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Department of the Treasury

Internal Revenue Service

DLN: 93491319006388

2017

OMB No 1545-0052

Return of Private Foundation

or Section 4947(a)(1) Trust Treated as Private Foundation Do not enter social security numbers on this form as it may be made public.

▶ Information about Form 990-PF and its instructions is at www.irs.gov/form990pf. Inspection For calendar year 2017, or tax year beginning 01-01-2017 , and ending 12-31-2017 A Employer identification number TRELLIS CHARITABLE FUND Number and street (or P O box number if mail is not delivered to street address) 3150 SOUTH ST NW 2B Room/suite B Telephone number (see instructions) (202) 966-3411 City or town, state or province, country, and ZIP or foreign postal code C If exemption application is pending, check here WASHINGTON, DC 20007 ☐ Initial return ☐ Initial return of a former public charity G Check all that apply D 1. Foreign organizations, check here 2 Foreign organizations meeting the 85% test, check here and attach computation ☐ Final return Amended return ☐ Name change Address change E If private foundation status was terminated under section 507(b)(1)(A), check here ✓ Section 501(c)(3) exempt private foundation **H** Check type of organization Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation I Fair market value of all assets at end ✓ Cash ☐ Accrual J Accounting method F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here of year (from Part II, col (c), line 16)▶\$ 36,785,738 Other (specify) (Part I, column (d) must be on cash basis) Part I Analysis of Revenue and Expenses (The total (d) Disbursements Revenue and (b) Net investment (c) Adjusted net for charitable of amounts in columns (b), (c), and (d) may not necessarily expenses per books purposes (cash basis only) income equal the amounts in column (a) (see instructions)) Contributions, gifts, grants, etc , received (attach 6.108.795 schedule) Check ► L $oxedsymbol{oxed}$ if the foundation is **not** required to attach 2 20.764 20.587 3 Interest on savings and temporary cash investments 678,741 4 Dividends and interest from securities 678,741 5a Net rental income or (loss) 2,496,884 6a Net gain or (loss) from sale of assets not on line 10 Gross sales price for all assets on line 6a Capital gain net income (from Part IV, line 2) 2,496,403 Net short-term capital gain Income modifications . . 10a Gross sales less returns and allowances Less Cost of goods sold b Gross profit or (loss) (attach schedule) Other income (attach schedule) **چ** 34,523 12 Total. Add lines 1 through 11 9.339.707 3,195,732 Compensation of officers, directors, trustees, etc 13 14 Other employee salaries and wages 15 Pension plans, employee benefits Operating and Administrative Expenses اروه Legal fees (attach schedule) . 236 <u>쏗</u> 12,850 Accounting fees (attach schedule) 6,425 75.215 75.215 Other professional fees (attach schedule) 17 ارجه 21,109 20.141 18 Taxes (attach schedule) (see instructions) 19 Depreciation (attach schedule) and depletion 23 23 20 21 Travel, conferences, and meetings 22 Printing and publications . 23 Other expenses (attach schedule) 196 136 24 Total operating and administrative expenses. Add lines 13 through 23 . . . 109,629 101,940 1,585,000 25 Contributions, gifts, grants paid 1.585.000 26 Total expenses and disbursements. Add lines 24 and 1,694,629 101,940 1,585,000 27 Subtract line 26 from line 12 Excess of revenue over expenses and 7,645,078 disbursements 3,093,792 Net investment income (if negative, enter -0-) **Adjusted net income**(If negative, enter -0-)

	2	Savings and temporary cash investments	647,160	1,344,211	1,344,211
	3	Accounts receivable ▶			
		Less allowance for doubtful accounts ▶			
	4	Pledges receivable ▶			
		Less allowance for doubtful accounts ▶			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons (attach schedule) (see instructions)			
	7	Other notes and loans receivable (attach schedule)			
		Less allowance for doubtful accounts ▶			
y,	8	Inventories for sale or use			
sets	9	Prepaid expenses and deferred charges	47,956	30,432	30,432
As	10a	Investments—U S and state government obligations (attach schedule)	4,194,382	5,313,778	5,229,761
	ь	Investments—corporate stock (attach schedule)	14,639,186	16,917,955	26,052,383
	С	Investments—corporate bonds (attach schedule)			
	11	Investments—land, buildings, and equipment basis ▶			
		Less accumulated depreciation (attach schedule) ▶			
	12	Investments—mortgage loans			
	13	Investments—other (attach schedule)	3,321,155	4,394,371	4,128,951
	14	Land, buildings, and equipment basis ►			
	1				

