Department of the Treasury Internal Revenue Service

Return of Private Foundation
or Section 4947(a)(1) Trust Treated as Private Foundation
Do not enter social security numbers on this form as it may be made public. ► Go to www.irs.gov/Form990PF for instructions and the latest information.

OMB No 1545-0052

Open to Public Inspection

F	or ca	lendar year 2017 or tax year beginning_			, 2017,	, and endi	ng			<u>, 20 </u>
1	Name (of foundation DOUGLAS A. HIRSCH &	HOLL	S. ANDER	SEN FAMII	·Υ	A	Employer identifi	cation numb	er
	FOU	NDATION, INC.						30-021894	8	
_		er and street (or P O box number if mail is not delivered	to street a	iddress)		Room/suite	В	Telephone number	er (see instruc	tions)
	895	PARK AVENUE				2C		(212) 44	0-0800	
-	City or	town, state or province, country, and ZIP or foreign po								
							C	If exemption applica pending, check here		▶∐-
	NEW	YORK, NY 10075						, •		
G	Che	ck all that apply Initial return		Initial return	of a former p	oublic char	ıty 🛭 D	1 Foreign organizat	ions, check here	▶∟
		Final return		Amended ret	turn			2 Foreign organizat		•
_		X Address change		Name change				85% test, check h computation		▶∐ .
H	Che	ck type of organization X Section 501				0	Y/E	If private foundation	ı status was tern	ninated —
\perp	s	ection 4947(a)(1) nonexempt charitable trust		her taxable pr			Щ,	under section 507(b		
ł	Fair	1	_	nethod 🔼 Ca	ash Acc	rual	F	If the foundation is	ın a 60-month te	ermination
	end		ther (sp	ecify)				under section 507(b))(1)(B), check he	re . ▶
_	16)	▶\$ 397,099. (Part I,	column (d) must be on ca	sh basis)		!_			
j	art I	Analysis of Revenue and Expenses (The	(4)	Revenue and	(b) Net inve	estment	(c)	Adjusted net		ursements arıtable
,		total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in	exp	benses per books	incon		(0)	income	pur	ooses
_		column (a) (see instructions))						N/A	(cash b	asis only)
	1	Contributions, gifts, grants, etc., received (attach schedule).	ļ	422,880.						
	2	Check Lift the foundation is not required to attach Sch B,		447		117			አመርመ 1	
	3	Interest on savings and temporary cash investments.		447.		447.			ATCH 1	
i	4	Dividends and interest from securities		14.		14.			MICH 2	<u> </u>
C.	5a	Gross rents								
Ç	þ	Net rental income or (loss)	-							· ·
急		Net gain or (loss) from sale of assets not on line 10 Gross sales price for all		0.						
Revenue/2S		assets on line 6a	<u> </u>			0.	-			
é	7	Capital gain net income (from Part IV, line 2) .				0.				
	8	Net short-term capital gain								
1	9 10a	Income modifications								 ;
Œ		and allowances								
-		Less Cost of goods sold .								
K		Gross profit or (loss) (attach schedule) Other promo (attach schedule) ATCH 3		12.		12.				 -
2	11 12	Other income (attach schedule) ATCH 3 Total Add lines 1 through 11		423,353.		473.		0.		- 1
≡	13			0.						<u>'</u>
S	14	Compensation of officers, directors, trustees, etc Other employee salaries and wages				+				
enses	15									
pe	162	Legal fees (attach schedule)								· · ·
Щ	h	Accounting fees (attach schedule)ATCH 4		4,000.		2,000.	1	RECEIV	/ED	2,000.
Ş	ء ا	Other professional fees (attach schedule)								T
ati	17	Interest					2	- A(C) + C =	7	2
isti	18	Taxes (attach schedule) (see instructions)					12	NOV 2 0	K018	기
Ē	19	Pension plans, employee benefits								2
Ę	20	Occupancy		·			\mathbb{L}^{-}	OGDEN		
<u>ح</u>	21	Travel, conferences, and meetings					<u> </u>	OUDEN,	UT	J
anc	22	Printing and publications								
Ď	23	Other expenses (attach schedule) ATCH .5.		100.						100.
atir	23 24 25	Total operating and administrative expenses								
ēra		Add lines 13 through 23	L	4,100.		2,000.				2,100
o	25	Contributions, gifts, grants paid		527,025.						527,025.
_	26	Total expenses and disbursements Add lines 24 and 25		531,125.		2,000.		0.		529,125.
	27	Subtract line 26 from line 12								_
	a	Excess of revenue over expenses and disbursements		-107,772.						of .
	ь	Net investment income (if negative, enter -0-)				0.				<i>,</i> /-
_	С	Adjusted net income (if negative, enter -0-)						0.		224, (
			-						_ ^^	0 DE (0047)

