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

| Fo | r cale | ndar year 2017 or tax year beginning | | , and ending | | |
|------------|-----------------|--|--|-----------------------|--|--|
| | | of foundation | | | A Employer identification | number + |
| _ | _ | SRY CHARITABLE FOUNDAT | ION, INC. | | | • |
| ٠ _ | _ | NORMAN MASSRY and street (or P O box number if mail is not delivered to street.) | | | 14-1777179 | |
| | | WASHINGTON AVENUE EXT | • | Room/suite | B Telephone number 518-862-66 | 00 |
| C | ıty or | town, state or province, country, and ZIP or foreign ANY, NY 12205 | | | C If exemption application is p | ending, check here |
| _ | | k all that apply: Initial return | Initial return of a f | former public charity | D 1. Foreign organizations | s, check here |
| | | Final return | Amended return | • | 9 5 | |
| _ | • | . Address change | Name change | | 2 Foreign organizations me check here and attach co | mputation |
| <u>,</u> H | _ | | exempt private foundation ' | $O^{\mathcal{H}}$ | E If private foundation sta | |
| , ∟ | | ection 4947(a)(1) nonexempt charitable trust | Other taxable private found | | under section 507(b)(1) | (A), check here |
| , | | arket value of all assets at end of year. J Accou | | Accrual | F If the foundation is in a | |
| , | ,1101111 ►\$ | Part II, col. (c), line 16) (Part I, col. (c), line 16) (Part I, col. (Part I, col. (Part I), col. (Part I), col. (Part I) | Other (specify) dumn (d) must be on cash basi | ıs.) | under section 507(b)(1) | (B), check here |
| i i | | Analysis of Revenue and Expenses | (a) Payanua and | (b) Net investment | (c) Adjusted net | (d) Disbursements |
| , | | (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a)) | expenses per books | income . | income | for charitable purposes (cash basis only) |
| | 1 | Contributions, gifts, grants, etc., received | 3,003,020. | | | |
| | 2 | Check If the foundation is not required to attach Sch. B | | | | |
| | 3 | Interest on savings and temporary cash investments | 6,928. | 6,928. | | SHAAHEMENAL AL |
| • | 4 | Dividends and interest from securities | 801,232. | 801,232. | 801,232. | STATEMENT 2 |
| | 1. | Gross rents | | | | |
| | 1 _ | Net rental income or (loss) | 6,918,912. | | | |
| | e ca | Net gain or (loss) from sale of assets not on line 10 Gross sales price for all 36,985,397. | | | | |
| | 7 | assets on line 6a | | 6,918,912. | | |
| Ċ | 8 | Net short-term capital gain | | | N/A | |
| (FR) | 9 | Come meditheatrons VED | | | | |
| 2019 | 10a | and allowances | | | | |
| 8 7 | b | | | | | |
| Panel 4 | C | | | | | (Omeymayanyanya) |
| 9 | 11 | Other Income | 10,730,092. | 7,727,072. | 808,160. | SPATEMENT 3 |
| Щ. | 12 | Total Additioners that the compensation or officers, directors trustees, etc. | 0. | 0. | 0.00,100. | 0. |
| \supset | 14 | Other employee salaries and wages | | | | |
| | 1 | Pension plans, employee benefits | | | | |
| | ្ឋំ 16a | Legal fees | | • | | |
| | | Accounting fees STMT 4 | 8,000. | 8,000. | 8,000. | 0. |
| 9 | Š C | Other professional fees STMT 5 | 136,448. | 136,448. | 136,448. | 0. |
| | ~ { | Interest | 40 005 | 10 005 | 10 005 | |
| į | = | Taxes - STMT 6 Depreciation and depletion | 40,925. | 10,925. | 10,925. | 0. |
| Ì | 19 20 | Occupancy | | | | |
| 7 | 21 | Travel, conferences, and meetings | | | • | _ |
| 7 | 22 | Printing and publications | | | | |
| į | 23 | Other expenses STMT 7 | 1,570. | 1,570. | 1,570. | 0. |
| ; | 24 | Total operating and administrative | | • | | |
| . } | 100 | expenses. Add lines 13 through 23 | 186,943. | 156,943. | 156,943. | 0. |
| (| | Contributions, gifts, grants paid | 2,088,617. | | | 2,088,617. |
| | 26 | Total expenses and disbursements | 2 275 560 | 156 042 | 156 042 | 2 000 617 |
| _ | 27 | Add lines 24 and 25 | 2,275,560. | 156,943. | 156,943. | 2,088,617. |
| | - | Subtract line 26 from line 12: Excess of revenue over expenses and disbursements | 8,454,532. | | | |
| , | | Net investment income (if negative, enter -0-) | | 7,570,129. | | |
| | | Adjusted net income (if pegative enter -0-) | | | 651.217. | |

Page

| ξp | 274 | Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only | Beginning of year | | of year |
|----------------------------|-----------|--|---|--|--|
| á z | اتقادار | column should be for end-of-year amounts only | (a) Book Value | (b) Book Value | (c) Fair Market Value |
| | 1 | Cash - non-interest-bearing | 1,703,529. | 8,357,382. | 8,357,382. |
| | 2 | Savings and temporary cash investments | | | |
| | 3 | Accounts receivable | | | |
| | ŀ | 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 | | | |
| | Ĭ | disqualified persons | | | |
| | 7 | Other notes and loans receivable | | | |
| | l . | Less; allowance for doubtful accounts | | | |
| G | 8 | Inventories for sale or use | | | |
| ssets | 9 | Prepaid expenses and deferred charges | | | |
| As | | Investments - U.S. and state government obligations | | | |
| | l | Investments - corporate stock STMT 8 | 29,601,735. | 29,965,256. | 38,572,128. |
| | | Investments - corporate bonds STMT 9 | 29,601,735. 950,000. | 50,000. | 38,572,128. |
| | 11 | Investments - land, buildings, and equipment basis | | | |
| | l '' | Less accumulated depreciation | MISCOCHAPICS HARMAN MARCHIST STATISTICS | A DESCRIPTION OF THE PROPERTY AND ADDRESS OF THE PROPERTY ADDRESS | , |
| | 12 | Investments - mortgage loans | | | |
| | 13 | Investments - other | | | |
| | 14 | Land, buildings, and equipment basis | | | |
| | | Less accumulated depreciation | | the second secon | |
| | 15 | Other assets (describe | | | • |
| + | | Total assets (to be completed by all filers - see the | | | |
| | | instructions. Also, see page 1, item I) | 32,255,264. | 38,372,638. | 46,979,475. |
| | 17 | Accounts payable and accrued expenses | | | PART PER |
| | 18 | Grants payable | | * | |
| s | 19 | Deferred revenue . | | t | |
| itie | 20 | Loans from officers, directors, trustees, and other disqualified persons | | | |
| Liabilities | 21 | Mortgages and other notes payable | | | |
| ij | 22 | Other liabilities (describe) | | | |
| | | | | | |
| | 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. | | | |
| Ses | 24 | Unrestricted | 32,255,264. | 38,372,638. | |
| au | 25 | Temporarily restricted | | | |
| Ba | 26 | Permanently restricted | | | |
| ᄪ | | Foundations that do not follow SFAS 117, check here | 1 | •• | |
| 띤 | | and complete lines 27 through 31. | | | |
| ts o | 27 | Capital stock, trust principal, or current funds | | | |
| se | 28 | Paid-in or capital surplus, or land, bldg, and equipment fund | | <u>, , , , , , , , , , , , , , , , , , , </u> | |
| Net Assets or Fund Balance | 29 | Retained earnings, accumulated income, endowment, or other funds | 20 05 5 064 | 20 250 500 | |
| 휟 | 30 | Total net assets or fund balances | 32,255,264. | 38,372,638. | |
| | | | 22 255 264 | 20 272 620 | |
| _ | <u>31</u> | Total liabilities and net assets/fund balances | 32,255,264. | 38,372,638. | |
| P | ants | Realysis of Changes in Net Assets or Fund Ba | alances | | |
| _ | Total | net assets or fund balances at beginning of year - Part II, column (a), line | 30 | | |
| | | net assets or fund balances at beginning of year - Part II, column (a), line tagree with end-of-year figure reported on prior year's return) | JU | , | 32,255,264. |
| | | amount from Part I, line 27a | • | . 1 | 8,454,532. |
| | | increases not included in line 2 (itemize) | | . 2 | 0,434,332. |
| | | ines 1, 2, and 3 | | 4 | 40,709,796. |
| | | eases not included in line 2 (itemize) TAX BASIS ADJU | STMENT | 5 | 2,337,158. |
| <u> </u> | Tatal | not accepte or fund halances et and of user (line 4 minus line E). Dort II et | | | 38 372 638 |

