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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 01-01-2	017 , aı	nd er	nding 12-31-	2017				
		Indation			A Employer id	entification numbe	r			
C/1 %	O MARG MARGO	LLAR FOUNDATION 50 WINTERSTEEN) WINTERSTEEN			26-0239404					
		d street (or P O box number if mail is not delivered to street address T 48TH STREET) Room/suite		B Telephone nu	ımber (see ınstructıoı	ns)			
		n, state or province, country, and ZIP or foreign postal code NY 10017			C If exemption	application is pendin	g, check here			
G CH	eck al	I that apply Initial return Initial return of a	former public charity		D 1 . Foreign or	ganizations, check he	are \Box			
	iccik di	Final return Amended return			_	ganizations meeting	▶ ⊔			
		Address change Name change	•			k here and attach co				
u Ch	ock tv	rpe of organization ✓ Section 501(c)(3) exempt private	foundation			undation status was t				
		_	le private foundation		under sectio	n 507(b)(1)(A), chec	k here			
		ket value of all assets at end J Accounting method	☑ Cash ☐ Accru	ادر	F If the found:	ation is in a 60-montl	a termination —			
of y	year <i>(f</i>	from Part II, col (c), \$\ 30,644\$ Other (specify) (Part I, column (d) mus		iui		n 507(b)(1)(B), chec				
Pa	rt I	Analysis of Revenue and Expenses (The total	(a) Boyonyo and				(d) Disbursements			
		of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions)	(a) Revenue and expenses per books	(b)	Net investment income	(c) Adjusted net income	for charitable purposes (cash basis only)			
	1	Contributions, gifts, grants, etc , received (attach schedule)	120,000							
	2	Check ► ☐ If the foundation is not required to attach								
	_	Sch B Interest on savings and temporary cash investments	243		243					
	3	- · · ·	243		243					
	4	Dividends and interest from securities								
	5a	Gross rents								
e	b	Net rental income or (loss)	-							
Revenue	6a	Net gain or (loss) from sale of assets not on line 10								
eve	ь -	Gross sales price for all assets on line 6a	-		0					
~	7	Capital gain net income (from Part IV, line 2)			0					
	8 9	Net short-term capital gain								
	_	ĺ								
	10a b	Gross sales less returns and allowances Less Cost of goods sold	<u></u>							
	c	Gross profit or (loss) (attach schedule)								
	11	Other income (attach schedule)								
	12	Total. Add lines 1 through 11	120,243		243					
	13	Compensation of officers, directors, trustees, etc	0							
	14	Other employee salaries and wages								
v.	15	Pension plans, employee benefits								
Se	16a	Legal fees (attach schedule)								
E .	ь	Accounting fees (attach schedule)								
and Administrative Expenses	С	Other professional fees (attach schedule)								
ΙΛe	17	Interest								
rat	18	Taxes (attach schedule) (see instructions)								
ts II.	19	Depreciation (attach schedule) and depletion								
Ē	20	Occupancy								
Ad	21	Travel, conferences, and meetings								
nd	22	Printing and publications								
0 0	23	Other expenses (attach schedule)	357		357					
E	24	Total operating and administrative expenses.	357							
Operating	4 4	Add lines 13 through 23	357		357		0			
o	25	Contributions, gifts, grants paid	122,658		337		122,658			
	26	Total expenses and disbursements. Add lines 24 and	122,550							
	77	25 Subtract line 36 from line 12	123,015		357		122,658			
	27	Subtract line 26 from line 12 Excess of revenue over expenses and	-2,772							
	а	disbursements	-2,772							
	ь	Net investment income (if negative, enter -0-)			0					
	С	Adjusted net income(If negative, enter -0-)								
or l	Paper	work Reduction Act Notice, see instructions.		1	Cat No 11289)	≺ For	m 990-PF (2017)			

