efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93491129024598

2017

OMB No 1545-0052

# Form 990-PF

Department of the Treasury Internal Revenue Service

## **Return of Private Foundation**

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

Open to Public Inspection

| or                                    | caler    | ndar year 2017, or tax year beginning 01-01-20  | 17 , and              | d ending 12-31-       | -2017  |                                  |
|---------------------------------------|----------|---|-----------------------|-----------------------|--|----------------------------------|
|                                       |          | indation<br>MOSKOWITZ FOUNDATION  |                       | A Employer id         | entification number                              | r                                |
| CI                                    | ILIXIVA  | IOSKOWITZ FOUNDATION  |                       | 26-2547583            |  |                                  |
|                                       |          | f street (or P O box number if mail is not delivered to street address)<br>ALLANDALE BCH BLVD 1000                  | Room/suite            | <b>B</b> Telephone nu | ımber (see ınstruction                           | ns)                              |
| _                                     | 250 L 11 | ALLANDALL BOTT BLVD 1000  |                       | (305) 531-4559        | 9  |                                  |
|                                       |          | , state or province, country, and ZIP or foreign postal code<br>E BEACH, FL 33009                                   |                       | <b>C</b> If exemption | application is pending                           | g, check here                    |
|                                       |          |   |                       |                       |  | ▶ ∟                              |
| G C                                   | neck al  | I that apply ☐ Initial return ☐ Initial return of a   | former public charity | _                     | ganizations, check he                            | ▶ ∟                              |
|                                       |          | ☐ Final return ☐ Amended return ☐ Address change ☐ Name change  |                       |                       | rganizations meeting i<br>ck here and attach cor |                                  |
| <b>1</b> C                            | neck tv  | pe of organization  ✓ Section 501(c)(3) exempt private in   |                       |                       | undation status was to                           |                                  |
| _                                     |          |   | private foundation    | under section         | on 507(b)(1)(A), checl                           | k nere                           |
|                                       |          | xet value of all assets at end J Accounting method  | ☑ Cash ☐ Accrual      |                       | ation is in a 60-month                           |                                  |
|                                       |          | from Part II, col (c),<br>•\$ 37,311,486 ☐ Other (specify) _  |                       | under sectio          | n 507(b)(1)(B), check                            | k here                           |
|                                       | Í        | (Part I, column (d) must  | be on cash basıs )    |                       |  |                                  |
| Pa                                    | rt I     | Analysis of Revenue and Expenses (The total   | (a) Revenue and       | b) Net investment     | (c) Adjusted net                                 | (d) Disbursements for charitable |
|                                       |          | of amounts in columns (b), (c), and (d) may not necessarily<br>equal the amounts in column (a) (see instructions) ) | expenses per<br>books | income                | income   | purposes<br>(cash basis only)    |
|                                       | 1        | Contributions, gifts, grants, etc , received (attach  | 15,000,000            |                       |  | (cush busis only)                |
|                                       |          | schedule)   |                       |                       |  |                                  |
|                                       | 2        | Check ► ☐ If the foundation is <b>not</b> required to attach Sch B  |                       |                       |  |                                  |
|                                       | 3        | Interest on savings and temporary cash investments  | 142,587               | 142,587               |  |                                  |
|                                       | 4        | Dividends and interest from securities  | 277,951               | 264,716               |  |                                  |
|                                       | 5a       | Gross rents   |                       |                       |  |                                  |
| a)                                    | b        | Net rental income or (loss)   |                       |                       |  |                                  |
| Revenue                               | 6a       | Net gain or (loss) from sale of assets not on line 10   | 66,979                |                       |  |                                  |
| eve                                   | b        | Gross sales price for all assets on line 6a 8,717,645  Capital gain net income (from Part IV, line 2)               |                       | 66,979                |  |                                  |
| ~                                     | 7<br>  8 | Net short-term capital gain   | +                     | 00,979                |  |                                  |
|                                       | 9        | Income modifications  |                       |                       | 45,000   |                                  |
|                                       | 10a      | Gross sales less returns and allowances   |                       |                       |  |                                  |
|                                       | ь        | Less Cost of goods sold   |                       |                       |  |                                  |
|                                       | C        | Gross profit or (loss) (attach schedule)  |                       |                       |  |                                  |
|                                       | 11       | Other income (attach schedule)  |                       |                       |  |                                  |
|                                       | 12       | Total. Add lines 1 through 11   | 15,487,517            | 474,282               | · ·  |                                  |
|                                       | 13       | Compensation of officers, directors, trustees, etc  | 0                     | 0                     |  |                                  |
| ıΛ                                    | 14<br>15 | Other employee salaries and wages   |                       |                       |  |                                  |
| Se                                    | 16a      | Legal fees (attach schedule)  | 9,903                 | 0                     |  | 1                                |
| <u>ē</u>                              | ь        | Accounting fees (attach schedule)   | <b>55,737</b>         | 0                     |  |                                  |
| Ĕ                                     | c        | Other professional fees (attach schedule)   | 9,863                 | 9,461                 |  | 1                                |
| Operating and Administrative Expenses | 17       | Interest  |                       |                       |  |                                  |
| st ra                                 | 18       | Taxes (attach schedule) (see instructions)  | 15,245                | 0                     |  | 1                                |
| ┋                                     | 19       | Depreciation (attach schedule) and depletion  |                       |                       |  |                                  |
| 5                                     | 20       | Occupancy   |                       |                       |  |                                  |
| ב<br>פר                               | 21       | Travel, conferences, and meetings   |                       |                       |  |                                  |
| ਰ<br>ਜ                                | 22       | Printing and publications   | 40,025                | 0                     |  |                                  |
| Ē,                                    | 23       | Total operating and administrative expenses.  | 40,023                |                       |  |                                  |
| er.                                   |          | Add lines 13 through 23   | 130,773               | 9,461                 |  |                                  |
| <u>S</u>                              | 25       | Contributions, gifts, grants paid   | 8,064,000             |                       |  | 8,064,00                         |
|                                       | 26       | Total expenses and disbursements. Add lines 24 and  |                       |                       |  |                                  |
|                                       | 27       | 25<br>Subtract line 26 from line 12   | 8,194,773             | 9,461                 |  | 8,064,00                         |
|                                       | 27<br>a  | Subtract line 26 from line 12  Excess of revenue over expenses and  | 7,292,744             |                       |  |                                  |
|                                       |          | disbursements   | .,232,, 14            |                       |  |                                  |
|                                       | Ь        | Net investment income (if negative, enter -0-)  |                       | 464,821               |  |                                  |
|                                       | C        | Adjusted net income(If negative, enter -0-)   |                       |                       | 45,000   |                                  |

| Part                | 311        | Balance Sheets Attached schedules and amounts in the description column               | beginning or year         | CI NO LINE                         |                                    |
|---------------------|------------|---|---------------------------|------------------------------------|------------------------------------|
| =                   | 1          | should be for end-of-year amounts only (See instructions )  Cash—non-interest-bearing | (a) Book Value<br>138,477 | <b>(b)</b> Book Value<br>3,659,035 | (c) Fair Market Value<br>3,659,035 |
|                     | 2          | Savings and temporary cash investments  | 1,307,337                 | 1,425,070                          |                                    |
|                     | 3          | Accounts receivable   | 1,307,337                 | 1,+25,070                          | 1,423,070                          |
| -   '               | 3          | Less allowance for doubtful accounts  |                           |                                    |                                    |
|                     |            | Pledges receivable  |                           |                                    |                                    |
| '                   | 4          | 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 ▶  |                           |                                    |                                    |
| \$   .              | 8          | Inventories for sale or use   |                           |                                    |                                    |
| انت                 | 9          | Prepaid expenses and deferred charges   |                           |                                    |                                    |
| 4  1                | 0a         | Investments—U S and state government obligations (attach schedule)                    |                           |                                    |                                    |
|                     | b          | Investments—corporate stock (attach schedule)   | 1,094,330                 | 0                                  | 0                                  |
|                     | С          | Investments—corporate bonds (attach schedule)   |                           |                                    |                                    |
| 1                   | L <b>1</b> | Investments—land, buildings, and equipment basis ►                                    |                           |                                    |                                    |
|                     |            | Less accumulated depreciation (attach schedule) ▶                                     | 6,467,000                 | 7,507,640                          | 7,507,640                          |
| 1                   | L2         | Investments—mortgage loans  |                           |                                    |                                    |
| 1                   | L3         | Investments—other (attach schedule)   | 20,808,075                | 24,719,741                         | 24,719,741                         |
| 1                   | L <b>4</b> | Land, buildings, and equipment basis ▶  |                           |                                    |                                    |
|                     |            | Less accumulated depreciation (attach schedule) ▶                                     |                           |                                    |                                    |
| 1                   | L <b>5</b> | Other assets (describe)   |                           |                                    |                                    |
| 1                   | L <b>6</b> | Total assets (to be completed by all filers—see the                                   |                           |                                    |                                    |
|                     |            | instructions Also, see page 1, item I)  | 29,815,219                | 37,311,486                         | 37,311,486                         |
| 1                   | L <b>7</b> | Accounts payable and accrued expenses   |                           |                                    |                                    |
| - 1                 | L <b>8</b> | Grants payable  |                           |                                    |                                    |
| Liabilities         | L <b>9</b> | Deferred revenue  |                           |                                    |                                    |
| 美 2                 | 20         | Loans from officers, directors, trustees, and other disqualified persons              |                           |                                    |                                    |
| 힐                   | 21         | Mortgages and other notes payable (attach schedule)                                   |                           |                                    |                                    |
| <b>-</b>   2        | 22         | Other liabilities (describe )   |                           |                                    |                                    |
| 2                   | 23         | Total liabilities(add lines 17 through 22)  | 0                         | 0                                  |                                    |
|                     |            | Foundations that follow SFAS 117, check here ▶  |                           |                                    |                                    |
| es                  |            | and complete lines 24 through 26 and lines 30 and 31.                                 |                           |                                    |                                    |
| ≗ ,                 | 24         | Unrestricted  |                           |                                    |                                    |
| =                   | - ·<br>25  | Temporarily restricted  |                           |                                    |                                    |
|                     | 26         | Permanently restricted  |                           |                                    |                                    |
| Ĕ۱                  | -0         | ·   |                           |                                    |                                    |
| or Fund             |            | Foundations that do not follow SFAS 117, check here                                   |                           |                                    |                                    |
| 0 2                 | _          | and complete lines 27 through 31.   | 22.21.2                   | 57 544 ·                           |                                    |
| <u>ي</u>            | 27         | Capital stock, trust principal, or current funds                                      | 29,815,219                | 37,311,486                         |                                    |
| ¥ 2                 | 28         | Paid-in or capital surplus, or land, bldg , and equipment fund                        | 0                         | 0                                  |                                    |
| ᇷᅥᄼ                 | 29         | Retained earnings, accumulated income, endowment, or other funds                      | 0                         | 0                                  |                                    |
| $\mathbf{Z} \mid 3$ | 30         | Total net assets or fund balances (see instructions)                                  | 29,815,219                | 37,311,486                         |                                    |

