OMB No 1545-0052

2017

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. ► Go to www.irs.gov/Form990PF for instructions and the latest information

Open to Public Inspection

Ī	or cale	ndar	year 2017 or ta	x year beginning	, 2017	, and ending			
_	ייייייייי	ם חכ	OUNDATION,	TNC			A	Employer Identification num 13-4201151	nber
			APITAL	, INC			В	Telephone number (see inst	ructions)
	450 E	PARE	K AVE 3RI	D FLOOR			<u>_</u>	917-743-9660	
	NEW 3	ORF	K, NY 10022	2			c	If exemption application is	pending, check here
(G Che	ck al	I that apply	Initial return	Initial return of a form	ner public charity	D	7 Foreign propertions abou	li boro
				Final return	Amended return	,	٦	1 Foreign organizations, chec	لسا
_				Address change	Name change		1)	2 Foreign organizations meet here and attach computation	
1	- Che		pe of organization		01(c)(3) exempt private f			•	L
-	l Four			nonexempt charitable		orivate foundation	E	If private foundation status under section 507(b)(1)(A)	
	raii i (fron	narket n Part	value of all assets a	6) A	counting method XC	asii Accidai	F	If the foundation is in a 60	
	▶ \$		690,	,551. (Part	I, column (d) must be or	n cash basis)	┪╹	under section 507(b)(1)(B)	
	Part I		nalysis of Re	venue and	(a) Revenue and	(b) Net investmen	nt	(c) Adjusted net	(d) Disbursements
		E)	(penses (The lumns (b) (c) a	total of amounts in and (d) may not neces	expenses per books	income		income	for charitable purposes
,		sa	rily equal the an	nounts in column (a)	1			1	(cash basis only)
り-		(56	Contributions, gifts, grants	s, etc., received (attach schedule)	100,000.	 			
7		2		ndation is not required to attach Sch				RE	CEIVED
		3	Interest on savings and te	emporary cash investments	81.		 31.	8	SC
1		4	Dividends and interest fro	· -	10,087.	10,08		十一号 APT	
J			Gross rents						38
	_		Net rental income or (loss)		10 204			06	DEN, UT
1	K E >		Net gain or (loss) from sa Gross sales price foi		18,204.	 			
	V E	7	assets on line 6a Capital gain net inco	ome (from Part IV, line 2)	' 	18,20	04.	 	
	N]	8	Net short-term capit	-				18,204.	
	E	10 2	Income modification	s I				 	
			allowances						
		b	Less Cost of goods sold						
			Gross profit or (loss) (atta						
		11	Other income (attack	n schedule) SEE STATEMENT	53.	}			
		12	Total. Add lines 1		128,425.	28,37	72.	18,204.	
•				ficers, directors, trustees, etc.					
		14	Other employee sall Pension plans, empl	•		ļ		ļ	
		15 16 <i>a</i>	Legal fees (attach so					 	
	A D		Accounting fees (att	CDD CM (7,950.	3,82	25.		
	N	c	Other professional fees (a	attach sch)					
	PS	17	Interest	see instrs) ŞEE STM	,	ļ	10	 	ļ
_	OPERA	18 19	Taxes (attach schedule)(s Depreciation (attach		552.	2	76.	 	
_	€ ⊘ ! ∣		schedule) and deple		<u> </u>	<u></u>		<u> </u>	
298	記	20 21	Occupancy Travel, conferences,	, and meetings	<u> </u>	 		 	
· ~	7	22	Printing and publica		 	 		 	
~	DP E	23	Other expenses (att				~~	1	
APR	EXPENSES	24		SEE STATEMENT	5,920.	5,92	20.	 	
	EES	24	Total operating and expenses. Add lines	s 13 through 23	14,422.	10,02	21.		
<u> </u> و		25	Contributions, gifts, grant		35,219.				35,219.
ද්ජී	Z	26	Total expenses and Add lines 24 and 25		49,641.	10,0	21	0.	35,219.
Ę	<u> </u>	27	Subtract line 26 from		37,031.	10,0		 	33,213.
뀵	ပွဲ	a	Excess of revenue and disbursements		78,784.	}]
20 Batching Ogden	(C)	ŀ		ome (if negative, enter -0-)	/0,/04.	18,3	51	 	
				ne (if negative, enter -0-)				18,204.	

79

518,178.

539,513

			′ L	, , , ,	
	16	Total assets (to be completed by all filers — see the instructions Also, see page 1, item l).		518,178.	539,513.
Ļ	17	Accounts payable and accrued expenses	Î		
Å	18	Grants payable	Ī		
В	19	Deferred revenue	İ		
L	20	Loans from officers, directors, trustees, & other disqualified persons	į		
Ī	21	Mortgages and other notes payable (attach schedule)	İ		
Ţ	22	Other liabilities (describe)		
E S	23	Total liabilities (add lines 17 through 22)		0.	0.
		Foundations that follow SFAS 117, check here and complete lines 24 through 26, and lines 30 and 31.	►X		
NF	24	Unrestricted .		518,178.	539,513.
N F E U T N	25	Temporarily restricted	Ī	,	
D	26	Permanently restricted	Ì		
A B A L A		Foundations that do not follow SFAS 117, check here and complete lines 27 through 31.	•		
ΕL	27	Capital stock, trust principal, or current funds			
SNI	28	Paid-in or capital surplus, or land, bldg., and equipment fund	Ī	· · · · · · · · · · · · · · · · · · ·	
C O E R S	29	Retained earnings, accumulated income, endowment, or other funds	Ì		
ŘŜ	30	Total net assets or fund balances (see instructions)	ľ	518,178.	539,513.

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) 518,178. 2 Enter amount from Part I, line 27a 2 78,784. Other increases not included in line 2 (itemize). 3 Add lines 1, 2, and 3 4 596,962. Decreases not included in line 2 (itemize). SEE STATEMENT 6 5 57,449. 6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30 6 539,513.

15 Other assets (describe ▶

Total liabilities and net assets/fund balances

Part III Analysis of Changes in Net Assets or Fund Balances

(see instructions)

690,551.

