ğ		Add lines 13 through 23	635,503	571,560		1,500
ر	25	Contributions, gifts, grants paid	198,400			198,400
	26	Total expenses and disbursements. Add lines 24 and 25	833,903	571,560		199,900
	27	Subtract line 26 from line 12				
	a	Excess of revenue over expenses and	-129,597			
	ь	disbursements Net investment income (if negative, enter -0-)		78,761		
	c	Adjusted net income(if negative, enter -0-)		,		
or		work Peduction Act Notice see instructions	l	Cat No. 11399)	<u> </u>	 rm

	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) ► 499,900				
		Less allowance for doubtful accounts ▶	499,900	%	499,900	499,900
2	8	Inventories for sale or use				
Assets	9	Prepaid expenses and deferred charges				
As	10a	Investments—U S and state government obligations (attach schedule)				
	ь	Investments—corporate stock (attach schedule)				
	С	Investments—corporate bonds (attach schedule)				
	11	Investments—land, buildings, and equipment basis ▶9,375,011				
		Less accumulated depreciation (attach schedule) ▶	8,930,617	% j	8,806,721	6,000,000
	12	Investments—mortgage loans				
	13	Investments—other (attach schedule)				
	4.4	Land buildings and agreement basis .				

Land, buildings, and equipment basis ightharpoonup2,000,000 2,000,000 Less accumulated depreciation (attach schedule) ▶ 2,000,000 189 15 Other assets (describe > _ 189 189 09 Liabilities

		,			
	16	Total assets (to be completed by all filers—see the			
		ınstructions Also, see page 1, item I)	11,706,928	11,577,330	8,770,609
	17	Accounts payable and accrued expenses			
	18	Grants payable			
)	19	Deferred revenue			
	20	Loans from officers, directors, trustees, and other disqualified persons			
3	21	Mortgages and other notes payable (attach schedule)			
	22	Other liabilities (describe	9 85,155	9 85,155	
	23	Total liabilities(add lines 17 through 22)	85,155	85,155	
ces		Foundations that follow SFAS 117, check here ▶ □ and complete lines 24 through 26 and lines 30 and 31.			
5	24	Unrestricted			
ŏ	25	Temporarily restricted			
2	26	Permanently restricted			

11,621,773

11,621,773

11,706,928

11,492,176

11,492,176

11,577,331

2

3 4

5

6

11,621,773

11,492,176

11,492,176 Form **990-PF** (2017)

-129,597

Foundations that do not follow SFAS 117, check here

Retained earnings, accumulated income, endowment, or other funds

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

Analysis of Changes in Net Assets or Fund Balances

Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-

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

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

Capital stock, trust principal, or current funds Paid-in or capital surplus, or land, bldg, and equipment fund

and complete lines 27 through 31.

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

Other increases not included in line 2 (itemize)

Enter amount from Part I, line 27a

Add lines 1, 2, and 3

Decreases not included in line 2 (itemize)

Net Assets or Fund Balances

27

28 29

30

31 Part III

6 Enter 1% of net investment income (1% of Part I, line 27b) .

instructions

8 Enter qualifying distributions from Part XII, line 4 ,

Page 3

	List and describe t 2-story brick ware	(a) the kınd(s) of property sold (e g , re- ehouse, or common stock, 200 shs	al estate, MLC Co)	How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
1a _						
- -						
	(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g Cost or otl plus expen	her basıs	Gain	(h) or (loss) f) minus (g)
a						
b						
С						
d						
е						
	Complete only for assets	s showing gain in column (h) and ow	<u> </u>			(I)
	(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k Excess of over col(col (ı)	col (k), but no	(h) gain minus t less than -0-) or rom col (h))
a						
b						
С						
d						
е						
2	Capital gain net income	e or (net capital loss)	If gain, also enter in Part If (loss), enter -0- in Part 1222(5) and (6)		2	
-		rt I, line 8, column (c) (see instruction			}	
Part	V Qualification l	Under Section 4940(e) for Re	educed Tax on Net I	nvestment 1	Income	
		private foundations subject to the sec				
f section	on 4940(d)(2) applies, le e foundation liable for th	•	ble amount of any year in		, 	∕es ☑ No
1	Enter the appropriate am	nount in each column for each year,	see instructions before m	naking any ent	ries	
	(a) e period years Calendar (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-	use assets	(d) Distribution ra (col (b) divided by	
	2016	72,800		8,544,343		0 00852
	2015	272,951		9,379,397		0 029101
	2014	480,009		8,744,449		0 054893
	2013	3,811,087		5,627,771		0 677193
	2012	2,447,280		4,384,148		0 558211
2 1	Fotal of line 1, column (c	d)		2	2	1 327918
r	number of years the foun	o for the 5-year base period—divide t ndation has been in existence if less t incharitable-use assets for 2017 from	than 5 years	_3	3	0 265584
			•		1 -	8,464,277
5 N	Multiply line 4 by line 3			5	5	2,247,977