28,000,747

28,000,747

28,000,747

28,000,747

2 3

4

5

6

22,849,839 7,645,078

30,494,917

2,494,170

28,000,747 Form 990-PF (2017)

22,849,839

22,849,839

22,849,839

36,785,738

Less accumulated depreciation (attach schedule) ▶ 2,720 15 Other assets (describe > _ 16 Total assets (to be completed by all filers—see the instructions Also, see page 1, item I) 22,849,839 17 Accounts payable and accrued expenses . 18 Grants payable. Liabilities 19 Deferred revenue . 20 Loans from officers, directors, trustees, and other disqualified persons 21 Mortgages and other notes payable (attach schedule). 22 Other liabilities (describe -23

Foundations that follow SFAS 117, check here ▶

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

Foundations that do not follow SFAS 117, check here ▶

Retained earnings, accumulated income, endowment, or other funds

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

Capital stock, trust principal, or current funds Paid-in or capital surplus, or land, bldg, and equipment fund

Total net assets or fund balances (see instructions) .

or Fund Balances

Assets 27

24

25

26

28

29 Net 30

31 Part III

2

3

4

5

Unrestricted

Temporarily restricted

Permanently restricted .

and complete lines 27 through 31.

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

Decreases not included in line 2 (itemize) ▶

Other increases not included in line 2 (itemize)

Enter amount from Part I, line 27a

Add lines 1, 2, and 3

	(a) the kınd(s) of property sold (e g , re shouse, or common stock, 200 shs	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)				
1aSee Additional Data Table	2							
b								
c								
d								
e								
(e) Gross sales price	(f) Depreciation allowed (or allowable)	Cost or	(g) other basis ense of sale	Gain c	(h) Gain or (loss) (e) plus (f) minus (g)			
a See Additional Data Table	e e							
b								
С								
d								
e								
Complete only for assets	showing gain in column (h) and ow	ned by the foundation	on 12/31/69		(I)			
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	Excess	(k) of col(ı) (ı), ıf any	col (k), but not	h) gain minus less than -0-) or om col (h))			
a See Additional Data Table	· · ·	3,12,133,	(3)) 4	`				
b								
С С								
				+				
<u>е</u>				+	_			
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 U	Jnder Section 4940(e) for Re	duced Tax on Net	Investment In	icome				
(For optional use by domestic p	rivate foundations subject to the sec	tion 4940(a) tax on ne	t investment incor	me)				
If section 4940(d)(2) applies, le	eave this part blank							
	e section 4942 tax on the distributal		ın the base period	lo 🗌 Y	es 🗸 No			
	nount in each column for each year,		making any entrie	25				
(a) Base period years Calendar	(b) Adjusted qualifying distributions	(c) Net value of noncharitab		(d) Distribution rat	10			
year (or tax year beginning in)		14GC Value of Horicital ICab		(col (b) divided by o				
2016	1,156,677		25,735,190		0 044945			
2015	1,133,005		25,734,809		0 044026			
2014	905,000		23,967,426		0 037760			
2013	986,315		20,916,543		0 047155			
2012	639,936		19,046,521	_	0 033599			
2 Total of line 1, column (d	•		2		0 207485			
number of years the four	for the 5-year base period—divide t dation has been in existence if less t ncharitable-use assets for 2017 from	than 5 years	, or by the		0 041497 31,794,441			
5 Multiply line 4 by line 3		•	5					
	ent income (1% of Part I, line 27b)			+	1,319,374			
			6	+	30,938			
			7	+	1,350,312			
	ons from Part XII, line 4 , . . eater than line 7, check the box in Pa		<u>8</u>	ng a 1% tay rata Sa	1,585,000			
instructions	ater than line 7, check the box in Pa	are vi, lille ib, and com	ipiete that part usi	ny a 170 tax rate Se	e die rait VI			
				Fo	orm 990-PF (2017)			

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

7b

orm	m 990-PF (2017)								
Pa	rt VIII	Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors							
1	List all o	officers, directors, trustees, foundation managers and their compensation (see instructions).							