Pan	Capital Gains and L	osses for Tax on Investmen	nt Income				
	(a) List and describe t 2-story brick wareh	he kind(s) of property sold (for examp ouse, or common stock, 200 shares	ole, real estate, s MLC Company)	(b) How acc P — Purch D — Dona	ase	(C) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
1 a	SHORT TERM SECURITI	ES UBS FINANCIAL		P		VARIOUS	VARIOUS
b	LONG TERM SECURITIE	S UBS FINANCIAL		P		VARIOUS	VARIOUS
<u>c</u>	SHORT TERM SECURITI	ES UBS FINANCIAL		P		VARIOUS	VARIOUS
	LONG TERM SECURITIE			P		VARIOUS	VARIOUS
e	LONG TERM SECURITIE			P		VARIOUS	VARIOUS
	(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other ba			(h) Gain or ((e) plus (f) m	
a				9,215.			-210.
b				3,176.			15,505.
<u>C</u>				6,875.			1,938.
d				5,339.			898.
е						 	73.
		ing gain in column (h) and owned			_	(I) Gains (Col.	. (h)
	(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any			ain minus col (k), b an -0-) or Losses (fr	
a							-210.
b	· · · · · · · · · · · · · · · · · · ·					·	15,505.
c							1,938.
d							898.
e		<u> </u>				· · - · - · - · - · - · - · · - ·	73.
2	Capital gain net income or (ne	t capital loss). If gain, also	enter in Part I, line 7 ter -0- in Part I, line 7	_	2		18,204.
3	Net short-term capital gain or	(loss) as defined in sections 1222(5	i) and (6)	Ī			
	If gain, also enter in Part I, line in Part I, line 8	e 8, column (c) See instructions. If	(loss), enter -0-	-	3		18,204.
Par	Qualification Under	r Section 4940(e) for Reduce	ed Tax on Net Investn	nent Inco	me		
Was		his part blank ction 4942 tax on the distributable a fy under section 4940(e). Do not co	- · · · · · · · · · · · · · · · · · · ·	pase period	ქ?	Yes	X No
1	Enter the appropriate amount in	each column for each year, see the in	structions 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 as	sets		(d) Distributior (col. (b) divided	
	2016	59,428.	51	8,178.			0.114686
	2015	24,846.		7,143.			0.047133
	2014	15,478.		5,231.			0.034000
	2013	27,593.		3,058.			0.058329
	2012	19,950.		0,052.			0.046390
	Total of line 1, column (d).				2		0.300538
3	Average distribution ratio for the number of years the foundation	5-year base period — divide the total n has been in existence if less thar	on line 2 by 5 0, or by the .		3		0.060108
4	Enter the net value of nonchar	itable-use assets for 2017 from Pa	rt X, line 5		_4_		
5	Multiply line 4 by line 3				5		
6	Enter 1% of net investment inc	come (1% of Part I, line 27b)			6		184.
7	Add lines 5 and 6				7		184.
8	Enter qualifying distributions fr	om Part XII, line 4			8		35,219.
	If line 8 is equal to or greater that	n line 7, check the box in Part VI, line	e 1b, and complete that part	using a 1%	tax r	ate See the	

•		2			
	(2017) THE RD FOUNDATION, INC		13-4201151		Page 4
	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4	940(e), or 4948	- see instruction	ns)	 -
, ,	erating foundations described in section 4940(d)(2), check here . • and enter 'N/A' on I				
	ing or determination letter (attach copy of letter if necessary – see in:	structions)			
	c foundations that meet the section 4940(e) requirements in Part V,		- · <u> 1 </u>		184.
	ere X and enter 1% of Part I, line 27b	-1 4h3			
	omestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, co	oi (n)			
	er section 511 (domestic section 4947(a)(1) trusts and taxable ons only, others, enter -0-)		2		0.
3 Add lines	• • • • • • • • • • • • • • • • • • • •		. 3		184.
	A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only	v. others, enter			0.
	ed on investment income. Subtract line 4 from line 3 If zero or less, enter -0-	,,	5		184.
	Payments				
	lated tax pmts and 2016 overpayment credited to 2017 . 6 a	1,	147.		
b Exempt 1	foreign organizations — tax withheld at source 6 b				
c Tax paid	I with application for extension of time to file (Form 8868)				ŀ
d Backup v	withholding erroneously withheld 6 d				
7 Total cre	edits and payments. Add lines 6a through 6d		7	1,	147.
8 Enter an	ly penalty for underpayment of estimated tax. Check here 🔲 if Form 2220 is a	attached	8		
9 Tax due. I	If the total of lines 5 and 8 is more than line 7, enter amount owed		▶ 9		<u> 0 . </u>
10 Overpayme	ent. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid		10		<u>963.</u>
	amount of line 10 to be: Credited to 2018 estimated tax	Refunded	<u> 11 </u>		0.
	Statements Regarding Activities			1 14.	. 1
1 a During the participation	he tax year, did the foundation attempt to influence any national, state, or local ate or intervene in any political campaign?	legislation or d	ıd ıt	1 a	s No X
	end more than \$100 during the year (either directly or indirectly) for political purposes instructions for the definition	7		1 b	l x
If the ans	swer is 'Yes' to 1a or 1b, attach a detailed description of the activities and copies of any	materials publishe	ed		
	buted by the foundation in connection with the activities			1 c	X
c Did the f	foundation file Form 1120-POL for this year? e amount (if any) of tax on political expenditures (section 4955) imposed during	the vear		'-	 ^
(1) On t	the foundation >\$ 0. (2) On foundation managers	► \$	0	.	
e Enter the	e reimbursement (if any) paid by the foundation during the year for political expenditui	re tax imposed oi	1	7	
	on managers >\$ 0.	45 - IDC2			
	foundation engaged in any activities that have not previously been reported to	the IRS		2	<u> </u>
·	attach a detailed description of the activities.				
of incorp	foundation made any changes, not previously reported to the IRS, in its governing ins poration, or bylaws, or other similar instruments? If 'Yes,' attach a conformed c	opy of the chan	ges	3	X
	foundation have unrelated business gross income of \$1,000 or more during the	year?		4 a	X
	has it filed a tax return on Form 990-T for this year?				N/A
	a liquidation, termination, dissolution, or substantial contraction during the year?	•	•	5	X
	attach the statement required by General Instruction T.	-14b			
	requirements of section 508(e) (relating to sections 4941 through 4945) satisfie	a enner			
•	nguage in the governing instrument, or				
with th	te legislation that effectively amends the governing instrument so that no mandatory one state law remain in the governing instrument?	•	nflict	6	X
	undation have at least \$5,000 in assets at any time during the year? If 'Yes,' complete Part II, col (c),		_	7 X	
	ne states to which the foundation reports or with which it is registered. See instr	ructions	-		
N/A					
b If the answ (or design	wer is 'Yes' to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General nate) of each state as required by <i>General Instruction G</i> 2 If 'No,' attach explanation			8b X	ζ
9 Is the for cale	oundation claiming status as a private operating foundation within the meaning ndar year 2017 or the tax year beginning in 2017? See the instructions for Part	of section 4942 XIV. If 'Yes,' co	(j)(3) or 4942(j)(5 omplete Part XIV	9	X
	persons become substantial contributors during the tax year? If 'Yes,' attach a schedu		ames	10	
and add	urcooca			orm 990-PF	