JSA For Paperwork Reduction Act Notice, see instructions $^{7\text{E}1410\ 1\ 000}$ $65601X\ H515$

_		Attached schedules and amounts in the	Beginning of year	End o	of year			
ľ	art II	Balance Sheets description column should be for end-of-year amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value			
	1	Cash - non-interest-bearing	. 3,000.					
		Savings and temporary cash investments	FA1 071	392,999.	392,999.			
		Accounts receivable >						
		Less allowance for doubtful accounts ▶						
		Pledges receivable ▶						
		Less allowance for doubtful accounts ▶	L					
		Grants receivable						
		Receivables due from officers, directors, trustees, and other	I					
		disqualified persons (attach schedule) (see instructions)						
		Other notes and loans receivable (attach schedule)						
		Less allowance for doubtful accounts	ľ					
ß		Inventories for sale or use			<u> </u>			
ssets		Prepaid expenses and deferred charges						
As		Investments - U S and state government obligations (attach schedule).						
		Investments - corporate stock (attach schedule)			-			
		Investments - corporate bonds (attach schedule)						
		Investments - land, buildings,		-	1			
		and equipment basis Less accumulated depreciation			,			
		(attach schedule)						
		Investments - mortgage loans						
	14	Land, buildings, and						
		equipment basis Less accumulated depreciation						
		(attach schedule)						
		Other assets (describe >) Total assets (to be completed by all filers - see the	<u> </u>					
		instructions Also, see page 1, item I)		397,099.	397,099.			
_			-	331,73321	37,753			
		Accounts payable and accrued expenses	•		1			
w	18	Grants payable			1 :			
ţį	19	Deferred revenue			}			
Ē		Loans from officers, directors, trustees, and other disqualified persons			1			
<u>.</u>	21	Mortgages and other notes payable (attach schedule)			- !			
_	22	Other liabilities (describe)	·		1 :			
	23	Total liabilities (add lines 17 through 22)	0.	0.	1			
_		Total liabilities (add lines 17 through 22)	<u> </u>		1			
ý		Foundations that follow SFAS 117, check here Land complete lines 24 through 26, and lines 30 and 31	' .					
S			1		1			
ā	24	Unrestricted	·		1			
Ва	25	Temporarily restricted			- !			
þ	26	Permanently restricted) 		1			
Ξ		Foundations that do not follow SFAS 117, check here ► X and complete lines 27 through 31.	J					
-		· ·	504,871.	397,099.				
S		Capital stock, trust principal, or current funds	' 	3317033.	-			
se	28	Paid-in or capital surplus, or land, bldg , and equipment fund			1			
As	29	Retained earnings, accumulated income, endowment, or other funds		397,099.	1			
et	30	Total net assets or fund balances (see instructions)	· 	337,033.	1			
Z		Total liabilities and net assets/fund balances (see	1	397,099.	ì			
		Analysis of Changes in Net Assets or Fund Bal	· · · · · · · · · · · · · · · · · · ·	3377033.				
		al net assets or fund balances at beginning of year - Par		must agree with	T			
7					504,871			
_		-of-year figure reported on prior year's return)			-107,772			
		er amount from Part I, line 27a			107,772			
		er increases not included in line 2 (itemize)			397,099			
4 Add lines 1, 2, and 3								
		reases not included in line 2 (itemize)	in line E) Dowl II - this is a	(h) line 20	397,099			
_6	lota	al net assets or fund balances at end of year (line 4 minu	ıs iine 5) - Paπ II, column ((b), line 30 6	597,099			