	3	Accounts receivable			
		Less allowance for doubtful accounts ▶			
	4	Pledges receivable ▶			
		Less allowance for doubtful accounts ▶			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons (attach schedule) (see instructions)			
	7	Other notes and loans receivable (attach schedule) ▶			
		Less allowance for doubtful accounts ▶			
23	8	Inventories for sale or use			
sets	9	Prepaid expenses and deferred charges			
As	10a	Investments—U S and state government obligations (attach schedule)			
	ь	Investments—corporate stock (attach schedule)			
	С	Investments—corporate bonds (attach schedule)			
	11	Investments—land, buildings, and equipment basis ▶			
		Less accumulated depreciation (attach schedule) ▶			
	12	Investments—mortgage loans			
	13	Investments—other (attach schedule)			
	14	Land, buildings, and equipment basis ▶			
		Less accumulated depreciation (attach schedule) ▶			
	15	Other assets (describe)			
	16	Total assets (to be completed by all filers—see the			
		instructions Also see page 1 item I)	33 416	30 644	

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 follow SFAS 117, check here ▶

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

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) .

Analysis of Changes in Net Assets or Fund Balances

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

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

Other liabilities (describe ▶_

Unrestricted

Temporarily restricted

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) > ___

17

18

19

20

21 22

23

24

25

26

27

28

29

30

31

Part III

2

Liabilities

Net Assets or Fund Balances

30,644

33,416

33,416

33,416

30,644

30,644

30,644

2

3 4

5

6

33,416 -2,772

30,644

30,644 Form **990-PF** (2017)

instructions

Page **3**

(a) List and describe the kind(s) of property sold (e g , real estate, 2-story brick warehouse, or common stock, 200 shs MLC Co) (b) How acquired P—Purchase D—Donation (mo , day, yr) (mo								
1a	1							
	(e) Gross sales price	(f) Depreciation allowed (or allowable)	Cost or	(g) other basis ense of sale		Gain o	h) r (loss)) mınus (g)	
a								
b								
<u>c</u>								
d								
e								
	Complete only for assets	s showing gain in column (h) and ow	<u> </u>				<u>I)</u>	
	(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	Excess	(k) of col (ı) (j), ıf any		col (k), but not	h) gain minus less than -0-) or om col (h))	
а								
b								
с								
d								
е								
2 Capital gain net income or (net capital loss) If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 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) (see instructions) If (loss), enter -0- in Part I, line 8								
Par	t V Qualification l	Jnder Section 4940(e) for Re	educed Tax on Net	Investmen	t Inco	ome		
(For o	ptional use by domestic p	private foundations subject to the se	ction 4940(a) tax on ne	et investment i	ncome)		
Was th	," the foundation does no	eave this part blank le section 4942 tax on the distributa ot qualify under section 4940(e) Do nount in each column for each year,	not complete this part	<u> </u>			es 🗸 No	
_	(a)			. making any c		(d)		
year	se period years Calendar (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitab			Distribution rati (col (b) divided by c	ol (c))	
	2016	130,350		68,156			1 912524	
	2015	115,057		65,937			1 744954	
	2014	100,817		53,716			1 876852	
	2013	117,617		147,965			0 794897	
	2012	109,600		110,384	<u> </u>		0 992898	
	,	d)			2		7 322125	
	number of years the four	o for the 5-year base period—divide ndation has been in existence if less incharitable-use assets for 2017 fron	than 5 years		3		1 46442 <u>5</u> 54,586	
5	Multiply line 4 by line 3			[5		79,937	
6	Enter 1% of net investme	ent income (1% of Part I, line 27b)		[6		0	
7	Add lines 5 and 6			[7		79,937	

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

122,658

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

7b

	Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees,	
Part VIII	and Contractors	

