

EXTENDED TO NOVEMBER 15, 2018

Return of Private Foundation

or Section 4947(a)(1) Trust Treated as Private Foundation

Do not enter social security numbers on this form as it may be made public.

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

For calendar year 2017 or tax year beginning	irs.gov/Form990PF for insu	, and ending	mauon.	Open to Public Inspection
Name of foundation		, and onemy	A Employer identification	number
THE MONTGOMERY FAMILY FOUN			26-6620815	
Number and street (or P O box number if mail is not delivered to street	- Room/suite	B Telephone number		
5784 OLD LAKE SHORE ROAD		(716) 627-	4686	
City or town, state or province, country, and ZIP or foreign LAKE VIEW, NY 14085	postal code		C If exemption application is p	ending, check here
G Check all that apply: Initial return	Initial return of a f	ormer public charity	D 1. Foreign organizations	s, check here
Final return	Amended return			
Address change	Name change		Foreign organizations me check here and attach co	eting the 85% test, mputation
H Check type of organization: X Section 501(c)(3) e	xempt private foundation	ation 6 Ψ	E If private foundation sta	tus was terminated
Section 4947(a)(1) nonexempt charitable trust	Other taxable private found	ation UY	under section 507(b)(1)	(A), check here
- I	ting method: X Cash	Accrual	F If the foundation is in a	60-month termination
	Other (specify)		under section 507(b)(1)	(B), check here 🕨 🔙
>\$ 2,357,553. (Part I, colu	mn (d) must be on cash basi	S.)		
Part I Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a))	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
1 Contributions, gifts, grants, etc., received	97,058.			
2 Check if the foundation is not required to attach Sch. B				
3 Interest on savings and temporary cash investments				
4 Dividends and interest from securities	39,058.	39,058.		
5a Gross rents				
Net rental income or (loss)	4.60.004			
62 Net gain or (loss) from sale of assets not on line 10 Gross sales price for all	160,994.			
b assets on line 6a 568,462.		160 004		TO COMP
b assets on line 6a 568,462. 7 Capital gain net income (from Pert IV, line 2)		160,994.		
o Net Short-term capital gain			8	11 1 7 2016 (O)
9 Income modifications Gross sales less returns				F A 7 5010 18
10a and allowances				GUEN UT
b Less Cost of goods sold c Gross profit or (loss)				GOC.
11 Other income	-1,060.	107.		STATEMENT 1
12 Total. Add lines 1 through 11	296,050.	200,159.		STATEMENT I
13 Compensation of officers, directors, trustees, etc	9,837.	4,919.	0.	4,918.
14 Other employee salaries and wages				1,510.
15 Pension plans, employee benefits				,
3 16a Legal fees				
b Accounting fees STMT 2	9,012.	4,506.	0.	4,506.
c Other professional fees STMT 3	14,595.	14,595.	0.	0.
17 Interest				
g 17 Interest g 18 Taxes STMT 4	408.	158.	0.	0.
19 Depreciation and depletion				
20 Occupancy				
21 Travel, conferences, and meetings				
22 Printing and publications				
23 Other expenses STMT 5	297.	47.	0.	250.
24 Total operating and administrative expenses. Add lines 13 through 23		A4	_	
expenses. Add lines 13 through 23	34,149.	24,225.	0.	9,674.
25 Continuutions, girts, grains paid	304,735.			304,735.
26 Total expenses and disbursements.	330 004	04 005	_	
Add lines 24 and 25	338,884.	24,225.	0.	314,409.
27 Subtract line 26 from line 12:	_42 024			
Excess of revenue over expenses and disbursements Net investment income (4	-42,834.	175 024		- · ·
b Net investment income (if negative, enter -0-) c Adjusted net income (if negative, enter -0-)		175,934.	0.	
I ◆ MUJUSTED HET HITOHIE (Bregative, emer -U-)	1		U . I	

723501 01-03-18 LHA For Paperwork Reduction Act Notice, see instructions.

Fori	n 99	0-PF (2017) THE MONTGOMERY FAMILY FOR			5620815 Page 2
P	art	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year	End of	
	_		(a) Book Value	(b) Book Value	(c) Fair Market Value
- }	1	Cash - non-interest-bearing	12,337.	10,864.	10,864.
ı	2	Savings and temporary cash investments			
- 1	3	Accounts receivable			
Ì		Less: allowance for doubtful accounts			
ı	4	Pledges receivable ►			
		Less: allowance for doubtful accounts			
	5	Grants receivable			
	-	Receivables due from officers, directors, trustees, and other			
- 1	_	disqualified persons	1	j	
i	7	Other notes and loans receivable			·
ĺ	′	Less: allowance for doubtful accounts	+		
					
ets	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges	516 016	F1C 01C	FOA 170
4		Investments - U.S. and state government obligations STMT 7	516,916.	516,916.	504,179.
	b	Investments - corporate stock STMT 8	684,080.	733,121.	1,184,909.
	C	Investments - corporate bonds STMT 9	357,600.	348,108.	345,101.
	11	Investments - land, buildings, and equipment basis			
		Less accumulated depreciation			
-	12	Investments - mortgage loans			
	13	investments - other		\	
	14	Land, buildings, and equipment; basis			
		Less accumulated depreciation			
	15	Other assets (describe ROMARK LABORATORIES)	-164,876.	-167,291.	312,500.
		Total assets (to be completed by all filers - see the			
		instructions. Also, see page 1, item I)	1,406,057.	1,441,718.	2,357,553.
_	17	Accounts payable and accrued expenses			
	18	Grants payable			
	19	Deferred revenue			
Llabilities					
Ę	20	Loans from officers, directors, trustees, and other disqualified persons			1
룜	21	Mortgages and other notes payable			1
_	22	Other liabilities (describe			
	l	7.10.100	0.	^	ì
_	23_	Total liabilities (add lines 17 through 22)		0.	į
	ŀ	Foundations that follow SFAS 117, check here	į		-[
	ł	and complete lines 24 through 26, and lines 30 and 31.	1		}
Ces	24				}
	25	Temporarily restricted			ì
Ba	26	Permanently restricted			i
Net Assets or Fund Balan	l	Foundations that do not follow SFAS 117, check here	į		!
Ţ	[and complete lines 27 through 31.	į		[
ō	27	Capital stock, trust principal, or current funds	467,283.	467,283.	
쳟	28	Paid-in or capital surplus, or land, bldg., and equipment fund	_ 0.}	0.	ì
Ş	29	Retained earnings, accumulated income, endowment, or other funds	938,774.	974,435.	1
ĕ	30	Total net assets or fund balances	1,406,057.	1,441,718.]
Z					į.
	31	Total liabilities and net assets/fund balances	1,406,057.	1,441,718.	1
LP	art	Analysis of Changes in Net Assets or Fund Bal	ances		
1	Tota	I net assets or fund balances at beginning of year - Part II, column (a), line 30			
•		st agree with end-of-year figure reported on prior year's return)		11	1,406,057.
2	•	r amount from Part I, line 27a		1 2	-42,834.
		r increases not included in line 2 (itemize)	SEE ST	ATEMENT 6 3	79,850.
			116 446		1,443,073.
		lines 1, 2, and 3	 בים מעם הואמאותה בים מעם הואמאותה	089	
		eases not included in line 2 (itemize) COST BASIS ADJU			1,355.
<u>6</u> _	rota	I net assets or fund balances at end of year (line 4 minus line 5) - Part II, colu	ımın (b), line 30		1,441,718.
					Form 990-PF (2017)