Part VII-A Statements Regarding Activities (continued)		•	
At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' attach schedule. See instructions	. 11	Yes	No X
12 Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If 'Yes,' attach statement See instructions	12		Х
13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	7 13	Х	
Website address N/A			
14 The books are in care of ► RD_FOUNDATION, INC Telephone no ► 91 Located at ► 450 PARK AVE 3RD FLOOR NEW YORK NY ZIP + 4 ► 10022	7-743-9	<u>660</u> _	
15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 – check here	<u>n/</u> A		
and enter the amount of tax-exempt interest received or accrued during the year	<u> </u>		N/A
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	Yes	No X
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
1 a 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 X]	No		
(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?	No		
(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	No		
(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	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			/3
Organizations relying on a current notice regarding disaster assistance, sheet instructions	1 b	N	/A
c Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts,			- 1
that were not corrected before the first day of the tax year beginning in 2017?	1 c		X
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 XI	No		
If 'Yes,' list the years ▶ 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)	j l		
(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.)	2 b	N	
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			
3 a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? Yes X	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	N	
4 a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?		IN	
	4a		X
b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2017?	AL		v
BAA	Form 990	DE C	X 2017)

Form 990-PF (2017) THE RD FOUNDATION,	INC	1944 11 8 8	13-420	01151 Page 6
Part VII-B Statements Regarding Activiti		1 4720 May Be Req	uired (continued)	
5 a During the year, did the foundation pay or incur ar				Yes No
(1) Carry on propaganda, or otherwise attemp	-		Yes X	No
(2) Influence the outcome of any specific publion, directly or indirectly, any voter registra	ition drive?		⊢ ⊣	No
(3) Provide a grant to an individual for travel,		•	∐ Yes X	No
(4) Provide a grant to an organization other than in section 4945(d)(4)(A)? See instructions	a charitable, etc., organi	zation described	. Yes X	No
(5) Provide for any purpose other than religion educational purposes, or for the prevention			Yes X	No
b If any answer is 'Yes' to 5a(1)—(5), did any of described in Regulations section 53 4945 or in a c See instructions	the transactions fail to current notice regarding d	qualify under the excellisaster assistance?	ptions	5 b N/A
Organizations relying on a current notice rega	rding disaster assistand	ce, check here	▶ []	
c If the answer is 'Yes' to question 5a(4), does to tax because it maintained expenditure responsif 'Yes,' attach the statement required by Region 1.	sibility for the grant?	•	N/A Yes	No
6 a Did the foundation, during the year, receive ar		• •	s n. m	.
on a personal benefit contract?. b Did the foundation, during the year, pay premi	iums, directly or indirec	tly, on a personal bene		No 6b X
If 'Yes' to 6b, file Form 8870.				
7a At any time during the tax year, was the found	· · · · · · · · · · · · · · · · · · ·		س ب	No
b If 'Yes,' did the foundation receive any procee Part VIII Information About Officers, Di				N/A 7b
and Contractors		Touristantina	goro,gy . a.a =	p.03003,
1 List all officers, directors, trustees, and found	dation managers and th	neir compensation. See	instructions.	
(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
ROSS DWORMAN	DIRECTOR	0.	0.	0.
450 PARK AVENUE 3RD FLOOR NEW YORK, NY 10022	0			
ALVIN DWORMAN	DIRECTOR	0.	0.	0.
450 PARK AVENUE 3RD FLOOR	0			
NEW YORK, NY 10022 SARAH KATHERINE MAYFIELD	DIRECTOR		0.	0.
450 PARK AVENUE 3RD FLOOR NEW YORK, NY 10022	0	0.	0.	0.
1011/11/10022				
2 Compensation of five highest-paid employees (of	ther than those included	on line 1 – see instructio	ns). If none, enter 'NONE	<u></u>
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d)Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE				

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Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Pai and Contractors (continued)	d Employees,
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
NONE	
~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	
	<del></del>
	<del></del>
	<del></del>
Total number of others receiving over \$50,000 for professional services	<b>&gt;</b> 0
Part IX-A Summary of Direct Charitable Activities	
Tartix-A Junillary 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
	<del></del>
1 N/A	
2	
3	
4	
<b>"</b>	
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 <u>N/A</u>	
2	
All other program-related investments. See instructions	<del></del>
3	
Total. Add lines 1 through 3	▶ 0.
BAA	Form <b>990-PF</b> (2017)

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Part X Minimum Investment Return (All domestic foundations must complete this p 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.     b Average of monthly cash balances	. 1a	
C Fair market value of all other assets (see instructions)	10	
d Total (add lines 1a, b, and c)	. 1d	0.
e Reduction claimed for blockage or other factors reported on lines 1a and	. 13	
1c (attach detailed explanation)		
2 Acquisition indebtedness applicable to line 1 assets	2	
3 Subtract line 2 from line 1d	3	<del></del>
4 Cash deemed held for charitable activities. Enter 1-1/2% of line 3		
(for greater amount, see instructions)	4	
5 Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	0.
6 Minimum investment return. Enter 5% of line 5	6	0.
Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private		ations
and certain foreign organizations, check here ▶ and do not complete this	part.)	
1 Minimum investment return from Part X, line 6	1	
2 a Tax on investment income for 2017 from Part VI, line 5	184.	
b Income tax for 2017. (This does not include the tax from Part VI.)		
c Add lines 2a and 2b	2 c	184.
3 Distributable amount before adjustments. Subtract line 2c from line 1	3	-184.
4 Recoveries of amounts treated as qualifying distributions .	4	
5 Add lines 3 and 4	5	-184.
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	0.
Part XII Qualifying Distributions (see Instructions)		
<ul> <li>Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes</li> <li>Expenses, contributions, gifts, etc. — total from Part I, column (d), line 26</li> </ul>	1 a	35,219.
<b>b</b> Program-related investments — total from Part IX-B	1 b	
2 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purpos	es <b>2</b>	
3 Amounts set aside for specific charitable projects that satisfy the: a Suitability test (prior IRS approval required)	3 a	

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

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

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

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35,219.

