efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93491134015438

OMB No 1545-0052

Form 990-PF

Department of the Treasury Internal Revenue Service

Return of Private Foundation

or Section 4947(a)(1) Trust Treated as Private Foundation ▶ Do not enter social security numbers on this form as it may be made public.
 ▶ Information about Form 990-PF and its instructions is at www.irs.gov/form990pf. 2017

Open to Public Inspection

For	caler	ndar year 2017, or tax year beginning 01	-01-20)17 , aı	nd ei	nding 12-31-	2017	
		indation FAMILY FUND				A Employer Id	entification numbe	r
<i></i>	IGALIN	FAMILI FOND	13-6138709					
Number and street (or P O box number if mail is not delivered to street address) Room/suite 3501 N SOUTHPORT AVENUE						B Telephone nu	mber (see instructior	ns)
						(312) 479-8499	1	
		i, state or province, country, and ZIP or foreign postal code L 606571435				C If exemption	application is pendin	g, check here
G Cl	neck al	l that apply 🔲 Initial return 🔲 Initial ret	urn of a	former public charity		D 1. Foreign or	ganızatıons, check he	ere . \square
		☐ Final return ☐ Amende	d return				ganizations meeting k here and attach coi	
		Address change Name ch	ange				indation status was t	· —
_		pe of organization Section 501(c)(3) exempt					n 507(b)(1)(A), chec	
		n 4947(a)(1) nonexempt charitable trust U Othe						
of	year <i>(f</i>	xet value of all assets at end from Part II, col (c), Set 2,291,056	ecify) _	☑ Cash ☐ Accru	ıal		ition is in a 60-month n 507(b)(1)(B), chec	
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 necessa equal the amounts in column (a) (see instructions))	rıly	expenses per books	(ь)	Net investment income	(c) Adjusted net income	for charitable purposes (cash basis only)
	1	Contributions, gifts, grants, etc , received (attach						(cash basis only)
		schedule)						
	2	Check ► ✓ If the foundation is not required to at Sch B	tach					
	3	Interest on savings and temporary cash investmen	nts					
	4	Dividends and interest from securities .		42,231		42,231		
	5a	Gross rents						
Revenue	b	Net rental income or (loss)						
	6a	Net gain or (loss) from sale of assets not on line 1	0	-4,253				
3Ve	b	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	• •					
	10a		• •					
	b	Gross sales less returns and allowances Less Cost of goods sold						
	c	Gross profit or (loss) (attach schedule)						
	11	Other income (attach schedule)		2,912		0	0	
	12	Total. Add lines 1 through 11		40,890		42,231	0	
	13	Compensation of officers, directors, trustees, etc		0		0	0	0
	14	Other employee salaries and wages						
Sè	15	Pension plans, employee benefits						
ns(16a	Legal fees (attach schedule)						
ž Š	ь	Accounting fees (attach schedule)		2,625		1,313	0	0
i i	c	Other professional fees (attach schedule)						
and Administrative Expenses	17	Interest						
Stre	18	Taxes (attach schedule) (see instructions)		1,521		927	0	0
≣	19	Depreciation (attach schedule) and depletion .						
Ē	20	Occupancy						
≠ pι	21	Travel, conferences, and meetings		1,722	<u> </u>	0	0	0
ie i	22	Printing and publications		95.1	_	=	_	_
Operating	23	Other expenses (attach schedule)		1,411		0	0	0
eral	24	Total operating and administrative expenses		7 270		2 240	0	0
ğ	25	Add lines 13 through 23		7,279 120,050	<u> </u>	2,240	0	120,050
	26	Total expenses and disbursements. Add lines	• • 24 and	120,030				120,030
		25		127,329		2,240	0	120,050
	27	Subtract line 26 from line 12		00.400				
	a	Excess of revenue over expenses and disbursements		-86,439				
	ь	Net investment income (If negative, enter -0-)				39,991		
	С	Adjusted net income(If negative, enter -0-)					0	
For	Paper	work Reduction Act Notice, see instructions.				Cat No 11289>	For	m 990-PF (2017)

1,321,006

1,377,965

1,377,965

1,377,965

1,377,965

1,242,148

1,291,526

1,291,526

1,291,526

1,291,526

2

3

4

5

6

1,377,965

1,291,526

1.291.526 Form **990-PF** (2017)

0

-86,439

2,241,678

2,291,056

•	

4

5

6

7

8

9

10a

b

C

11

12

13

14

15

16

17

18

19

20

21 22

23

24

25

26

28

29

31

Part III

2

Liabilities

Balances

Fund

ŏ

Assets 27

Net 30 Less allowance for doubtful accounts ▶

Less allowance for doubtful accounts ▶

Less allowance for doubtful accounts ▶

Land, buildings, and equipment basis ▶

instructions Also, see page 1, item I)

Other assets (describe > _

Other liabilities (describe -

Unrestricted . . .