. —	990-PF (2017) THE MONTGOMERY FAMILY FOUNDATION		620815		Page 4
`Pa	rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4	948 - s	ee instruc	tion	s)
1a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1.	I			
	Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)				
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here 🕨 🗓 and enter 1%	1		1,7	<u>59.</u>
	of Part I, line 27b	1 1			1
C	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations, enter 4% of Part I, line 12, col. (b).				
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)	2			0.
3	Add lines 1 and 2	3		1,7	59.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)	4			0.
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5		1,7	59.
6	Credits/Payments:			-	
a	2017 estimated tax payments and 2016 overpayment credited to 2017 6a 3,076.] [- }
b	Exempt foreign organizations - tax withheld at source 66 0.] }			
C	Tax paid with application for extension of time to file (Form 8868)	1 1			į
đ	Backup withholding erroneously withheld 0.				
7	Total credits and payments. Add lines 6a through 6d	7		3,0	76.
8	Enter any penalty for underpayment of estimated tax. Check here If Form 2220 is attached	8			0.
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9			
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10		1,3	17.
11	Enter the amount of line 10 to be: Credited to 2018 estimated tax	11			0.
Pa	rt VII-A Statements Regarding Activities				
18	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervenience.	e in		Yes	No
	any political campaign?		1a	L	X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the defin	nition	1b_	L	X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or		1		1 1
	distributed by the foundation in connection with the activities.		<u> </u>	L	
C	Did the foundation file Form 1120-POL for this year?		1c		X
ď	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:		l	1	1 1
	(1) On the foundation. \blacktriangleright \$ (2) On foundation managers. \blacktriangleright \$	_		ł	1 1
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation		l		1 1
	managers. ► \$ 0 .				
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?		2		X
	If "Yes," attach a detailed description of the activities.		1		
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or)Γ			
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes		3_		X
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?		_4a	X	
	If "Yes," has it filed a tax return on Form 990-T for this year?		4b	X	
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?		5		X
	If "Yes," attach the statement required by General Instruction T.				1 1
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:				
	By language in the governing instrument, or		ľ		1 1
	By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state	e law	<u> </u>		
	remain in the governing instrument?		6	X	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV		7	X	
					1
88	Enter the states to which the foundation reports or with which it is registered. See instructions.		[1 1
	NY				
t	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)		 	لــــا	لــــــا
	of each state as required by General Instruction G? If "No," attach explanation		8b	X	
		ada.	1		
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for cale	andar			
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for call year 2017 or the tax year beginning in 2017? See the instructions for Part XIV. If "Yes," complete Part XIV Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses	anuai	9		X

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

P	Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations	dation	s, see instructions)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
8	Average monthly fair market value of securities	1a	2,064,972.
, b	Average of monthly cash balances	16	30,801.
C	Fair market value of all other assets	1¢	312,500.
d	Total (add lines 1a, b, and c)	1d	2,408,273.
e	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 1e 0.	1	
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	2,408,273.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	36,124.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	2,372,149.
6	Minimum investment return Enter 5% of line 5	6	118,607.
P	art XI Distributable Amount (see instructions) (Section 4942(1)(3) and (1)(5) private operating foundations an	d certai	n
	foreign organizations, check here and do not complete this part.)		
1	Minimum investment return from Part X, line 6	1	118,607.
2a	Tax on investment income for 2017 from Part VI, line 5		
b	Income tax for 2017. (This does not include the tax from Part VI.)		
C	Add lines 2a and 2b	2c	1,759.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	116,848.
4	Recoveries of amounts treated as qualifying distributions	4_	0.
5	Add lines 3 and 4	5	116,848.
6	Deduction from distributable amount (see instructions)	6	0.
7_	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	116,848.
E	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
a	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	314,409.
b	Program-related investments - total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	_3b_	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8; and Part XIII, line 4	4	314,409.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		
	income. Enter 1% of Part I, line 27b	5	1,759.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	312,650.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation q 4940(e) reduction of tax in those years.	ualifies	for the section