1 List all officers, directors, truste	os f	oundation managers ar	nd their compensation	(see instructions)		
(a) Name and address	Title, and average		(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation		
MARGO WINTERSTEEN		SIDENT, DIRECTOR	0	. 0	C	
243 EAST 48TH STREET	0					
NEW YORK, NY 10017 JEREMY WINTERSTEEN	VICE	PRES, SECRETARY,	0	0		
9 WATERVILLE STREET 4C	DIRE	ECTOR		0		
PORTLAND, ME 04101	0					
LAURENCE WINTERSTEEN	VICE 0	PRES, TREAS, DIRECTOR	0	0	C	
57 UPLAND ROAD BROOKLINE, MA 02445	-					
2 Compensation of five highest-pa	id er	nployees (other than t	nose included on line 1	.—see instructions). If nor	ne, enter "NONE."	
(a) Name and address of each employee pa more than \$50,000	aid	Title, and average hours per week (b) devoted to position	(c) Compensation	Contributions to employee benefit plans and deferred (d) compensation	Expense account, (e) other allowances	
Total number of other employees paid ov						
3 Five highest-paid independent co						
(a) Name and address of each perso	n pai	d more than \$50,000	(b) Typ	e of service	(c) Compensation	
			-			
			+			
Total number of others receiving over \$50						
Part IX-A Summary of Direct (
List the foundation's four largest direct charitable organizations and other beneficiaries served, con	e activ feren	rities during the tax year Incli ces convened, research paper	ude relevant statistical inform s produced, etc	nation such as the number of	Expenses	
1		· · ·	•			
2						
<u> </u>						
4						
Part IX-B Summary of Program			<u> </u>			
Describe the two largest program-related inve	estme	ents made by the foundation d	uring the tax year on lines 1	and 2	Amount	
1						
2						
All other program-related investments 3						
Total. Add lines 1 through 3 .						

2h

2c

3

4

5

6

1a

1b

2

3a 3b

4

5

2.729

2.729

2.729

122,658

122.658

122.658

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Income tax for 2017 (This does not include the tax from Part VI). . .

Qualifying Distributions (see instructions)

Amounts set aside for specific charitable projects that satisfy the

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

3

4 5

6

1

2

3

4

5

Part XII

Distributable amount before adjustments Subtract line 2c from line 1.

Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1. . .

Expenses, contributions, gifts, etc —total from Part I, column (d), line 26.

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

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

Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes

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.

b Total for prior years

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

d From 2015. . . .

a From 2012.

e From 2016.

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Part XIII	Unc

Distributable amount for 2017 from Part XI, line 7

2015 , 2014 , 2013

104.165 110,235

98 131

111.766 126,942

110.235 98,131

111.766

126,942

119.929

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

Excess distributions carryover, if any, to 2017

f Total of lines 3a through e.

4 Qualifying distributions for 2017 from Part XII, line 4 🕨 \$ a Applied to 2016, but not more than line 2a **b** Applied to undistributed income of prior years (Election required—see instructions). c Treated as distributions out of corpus (Election required—see instructions). **d** Applied to 2017 distributable amount. . . .

e Remaining amount distributed out of corpus

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:

5 Excess distributions carryover applied to 2017 (If an amount appears in column (d), the

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. . .

d Excess from 2016. . .

e Excess from 2017. . .

c Excess from 2015. . . .

b Excess from 2014. .

same amount must be shown in column (a))

2017)			
Undistributed Income (see instruc	ctions)		