1 List all officers, directors, trustee	o f	oundation managers an	d their compensation	(coo instructions)	
List an officers, unectors, trustee	3, 1	oundation managers an	d their compensation		
(a) Name and address	Title, and average hours per week (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
BETSY KAREL	CHA:	IR/SECRET	0	(
3150 SOUTH STREET NW 2B WASHINGTON, DC 20007	5 00				
2 Compensation of five highest-pai	d er	nployees (other than th	ose included on line 1	-see instructions). If no	ne, enter "NONE."
(a) Name and address of each employee pa		Title, and average hours per week (b) devoted to position	(c) Compensation	Contributions to employee benefit plans and deferred (d) compensation	Expense account, (e) other allowances
NONE				(a) compensation	
		-			
Total number of other employees paid over	er \$5	[50,000			
3 Five highest-paid independent co	ontra	actors for professional s	services (see instruction	ons). If none, enter "NON	IE".
(a) Name and address of each persor				e of service	(c) Compensation
NONE		,			, ,
Total number of others receiving over \$50	0.000) for professional services.			
Part IX-A Summary of Direct C					
List the foundation's four largest direct charitable organizations and other beneficiaries served, con				ation such as the number of	Expenses
organizations and other beneficiaries served, con	rerene	ces convened, research papers	s produced, etc		<u> </u>
<u>-</u>					
2					
3					
4					
Part IX-B Summary of Program	n-R	elated Investments	(see instructions)		
Describe the two largest program-related inve	stme	nts made by the foundation du	uring the tax year on lines 1	and 2	Amount
1 N/A					
2					
All other program-related investments	Sec	Instructions			
3	<i>5</i> ee	msa ucaons			
Total. Add lines 1 through 3 .					Form 000-BE /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

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

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.

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

4

5

4

5

1,585,000

1,554,062

Form **990-PF** (2017)

30.938

a Enter amount for 2016 only. **b** Total for prior years

a From 2012.

b From 2013. . . . c From 2014. . d From 2015. . . . e From 2016.

Excess distributions carryover, if any, to 2017

f Total of lines 3a through e.

d Applied to 2017 distributable amount. . . . e Remaining amount distributed out of corpus

same amount must be shown in column (a))

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

a Corpus Add lines 3f, 4c, and 4e Subtract line 5

6 Enter the net total of each column as

b Prior years' undistributed income Subtract 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) . . .

9 Excess distributions carryover to 2018.

10 Analysis of line 9

a Excess from 2013. . **b** Excess from 2014. . c Excess from 2015. . . d Excess from 2016. . e Excess from 2017. .

Subtract lines 7 and 8 from line 6a

indicated below:

4 Qualifying distributions for 2017 from Part XII, line 4 ▶ \$ 1,585,000 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). 1,558,784

1,558,784

Form **990-PF** (2017)

(d)

Page 9

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Form 990-PF (20	01/)
Part XIII	Undis

2

P	art XIII	Undistributed Income (see instruc	ctions)
1	Distributab	le amount for 2017 from Part XI, line 7	

Distributable amount for 2017 from Part XI, line 7	
Undistributed income, if any, as of the end of 2017	1
Enter amount for 2016 only	

730,308

730.308

26.216

(a)

Corpus

730.308

26,216

756,524

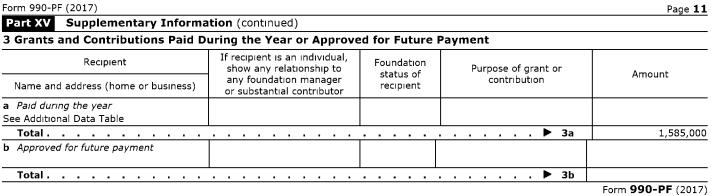
756,524

(b)

Years prior to 2016

(c)

2016



Enter gross amounts unless otherwise indicated 1 Program service revenue		Unrelated bus	iness income	Excluded by section	512, 513, or 514	(e) Related or exemp
		(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	function income (See instructions
f						
	and contracts from government agencies					
Intere	rship dues and assessments st on savings and temporary cash ments			14	20,764	
	ds and interest from securities.			14	678,741	
	tal income or (loss) from real estate					
	financed property					
	ebt-financed property ntal income or (loss) from personal property			17	-9	
	nvestment income	 		14	1	
	or (loss) from sales of assets other than	 		14	1	
ınvent	ory	900099	481	18	2,496,403	
	ome or (loss) from special events					
-	profit or (loss) from sales of inventory revenue aSee Additional Data Table					
	everide decendational bata table					
с						
_						
е						
e	al Add columns (b), (d), and (e).		-208		3,231,111	
e Subtota Total.					3,231,111 3	
Subtota 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	ations) e Accomplishr	nent of Exemp	ot Purposes	3	3,230,90
e Subtota Total. (See wo	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) brksheet in line 13 instructions to verify calcul	ations) e Accomplishr Income is reported	ment of Exemp	ot Purposes Part XVI-A contribu	3	3,230,90
Subtota 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	ations) e Accomplishr Income is reported	ment of Exemp	ot Purposes Part XVI-A contribu	3	3,230,90
Subtota 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	ations) e Accomplishr Income is reported	ment of Exemp	ot Purposes Part XVI-A contribu	3	3,230,90
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Subtota 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	ations) e Accomplishr Income is reported	ment of Exemp	ot Purposes Part XVI-A contribu	3	3,230,90
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e Subtota Total. (See wo art XVI 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	ations) e Accomplishr Income is reported	ment of Exemp	ot Purposes Part XVI-A contribu	3	3,230,90