Permanently restricted

and complete lines 27 through 31.

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

Decreases not included in line 2 (itemize) .

Enter amount from Part I, line 27a

Other increases not included in line 2 (itemize) > ____

Temporarily restricted

Receivables due from officers, directors, trustees, and other

Prepaid expenses and deferred charges

Investments—land, buildings, and equipment basis ▶ _

Less accumulated depreciation (attach schedule)

Less accumulated depreciation (attach schedule)

Total assets (to be completed by all filers—see the

Foundations that follow SFAS 117, check here ▶ □

and complete lines 24 through 26 and lines 30 and 31.

disqualified persons (attach schedule) (see instructions)

Other notes and loans receivable (attach schedule) ▶

Investments—U S and state government obligations (attach schedule)

Loans from officers, directors, trustees, and other disqualified persons Mortgages and other notes payable (attach schedule).

Total liabilities(add lines 17 through 22)

Foundations that do not follow SFAS 117, check here ▶ ✓

Paid-in or capital surplus, or land, bldg, and equipment fund

Retained earnings, accumulated income, endowment, or other funds

Total net assets or fund balances (see instructions)

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

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

Analysis of Changes in Net Assets or Fund Balances

Pledges receivable

	(a) the kınd(s) of property sold (e g , re ehouse, or common stock, 200 shs		(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
1 a KINDER MORGAN INC				2012-01-03	2017-12-01
b ENBRIDGE INC				2010-02-18	2017-12-01
С					
d					
e					
(e) Gross sales price	(f) Depreciation allowed (or allowable)	Cost or d	g) other basis ense of sale	Gain o	h) r (loss)) minus (g)
a 2	7,674		52,081		-24,407
b 4	6,931		26,777		20,154
c					
d					
e					
Complete only for assets	showing gain in column (h) and ow	ned by the foundation o	on 12/31/69		I)
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	Excess	(k) of col (ı) (յ), ıf any	col (k), but not	h) gain minus less than -0-) or om col (h))
a					-24,407
b					20,154
С					
d					
e					
If gain, also enter in Pa in Part I, line 8	gain or (loss) as defined in sections art I, line 8, column (c) (see instructions).	ons) If (loss), enter -0-	}	2 3	-4,253 0
	rivate foundations subject to the sec				
if section 4940(d)(2) applies, l	eave this part blank				es 🗸 No
	e section 4942 tax on the distributa of qualify under section 4940(e) Do		in the base period?	Y .	es 🖭 No
1 Enter the appropriate an	nount in each column for each year,	see instructions before	making any entries	;	
(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitabl	e-use assets	(d) Distribution rati (col (b) divided by c	
2016	107,000		1,948,508		0 054914
2015	141,233		2,180,869		0 064760
2014	141,100		2,136,641		0 066038
2013	123,934		2,012,732		0 061575
2012	110,499		1,815,835		0 060853
2 Total of line 1, column (•		2		0 308140
number of years the four	o for the 5-year base period—divide ndation has been in existence if less ncharitable-use assets for 2017 fron	than 5 years	or by the 4		0 061628 2,219,808
5 Multiply line 4 by line 3			5		136,802
6 Enter 1% of net investm	ent income (1% of Part I, line 27b)		6		400
7 Add lines 5 and 6			7		137,202
	ons from Part XII, line 4 ,				120,050
If line 8 is equal to or gro instructions	eater than line 7, check the box in Pa	art VI, line 1b, and com	plete that part usin	g a 1% tax rate Se	e the Part VI