551.239

119.929

671,168

104.165

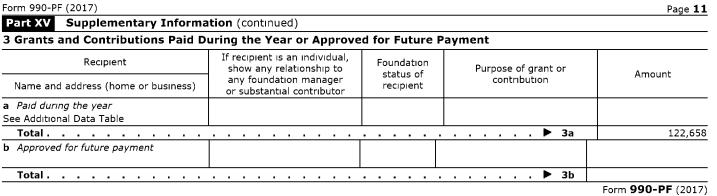
567,003

(b) (a) (c) (d) Corpus Years prior to 2016 2016 2017

2,729

2,729

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er gross	amounts unless otherwise indicated	Unrelated bus	iness income	Excluded by section	512, 513, or 514	(e) Related or exemp
Program	service revenue	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	function income (See instructions
f						
	and contracts from government agencies					
Interes	rship dues and assessments st on savings and temporary cash ments					
	ds and interest from securities			14	243	
	tal income or (loss) from real estate					
	financed property					
	ebt-financed property notations and property					
	evestment income					
Gain o	r (loss) from sales of assets other than					
	pry					
	ome or (loss) from special events rofit or (loss) from sales of inventory					
	evenue a					
d						
d e					242	
d e Subtota	Add columns (b), (d), and (e).			13	243	24
d e Subtota Total. /	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) Adshructions to verify calcul	ations)				
d e Subtota Total. / (See wo	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) Add line 13 instructions to verify calculus. B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex	ations) e Accomplishr income is reported	ment of Exem	pt Purposes of Part XVI-A contribut	Bted importantly to	24
de Subtota Total. / (See wo	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) arksheet in line 13 instructions to verify calcul B Relationship of Activities to th Explain below how each activity for which	ations) e Accomplishr income is reported	ment of Exem	pt Purposes of Part XVI-A contribut	Bted importantly to	24
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d e Subtota Total. / (See wo art XVI ne No.	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) Add line 13 instructions to verify calculus. B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex	ations) e Accomplishr income is reported	ment of Exem	pt Purposes of Part XVI-A contribut	Bted importantly to	24
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orm 9	90-PF (<u> </u>					_						Pa	ge 13
	XVII	Information Re Exempt Organi	zations							<u> </u>		able		
		janization directly or in Code (other than sectio									on 501		Yes	No
a Tra	nsfers f	rom the reporting foun	dation to a no	ncha	rıtable exe	empt organiza	tion c	of						
(1) Cash.											1a(1)		No
(2) Other	assets										1a(2)		No
	ner trans													
•	•	of assets to a nonchari	•	-								1b(1)		No
-		ases of assets from a n										1b(2)		No
•	•	l of facilities, equipmer	•									1b(3)		No
-		oursement arrangemen					٠.				•	1b(4)		No
•	•	or loan guarantees. nance of services or m					•				•	1b(5) 1b(6)		No No
•	•	facilities, equipment, n	•		-						•	10(0)		No
d If t	the answ the good	ver to any of the above ds, other assets, or services saction or sharing arra	is "Yes," com vices given by	plete the i	the follow reporting f	nng schedule foundation If	Colu	mn (b) s oundatio	should alv	ways show the fair i	ket valu	'alue		110
(a) Lin	e No	(b) Amount involved	(c) Name of r	ioncha	ırıtable exer	mpt organization	1	(d) Des	cription of	transfers, transactions	, and shar	rıng arraı	ngemen	ts
de	scribed i	dation directly or indire in section 501(c) of the implete the following so	Code (other								[☐Yes	✓	No
		(a) Name of organization	n		(b) Type of organ	ıızatıor	1		(c) Description	of relation	nship		
- -	of m	r penalties of perjury, y knowledge and belief n preparer has any kno	, ıt ıs true, co											
Sign Here		****				2018-05-15		_ _	****		return	ne IRS di: ne prepai		
	9	signature of officer or to	rustee			Date		, , ,	itle		below (see ır	nstr)? 🖸	Z Yes	□ No
		Print/Type preparer's	name	Prepa	arer's Sign	ature		Date		Check if self-	PTIN			
Paid		Steven Hueffner						2018-	05-15	employed ▶ □		P01087	/25	
	arer Only	Firm's name ► TOPE	EL FORMAN LL	.C						'	Fırm's E	IN ►		
	-	Firm's address ► 50	0 NORTH MIC	HIGA	N AVE SU	ITE 1700								
								Phone n	o (312)	642-0	0006			

CHICAGO, IL 60611

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 NATURAL RESOURCES COUNCIL OF ME NONE PC UNRESTRICTED 5,000 (B CARSON FUND) 3 WADE STREET AUGUSTA, ME 04330 US COURT TENNIS PRESERVATION NONE PC UNRESTRICTED 6,000

FOUNDATION PO BOX 194 JAMESTOWN, RI 02835				
ALLIANCE FOR CHILDREN FOUNDATION 464 HILLSIDE AVENUE SUITE 300 NEEDHAM MA 02494	NONE	PC	UNRESTRICTED	3,500

JAMESTOWN, RI 02835				
ALLIANCE FOR CHILDREN FOUNDATION 464 HILLSIDE AVENUE SUITE 300 NEEDHAM, MA 02494	NONE	PC	UNRESTRICTED	3,
in the second se				1

ALLIANCE FOR CHILDREN FOUNDATION NONE PC UNRESTRICTED	JAMESTOWN, KI 02055				
NEEDHAM, MA 02494	464 HILLSIDE AVENUE SUITE 300	NONE	PC	UNRESTRICTED	3

122,658 Total .