37,311,486

29,815,219

7,292,744

37,311,486

37,311,486 Form **990-PF** (2017)

203,523

1

2

3

4

5

6

29,815,219

31 Part III

2

3

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

Decreases not included in line 2 (itemize) ▶

Other increases not included in line 2 (itemize)

Enter amount from Part I, line 27a

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

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

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

**Analysis of Changes in Net Assets or Fund Balances** 

Page **3** 

|  | <b>(a)</b><br>the kınd(s) of property sold (e g , re<br>ehouse, or common stock, 200 shs  | (b) How acquired P—Purchase D—Donation | (c) Date acquired (mo , day, yr ) | (d)<br>Date sold<br>(mo , day, yr )                 |   |  |  |  |
|--|---|--|-----------------------------------|---|---|--|--|--|
| 1 a FIDELITY INVESTMENTS                                       | - SEE DETAIL  |  | Р                                 |   |   |  |  |  |
| <b>b</b> FIDELITY INVESTMENTS                                  |   | Р                                      |                                   |   |   |  |  |  |
| c CAPITAL GAINS DIVIDEN  | DS  |  | Р                                 |   |   |  |  |  |
| d  |   |  |                                   |   |   |  |  |  |
| e  |   |  |                                   |   |   |  |  |  |
|  | (f)   |  | (g)                               | (   | h)                                      |  |  |  |
| (e)<br>Gross sales price                                       | Depreciation allowed  |  | other basis                       |   | r (loss)                                |  |  |  |
| <u>'</u>   | (or allowable)  | plus expe                              | ense of sale                      | (e) plus (f   | ) minus (g)                             |  |  |  |
|  | 6,264   |  | 5,388,217                         |   | -1,953                                  |  |  |  |
| <b>b</b> 3,29  | 2,894   |  | 3,262,449                         |   | 30,445                                  |  |  |  |
| <b>c</b> 3   | 8,487   |  |                                   |   | 38,487                                  |  |  |  |
| d  |   |  |                                   |   |   |  |  |  |
| e  |   |  |                                   |   |   |  |  |  |
| Complete only for assets                                       | showing gain in column (h) and ow   | ned by the foundation (                | on 12/31/69                       | (   | 1)                                      |  |  |  |
| (i)  | (j)   |  | (k)                               | Gains (Col (  | h) gain minus                           |  |  |  |
| F M V as of 12/31/69   | Adjusted basis<br>as of 12/31/69  |  | of col (i)                        | 1 ' ' '   | less than -0-) <b>or</b><br>om col (h)) |  |  |  |
|  | as 01 12/31/69  | over cor                               | (j), if any                       | L033e3 (III   | -1,953                                  |  |  |  |
| a  |   |  |                                   |   | 30,445                                  |  |  |  |
| b  |   |  |                                   |   |   |  |  |  |
| C .  |   |  |                                   |   | 38,487                                  |  |  |  |
| d  |   |  |                                   |   |   |  |  |  |
| e  |   |  |                                   |   |   |  |  |  |
| 3 Net short-term capital o                                     | 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) (see instructions) If (loss), enter -0- |  |                                   |   |   |  |  |  |
| Part V Qualification L   | Inder Section 4940(e) for Re  | educed Tax on Net                      | Investment In                     | come  |   |  |  |  |
| (For optional use by domestic p                                | rivate foundations subject to the sec   | ction 4940(a) tax on ne                | t investment incom                | e )   |   |  |  |  |
| if section 4940(d)(2) applies, le                              | save this part blank  |  |                                   |   |   |  |  |  |
|  | ·   |  |                                   |   |   |  |  |  |
|  | e section 4942 tax on the distributa  | , ,                                    | in the base period?               | , L Y   | es 🗹 No                                 |  |  |  |
| ·  | et qualify under section 4940(e) Do   |  |                                   |   |   |  |  |  |
|  | nount in each column for each year,   | see instructions before                | making any entries                |   |   |  |  |  |
| (a) Base period years Calendar year (or tax year beginning in) | <b>(b)</b><br>Adjusted qualifying distributions   | (c)<br>Net value of noncharitab        | le-use assets                     | ( <b>d)</b> Distribution rati (col (b) divided by c |   |  |  |  |
| 2016   | 7,209,500   |  | 28,904,701                        | . , ,   | 0 249423                                |  |  |  |
| 2015   | 10,186,826  |  | 23,579,894                        |   | 0 432013                                |  |  |  |
| 2014   | 15,370,398  |  | 29,727,679                        |   | 0 517040                                |  |  |  |
| 2013   | 5,154,130   |  | 35,950,251                        |   | 0 143368                                |  |  |  |
| 2012   | 5,369,430   |  | 30,158,262                        |   | 0 178042                                |  |  |  |
| 2 Total of line 1, column (c                                   |   |  | 2                                 |   | 1 519886                                |  |  |  |
|  | for the 5-year base period—divide   | the total on line 2 by 5.              |                                   |   |   |  |  |  |
|  | dation has been in existence if less  |  | 3_                                |   | 0 303977                                |  |  |  |
|  | ncharitable-use assets for 2017 fron  | n Part X, line 5                       | 4                                 |   | 27,384,695                              |  |  |  |
| <b>5</b> Multiply line 4 by line 3                             |   |  | 5                                 |   | 8,324,317                               |  |  |  |
| <b>6</b> Enter 1% of net investme                              | ent income (1% of Part I, line 27b)   |  | 6                                 |   | 4,648                                   |  |  |  |
| <b>7</b> Add lines 5 and 6                                     |   |  | 7                                 |   | 8,328,965                               |  |  |  |
| 8 Enter qualifying distributi                                  | ons from Part XII, line 4 ,   |  | 8                                 |   | 8,064,000                               |  |  |  |
|  | eater than line 7, check the box in Pa  | art VI, line 1b, and com               | plete that part usin              | g a 1% tax rate Se                                  | e the Part VI                           |  |  |  |
| instructions   |   |  |                                   | Fo  | orm <b>990-PF</b> (2017)                |  |  |  |

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

7b

| Down WIII | Information About Officers, | Directors, | Trustees, | Foundation Managers, | Highly Paid Employees, |
|-----------|-----------------------------|------------|-----------|----------------------|------------------------|
| bart ATTT | and Contractors             |            |           |                      |                        |