Page	7

(a) List and de	s and Losses for Tax on Investigation investigation investigation investigation in the state of	example, real estate,	(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)		
1 a							
_ <u>b</u>							
С			_				
d							
e		(a) Cook on other book					
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(, ()				
_a							
<u> </u>		-					
e							
	showing gain in column (h) and owned	by the foundation on 12/31/69	//	Gains (Col. (b) as	no minus		
(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	(I) Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col. (h))				
a							
b							
C							
d							
e							
2 Constal gain not income	or (not capital loss) If ga	ain, also enter in Part I, line 7					
2 Capital gain net income	l 11 (10	oss), enter -0- in Part I, line 7	2				
	gain or (loss) as defined in sections Part I, line 8, column (c) See ins						
	Under Section 4940(e) for Rec		3				
	the section 4942 tax on the distrib		ase perio	d?	Yes X No		
·	n't qualify under section 4940(e) [
	mount in each column for each year	ar, see the instructions before maki	ng any er	ntries (d)			
(a) Base period years	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets		Distribution ra			
Calendar year (or tax year beginning in)	279,790.	364, 685.		(col (b) divided by	0.767210		
2016 2015	186,060.	254,862.			0.730042		
2014	203,028.	241,176.			0.841825		
2013	189,090.	231,439.			0.817019		
2012	296,910.	278,480.			1.066181		
2012							
2 Total of line 1, column	(d)		2		4.222277		
	tio for the 5-year base period - divid						
	e foundation has been in existence		3		0.844455		
4 Enter the net value of r	noncharitable-use assets for 2017 f	from Part X, line 5	4		373,715.		
5 Multiply line 4 by line 3			5		315,586.		
6 Enter 1% of net investr	nent income (1% of Part I, line 27b)		6				
			7		315,586.		
	utions from Part XII, line 4		8		529,125.		
If line 8 is equal to or Part VI instructions	greater than line 7, check the box	x in Part VI, line 1b, and complete		t using a 1% ta	x rate See ti		

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	tVI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see	netru		aye 🕶	
_		nsu u	Cuon)	
1a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1			1	
	Date of ruling or determination letter (attach copy of letter if necessary - see instructions)		 -	 0.	
D			-	 i	
	here X and enter 1% of Part I, line 27b			j	
С	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of J Part I, line 12, col (b) ·			}	
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-)				
3	Add lines 1 and 2			0.	
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-)			0.	
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0			0.	
6	Credits/Payments				
а	2017 estimated tax payments and 2016 overpayment credited to 2017 6a 440.			-	
Ь	Exempt foreign organizations - tax withheld at source				
c	Tax paid with application for extension of time to file (Form 8868)			ì	•
d	Backup withholding erroneously withheld				
7	Total credits and payments Add lines 6a through 6d			40.	
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached 8				
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed				
10	Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			40.	
11	Enter the amount of line 10 to be Credited to 2018 estimated tax > 440. Refunded > 11				
	t VII-A Statements Regarding Activities				
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it		Yes	No_	
	participate or intervene in any political campaign?	1a		X	
þ	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the			v	
	instructions for the definition	1b		X	
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials				
	published or distributed by the foundation in connection with the activities			_	
C	Did the foundation file Form 1120-POL for this year?	1c		X ,	
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year				
	(1) On the foundation ►\$ (2) On foundation managers ►\$				
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed			1	
	on foundation managers ' > \$			1	
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2			
	If "Yes," attach a detailed description of the activities				
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of	3			
	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	4a		. X	
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4b		N/A	
	If "Yes," has it filed a tax return on Form 990-T for this year?	5		X	
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?			ì	
•	•				
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either • By language in the governing instrument, or	1 1		Ì	
	By state legislation that effectively amends the governing instrument so that no mandatory directions that				
	conflict with the state law remain in the governing instrument?	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	Х		
	Enter the states to which the foundation reports or with which it is registered. See instructions.			<u> </u>	
	NY,				
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General			لـــا	
	(or designate) of each state as required by General Instruction G ² If "No," attach explanation	8b	X	1	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or			- 1	-
	4942(j)(5) for calendar year 2017 or the tax year beginning in 2017? See the instructions for Part XIV If "Yes,"			v	
	complete Part XIV	9		<u> </u>	J
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their			х	
	names and addresses	10		Λ.	