C/O NORMAN MASSRY Form 990-PF (2017) Capital Gains and Losses for Tax on Investment Income Part IV SEE ATTACHED STATEMENT (b) How acquired P - Purchase D - Donation (c) Date acquired (a) List and describe the kind(s) of property sold (for example, real estate, (d) Date sold (mo., day, yr.) (mo., day, yr.) 2-story brick warehouse; or common stock, 200 shs. MLC Co.) <u>1a</u> b _ C d (g) Cost or other basis (f) Depreciation allowed (h) Gain or (loss) (e) Gross sales price (or allowable) plus expense of sale ((e) plus (f) minus (g)) C ď 6,918,912. 36,985,397. 30,066,485 Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69. (I) Gains (Col. (h) gain minus col. (k), but not less than -0-) or (j) Adjusted basis (k) Excess of col. (i) Losses (from col. (h)) (i) FMV as of 12/31/69 as of 12/31/69 over col. (j), if any h C d 6,918,912. е If gain, also enter in Part I, line 7 6,918,912. 2 Capital gain net income or (net capital loss) 2 If (foss), enter -0- in Part I, line 7 3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 8, column (c). 181,015. If (loss), enter -0- in Part I, line 8 Partivo Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income (For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income.) If section 4940(d)(2) applies, leave this part blank. Yes X No Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? If "Yes," the foundation doesn't qualify under section 4940(e). Do not complete this part. Enter the appropriate amount in each column for each year; see the instructions before making any entries (d)
Distribution ratio
(col. (b) divided by col. (c)) (a) Base period years Calendar year (or tax year beginning in) (b) Adjusted qualifying distributions Net value of noncharitable-use assets 1,655,303. 36,040,397. .045929 2016 1,669,695. 32,954,003. .050667 2015 31,187,991. .056893 1,774,369. 2014 1,152,766. 26,259,206. .043899 2013 860,618. 21,584,459. .039872 2012 2 Total of line 1, column (d) .237260 2 3 Average distribution ratio for the 5-year base period - divide the total on line 2 by 5.0, or by the number of years 3 .047452 the foundation has been in existence if less than 5 years 42,260,574. 4 Enter the net value of noncharitable-use assets for 2017 from Part X, line 5 2,005,349. Multiply line 4 by line 3 5 75,701. Enter 1% of net investment income (1% of Part I, line 27b) 6 2,081,050. Add lines 5 and 6 7 2,088,617. 8 8 Enter qualifying distributions from Part XII, line 4 If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the Part VI instructions.

MASSRY CHARITABLE FOUNDATION, INC.

C/O NORMAN MASSRY Form 990-PF (2017) Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see instructions) ||Part VI 1a Exempt operating foundations described in section 4940(d)(2), check here \(\bigcap \) and enter "N/A" on line 1. Date of ruling or determination letter: (attach copy of letter if necessary-see instructions) b Domestic foundations that meet the section 4940(e) requirements in Part V, check here X and enter 1% of Part I, line 27b c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations, enter 4% of Part I, line 12, col. (b). 2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-) 701 3 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-) 5 Tax based on investment income Subtract line 4 from line 3. If zero or less, enter -0-6 Credits/Payments: 31,463 a 2017 estimated tax payments and 2016 overpayment credited to 2017 b Exempt foreign organizations - tax withheld at source 6b 50,000 c Tax paid with application for extension of time to file (Form 8868) 6c d Backup withholding erroneously withheld 6d 81,463 7 Total credits and payments, Add lines 6a through 6d 8 Enter any penalty for underpayment of estimated tax. Check here _____ if Form 2220 is attached 8 9 Tax due If the total of lines 5 and 8 is more than line 7, enter amount owed 5.762 10 Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 10 Enter the amount of line 10 to be. Credited to 2018 estimated tax Part VII A Statements Regarding Activities Yes Yes No 1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition 1h If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities. c Did the foundation file Form 1120-POL for this year? d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: (1) On the foundation. > \$ 0 • (2) On foundation managers. ▶ \$ e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. > \$ 0. 2 Has the foundation engaged in any activities that have not previously been reported to the IRS? If "Yes," attach a detailed description of the activities. 3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes 4a Did the foundation have unrelated business gross income of \$1,000 or more during the year? N/A b If "Yes," has it filed a tax return on Form 990-T for this year? 5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? If "Yes," attach the statement required by General Instruction T 6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument? 7 Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV 8a Enter the states to which the foundation reports or with which it is registered. See instructions. NY b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? If "No," attach explanation 9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2017 or the tax year beginning in 2017? See the instructions for Part XIV. If "Yes," complete Part XIV 10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses

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had not been removed from jeopardy before the first day of the tax year beginning in 2017?

Page 5 Part VII At Statements Regarding Activities (continued) Yes Yes No 11 At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of X section 512(b)(13)? If "Yes," attach schedule. See instructions 11 12 Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement. See instructions 13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application? 13 N/A Website address Telephone no. ► 518-862-6600 14 The books are in care of ▶ NORMAN MASSRY Located at ▶ 255 WASHINGTON AVE., ALBANY, NY ZIP+4 ▶12205 15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here and enter the amount of tax-exempt interest received or accrued during the year N/A Yes No 16 At any time during calendar year 2017, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the foreign country PartiVII:B! Statements Regarding Activities for Which Form 4720 May Be Required Yes No File Form 4720 if any item is checked in the "Yes" column, unless an exception applies. 1a During the year, did the foundation (either directly or indirectly): Yes X No (1) Engage in the sale or exchange, or leasing of property with a disqualified person? (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) Yes X No a disqualified person? Yes X No (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X No (4) Pay compensation to, or pay or reimburse the exponses of, a disqualified person? (5) Transfer any income or assets to a disqualified person (or make any of either available] Yes [X] No for the benefit or use of a disqualified person)? (C) 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 Yes X No termination of government service, if terminating within 90 days.) b If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations N/A section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions Organizations relying on a current notice regarding disaster assistance, check here c Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2017? 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 X No If "Yes," list the years b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach N/A statement - see instructions.) c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here. 3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time Yes X No during the year? 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, N/A Form 4720, to determine if the foundation had excess business holdings in 2017.) 3b X 4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? 4a b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that