| and Contractors  |                 |   |   |   |                                       |
|--|-----------------|---|---|---|---------------------------------------|
| 1 List all officers, directors, trustee  | es, fo          | oundation managers ar   | d their compensation                                | (see instructions).   |                                       |
| (a) Name and address   |                 | Title, and average<br>hours per week<br><b>b)</b> devoted to position | (c) Compensation (If not paid, enter -0-)           | (d) Contributions to employee benefit plans and deferred compensation | Expense account, (e) other allowances |
| CHERNA MOSKOWITZ   |                 | SIDENT, SEC, TREAS  | 0   | 0   | 0                                     |
| 1250 E HALLANDALE BEACH BLVD SUITE   | 20 0            | 0   |   |   |                                       |
| 1000<br>HALLANDALE BEACH, FL 33009   |                 |   |   |   |                                       |
| LAURIE HIRSCH  | DIRE            | CTOR  | 0   | 0   | 0                                     |
| 1250 E HALLANDALE BEACH BLVD SUITE   | 5 00            |   |   | ď   | Ĭ                                     |
| 1000   |                 |   |   |   |                                       |
| 1 ALLANDALE BEACH, FL 33009 2 Compensation of five highest-pa  | id or           | nnlovees (other than t  | <br>hasa included on line 1                         | _coo instructions\ If no  | no optor "NONE "                      |
| 2 Compensation of five highest-pa  | u ei            | Inployees (other than t   |   | Contributions to  | ile, eliter NONE.                     |
| (a)<br>Name and address of each employee pa<br>more than \$50,000                                      | ııd             | Title, and average hours per week (b) devoted to position             | (c) Compensation                                    | employee benefit plans and deferred (d) compensation                  | Expense account, (e) other allowances |
| NONE   |                 |   |   |   |                                       |
|  |                 | ]   |   |   |                                       |
|  |                 |   |   |   |                                       |
|  |                 | ]   |   |   |                                       |
|  |                 |   |   |   |                                       |
|  |                 | 1   |   |   |                                       |
|  |                 |   |   |   |                                       |
|  |                 | 1   |   |   |                                       |
|  |                 |   |   |   |                                       |
|  |                 | 1   |   |   |                                       |
| Total number of other employees paid over  | er \$5          | 0,000   |   | •   | 0                                     |
| 3 Five highest-paid independent co   |                 |   |   |   |                                       |
| (a) Name and address of each person  |                 |   |   | e of service  | (c) Compensation                      |
| NONE   |                 |   | (-7.7)  |   | (-,                                   |
|  |                 |   | -   |   |                                       |
|  |                 |   |   |   |                                       |
|  |                 |   |   |   |                                       |
|  |                 |   |   |   |                                       |
|  |                 |   | -   |   |                                       |
|  |                 |   |   |   |                                       |
|  |                 |   | _   |   |                                       |
|  |                 |   |   |   |                                       |
|  |                 |   | -   |   |                                       |
| Total number of others recovers ever #EC   |                 | for professional convises   |   |   |                                       |
| Total number of others receiving over \$50   |                 |   | <u> </u>  | · · · · · · · · · · · · · · · · · · ·                                 |                                       |
| Part IX-A Summary of Direct (  |                 |   |   |   |                                       |
| List the foundation's four largest direct charitable organizations and other beneficiaries served, con | activ<br>ferend | ities during the tax year. Inci<br>ces convened, research paper       | ude relevant statistical inform<br>'s produced, etc | nation such as the number of  | Expenses                              |
| <b>1</b> NONE IN 2017  |                 | · · · · · ·   | · · · · · · · · · · · · · · · · · · ·               |   | 0                                     |
| 2  |                 |   |   |   |                                       |
|  |                 |   |   |   |                                       |
| -  |                 |   |   |   |                                       |
| 3  |                 |   |   |   |                                       |
| -  |                 |   |   |   |                                       |
|  |                 |   |   |   |                                       |
| 4  |                 |   |   |   |                                       |
| ·  |                 |   |   |   |                                       |
|  |                 |   |   |   |                                       |
|  |                 | .1  |   |   |                                       |
| Part IX-B Summary of Program   |                 |   |   |   |                                       |
| Describe the two largest program-related inve  | stme            | nts made by the foundation d  | uring the tax year on lines 1                       | and 2   | Amount                                |
| 1  |                 |   |   |   |                                       |
|  |                 |   |   |   |                                       |
|  |                 |   |   |   |                                       |
| 2  |                 |   |   |   |                                       |
|  |                 |   |   |   |                                       |
|  |                 |   |   |   |                                       |
| All other program-related investments  | See             | Instructions  |   |   |                                       |
| 3  |                 |   |   |   |                                       |
|  |                 |   |   |   |                                       |
|  |                 |   |   |   |                                       |
| Total. Add lines 1 through 3 .   |                 |   |   |   | C                                     |
|  |                 |   |   |   | F 000 DE (2017)                       |

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

1a

1b

2

3a 3h

4

5

8,064,000

8.064.000

8.064.000

Form **990-PF** (2017)

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

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. . . . . . . . . .

Amounts set aside for specific charitable projects that satisfy the

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

2

3

4

5

1,404,939

1.404.939

Form 990-PF (2017)

0

Page 9

c From 2014. . .

d From 2015. . . . .

e From 2016. . . . .

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

e Remaining amount distributed out of corpus

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

6 Enter the net total of each column as

indicated below:

**5** Excess distributions carryover applied to 2017

a Corpus Add lines 3f, 4c, and 4e Subtract line 5 **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 instructions . . . . . . f Undistributed income for 2017 Subtract lines 4d and 5 from line 1. This amount must be distributed in 2018 . . . . . 7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions) . . . . . . . . . 8 Excess distributions carryover from 2012 not

applied on line 5 or line 7 (see instructions) . . .

Subtract lines 7 and 8 from line 6a . . . . . .

9 Excess distributions carryover to 2018.

10 Analysis of line 9

a Excess from 2013. . .

c Excess from 2015. . . .

d Excess from 2016. . . e Excess from 2017. . .

**b** Excess from 2014. .

same amount must be shown in column (a) )

1 Distributable amount for 2017 from Part XI, line 7 2 Undistributed income, if any, as of the end of 2017 a Enter amount for 2016 only. . . . . . **b** Total for prior years

Excess distributions carryover, if any, to 2017 From 2012. . . . .

3.871.014 **b** From 2013. . . . .

3,368,134 13.899.348 9.020.279 (a)

Corpus

35.933.765

6,659,061

42,592,826

3.871.014

38,721,812

0

(b)

Years prior to 2016

(c)

2016

5,774,990

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

XII, line 4 > \$ 8,064,000 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. . . .