orm 99	0-PF (2											Pa	ge 13
Part		Exempt Organi	zations						nships With Nor		ble		
		anization directly or in ode (other than sectio								on 501		Yes	No
a Tran	sfers fr	om the reporting foun	dation to a no	ncha	arıtable exe	empt organizati	on of						
(1)	Cash.									. 1	la(1)		No
		assets		•						· [1	la(2)		No
b Othe													
		of assets to a nonchari	•	-							lb(1)		No
		ises of assets from a n									lb(2)		No
		of facılıtıes, equıpmer ursement arrangemen	•								lb(3) lb(4)		No No
		or loan guarantees.									lb(5)		No
٠.		nance of services or m									lb(6)		No
٠.		acılıtıes, equipment, n	•		-					. F	1c		No
of th	ne good ny trans	er to any of the above s, other assets, or ser saction or sharing arra (b) Amount involved	vices given by ngement, sho	the w In	reporting f column (d	foundation If th	ne found he good	lation receive ls, other asse	d less than fair mark	ket value ved		ngemen	nts
(a) Line	140	(b) Amount involved	(c) Nume of h	onen	arrable exer	Tipe organization	(4)	Description of	transiers, transactions,	ana sham	ig arrai	igenien	103
2a Is th	ie found	dation directly or indire	ectly affiliated	with	, or related	d to, one or mo	re tax-e:	xempt organi	zations				
desc	ribed in	n section 501(c) of the	Code (other t	han	section 50	1(c)(3)) or in s	ection 5	27°		🗆] Yes	✓	No
b If "Y	es," co	mplete the following so			1 45	N.T., 6		1	(a) Danamatian	-6I-b			
		(a) Name of organization	on		(6) Type of organiz	ation		(c) Description	or relation	snip		
	of my	r penalties of perjury, r knowledge and belief preparer has any kno	, it is true, cor										
Sign Here	*	****				2018-11-05		*****		May the return			
	s	ignature of officer or ti	rustee			Date		Title		with the below (see ins	_	_	
		Print/Type preparer's	name	Prep	arer's Sıgn	nature	Date	e	Check if self-	PTIN			
Paid		ROBERT D HUEY C	PA				20	018-11-15	employed ▶ □	Р	00047	619	
Prepa Use (Firm's name ► HUE	Y AND ASSOC	IATE	S PC				F	Fırm's EIN	N ► 52-	16585	535
\	·· y	Firm's address ► 71	01 WISCONSI	N A	VE STE 101	10							
										Phone no (301) 951-3744			

BETHESDA, MD 20814

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d List and describe the kind(s) of property sold (e g , real estate, (c) (d) (b) (a) 2-story brick warehouse, or common stock, 200 shs MLC Co) How acquired Date acquired Date sold P-Purchase (mo, day, yr) (mo, day, yr) D-Donation **CBS CORP NEW** D 2017-10-17 2017-10-16 DAVIDSON KEMPNER INST PARTNERS Ρ 2017-12-31 COMMSCOPE HOLDING CO IN D 2017-10-16 2017-10-17 AG SUPER RMBS, LLC Р 2017-12-31 HANESBRANDS INC D 2017-04-20 2017-04-21 HANESBRANDS INC D 2017-04-20 2017-04-21 HANESBRANDS INC D 2017-04-20 2017-04-21 HANESBRANDS INC D 2017-10-16 2017-10-17 LABORATORY CORP AMER HOLDINGS D 2017-04-20 2017-04-21 LABORATORY CORP AMER HOLDINGS D 2017-05-10 2017-05-11 Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h (e) Gross sales price Depreciation allowed Cost or other basis Gain or (loss) (f) (or allowable) (g) plus expense of sale (h) (e) plus (f) minus (g) 854,067 620,807 233,260 14,488 14,488 1,224,499 847,077 377,422 5,166 5,166 177,938 81,862 96,076 470,759 215,311 255,448 212,921 98,418 114,503 1,565,354 1,318,241 247,113 155,201 25,809 129,392 106,350 17,960 88,390 Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - I Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 Gains (Col (h) gain minus col (k), but not less than -0-) or (i) F M V as of 12/31/69 Adjusted basis Excess of col (1) **(I)** Losses (from col (h)) (j) as of 12/31/69 (k) over col (j), if any 233,260 14,488 377,422 5,166 96,076 255,448 114,503 247,113 129,392 88,390