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

7b

Form 990-PF (2017)					Page 7
Part VIII Information About C and Contractors	offic	ers, Directors, Trust	ees, Foundation Ma	anagers, Highly Paid Er	nployees,
1 List all officers, directors, trustee	es, fo	oundation managers ar	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 -0-)	(d) Contributions to employee benefit plans and deferred compensation	Expense account, (e) other allowances
See Additional Data Table			-	compensation	
2 Compensation of five highest-pai	d or	nnlovees (other than th	nose included on line	see instructions) If no	no enter "NONE "
	u ei		lose included on line .	Contributions to	ne, enter NONE.
(a) Name and address of each employee pa more than \$50,000	ıd	Title, and average hours per week (b) devoted to position	(c) Compensation	employee benefit plans and deferred (d) compensation	Expense account, (e) other allowances
NONE		-			
		1			
		-			
		-			
Total number of other employees paid over					0
3 Five highest-paid independent co					
(a) Name and address of each person NONE	n pai	a more than \$50,000	(b) Typ	pe of service	(c) Compensation
			1		
			1		
]		
			_		
Total number of others receiving over \$50	000) for professional convices			0
Part IX-A Summary of Direct O					
List the foundation's four largest direct charitable	actıv	ities during the tax year Incli		nation such as the number of	Expenses
organizations and other beneficiaries served, com 1 NONE	reren	ces convened, research paper	s produced, etc		0
2					
3					
4					
Part IX-B Summary of Program Describe the two largest program-related inve			· · · · · · · · · · · · · · · · · · ·	and 2	Amount
1 NONE	sune	nts made by the roundation d	uning the tax year on lines i	aliu Z	Amount
2					
All other programs with the	C -	inches et e e			
All other program-related investments 3	>ee	Instructions			
Total. Add lines 1 through 3 .				•	0
					Form 990-PF (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

120.050

120.050

Form 990-PF (2017)

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

income Enter 1% of Part I. line 27b (see instructions).

Amounts set aside for specific charitable projects that satisfy the

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

2

3

4

5

110,190

110,190

Form **990-PF** (2017)

0

(d)

2017

Form 990-PF (20	017)	
Part XIII	Undistributed Income	(see instructions)

(a)

Corpus

129.138

9.860

138,998

22.568

116,430

0

22.568 27,429

34 898

33.722

27,429 34,898

33.722

10.521

9.860

(b)

Years prior to 2016

(c)

2016

Distributable amount for 2017 from Part XI, line 7

2 Undistributed income, if any, as of the end of 2017

a Enter amount for 2016 only.

b Total for prior years From 2012.

Excess distributions carryover, if any, to 2017

b From 2013. . . . c From 2014. . . From 2015. . . .

e From 2016. f Total of lines 3a through e. 4 Qualifying distributions for 2017 from Part

10,521 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 required—see instructions).

5 Excess distributions carryover applied to 2017

a Corpus Add lines 3f, 4c, and 4e Subtract line 5

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. . .

c Excess from 2015. . . .

d Excess from 2016. . .

e Excess from 2017. . .

b Excess from 2014. .

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

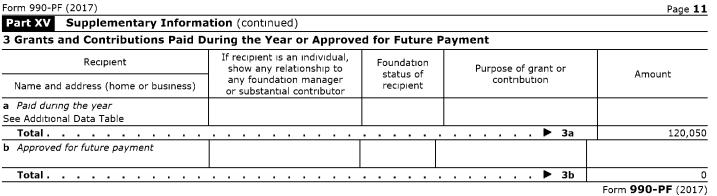
6 Enter the net total of each column as

b Prior years' undistributed income Subtract line 4b from line 2b c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed. d Subtract line 6c from line 6b Taxable amount 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

indicated below:

d Applied to 2017 distributable amount. . . . e Remaining amount distributed out of corpus

same amount must be shown in column (a))