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

(b)

788

2,248,765

199,900

6 7

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

7b

01111 220 11 (2								
Part VIII	Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors							

1 List all officers, directors, truste	es, foundation managers a	nd their compensation	(see instructions).	
(a) Name and address	Title, and average hours per week (b) devoted to position	(c) Compensation (If not paid, enter	(d) Contributions to employee benefit plans and deferred	
		-	compensation	
YAKOV MARMURSTEIN	TRUSTEE 0	0	(0
5307 17TH AVENUE BROOKLYN, NY 11204				
RITA MARMURSTEIN	TRUSTEE	0	(0 0
5307 17TH AVENUE	70			
BROOKLYN, NY 11204	<u> </u>			. ""
2 Compensation of five highest-pa	ild employees (other than t	nose included on line 1		ne, enter "NONE."
(a) Name and address of each employee pomore than \$50,000	Title, and average hours per week (b) devoted to position	(c) Compensation	Contributions to employee benefit plans and deferred (d) compensation	Expense account, (e) other allowances
Total number of other employees paid ov				
3 Five highest-paid independent o				
(a) Name and address of each perso	n paid more than \$50,000	(b) Typ	e of service	(c) Compensation
		4		
Total number of others receiving over \$5	0,000 for professional services	5	🕨	
Part IX-A Summary of Direct				
List the foundation's four largest direct charitable	e activities during the tax year Inc		nation such as the number of	Evnoncos
organizations and other beneficiaries served, cor				Expenses
1				
2				
3				
4				
-				
Part IX-B Summary of Progra	m-Related Investments	(see instructions)	•	
Describe the two largest program-related inv	estments made by the foundation of	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 .				
				5 000 BE (2017)

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

2

3a 3h

4

5

199,900

199,900

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Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,

Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment

Adjusted qualifying distributions. Subtract line 5 from line 4.

Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4

Amounts set aside for specific charitable projects that satisfy the

the section 4940(e) reduction of tax in those years

2

3

4

199.900

221,739

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Part XIII

b Total for prior years

d From 2015. . . . e From 2016.

a From 2012.

b From 2013. c From 2014. . .

(2	017)		
П	Undistributed Income	(see instructions)	

2015 , 2014 , 2013

Undistributed income, if any, as of the end of 2017 a Enter amount for 2016 only.

Excess distributions carryover, if any, to 2017

f Total of lines 3a through e.

d Applied to 2017 distributable amount. . . . e Remaining amount distributed out of corpus **5** Excess distributions carryover applied to 2017

same amount must be shown in column (a))

(If an amount appears in column (d), the

a Corpus Add lines 3f, 4c, and 4e Subtract line 5 b Prior years' undistributed income Subtract 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 e Undistributed income for 2016 Subtract line 4a from line 2a Taxable amount—see f Undistributed income for 2017 Subtract lines 4d and 5 from line 1. This amount must be distributed in 2018 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) . . .

Subtract lines 7 and 8 from line 6a

9 Excess distributions carryover to 2018.

10 Analysis of line 9 a Excess from 2013. .

b Excess from 2014. . c Excess from 2015. . . . d Excess from 2016. . e Excess from 2017. . .