3.368.134 13,899,348

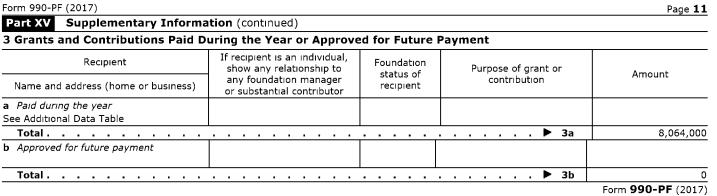
9.020.279

5,774,990

6.659.061

d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other

factors NONE



| Enter gross amounts unless otherwise indicated            |  | Unrelated business income               |                                    | Excluded by section              | (e)<br>Related or exempt |  |
|---|--|---|------------------------------------|----------------------------------|--------------------------|--|
| _   | service revenue  | (a)<br>Business code                    | <b>(b)</b><br>Amount               | (c)<br>Exclusion code            | <b>(d)</b><br>Amount     | function income<br>(See instructions ) |
|   |  |   |                                    |                                  |                          |  |
|   |  |   |                                    |                                  |                          |  |
|   |  |   |                                    |                                  |                          |  |
| е   | <u> </u>   |   |                                    |                                  |                          |  |
|   |  |   |                                    |                                  |                          |  |
| _   | and contracts from government agencies   |   |                                    |                                  |                          |  |
| Intere  | rship dues and assessments   |   |                                    | 14                               | 142,587                  |  |
|   | ds and interest from securities  |   |                                    | 14                               | 277,951                  |  |
| Net ren   | tal income or (loss) from real estate  |   |                                    |                                  |                          |  |
|   | financed property  |   |                                    |                                  |                          |  |
|   | ebt-financed property  |   |                                    |                                  |                          |  |
|   | ntal income or (loss) from personal property   |   |                                    |                                  |                          |  |
|   | r (loss) from sales of assets other than   |   |                                    |                                  |                          |  |
|   | ory  |   |                                    | 18                               | 66,979                   |  |
|   | ome or (loss) from special events  |   |                                    |                                  |                          |  |
|   | rofit or (loss) from sales of inventory  |   |                                    |                                  |                          |  |
|   | evenue <b>a</b>  |   |                                    |                                  |                          |  |
|   |  |   |                                    |                                  |                          |  |
|   |  | <b>—</b>                                |                                    |                                  |                          |  |
| d   |  |   |                                    |                                  |                          |  |
|   |  |   |                                    |                                  |                          |  |
| e   |  |   | 0                                  |                                  | 487,517                  |  |
| e<br>Subtota<br>Total.                                    | al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e)  |   | 0                                  | 13                               | 487,517                  |  |
| e<br>Subtota<br>Total. (See wo                            |  | lations )                               |                                    |                                  | <u> </u>                 | 487,517                                |
| e<br>Subtota<br>Total. ,<br>(See wo                       | Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  Adstructions to verify calcul   | lations ) e Accomplish income is report | ment of Exempled in column (e) of  | pt Purposes Part XVI-A contribut | Bted importantly to      |  |
| e<br>Subtota<br>Total. (See wo<br>art XVI                 | al Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  orksheet in line 13 instructions to verify calcul  B Relationship of Activities to th  Explain below how each activity for which the accomplishment of the foundation's ex | lations ) e Accomplish income is report | ment of Exempled in column (e) of  | pt Purposes Part XVI-A contribut | Bted importantly to      |  |
| e<br>Subtota<br>Total. /<br>(See wo<br>art XVI<br>ine No. | al Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  orksheet in line 13 instructions to verify calcul  B Relationship of Activities to th  Explain below how each activity for which the accomplishment of the foundation's ex | lations ) e Accomplish income is report | ment of Exempled in column (e) of  | pt Purposes Part XVI-A contribut | Bted importantly to      |  |
| e<br>Subtota<br>Total. /<br>(See wo<br>art XVI<br>ine No. | al Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  orksheet in line 13 instructions to verify calcul  B Relationship of Activities to th  Explain below how each activity for which the accomplishment of the foundation's ex | lations ) e Accomplish income is report | ment of Exempled in column (e) of  | pt Purposes Part XVI-A contribut | Bted importantly to      |  |
| e<br>Subtota<br>Total. (See wo<br>art XVI                 | al Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  orksheet in line 13 instructions to verify calcul  B Relationship of Activities to th  Explain below how each activity for which the accomplishment of the foundation's ex | lations ) e Accomplish income is report | ment of Exempled in column (e) of  | pt Purposes Part XVI-A contribut | Bted importantly to      |  |
| e<br>Subtota<br>Total. /<br>(See wo<br>art XVI<br>ine No. | al Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  orksheet in line 13 instructions to verify calcul  B Relationship of Activities to th  Explain below how each activity for which the accomplishment of the foundation's ex | lations ) e Accomplish income is report | ment of Exempled in column (e) of  | pt Purposes Part XVI-A contribut | Bted importantly to      |  |
| e<br>Subtota<br>Total. /<br>(See wo<br>art XVI<br>ine No. | al Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  orksheet in line 13 instructions to verify calcul  B Relationship of Activities to th  Explain below how each activity for which the accomplishment of the foundation's ex | lations ) e Accomplish income is report | iment of Exempled in column (e) of | pt Purposes Part XVI-A contribut | Bted importantly to      |  |
| eSubtota Total. , (See wo art XVI                         | al Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  orksheet in line 13 instructions to verify calcul  B Relationship of Activities to th  Explain below how each activity for which the accomplishment of the foundation's ex | lations ) e Accomplish income is report | iment of Exempled in column (e) of | pt Purposes Part XVI-A contribut | Bted importantly to      |  |
| eSubtota Total. , (See wo art XVI                         | al Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  orksheet in line 13 instructions to verify calcul  B Relationship of Activities to th  Explain below how each activity for which the accomplishment of the foundation's ex | lations ) e Accomplish income is report | iment of Exempled in column (e) of | pt Purposes Part XVI-A contribut | Bted importantly to      |  |
| eSubtota Total. , (See wo art XVI                         | al Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  orksheet in line 13 instructions to verify calcul  B Relationship of Activities to th  Explain below how each activity for which the accomplishment of the foundation's ex | lations ) e Accomplish income is report | iment of Exempled in column (e) of | pt Purposes Part XVI-A contribut | Bted importantly to      |  |
| eSubtota Total. , (See wo art XVI                         | al Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  orksheet in line 13 instructions to verify calcul  B Relationship of Activities to th  Explain below how each activity for which the accomplishment of the foundation's ex | lations ) e Accomplish income is report | iment of Exempled in column (e) of | pt Purposes Part XVI-A contribut | Bted importantly to      |  |
| eSubtota Total. , (See wo art XVI                         | al Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  orksheet in line 13 instructions to verify calcul  B Relationship of Activities to th  Explain below how each activity for which the accomplishment of the foundation's ex | lations ) e Accomplish income is report | iment of Exempled in column (e) of | pt Purposes Part XVI-A contribut | Bted importantly to      |  |
| eSubtota Total. , (See wo art XVI                         | al Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  orksheet in line 13 instructions to verify calcul  B Relationship of Activities to th  Explain below how each activity for which the accomplishment of the foundation's ex | lations ) e Accomplish income is report | iment of Exempled in column (e) of | pt Purposes Part XVI-A contribut | Bted importantly to      |  |
| eSubtota Total. (See wo                                   | al Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  orksheet in line 13 instructions to verify calcul  B Relationship of Activities to th  Explain below how each activity for which the accomplishment of the foundation's ex | lations ) e Accomplish income is report | iment of Exempled in column (e) of | pt Purposes Part XVI-A contribut | Bted importantly to      |  |
| eSubtota Total. (See wo                                   | al Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  orksheet in line 13 instructions to verify calcul  B Relationship of Activities to th  Explain below how each activity for which the accomplishment of the foundation's ex | lations ) e Accomplish income is report | iment of Exempled in column (e) of | pt Purposes Part XVI-A contribut | Bted importantly to      |  |
| eSubtota Total. , (See wo art XVI                         | al Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  orksheet in line 13 instructions to verify calcul  B Relationship of Activities to th  Explain below how each activity for which the accomplishment of the foundation's ex | lations ) e Accomplish income is report | iment of Exempled in column (e) of | pt Purposes Part XVI-A contribut | Bted importantly to      |  |
| eSubtota Total. , (See wo art XVI                         | al Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  orksheet in line 13 instructions to verify calcul  B Relationship of Activities to th  Explain below how each activity for which the accomplishment of the foundation's ex | lations ) e Accomplish income is report | ment of Exempled in column (e) of  | pt Purposes Part XVI-A contribut | Bted importantly to      |  |
| eSubtota Total. (See wo                                   | al Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  orksheet in line 13 instructions to verify calcul  B Relationship of Activities to th  Explain below how each activity for which the accomplishment of the foundation's ex | lations ) e Accomplish income is report | ment of Exempled in column (e) of  | pt Purposes Part XVI-A contribut | Bted importantly to      |  |
| eSubtota Total. (See wo                                   | al Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  orksheet in line 13 instructions to verify calcul  B Relationship of Activities to th  Explain below how each activity for which the accomplishment of the foundation's ex | lations ) e Accomplish income is report | ment of Exempled in column (e) of  | pt Purposes Part XVI-A contribut | Bted importantly to      |  |
| eSubtota Total. , (See wo art XVI                         | al Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  orksheet in line 13 instructions to verify calcul  B Relationship of Activities to th  Explain below how each activity for which the accomplishment of the foundation's ex | lations ) e Accomplish income is report | ment of Exempled in column (e) of  | pt Purposes Part XVI-A contribut | Bted importantly to      |  |
| e<br>Subtota<br>Total. (See wo<br>art XVI                 | al Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  orksheet in line 13 instructions to verify calcul  B Relationship of Activities to th  Explain below how each activity for which the accomplishment of the foundation's ex | lations ) e Accomplish income is report | ment of Exempled in column (e) of  | pt Purposes Part XVI-A contribut | Bted importantly to      |  |

| orm 9        | 90-PF (2           | 2017)  |                              |                   |  |  |   |                | Pa      | ge <b>13</b> |
|--------------|--------------------|--|------------------------------|-------------------|--|--|---|----------------|---------|--------------|
| Part         | XVII               | Information Re<br>Exempt Organiz   |                              | ransfers To a     | and Transactio                         | ns and Rel                                   | ationships With Nonchari  | table          |         |              |
|              |                    | anization directly or inc<br>Code (other than sectio   |                              |                   |  |  | ization described in section 501 itical organizations?  |                | Yes     | No           |
| <b>a</b> Tra | nsfers f           | rom the reporting foun   | dation to a n                | oncharitable ex   | empt organization                      | of   |   |                |         |              |
| (1)          | Cash.              |  |                              |                   |  |  |   | 1a(1)          |         | No           |
| (2)          | Other              | assets   |                              |                   |  |  |   | 1a(2)          |         | No           |
| <b>b</b> Oth | er trans           | sactions   |                              |                   |  |  |   |                |         | ĺ            |
|              |                    | of assets to a nonchari  |                              | -                 |  |  |   | 1b(1)          |         | No           |
| (2)          | Purcha             | ases of assets from a n  | oncharitable                 | exempt organiz    | zation                                 |  |   | 1b(2)          |         | No           |
| (3)          | Renta              | l of facilities, equipmen  | it, or other a               | ssets             |  |  |   | 1b(3)          |         | No           |
| (4)          | Reimb              | ursement arrangemen  | ts                           |                   |  |  |   | 1b(4)          |         | No           |
| (5)          | Loans              | or loan guarantees.  |                              |                   |  |  |   | 1b(5)          |         | No           |
| (6)          | Perforr            | mance of services or m   | embership oi                 | r fundraising sol | licitations                            |  |   | 1b(6)          |         | No           |
|              | _                  |  | -                            |                   |  |  |   | 1c             |         | No           |
| of t         | he good<br>ny tran | ls, other assets, or serv  | vices given b<br>ngement, sh | y the reporting   | foundation If the  i) the value of the | foundation re<br>goods, other                | eceived less than fair market valu<br>assets, or services received<br>ion of transfers, transactions, and sha   | e              | agomon  | ıte          |
| (a) Lille    | INO                | (b) Amount involved  | (C) Name of                  | nonchantable exe  | inpl organization                      | (u) Descript                                 | ion or cransiers, cransactions, and sha   | illig allai    | igemen  | LS           |
|              |                    |  |                              |                   |  |  |   |                |         |              |
|              |                    |  |                              |                   |  |  |   |                |         |              |
|              |                    |  |                              |                   |  |  |   |                |         |              |
|              |                    |  |                              |                   |  |  |   |                |         |              |
|              |                    |  |                              |                   |  |  |   |                |         |              |
|              |                    |  |                              |                   |  |  |   |                |         |              |
|              |                    |  |                              |                   |  |  |   |                |         |              |
|              |                    |  |                              |                   |  |  |   |                |         |              |
|              |                    |  |                              |                   |  |  |   |                |         |              |
|              |                    |  |                              |                   |  |  |   |                |         |              |
|              |                    |  |                              |                   |  |  |   |                |         |              |
|              |                    |  |                              |                   |  |  |   |                |         |              |
|              |                    |  |                              |                   |  |  |   |                |         |              |
|              |                    |  |                              |                   |  |  |   |                |         |              |
| des          | cribed ii          | dation directly or indire<br>n section 501(c) of the<br>mplete the following so<br>(a) Name of organizatio | Code (other                  | than section 50   | •                                      | tion 527?                                    | •   | Yes            | ✓       | No           |
|              |                    |  |                              |                   |  |  |   |                |         |              |
|              |                    |  |                              |                   |  |  |   |                |         |              |
|              |                    |  |                              |                   |  |  |   |                |         |              |
|              |                    |  |                              |                   |  |  |   |                |         |              |
|              | of my              |  | , it is true, co             |                   |  |  | panying schedules and statemen<br>other than taxpayer) is based on  |                |         |              |
| Sign<br>Here | -                  | *****  Ignature of officer or to   | rustee                       |                   | 2018-04-30                             | <b>\rightarrow</b> \frac{****}{\text{Title}} | returr vitalism returr vitalism returr vitalism | he prepar<br>_ | er show | vn           |
|              |                    | .gacar   |                              |                   |  | 1100   | (see ı  | nstr )?        | ∠ Yes   | ⊣ No         |
|              |                    | Print/Type preparer's  | name                         | Preparer's Sigi   | nature                                 | Date   | Check if self-<br>employed ▶ □  | P00064         | 881     |              |