Enter gros	s amounts unless otherwise indicated	Unrelated b	usiness income	Excluded by section	512, 513, or 514	(e) Related or exempt
1 Program	m service revenue	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	function income (See instructions)
_	and contracts from government agencies ership dues and assessments					
3 Inter	est on savings and temporary cash					
	tments			14		42,231
	ntal income or (loss) from real estate					12,231
	-financed property					
	debt-financed property					
	ental income or (loss) from personal property			14		2.013
	investment income or (loss) from sales of assets other than			14		2,912
ınven	tory			18		-4,253
	come or (loss) from special events					
10 Gross 11 Other	profit or (loss) from sales of inventory revenue a					
43 Cultura	tal Add columns (b), (d), and (e).		0		(40,890
13 Total.	Add line 12, columns (b), (d), and (e)			13	3	40,890
(See w	orksheet in line 13 instructions to verify calcu	lations)				
Line No.	the accomplishment of the foundation's ex	ıncome ıs report	ed in column (e) of	f Part XVI-A contribu		l
	instructions)					
12	N/A					
	1					rm 990-PF (2017)

orm 9	90-P	F (2017	')											Pa	ge 13
Par	: XV		Information Re Exempt Organi		ransfe	rs To a	nd Transa	ctio	ns and I	Relatio	nships With No	oncharit	table		
			ation directly or in (other than sectio									tion 501		Yes	No
a Tra	nsfe	rs from	the reporting foun	dation to a n	oncharit	able exe	mpt organiz	ation	of						
(1) Ca	sh											1a(1)		No
(2) Otl	her asse	ets										1a(2)		No
b Ot	ner tr	ransacti	ons												
(1) Sal	les of as	ssets to a nonchari	table exemp	t organiz	zation.							1b(1)		No
-	-		of assets from a n			-		•					1b(2)		No
-	-		acılıtıes, equipmer	•				•					1b(3)		No
-			ement arrangemen					•				•	1b(4)		No
•	-		oan guarantees.										1b(5)		No
•	•		te of services or m	·		_						•	1b(6) 1c		No No
	_		ities, equipment, n o any of the above												NO
ın	any t	ransacti	ther assets, or ser- ion or sharing arra	ngement, sh	ow in co	lumn (d)) the value	of the	goods, ot	ther asset	s, or services rec	eived			
(a) Lin	e No	(b)	Amount involved	(c) Name of	noncharit	table exem	npt organizati	on	(d) Des	cription of	transfers, transaction	ns, and sha	rıng arra	ngemen	its
								_							
de	scribe	ed in sec	on directly or indirection 501(c) of the ete the following so	Code (other								[Yes	✓	No
		(a) Name of organization	n		(b)) Type of orga	nızatıo	n		(c) Description	on of relation	onship		
					_										
	1														
	of w	f my kno	nalties of perjury, owledge and belief eparer has any kno	, it is true, co											
Sigr		****	**				2018-05-14	4	*	****		May th return	ne IRS di	scuss th	าเร
Her									—) -			with th	he prepa	rer shov	vn
		Signa	ture of officer or t	rustee		1	Date		7	itle		below	nstr)?	7 v	_{୷୷} ୗ
												<u> </u>	iau jr E	res	110
		Pri	nt/Type preparer's	name	l Prepare	er's Siana	ature		IData			DTIN			

Paid

Check if self-P00402991 employed ightharpoonupPETER CRAMER **Preparer** Firm's name ▶ TOOLE KATZ & ROEMERSMA LLP Firm's EIN ▶47-1767422 **Use Only**

Firm's address ► 1911 N FORT MYER DRIVE SUITE 600 Phone no (703) 248-9200 ARLINGTON, VA 22209

Form 990PF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation (a) Name and address Title, and average (c) Compensation (If (d) Expense account, hours per week not paid, enter Contributions to (e) other allowances (b) devoted to position -0-) employee benefit plans and deferred compensation LOUISE E SAGALYN DIRECTOR 1 00 3071 CANAL STREET NW WASHINGTON, DC 20007 LAURIE L SAGALYN DIRECTOR 1 00 40 EAST 10TH ST CHICAGO, IL 606571435 MATTHEW STONE DIRECTOR

NEW YORK, NY 10003				
RITA LONDON	DIRECTOR	0	0	0
181 ST JOHNS PL BROOKLYN, NY 11217	1 00			
LISBETH S STONE	PRESIDENT	0	0	0
3501 N SOUTHPORT AVENUE	1 00			

1 00

DIRECTOR 1 00

3501 N SOUTHPORT AVENUE CHICAGO. IL 606571435

ERIK SCHURINK

181 ST JOHNS PL BROOKLYN, NY 11217

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 BARD COLLEGEBPI PO BOX 5000 PROGRAM 4,000 ANNANDALE NY 12504

74444 445 422, 141 12301			
STRONGHOLD SOCIETY 2022 EAST 134TH WAY THORTON, CO 80241		PROGRAM	2,000
NEW YORK PUBLIC LIBRARY		PROGRAM	2,000