6 Enter the net total of each column as

indicated below:

4 Qualifying distributions for 2017 from Part XII, line 4 🕨 \$ 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

Distributable amount for 2017 from Part XI, line 7

2,228,493 3,561,064

3.561.064 48.968

48 968

(a) Corpus

5.838.525

221,739

5,616,786

2.006.754

3,610,032

Years prior to 2016

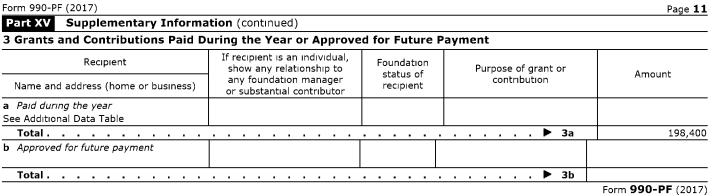
(b)

(c) 2016

2017

421,639

(d)



Enter gross	amounts unless otherwise indicated	Unrelated b	usiness income	Excluded by section	512, 513, or 514	(e) Related or exempt
1 Program	n service revenue	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	function income (See instructions
g Fees	and contracts from government agencies					
3 Intere	rship dues and assessments st on savings and temporary cash					
	ments			14	15,284	
	tal income or (loss) from real estate					
	financed property					
	ebt-financed property			16	63,652	
6 Net re	ntal income or (loss) from personal property					
7 Other II	nvestment income					
	or (loss) from sales of assets other than					
	ory					
	ore or (loss) from special events profit or (loss) from sales of inventory					
	revenue a					
_						
е						
e					78,936	
e 12 Subtota 13 Total.	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e)	ations)		13	78,936 	78,936
e 12 Subtota 13 Total. / (See wo		ations)			<u> </u>	
e 12 Subtota 13 Total. / (See wo	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcul	ations) e Accomplisi income is report	nment of Exem	pt Purposes f Part XVI-A contribut	Bted importantly to	78,936
e	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcul B Relationship of Activities to th Explain below how each activity for which is the accomplishment of the foundation's ex	ations) e Accomplisi income is report	nment of Exem	pt Purposes f Part XVI-A contribut	Bted importantly to	78,936
e L2 Subtota L3 Total. (See wo Part XVI Line No.	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcul B Relationship of Activities to th Explain below how each activity for which is the accomplishment of the foundation's ex	ations) e Accomplisi income is report	nment of Exem	pt Purposes f Part XVI-A contribut	Bted importantly to	78,936
e L2 Subtota L3 Total. (See wo Part XVI Line No.	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcul B Relationship of Activities to th Explain below how each activity for which is the accomplishment of the foundation's ex	ations) e Accomplisi income is report	nment of Exem	pt Purposes f Part XVI-A contribut	Bted importantly to	78,936
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orm 9	990-PF	· ,								Pag	ge 13
Par	t XVII	Information Re Exempt Organi		fers To a	ınd Transactio	ns and R	Relatio	nships With None	charitable		
		rganization directly or in Code (other than sectio							n 501	Yes	No
a Tr	ansfers	from the reporting foun	dation to a nonch	arıtable exe	empt organization	of					
(1	.) Cash								1a(1)		No
(2) Othe	er assets							. 1a(2)		No
b Ot	her tra	nsactions									
-	-	s of assets to a nonchari							. 1b(1)		No
(2) Purc	hases of assets from a n	oncharitable exer	npt organız	ation				. 1b(2)		No
-	-	al of facilities, equipmer	•						. 1b(3)		No
•	•	nbursement arrangemen							1b(4)		No
•	-	ns or loan guarantees.							. 1b(5)		No
•	•	rmance of services or m	•	_					1b(6)		No
	_	of facilities, equipment, n wer to any of the above	-	-					1c		No
	any tra	ods, other assets, or ser insaction or sharing arra (b) Amount involved		column (d) the value of the	goods, otl	her asset		ed	ngemeni	ts
de	scribed	indation directly or indire in section 501(c) of the complete the following so	Code (other than	•	*		-		. 🗆 Yes	V	No
		(a) Name of organization	on	(b) Type of organizatio	n		(c) Description o	of relationship		
				1							
				+							
6 .	of r whi	der penalties of perjury, ny knowledge and belief ch preparer has any kno	, it is true, correct						sed on all infor	mation	of
Sigr Her		*****			2018-10-31	**	****		May the IRS di return with the prepai		
		Signature of officer or to	rustee		Date	/	itle		below (see instr)?	_	
		Print/Type preparer's	name Prep	oarer's Sign	ature	Date		PT Check if self-	ΓIN		
Paid	_	Martin Schreiber						employed ▶ □	P00015	164	
	parei Only		d Sonnenschine L	LP				Fı	rm's EIN ▶		
	•	'	9 Broadway Suite	600							
		Ne	w York NY 1000	7				Pł	none no (212	219-0	0220