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d List and describe the kind(s) of property sold (e g , real estate, (d) (b) (c) (a) 2-story brick warehouse, or common stock, 200 shs MLC Co) How acquired Date acquired Date sold P-Purchase (mo, day, yr) (mo , day, yr) D-Donation D PRIMERICA INC 2017-05-01 2017-05-03 SCHWAB CHARLES CORP NEW D 2017-01-09 2017-01-09 SCHWAB CHARLES CORP NEW D 2017-07-06 2017-07-06 JPMORGAN CHASE & CO D 2015-02-18 2017-07-07 D UNITED HEALTH GROUP 2013-01-08 2017-03-10 D UNITED HEALTH GROUP 2013-02-26 2017-03-10 DAVIDSON KEMPNER INST PARTNERS 2017-12-31 Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h Depreciation allowed Gain or (loss) (e) Gross sales price Cost or other basis (g) plus expense of sale (f) (or allowable) (h) (e) plus (f) minus (g) 91.535 21,824 69.711 89,288 28,184 61,104 174,960 51.880 123,080 90.698 33,108 57,590 713,421 216,900 496.521 166,070 51,814 114,256 10.506 10.506 Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - I Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 Gains (Col (h) gain minus col (k), but not less than -0-) or (i) F M V as of 12/31/69 Adjusted basis Excess of col (i) **(I)** Losses (from col (h)) (j) as of 12/31/69 (k) over col (j), if any 69,711 61,104 123,080 57.590 496,521 114,256 10,506

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year CENTER FOR REPRODUCTIVE RIGHTS PUBLIC CHAR GENERAL SUPPORT 150,000 1634 EYE STREET NW 600 WASHINGTON, DC 20006

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

CHILDREN'S LAW CENTER 616 H STREET NW STE 300 WASHINGTON, DC 20001	CHARI	GENERAL SUPPORT	75,000
FUND FOR GLOBAL HUMAN RIGHTS 1666 CONNECTICUT AVE NW STE 410 WASHINGTON, DC 20009	PUBLIC CHAR	GENERAL SUPPORT	80,000

1,585,000

FUND FOR GLOBAL HUMAN RIGHTS 1666 CONNECTICUT AVE NW STE 410 WASHINGTON, DC 20009	PUBLIC CHAR	GENERAL SUPPORT	80,0

Total. 3a

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year GLOBAL WITNESS FOUNDATION PUBLIC GENERAL SUPPORT 150,000 855 EL CAMINO REAL CHARI STE 13A-410 PALO ALTO, CA 94301 າດດ

HUMAN RIGHTS WATCH 350 FIFTH AVE 34TH FLOOR NEW YORK, NY 10018	PUBLIC CHAR	DISCRETIONARY GRANT - CONF & TRAVEL	10,00
HUMAN RIGHTS WATCH 350 FIFTH AVE 34TH FLOOR	PUBLIC CHAR	GENERAL SUPPORT	50,00

11EW TORK, 111 10010			
HUMAN RIGHTS WATCH 350 FIFTH AVE 34TH FLOOR NEW YORK, NY 10018	PUBLIC CHAR	GENERAL SUPPORT	50,000

1,585,000

За

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year HUMAN RIGHTS WATCH PUBLIC CHAR GENERAL SUPPORT 300,000 350 FIFTH AVE 34TH FLOOR NEW YORK, NY 10018

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

NATIONAL GALLERY OF ART 2000 S CLUB DR LANDOVER, MD 20785	CHARI	PHOTOGRAPHY EXHIBITION	125,000
NATIONAL GALLERY OF ART 2000 S CLUB DR LANDOVER, MD 20785	PUBLIC CHARI	PHOTOGRAPHY EXHIBITION	25,000

1,585,000

Total .