THORTON, CO 80241			
NEW YORK PUBLIC LIBRARY 445 5TH AVENUE NEW YORK, NY 10016		PROGRAM	2,00
OPEN HOUSE1133 BROADWAY NEW YORK, NY 10010		PROGRAM	50

NEW YORK, NY 10016			
OPEN HOUSE1133 BROADWAY NEW YORK, NY 10010		PROGRAM	500
FILM FORUM 209 WEST HOUSTON STREET NEW YORK, NY 10014		PROGRAM	500

NEW YORK, NY 10010		TROGRAM	30
FILM FORUM 209 WEST HOUSTON STREET NEW YORK, NY 10014		PROGRAM	50

FILM FORUM 209 WEST HOUSTON STREET NEW YORK, NY 10014		PROGRAM	500
Total	 		120,050

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 FILM FORUM **PROGRAM** 550 209 WEST HOUSTON STREET

NEW YORK, NY 10014 AL-ANON FAMILY INTERGROUP **PROGRAM** 4 W 43RD 308 NEW YORK, NY 10036

NEIGHBOR2NEIGHBORPO BOX 313 **PROGRAM**

500 NEW YORK, NY 10276 CDACE CHI IDCHOO3 BDOADWAY DDOCDAM 500

500

NEW YORK, NY 10003		PROGRAM	300
TEACHERS OF GODPO BOX 132 AMESBURY, MA 01913		PROGRAM	10,000

Total . . 120,050

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

a Paid during the year

<u> </u>	1		
ASSOCIATION HOUSE OF CHICAGO 1116 N KEDZIE AVENUE CHICAGO, IL 60651		PROGRAM	2,000
STORY CATCHERS 544 W OAK STREET 1005		GRANT	15,000

CHICAGO, IL 60610			
VOCEL5058 W JACKSON BLVD CHICAGO, IL 60644		PROGRAM	2,000
YOU1911 CHURCH STREET EVANSTONE, IL 60201		PROGRAM	1,000

YOU1911 CHURCH STREET EVANSTONE, IL 60201		PROGRAM	1,000
BAZELON CENTER FOR MENTAL HEALTH LAW 1101 15TH STREET NW WASHINGTON, DC 20005		PROGRAM	1,000

EVANSTONE, IL 60201			,
BAZELON CENTER FOR MENTAL HEALTH LAW 1101 15TH STREET NW WASHINGTON, DC 20005		PROGRAM	1,0

BAZELON CENTER FOR MENTAL HEALTH LAW 1101 15TH STREET NW WASHINGTON, DC 20005		PROGRAM	1,000
Total	 		120,050

1101 15TH STREET NW WASHINGTON, DC 20005		
Total	 	 120,050

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 BREAD FOR THE CITY **PROGRAM** 2,000 1525 SEVENTH ST NW WASHINGTON, DC 20001 000 000 000

CHILDREN'S DEFENSE FUND 25 E STREET NW WASHINGTON, DC 20001	PROGRAM	1,00
MARTHA'S TABLE2114 14TH STREET NW WASHINGTON, DC 20009	PROGRAM	1,00
NEW YORK UNIVERSITY 53 WASHINGTON SQUARE SOUTH ROOM 101	GRANT	10,00

GRANT

5,000

120,050

NEW YORK, NY 10012 PHILLIPS COLLECTION

1600 21ST STREET WASHINGTON, DC 20009

Total .