35,035.

184.

3 b

4

5

6

**b** Cash distribution test (attach the required schedule)

Adjusted qualifying distributions. Subtract line 5 from line 4

## Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2016	(c) 2016	<b>(d)</b> 2017
Distributable amount for 2017 from Part XI, line 7				2017
2 Undistributed income, if any, as of the end of 2017				0
a Enter amount for 2016 only				
<b>b</b> Total for prior years 20 , 20 , 20		<del></del>	0.	
3 Excess distributions carryover, if any, to 2017		0.		
<b>a</b> From 2012				
<b>b</b> From 2013 3, 956.				
c From 2014			1	
<b>d</b> From 2015 .				
e From 2016 36, 678.			ĺ	
Total of lines 3a through e	40,634.	ì	}	
4 Qualifying distributions for 2017 from Part	10,034.			
XII, line 4 ► \$ 35, 219.				
a Applied to 2016, but not more than line 2a	ļ			
b Applied to undistributed income of prior years			0.	
(Crection required — see instructions)		0.		
c Treated as distributions out of corpus		<u></u>		
(Liection required — see instructions)	0.			
d Applied to 2017 distributable amount				
e Remaining amount distributed out of corpus	35,219.			0.
(If an amount appears in column (d) the	0.			0.
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	75,853.			
<b>b</b> Prior years' undistributed income Subtract line 4b from line 2b	73,833.			
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		0.		
d Subtract line 6c from line 6b. Taxable		0.		
amount — see instructions				
e Undistributed income for 2016. Subtract line 4a from line 2a Taxable amount — see instructions		0.		
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				0 <i>.</i>
corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required — see instructions)	0.			
8 Excess distributions carryover from 2012 not applied on line 5 or line 7 (see instructions)	0.			
9 Excess distributions carryover to 2018. Subtract lines 7 and 8 from line 6a	75,853.			
10 Analysis of line 9	, , , , , , , ,			
a Excess from 2013 3, 956.			1	1
b Excess from 2014			{	}
c Excess from 2015	}			
d Excess from 2016 36, 678.				
e Excess from 2017 35, 219.				
BAA				

Form 990-PF (2017) THE RD FOUNDATION				13-420115	1 Page 10
PartXIV Private Operating Foundat					N/A
1 a If the foundation has received a ruling or dete is effective for 2017, enter the date of the	ruling	,	-	_ ` . ▶	, 4'
<b>b</b> Check box to indicate whether the foundate		rating foundation d	·	4942(j)(3) or	4942(j)(5)
2 a Enter the lesser of the adjusted net income from Part I or the minimum	Tax year		Prior 3 years		(e) Total
investment return from Part X for each year listed	(a) 2017	<b>(b)</b> 2016	<b>(c)</b> 2015	(d) 2014	<u>/</u>
<b>b</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				1	
<ul> <li>Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c</li> </ul>					
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					
<ol> <li>Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)</li> </ol>					
(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	· ·				
PartXV Supplementary Information assets at any time during the	(Complete this e year — see in	part only if the structions.)	foundation had	\$5,000 or more	e in
1 Information Regarding Foundation Management					
a List any managers of the foundation who have close of any tax year (but only if they have ROSS DWORMAN	e contributed more th	nan 2% of the total co than \$5,000) (See	ontributions received ( section 507(d)(2).)	by the foundation bef	ore the
<b>b</b> List any managers of the foundation who own a partnership or other entity) of which the	10% or more of the	stock of a corporatio	n (or an equally large	portion of the owner	rship of
a partnership or other entity) of which the NONE	foundation has a 1	0% or greater intere	est		·
2 Information Regarding Contribution, Grant, 6	Gift, Loan, Scholarsh	nip, etc., Programs:			
Check here ► X if the foundation only marequests for funds If the foundation make 2a, b, c, and d See instructions.					
a The name, address, and telephone number of	r email address of th	e person to whom ap	plications should be	addressed.	
<b>b</b> The form in which applications should be	submitted and infor	mation and materia	is they should inclu	de.	
c Any submission deadlines					
		<del></del>			
<b>d</b> Any restrictions or limitations on awards,	such as by geograp	hical areas, charita	ble fields, kinds of i	nstitutions, or other	factors:

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient	Contribution	
a Paid during the year				
SEE STATEMENT 8				ļ
				Ì
Total		<u> </u>	► 3a	35,219.
<b>b</b> Approved for future payment		<u> </u>		33,213.
				1
Total .			► 31	ol