Recipient Foundation Purpose of grant or If recipient is an individual, 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 SOUTHERN MAINE CONSERVATION NONE PC UNRESTICTED 8.500 COLLABORATIVE 217 COMMERCIAL STREET SUITE 302 PORTLAND, ME 04101

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

,				
FILM FORUM209 W HOUSTON NEW YORK, NY 10014	NONE	PC	UNRESTRICTED	2,500
MANHATTAN THEATRE CLUB 311 WEST 43RD STREET 8TH FLOOR	NONE	PC	UNRESTRICTED	2,230

122,658

NEW YORK, NY 10014				,
MANHATTAN THEATRE CLUB 311 WEST 43RD STREET 8TH FLOOR NEW YORK, NY 10036	NONE	PC	UNRESTRICTED	2,23

Total .

За

Recipient Foundation Purpose of grant or If recipient is an individual, 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 PROUTS NECK ASSOCIATION NONE PC UNRESTRICTED 300 499 BLACK POINT ROAD SCARBOROUGH, ME 04074

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

•				
PORTLAND MUSEUM OF ART SEVEN CONGRESS SQUARE PORTLAND, ME 04101	NONE	PC	UNRESTRICTED	11,500
KEY WEST LITERARY SEMINAR	NONE	PC	UNRESTRICTED	2,500

KEY WEST LITERARY SEMINAR 718 LOVE LANE KEY WEST, FL 33040	NONE	PC	UNRESTRICTED	2,500

122,658

	KEY WEST LITERARY SEMINAR 718 LOVE LANE KEY WEST, FL 33040	NONE	PC	UNRESTRICTED	2,5
1					

Total .

За

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient Foundation Purpose of grant or If recipient is an individual, 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 SCARBOUROUGH LAND TRUST NONE PC UNRESTRICTED 5.300 7 OAK HILL TERRACE 2ND FLOOR SCARROROLIGH ME 04074

SEARBOROGGII, IIIE 04074				
BROADWAY CARESEQUITY FIGHTS AIDS 165 WEST 46TH STREET 1300 NEW YORK, NY 10036	NONE	PC	UNRESTRICTED	1,000
CITY MEALS ON WHEELS	NONE	PC	UNRESTRICTED	3,600

NEW YORK, NY 10036				
CITY MEALS ON WHEELS 355 LEXINGTON AVENUE NEW YORK, NY 10017	NONE	PC	UNRESTRICTED	3,60

•				
CITY MEALS ON WHEELS 355 LEXINGTON AVENUE NEW YORK, NY 10017	NONE	PC	UNRESTRICTED	3,6

355 LEXINGTON AVENUE NEW YORK, NY 10017		
Total	 	122,658

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient Foundation Purpose of grant or If recipient is an individual, 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 THE SEEING EYE NONE PC UNRESTRICTED 1,500 10 WASHINGTON VALLEY ROAD

MORRISTOWN, NJ 07960				
THE DOE FUND232 EAST 84TH STREET NEW YORK, NY 10028	NONE	PC	UNRESTRICTED	1,500
CITY HARVEST575 8TH AVENUE 4TH FL	NONE	PC	UNRESTRICTED	3,000

NEW YORK, NY 10028				
CITY HARVEST575 8TH AVENUE 4TH FL NEW YORK, NY 10018	NONE	PC	UNRESTRICTED	3,00

+				122.65
CITY HARVEST575 8TH AVENUE 4TH FL NEW YORK, NY 10018	NONE	PC	UNRESTRICTED	

NEW YORK, NY 10018		·
Total	 	122,658

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

COALITION FOR THE HOMELESS 129 FULTON STREET NEW YORK, NY 10038	NONE	PC	UNRESTRICTED	2,500
STANFORD FUNDGIFT PROCESSING PO BOX 20466	NONE	PC	UNRESTRICTED	1,000