(a) Corpus (b) (ci) (di) 2017 1 Distributable amount for 2017 from Part XI, Inter 7 1 Uncertained receive, if any, as of the worl 2017 4 Einter amount for 2016 only 5 Total for prior years: 2015, 2014, 2013 5 Excess distributions carryover, if any, to 2017; 4 From 2012 4 From 2015 4 From 2015 4 From 2015 4 From 2016 4 Capital State of the State	Part XIII Undistri	buted Income (see	e instructions)			
http 7 2						
2. Unstablibated security, 4 my, as of the word of 2017 a. Enter amount 100 2015 only b. Total for prior years: 2015 2014 2013 3. Excess distributions carryover, 4 my, to 2017. a. From 2012 199, 2011 from 2013 16, 989. c. From 2016 4. From 2016 4. Outsidying distributions from 2017 from Part XII, Inex 4 hr ≤ 314, 4.09. a. Applied to 2016, but not more than line 2a Applied to 2016, but not more than line 2a Applied to 2016, but not more than line 2a Applied to 2017 from register? see instructions) c. Treated as distributions out of corpus (Election required - see instructions) d. Applied to 2017 distributible amount e. Fernaming amount distributed out of corpus 6. Enter the net total of each column as indicated below. 6. Enter the net total of each column as indicated below. 6. Enter the net total of each column as indicated below. 6. Enter the net total of each column as indicated below. 6. Enter the manufic of prior years' undistributed income for years' undistributed inc		2017 from Part XI,				116,848.
S Total for prior years: 2015	2 Undistributed income, if any,	as of the end of 2017				
2015 . 2014 2013	a Enter amount for 2016 of	only			0.	
3. Excess distributions carryover, if any, to 2017. a From 2012 199, 2013 16, 989. 467:00 2015 47:00 2015 47:00 2015 47:00 2015 40:00 2015 40:00 2015 40:00 2015 40:00 2017 40:00 2015 40:00 2017 40	b Total for prior years:					
a From 2012				0.		
E From 2013	3 Excess distributions carr					
E From 2013	a From 2012	199,201.	1			
d From 2015	b From 2013	16,989.	1			
From 2016	c From 2014		į,			
1 Total of lines 3a through e 4 Qualifying distributions for 2017 from Part XII, line 4:1 ≥ \$ 314,409. A popiled to 2016, but not more than line 2a b Applied to 2016, but not more than line 2a b Applied to 2016, but not more than line 2a b Applied to 2016, but not more than line 2a b Applied to 2016, but not more than line 2a b Applied to 2016 distribution out of corpus (Election required - see instructions) 4 Applied to 2017 distributable amount el Remaining amount distributed out of corpus 5 Excess destributions curryove explose to 2017 (for an amount appears in column (a), the semial amount must be shorn in oclumn (a), the semial amount and be shorn in oclumn (a), the semial amount indicated below: 3 Corpus Add line 3, 4c, and 4e Bustract line 5 b Prior years' undistributed income. Subtract the 40 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 3 Subtract line 6 from line 6b. Taxable amount - see instructions e Undistributed income for 2016. Subtract line 4 from line 2a. Taxable amount - see instructions e Undistributed in norme for 2016. Subtract line 4 a from line 2. Taxable amount - see instructions 0 - 2 Corpus to Salish y requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions) 1 4 Applied on line 5 or line 7 2 Excess distributions carryover to 2018. Subtract lines 7 and 8 from line 6a 10 Analysis of line 9; a Excess from 2014 16 Applied to make 6a 10 Analysis of line 9; a Excess from 2014 16 Excess from 2014	d From 2015		Į.	ļ		
4 Oualifying distributions for 2017 from Part XII, line 4: PS 314, 409. A Applied to 2016, but not more than line 2a. A Applied to undistributed income of prory years (Election required - see instructions) e Treated as distributions out of corpus (Election required - see instructions) d Applied to 2017 distributable amount e Remaining amount distributed out of corpus 5. Excess distributions are considered to 2017. Solution of the considered are considered to 2017. Corpus And times 81, 4c, and 4e. Subtract line 5. Differ the are total of each column as indicated below: Corpus And times 81, 4c, and 4e. Subtract line 5. Differ the amount of prior years' undistributed income. Subtract line 4b from line 2b. Corpus And times 81, 4c, and 4e. Subtract line 4b. Corpus And times 81, 4c, and 4e. Subtract line 4b. Corpus And times 81, 4c, and 4e. Subtract line 4b. Corpus And times 81, 4c, and 4e. Subtract line 4b. Corpus And times 81, 4c, and 4e. Subtract line 4b. Corpus And times 81, 4c, and 4e. Subtract line 4b. Corpus And times 81, 4c, and 4e. Subtract line 4b. Corpus And times 81, 4c, and 4e. Subtract line 4b. Corpus And times 81, 4c, and 4e. Subtract line 4b. Corpus And times 81, 4c, and 4e. Subtract line 4b. Corpus And times 81, 4c, and 4e. Subtract line 4b. Corpus And times 81, 4c, and 4e. Subtract line 4b. Corpus And times 81, 4c, and 4e. Subtract line 4b. Corpus And times 81, 4c, and 4e. Subtract line 4b. Corpus And times 81, 4c, and 4e. Subtract line 4b. Corpus And times 81, 4c, and 4e. Subtract line 4b. Corpus And times 81, 4c, and 4e. Subtract line 4b. Corpus And times 81, 4c, and 4e. Subtract line 4b. Corpus And times 81, 4c, and 4e. Subtract line 4b. Corpus And times 81, 4c, and 4e. Subtract line 8c. Corpus And times 81, 4c, and 4e. Subtract line 8c. Corpus And times 81, 4c, and 4e. Subtract line 8c. Corpus And times 81, 4c, and 4e. Subtract line 8c. Corpus And times 81, 4c, and 4e. Subtract line 8c. Corpus And times 81, 4c. Corpus And times 81, 4c. Corpus And times 81, 4c.	e From 2016	247,753.				
Part XII, line 4: ► \$ 314,409. a Applied to 2016, but not more than line 2a	_	_	463,943.			
a Applied to 2016, but not more than line 2a b Applied to undistributed income of prior years (Election required - see instructions) c Treated as distributions out of corpus (Election required - see instructions) d Applied to 2017 distributable amount e Remaining amount distributed out of corpus 5 Excess data business are more applied to 2017 6 Enter the net total of each column as indicated below: a Corpus Add times 31, 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 sessed, or on which the section 4942(a) tax has been previously assessed d Subtract line 6b from line 6b. Taxable amount - see instructions e Undistributed income for 2016. Subtract line 4a from line 2a. Taxable amount - see instructions e Undistributed income for 2017. Subtract line 4a from line 2a. Taxable amount - see instructions e Undistributed income for 2017. Subtract line 4a from line 2a. Taxable amount - see instructions e Undistributed income for 2017. Subtract line 4a from line 2a. Taxable amount - see instructions e Undistributed income for 2017. Subtract line 4a from line 2a. Taxable amount - see instructions e Undistributed income for 2017. Subtract line 4a from line 2a. Taxable amount - see instructions e Undistributed income for 2017. Subtract line 4a from line 5a and 5 from line 1. This amount must be distributed income for 2017. Subtract line 4a from line 5a and 5 from line 5a line 5a and 5 from line 5a line 5a and 5 from line 5a line 5a and 5a from			ļ			
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 enterminate and the entermination of the entermination			ļ			
years (Election required - see instructions) c Trated as distributions out of corpus (Election required - see instructions) d Applied to 2017 distributable amount e Remaining amount distributed out of corpus 5 Excess distributions carryover brown 2012 not applied to 1977. 6 Enter the net total of each column as indicated below: a Corpus Add lines 31, 4c, and 4e Subract line 5 b Prior years' undistributed income. Subtract line 4b from tine 2b c Exter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4972(a) tax has been previously assessed d d Subtract line 6b from line 6b. Taxable amount - see instructions e Undistributed income for 2016. Subtract line 4a from line 2a. Taxable amount - see instructions c Undistributed income for 2017. Subtract line 4a from line 2a. Taxable amount - see instructions d and 5 from line 1. This amount must be distributed in 2018 7 Announts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(f) or 4942(a)(3) (Election may be required - see instructions) 8 Excess distributions carryover the 2018. Subtract lines 7 and 8 from hine 6a 10 Analysis of line 9: a Excess stributions out of line 7 because from 2014 Excess firstributions carryover to 2018. Subtract lines 6a 10 Analysis of line 9: a Excess from 2014 Excess firstributions carryover to 2018. Subtract lines 7 and 8 from hine 6a Lexicism from line 8c. 16, 989. because from 2014					0.	
c Treated as distributions out of corpus (Election required - see instructions) d Applied to 2017 distributible amount e Remaining amount distributed out of corpus 5 Excess distributions carryove applied to 2017 (first amount appears in column (b)) 6 Enter the net fotal of each column as indicated below: a Corpus Add lines 31, 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 mome for which a notice of deficiency has been issued, or on which the section 494(2) as has been previously assessed d Subtract line 6c from line 6b. Taxable amount - see instructions e Undistributed income for 2016. Subtract line 4a from line 2a. Taxable amount - see instructions e 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 Subtract lines 7 and 8 from line 6a 10 Analysis of line 9: a Excess firstibutions carryover to 2018. Subtract lines 7 and 8 from line 6a 10 Analysis of line 9: a Excess firstibutions carryover to 2018. Subtract lines 7 and 8 from line 6a 10 Analysis of line 9: a Excess firstibutions carryover to 2018. Subtract lines 7 and 8 from line 6a 10 Analysis of line 9: a Excess from 2014	• •					
(Election required - see instructions) d Applied to 2017 distributable amount Remaining amount distributed out of corpus 5 Excess distributions employee an ecolumn as indicated before: a Carpus Adultime 34, e.s., and 4e Subtract line 5 b 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 - see instructions e Undistributed income for 2016. Subtract line 4a from line 2a. Taxable amount - see instructions e Undistributed income for 2017. Subtract line 4a from line 2 a. Taxable amount - see instructions e Undistributed income for 2017. Subtract lines 4d and 5 from line 1. This amount must be distributed 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 fishibutions carryover from 2012 not applied on line 5 or line 7 Subtract lines 7 and 8 from line 8a 10 Analysis of line 9: a Excess from 2014 Excess from 2014 D	years (Election required	- see instructions)		<u> </u>		
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5 Sinces debibliotions corryover applied to 2017 (fit an embed appear an solid papear and solid pape	· ·	<u>-</u> -	107 561			116,848.
if an amount appears an column (d), the same amount must be shown in column (d). Enter the net total of each column as indicated below: 8 Corpus Add times 3!, 4c, and 4e Subtract lime 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 inssued, or on which the section 4942(a) tax has been previously assessed d Subtract line 6c from line 6b. Taxable amount - see instructions e Undistributed income for 2016. Subtract line 4a from line 2a. Taxable amount - see instructions e 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(p)(3) (Election may be required - see instructions) 8 Excess distributions carryover from 2012 not applied on line 5 or line 7 9 Excess distributions carryover to 2018. Subtract lines 9. Analysis of line 9: a Excess from 2013 b Excess from 2013 b Excess from 2014	<u>-</u>	·				
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Subtract lines 7 and 8 from line 6a 462,303. 10 Analysis of line 9: a Excess from 2013 16,989. b Excess from 2014	* *		199,201.	—————		
10 Analysis of line 9: a Excess from 2013			462 202	i	İ	
a Excess from 2013 16,989. b Excess from 2014		om line 6a	464,303.			
b Excess from 2014	· · · · · · · · · · · · · · · · · · ·	16 000	Ì	Ì		
		10,303.	i	l)	
# Evrace from 2015 / I I I I I			į))	
		247 753	j)		
d Excess from 2016 247,753. e Excess from 2017 197,561.	<u> -</u>	107 561	j)		