gi 03	ss amounts unless otherwise indicated	Unrelated	ousiness income	Excluded b	y section 512, 513, or 514	(e)
1 Prog	gram service revenue.	(a) Business code	<b>(b)</b> Amount	(c) Exclu- sion code	<b>(d)</b> Amount	Related or exempt function income (See instructions)
a						
b						
С						
d						
e						
f						
_	s and contracts from government agencies					
	nbership dues and assessments		<u> </u>			<del></del>
	est on savings and temporary cash investments				81.	
	dends and interest from securities				10,087.	
	rental income or (loss) from real estate.	<u> </u>				
	t-financed property	<u> </u>	····			
	debt-financed property	<u> </u>				
	ental income or (loss) from personal property	<b></b>				
	er investment income				53.	
	or (loss) from sales of assets other than inventory	<b></b>				18,204.
	income or (loss) from special events.					
	ss profit or (loss) from sales of inventory	<b></b>				
<b>11</b> Othe	er revenue		<del></del>	<del>  </del> -		
.a		ļ <u> </u>		_		
ь	· · · · · · · · · · · · · · · · · · ·	<del>                                     </del>	<del></del>	+-+	<del></del>	
°.——		<del>                                     </del>	<del></del>			·
d		<b> </b>		<del></del>		. <del> </del>
10		<del> </del>	<del> </del>	<del>                                     </del>		
	total Add columns (b), (d), and (e)				10,221.	18,204.
	il. Add line 12, columns (b), (d), and (e)				¹³ -	28,425.
	sheet in line 13 instructions to verify calculation			and Division of		
Part XV	I-B   Relationship of Activities to the	Accomplisi		<del></del>		
	I-B Relationship of Activities to the Explain below how each activity for which in	Accomplish	ed in column (e) of	Part XVI-A	contributed importantl	y to the
Part XV Line No.	I-B   Relationship of Activities to the	Accomplish	ed in column (e) of	Part XVI-A	contributed importantl	y to the structions)
Part XV Line No.	I-B Relationship of Activities to the Explain below how each activity for which in	Accomplish	ed in column (e) of	Part XVI-A	contributed importantl	y to the estructions)
Part XV Line No.	I-B Relationship of Activities to the Explain below how each activity for which in	Accomplish	ed in column (e) of	Part XVI-A	contributed importantl	y to the nstructions)
Part XV Line No.	I-B Relationship of Activities to the Explain below how each activity for which in	Accomplish	ed in column (e) of	Part XVI-A	contributed importantl	y to the nstructions )
Part XV Line No.	I-B Relationship of Activities to the Explain below how each activity for which in	Accomplish	ed in column (e) of	Part XVI-A	contributed importantl	y to the istructions )
Part XV Line No.	I-B Relationship of Activities to the Explain below how each activity for which in	Accomplish	ed in column (e) of	Part XVI-A	contributed importantl	y to the structions )
Part XV Line No.	I-B Relationship of Activities to the Explain below how each activity for which in	Accomplish	ed in column (e) of	Part XVI-A	contributed importantl	y to the structions )
Part XV Line No.	I-B Relationship of Activities to the Explain below how each activity for which in	Accomplish	ed in column (e) of	Part XVI-A	contributed importantl	y to the istructions )
Part XV Line No.	I-B Relationship of Activities to the Explain below how each activity for which in	Accomplish	ed in column (e) of	Part XVI-A	contributed importantl	y to the instructions )
Part XV Line No.	I-B Relationship of Activities to the Explain below how each activity for which in	Accomplish	ed in column (e) of	Part XVI-A	contributed importantl	y to the instructions )
Part XV Line No.	I-B Relationship of Activities to the Explain below how each activity for which in	Accomplish	ed in column (e) of	Part XVI-A	contributed importantl	y to the instructions )
Part XV Line No.	I-B Relationship of Activities to the Explain below how each activity for which in	Accomplish	ed in column (e) of	Part XVI-A	contributed importantl	y to the structions )
Part XV Line No.	I-B Relationship of Activities to the Explain below how each activity for which in	Accomplish	ed in column (e) of	Part XVI-A	contributed importantl	y to the structions )
Part XV Line No.	I-B Relationship of Activities to the Explain below how each activity for which in	Accomplish	ed in column (e) of	Part XVI-A	contributed importantl	y to the istructions )
Part XV Line No.	I-B Relationship of Activities to the Explain below how each activity for which in	Accomplish	ed in column (e) of	Part XVI-A	contributed importantl	y to the instructions )
Part XV Line No.	I-B Relationship of Activities to the Explain below how each activity for which in	Accomplish	ed in column (e) of	Part XVI-A	contributed importantl	y to the instructions )
Part XV Line No.	I-B Relationship of Activities to the Explain below how each activity for which in	Accomplish	ed in column (e) of	Part XVI-A	contributed importantl	y to the instructions )
Part XV Line No.	I-B Relationship of Activities to the Explain below how each activity for which in	Accomplish	ed in column (e) of	Part XVI-A	contributed importantl	y to the instructions )
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Part XV Line No.	I-B Relationship of Activities to the Explain below how each activity for which in	Accomplish	ed in column (e) of	Part XVI-A	contributed importantl	y to the instructions )
Part XV Line No.	I-B Relationship of Activities to the Explain below how each activity for which in	Accomplish	ed in column (e) of	Part XVI-A	contributed importantl	y to the instructions )

## Part XVII Information Regarding Transfers to and Transactions and Relationships With Noncharitable Exempt Organizations