PO BOX 20466 STANFORD, CA 94305	NONE	ę.	ONRESTRICTED	1,000
FESSENDEN SCHOOL 250 WALTHAM STREET	NONE	PC	UNRESTRICTED	31,000

FESSENDEN SCHOOL 250 WALTHAM STREET WEST NEWTON, MA 02465	NONE	PC	UNRESTRICTED	31,000
<u> </u>				

FESSENDEN SCHOOL	NONE	PC	UNRESTRICTED	31,0
250 WALTHAM STREET				
WEST NEWTON, MA 02465				
		•		

Total . 122,658 3a

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient

or substantial contributor

Name and address (home or business)

NEW YORK, NY 10019

Total . 3a

a Paid during the year				
TURTLE BAY ASSOC TREE FUND 208 EAST 51ST STREET 238 NEW YORK, NY 10022	NONE	PC	UNRESTRICTED	100
DOCTORS WITHOUT BORDERS 333 7TH AVENUE NEW YORK, NY 10001	NONE	PC	UNRESTRICTED	5,000
THIRTEEN825 EIGHTH AVENUE	NONE	PC	UNRESTRICTED	1,125

122,658

Recipient Foundation Purpose of grant or If recipient is an individual, 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 WINSOR SCHOOL103 PILGRIM ROAD NONE PC UNRESTRICTED 1.000 BOSTON, MA 02215

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

PLANNED PARENTHOOD LEAGUE OF MASSACHUSETTS 1055 COMMONWEALTH AVENUE BOSTON, MA 02215	NONE	PC	UNRESTRICTED	1,500
MAINE ISLAND TRAIL ASSOCIATION	NONE	PC	UNRESTRICTED	10,000

122,658

BOSTON, MA 02215				
MAINE ISLAND TRAIL ASSOCIATION 58 FORE ST PORTLAND, ME 04101	NONE	PC	UNRESTRICTED	10,0

Total .

За

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 contribution status of any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year

ISLAND INSTITUTEPO BOX 648 386 MAIN STREET ROCKLAND, ME 04841	NONE	PC	UNRESTRICTED	100
HUMAN RIGHTS WATCH 440 N WELLS ST 200	NONE	PC	UNRESTRICTED	2,500

HUMAN RIGHTS WATCH 440 N WELLS ST 200 CHICAGO, IL 60654	NONE	PC	UNRESTRICTED	2,500
FRESH AIR FUND633 THIRD AVENUE 14TH FLOOR	NONE	PC	UNRESTRICTED	250

FRESH AIR FUND633 THIRD AVENUE 14TH FLOOR NEW YORK, NY 10017	NONE	PC	UNRESTRICTED	250
				·

T-4-1				-
NEW YORK, NY 10017				
14TH FLOOR				
I KESII AIK I ONDOSS TITIKD AVENOE	NONE	r C	ONKESTRICTED	

14TH FLOOR NEW YORK, NY 10017		
Total	 	122,658

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

or substantial contributor

Name and address (home or business)

3a

a Paid during the year				
LIFEFLIGHTPO BOX 899 CAMDEN, ME 04843	NONE	PC	UNRESTRICTED	500
THE MOUNTAIN SCHOOL 151 MOUNTAIN SCHOOL ROAD	NONE	PC	UNRESTRICTED	500

recipient

151 MOUNTAIN SCHOOL ROAD VERSHIRE, VT 05079				
MUSEUM OF MODERN ART 11 WEST 53RD STREET NEW YORK, NY 10019	NONE	PC	UNRESTRICTED	