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Par	t VII-A Statements Regarding Activities (continued)					
			Yes	No		
11 •	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the					
•	meaning of section 512(b)(13)? If "Yes," attach schedule See instructions	11		Х		
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified	}				
	person had advisory privileges? If "Yes," attach statement See instructions	12		Х		
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Х			
	Website address ► N/A					
14	The books are in care of D.A. HIRSCH/H.S. ANDERSEN FDN Telephone no 212-440-	-080)			
Located at ▶895 PARK AVENUE NEW YORK, NY ZIP+4 ▶ 10075						
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here		▶			
•	and enter the amount of tax-exempt interest received or accrued during the year		•			
16	At any time during calendar year 2017, did the foundation have an interest in or a signature or other authority		Yes	No		
	over a bank, securities, or other financial account in a foreign country?	16		X		
	See the instructions for exceptions and filing requirements for FinCEN Form 114 If "Yes," enter the name of					
_	the foreign country	L				
Par	t VII-B Statements Regarding Activities for Which Form 4720 May Be Required		.			
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No		
1a	During the year, did the foundation (either directly or indirectly)					
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?					
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a					
	disqualified person 1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.					
	(b) Furnish goods, services, or recinites to (or accept them from) a disqualities person.					
	(4) Lay compensation to, or pay or reimbarde the expenses of, a disquarmed person					
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)?					
	the benefit of use of a disqualified person).					
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the					
	foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days)					
	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations					
D	section 53 4941(d)-3 or in a current notice regarding disaster assistance? See instructions	1b		N/A		
	Organizations relying on a current notice regarding disaster assistance, check here			1		
c	Did-the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that					
ĭ	were not corrected before the first day of the tax year beginning in 2017?	1c		N/A		
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private					
	operating foundation defined in section 4942(j)(3) or 4942(j)(5))					
а	At the end of tax year 2017, did the foundation have any undistributed income (lines 6d and					
	6e, Part XIII) for tax year(s) beginning before 2017?					
•	If "Yes," list the years ,,,,,,					
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)					
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to					
	all years listed, answer "No" and attach statement - see instructions)	2b		N/A		
c	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here					
	·					
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise					
	at any time during the year?					
· b	If "Yes," did it have excess business holdings in 2017 as a result of (1) any purchase by the foundation or					
	disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the					
	Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of					
	the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the	-	 			
	foundation had excess business holdings in 2017)	3b	<u> </u>	N/A		
	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		.X.		
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its	45	—			
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2017?	4b	L	Γ		

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Pai	t VII-B	Statements Regarding Activities	for Which Form	4720 May Be Req	uired (continued)			
5a	During the	year, did the foundation pay or incur any amo	unt to				Yes	No
	(1) Carry	on propaganda, or otherwise attempt to influe	nce legislation (sectio	n 4945(e))?	. Yes X No	,		1
	(2) Influer	nce the outcome of any specific public ele	ction (see section 4	1955), or to carry on	η,		}	
	dırectl	y or indirectly, any voter registration drive?			. Yes X No	,		!
		e a grant to an individual for travel, study, or o			1 1 1	,		
		e a grant to an organization other than a						
	section	n 4945(d)(4)(A)? See instructions			Yes X No	,		
		e for any purpose other than religious, ch						'
		ses, or for the prevention of cruelty to children				,		
b		swer is "Yes" to 5a(1)-(5), did any of the				, <u>. </u>		1
	Regulation	s section 53 4945 or in a current notice regard	ding disaster assistan	ce? See instructions.		5b	'	N/A
	·Organizati	ons relying on a current notice regarding disas	ter assistance, check	here				
c	If the ans	swer is "Yes" to question 5a(4), does the	foundation claim e	xemption from the t	ax			
		maintained expenditure responsibility for the g		•		,		
		ttach the statement required by Regulations se			_		ŀ	
6a		oundation, during the year, receive any fun			ns		1	i
		nal benefit contract?	•			;		لـ _ا
ь		undation, during the year, pay premiums, dire				6b		Х
		6b, file Form 8870	•	•				3
7a		e during the tax year, was the foundation a pa	arty to a prohibited tax	shelter transaction?	Yes X No	,	L	!
Ь		id the foundation receive any proceeds or have				I .		N/A
Pai	rt VIII	Information About Officers, Director	s, Trustees, Fou	ndation Managers	s, Highly Paid Emp	oloyees,		
1		and Contractors ficers, directors, trustees, foundation n	anagore and their	componentian Soc	instructions			
<u> </u>	LIST all OI		(b) Title, and average	(c) Compensation	(d) Contributions to	(e) Exper		unt
		(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	employee benefit plans and deferred compensation		llowance	
ATC	н 6			0.	. 0.			0.
		•						
2		ation of five highest-paid employees	(other than thos	e included on line	e 1 - see instructi	ons). If r	one,	enter
	"NONE."	· · · · · · · · · · · · · · · · · · ·			(d) Contributions to			
(a)	Name and a	ddress of each employee paid more than \$50,000	(b) Title, and average hours per week	(c) Compensation	employee benefit plans and deferred	(e) Exper	ise accor	
			devoted to position		compensation		1104461100	
	NONE							0.
			,					
				·				
Total	number o	f other employees paid over \$50,000	- 	<u> </u>	<u></u> >			
						Form 99	0-PF	(2017)