3a

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

VASSAR COLLEGE BOX 725 161 COLLEGE AVENUE POUGHKEEPSIE, NY 12601		PROGRAM	1,000
VETERANS EDUCATION SUCCESS		PROGRAM	2 000

VETERANS EDUCATION SUCCESS PO BOX 71162 BETHESDA, MD 20813		PROGRAM	2,000
WAMU4400 MASSACHUSETTS AVE NW		PROGRAM	1,000

BETHESDA, MD 20813			
WAMU4400 MASSACHUSETTS AVE NW WASHINGTON, DC 20016		PROGRAM	1,000
EQUAL JUSTICE INITIATIVE		GRANT	13,000

WASHINGTON, DC 20016		T NO SIVIII	1,000
EQUAL JUSTICE INITIATIVE 122 COMMERCE STREET MONTGOMERY, AL 36104		GRANT	13,000

EQUAL JUSTICE INITIATIVE 122 COMMERCE STREET MONTGOMERY, AL 36104		GRANT	13,000
EQUAL JUSTICE WORKS		GRANT	5,000

MONTGOMERY, AL 36104			
EQUAL JUSTICE WORKS 1730 M STREET NW 800		GRANT	5,000
WASHINGTON DC 20036	1		

Total	 	120,050
1730 M STREET NW 800 WASHINGTON, DC 20036		
EQUAL JUSTICE WORKS	GRANT	5

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, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount	
Name and address (home or business)	any foundation manager or substantial contributor	recipient			
a Paid during the year					
ARTWORKS FOR FREEDOM 3855 NORTH 30THST ARLINGTON, VA 22207			PROGRAM	1,000	
SITAR ARTS CENTER 1700 KALORAMA ROAD NW SUITE 101 WASHINGTON, DC 20009			PROGRAM	1,000	
GREAT MOTHER CONFERENCETOR-GUL 1429 UNDERWOOD COURT MCKINLEYVILLE, CA 95519			PROGRAM	1,000	
GROUNDSWELL COMMUNITY MURAL PROJECT 540 PRESIDENT STREET 1A BROOKLYN, NY 11215			PROGRAM	5,000	
KEEP RISING TO THE TOP 119 E 102ND ST SUITE 5B NEW YORK, NY 10029			PROGRAM	7,500	

За

120,050

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

GΙ

За

a raid daring the year			
PROJECT LIBERATION 3855 NORTH 30THST ARLINGTON, VA 22207		GRANT	8,100
POET'S HOUSE10 RIVER TERRACE NEW YORK, NY 10282		PROGRAM	1,000

500

IRLS EDUCATION INITIATIVE OF HANA-US 47 FIFTH AVENUE SUITE 1402-702 EW YORK, NY 10016		PROGRAM	
DON'S DEEENDEDC		CDANT	

NEW YORK, NY 10016			
BRONX DEFENDERS 360 EAST 161ST STREET		GRANT	11,900
RRONY NY 10451			

NEW TORK, NT 10010			
BRONX DEFENDERS 360 EAST 161ST STREET BRONX, NY 10451		GRANT	11,

,			
BRONX DEFENDERS		GRANT	11
360 EAST 161ST STREET			
BRONX, NY 10451			

efile GRAPHIC print - DO NOT P	ROCESS	As Filed Data -		D	LN: 93491134015438	
TY 2017 Accounting Fees Schedule						
	Name: S	SAGALYN FAM	IILY FUND			
	EIN: 1	13-6138709				
Accounting Fees Schedule						
Category	Amou	ınt Net	Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes	

1,313

2,625

ACCOUNTING

TY 2017 In	vestments Corporate	Stock Sched	lule	

Name: SAGALYN FAMILY FUND

EIN: 13-6138709

Name of Stock

End of Year Book Value

1,242,148

End of Year Fair Market Value

2,241,678

DLN: 93491134015438

CHARLES SCHWAB

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

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN:	93491134015438				
TY 2017 Other Expenses Schedule								
Name: SAGALYN FAMILY FUND								
EIN: 13-6138709								
Other Expenses Schedule				1				
Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes				
ADMINISTRATIVE-OFFICE EXPENSES & BANK FEES	9	0	0	0				

1,402

MISCELLANEOUS

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

Name: SAGALYN FAMILY FUND EIN: 13-6138709

Other Income Schedule						
Description	Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income			
CHARLES SCHWAB- NONTAXABLE	1,636	0	0			
OTHER INCOME	1,276	0	0			

DLN: 93491134015438

efile GRAPHIC print - DO NOT PROC	CESS As Filed Data	-	DLN	N: 93491134015438		
TY 2017 Taxes Schedule						
Name: SAGALYN FAMILY FUND EIN: 13-6138709						
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes		
FOREIGN TAXES	927	927	0	0		
NEW YORK TAX/FEE	250	0	0	0		
FEDERAL TAX	344	0	0	0		