Grants and Contributions Paid During th		Payment		
Recipient If recipient is an individual, show any relationship to any foundation manager any foundation manager are substantial contributor.		Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient	0.1010000.1	
a Paid during the year				
UFFALO PHILHARMONIC ORCHESTRA	NONE	₽C	CAPITAL CAMPAIGN	
99 FRANKLIN STREET				
SUFFALO, NY 14202				102,40
BUFFALO PHILHARMONIC ORCHESTRA	NONE	PC	TO SUPPORT LIVE	
199 FRANKLIN STREET			SYMPHONIC MUSIC	
BUFFALO, NY 14202				30,00
CENTER FOR RESPONSIBLE TRAVEL	NONE	PC	TO SUPPORT TRAVELERS'	
51 STATION AVENUE BASS RIVER, MA 02664			PHILANTHROPY	2,50
DADO MIYUM, ILI OLOOT				
CRADLE BEACH CAMP, INC.	NONE	PC	TO SUPPORT CHILDREN	
8038 OLD LAKE SHORE ROAD	HONE		WITH SPECIAL NEEDS	
ANGOLA, NY 14006				5,00
FREE THE KIDS	NONE	₽C	TO SUPPORT ABANDONED	
5704 W. MARKET STREET, #8947			AND VULNERABLE	
GREENSBORO, NC 27419			CHILDREN IN HAITI	5,00
Total SEE	CONTINUATION SHEE	T(S)	▶ 3a	304,73
b Approved for future payment				
NONE				
			<u> </u>	
Tabl			▶ 3b	
Total		•		rm 990-PF (20

Part XVI-A	Analy	sis of Inc	come-Prod	ucina A	ctivities
		O.O O			

E-tay areas areas to unless otherwise indicated	Unrelate	d business income	Exclu	ided by section 512, 513, or 514	
Enter gross amounts unless otherwise indicated.	(a) Business	(b)	(c) Exclu-	(d)	(e) Related or exempt
1 Program service revenue:	code	Amount	code	Amount	function income
a			↓		
b			<u> </u>		
c			<u> </u>		<u> </u>
d			_		
e			<u> </u>		
f					
g Fees and contracts from government agencies			<u> </u>		
2 Membership dues and assessments			<u> </u>		
3 Interest on savings and temporary cash investments					
4 Dividends and interest from securities			14	39,058.	
5 Net rental income or (loss) from real estate:					
a Debt-financed property					
b Not debt-financed property					
6 Net rental income or (loss) from personal					
property					
7 Other investment income					
8 Gain or (loss) from sales of assets other					
than inventory			18	160,994.	
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue:					
a CLASS ACTION SETTLEMENT					
b PROCEEDS		0.	01	107.	0.
ROMARK LABORATORIES, LC					
	523000	-1,167.	1	0.	0.
e					
12 Subtotal. Add columns (b), (d), and (e)		-1,167.		200,159.	0.
13 Total. Add line 12, columns (b), (d), and (e)		-		13	198,992.
(See worksheet in line 13 instructions to verify calculations.)					

Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes

Line No. ▼	Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes).
	N/A
	——————————————————————————————————————
	
-	

723621 01-03-18

Form 990-PF (20				FOUNDATION		26-662		Pa	ge 13
Part XVII	Information Re Exempt Organi		sfers to a	nd Transactions ar	nd Relationsh	ips With Nonchari	table		
1 Did the org	ganization directly or indir	ectly engage in any	of the followin	g with any other organization	on described in sect	on 501(c)		Yes	No
•		•		to political organizations?					
	from the reporting founda	tion to a noncharita	ible exempt org	anization of			12/1		Х
(1) Cash	accoto						18(1)		X
(2) Other							1a(2)		<u> </u>
b Other trans	sactions. of assets to a noncharital	ale everent organiza	ition				15/43		x
	ases of assets from a nor						1b(1)	\dashv	X
\-	l of facilities, equipment,	•	urganization				1b(2) 1b(3)		X
	oursement arrangements	or other assets					16(4)		X
` '	or loan guarantees						1b(5)		X
	rmance of services or me	mbershin or fundra	isina solicitatio	ns			1b(6)		X
٠,	facilities, equipment, ma	·	-				1c		X
_				dule. Column (b) should al	ways show the fair i	narket value of the goods.		its.	
				ed less than fair market valu				,	
) the value of the goods,				,				
	(b) Amount involved			exempt organization	(d) Description	of transfers, transactions, and :	sharing arra	ngemen	nts
			N/A						
		L		·	_L				
									
					_\				
		ļ							
					- 				
									
					+				
			····-						
	·								
	ndation directly or indirect	•		or more tax-exempt organ	izations described		Yes	Ī] No
	omplete the following sch		000 02 1				700] 1,00
	(a) Name of org			(b) Type of organization		(c) Description of relations	hip	_	
	N/A								
					<u> </u>				
					ļ				
	-	421		<u> </u>	<u> </u>				
Sign Here	penanties of Bor July 1 ogcizer to blief, it is true, correct find corr	plate rectargion of pr	eparer (other than	accompanying schedules and a special payor) is based on all information of the second	ation of which propored h	as any knowledge rett	y the IRS di en with the own below? Yes	propero	OF .
Sign	nature of officer or trustee	V range		Daye	Title				
	Print/Type preparer's na		Preparer's s	ignature	Date	Check if PTIN			
	JENNIFER D		diam de	W. Cherlenck	[677/18	self- employed			
Paid	RHODERICK		J		<u></u>	P0	03957	735	
Preparer Use Only	Firm's name ► ERN	ST & YOUN	IG U.S.	LLP		Firm's EIN ► 34-6			
•	Firm's address ▶ 11	1 MONUMEN	T CIRC	LE, SUITE 40	00	 			
		DIANAPOLI				Phone no. (317)	<u> 681</u> -	<u>7</u> 00	00

Phone no. (317) 681-7000 Form **990-PF** (2017)

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

Department of the Treasury Internal Revenue Service

Schedule of Contributors

➤ Attach to Form 990, Form 990-EZ, or Form 990-PF. ► Go to www.irs.gov/Form990 for the latest information. OMB No 1545-0047

Name of the organization

Employer identification number

<u>T</u>	HE MONTGOMERY FAMILY FOUNDATION	26-6620815					
Organization type (check	one)						
Filers of:	Section:						
Form 990 or 990-EZ	501(c)() (enter number) organization						
	4947(a)(1) nonexempt charitable trust not treated as a private foundation						
	527 political organization						
Form 990-PF	X 501(c)(3) exempt private foundation						
	4947(a)(1) nonexempt chantable trust treated as a private foundation	4947(a)(1) nonexempt chantable trust treated as a private foundation					
	501(c)(3) taxable private foundation	501(c)(3) taxable private foundation					
, ,	us covered by the General Rule or a Special Rule. c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rul	e See instructions.					
General Rule							
	on filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling by one contributor. Complete Parts I and II. See instructions for determining a contributor's	• •					
Special Rules							
sections 509(a)(1 any one contribu	on described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support (1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, of the during the year, total contributions of the greater of (1) \$5,000, or (2) 2% of the amout iz, line 1 Complete Parts I and II.	or 16b, and that received from					
year, total contri	ion described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from a butions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or education for children or animals. Complete Parts I, II, and III.						
For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000 If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year							
but it must answer "No" o	that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Foon Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Foot the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)						

Name of organization

Employer identification number

THE	MONTGOMERY	FAMILY	FOUNDATION

THE MO	ONTGOMERY FAMILY FOUNDATION		-6620815
Part I	Contributors (see instructions). Use duplicate copies of Part I if addition	al space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	EOBERT MONTGOMERY 5784 OLD LAKE SHORE ROAD LAKE VIEW, NY 14085	\$9,512.	Person X Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	CAROLYN MONTGOMERY 5784 OLD LAKE SHORE ROAD LAKE VIEW, NY 14085	\$ 87,546.	Person X Payroll Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash Occash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and Z(P + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash Occash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)

Name of organization

Employer identification number

THE MONTGOMERY FAMILY FOUNDATION

26-6620815

	OMERY FAMILY FOUNDATION	· · · · · · · · · · · · · · · · · · ·	-6620815
art II No	ncash Property (see instructions). Use duplicate copies of Part II if	additional space is needed	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
	ALTRIA GROUP; 500 CHECK POINT SOFTWARE; 1,275 J. P. GAN CHASE & CO		
_		\$ 200,129.	VARIOUS
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. rom Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
_ _		*	
(a) No. rom	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. rom	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. From	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	90, 990-EZ, or 990-PF) (20