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3 N/A

Total. Add lines 1 through 3

All other program-related investments. See instructions

Pa	t X	Minimum Investment Return (All domestic foundations must complete this part. Fore see instructions.)	ign fo	undations,
1	Fair	market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purp	oses		
а	Aver	age monthly fair market value of securities	1a	NONE
b	Aver	age of monthly cash balances	1b	379,406.
С	Fair	market value of all other assets (see instructions)	1c	NONE
d	Tota	I (add lines 1a, b, and c)	1d	379,406.
е	Redu	iction claimed for blockage or other factors reported on lines 1a and		
	1c (a	attach detailed explanation)		
2		usition indebtedness applicable to line 1 assets	2	
3	Subt	ract line 2 from line 1d	3	379,406.
4	Cash	deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see		
	ınstrı	uctions)	4	5,691.
5	Net	value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4.	5	373,715.
6	Mini	mum investment return. Enter 5% of line 5	6	18,686.
Pai	t XI	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating four and certain foreign organizations, check here ▶ and do not complete this part)	ndation	s
1	Mınır	num investment return from Part X, line 6	1	18,686.
2 a	Tax	on investment income for 2017 from Part VI, line 5	Î	
- h	Incor	me tax for 2017 (This does not include the tax from Part VI). 2b		
		lines 2a and 2b	2c	
3		ibutable amount before adjustments Subtract line 2c from line 1	3	18,686.
4		overies of amounts treated as qualifying distributions	4	
5		lines 3 and 4	5	18,686.
6		uction from distributable amount (see instructions).	6	
7		ributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII,	Ť	
•		1	7	18,686.
			<u> </u>	
Pai	t XII	Qualifying Distributions (see instructions)		
1	Amo	unts paid (including administrative expenses) to accomplish charitable, etc., purposes		
а		enses, contributions, gifts, etc - total from Part I, column (d), line 26	1a	529,125.
		ram-related investments - total from Part IX-B	1b	
2		unts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
_		oses	2	
3		unts set aside for specific charitable projects that satisfy the		
_		ability test (prior IRS approval required)	3a	
		n distribution test (attach the required schedule)	3b	
4		fying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	529,125.
5		ndations that qualify under section 4940(e) for the reduced rate of tax on net investment income		,-201
-		r 1% of Part I, line 27b See instructions	5	0.
6		sted qualifying distributions. Subtract line 5 from line 4	6	529,125.
U		:: The amount on line 6 will be used in Part V, column (b), in subsequent years when ca		
	HOLE	qualifies for the section 4940(e) reduction of tax in those years	iculatii	ng whether the loundation

Form **990-PF** (2017)