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor

5,000

300

a Paid during the year				
BEIT MIDRASH GOVAAH 601 PRIVATE WAY	NONE	PC	CHARITABLE	

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

LAKEWOOD, NJ 08701				
HASDEI ELIEZER5309 17TH AVENUE BROOKLYN, NY 11204	NONE	PC	CHARITABLE	

HASDEI ELIEZER5309 17TH AVENUE BROOKLYN, NY 11204	NONE	PC	CHARITABLE	
YESHIVA OHEL SHIMON OF JERUSALEM	NONE	PC	CHARITABLE	

BROOKLYN, NY 11204				
YESHIVA OHEL SHIMON OF JERUSALEM 225 DIVISION AVE APT 7G	NONE	PC	CHARITABLE	
BROOKLYN, NY 11211				

	NONE	PC	CHARITABLE	
225 DIVISION AVE APT 7G BROOKLYN, NY 11211				

225 DIVISION AVE APT 7G BROOKLYN, NY 11211		STATE TABLE	
Total	 		198,400

3a

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year YESHIVA SHAAREI YOSHER NONE PC CHARITABLE 1.000 4102 16TH AVENUE BROOKLYN, NY 11204

MERKAZ CHASIDEI VIZNITZ 285 LEE AVE BROOKLYN, NY 11206	NONE	PC	CHARITABLE	100,000
DERECH HATORAH 2810 NOSTRAND AVENUE	NONE	PC	CHARITABLE	300

	BROOKLYN, NY 11206				
	DERECH HATORAH 2810 NOSTRAND AVENUE BROOKLYN, NY 11229	NONE	PC	CHARITABLE	300
1	· · · · · · · · · · · · · · · · · · ·			· · · · · · · · · · · · · · · · · · ·	1

3a

Total . 198,400

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year MERKAZ HATORAH NONE PC **CHARITABLE** 18,000 9030 W OLYMPIC BLVD BEVERLY HILLS, CA 90211

SLABODKA YESHIVA169 PARKVILLE AVE BROOKLYN, NY 11230	NONE	PC	CHARITABLE	1,800
AMERICAN FRIENDS OF KOLLEL KIRYAT ATA 3011 AVENUE L BROOKLYN, NY 11210	NONE	PC	CHARITABLE	1,000

Total .

За

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year

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

a Tala daring the year				
CONGREGATION MOSDOS AMROM CHASIDA PO BOX 249 ROOKLYN, NY 11204	NONE	PC	CHARITABLE	500

PEF ISRAEL ENDOWMENT FUNDS 630 3RD AVENUE NEW YORK, NY 10017	NONE	PC	CHARITABLE	500
PO BOX 249 ROOKLYN, NY 11204				

PEF ISRAEL ENDOWMENT FUNDS 630 3RD AVENUE NEW YORK, NY 10017	NONE	PC	CHARITABLE	500
Total				198,400

Note: To capture the full content of this document, please select landscape mode (11" \times 8.5") when printing.	
TY 2017 Depreciation Schedule	

Name: THE YACOV AND RITA MARMURSTEIN CHARITABLE

FOUNDATION TRUST

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

EIN: 11-6532361									
Description of Property	Date Acquired	Cost or Other Basis	Prior Years' Depreciation	Computation Method	Rate / Life (# of years)	Current Year's Depreciation Expense	Net Investment Income	Adjusted Net Income	Cost of Goods Sold Not Included
BUILDING-700 ROCKA	2013-06-12	4,800,000	435,936	M39	39	123,072			
IMPROVEMENTS	2015-06-30	119,936	4,743	M39		3,075			
IMPROVEMENTS	2016-06-30	37,000	515	M39		949			