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| Rant VII Statements Regarding Activities for Which | Form 4720 May Be F | Required _{(contir} | nued) | | |
|---|---|--|--|--|----------------------|
| 5a During the year, did the foundation pay or incur any amount to. | | | | [23] Yes | No |
| (1) Carry on propaganda, or otherwise attempt to influence legislation (section) | on 4945(e))? | Y | es 🗓 No 🖁 | | 認定 |
| (2) Influence the outcome of any specific public election (see section 4955); | or to carry on, directly or indir | ectly, | Î | 美国 | |
| any voter registration drive? | | Y | es 🗶 No | | |
| (3) Provide a grant to an individual for travel, study, or other cimilar purpose | 930 | Y | es 🔀 No | | |
| (4) Provide a grant to an organization other than a charitable, etc., organization | ion described in section | | | | |
| 4945(d)(4)(A)? See instructions | | Y | es 🔀 No | | |
| (5) Provide for any purpose other than religious, charitable, scientific, literary | y, or educational purposes, or | | | | |
| the prevention of cruelty to children or animals? | | Y | es 🗓 No | | |
| b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify u | inder the exceptions described | ın Regulatıons | <u> </u> | | |
| section 53.4945 or in a current notice regarding disaster assistance? See inst | | | N/A | 5b | ***** |
| Organizations relying on a current notice regarding disaster assistance, chock | - | | | | W. |
| c If the answer is "Yes" to question 5a(4), does the foundation claim exemption | | | [| | |
| expenditure responsibility for the grant? | . 1 | 1/A Y | es ∟ No | 6# B.S. | |
| If "Yes," attach the statement required by Regulations section 53.4945-5(d). | | | l l | 3 3 | 即 |
| 6a Did the foundation, during the year, receive any funds, directly or indirectly, to | o pay premiums on | | [22] | | |
| a personal benefit contract? | | Y | es 🗶 No 🗜 | | X |
| b Did the foundation, during the year, pay premiums, directly or indirectly, on a | porsonal benefit contract? | | | 6b 123 32 32 32 32 32 32 32 32 32 32 32 32 3 | <u>^</u> |
| If "Yes" to 6b, file Form 8870. | - h - lk k | | es X No | | 63 |
| 7a At any time during the tax year, was the foundation a party to a prohibited tax | | YI | es 🔼 No 隆 N/A | | STATE OF |
| b If "Yes," did the foundation receive any proceeds or have any net income attrib | | nagers Highly | N/A | 7b | |
| Paid Employees, and Contractors | tees, roundation Mai | nagers, riigiliy | | | |
| 1 List all officers, directors, trustees, and foundation managers and | their compensation. | | | | |
| | (b) Title, and average hours per week devoted | (c) Compensation | (d) Contributions to employee benefit plans and deferred | (e) Expe | nșe |
| (a) Name and address | hours per week devoted to position | (if not paid, enter -0-) | and deferred compensation | account, o | otner |
| MORRIS MASSRY | PRESIDENT | | <u>.</u> | | |
| 2 COBBLE HILL ROAD | 7 | | | | |
| LOUDONVILLE, NY 12211 | 0.00 | 0. | 0. | | 0. |
| ESTHER MASSRY | VICE PRES | | | | |
| 2 COBBLE HILL ROAD | | | |) | |
| LOUDONVILLE, NY 12211 | 0.00 | 0. | 0. | | 0. |
| NORMAN MASSRY | SEC/TREAS | | | | |
| 134 OLD NISKAYUNA ROAD | | | | | |
| LOUDONVILLE, NY 12211 | 0.00 | 0. | 0. | | 0. |
| | | | | | |
| | | | | | |
| | | """ | | L | |
| 2 Compensation of five highest-paid employees (other than those inc | | enter "NONE." | (d) Contributions to | (a) Evan | |
| (a) Name and address of each employee paid more than \$50,000 | (b) Title, and average hours per week | (c) Compensation | (d) Contributions to employee benefit plans and deferred | (e) Exper account, c | other |
| NONE | devoted to position | | compensation | allowand | es_ |
| NONE | 4 | | | | |
| | | <u> </u> | - | | |
| | - | | | | |
| | | | | | — |
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| | | | | <u> </u> | |
| | - | | I | | |
| | | | | <u> </u> | |
| | 1 | | | | |
| Total number of other employees paid over \$50,000 | <u> </u> | | | | 0 |
| | | | Form | 990-PF (2 | 2017) |

MASSRY CHARITABLE FOUNDATION, INC.

| Form 990-PF (2017) C/O NORMAN MASSRY | <u> </u> | 77179 Page 7 |
|--|-------------------------|------------------|
| Information About Officers, Directors, Trustees, Foundation Paid Employees, and Contractors (continued) | n Managers, Highly | |
| 3 Five highest-paid independent contractors for professional services. If none, enter "N | ONE." | |
| (a) Name and address of each person paid more than \$50,000 | (b) Type of service | (c) Compensation |
| NONE | (4) 3,500 | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| Total number of others receiving over \$50,000 for professional services | | <u>▶</u> 0 |
| RantilX Summary of Direct Charitable Activities | - | |
| List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical number of organizations and other beneficiaries served, conferences convened, research papers produced | Information such as the | Expenses |
| 37/3 | , 610. | |
| 1N/A | | |
| | | |
| 2 | | |
| | | |
| | | |
| 3 | | |
| | | |
| · · · · · · · · · · · · · · · · · · · | | |
| 4 | | |
| | | |
| <u>PartiX⁵B</u> Summary of Program-Related Investments | | |
| Describe the two largest program-related investments Describe the two largest program-related investments made by the foundation during the tax year on lines | 1 and 2 | Amount |
| 1 N/A | Tanu Z. | Amount |
| 1 41/44 | | |
| | | |
| 2 | | |
| | | |
| | | |
| All other program-related investments. See instructions. | | |
| 3 | | |
| | | |
| | | |
| | | |
| | | |
| Tabel Addition 4 through 0 | | 0. |
| Total. Add lines 1 through 3 | | <u>U•</u> |

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| B | Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations | ındatıons, | see instructions) |
|----|---|---------------|--------------------|
| 1 | Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes: | | |
| а | Average monthly fair market value of securities | 1a | 36,818,910. |
| b | Average of monthly cash balances | 1b | 5,574,763. |
| C | Fair market value of all other assets | 1c | 510,463. |
| d | Total (add lines 1a, b, and c) | 1d | 42,904,136. |
| е | | 200 | |
| | | | |
| 2 | Acquisition indebtedness applicable to line 1 assets | 2 | 0. |
| 3 | Subtract line 2 from line 1d | 3 | 42,904,136. |
| 4 | Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions) | 4 | 643,562. |
| 5 | Net value of noncharitable-use assets Subtract line 4 from line 3. Enter here and on Part V, line 4 | 5 | 42,260,574. |
| 6 | Minimum investment return. Enter 5% of line 5 | 6 | 2,113,029. |
| R | art XIII Distributable Amount (see instructions) (Section 4942(1)(3) and (1)(5) private operating foundations a | nd certain | |
| | foreign organizations, check here 🕨 🔛 and do not complete this part.) | | |
| 1 | Minimum investment return from Part X, line 6 | 1 | 2,113,029. |
| 2a | Tax on investment income for 2017 from Part VI, line 5 2a 75,701. | | |
| b | Income tax for 2017. (This does not include the tax from Part VI.) | | |
| C | Add lines 2a and 2b | 2c | 75,701. |
| 3 | Distributable amount before adjustments. Subtract line 2c from line 1 | 3 | 2,037,328. |
| 4 | Recoveries of amounts treated as qualifying distributions | 4 | 0. |
| 5 | Add lines 3 and 4 | 5 | 2,037,328. |
| 6 | Deduction from distributable amount (see instructions) | 6 | 0. |
| 7 | Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1 | 7 | 2,037,328. |
| P | art XIII Qualifying Distributions (see instructions) | | |
| 1 | Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes: | | |
| а | Expenses, contributions, gifts, etc total from Part I, column (d), line 26 | 1a | 2,088,617. |
| b | Program-related investments - total from Part IX-B | 1b | 0. |
| 2 | Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes | 2 | |
| 3 | Amounts set aside for specific charitable projects that satisfy the: | | |
| а | Suitability test (prior IRS approval required) | 3a | |
| b | Cash distribution test (attach the required schedule) | 3b | |
| 4 | Qualifying distributions Add lines 1a through 3b. Enter here and on Part V, line 8; and Part XIII, line 4 | 4 | 2,088,617. |
| 5 | Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment | | |
| | income. Enter 1% of Part I, line 27b | 5 | 75,701. |
| 6 | Adjusted qualifying distributions Subtract line 5 from line 4 | 6 | 2,012,916. |
| | Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation of | qualifies for | the section |

Form 990-PF (2017)

4940(e) reduction of tax in those years.