GARY KRAMER Paid **Preparer** Firm's name ► KRAMER & OLSEN ACCOUNTANCY CORP Firm's EIN ▶95-3417301 **Use Only** Firm's address ▶ 2010 N TUSTIN AVE Phone no (714) 558-3236 SANTA ANA,

| CA 92705 |
|----------|
|----------|

| Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment |   |                         |  |        |  |  |  |
|--|---|-------------------------|--|--------|--|--|--|
| Recipient  | If recipient is an individual, show any relationship to | Foundation<br>status of | Purpose of grant or contribution   | Amount |  |  |  |
| Name and address (home or business)  | any foundation manager<br>or substantial contributor    | recipient               |  |        |  |  |  |
| a Paid during the year   |   |                         |  |        |  |  |  |
| AMERICAN FRIENDS OF JEWISH<br>STATESMANSHIP CENTER INC<br>82 EDGEMONT PLACE<br>TEANECK, NJ 07666         | NONE  | NON-PROFIT              | TO FUND AND MAKE GRANTS TO<br>EDUCATIONAL PROGRAMS ON<br>GLOBAL ISSUES                   | 25,000 |  |  |  |
| AMERICAN FRIENDS OF DENTAL<br>VOLUNTEERS FOR ISRAEL<br>PO BOX 127<br>NEW YORK, NY 10185                  | NONE  | NON-PROFIT              | TO PREVENT THE UNDERPRIVILEGED CHILDREN OF JERUSALEM FROM SUFFERING DENTAL PAIN          | 25,000 |  |  |  |
| AMERICAN FRIENDS OF JORDAN RIVER<br>VILLAGE FOUNDATION<br>111 CLEARVIEW LANE<br>NEW CANAAN, CT 06840     | NONE  | NON-PROFIT              | TO PROVIDE SUPPORT TO A CAMP THAT SERVES CHILDREN WITH SERIOUS ILLNESSES IN ISRAEL       | 15,000 |  |  |  |
| AMERICAN FRIENDS OF THE SHEMAYA<br>SCHOOL FOR DEAF CHILDREN<br>863 E 26TH STREET<br>BROOKLYN, NY 11210   | NONE  | NON-PROFIT              | TO PROVIDE FUNDING OF<br>EDUCATIONAL PROGRAMS AND<br>SCHOOLS FOR THE HEARING<br>IMPAIRED | 5,000  |  |  |  |
|  |   |                         |  |        |  |  |  |

NONE NON-PROFIT TO HELP WOUNDED SOLDIERS 50,000 FIND SUPPORT AND

ALL HANDS ISRAEL INC 7234 N GREEN BAY RD STE 203 REHABILITATION

GLENDALE, WI 53209 8,064,000

Total .

| orm 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment |   |                         |  |           |  |  |  |
|---|---|-------------------------|--|-----------|--|--|--|
| Recipient   | If recipient is an individual, show any relationship to | Foundation<br>status of | Purpose of grant or contribution   | Amount    |  |  |  |
| Name and address (home or business)   | any foundation manager<br>or substantial contributor    | recipient               |  |           |  |  |  |
| a Paid during the year  |   | <u> </u>                |  |           |  |  |  |
| AMERICAN FRIENDS OF YESHIVAT<br>HESDER SDEROT<br>280 NORTHERN BOULEVARD<br>GREAT NECK, NY 11021         | NONE  | NON-PROFIT              | TO FURNISH FINANCIAL SUPPORT TO EDUCATIONAL INSTITUTIONS, COMMUNITY PROJECTS AND SCHOLARSHIPS          | 36,000    |  |  |  |
| AMERICAN FRIENDS FOR CHILDREN<br>CRIB INC<br>995 NW 119 STREET UNIT 0027<br>MIAMI, FL 33168             | NONE  | NON-PROFIT              | TO ENCOURAGE HEALTHY LIFESTYLES THROUGH PROGRAMS IN EDUCATION, HEALTHCARE, HOUSING, JOB PLACEMENT, ETC | 50,000    |  |  |  |
| AMERICAN FRIENDS OF NETZER<br>CHAZANI INC<br>P O BOX 268<br>CEDARHURST, NY 11516                        | NONE  | NON-PROFIT              | TO RAISE FUNDS FOR CONSTRUTCION PURPOSES & PROVIDE HUMANITARIAN AID FOR DISPLACED RESIDENTS            | 50,000    |  |  |  |
| AMERICAN FRIENDS OF THE BEL EL<br>YESHIVA CENTER<br>6827 JUNO STREET<br>FOREST HILLS, NY 11375          | NONE  | NON-PROFIT              | AIDS THE STUDENTS, FACULTY<br>AND ADMINISTRATION OF BET<br>EL YESHIVA                                  | 500,000   |  |  |  |
| AMERICAN FRIENDS OF MERCAZ HARAV<br>KOOK<br>870 E 27TH ST<br>BROOKLYN, NY 11210                         | NONE  | NON-PROFIT              | TO PROMOTE THE PHILOSOPHY<br>AND TEACHINGS OF RABBI<br>ABRAHAM Y KOOK                                  | 100,000   |  |  |  |
| Total   |   |                         |  | 8,064,000 |  |  |  |

## 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 AMERICAN FRIENDS OF SHAVEI ISRAEL NONE NON-PROFIT TO PROMOTE & SUPPORT THE 25,000 1 ROCKEFELLER PLZ RM 1430 JEWISH PEOPLE BY PROVIDING NEW YORK, NY 10020 FINANCIAL SUPPORT TO JEWISH CHARITABLE ORGANIZATIONS NONE NON-PROFIT 25,000 AMERICANS FOR A SAFE ISRAEL **EDUCATION FOR MEMBERS &** 1751 2ND AVE GENERAL PUBLIC REGARDING NEW YORK, NY 10128 AMERICAN FOREIGN POLICY BY **EDUCATION & CONFERENCES** NONE AMERICAN FRIENDS OF ATERET NON-PROFIT TO PROMOTE & PUBLICIZE IN 50,000 .000

| 248 WEST 35TH ST 406<br>NEW YORK, NY 10001   |      |            | ACTIVITIES OF THE ATERET COHANIM         |        |
|--|------|------------|--|--------|
| CONFERENCE OF CHRISTIAN PASTORS<br>& MINISTERS INC<br>PO BOX 680027<br>MIAMI, FL 33168 | NONE | NON-PROFIT | SUPPORTS FAMILY<br>COUNSELING            | 20,000 |
| CHILREN'S HOME SOCIETY 482 S KELLER RD NO 3RD FL ORLANDO FL 32810                      | NONE | NON-PROFIT | PROVIDES SHELTER, GROUP & FOSTOER HOMES, | 5,000  |

| MIAMI, FL 33168  |      |            |  |     |
|--|------|------------|--|-----|
| CHILREN'S HOME SOCIETY<br>482 S KELLER RD NO 3RD FL<br>ORLANDO, FL 32810 | NONE | NON-PROFIT | PROVIDES SHELTER, GROUP & FOSTOER HOMES, TRANSITIONAL LIVING, COUNSELING FOR CHILDREN AT RISK OF ABUSE & NEGLECT | 5,0 |
|  |      |            | ·  |     |

8,064,000

Total .

| Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment |   |                         |   |        |
|--|---|-------------------------|---|--------|
| Recipient  | If recipient is an individual, show any relationship to | Foundation<br>status of | Purpose of grant or contribution  | Amount |
| Name and address (home or business)  | any foundation manager<br>or substantial contributor    | recipient               |   |        |
| a Paid during the year   |   |                         |   |        |
| BATYA FRIENDS OF UNITED HATZALAH<br>208 EAST 51ST STREET SUITE 303<br>NEW YORK, NY 10022                 | NONE  | NON-PROFIT              | TO SUPPORT THE LIFESAVING<br>ACTIVITIES OF UNITED<br>HATZALAH, FOR VOLUNTEER<br>EMERGENCY RESPONSE<br>ORGANIZATIONS IN ISRAEL | 75,000 |
| FRIENDS OF NIR KIRYAT ARBA<br>132 NASSAU STREET SUITE 300<br>NEW YORK, NY 10038                          | NONE  | NON-PROFIT              | TO PROMOTE THE STUDY OF TORAH   | 25,000 |
| GERSHON JACOBSON JEWISH<br>CONTINUITY FOUNDATION<br>508 MONTGOMERY STREET<br>BROOKLYN, NY 11225          | NONE  | NON-PROFIT              | SERVES TO FIGHT AGAINST<br>JEWISH IGNORANCE, APATHY<br>AND DIVISIVENESS   | 2,500  |
| GIFT OF LIFE BONE MARROW<br>800 YAMATO ROAD NO 101<br>BOCA RATON, FL 33431                               | NONE  | NON-PROFIT              | FACILITATES MARROW & STEM<br>CELL TRANSPLANTS FOR<br>CHILDREN & ADULTS SUFFERING<br>FROM LEUKEMIA & LYMPHOMA                  | 25,000 |
|  |   |                         |   |        |