DLN: 93491306004008

TY 2017 Investments - Land Schedule	
11 2017 Hivestillents - Land Schedule	

efile GRAPHIC print - DO NOT PROCESS As Filed Data -

BUILDING-700 ROCKA

Name: THE YACOV AND RITA MARMURSTEIN CHARITABLE

559,008

4,240,992

DLN: 93491306004008

FOUNDATION TRUST

EIN: 11-6532361

4,800,000

	EIN: 11-6532361			
Category/ Item	Cost/Other Basis	Accumulated Depreciation	Book Value	End of Year Fai Market Value

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491306004008
TY 2017 Other Assets Schedule	3	

Name: THE YACOV AND RITA MARMURSTEIN CHARITABLE

FOUNDATION TRUST

FTN: 11-6532361

		CTIA:	TT-	00

Other Assets Schedule Description

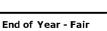
LOANS AND EXCHANGES

C T14"	т.	033230.

Value

End of Year - Book

189



189

Market Value

Beginning of Year -Book Value

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN	N: 93491306004008		
TY 2017 Other Expenses Sche	dule	_		_		
Name:	THE YACOV AND	O RITA MARMURS	STEIN CHARITAE	BLE		
	FOUNDATION TRUST					
EIN:	EIN: 11-6532361					
Other Expenses Schedule						
Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes		
BANK FEES	400	400				
INSURANCE	62,443					
PROFESSIONAL FEES	250	250				
INSURANCE-OTHER	15,107	15,107				
MANAGEMENT FEES	71,873	71,873				

	Expenses per Books	Income	Income	Charitable Purposes
BANK FEES	400	400		
INSURANCE	62,443			
PROFESSIONAL FEES	250	250		
INSURANCE-OTHER	15,107	15,107		
MANAGEMENT FEES	71,873	71,873		
REPAIRS	147,400	147,400		
REAL ESTATE TAXES	201,901	201,901		

1,604

1,361

4,568

1,604

1,361

UTILITIES

TELEPHONE

ADVERTISING

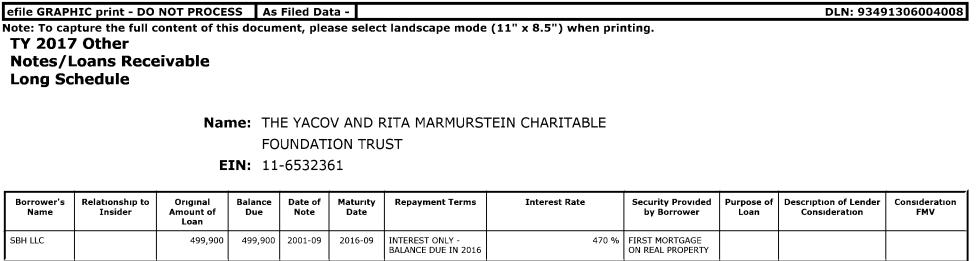
<u>'</u>		+	+	+
Description	Revenue and Expenses per	Net Investment Income	Adjusted Net Income	Disbursements for Charitable
	Books			Purposes

1,500

Other Expenses Schedule

FILING FEE

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		Di	LN: 93491306004008
TY 2017 Other Liabilities Sche	dule			
Name:	THE YACOV A	ND RITA MAR	RMURSTEIN CHARITA	ABLE
	FOUNDATION	TRUST		
EIN:	11-6532361			
Description	n		Beginning of Year - Book Value	End of Year - Book Value
SECURITY DEPOSITS			85,155	85,155