Part XIIII Undistributed Income (see instructions)

| • | (a) Corpus | (b) Years prior to 2016 | (c) 2016 | (d) 2017 |
|--|---------------|--|-------------|---------------------------------------|
| 1 Distributable amount for 2017 from Part XI, | | | | 2,037,328. |
| line 7 Undistributed income, if any, as of the end of 2017 | | | | 2,037,320. |
| a Enter amount for 2016 only | | | 16,625. | |
| b Total for prior years: | | | | |
| , com to produce | | 0. | | |
| 3 Excess distributions carryover, if any, to 2017: | | | | , , , , , , , , , , , , , , , , , , , |
| a From 2012 | | | | |
| b From 2013 | | | | |
| c From 2014 | | | | |
| d From 2015 | | | | |
| e From 2016 | | | | |
| f Total of lines 3a through e | 0. | | | |
| 4 Qualifying distributions for 2017 from | | | | |
| Part XII, line 4: ► \$ 2,088,617. | | | 16 625 | |
| a Applied to 2016, but not more than line 2a | | | 16,625. | |
| b Applied to undistributed income of prior | | 0 | | |
| years (Election required - see instructions) | | 0. | | |
| c Treated as distributions out of corpus | 0. | | 1 | |
| (Election required - see instructions) | U • I | | | 2,037,328. |
| d Applied to 2017 distributable amount e Remaining amount distributed out of corpus | 34,664. | | | 2,037,320 |
| 5 Excess distributions carryover applied to 2017 | 0. | The state of the s | 6 | 0. |
| (If an amount appears in column (d), the same amount must be shown in column (a)) | | | | |
| 6 Enter the net total of each column as indicated below: | | | | |
| a Corpus Add lines 3f, 4c, and 4e Subtract line 5 | 34,664. | | | |
| b Prior years' undistributed income. Subtract | | • | | |
| line 4b from line 2b | | 0. | | |
| 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 | | | | |
| amount - see instructions | | 0. | | |
| c Undistributed income for 2016. Subtract line | | | | |
| 4a from line 2a. Taxable amount - see instr. | | | 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 | | | | |
| corpus to satisfy requirements imposed by | | | | |
| section 170(b)(1)(F) or 4942(g)(3) (Election | 0. | | | |
| may be required - see instructions) 8 Excess distributions carryover from 2012 | | | | |
| not applied on line 5 or line 7 | 0. | | | |
| 9 Excess distributions carryover to 2018. | | | | |
| Subtract lines 7 and 8 from line 6a | 34,664. | | | |
| 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 34,664. | | | | |

MASSRY CHARITABLE FOUNDATION, INC.

| | RMAN MASSRY | | | 14-17 | 77179 Page 1 |
|--|-----------------------------|-------------------------------|------------------------------|----------------------------|-----------------------|
| Part XIV Private Operating F | oundations (see in | structions and Part VII | I-A, question 9) | N/A | |
| 1 a If the foundation has received a ruling | or determination letter tha | t it is a private operating | | | |
| foundation, and the ruling is effective fo | or 2017, enter the date of | the ruling | ▶ | · | |
| b Check box to indicate whether the foun | dation is a private operati | ng foundation described i | n section | 1942(j)(3) or 19 | 12(₁)(5) |
| 2 a Enter the lesser of the adjusted net | Tax year | | Prior 3 years | | |
| income from Part I or the minimum | (a),2017 | (b) 2016 | (c) 2015 | (d) 201,4 | (e) Total |
| investment return from Part X for | | | | | |
| each year listed | | | | | |
| b 85% of line 2a | | | | | |
| c Qualifying distributions from Part XII, | | | | | |
| line 4 for each year listed | | | | | |
| d Amounts included in line 2c not | | | | | . |
| used directly for active conduct of | | | | | |
| exempt activities | | | | | |
| e Qualifying distributions made directly | | | | | |
| for active conduct of exempt activities. | | | | } | |
| Subtract line 2d from line 2c | | | | | |
| 3 Complete 3a, b, or c for the | | | | | |
| alternative test relied upon: a "Assets" alternative test - enter: | | | |] | |
| (1) Value of all assets | | | | | |
| (2) Value of assets qualifying under section 4942(j)(3)(B)(i) | | | | | |
| b "Endowment" alternative test - enter | | | | | |
| 2/3 of minimum investment return | | | | | |
| shown in Part X, line 6 for each year listed | | | | | |
| c "Support" alternative test - enter: | | <u> </u> | | | |
| (1) Total support other than gross | | | | | |
| investment income (interest, | | | | | |
| dividends, rents, payments on | | | | | |
| securities loans (section 512(a)(5)), or royalties) | | | | | |
| | | | | | |
| (2) Support from general public and 5 or more exempt | | | | | |
| organizations as provided in section 4942(j)(3)(B)(III) | | | | | |
| (3) Largest amount of support from | | · | | | |
| an exempt organization | | | | | |
| (4) Gross investment income | | | | | |
| Part XV Supplementary Info | rmation (Complet | e this part only if | the foundation h | ad \$5,000 or more | in assets |
| at any time during t | he year-see instri | uctions.) | | | |
| 1 Information Regarding Foundation | n Managers: | | | | |
| a List any managers of the foundation wh | - | han 2% of the total contri | butions received by the fo | oundation before the close | of any tax |
| year (but only if they have contributed in | | | • | | • |
| MORRIS MASSRY | | | | | |
| b List any managers of the foundation wh | o own 10% or more of the | stock of a corporation (c | or an equally large portion | of the ownership of a part | nership or |
| other entity) of which the foundation ha | s a 10% or greater interes | t. | | | |
| NONE | | | | | |
| 2 Information Regarding Contributi | on, Grant, Gıft, Loan, | Scholarship, etc., Pro | grams: | | |
| Check here $ ightharpoonup igotimes igotime$ | | | | | ts for funds. If |
| the foundation makes gifts, grants, etc., | to individuals or organiza | tions under other condition | ons, complete items 2a, b | , c, and d | |
| a The name, address, and telephone num | ber or email address of the | e person to whom applica | itions should be addresse | q: | |
| | | | | | |
| | | | | | |
| b The form in which applications should b | e submitted and informat | ion and materials they sho | ould include; | | |
| Annual Marian | | · | | | |
| c Any submission deadlines: | | | | | |
| d Any restrictions or limitations on award | s, such as by geographica | l areas, charitable fields, l | kinds of institutions, or ot | her factors: | - |

Form 990-PF (2017)