							<del></del>		<del></del> -				<del> </del>	Vac	No
1 Di de re	id the e escribe	organization direct ed in section 501(c to political organiz	tly or indirectly ) of the Code ( ations?	engage (other tha	in any of an section	the follow 1501(c)(3	ving with 3) organiz	any ot zations	her organiza ) or in section	ation on 527	,			Yes	No
a Tr	ansfer	rs from the reporting	ng foundation t	to a nonc	haritable	exempt o	organizat	ion of						·,	, ·
(1	) Cas	h											1 a (1)		X
(2	) Othe	er assets .											1 a (2)		X
<b>b</b> O	ther tra	ansactions											4	. ;	
(1	) Sale	es of assets to a no	oncharitable ex	kempt or	ganızatıor	า							1 b (1)		<u>X</u>
(2	) Puro	chases of assets fr	rom a noncharı	itable exe	empt orga	anızatıon							1 b (2)		X
(3	) Ren	tal of facilities, equ	uipment, or oth	ner asset	s								1 b (3)		X
(4	) Reir	nbursement arrang	gements										1 b (4)		<u>X</u>
•	•	ns or loan guarant											1 b (5)		X
•	•	formance of service		•	_								1 b (6)		X
c SI	harıng	of facilities, equip	ment, mailing	lists, oth	er assets	, or paid e	employee	es					1 c		X
<b>d</b> If th ar	the an e good ov tran	nswer to any of the is, other assets, or s isaction or sharing	e above is 'Yes services given b	y the repo	ete the fol orting four	llowing so idation If	thedule (	Columr ation re	n <b>(b)</b> should eceived less the	always han fai	s show r marke services	the fair t value ir	market val 1 ed.	ue of	
(a) Line		(b) Amount involved				npt organizat			Description of					ngement	
N/A	-	(b) randon money	(5) /12	0 01 110110110		,pr organiza		(-/	2000, p. 0.1. 0.1		,			.90	<del></del>
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de	escribe	undation directly or ed in section 501(c	;) of the Code (	(other tha	or related an section	to, one or 1 501(c)(3	more tax 3)) or in s	-exemp section	t organizatior 527?	ns			Yes	- X	No
<b>b</b> ir		complete the follo	<del></del>	·	(h) Tun	of orang	nization.			(a) D	ocorinti	on of ro	lationship		
NT / 3	(a	) Name of organiza	ation		<b>(а)</b> туре	e of organ	iization		·	(c) D	escriptii	on or re	lationship		
N/A											<del></del>				
		<del></del>	·												
			<del></del>	<del></del>											
———			<del></del>			<del></del>							<del></del>		
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Sign	correct,	penalties of perjury 1 dec and complete Declarati	ion of preparer (other	er than taxp	return, inclui ayer) is bas	ed on all info	ormation of	which pre	eparer has any k	nowledge	e Desi oi iii	y Kilowiedi			
Here		1/11/11/11	/	,		. ~ <i>U</i>	1/12/11	2					May the this retur	n with th	16 16
nere		3/CM	w			1/2 7/	1410		RESIDEN'	<u>T</u> _			preparer See instr	uctions.	elow'
	Signa	ature of officer or trustee			T	Date	111-	Ti	tle			<del></del>		Yes	No
		Print/Type preparer's	name		Preparer's	/JAKE	Y Men	reli (	Date	_	Check	L] if	PTIN		
Paid		JOHN S MEN	ZELOS		JOHN∠	S MENZ	ELOS/		3-17-1	<u> </u>	self-emp	loyed	P00240	231	
Prepa	rer	Firm's name	JOHN S. N	MENZEL	OS EA	INC.				Fırı	n's EIN	01-0	561132		
Use O		Firm's address		CARSON		SUITE	A								
		<u> </u>	TORRANCE,							Pho	one no	<u> 310</u> -	-3 <u>28-4</u> 3	44	
BAA													Form <b>99</b>	0-PF (	2017)

## 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

Name of the organization THE RD FOUL	NDATION, INC	Employer identification number
C/O RD CAP	[TAL	13-4201151
Organization type (check one):		
Filers of:	Section:	
Form 990 or 990-EZ	501(c)( ) (enter number) o	organization
	4947(a)(1) nonexempt charitable	e trust <b>not</b> treated as a private foundation
	527 political organization	
Form 990-PF	X 501(c)(3) exempt private founda	tion
	4947(a)(1) nonexempt charitable	e trust treated as a private foundation
	501(c)(3) taxable private foundate	tion
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	e General Rule and a Special Rule See instructions.
General Rule		
X For an organization filing Form 9 property) from any one contribut	990, 990-EZ, or 990-PF that received, during the or. Complete Parts I and II See instructions for	year, contributions totaling \$5,000 or more (in money or determining a contributor's total contributions
Special Rules		
under sections 509(a)(1) and 170(b	)(1)(A)(vi), that checked Schedule A (Form 990 or 9	t met the 33-1/3% support test of the regulations 390-EZ), Part II, line 13, 16a, or 16b, and that ater of (1) \$5,000 or (2) 2% of the amount on (i)
during the year, total contribution	section 501(c)(7), (8), or (10) filing Form 990 or ns of more than \$1,000 <i>exclusively</i> for religious, of cruelty to children or animals. Complete Parts	r 990-EZ that received from any one contributor, charitable, scientific, literary, or educational I, II, and III
during the year, contributions ex \$1,000. If this box is checked, ei charitable, etc., purpose Don't c	section 501(c)(7), (8), or (10) filing Form 990 or clusively for religious, charitable, etc., purposes after here the total contributions that were received complete any of the parts unless the <b>General Ru</b> us, charitable, etc., contributions totaling \$5,000	ed during the year for an <i>exclusively</i> religious, <b>le</b> applies to this organization because
990-PF), but it <b>must</b> answer 'No' on	Part IV, line 2, of its Form 990; or check the box	Rules doesn't file Schedule B (Form 990, 990-EZ, or x on line H of its Form 990-EZ or on its Form 990-PF,
Fait i, mie z, to certify that it doesn	t meet the filing requirements of Schedule B (Fo	Jill 330, 330-LZ, OF 330-FF J.