За

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount contribution show any relationship to status of any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year PROPUBLICAONE EXCHANGE PLAZA PUBLIC CHAR GENERAL SUPPORT 150,000 55 BROADWAY 23RD WASHINGTON, DC 20002

PULITZER CENTER ON CRISIS REPORTING 1779 MASSACHUSETTS AVE NW STE 615 WASHINGTON, DC 20036	PUBLIC CHAR	GENERAL SUPPORT	200,000
THE MARSHALL PROJECT 156 WEST 56TH STREET STE 701 NEW YORK, NY 10019	PUBLIC CHARI	GENERAL SUPPORT	75,000

1,585,000

Total.

3a

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor

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

a Paid during the year			
WITNESS80 HANSON PLACE 5TH FL BROOKLYN, NY 11217	PUBLIC CHAR	GENERAL SUPPORT	50,000
WHITNEY MUSEUM OF AMERICAN ART	PUBLIC CHAR	GENERAL SUPPORT	50,000

WHITNEY MUSEUM OF AMERICAN ART 99 GANSEVOORT STREET NEW YORK, NY 10014	PUBLIC CHAR	GENERAL SUPPORT	
SMITHSONIAN AMERICAN ART MUSEUM	DUBLIC CHAR	GENERAL SUPPORT	

3a

NEW YORK, NY 10014			
SMITHSONIAN AMERICAN ART MUSEUM MRC 970 BOX 37012	PUBLIC CHAR	GENERAL SUPPORT	20,000

SMITHSONIAN AMERICAN ART MUSEUM MRC 970 BOX 37012	PUBLIC CHAR	GENERAL SUPPORT	20,000
WASHINGTON, DC 20013			

Total		1 505 000
MRC 970 BOX 37012 WASHINGTON, DC 20013		
		 ,

WASHINGTON, DC 20013		
Total	 	 1.585.000

Recipient If recipient is an individual, show any relationship to any foundation manager or substantial contributor

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

За

a Paid during the year			
TAHIRIH JUSTICE 6402 ARLINGTON BLVD STE 300	PUBLIC CHAR	GENERAL SUPPORT	75,000

Total	 	1,585,000
STE 300 FALLS CHURCH, VA 22042		

Form 990PF Part XVI-A Line 11 - Other revenue:

Enter gross amounts unless otherwise indicated

Unrelated business income

11 Other revenue

b AG OFCON, LTD

c AG SUPER RMBS, LLC

e DAVIDSON KEMPNER

f DAVISON KEMPNER

i SEB IMMUNIVEST

a AG LIQUID CREDIT FUND

d CREDIT SUISSE - CS EUROEAL

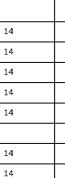
q KANAM GRUNDINVEST FUNDS

h NORTHWOODS CAPITAL X, LIMIT

(a) Business code

900099

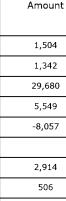
-689



(c)

Exclusion code

14



(d)

1.773

Excluded by section 512, 513, or 514

(e) Related or exempt

function income

(See the

instructions)

efile GRAPHIC print - DO NOT P	ROCESS As Filed D)ata -	DI	LN: 93491319006388					
TY 2017 Accounting Fees Schedule									
	Name: TRELLIS CHARITABLE FUND								
I	EIN: 45-4027	960							
Accounting Fees Schedule	Accounting Fees Schedule								
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes					

6,425

12,850

HUEY FEES

Note: To capture the full content of this	ote: To capture the full content of this document, please select landscape mode (11" $ imes$ 8.5") when printing.								
TY 2017 Depreciation Schedule									
Name:	TRELLIS CHARITABLE FUND								
ETN.	45, 4027060								

DLN: 93491319006388

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

EIN: 45-4027960									
Description of Property	Date Acquired	Cost or Other Basis	Prior Years' Depreciation	Computation Method	Rate / Life (# of years)	Current Year's Depreciation Expense	Net Investment Income	Adjusted Net Income	Cost of Goods Sold Not Included
OFFICE EQUIPMENT	2010-01-01	2,720	2,720	200DB	5 0000				

Υ	2017	Investments	Corporate	Stock Schedule	

efile GRAPHIC print - DO NOT PROCESS As Filed Data -

BNY MELLON VANGUARD DEVELOPED MARKET

Name: TRELLIS CHARITABLE FUND EIN: 45-4027960

Name of Stock	End of Year Book Value	End of Year Fair Market Value
BNY MELLON VANGUARD 500 INDEX F	7,383,005	13,961,162
BNY MELLON VANGUARD EMERGING MARKET	3,398,481	3,867,192