Name of orga	anization		Employer identification number
THE MO	the year from any one contributor. Complete	ributions to organizations described in columns (a) through (e) and the follow	26-6620815 section 501(c)(7), (8), or (10) that total more than \$1,000 for ing line entry. For organizations
	completing Part III, enter the total of exclusively religious Use duplicate copies of Part III if addition	 charitable, etc., contributions of \$1,000 or less space is needed 	ss for the year (Enter this info once)
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-		(e) Transfer of gift	
-	Transferee's name, address, a		Relationship of transferor to transferee
-(a) Na			
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-		/ \ =	
	Transferee's name, address, a	(e) Transfer of gift	Relationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
Γ		(e) Transfer of gift	
L	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee
}			
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
_		(a) Transfer of sife	
	Transferee's name, address, a	(e) Transfer of gift	Relationship of transferor to transferee
ľ	manorete o name, aud ess, a	TY	negationing of dansier of to dansier ee

Page 11			
26-6620815			
FAMILY FOUNDATION			
THE MONTGOMERY FAMILY	Part XV Supplementary Information (continued)	3a Grants and Contributions Paid During the Year	
Form 990-PF	Part XV	3a Grants an	

3a Grants and Contributions Paid During the Year				
Recipient	If recipient is an individual, show any relationship to	Foundation	Purpose of grant or	til care
Name and address (nome or business)	any foundation manager or substantial contributor	status of recipient	contribution	Aillouin
ввесн дтв гимп	ENCA	<u></u>	THE COLLEGE CONNECTIONS PROGRAM	
633 THIRD AVENUE, 14TH PLOOR NEW YORK, NY 10017				5,000.
HAMBURG ALUMNI FOUNDATION	NONE	P.C	TO SUPPORT THE HAMBURG CENTRAL SCHOOL DISTRICT	
P.O. BOX 174 HAMBURG, NY 14075				1,000.
HAUPTMAN-WOODWARD MEDICAL RESEARCH, INC.	NONE	. BC	TO SUPPORT MEDICAL RESEARCH	
BUFFALO, NY 14203-1102				5,000.
KALEIDA HEALTH POUNDATION 1260 DELAWARE AVENUE BUFFALO, NY 14209	NONE	O.	TO SUPPORT COMMUNITY HEALTH	5,000.
KEVIN GUEST HOUSE	NONE	D.A.	TO PROVIDE LODGING FOR FAMILIES OF PATIENTS RECEIVING	
782 BLLICOTT STREET BUFFALO, NY 14203			MEDICAL TREATMENT	5,000.
MISSIONARY SOCIETY OF CONNECTICUT 223 LOW ROAD SHARON, CT 06069	NONE	O A	TO SUPPORT SHOLARSHIP FUND AND WISH LIST	5,000.
ROSWELL PARK ALLIANCE FOUNDATION ELM & CARLTON STREETS	NONE	PC	TO SUPPORT CARLY'S CLUB	
BUFFALO, NY 14263				36,000.
Total from continuation sheets				159,828.
723841 04-01-17		14		

	FAMILY	FOUNDATION	26-6620815	Page 11
Part XV Supplementary Information (continued)	inued)			
Recipient	If recipient is an individual,	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	and the second of	
Name and address (home or business)	snow any relationship to any foundation manager or substantial contributor	roundation status of recipient	Contribution	Amount
SENECA STREET COMMUNITY DEVELOPMENT CORPORATION 1218 SENECA STREET BUFFALO NY 14210	NONE	PC	TO SUPPORT COMMUNITY DEVELOPMENT	10 000
	NONE	BC BC	TO SUPPORT TRACHERS AND EDUCATION	5,000.
THE JACKSON LABORATORY P.O. BOX 254 BAR HARBOR, ME 04609-0254	NONE	PC	TO SUPPORT BIOMEDICAL RESEARCH	5,000.
UNIVERSITY OF BUFFALO SCHOOL OF MANAGEMENT 144 JACOBS MANAGEMENT CENTER BUFFALO, NY 14260-4000	NONE	PC	TO SUPPORT GRADUATE EDUCATION	12,500.
WILDLIFE IN CRISIS, INC. P.O. BOX 1246 WESTON, CT 06883	NONE	P.C	FO SUPPORT REHABILITATION OF INJURED ANIMALS	5,000.
WINGS FLIGHTS OF HOPE, INC. P.O. BOX 872 ORCHARD PARK, NY 14217	NONE	P.C	FOR SUPPORT OF FREE AIR TRANSPORTATION FOR THOSE IN MEDICAL NEED	5,000.
ZOOLOGICAL SOCIETY OF BUFFALO, INC. 300 PARKSIDE AVENUE BUFFALO, NY 14214-1999	NONE	PC	TO SUPPORT WILDLIPE CONSERVATION	5,000.
Total from continuation sheets				
723641 04-01-17		15		

Form 990-PF THE MONTGOMERY	FAMILY	FOUNDATION	26-6620815	Page 11
Supplementary				
3a Grants and Contributions Paid During the Year				
Recipient	If recipient is an individual, show any relationship to		Purpose of grant or	
Name and address (home or business)	any foundation manager or substantial contributor	status of recipient	contribution	Amount
ZOOLOGICAL SOCIETY OF BUFFALO, INC. 300 PARKSIDE AVENUE NEW YORK, NY 14214-1999	NONE	<u>ე</u>	REPTILE HOUSE CAPITAL CAMPAIGN	50,328.
Total from continuation sheets				
723841 04-01-17		7		

FORM 990-PF	OTHER I	NCOME	S	TATEMENT 1
DESCRIPTION		(A) REVENUE PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME
CLASS ACTION SETTLEMENT PROCE		107.	107.	107.
ROMARK LABORATORIES, LC - ORD INCOME	INARY	-1,167.	0.	-1,167.
TOTAL TO FORM 990-PF, PART I,	LINE 11 =	-1,060.	107.	-1,060.
FORM 990-PF	ACCOUNTI	NG FEES	S	TATEMENT 2
DESCRIPTION	(A) EXPENSES PER BOOKS		(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
ERNST & YOUNG US, LLP	9,012.	4,506	. 0.	4,506.
TO FORM 990-PF, PG 1, LN 16B	9,012.	4,506	. 0.	4,506.
FORM 990-PF O	THER PROFES	SIONAL FEES	S	TATEMENT 3
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME		
DESCRIPTION	EXPENSES PER BOOKS	NET INVEST- MENT INCOME	ADJUSTED NET INCOME	CHARITABLE PURPOSES
DESCRIPTION INVESTMENT MANAGEMENT FEES TO FORM 990-PF, PG 1, LN 16C	EXPENSES	MET INVEST- MENT INCOME	ADJUSTED NET INCOME 0.	CHARITABLE PURPOSES 0.
INVESTMENT MANAGEMENT FEES	EXPENSES PER BOOKS 14,595.	NET INVEST- MENT INCOME 14,595	ADJUSTED NET INCOME 0. 0.	CHARITABLE
INVESTMENT MANAGEMENT FEES TO FORM 990-PF, PG 1, LN 16C	EXPENSES PER BOOKS 14,595.	NET INVEST- MENT INCOME 14,595 14,595 ES (B) NET INVEST-	ADJUSTED NET INCOME 0. 0. S (C) ADJUSTED	CHARITABLE PURPOSES 0.
INVESTMENT MANAGEMENT FEES TO FORM 990-PF, PG 1, LN 16C FORM 990-PF	EXPENSES PER BOOKS 14,595. 14,595. TAX (A) EXPENSES	NET INVEST- MENT INCOME 14,595 14,595 (B) NET INVEST- MENT INCOME	ADJUSTED NET INCOME 0. 0. C) ADJUSTED S ADJUSTED NET INCOME 0.	CHARITABLE PURPOSES 0. 0. TATEMENT 4 (D) CHARITABLE