NONE NON-PROFIT HELPING TO SAVE 50,000

HELP US SAVE THE YOUTHS INC

315 NE 125TH ST DISADVANTAGED YOUTH

(THERAPY PROGRAM)

NORTH MIAMI, FL 33161 8,064,000

Total .

| Form 990PF Part XV Line 3 - Gran  | ts and Contributions Paid                               | During the              | Year or Approved for Future  | Payment   |
|---|---|-------------------------|--|-----------|
| Recipient   | If recipient is an individual, show any relationship to | Foundation<br>status of | Purpose of grant or contribution   | Amount    |
| Name and address (home or business)   | any foundation manager<br>or substantial contributor    | recipient               |  |           |
| a Paid during the year  |   |                         |  |           |
| ISRAEL AMERICA FOUNDATION INC<br>108 WEST 39TH STREET 1001<br>NEW YORK, NY 10018              | NONE  | NON-PROFIT              | SOLICITATION FOR SEVEN<br>ISRAEL NON PROFIT<br>ORGANIZATIONS   | 10,000    |
| JEWISH COMMUNITY SERVICES OF<br>SOUTH FLORIDA<br>735 NE 125TH STREET<br>NORTH MIAMI, FL 33161 | NONE  | NON-PROFIT              | PROVIDES SOCIAL SERVICES ON<br>BEHALF OF THE JEWISH<br>COMMUNITY TO PROMOTE<br>EQUALITY OF LIFE  | 20,000    |
| AMERICAN FRIENDS OF YESHIVA<br>SHAVEI HEVRON<br>11134 CROSS CORNER RD<br>ASHLAND, VA 23005    | NONE  | NON-PROFIT              | RELIGIOUS & EDUCATIONAL  | 350,000   |
| HATIKVAH EDUCATION FOUNDATION<br>INC<br>6300 WEST LOOP S STE 100<br>BELLAIRE, TX 77401        | NONE  | NON-PROFIT              | TO CHALLENGE CONVENTIONAL<br>WISDOM AMONG ISRAELI &<br>AMERICAN LEADERS & THE<br>PUBLIC AT LARGE ON CRITICAL<br>NATIONAL SECURITY ISSUES | 150,000   |
| AMERICAN FRIENDS OF LEKET ISRAEL<br>PO BOX 2090<br>TEANECK, NJ 07666                          | NONE  | NON-PROFIT              | TO PROVIDE GRANTS & ASSISTANCE TO EXEMPT ORGANIZATIONS OUTSIDE OF THE U S THAT FEED THE HUNGRY   | 10,000    |
| Total   |   |                         |  | 8,064,000 |

| Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment |   |                         |   |           |
|--|---|-------------------------|---|-----------|
| Recipient  | If recipient is an individual, show any relationship to | Foundation<br>status of | Purpose of grant or contribution  | Amount    |
| Name and address (home or business)  | any foundation manager<br>or substantial contributor    | recipient               |   |           |
| a Paid during the year   |   |                         |   |           |
| MA'ALE ADUMIM FOUNDATION INC<br>1430 BROADWAY NO 1804<br>NEW YORK, NY 10018                              | NONE  | NON-PROFIT              | DEDICATED TO RAISE FUNDS<br>FOR SCHOLARSHIPS, BUILDING<br>OF LIBRARY AND FOOD FOR THE<br>UNDERPRIVELEGED                              | 75,000    |
| MASORET YEHUDIT<br>640 E HALLANDALE BEACH BLVD<br>HALLANDALE BCH, FL 33009                               | NONE  | NON-PROFIT              | TO PROVIDE CHILDREN & THEIR PARENTS WITH AN ORTHODOX SEPHARDIC DAY SCHOOL WITH A COMPREHENSIVE CURRICULUM IN JEWISH & SECULAR STUDIES | 25,000    |
| NORTH MIAMI LEARNING CENTER INC<br>301 NE 125TH ST<br>N MIAMI, FL 33161                                  | NONE  | NON-PROFIT              | PRESCHOOL FOR AGES 6 WEEKS<br>TO 5 YEARS  | 25,000    |
| SHILOH CENTER1118 WEST BEAVER ST<br>JACKSONVILLE, FL 32204   | NONE  | NON-PROFIT              | TO SERVE THE COMMUNITY VIA<br>ADULT EDUCATION, BIBLE<br>STUDY FELLOWSHIP,<br>BENEVOLENCE, MISSIONS &<br>COMMUNITY RESOURCES           | 25,000    |
| CENTRAL FUND OF ISRAEL   | NONE  | NON-PROFIT              | PROMOTING CHARITABLE  | 3.617.000 |

| N MIAMI, FL 33161  |      |            |   |  |
|--|------|------------|---|--|
| SHILOH CENTER1118 WEST BEAVER ST<br>JACKSONVILLE, FL 32204 | NONE | NON-PROFIT | TO SERVE THE COMMUNITY VIA<br>ADULT EDUCATION, BIBLE<br>STUDY FELLOWSHIP,<br>BENEVOLENCE, MISSIONS &<br>COMMUNITY RESOURCES |  |

| JACKSONVILLE, FL 32204 |      |            | STUDY FELLOWSHIP, BENEVOLENCE, MISSIONS & COMMUNITY RESOURCES |
|------------------------|------|------------|---|
| CENTRAL FUND OF ISRAEL | NONE | NON-PROFIT | PROMOTING CHARITABLE  |

|                        |  | BENEVOLENCE, MISSIONS & COMMUNITY RESOURCES |  |
|------------------------|--|---|--|
|                        |  | BENEVOLENCE, MISSIONS &                     |  |
|                        |  | STUDY FELLOWSHIP,                           |  |
| JACKSONVILLE, FL 32204 |  | ADULT EDUCATION, BIBLE                      |  |

| NTRAL FUND OF ISRAEL<br>0 AVE OF THE AMERICAS 3RD FL | NONE | NON-PROFIT | PROMOTING CHARITABLE<br>ACTIVITIES IN ISRAEL | 3,61 |
|--|------|------------|--|------|
|  |      |            |  |      |

| CENTRAL FUND OF ISRAEL         | NONE | NON-PROFIT | PROMOTING CHARITABLE | 3,617,00 |
|--------------------------------|------|------------|----------------------|----------|
| 980 AVE OF THE AMERICAS 3RD FL |      |            | ACTIVITIES IN ISRAEL |          |
| NEW YORK, NY 10018             |      |            |                      |          |

| EW YORK, NY 10018 | ACTIVITIES IN ISTALE |           |
|-------------------|----------------------|-----------|
| Total             | <br>                 | 8,064,000 |

## 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 CHABAD HOUSE IN MIAMI BEACH NONE NON-PROFIT **RELIGIOUS INSTITUTION** 500 21001 BISCAYNE BLVD MIAMI. FL 33180 TERROR VICTIMS ASSOCIATION NONE NON-PROFIT 10,000 TO PROVIDE SUPPORT TO 1225 OCEAN PARKWAY VICTIMS OF TERRORISM BROOKLYN, NY 11230 THE ALEH FOUNDATIONPO BOX 4911 NONE NON-PROFIT PROVIDES SUPPORT TO 50,000 NEW YORK, NY 10185 REHABILITATIVE CENTERS IN ISRAEL TO PROVIDE SUPPORT FOR REHABILITATIVE CENTER IN

|   |      |            | ISKAEL  |        |
|---|------|------------|---|--------|
| THE COORDINATING COUNCIL 4 THE<br>JEWISH HOMELAND<br>567 CEDARHILL ROAD<br>FAR ROCKAWAY, NY 11691 | NONE | NON-PROFIT | TO KEEP THE COUNTRY OF ISRAEL WHOLE AND PROTECTED & TO ACTIVATE THE COMMUNITY TO MAINTAIN JEWISH TRADITIONS IN ISRAEL | 50,000 |
| THE INVESTIGATIVE PROJECT ON TERRORISM 5614 CONNECTICUT AVE NW 341 WASHINGTON, DC 20015           | NONE | NON-PROFIT | TO RESEARCH & EXPOSE THE ACTIVITIES OF TERRORIST NETWORKS & SUPPORTERS IN THE U S & EDUCATE THE                       | 50,000 |