Page 11

| 3 Grants and Contributions Paid During the | e Year or Approved for Future | Payment | | |
|--|--|---------------------|----------------------------------|------------|
| Recipient | If recipient is an individual, show any relationship to | Foundation | Purpose of grant or contribution | |
| Name and address (home or business) | If recipient is an individual, show any relationship to any foundation manager or substantial contributor | status of recipient | contribution | Amount |
| a Paid during the year | | | | |
| | | | | |
| 15 LOVE FOUNDATION | NONE | PUBLIC CHARITY | GENERAL | 5,000. |
| | | | | |
| AFMDAL | NONE | PUBLIC CHARITY | GENERAL | 730. |
| | | | | |
| ALBANY INSTITUTE OF HISTORY | NONE | PUBLIC CHARITY | GENERAL | 5,000. |
| | | | | |
| ALBANY JCC | NONE | PUBLIC CHARITY | GENERAL | 7,500. |
| | | | | |
| ALBANY MEDICAL CENTER | NONE | PUBLIC CHARITY | GENERAL | 400,000. |
| Total SEE C | ONTINUATION SHEE | ፓ(S) | ► 3a | 2,088,617. |
| b Approved for future payment | | | | |
| NONE | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| Total | | | ▶ 3b | 0. |

| Part-X | | | | | · · · · · · · · · · · · · · · · · · · | |
|---------------|--|--|---|--|---------------------------------------|--|
| Enter gross | amounts unless otherwise indicated. | | ed business income (b) | (C) Exclu- | ed by section 512, 513, or 514 (d) | (e) Related or exempt |
| 1 Program | n service revenue: | (a) Business code | Amount | sion | Amount | function income |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| е — | | | | | | |
| f | | | | | | |
| g Fees | and contracts from government agencies | | | | | |
| _ | rship dues and assessments | | | | | |
| | on savings and temporary cash | | | | | |
| investm | | | | 14 | 6,928. | |
| | is and interest from securities | | | 14 | 801,232. | · · · · · · · · · · · · · · · · · · · |
| - | al income or (loss) from real estate: | | A TOUR OF STREET | | 2 2 2 2 2 | A CONTRACTOR OF THE PARTY OF TH |
| | -financed property | | 3-2-7-2-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1 | | | |
| | debt-financed property | | | | | - |
| | al income or (loss) from personal | | | | | |
| property | • • • | | | | | |
| | vestment income | | | 14 | - | |
| | (loss) from sales of assets other | <u> </u> | | + | | |
| than inve | | | | 18 | 6,918,912. | |
| | me or (loss) from special events | | | +== | 0/320/3221 | |
| | ofit or (loss) from sales of inventory | | | + + | | |
| 1 Other re | | | | + | | |
| | | | | 1 1 | | |
| | | - | | | | |
| | | _ | | 1 | | |
| | | | | | | |
| <u> </u> | | - | | + | | |
| 2 Subtotal | . Add columns (b), (d), and (e) | The state of the s | 0 | . [] | 7,727,072. | 0 |
| | dd line 12, columns (b), (d), and (e) | المحمد | | • becomes | 13 | 7,727,072 |
| | neet in line 13 instructions to verify calculations. | ١ | • | | 10 | 7,727,072 |
| Part XV | | | mplishment of E | vemnt D | urnoses | |
| <u> Panty</u> | Helationship of Activities | to the Acco | Implishment of E | Kempt P | urposes | |
| Line No | Explain below how each activity for which in | | | A contribut | ed importantly to the accomp | Ishment of |
| ▼ | the foundation's exempt purposes (other tha | an by providing fur | ids for such purposes). | | | _ |
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| Form 99 | | | NORMAN M | ASSRY | | | 1 | L <u>4-1777:</u> | <u> 179</u> | Page 13 |
|--|----------|--|--|-----------------------|--|----------------------|-----------------------------|---------------------------------------|--|------------------------------|
| Part | XVII | Information F Exempt Orga | | ansfers to a | and Transactions | and Relation | onships With N | Noncharita | ble | |
| | | | | | ing with any other organization | | n section 501(c) | | Ye | s No |
| | | from the reporting four | • | | ng to political organization | 157 | | | | 1 |
| |) Cash | · - | iuation to a noncin | ai itable exempt of | ryanization of. | | | | 1a(1) | X |
| • | • | r assets | | | | | | | 1a(2) | <u> </u> |
| • | • | nsactions: | • | | | • | | • • | | 712 |
| - | | of assets to a nonchari | table exempt orga | nization | | | | | 1b(1) | X |
| | • | hases of assets from a r | | | • | | | , , , , , , , , , , , , , , , , , , , | 1b(2) | X |
| • | • | al of facilities, equipmen | | | | | • | | 1b(3) | X |
| • | • | bursement arrangemen | | | | | | Г | 1b(4) | Х |
| (5 |) Loan | s or loan guarantees | | | | | | . [| 1b(5) | X |
| (6 |) Perfo | rmance of services or n | nembership or fun | draising solicitation | ons | •• | | | 1b(6) | X_ |
| c St | arıng o | f facilities, equipment, n | nailing lists, other | assets, or paid en | nployees | | • | ٠. ا | 1c | X |
| d If | the ans | wer to any of the above | ıs "Yes," complete | the following sch | edule. Column (b) should | I always show the | e fair market value of | f the goods, oth | er assets, | |
| | | | | | ved less than fair market v | /alue in any transa | action or sharing arr | angement, shov | v in | |
| | | i) the value of the goods | | | | | | | | |
| (a) Line i | 10 | (b) Amount involved | (c) Nan | | le exempt organization | (d) Desi | cription of transfers, tran | sactions, and shar | ing arrangem | ents |
| | | | | N/A | | | | | | |
| | | | | | | | | | | |
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| | 1 - | | | | | | | | | |
| | | ndation directly or indire 501(c) (other than secti | • | • | e or more tax-exempt org | anizations describ | ped | | Yes 2 | X No |
| | | mplete_t <u>he_</u> following sc | | | | | | | | • |
| | , | (a) Name of o | | | (b) Type of organization | n | (c) Description | of relationship | | |
| | | N/A | | | | | | | | |
| | | | | | | | | | | |
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| | | | | | | | | | | |
| Sign Here | | | | | g accompanying schedules and taxpayer) is based on all infor | mation of which prep | | return v shown | e IRS discuss with the prepa below? See II | s this arer nstr No |
| | Sign | ature of officer or truste | | | Date | Title | | | | |
| | | Print/Type preparer's r | name | Prepaler's s | Inature | Date | Check self- employe | ıf PTIN d | | |
| Paid | | GEOFFREY N | | | EY MULLEN | 11/14/ | 18 | P007 | 49247 | <u></u> |
| Preparent of the Prepar | | Firm's name ► UH | Y ADVISOR | RS NY, I | NC. | | Firm's EIN | ▶14-155 | 5429 | |

Firm's address ▶ 4 TOWER PLACE, EXECUTIVE PARK, 7TH FLO

ALBANY, NY 12203

Phone no. (518) 449-3166

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

MASSRY CHARITABLE FOUNDATION, INC.

Employer identification number

14-1777179 C/O NORMAN MASSRY Organization type (check one) Filers of: Section: 501(c)(Form 990 or 990-EZ) (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization Form 990-PF X 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See instructions General Rule X For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions Special Rules For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000, or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1 Complete Parts I and II For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals Complete Parts I, II, and III For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000 If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, chantable, etc., purpose Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, chantable, etc , contributions totaling \$5,000 or more during the year ▶ \$

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

Schedule B (Form 990, 990-EZ, or 990-PF) (2017) LHA For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF.