Ρa	rt XIII Undistributed Income (see instr	uctions)			
4	Distributable amount for 2017 from Part XI,	(a) Corpus	(b) Years prior to 2016	(c) 2016	(d) 2017
•					18,686.
_	line 7				
	Undistributed income, if any, as of the end of 2017			NONE	
	Enter amount for 2016 only	<u></u>	NONE	NONE	
			NONE		
	Excess distributions carryover, if any, to 2017 282, 986.				
	177 510				
	100 072				
	172 217				
	261 556				
	rioin 2010 L	1,086,349.			
	Total of lines 3a through e	1,000,349.			
4	Qualifying distributions for 2017 from Part XII, line 4 \(\bigstar{Delta}\) \(\bigstar				
а	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)				
_					18,686.
	Applied to 2017 distributable amount	510,439.			
	Remaining amount distributed out of corpus Excess distributions carryover applied to 2017	0_0,100			
3	(If an amount appears in column (d), the same amount must be shown in column (a))				
6	Enter the net total of each column as				
	indicated below:				
а	Corpus Add lines 3f, 4c, and 4e Subtract line 5	1,596,788.			
ь	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 - see instructions				
е	Undistributed income for 2016 Subtract line 4a from line 2a Taxable amount - see				
	instructions			NONE	
f	Undistributed income for 2017 Subtract lines				
	4d and 5 from line 1 This amount must be				
	distributed in 2018	·-··			NONE
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	202 006			
	applied on line 5 or line 7 (see instructions)	282,986.			
9	Excess distributions carryover to 2018.	1,313,802.			
	Subtract lines 7 and 8 from line 6a	1,515,002.	<u> </u>		 .
	Analysis of line 9 Excess from 2013 177, 518.				
	100 073				
	172 217				
	LACESS HOIT 2013				
	Excess 110/11 2010				
е	Excess from 2017				

Form **990-PF** (2017)

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

JSA 7E1490 1 000

65601X H515

factors

c Any submission deadlines

PAGE 12

Part XV Supplementary Information (continued)									
3 Grants and Contributions Paid Duri Recipient Name and address (home or business)	ng the Year or Appr	oved for F	uture Payment						
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount					
Name and address (home or business)	or substantial contributor	recipient	Contribution						
a Paid during the year				F07 00F					
SEE LIST ATTACHED	N/A	PC	GENERAL USE	527,025.					
•									
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	<u> </u>			507.005					
Total			▶ 3a	527,025.					
b Approved for future payment			,						
			,						
	,								
	•			İ					
			,						
			'						
Total			▶ 3b	'					

Part XVI-A Analysis of Income			T		
Enter gross amounts unless otherwise indica	(a)	(b)	(c)	section 512, 513, or 514 (d)	(e) Related or exempt function income
1 Program service revenue	Business code	Amount	Exclusion code	Amount	(See instructions)
a					
b					=
d					
е				·	
f					
g Fees and contracts from government ag	gencies				
Membership dues and assessments			1.4	4.4.7	
Interest on savings and temporary cash invest	ments -		14	447.	
Dividends and interest from securities	l b		11		
Net rental income or (loss) from real esta	l l				
a Debt-financed propertyb Not debt-financed property					
Net rental income or (loss) from personal pr	1 1				
Other investment income	1				
Gain or (loss) from sales of assets other than i	1 1				
Net income or (loss) from special events					
Gross profit or (loss) from sales of invent	·				
Other revenue a				12.	
<u> </u>					
d					
e					
Subtotal Add columns (b), (d), and (e)				473.	
Line No. Explain below how each accomplishment of the fo					
N/A					
	- .				
					