PUBLIC ABOUT THIS THREAT

Total . 8,064,000 За

| Form 990PF Part XV Line 3 - Gran  | Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment |                         |   |           |
|---|--|-------------------------|---|-----------|
| Recipient   | If recipient is an individual, show any relationship to  | Foundation<br>status of | Purpose of grant or contribution  | Amount    |
| Name and address (home or business)                                     | any foundation manager<br>or substantial contributor   | recipient               |   |           |
| a Paid during the year  |  |                         |   |           |
| UNITED PENTACOSTAL CHURCH<br>10248 ALONDRA BLVD<br>BELLFLOWER, CA 90706 | NONE   | NON-PROFIT              | RELIGIOUS INSTITUTION   | 25,000    |
| YAD EZRA V'SHULAMIT<br>3470 WILSHIRE BLVD<br>LOS ANGELES, CA 90010      | NONE   | NON-PROFIT              | PROVIDES GRANTS TO ISRALI<br>NON-PROFIT ORGANIZATIONS<br>DEALING WITH FEEDING THE<br>HUNGRY AND AT RISK YOUTH | 30,000    |
| JUST ONE LIFE<br>275 MADISON AVENUE 30TH LF<br>NEW YORK, NY 10016       | NONE   | NON-PROFIT              | FAMILY SUPPORT AND COUNSELING   | 5,000     |
| YISMACH MOSHA INC<br>6404 WILSHIRE BLVD<br>LOS ANGELES, CA 90048        | NONE   | NON-PROFIT              | PROVIDES FOOD, CLOTHING,<br>SHOES & OTHER NECESSITIES<br>FOR WIDOWS, ORPHANS &<br>NEEDY FAMILIES IN ISRAEL    | 500       |
| FRIENDS OF ITAMAR1483 E 34TH ST<br>BROOKLYN, NY 11234                   | NONE   | NON-PROFIT              | ORGANIZED TO SUPPORT<br>CHARITABLE ACTIVITIES IN THE<br>TOWN OF ITAMAR, ISRAEL                                | 100,000   |
| Total   |  |                         |   | 8,064,000 |

| orm 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment |   |                         |  |         |
|---|---|-------------------------|--|---------|
| Recipient   | If recipient is an individual, show any relationship to | Foundation<br>status of | Purpose of grant or contribution   | Amount  |
| Name and address (home or business)   | any foundation manager<br>or substantial contributor    | recipient               |  |         |
| a Paid during the year  |   |                         |  |         |
| GENERATIONS OF ISRAEL<br>1765 E 2ND ST<br>BROOKLYN, NY 11223  | NONE  | NON-PROFIT              | MEDICAL FACILITY   | 100,000 |
| SHILOH ALL FAMILY EMPOWERMENT<br>INC<br>PO BOX 680027<br>MIAMI, FL 33168                                | NONE  | NON-PROFIT              | TO ENCOURAGE HEALTHY<br>LIFESTYLES THROUGH<br>EDUCATIONAL PROGRAMS           | 50,000  |
| GIRLS TOWN OR CHADASH<br>1417 CONEY ISLAND AVE<br>BROOKLYN, NY 11230                                    | NONE  | NON-PROFIT              | EDUCATIONAL & VOCATIONAL<br>CENTER FOR GIRLS IN ISRAEL                       | 25,000  |
| HOPE FOR KIDS FOOD BANK (JUBILEE<br>ORPHANAGE)<br>PO BOX 827642<br>SOUTH FLORIDA, FL 33082              | NONE  | NON-PROFIT              | PROVIDE FOOD FOR THE<br>CHILDREN OF THE ORPHANAGE                            | 50,000  |
| HOPE FOR THE FUTURE EDUCATIONAL<br>FOUNDATION<br>12843 SPRING LAKE DR<br>FORT LAUDERDALE, FL 33330      | NONE  | NON-PROFIT              | DEDICATED TO THE EDUCATION OF UNDERPRIVILEGED CHILDREN FROM AROUND THE WORLD | 50,000  |

| ORPHANAGE) PO BOX 827642 SOUTH FLORIDA, FL 33082   | NONE | NON-PROFIT | CHILDREN OF THE ORPHANAGE  | 30,000 |
|--|------|------------|--|--------|
| HOPE FOR THE FUTURE EDUCATIONAL<br>FOUNDATION<br>12843 SPRING LAKE DR<br>FORT LAUDERDALE, FL 33330 | NONE | NON-PROFIT | DEDICATED TO THE EDUCATION OF UNDERPRIVILEGED CHILDREN FROM AROUND THE WORLD | 50,000 |

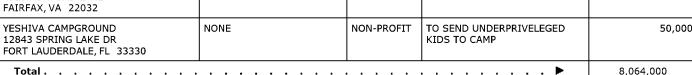
Total . 3a 8,064,000

| Form 990PF Part XV Line 3 - Gran  | ts and Contributions Paic  | During the                           | Year or Approved for Future  | Payment   |
|---|--|--------------------------------------|--|-----------|
| Recipient  Name and address (home or business)  | If recipient is an individual,<br>show any relationship to<br>any foundation manager | Foundation<br>status of<br>recipient | Purpose of grant or contribution   | Amount    |
| Name and address (nome or business)   | or substantial contributor   | ·                                    |  |           |
| a Paid during the year  |  |                                      |  |           |
| ISRAEL SPECIAL KIDS FUND<br>505 8TH AVENUE<br>NEW YORK, NY 10018                              | NONE   | NON-PROFIT                           | ASSISTS FAMILIES WITH<br>CHILDREN WITH SERIOUS<br>ILLNESS  | 10,000    |
| KULANU INC165 W END AVE APT 3R<br>NEW YORK, NY 10023  | NONE   | NON-PROFIT                           | SUPPORTS ISOLATED & EMERGING JEWISH COMMUNITIES AROUND THE WORLD   | 25,000    |
| LARGER THAN LIFE5415 35TH ST<br>LONG ISLAND, NY 11101   | NONE   | NON-PROFIT                           | OPERATES FOR THE BENEFIT OF<br>ISRAELI CHILDREN AFFLICTED<br>WITH CANCER   | 100,000   |
| MOSKOWITZ PRIZE FOR ZIONISM<br>1250 E HALLANDALE BCH BLVD STE<br>1000<br>HALLANDALE, FL 33009 | NONE   | NON-PROFIT                           | RECOGNIZE PEOPLE WHO PUT<br>ZIONISM INTO ACTION IN<br>TODAY'S ISRAELI SOCIETY,<br>ACTING FOR THE BENEFIT OF<br>THE COMMON GOOD | 488,000   |
| NATIONAL COUNCIL OF YOUNG ISRAEL<br>567 CEDARHILL ROAD<br>FAR ROCKAWAY, NY 11691              | NONE   | NON-PROFIT                           | SUPPORT OF EDUCATIONAL & RELIGIOUS INSTITUTIONS  | 67,500    |
| Total   |  |                                      |  | 8,064,000 |

| If recipient is an individual, show any relationship to | Foundation status of   | Purpose of grant or contribution   | Amount   |
|---|--|--|--|
| any foundation manager<br>or substantial contributor    | recipient  |  |  |
|   |  |  |  |
| NONE  | NON-PROFIT   | TO STUDY, ENCOURAGE,<br>STIMULATE & PROMOTE THE<br>JEWISH RELIGIOUS IDEALS OF<br>THE RETURN TO ZION IN THE<br>JEWISH CULTURE                       | 500,000  |
| NONE  | NON-PROFIT   | TO AID RELIGIOUS, CHARITABLE & EDUCATIONAL PROGRAMS & INSTITUTIONS   | 100,000  |
| NONE  | NON-PROFIT   | SUPPORTS THE WELFARE & SAFETY OF THE MEN, WOMEN & CHILDREN OF JUDEA & SAMARIA  | 535,000  |
| NONE  | NON-PROFIT   | TO PROMOTE AN UNDERSTANDING &/OR UNITY WITHIN THE CHRISTIAN & JEWISH FAITHS  | 26,000   |
| NONE  | NON-PROFIT   | TO PROVIDE FUNDING FOR ARCHEOLOGICAL RESTORATIONS IN CONJUNCTION WITH THE WESTERN WALL IN JERUSALEM  | 100,000  |
|   | show any relationship to any foundation manager or substantial contributor  NONE  NONE  NONE  NONE | show any relationship to any foundation manager or substantial contributor  NONE  NON-PROFIT  NONE  NON-PROFIT  NONE  NON-PROFIT  NONE  NON-PROFIT | show any relationship to any foundation manager or substantial contributor  NONE  NONE  NON-PROFIT  NONE  NON-PROFIT  NONE  NON-PROFIT  NONE  NON-PROFIT  NON-PROF |

3a

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 STUDENTS IN ISRAEL INC. NONE NON-PROFIT **EDUCATIONAL & RELIGIOUS** 1,000 4325 ASHEORD LANE NONE NON-PROFIT TO SEND UNDERPRIVELEGED 50,000 KIDS TO CAMP



| efile GRAPHIC print - DO NOT PROCESS | As Filed D             | ata -                    | D                      | LN: 93491129024598                          |  |  |
|--------------------------------------|------------------------|--------------------------|------------------------|---|--|--|
| TY 2017 Accounting Fees Schedule     |                        |                          |                        |   |  |  |
|                                      | : CHERNA<br>: 26-25475 | MOSKOWITZ FOUN<br>583    | NDATION                |   |  |  |
| Category An                          | nount                  | Net Investment<br>Income | Adjusted Net<br>Income | Disbursements<br>for Charitable<br>Purposes |  |  |
| ACCOUNTING                           | 55,737                 | 0                        |                        | 0   |  |  |

| TY 2017 Investments - Other Schedule |  |
|--------------------------------------|--|