DLN: 93491319006388

8,224,029

6,136,469

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491319006388
TY 2017 Investments Govern	nent Obligat	tions Schedule
Name:	TRELLIS CHAP	RITABLE FUND
EIN:	45-4027960	
US Government Securities - End of Year Book Value:		5,313,778
US Government Securities - End of Year Fair Market Value:		5,229,761
State & Local Government Securities - End of Year Book Value:		
State & Local Government Securities - End of Year Fair Market Value:		

TY 2017 Investments - Other Schedule	

DLN: 93491319006388

1,854,314

1,816,961

Name: TRELLIS CHARITABLE FUND

EIN: 45-4027960

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

DAVIDSON KEMPNER INST. PARTNERS, LP

Investments Other Schedule 2							
Category/ Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value				
AG SUPER FUND I INTL HEDGE	FM∨	2,577,410	2,274,637				

FMV

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491319006388
TY 2017 Land, Etc. Schedule		
Name:	TRELLIS CHARITA	BLE FUND

EIN: 45-4027960									
Category / Item	Cost / Other Basis	Accumulated Depreciation	Book Value	End of Year Fair Market Value					
OFFICE EQUIPMENT	2,720	2,720							

efile GRAPHIC print - DO NOT PROCES	S As Filed Data	-	DLI	N: 93491319006388	
TY 2017 Legal Fees Schedu	ile				
Nam	ne: TRELLIS CHA	ARITABLE FUND			
EI	EIN: 45-4027960				
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes	
LOEB & LOEB LLP	236				

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN: 93491319006388		
TY 2017 Other Decreases Scho	TY 2017 Other Decreases Schedule				
Name:	TRELLIS CHAR	RITABLE FUND			
EIN:	45-4027960				
De	escription		Amount		
UNREALIZED GAINS ON CONTRIBUTED S	•		Amount 2,479,601		
	•				

efile GRAPHIC print - DO NOT PROCESS As Filed Data - DLN: 93491319006388				
TY 2017 Other Expenses Sc	hedule			
Name: TRELLIS CHARITABLE FUND				
EI	N: 45-4027960			
Other Expenses Schedule				
Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
FROM K-1				
RENTAL EXPENSES IN EXCESS OF	-9	-9		
DAVIDSON KEMPNER OTHER EXP 13	16	16		
DAVIDSON KEMPNER ROYALTY INCO	-21	-21		
EXPENSES				
BANK CHARGES	150	150		

OFFICE EXPENSES

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491319006388

TY 2017 Other Income Schedule

Name: TRELLIS CHARITABLE FUND

EIN: 45-4027960

Other Income Schedule

Description	Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income
DAVIDSON KEMPNER BOX 11 A	1	1	
AG LIQUID CREDIT FUND	1,504		
AG OFCON, LTD	1,342		
AG SUPER RMBS, LLC	29,680		
CREDIT SUISSE - CS EUROEAL	5,549		
DAVIDSON KEMPNER	-8,057		
DAVISON KEMPNER	-689		
KANAM GRUNDINVEST FUNDS	2,914		
NORTHWOODS CAPITAL X, LIMITED	506		
SEB IMMUNIVEST	1,773		

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable		
Name: TRELLIS CHARITABLE FUND EIN: 45-4027960						
TY 2017 Other Professional Fees Schedule						
efile GRAPHIC print - DO NOT PROCESS	As Filed Data - DLN: 93491319006388					

15,808

12,516

2,717

13

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursement for Charitable Purposes
INVESTMENT FEES - US BANK	44,161	44,161		

15,808

12,516

2,717

13

INVESTMENT FEES

INVESTMENT FEES K-1

INVESTMENT INTEREST EXPENSE K-1

INVESTMENT INTEREST EXP K-1

efile GRAPHIC print - DO NOT PROCE	SS As Filed Data	-	DLI	N: 93491319006388		
TY 2017 Taxes Schedule						
Name: TRELLIS CHARITABLE FUND						
EIN: 45-4027960				+		
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes		
FOREIGN TAXES PAID	20,141	20,141				
DC 990T TAXES PAID	747					
TAXES & LICENSES	221					