FORM 990-PF	OTHER EXPENSES		STATEMENT 5	
DESCRIPTION	(A)	(B)	(C)	(D)
	EXPENSES	NET INVEST-	ADJUSTED	CHARITABLE
	PER BOOKS	MENT INCOME	NET INCOME	PURPOSES
NYS FILING FEE	250.	0.	0.	250.
ROMARK LABORATORIES	47.	47.		0.
TO FORM 990-PF, PG 1, LN 23	297.	47.	0.	250.

FORM 990-PF OTHER INCREASES IN	NET ASSET	S OR FU	ND BALANCES	STATEMENT 6
DESCRIPTION				AMOUNT
COST BASIS ADJUSTMENT ON SALE OF	DONATED S	STOCK		79,850.
TOTAL TO FORM 990-PF, PART III, I	INE 3			79,850.
FORM 990-PF U.S. AND STATE	CITY GOV	ERNMENT	OBLIGATIONS	STATEMENT 7
	U.S.	OTHER		
DESCRIPTION	GOV'T	GOV'T	BOOK VALUE	FAIR MARKET VALUE
65,000 FHLB 4.125% 3/13/20	GOV'T X		72,475.	VALUE 67,992.
65,000 FHLB 4.125% 3/13/20 60,000 FHLB 1.625% 6/14/19	GOV'T X X		72,475. 60,736.	VALUE 67,992. 59,779.
65,000 FHLB 4.125% 3/13/20 60,000 FHLB 1.625% 6/14/19 55,000 US TREASURY NOTES 1.375	GOV'T X X X		72,475. 60,736. 55,335.	VALUE 67,992. 59,779. 54,957.
65,000 FHLB 4.125% 3/13/20 60,000 FHLB 1.625% 6/14/19	GOV'T X X		72,475. 60,736.	VALUE 67,992. 59,779. 54,957. 93,471.
65,000 FHLB 4.125% 3/13/20 60,000 FHLB 1.625% 6/14/19 55,000 US TREASURY NOTES 1.375 95,000 US TREASURY NOTES 1.000	GOV'T X X X X		72,475. 60,736. 55,335. 93,798.	VALUE 67,992. 59,779. 54,957.
65,000 FHLB 4.125% 3/13/20 60,000 FHLB 1.625% 6/14/19 55,000 US TREASURY NOTES 1.375 95,000 US TREASURY NOTES 1.000 50,000 US TREASURY NOTES 2.000	GOV'T X X X X X		72,475. 60,736. 55,335. 93,798. 51,774.	VALUE 67,992. 59,779. 54,957. 93,471. 50,047.
65,000 FHLB 4.125% 3/13/20 60,000 FHLB 1.625% 6/14/19 55,000 US TREASURY NOTES 1.375 95,000 US TREASURY NOTES 1.000 50,000 US TREASURY NOTES 2.000 90,000 US TREASURY NOTES 1.625	GOV'T X X X X X X X		72,475. 60,736. 55,335. 93,798. 51,774. 90,192.	VALUE 67,992. 59,779. 54,957. 93,471. 50,047. 87,680. 90,253.
65,000 FHLB 4.125% 3/13/20 60,000 FHLB 1.625% 6/14/19 55,000 US TREASURY NOTES 1.375 95,000 US TREASURY NOTES 1.000 50,000 US TREASURY NOTES 2.000 90,000 US TREASURY NOTES 1.625 90,000 US TREASURY NOTES 2.375	GOV'T X X X X X X X	GOV'T	72,475. 60,736. 55,335. 93,798. 51,774. 90,192. 92,606.	VALUE 67,992. 59,779. 54,957. 93,471. 50,047. 87,680.

FORM 990-PF	CORPORATE STOCK		STATEMENT 8
DESCRIPTION		BOOK VALUE	FAIR MARKET VALUE
300 ABBOT LABORATORIES		9,306.	17,120.
200 ABBVIE INC		7,439.	19,342.
300 ACTIVISION BLIZZARD		19,209.	18,995.
200 ALBEMARLE CORP		23,841.	25,578.
25 ALPHABET INC		11,519.	26,160.
25 AMAZON COM INC		7,260.	29,236.
125 AMGEN INC		9,766.	21,738.
5 APPLE INC		353.	845.
973 BANK OF AMERICA CORP		6,256.	28,723.
135 BERKSHIRE HATHAWAY		10,895.	26,760.
375 BRISTOL-MYERS SQUIBB		19,213.	22,980.
550 CHARLES SCHWAB CORP		22,625.	28,254.
375 CHECK PT SOFTWARE		22,859.	38,858.
170 CHEVRON CORPORATION		12,149.	21,281.
125 CHUBB LTD		6,410.	18,266.
575 CISCO SYSTEMS INC		14,719.	22,023.
625 CORNING INC		7,377.	19,994.