Name: CHERNA MOSKOWITZ FOUNDATION

DLN: 93491129024598

EIN: 26-2547583

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

| Investments Other Schedule 2 |                       |            |                                  |  |  |  |
|------------------------------|-----------------------|------------|----------------------------------|--|--|--|
| Category/ Item               | Listed at Cost or FMV | Book Value | End of Year Fair<br>Market Value |  |  |  |
| FIDELITY INVESTMENTS         | FMV                   | 11,698,741 | 11,698,741                       |  |  |  |
| STATE OF ISRAEL              | FMV                   | 5,000,000  | 5,000,000                        |  |  |  |
| ANRECH, LTD                  | FMV                   | 3,366,000  | 3,366,000                        |  |  |  |
| CENTURIO CAPITAL             | FMV                   | 4,655,000  | 4,655,000                        |  |  |  |

| efile GRAPHIC print - DO NOT PROCESS | As Filed Data        | -                        | DLI                    | N: 93491129024598                           |
|--------------------------------------|----------------------|--------------------------|------------------------|---|
| TY 2017 Legal Fees Schedule          | е                    |                          |                        | _   |
|                                      |                      |                          |                        |   |
| Name                                 | e: CHERNA MO         | SKOWITZ FOUND            | ATION                  |   |
| EIN                                  | <b>N:</b> 26-2547583 |                          |                        |   |
| Category                             | Amount               | Net Investment<br>Income | Adjusted Net<br>Income | Disbursements<br>for Charitable<br>Purposes |
| LEGAL                                | 9,903                | 0                        |                        | 0   |

| efile GRAPHIC print - DO NOT PROCESS | As Filed Data -                      |                          | DLN:                   | 93491129024598                              |  |  |  |
|--------------------------------------|--------------------------------------|--------------------------|------------------------|---|--|--|--|
| TY 2017 Other Expenses Schedule      |                                      |                          |                        |   |  |  |  |
|                                      | CHERNA MOSK<br>26-2547583            | OWITZ FOUNDAT            | ION                    |   |  |  |  |
| Other Expenses Schedule              |                                      |                          |                        |   |  |  |  |
| Description                          | Revenue and<br>Expenses per<br>Books | Net Investment<br>Income | Adjusted Net<br>Income | Disbursements for<br>Charitable<br>Purposes |  |  |  |

221

4,687

30,000

5,117

| Other Expenses Schedule |                                      | 1                        |                        |                                 |
|-------------------------|--------------------------------------|--------------------------|------------------------|---------------------------------|
| Description             | Revenue and<br>Expenses per<br>Books | Net Investment<br>Income | Adjusted Net<br>Income | Disburseme<br>Charita<br>Purpos |
|                         |                                      |                          |                        |                                 |

OFFICE SUPPLIES

DIRECTORS INSURANCE

RENOVATION EXPENSE

OTHER INSURANCE



| efile GRAPHIC print - DO NOT PROCESS | As Filed Data - |                   | DLN: 93491129024598 |  |  |  |
|--------------------------------------|-----------------|-------------------|---------------------|--|--|--|
| TY 2017 Other Increases Schedule     |                 |                   |                     |  |  |  |
|                                      |                 |                   |                     |  |  |  |
| Name:                                | CHERNA MOS      | KOWITZ FOUNDATION |                     |  |  |  |
| EIN:                                 | 26-2547583      |                   |                     |  |  |  |
| Dr                                   | escription      |                   | Amount              |  |  |  |
| UNREALIZED GAINS AND LOSSES          |                 |                   | 158,523             |  |  |  |

RECOVERED GRANTS FROM PRIOR YEAR

| Category Amount Net Investment Adjusted Net Disbursements Income Income for Charitable       |                  |   |     |                   |  |  |  |  |
|--|------------------|---|-----|-------------------|--|--|--|--|
| TY 2017 Other Professional Fees Schedule  Name: CHERNA MOSKOWITZ FOUNDATION  EIN: 26-2547583 |                  |   |     |                   |  |  |  |  |
| efile GRAPHIC print - DO NOT PROCE   | SS As Filed Data | - | DLI | N: 93491129024598 |  |  |  |  |

9,461

9,863

Purposes

PORTFOLIO MANAGEMENT FEES

| efile GRAPHIC print - DO NOT PROCESS | As Filed Data | -                        | DL                     | N: 93491129024598                           |  |  |  |
|--------------------------------------|---------------|--------------------------|------------------------|---|--|--|--|
| TY 2017 Taxes Schedule               |               |                          |                        |   |  |  |  |
|                                      |               |                          |                        |   |  |  |  |
| Name: CHERNA MOSKOWITZ FOUNDATION    |               |                          |                        |   |  |  |  |
| <b>EIN:</b> 26-2547583               |               |                          |                        |   |  |  |  |
| Category                             | Amount        | Net Investment<br>Income | Adjusted Net<br>Income | Disbursements<br>for Charitable<br>Purposes |  |  |  |
| FEDERAL TAXES (990-PF)               | 15,245        | 0                        |                        | 0   |  |  |  |

| efile GRAPHIC print -  | DO NOT PROCESS  | As Filed Data -   |   |   |   | DLN: 93491129024598  |  |
|--|---|---|---|---|---|--|--|
| Schedule B   |   | Schedi  | ule of Contributo   | ors   |   | OMB No 1545-0047   |  |
| (Form 990, 990-EZ,<br>or 990-PF)<br>Department of the Treasury<br>Internal Revenue Service | ► Information a   | ► Attach to Form 990, 990-EZ, or 990-PF ► Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at   www.irs.gov/form990 |   |   |   | 2017   |  |
| Name of the organizate CHERNA MOSKOWITZ FO   |   |   |   |   | Employer id   | entification number  |  |
|  |   |   |   |   | 26-2547583  |  |  |
| Organization type (ch  | eck one)  |   |   |   |   |  |  |
| Filers of:   | Section:  |   |   |   |   |  |  |
| Form 990 or 990-EZ   | ☐ 501(c)(   | ) (enter number) o  | organization  |   |   |  |  |
|  | ☐ 4947(a)(  | 4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private foundation  |   |   |   |  |  |
|  | ☐ 527 politi  | ☐ 527 political organization  |   |   |   |  |  |
| Form 990-PF  | <b>5</b> 01(c)(3)   | ) exempt private fo   | oundation   |   |   |  |  |
|  | ☐ 4947(a)(  | 4947(a)(1) nonexempt charitable trust treated as a private foundation   |   |   |   |  |  |
|  | oundation   |   |   |   |   |  |  |
|  |   |   | PF that received, during<br>Complete Parts I and II S   |   |   |  |  |
| Special Rules  |   |   |   |   |   |  |  |
| under sections received from a   | 509(a)(1) and 170(b)  | )(1)(A)(vi), that che<br>luring the year, tot   | g Form 990 or 990-EZ thecked Schedule A (Form<br>al contributions of the graphete Parts I and II  | 990 or 990-EZ), P   | art II, line 13,                                      | 16a, or 16b, and that  |  |
| during the year  | , total contributions o   | f more than \$1,000   | , or (10) filing Form 990 o<br>0 <i>exclusively</i> for religious<br>r animals Complete Part  | s, charitable, scien  |   |  |  |
| during the year<br>If this box is che<br>purpose Don't                                     | , contributions <i>exclus</i><br>ecked, enter here the<br>complete any of the p | sively for religious,<br>total contributions<br>parts unless the <b>G</b>   | , or (10) filing Form 990 of<br>charitable, etc., purpose<br>s that were received duri<br>eneral Rule applies to the<br>or more during the year | s, but no such con<br>ng the year for an<br>nis organization be | ntributions tota<br>exclusively re<br>ecause it recei | led more than \$1,000<br>ligious, charitable, etc ,<br>ved <i>nonexclusively</i> |  |
| 990-EZ, or 990-PF), bu   | it it <b>must</b> answer "No  | o" on Part IV, line 2   | ule and/or the Special Ru<br>2, of its Form 990, or che<br>at it doesn't meet the filin   | ck the box on line  | H of its  |  |  |
| For Paperwork Reduction<br>for Form 990, 990-EZ, or 9                                      |   | tructions   | Cat No 30613X   | Schedu  | ıle B (Form 990                                       | , 990-EZ, or 990-PF) (2017)  |  |

| Name of organiz<br>CHERNA MOSKOV | VITZ FOUNDATION   | 26-2547583                 | number  |
|----------------------------------|---|----------------------------|---|
| Part I                           | Contributors (See instructions) Use duplicate copies of Part I if a | dditional space is needed  |   |
| (a)<br>No.                       | (b)<br>Name, address, and ZIP + 4                                   | (c)<br>Total contributions | (d)<br>Type of contribution   |
| 1                                | CHERNA MOSKOWITZ 1250 E HALLANDALE SUITE 1000  HALLANDALE, FL33009  | \$ 15,000,000              | Person Payroll Noncash  (Complete Part II for noncash   |
| (a)<br>No.                       | (b)<br>Name, address, and ZIP + 4                                   | (c) Total contributions    | contributions ) (d) Type of contribution  |
| -                                |   |                            | Person  |
| (a)<br>No.                       | (b)<br>Name, address, and ZIP + 4                                   | (c)<br>Total contributions | (d)<br>Type of contribution   |
|                                  |   | \$                         | Person  Payroll  Noncash  (Complete Part II for noncash contributions)                                      |
| (a)<br>No.                       | (b)<br>Name, address, and ZIP + 4                                   | (c)<br>Total contributions | (d)<br>Type of contribution   |
|                                  |   |                            | Person  Payroll  Noncash  (Complete Part II for noncash contributions)                                      |
| (a)<br>No.                       | (b)<br>Name, address, and ZIP + 4                                   | (c)<br>Total contributions | (d)<br>Type of contribution   |
|                                  |   |                            | Person Payroll Noncash (Complete Part II for noncash contributions)   |
| (a)<br>No.                       | (b)<br>Name, address, and ZIP + 4                                   | (c)<br>Total contributions | (d)<br>Type of contribution   |
| ,                                |   | \$ Sahadula P. (F          | Person  Payroll  Noncash  (Complete Part II for noncash contributions)  prim 990, 990-EZ, or 990-PF) (2017) |

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