A .					Form 990-PF (20

Form 9	90-PF (20	17)	DOUGLAS A	A. HIRSC	H & HOLLY	S. AN	NDERSEN	FAMILY	30-021	8948	Pa	ge 13
Part	XVII	Information R Exempt Organ		nsfers to	and Trans	action	s and R	elationship	s With None	chari	table	
(ın sectı organıza		than section	501(c)(3)	organizations) or in	section				Yes	No
		s from the reportir	-							4 - (4)		Х
												X
b	Other tra	r assets ansactions								1a(2)		
		s of assets to a no										X
		hases of assets fro										X
		al of facilities, equ										X
		bursement arrang										X
		s or loan guarante										X
		ormance of service of facilities, equipr										X
		nswer to any of the									fair m	arke
		the goods, other										
		any transaction of										
(a) Lin		(b) Amount involved	1		xempt organization				ransactions, and sha			
		N/A			-		N/A	_				
		-										
						\longrightarrow						
			_			$-\!\!+\!\!\!-$						
		· · · -										
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			<u> </u>									
									·			
	describe	oundation directly d in section 501(c complete the follo) (other than sec					ax-exempt org	ganizations	Y	es X] No
		(a) Name of organization	n	(b)	Type of organiza	tion		(c) De	escription of relation	ship		
N/A	A .								_			
	I do a		45-4 1 5				lules est st t		heat of my beautes	aa c-d	halef :	ID 4
	correct,	enalties of perjury, I decl and complete Declaration o	are that I have examin if preparer (other than ta	ied this return, ixpayer) is based	on all information of	which prep	oarer has any k	ements, and to the nowledge	best of my knowled	ge and	Dellet, II	is true
Sign		///		1	1/2/19	,	PRESIDÉ	יאיז	May the IR			
Here		ture officer or trustee		Date	11/7/10	Tit		7 IN T	with the pi		shown Yes	below? No
		Daniel Transport		Dec	-		т.	Data		DTIM		
Paid		Print/Type preparer's na TOHN D COOK	ime	Preparer	s signature	7	'	Date 11/08/2018	Ci,,ecc,	PTIN PO14	5018	2

Form **990-PF** (2017)

212-440-0800

Firm's EIN > 34-6565596

10005

Preparer

Use Only

Firm's name FRNST & YOUNG U.S. LLP

Firm's address ▶ 77 WATER STREET, 9TH FL

NY

NEW YORK,

Schedule B

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

Department of the Treasury
Internal Revenue Service
Name of the organization

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

2017

Employer identification number

DOUGLAS A. HIRSCH & HO FOUNDATION, INC.	DLLY S. ANDERSEN FAMILY	30-0218948			
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 fou	ndation			
	527 political organization				
Form 990-PF	X 501(c)(3) exempt private foundation				
	4947(a)(1) nonexempt charitable trust treated as a private foundation				
	501(c)(3) taxable private foundation				
Check if your organization is co	vered by the General Rule or a Special Rule.				
Note : Only a section 501(c)(7), instructions.	(8), or (10) organization can check boxes for both the General Rule and a S	Special Rule See			
General Rule					
-	ing Form 990, 990-EZ, or 990-PF that received, during the year, contributor property) from any one contributor. Complete Parts I and II. See instruction tributions.				
Special Rules					
regulations under sec 13, 16a, or 16b, and t \$5,000, or (2) 2% of t	escribed in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1 tions 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 that received from any one contributor, during the year, total contributions the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1 C	or 990-EZ), Part II, line s of the greater of (1) complete Parts I and II			
contributor, during the	escribed in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that respect to the section sof sections of the section of the section of cruelty to children or animals. Compless or for the prevention of cruelty to children or animals.	naritable, scientific,			
contributor, during the contributions totaled i during the year for an General Rule applies	escribed in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that relevant, contributions exclusively for religious, charitable, etc., purposes, but nore than \$1,000. If this box is checked, enter here the total contributions exclusively religious, charitable, etc., purpose. Don't complete any of the post to this organization because it received nonexclusively religious, charitable are during the year.	ut no such s that were received parts unless the e, etc , contributions			
990-EZ, or 990-PF), but it must	n't covered by the General Rule and/or the Special Rules doesn't file Sche answer "No" on Part IV, line 2, of its Form 990, or check the box on line h certify that it doesn't meet the filing requirements of Schedule B (Form 990)	H of its Form 990-EZ or on its			

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

For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF.

Name of organization DOUGLAS A. HIRSCH & HOLLY S. ANDERSEN FAMILY Employer identification number 30-0218948 FOUNDATION, INC.

Part I	Contributors (see instructions). Use duplicate cop	ies of Part I if additional space is ne	eeded
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	DOUGLAS A. HIRSCH 2009 CLAT 895 PARK AVENUE APT 2C NEW YORK, NY 10075	\$\$	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	DOUGLAS A. HIRSCH 2011 CLAT 895 PARK AVENUE APT 2C NEW YORK, NY 10075	\$\$.	Person Payroll Noncash (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)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (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)
(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 DOUGLAS A. HIRSCH & HOLLY S. ANDERSEN FAMILY FOUNDATION, INC.