THE RD FOUNDATION, INC    13-4201151	Schedule Name of org	B (Form 990, 990-EZ, or 990-PF) (2017)	Page	1 of 1 of Par
Number   Name, address, and ZIP + 4   Total contributions   Type of contributions	•			
Contributions   Person   Payroll   Noncash   Number   Name, address, and ZIP + 4   Contributions   Person   Payroll   Noncash   Number   Name, address, and ZIP + 4   Contributions   Person   Payroll   Noncash   Number   Name, address, and ZIP + 4   Contributions   Person   Payroll   Noncash   Number   Name, address, and ZIP + 4   Contributions   Person   Payroll   Noncash   Number   Name, address, and ZIP + 4   Contributions   Person   Payroll   Noncash   Number   Name, address, and ZIP + 4   Contributions   Person   Payroll   Noncash   Number   Name, address, and ZIP + 4   Contributions   Person   Payroll   Noncash   Number   Name, address, and ZIP + 4   Contributions   Person   Payroll   Noncash   Number   Name, address, and ZIP + 4   Contributions   Type of contributions   Person   Payroll   Noncash   Number   Name, address, and ZIP + 4   Contributions   Type of contributions   Person   Payroll   Noncash   Number   Name, address, and ZIP + 4   Contributions   Person   Payroll   Noncash   Number   Name, address, and ZIP + 4   Contributions   Person   Payroll   Noncash   Number   Name, address, and ZIP + 4   Contributions   Person   Payroll   Noncash   Number   Name, address, and ZIP + 4   Contributions   Person   Payroll   Noncash   Number   Name, address, and ZIP + 4   Contributions   Person   Payroll   Number   Name, address, and ZIP + 4   Contributions   Person   Payroll   Number   Name, address, and ZIP + 4   Contributions   Person   Payroll   Number   Number   Name, address, and ZIP + 4   Contributions   Person   Payroll   Number   Nu	Partl	Contributors (see instructions). Use duplicate copies of Part I if additiona	al space is needed	,
ASO_PARK_AVENUE, 3RD_FLOOR   S	(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
NEW YORK, NY 10022	1			Payroll
Contributions   Person   Payroll   Noncash   Complete Part III for noncash contribution   Person   Payroll   Noncash   Person   Payroll   Noncash   Person   Payroll   Noncash   Person   Payroll   Noncash   Payroll   Noncash   Payroll   Payroll   Payroll   Payroll   Payroll   Payroll   Payroll   Payroll   Payroll   Noncash   Person   Payroll   Payroll   Payroll   Noncash   Person   Payroll   Noncash   Payroll   Noncash   Payroll   Noncash   Payroll		NELL MADY - NY 10000		1 -
S	(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
Number Name, address, and ZIP + 4  Name, address, and ZIP + 4  Name, address, and ZIP + 4  Name, address, and ZIP + 4  Name, address, and ZIP + 4  Name, address, and ZIP + 4  Name, address, and ZIP + 4  Name, address, and ZIP + 4  Name, address, and ZIP + 4  Name, address, and ZIP + 4  Name, address, and ZIP + 4  Name, address, and ZIP + 4  Name, address, and ZIP + 4  Name, address, and ZIP + 4  Name, address, and ZIP + 4  Name, address, and ZIP + 4  Name, address, and ZIP + 4  Name, address, and ZIP + 4  Name, address, and ZIP + 4  Name, address, and ZIP + 4  Name, address, and ZIP + 4  Name, address, and ZIP + 4  Name, address, and ZIP + 4  Name, address, and ZIP + 4  Name, address, and ZIP + 4  Name, address, and ZIP + 4  Name, address, and ZIP + 4  Name, address, and ZIP + 4  Name, address, and ZIP + 4  Name, address, and ZIP + 4  Name, address, and ZIP + 4  Name, address, and ZIP + 4  Name, address, and ZIP + 4  Name, address, and ZIP + 4  Name, address, and ZIP + 4  Name, address, and ZIP + 4  Name, address, and ZIP + 4  Name, address, and ZIP + 4  Name, address, and ZIP + 4  Name, address, and ZIP + 4  Name, address, and ZIP + 4  Name, address, and ZIP + 4  Name, address, and ZIP + 4  Name, address, and ZIP + 4  Name, address, and ZIP + 4  Name, address, and ZIP + 4  Name, address, and ZIP + 4  Name, address, and ZIP + 4  Name, address, and ZIP + 4  Name, address, and ZIP + 4  Name, address, and ZIP + 4  Name, address, and ZIP + 4  Name, address, and ZIP + 4  Name, address, and ZIP + 4  Name, address, and ZIP + 4  Name, address, and ZIP + 4  Name, address, and ZIP + 4  Name, address, and ZIP + 4  Name, address, and ZIP + 4  Name, address, and ZIP + 4  Name, address, and ZIP + 4  Name, address, and ZIP + 4  Name, address, and ZIP + 4  Name, address, and ZIP + 4  Name, address, and ZIP + 4  Name, address, and ZIP + 4  Name, address, and ZIP + 4  Name, address, and ZIP + 4  Name, address, and ZIP + 4  Name, address, and ZIP + 4  Name, address, and ZIP + 4  Name, address, and ZIP + 4  Name, address, and ZIP	 	 	 \$	Payroll Noncash Complete Part II for
Person   Payroll   Noncash   Noncash   Noncash   Payroll   Noncash   Noncash   Payroll   Noncash   Payroll   Noncash   Payroll   Noncash contributions   Person   Payroll   Noncash   Pa	(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
Number    Name, address, and ZIP + 4   Total contributions   Type of contributions			 ^{\$}	Payroll Noncash Complete Part II for
\$ Payroll   Noncash   Complete Part II for noncash contributions   Number   Name, address, and ZIP + 4   Total contributions   Person   Payroll   Noncash   (Complete Part II for noncash contributions   Person   Payroll   Noncash   (Complete Part II for noncash contributions   Person   Payroll   Noncash   Payroll   Noncash   Payroll   Noncash   Payroll   Noncash    (a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
\$ Person Payroll Noncash (Complete Part II for noncash contributions)  (a) Number Name, address, and ZIP + 4 Payroll Contributions  \$ (c) Total contributions  Person Payroll Noncash Person Payroll Noncash (Complete Part II for noncash contributions)			 \$	Payroll Noncash
Payroll   Noncash	(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
(a) Number Name, address, and ZIP + 4 Total contributions  Person Payroll Noncash (Complete Part II for noncash contributions)	<b></b>		 \$	Payroll Noncash
Payroll  Noncash  (Complete Part II for noncash contribution	(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
noncash contribution			 \$	Payroll
DAA Schodula P (Form 990, 990, F7 or 990, PF) (2	DAA			(Complete Part II for noncash contributions)

Page

1 to

1 of Part II

Name of organization

Employer identification number

THE RD FOUNDATION, INC

13-4201151

Lann M	Noncash Property (see instructions) Use duplicate copies of Part II if additional sp	pace is needed	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
	N/A		<del></del>
		\$	
(a) No	(1-)	(6)	(4)
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
!	<u></u>	\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
<del> </del>			
:		s	
/-> NI-		(6)	(4)
(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
		-	
		\$	_ <b></b>
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		-	
		\$	
RAA	Sch	edule B (Form 990, 990-F	7 or 990-PE) (2017

1 of Part III

Employer identification number

(a) No from	(b)	(c)	(d)
	exclusively religious, charitable, et or (10) that total more than \$1,000 for the following line entry. For organizations of contributions of \$1,000 or less for the year. Use duplicate copies of Part III if additional	ne year from any one contributor. Comple ompleting Part III, enter the total of exclusive (Enter this information once. See instruction	ete columns <b>(a)</b> through <b>(e) and</b> ely religious, charitable, etc.,
			13-4201151
	roundation, inc		

	Ose duplicate copies of Part III il additional	space is needed.		
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held
	N/A			
	Transferee's name, addres	(e) Transfer of gift ss, and ZIP + 4	Rela	tionship 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, addres	(e) Transfer of gift ss, and ZIP + 4	Rela	tionship 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, addres	(e) Transfer of gift ss, and ZIP + 4	Rela	tionship 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, addres	(e) Transfer of gift ss, and ZIP + 4	Rela	tionship of transferor to transferee