VERSHIRE, VT 05079				
MUSEUM OF MODERN ART 11 WEST 53RD STREET	NONE	PC	UNRESTRICTED	
NEW YORK, NY 10019				

ERSTINE, VI 03073				1
IUSEUM OF MODERN ART 1 WEST 53RD STREET	NONE	PC	UNRESTRICTED	27

USEUM OF MODERN ART	NONE	PC	UNRESTRICTED	278
1 WEST 53RD STREET				
EW YORK, NY 10019				

Total			122.658
NEW YORK, NY 10019			
IT MEDI DOKO DIKEEL			

Total	 	122.650
NEW YORK, NY 10019		

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 MAINE PUBLIC BROADCASTING NONE PC UNRESTRICTED 500 NETWORK 62 TEVAC AVENUE

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

BANGOR, ME 04401				
BOSTON COLLEGIATE CHARTER SCHOOL 11 MAYHEW ST DORCHESTER, MA 02125	NONE	PC	UNRESTRICTED	1,500

Total				122,658
THE CROSSROADS CLUB 1700 LAKE IDA ROAD DELRAY BEACH, FL 33445	NONE	PC	UNRESRICTED	500
DORCHESTER, MA 02125				

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 MILLBROOK SCHOOL NONE PC UNRESTRICTED 2.500 131 MILLBROOK SCHOOL RD

MILLBROOK, NY 12545				
NEUE GALERIE1048 5TH AVENUE NEW YORK, NY 10028	NONE	PC	UNRESTRICTED	275
ST BENARD'S SCHOOL4 E 98TH ST	NONE	PC	UNRESTRICTED	1,250

NEW YORK, NY 10028				
ST BENARD'S SCHOOL4 E 98TH ST NEW YORK, NY 10029	NONE	PC	UNRESTRICTED	1,

ST BENARD'S SCHOOL4 E 98TH ST NONE PC UNRESTRICTED			
	NONE	UNRESTRICTED	1

ST BENARD'S SCHOOL4 E 98TH ST NEW YORK, NY 10029	NONE	PC	UNRESTRICTED	1,2

NEW YORK, NY 10029		i
Total		 122.658

Total	 	122,658

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 contribution status of any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year

THE FOOD PROJECT10 LEWIS STREET LINCOLN, MA 01773	NONE	PC	UNRESTRICTED	100
UNITED SOUTH END SETTLEMENTS 566 COLUMBUS AVENUE	NONE	PC	UNRESTRICTED	750

ONTIED SOOTH END SETTEMENTS	NONE		ONKESTRICTED	
566 COLUMBUS AVENUE				
BOSTON, MA 02118				
, ·				

lefile GRAPHIC print - DO NOT PROCESS | As Filed Data -DLN: 93491313011618 Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing. TY 2017 Depreciation Schedule Name: SAND DOLLAR FOUNDATION C/O MARGO WINTERSTEEN

EIN: 26-0239404

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN:	93491313011618		
TY 2017 Other Expenses Schedule						
Name:	SAND DOLLAR I	FOUNDATION				
	C/O MARGO WINTERSTEEN					
EIN:	26-0239404					
Other Expenses Schedule						
Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes		
BANK FEES	357	357				

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491313011618
TY 2017 Other Income Schedu	ıle	
Name:	SAND DOLLAR FOUNDAT:	ION
	C/O MARGO WINTERSTE	EN
EIN:	26-0239404	

Other Income Schedule

other andome benedure						
Description	Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income			
CLASS ACTION LAWSUIT						