THE MONTGOMERY FAMILY FOUNDATION		26-6620815
245 DUKE ENERGY CORP	19,110.	20,607.
150 ECOLAB INC	18,320.	20,127.
693 ENBRIDGE INC	24,859.	27,103.
110 FACEBOOK INC	10,652.	19,411.
450 FLIR SYSTEMS INC	14,578.	20,979.
95 GENERAL DYNAMICS CO	16,610.	19,328.
75 GOLDMAN SACHS GROUP	10,990.	19,107.
450 GRANITE CONSTRUCTION	23,718.	28,544.
505 INTEL CORPORATION	8,301.	23,310.
150 JOHNSON & JOHNSON	8,814.	20,958.
123 JPMORGAN CHASE & CO	6,659.	13,154.
225 LIFE STORAGE INC	5,652.	20,040.
235 LOWES COMPANIES INC	5,167.	21,840.
145 MASTERCARD INC	2,256.	21,947.
250 MICROSOFT CORP	5,525.	21,385.
320 NUCOR CORP	14,144.	20,346.
110 NVIDIA CORP	11,897.	21,285.
120 PALO ALTO NETWORKS	8,097.	17,393.
100 PARKER-HANNIFIN CORP	12,173.	19,958.
210 PEPSICO INCORPORATED	11,485.	25,183.
185 PNC FINANCIAL SRVCS	12,310.	26,694.
175 PROCTER & GAMBLE	10,732.	16,079.
350 SCHLUMBERGER LTD	21,045.	23,587.
100 SERVICE NOW INC	12,676.	13,039.
350 SOUTHERN COMPANY	16,519.	16,832.
400 STARBUCKS CORP	15,080.	22,972.
250 TJX COMPANIES INC	14,988.	19,115.
100 UNITED PARCEL SERVICE	5,282.	11,915.
150 UNITED RENTALS INC	15,949.	25,787.
100 UNIVERSAL DISPLAY CO	11,396.	17,265.
350 VERIZON COMMUNICATION	13,459.	18,526.
225 WALT DISNEY CO	21,445.	24,190.
400 WELLS FARGO BK N A	11,131.	24,268.
150 ZIMMER BIOMET HLDGS	5,924.	18,101.
1,150 FIRST TRUST PREFERRED	23,184.	23,012.
400 SCHWAB US SMALL CAP ETF	25,456.	27,896.
1,969.69 TEMPLETON GLOBAL BOND	23,372.	23,341.
1,000 VANGUARD SHORT TERM	10,621.	10,630.
225 VENTAS INC	12,349.	13,502.
TOTAL TO FORM 990-PF, PART II, LINE 10B	733,121.	1,184,909.
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FORM 990-PF C	ORPORATE BONDS		STATEMENT 9	
DESCRIPTION		BOOK VALUE	FAIR MARKET VALUE	
25,000 ANHEUSER-BUSCH INC 1.9%		25,043.	24,949	
10,000 ANHEUSER-BUSCH, INC 5%	10,454.	10,327		
30,000 APPLE INC 2.85%	30,605.	30,494		
25,000 CATERPILLAR INC 3.9%	26,309.	26,196		
25,000 COMCAST CORP 3.125%		25,450.	25,563	
10,000 CVS HEALTH CORP 4.125%	10,572.	10,372		
20,000 CVS HEALTH CORP 2.75%		20,159.	19,670	
15,000 DUKE ENERGY CORP 2.1%		15,013.	15,015	
25,000 GENERAL MILLS IN 3.15%		25,672.	25,470	
10,000 GEORGIA PWR CO 5.4%		10,181.	10,139	
25,000 JOHN DEERE CAP 2.8%		25,238.	25,077	
25,000 JPMORGAN CHASE & CO 4.35%	26,912.	26,472		
40,000 MICROSOFT CORP 2.375%	40,358.			
20,000 NORFOLK SOUTHERN 5.9%	21,138.			
10,000 SOUTHERN COMPANY 2.45%		10,034.	10,028	
25,000 U S BANCORP 3.1%		24,970.	24,720	
TOTAL TO FORM 990-PF, PART II, LINE 10C		348,108.	345,101.	
FORM 990-PF	OTHER ASSETS		STATEMENT 10	
DESCRIPTION	BEGINNING OF YR BOOK VALUE	END OF YEAR BOOK VALUE	FAIR MARKET VALUE	
ROMARK LABORATORIES, LC	-164,876.	-167,291.	312,500	
TO FORM 990-PF, PART II, LINE 15	-164,876.	-167,291.	312,500	
				

	IST OF OFFICERS, DIRECTORS ND FOUNDATION MANAGERS		STATEMENT 11	
NAME AND ADDRESS	TITLE AND AVRG HRS/WK		EMPLOYEE BEN PLAN CONTRIB	EXPENSE
ROBERT L. MONTGOMERY 5784 OLD LAKE SHORE ROAD LAKE VIEW, NY 14085	PRESIDENT/TRUS	TEE 0.	0.	0.
CAROLYN H. MONTGOMERY 5784 OLD LAKE SHORE ROAD LAKE VIEW, NY 14085	TREASURER/TRUS	TEE 0.	0.	0.
LISA M. HILL 132 TURTLEBACK ROAD NEW CANAAN, CT 06231	TRUSTEE 1.00	3,279.	0.	0.
KAREN M. RISLEY 293 WEST MAIN STREET AMSTON, CT 06231	TRUSTEE 1.00	3,279.	0.	0.
KATHRYN M. CAMBI, M.D. 2 ROCCO DRIVE EAST LYME, CT 06333	TRUSTEE 1.00	3,279.	0.	0.
TOTALS INCLUDED ON 990-PF, PAGE 6	, PART VIII	9,837.	0.	0.

FORM 990-PF

GRANT APPLICATION SUBMISSION INFORMATION PART XV, LINES 2A THROUGH 2D

STATEMENT 12

NAME AND ADDRESS OF PERSON TO WHOM APPLICATIONS SHOULD BE SUBMITTED

ROBERT L. MONGTOMERY, JR. 5784 OLD LAKE SHORE ROAD LAKE VIEW, NY 14085

TELEPHONE NUMBER

(716) 627-4686

FORM AND CONTENT OF APPLICATIONS

REQUEST SHOULD CONTAIN A DESCRIPTION OF THE ORGANIZATION, ITS MANAGEMENT, ITS REASON FOR BEING, AND SPECIFICALLY THE INTENDED USE OF THE GRANT.

ANY SUBMISSION DEADLINES

N/A

RESTRICTIONS AND LIMITATIONS ON AWARDS

PRIMARILY, BUT NOT EXCLUSIVELY, LIMITED TO THE WESTERN NY AREA, EDUCATIONAL, RELIGIOUS, HEALTH RELATED, CULTURAL AND SCIENTIFIC RESEARCH PROGRAMS, INCLUDING SUCH PROGRAMS WHICH MIGHT BENEFIT CHILDREN AND THE ELDERLY AND SUCH INSTITUTIONS AS SHALL BE DETERMINED BY THE TRUSTEES, IN THEIR SOLE DISCRETION AS ENHANCING THE OVERALL QUALITY OF LIFE IN THE AREAS' SERVED.