Employer identification number 30-0218948

Part II	Noncash Property	(see instructions)	. Use duplicate co	pies of Part II if additional sp	ace is needed.

Part II	Moncash Property (see instructions). Use duplicate copies	or art in additional space is ne	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
	-	\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
<u>.</u>		<u> </u>	
(a) No. from Part I	(b) Description of noncash property given	FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		 \$	

Transferee's name, address, and ZIP + 4

(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
		

Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
		(a) Transfer of alf	
		(e) Transfer of gift	

Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

(a) No. from

Relationship of transferor to transferee

ATTACHMENT'1

7	_
TTACHMENT	PAGE 20
~	

	ADJUSTED NET INCOME	,	
	NET INVESTMENT INCOME	447.	447.
T ON TEMPORARY CASH INVESTMENTS	REVENUE AND EXPENSES PER BOOKS	- 447.	447.
INTEREST ON TEMPORARY			TOTAL '
FORM 990PF, PART I - INTEREST	DESCRIPTION	INTEREST ON CHECKING	

30-0218948

ATTACHMENT 2

	11
SECURITIES	
FROM	
INTEREST FROM	
AND	
DIVIDENDS AND	
1	
PART I	
990PF,	
FORM	

ADJUSTED NET INCOME	
INVESTMENT INCOME	14.
REVENUE AND. EXPENSES PER BOOKS	14.
,	TOTAL
•	•
DESCRIPTION	DIVIDENDS

ATTACHMENT 3

TNCOME
OTHER
ı -
PART
990 PF
FORM

NET INVESTMENT INCOME	12.	. 12.
REVENUE AND EXPENSES PER ROOKS	12.	12.
	,	TOTALS
NOT FEET A CARAC	MISCELLANEOUS INCOME	

ATTACHMENT 4

. ATTACHMENT 4 PAGE 23

FORM 990PF, PART I - ACCOUNTING FEES

CHARITABLE PURPOSES	2,000.	2,000.
ADJUSTED NET INCOME		
NET INVESTMENT INCOME	2,000.	2,000.
REVENUE AND EXPENSES PER BOOKS	4,000.	4,000.
,		TOTALS
DESCRIPTION	ERNST & YOUNG, LLP	

30-0218948

ATTACHMENT 5

EXPENSES	
OTHER	
1	!
Η	ļ
PART	-
990PF,	
FORM	

CHARITABLE	PURPOSES 100.	100.
ADJUSTED NET	INCOME	
NET INVESTMENT	INCOME	
REVENUE AND EXPENSES	PER BOOKS	100.
		TOTALS
	DESCRIPTION NYS ANNUAL FILING FEE	

ATTACHMENT 6

FORM 990PF, PART VIII - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES

9	S
MENT	GE 2
ATTACH	PA
7	

NAME AND ADDRESS	TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION	COMPENSATION	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	EXPENSE ACCT AND OTHER ALLOWANCES	•
DOUGLAS A. HIRSCH 895 PARK AVENUE APT 2C NEW YORK, NY 10075	PRESIDENT/PART-TIME				
HOLLY S. ANDERSEN 895 PARK AVENUE APT 2C NEW YORK, NY 10075	TREASURER/PART-TIME	·			
BARRY S. BERGER C/O SENECA CAPITAL ADVISORS, LLC 590 MADISON AVENUE, 9TH FLOOR NEW YORK, NY 10022	SECRETARY/PART-TIME				
	GRAND TOTALS	0	0	0	

-30-0218948

ATTACHMENT 7

FORM 990PF, PART XV - INFORMATION REGARDING FOUNDATION MANAGERS

DOUGLAS A. HIRSCH; 895 PARK AVENUE APT 2C, NEW YORK, NY 10075

. 65601X H515 PAGE 26

FORM 990-PF, PART XVI-A - ANALYSIS OF OTHER REVENUE

DOUGLAS A. HIRSCH & HOLLY S. ANDERSEN FAMILY

ATTACHMENT 8	AMOUNT FUNCTION INCOME	. 12.
	EXCLUSION	01
	AMOUNT	•
	BUSINESS CODE	
	DESCRIPTION	MISCELLANEOUS INCOME

TOTALS