Name of organization
MASSRY CHARITABLE FOUNDATION, INC.
C/O'NORMAN MASSRY

Employer identification number

14-1777179

| Partil | Contributors (see instructions) Use duplicate copies of Part I if additional | ll space is needed. | |
|------------|--|----------------------------|---|
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| 1 | MORRIS MASSRY 2 COBBLE HILL ROAD LOUDONVILLE, NY 12111 | \$329,038. | Person Payroll Noncash X (Complete Part II for noncash contributions) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| 2 | MORRIS MASSRY 2 COBBLE HILL ROAD LOUDONVILLE, NY 12111 | \$1,673,982. | Person Payroll Noncash X (Complete Part II for noncash contributions) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| 3 | MORRIS MASSRY 2 COBBLE HILL ROAD LOUDONVILLE, NY 12111 | \$ 1,000,000 . | Person X Payroll |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | · (d) Type of contribution |
| | | \$ | Person Payroll Oncash Complete Part II for noncash contributions) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | | \$ | Person Payroll Oncash Occash Occash Occash Occash Occash Occash Contributions) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | | \$ | Person Payroll Noncash (Complete Part II for noncash contributions) |

Name of organization
MASSRY CHARITABLE FOUNDATION, INC.
C/O NORMAN MASSRY

Employer identification number

14-1777179

| | ORMAN MASSRY | | -11/11/9 |
|------------------------------|---|---|----------------------|
| Partill | Noncash Property (see instructions) Use duplicate copies of F | art II if additional space is needed. | |
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (See instructions.) | (d) Date received |
| | 8,751 SHS OF BERKSHIRE HILLS BANCORP | | |
| _ <u>1</u> | | | |
| | | \$\$ | 12/20/17 |
| (a) | | (c) | |
| No. from | (b) | FMV (or estimate) | (d) Date received |
| Part I | Description of noncash property given | (See instructions.) | Date received |
| | 29,628 SHS OF TORONTO DOMINION BANK | | |
| 2 | | | |
| | | | _12/20/17 |
| | | | _12/20/1/ |
| (a) | | (c) | |
| No. | (b) | FMV (or estimate) | (d) |
| from Part I | Description of noncash property given | (See instructions.) | Date received |
| | | | ·· |
| [| | | |
| | | | |
| | | \$ | |
| (a) | | (a) | |
| No. | (b) | (c) FMV (or estimate) | (d) |
| from Part I | Description of noncash property given | (See instructions.) | Date received |
| - | | | |
| | | | |
| ŀ | | | |
| ļ | | \$ | |
| (a) | | (2) | |
| No. | (b) | (c) FMV (or estimate) | (d) |
| from Part I | Description of noncash property given | (See instructions.) | Date received |
| | | | |
| | | | |
| | | | |
| | | \$ | |
| (a) | | | |
| No. | (b) | (c) FMV (or estimate) | (d) |
| from Part I | Description of noncash property given | (See instructions.) | Date received |
| aiti | | | |
| | | | |
| | | | |
| | | \$ | |

Schedule B (Form 990, 990-EZ, or 990-PF) (2017) Page 4 Name of organization Employer identification number MASSRY CHARITABLE FOUNDATION, INC. 14-1777179 C/O NORMAN MASSRY Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for Partille the year from any one contributor Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year (Enter this info once) Use duplicate copies of Part III if additional space is needed (a) No. from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. (d) Description of how gift is held (b) Purpose of gift (c) Use of gift Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (d) Description of how gift is held (b) Purpose of gift (c) Use of gift Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

MASSRY CHARITABLE FOUNDATION, INC. PART IV C/O NORMAN MASSRY 14-1777179 PAGE OF PartiV Capital Gains and Losses for Tax on Investment Income (b) How acquired P - Purchase D - Donation (d) Date sold (a) List and describe the kind(s) of property sold, e.g., real estate, (c) Date acquired (mo., day, yr.) 2-story brick warehouse; or common stock, 200 shs, MLC Co. (mo., day, yr.) 1a WACHOVIA ENDOWMENT P VARIOUS VARIOUS b WACHOVIA MODERATE VALUE P VARIOUS **VARIOUS** C WACHOVIA MODERATE VALUE P VARIOUS VARIOUS P VARIOUS VARIOUS d WACHOVIA CONSERVATIVE VALUE P e WACHOVIA CONSERVATIVE VALUE VARIOUS VARIOUS f WACHOVIA CONSERVATIVE GROWTH P VARIOUS VARIOUS g WACHOVIA CONSERVATIVE GROWTH P VARIOUS VARIOUS h NEUBERGER P VARIOUS VARIOUS P **I NEUBERGER** VARIOUS VARIOUS MERRILL LYNCH Р VARIOUS VARIOUS k _ m n (g) Cost or other basis (f) Depreciation allowed (h) Gain or (loss) (e) Gross sales price (e) plus (f) minus (g) (or allowable) plus expense of sale 11,825,579. 11,825,607. -28. 1,520,180. 1,458,432. 61,748. b 1,172,950. 1.063.834. 109,116. C 154,528. 189,367. -34,839. q 996,316. 788,717. 207,599. -125,084. 803,332. 928,416. f 1,118,720. 1,016,881. 101,839. g 279,218. 3,670,842. 3,391,624. h 11,752,228. 8,617,742. 3,134,486. 3,970,722. 785,865. 3,184,857. m <u>n</u> 0 Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 (I) Losses (from col. (h)) Gains (excess of col. (h) gain over col. (k), (j) Adjusted basis (k) Excess of col. (i) (i) F.M.V. as of 12/31/69 but not less than "-0-") as of 12/31/69 over col. (j), if any * * -28. a * * 61,748. p 109,116. C * * -34,839. d 207,599. е * * -125,084. 101,839. * * 279,218. 3,134,486. 3,184,857. m ħ

{ If gain, also enter in Part I, line 7 If (loss), enter "-0-" in Part I, line 7 }

723591 04-01-17

2 Capital gain net income or (net capital loss)

If gain, also enter in Part I, line 8, column (c).

3 Net short term capital gain or (loss) as defined in sections 1222(5) and (6):

6,918,912.

181,015.

| 3 Grants and Contributions Paid During the | | | | |
|--|--|----------------------|----------------------------------|-------------|
| Recipient | If recipient is an individual, | T | T | |
| Name and address (home or business) | show any relationship to any foundation manager or substantial contributor | Foundation status of | Purpose of grant or contribution | Amount |
| | or substantial contributor | recipient | | |
| ALZHEIMERS ASSOCIATION | NONE | PUBLIC CHARITY | GENERAL | 2,500. |
| | | | | |
| AMERICAN CANCER SOCIETY | NONE | PUBLIC CHARITY | GENERAL | 4,000. |
| | | | | |
| AMERICAN HEART ASSOCIATION | NONE | PUBLIC CHARITY | GENERAL | 5,000. |
| AMERICAN MACULAR DEGENERATION | NONE | PUBLIC CHARITY | GENERAL | 200. |
| | | | | |
| ARTS CENTER OF CAPITAL REGION | NONE | PUBLIC CHARITY | GENERAL | 7,500. |
| BOYS & GIRLS CLUB | NONE | PUBLIC CHARITY | GENERAL | 5,000. |
| BUCHINHAM POND CONSERVANCY | NONE | PUBLIC CHARITY | GENERAL | 12,500. |
| CAPITAL ROOTS | NONE | PUBLIC CHARITY | GENERAL | 50,400. |
| CHABAD GREAT NECK | NONE | , PUBLIC CHARITY | general, | |
| | | | | 1,000. |
| CHABAD TREATMENT CENTER | NONE | PUBLIC CHARITY | general | 500. |
| Total from continuation sheets | | | | 1,670,387. |