2017	FEDERAL STATEMENTS THE RD FOUNDATION, INC	PAGE 1
	C/O RD CAPITAL	13-420115
STATEMENT 1 FORM 990-PF, PART I, LINE 11 OTHER INCOME		
	(A) (B) NET REVENUE INVESTMENT PER BOOKS INCOME	(C) ADJUSTED NET INCOME
OTHER INVESTMENT INCOME	TOTAL \$ 53. \$ 0. \$	0.
STATEMENT 2 FORM 990-PF, PART I, LINE 16B ACCOUNTING FEES		
ACCOUNTING FEES .	(A) (B) NET (C) EXPENSES INVESTMENT ADJUSTED PER BOOKS INCOME NET INCOME  \$ 7,950. \$ 3,825.  TOTAL \$ 7,950. \$ 3,825. \$ 0.	(D) CHARITABLE PURPOSES  \$ 0.
STATEMENT 3 FORM 990-PF, PART I, LINE 18 TAXES		
FEDERAL EXCISE TAX FOREIGN TAX PAID	(A) (B) NET (C) EXPENSES INVESTMENT ADJUSTED PER BOOKS INCOME NET INCOME  \$ 500. \$ 250. 52. 26.  TOTAL \$ 552. \$ 276. \$ 0.	(D) CHARITABLE PURPOSES  \$ 0.
STATEMENT 4 FORM 990-PF, PART I, LINE 23 OTHER EXPENSES	/	
	(A) (B) NET (C) EXPENSES INVESTMENT ADJUSTED PER BOOKS INCOME NET INCOME	(D) CHARITABLE PURPOSES
UBS BROKERAGE FEES UBS BROKERAGE FEES	$\begin{array}{cccccccccccccccccccccccccccccccccccc$	<u>\$ 0.</u>

2017

### FEDERAL STATEMENTS

THE RD FOUNDATION, INC C/O RD CAPITAL

13-4201151

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**STATEMENT 5** FORM 990-PF, PART II, LINE 13 INVESTMENTS - OTHER

OTHER INVESTMENTS	VALUATION	BOOK	FAIR MARKET
	METHOD	VALUE	VALUE
300 ACADIA REALTY TRUST REIT	COST	\$ 8,208.	356.
13 ACADIA REALTY TRUST REIT	COST	356.	
TOTAL OTHER	INVESTMENTS	\$ 8,564.	
OTHER PUBLICLY TRADED SECURITIES			
EQUITIES - UBS # 51292	COST	148,253.	186,951.
EQUITIES - UBS # 51294	COST	185,324.	230,916.
EQUITIES - UBS #51295	COST	164.	8,563.
TOTAL OTHER PUBLICLY TRADER	SECURITIES	\$ 333,741.	\$ 426,430.
OTHER SECURITIES			
EQUITIES - UBS # 51289 TOTAL OTHER	COST	97,189.	101,133.
	R SECURITIES	\$ 97,189.	\$ 101,133.
	TOTAL	\$ 439,494.	\$ 536,127.

**STATEMENT 6** FORM 990-PF, PART III, LINE 5 **OTHER DECREASES** 

REDUCTION IN UBS PORTFOLIO BOOK VALUE / FMV

57,449. 57,449. TOTAL \$

STATEMENT 7 FORM 990-PF, PART VII-A, LINE 10 SUBSTANTIAL CONTRIBUTORS DURING THE TAX YEAR

NAME OF SUBSTANTIAL CONTRIBUTOR ADDRESS OF SUBSTANTIAL CONTRIBUTOR

ROSS DWORMAN

450 PARK AVENUE 3RD FLOOR NEW YORK, NY 10022

2017

### **FEDERAL STATEMENTS**

THE RD FOUNDATION, INC C/O RD CAPITAL

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STATEMENT 8 FORM 990-PF, PART XV, LINE 3A RECIPIENT PAID DURING THE YEAR

NAME AND ADDRESS	DONEE RELATIONSHIP	FOUND- ATION STATUS	PURPOSE OF GRANT	AMOUNT
CATHEDRAL OF ST JOHN THE DIVINE	NONE	PC	CHARITABLE CONTRIBUTION	\$ 1,500
CITY HARVEST	NONE	PC	CHARITABLE CONTRIBUTION	3,000
CHILDRENS BURN FOUNDATION	NONE	PC	CHARITABLE CONTRIBUTION	500
COMPASSION	NONE	PC	CHARITABLE CONTRIBUTION	1,518
CONGREGATION NER TAMIN OF SOUTH BAY	NONE	PC	CHARITABLE CONTRIBUTION	3,701
GREAT MUSIC AT ST JAMES	NONE	PC	CHARITABLE CONTRIBUTION	1,000
HAPPY TRAILS FOR KIDS	NONE	PC	CHARITABLE CONTRIBUTION	3,000
LEMON AID WORKERS	NONE	PC	CHARITABLE CONTRIBUTION	2,000
LOCKWOOD ARC	NONE	PC	CHARITABLE CONTRIBUTION	1,500
LUPUS RESEARCH ALLIANCE	NONE	PC	CHARITABLE CONTRIBUTION	1,000
MANIFESTWORKS	NONE	PC	CHARITABLE CONTRIBUTION	1,000
THE RAPE FOUNDATION	NONE	PC	CHARITABLE CONTRIBUTION	2,000
STATER BROS CHARIEIES/ BELIEVE WALK	NONE	PC	CHARITABLE CONTRIBUTION	500
WAGS & WALKS	NONE	PC	CHARITABLE CONTRIBUTION	1,000
GLACIER NORDIC CLUB	NONE	PC	CHARITABLE CONTRIBUTION	500
THE WHITEFISH COMMUNITY SCHOOL	NONE	PC	CHARITABLE CONTRIBUTION	500
JACKSON LAB	NONE	PC	CHARITABLE CONTRIBUTION	10,000
MT DESERT ISLAND YMCA	NONE	PC	CHARITABLE CONTRIBUTION	1,000
			TOTA	L \$ 35,219