efile GRAPHIC print - DO	NOT PROCESS	As Filed Data -				DLN: 93491313011618	
Schedule B		Schedu	le of Contributo	rs		OMB No 1545-0047	
(Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service	► Information a	ibout Schedule B (F	Form 990, 990-EZ, or 990- form 990, 990-EZ, or 990-P <u>ww <i>irs gov/form</i>990</u>		ons is at	2017	
Name of the organization SAND DOLLAR FOUNDATION					Employer id	dentification number	
C/O MARGO WINTERSTEEN					26-0239404		
Organization type (check	. one)						
Filers of:	Section:						
Form 990 or 990-EZ	0 or 990-EZ						
	☐ 4947(a)(⁻	1) nonexempt char	itable trust not treated as	s a private founda	tion		
	☐ 527 politi	cal organization					
Form 990-PF	✓ 501(c)(3)	exempt private fo	undation				
4947(a)(1) nonexempt charitable trust treated as a private foundation							
	501(c)(3) taxable private foundation						
			PF that received, during t omplete Parts I and II So				
Special Rules							
under sections 509	e(a)(1) and 170(b) one contributor, d	(1)(A)(vi), that che uring the year, total	g Form 990 or 990-EZ that cked Schedule A (Form s al contributions of the gre plete Parts I and II	990 or 990-EZ), P	art II, line 13,	16a, or 16b, and that	
during the year, tot	tal contributions o	f more than \$1,000	or (10) filing Form 990 o exclusively for religious animals Complete Parts	, charitable, scien			
during the year, co If this box is check purpose Don't con	ntributions <i>exclus</i> ed, enter here the nplete any of the p	eively for religious, total contributions parts unless the G e	or (10) filing Form 990 c charitable, etc., purposes that were received during eneral Rule applies to the or more during the year.	s, but no such con ng the year for an ns organization be	ntributions tota exclusively re ecause it recei	aled more than \$1,000 eligious, charitable, etc , ived <i>nonexclusively</i>	
Caution. An organization 990-EZ, or 990-PF), but it Form 990-EZ or on its For 990-EZ, or 990-PF)	must answer "No	on Part IV, line 2	, of its Form 990, or chec	k the box on line	H of its		
For Paperwork Reduction Act for Form 990, 990-EZ, or 990-F		ructions	Cat No 30613X	Schedu	ıle B (Form 990	0, 990-EZ, or 990-PF) (2017)	

Schedule B (Form 990, 990-EZ, or 990-PF) (2017) Page 2 Name of organization Employer identification number SAND DOLLAR FOUNDATION 26-0239404 C/O MARGO WINTERSTEEN Part I Contributors (See instructions) Use duplicate copies of Part I if additional space is needed (a) (d) Type of contribution No. **Total contributions** Name, address, and ZIP + 4 Person MARGO WINTERSTEEN **Payroll** 243 EAST 48TH STREET \$ 120,000 Noncash NEW YORK, NY10017 (Complete Part II for noncash contributions) (a) (b) (c) (d) No. Name, address, and ZIP + 4 Total contributions Type of contribution Person Payroll Noncash (Complete Part II for noncash contributions) (d) (b) (a) (c) Name, address, and ZIP + 4 **Total contributions** Type of contribution No. Person **Payroll** Noncash (Complete Part II for noncash contributions) (a) (b) (c) (d) No. **Total contributions** Type of contribution Name, address, and ZIP + 4 Person Payroll Noncash (Complete Part II for noncash contributions) (a) (b) (c) (d) **Total contributions** No. Name, address, and ZIP + 4 Type of contribution Person Payroll Noncash (Complete Part II for noncash contributions) (c) (d) (a) (b) No. **Total contributions** Type of contribution Name, address, and ZIP + 4 Person **Payroll** \$ Noncash (Complete Part II for noncash contributions)

Schedule B (Form	990, 990-EZ, or 990-PF) (2017)		Page 4
Name of organizat SAND DOLLAR FOUN C/O MARGO WINTER	IDATION		Employer identification number 26-0239404
than \$1, organiz the year	,000 for the year from any one contributor	r. Complete columns (a) throu of exclusively religious, chari ctions.) ► \$	d in section 501(c)(7), (8), or (10) that total more ugh (e) and the following line entry. For table, etc., contributions of \$1,000 or less for
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	Transferee's name, address, and	(e) Transfer of gift ZIP 4 F	Relationship of transferor to transferee
(a)	/h) Dumage of sift	(a) Hop of wife	(d) Decomination of how wife in hold
No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	Transferee's name, address, and	(e) Transfer of gift ZIP 4 F	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
	Transferee's name, address, and	(e) Transfer of gift	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
	Transferee's name, address, and	(e) Transfer of gift	Relationship of transferor to transferee
			chedule B (Form 990, 990-EZ, or 990-PF) (2017)