| Part XV Supplementary Information | | | | ., |
|--|---|-------------------------|----------------------------------|----------|
| 3 Grants and Contributions Paid During the | | | | |
| 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 | Continuation | 7 |
| | | | | |
| CHARGE SYNDROME | NONE | PUBLIC CHARITY | GENERAL | 500. |
| | | | | |
| COLLEGE OF ST ROSE | NONE | PUBLIC CHARITY | GENERAL | 155,000. |
| | | | | |
| COMMISSION ON EQUAL OPPORTUNITY | NONE | PUBLIC CHARITY | GENERAL | 16.000 |
| | | | | 16,000. |
| COMMUNITY FOUNDATION | NONE | PUBLIC CHARITY | GENERAL | |
| | | | | 5,000. |
| CP CENTER | NONE | PUBLIC CHARITY | GENERAL | |
| | <u> </u> | | | 72,500. |
| CROHNS FOUNDATION | NONE | PUBLIC CHARITY | CENTED A I | |
| CROANS FOUNDATION | NONE | FUBLIC CHARITI | GENERAL | 5,000. |
| | | | | |
| DAUGHTERS OF SARAH | NONE | PUBLIC CHARITY | GENERAL | 12,000. |
| | | | | 1 |
| EQUINOX | NONE | PUBLIC CHARITY | GENERAL | 7,500. |
| | | | , | |
| EXCELSIOR COLLEGE | NONE | PUBLIC CHARITY | general | 2,500. |
| | | | | |
| FOOD PANTRIES | NONE | PUBLIC CHARITY | general | 1 000 |
| Total from continuation sheets | | | | 1,000. |

| Part XV Supplementary Informatio | n | | | 77175 |
|--|--|---------------------|------------------------------------|---------|
| 3 Grants and Contributions Paid During the | | | | |
| Recipient | If recipient is an individual, | Foundation | Purpose of grant or | |
| Name and address (home or business) | show any relationship to any foundation manager or substantial contributor | status of recipient | Purpose of grant or . contribution | Amount |
| | UI SUDSTAILLAI CONTINUUTO | Toopione | | |
| | | | | |
| | | | | |
| GIRLS INC | NONE | PUBLIC CHARITY | GENERAL | 2,500. |
| | | | | 2,300. |
| | | | | |
| | | | | |
| GIRLS ON THE RUN | NONE | PUBLIC CHARITY | GENERAL | 2 500 |
| | | | | 2,500. |
| | | | | |
| | | | | |
| HACD | NONE | PUBLIC CHARITY | GENERAL | 1 |
| | | | | 11,500. |
| | | | | |
| | | | | |
| HADASSAH | NONE | PUBLIC CHARITY | GENERAL | |
| | | | | 1,800. |
| | | | | |
| | | | | |
| HILLEL | NONE | PUBLIC CHARITY | GENERAL | |
| | | | | 2,500. |
| | | | | |
| | | | | |
| INDEPENDENT LIVING CENTER | NONE | PUBLIC CHARITY | GENERAL | |
| | | | | 500. |
| | | | | |
| | | | | |
| INTERFAITH PARTNERSHIP FOR HOMELESS | NONE | PUBLIC CHARITY | GENERAL | |
| | | | <u> </u> | 55,000. |
| | | | | |
| | | | | |
| JDRF | NONE | PUBLIC CHARITY | GENERAL | |
| | | | | 5,000. |
| | | | | |
| | | | | |
| JEWISH FAMILY SERVICES | NONE | PUBLIC CHARITY | general | |
| | | | | 5,000. |
| | | | | |
| , | | | | |
| JEWISH NATIONAL FUND | NONE | PUBLIC CHARITY | GENERAL | |
| | <u> </u> | | | 5,000. |
| Total from continuation sheets | | | | |

| | //O | | | |
|--|--|----------------------|----------------------------------|---------|
| 3 Grants and Contributions Paid During the Y | | | | |
| 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 | oona loodon | |
| | | i | | |
| JUNIOR ACHEIVMENT | NONE | PUBLIC CHARITY | GENERAL | 7,500. |
| | | | · | |
| MAIMONDES HEBREW DAY SCHOOL | NONE | PUBLIC CHARITY | GENERAL | 1,800. |
| | | | | |
| MARIA COLLEGE | NONE | PUBLIC CHARITY | GENERAL | 5,000. |
| | | | | |
| MI SCI | NONE | PUBLIC CHARITY | GENERAL | 500. |
| | | | | |
| NORTHEAST ASSOCIATION FOR THE BLIND | NONE | PUBLIC CHARITY | GENERAL | 5,000. |
| NORTHERN RIVERS FAMILY SERVICES | NONE | PUBLIC CHARITY | CONTRAT | |
| MORTHERN RIVERS FAMILI SERVICES | NONE | POBLIC CHARITI | SENERAL | 2,500. |
| PALACE THEATRE | NONE | PUBLIC CHARITY | GENERAL | |
| | | | | 5,000. |
| PROCTORS | NONE | PUBLIC CHARITY | GENERAL | 20,000. |
| • | | | | |
| RCHS | NONE | PUBLIC CHARITY | GENERAL | 3,500. |
| | | | | |
| Total from continuation sheets | NONE | PUBLIC CHARITY | GENERAL | 7,500. |

Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient Purpose of grant or contribution Foundation show any relationship to Amount status of any foundation manager Name and address (home or business) recipient or substantial contributor PUBLIC CHARITY GENERAL REGIONAL FOOD BANK NONE 3,500. SAFRA SYNAGOGUE PUBLIC CHARITY GENERAL NONE 3,360. NONE PUBLIC CHARITY GENERAL SARATOGA BRIDGES 1,000. SHABBOS HOUSE NONE PUBLIC CHARITY GENERAL 5,000. SONS OF ITALY NONE PUBLIC CHARITY GENERAL 900. ST PETER'S HOSPITAL FOUNDATION NONE PUBLIC CHARITY GENERAL 115,000. ST. GREGORY'S SCHOOL NONE PUBLIC CHARITY GENERAL 2,500. STEP NONE PUBLIC CHARITY GENERAL 1,000. SUNY FOUNDATION SCHOOL OF BUSINESS NONE PUBLIC CHARITY GENERAL 10,000. TEMPLE BETH ABE NONE PUBLIC CHARITY GENERAL 1,555. Total from continuation sheets

Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient Purpose of grant or contribution Foundation show any relationship to Amount status of any foundation manager Name and address (home or business) recipient or substantial contributor PUBLIC CHARITY GENERAL TEMPLE BETH EL TROY NONE 19,001. TEMPLE BETH SHALOM PUBLIC CHARITY GENERAL NONE 500. TEMPLE ISRAEL NONE PUBLIC CHARITY GENERAL 871. TRIP NONE PUBLIC CHARITY GENERAL 2,500. PUBLIC CHARITY GENERAL TROY FLAG DAY PARADE NONE 3,500. PUBLIC CHARITY GENERAL TROY MUSIC HALL NONE 3,000. TWIN RIVERS COUNCIL NONE PUBLIC CHARITY GENERAL 5,000. UNITED JEWISH FEDERATION NONE PUBLIC CHARITY GENERAL 70,000. NONE PUBLIC CHARITY GENERAL UNITED WAY 10,000. PUBLIC CHARITY GENERAL UNITY HOUSE NONE 30,000. Total from continuation sheets

| Part XVI Supplementary Informati 3 Grants and Contributions Paid During the | | · - | | |
|---|--|--------------------------------------|----------------------------------|---------|
| Recipient | | Foundation | Durnage of great or | |
| Name and address (home or business) | If recipient is an individual, show any relationship to any foundation manager or substantial contributor | Foundation status of recipient | Purpose of grant or contribution | Amount |
| | 0.0000000000000000000000000000000000000 | | | |
| UNIVERSITY AT ALBANY FOUNDATION | NONE | PUBLIC CHARITY | GENERAL | |
| | | | | 850,000 |
| UNIVERSITY HEIGHTS CHABAD | NONE | PUBLIC CHARITY | GENERAL | |
| | | | | 2,000 |
| | | | | |
| WILDWOOD FOUNDATION | NONE | PUBLIC CHARITY | GENERAL | 12,500. |
| | | | | |
| YMCA — | NONE | PUBLIC CHARITY | GENERAL | 2,500. |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| - | | | | |
| | | | | |
| - | | | | |
| | | | | |
| | | | | |
| | | | | |
| Total from continuation sheets | | | | |

FORM 990-PF INTEREST ON SAVINGS AND TEMPORARY CASH INVESTMENTS STATEMENT 1

| SOURCE | (A) REVENUE PER BOOKS | (B) NET INVESTMENT INCOME | (C) ADJUSTED NET INCOME |
|------------------------------|-----------------------------|---------------------------------|-------------------------------|
| FIDELITY 645-066512 | 517. | 517. | 517. |
| FIDELITY 645-133279 | 5. | 5. | 5. |
| FIDELITY 645-133281 | 5. | 5. | 5. |
| FIDELITY 645-133285 | 6. | 6. | 6. |
| STATE OF ISRAEL | 6,126. | 6,126. | 6,126. |
| WACHOVIA CONSERVATIVE GROWTH | 69. | 69. | 69. |
| WACHOVIA CONSERVATIVE VALUE | 72. | 72. | 72. |
| WACHOVIA ENDOWMENT | 67. | 67. | 67. |
| WACHOVIA MODERATE VALUE | 60. | 60. | 60. |
| WACHOVIA SMALL ACCOUNT | 1. | 1. | 1. |
| TOTAL TO PART I, LINE 3 | 6,928. | 6,928. | 6,928. |

| FORM 990-PF | DIVIDENDS | AND INTEREST | FROM SECUR | ITIES ST | PATEMENT 2 |
|---------------------|-----------------|-------------------------------|-----------------------------|-----------------------------------|-------------------------------|
| SOURCE | GROSS AMOUNT | CAPITAL GAINS DIVIDENDS | (A) REVENUE PER BOOKS | (B) NET INVEST- MENT INCOME | (C) ADJUSTED NET INCOME |
| FIDELITY | | | | | |
| 645-066512 | 84,621. | 0. | 84,621. | 84,621. | 84,621. |
| FIDELITY | | • | | 2 224 | |
| 645-133279 | 3,904. | 0. | 3,904. | 3,904. | 3,904. |
| FIDELITY 645-133281 | 3,681. | 0. | 3,681. | 3,681. | 3,681. |
| FIDELITY | 3,001. | 0. | 3,001. | 3,001. | 3,001. |
| 645-133285 | 5,800. | 0. | 5,800. | 5,800. | 5,800. |
| MERRILL LYNCH | 232,381. | 0. | 232,381. | 232,381. | 232,381. |
| NEUBERGER | 115,783. | 0. | 115,783. | 115,783. | 115,783. |
| PKS-066609 | 751. | 0. | 751. | 751. | 751. |
| WACHOVIA | | | | | |
| CONSERVATIVE | | | | | |
| GROWTH | 110,217. | 0. | 110,217. | 110,217. | 110,217. |
| WACHOVIA | | | | | |
| CONSERVATIVE VALUE | 73,543. | 0. | 73,543. | | 73,543. |
| WACHOVIA ENDOWMENT | 112,876. | 0. | 112,876. | 112,876. | 112,876. |
| WACHOVIA MODERATE | | | | | |
| VALUE | 57,675. | 0. | 57,675. | 57,675. | 57,675. |
| TO PART I, LINE 4 | 801,232. | 0. | 801,232. | 801,232. | 801,232. |
| = | | | | | |

| FORM 990-PF | OTHER I | NCOME | S | TATEMENT 3 |
|--------------------------------|------------------------------|-----------------------------------|-----------------------------------|---------------------------------------|
| DESCRIPTION | | (A) REVENUE PER BOOKS | (B) NET INVEST- MENT INCOME | (C) ADJUSTED NET INCOME |
| MISCELLANEOUS | | 0. | 0. | 0. |
| TOTAL TO FORM 990-PF, PART I | , LINE 11 = | 0. | 0. | 0. |
| FORM 990-PF | ACCOUNTI | NG FEES | S | TATEMENT 4 |
| DESCRIPTION | (A) EXPENSES PER BOOKS | (B) NET INVEST- MENT INCOME | (C) ADJUSTED NET INCOME | (D) CHARITABLE PURPOSES |
| PROFESSIONAL FEES | 8,000. | 8,000. | 8,000. | 0. |
| TO FORM 990-PF, PG 1, LN 16B | 8,000. | 8,000. | 8,000. | 0. |
| DESCRIPTION | (A) EXPENSES PER BOOKS | (B) NET INVEST- MENT INCOME | (C) ADJUSTED NET INCOME | TATEMENT 5 (D) CHARITABLE PURPOSES |
| INVESTMENT FEES | 136,448. | 136,448. | 136,448. | 0. |
| TO FORM 990-PF, PG 1, LN 16C = | 136,448. | 136,448. | 136,448. | 0. |
| _ | | | S | |
| FORM 990-PF | TAX | ES | | TATEMENT 6 |
| FORM 990-PF DESCRIPTION | (A) EXPENSES PER BOOKS | (B) NET INVEST- MENT INCOME | (C) ADJUSTED NET INCOME | TATEMENT 6 (D) CHARITABLE PURPOSES |
| | (A) EXPENSES | (B) NET INVEST- | (C) ADJUSTED NET INCOME | (D) CHARITABLE |

| FORM 990-PF | OTHER E | XPENSES | Si | CATEMENT 7 |
|-----------------------------|-----------|-------------|------------|------------|
| DESCRIPTION | (A) | (B) | (C) | (D) |
| | EXPENSES | NET INVEST- | ADJUSTED | CHARITABLE |
| | PER BOOKS | MENT INCOME | NET INCOME | PURPOSES |
| MISCELLANEOUS | 820. | 820. | 820. | 0. |
| NYS FEE | 750. | 750. | 750. | |
| TO FORM 990-PF, PG 1, LN 23 | 1,570. | 1,570. | 1,570. | 0. |

| FORM 990-PF | CORPORATE STOCK | | STATEMENT 8 |
|----------------------------|-----------------|-------------|----------------------|
| DESCRIPTION | | BOOK VALUE | FAIR MARKET VALUE |
| CORPORATE STOCK | | 29,965,256. | 38,572,128. |
| TOTAL TO FORM 990-PF, PART | II, LINE 10B | 29,965,256. | 38,572,128. |
| | | | |
| FORM 990-PF | CORPORATE BONDS | | STATEMENT 9 |
| DESCRIPTION | | BOOK VALUE | FAIR MARKET VALUE |
| CORPORATE BONDS | | 50,000. | 49,965. |
| TOTAL TO FORM 990-PF, PART | II, LINE 10C | 50,000. | 49,965. |