efile GRAPHIC print - [OO NOT PROCESS	As Filed Data -				DLN: 93491306004008	
Schedule B		Schedu	ıle of Contributor	rs		OMB No 1545-0047	
(Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service	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				2017		
Name of the organizati THE YACOV AND RITA MA		ABLE			Employer ic	dentification number	
FOUNDATION TRUST					11-6532361		
Organization type (che	eck one)						
Filers of:	Section:	Section:					
Form 990 or 990-EZ	orm 990 or 990-EZ 501(c)() (enter number) organization						
	☐ 4947(a)(1	l) nonexempt char	itable trust not treated as	a private founda	tion		
	☐ 527 politie	cal organization					
Form 990-PF	✓ 501(c)(3)	exempt private for	undation				
4947(a)(1) nonexempt charitable trust treated as a private foundation							
501(c)(3) taxable private foundation							
			PF that received, during the omplete Parts I and II Se				
Special Rules							
under sections 5 received from ar	509(a)(1) and 170(b)	(1)(A)(vı), that che urıng the year, tota	g Form 990 or 990-EZ tha cked Schedule A (Form 9 al contributions of the grea plete Parts I and II	990 or 990-EZ), Pa	art II, line 13,	16a, or 16b, and that	
during the year,	total contributions of	more than \$1,000	or (10) filing Form 990 or 0 exclusively for religious, animals Complete Parts	charitable, scient			
during the year, If this box is che purpose Don't o	contributions exclusions cked, enter here the complete any of the p	ively for religious, total contributions parts unless the Ge	or (10) filing Form 990 or charitable, etc., purposes that were received during eneral Rule applies to the or more during the year.	, but no such con g the year for an o s organization be	tributions tota exclusively re cause it recei	aled more than \$1,000 eligious, charitable, etc , ived <i>nonexclusively</i>	
990-EZ, or 990-PF), but	it must answer "No	on Part IV, line 2	le and/or the Special Rule , of its Form 990, or chect t it doesn't meet the filing	k the box on line I	H of its		
For Paperwork Reduction A for Form 990, 990-EZ, or 99		ructions	Cat No 30613X	Schedu	ile B (Form 990	, 990-EZ, or 990-PF) (2017)	

Total contributions Person Payroll Noncash	seriodale B (i eiiii	200, 300 22, 3, 300 11 / (2011)		i ugo =
(a) No. Name, address, and ZIP + 4 1	THE YACOV AND RIT	TA MARMURSTEIN CHARITABLE		number
No. Name, address, and ZIP + 4 Total contributions Type of contributio	Part I	Contributors (See instructions) Use duplicate copies of Part I if additio	nal space is needed	
		(b) Name, address, and ZIP + 4	(c) Total contributions	Type of contribution
(a) No. Name, address, and ZIP + 4 2	1	1745 EAST 28TH STREET	\$ 7,216	Payroll
No. Name, address, and ZIP + 4 Total contributions Type of contributions		BROOKLYN, NY11229		(Complete Part II for noncash contributions)
2				(d) Type of contribution
No. Name, address, and ZIP + 4 Total contributions Type of contributions	2	5307 17TH AVE	\$ 5,269	Payroll Noncash (Complete Part II for noncash
R W EXPRESS LLC			(c) Total contributions	(d) Type of contribution
(a) No. Name, address, and ZIP + 4 A	3_	1640 EAST 29TH STREET	\$ 21,500	Payroll Noncash (Complete Part II for noncash
A				,
No. Name, address, and ZIP + 4 Total contributions Person Payroll Noncash (Complete Part II for recontributions) (a) No. Name, address, and ZIP + 4 Total contributions Type of contributions (Complete Part II for recontributions) Type of contributions Person Payroll	4	1430 BROADWAY 5TH FLOOR	\$ 20,000	Payroll Noncash (Complete Part II for noncash
Payroll Noncash (Complete Part II for recontributions) (a)		(b) Name, address, and ZIP + 4		(d) Type of contribution
(a) (b) (c) (d) No. Name, address, and ZIP + 4 Total contributions Person Payroll				Payroll Noncash (Complete Part II for noncash
Payroll		(b) Name, address, and ZIP + 4	(c) Total contributions	,
(Complete Part II for r				Payroll Noncash (Complete Part II for noncash

Schedule B (Form 9	990, 990-EZ, or 990-PF) (2017)		Page 4
Name of organizat THE YACOV AND RIT FOUNDATION TRUST	A MARMURSTEIN CHARITABLE		Employer identification number 11-6532361
than \$1, organiza the year	000 for the year from any one contributo	r. Complete columns (a) throu of exclusively religious, charit actions.) ► \$	d in section 501(c)(7), (8), or (10) that total more ligh (e) and the following line entry. For able, etc., contributions of \$1,000 or less for
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	Transferee's name, address, and	(e) Transfer of gift ZIP 4 R	elationship of transferor to transferee
No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	Transferee's name, address, and	(e) Transfer of gift ZIP 4 R	elationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	Transferee's name, address, and	(e) Transfer of gift	delationship of transferor to transferee
	Transieree 3 name, address, and		elationship 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	` ,	elationship of transferor to transferee

Schedule B (Form 990, 990-EZ, or 990-PF) (2017)