efile GRAPHIC print - I	DO NOT PROCESS	As Filed Data -				DLN: 93491319006388
Schedule B		Schedi	ule of Contribute	ors		OMB No 1545-0047
(Form 990, 990-EZ, or 990-PF) Department of the Treasury 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 organizat TRELLIS CHARITABLE FU					Employer id	entification number
					45-4027960	
Organization type (che	eck one)					
Filers of:	Section:					
Form 990 or 990-EZ						
	☐ 4947(a)(1) nonexempt cha	ritable trust not treated a	as a private founda	ition	
	☐ 527 polit	ical organization				
Form 990-PF	5 01(c)(3)) exempt private fo	undation			
4947(a)(1) nonexempt charitable trust treated as a private foundation						
	☐ 501(c)(3)) taxable private fo	undation			
			PF that received, during Complete Parts I and II			
Special Rules						
under sections a received from a	509(a)(1) and 170(b)	(1)(A)(vi), that che luring the year, tot	g Form 990 or 990-EZ th ocked Schedule A (Form al contributions of the gr plete 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 Dexclusively for religious animals Complete Par	s, charitable, scien		
during the year, If this box is che purpose Don't o	contributions <i>exclus</i> ecked, enter here the complete any of the l	sively for religious, total contributions parts unless the G	or (10) filing Form 990 charitable, etc., purpose s that were received duri eneral Rule applies to t or more during the year	es, but no such cor ing the year for an his organization be	ntributions tota exclusively re ecause it recei	led more than \$1,000 ligious, charitable, etc , ved <i>nonexclusively</i>
990-EZ, or 990-PF), bu	t it must answer "No	o" on Part IV, line 2	ile and/or the Special Ri 2, of its Form 990, or che at it doesn't meet the filin	eck the box on line	H of its	
For Paperwork Reduction for Form 990, 990-EZ, or 99		tructions	Cat No 30613X	Sched	ule B (Form 990,	990-EZ, or 990-PF) (2017)

Name of organiza	ition	Employer identification	number
TRELLIS CHARITAB	LE FUND	45-4027960	
Part I	Contributors (See instructions) Use duplicate copies of Part I if add	litional space is needed	
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
1	BETSY KAREL 3150 SOUTH ST NW 2B WASHINGTON, DC 20007	\$ 6,108,795	Person Payroll Noncash (Complete Part II for noncash contributions)
(a)	(b)	(c)	(d) Type of contribution
No.	Name, address, and ZIP + 4	Total contributions	
			Person Payroll Noncash (Complete Part II for noncash contributions)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
-		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
-		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
			Person Payroll Noncash (Complete Part II for noncash contributions)
(a)	(b)	(c)	(d) Type of contribution
No.	Name, address, and ZIP + 4	Total contributions	
-			Person

Name of organization TRELLIS CHARITABLE FUND

number

			45-4027960
Part II	Noncash Property (See Instructions) Use duplicate copies of Part II if additional space is needed	1	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
	See Additional Data Table		
(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
		_\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	

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

Additional Data

Software ID:

Software Version:

EIN: 45-4027960

Name: TRELLIS CHARITABLE FUND

Form 990 Schedule B. Part II - Noncash Property (see Instructions) Use duplicate copies of Part II if additional space is needed

Form 990 Schedule B, Part II - Noncash Property (see instructions) use duplicate copies of Part II il additional space is needed					
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received		
1	2,173 SHS SCHWAB CHARLES CORP	\$ 88,973	2020-01-09		
1	1,085 SHS LABORATORY CORP AMER H	<u> </u>	2017-04-21		
1	38,605 SHS COMMSCOPE HOLDING CO	\$ 1,228,025	2017-10-17		
<u>1</u>	1,084 SHS PRIMERICA, INC	\$ 91,625	2017-05-02		
<u>1</u>	21,800 SHS HANESBRAND INC	<u> 476,548</u>	2017-04-21		
1	67,215 SHS HANESBRAND INC	<u> </u>	2017-10-17		
<u>1</u>	4,000 SHS SCHWAB CHARLES CORP	<u> </u>	2017-07-06		
<u>1</u>	8,240 SHS HANESBRAND INC	\$ 180,126	2017-04-21		
<u>1</u>	1,725 SHS JP MORGAN CHASE & CO	\$ 90,373	2017-07-07		
1	9,860 SHS HANESBRAND INC	\$ 215,540	2017-04-21		

Form 990 Schedule B, Part II - Noncash Property (see Instructions) Use duplicate copies of Part II if additional space is needed (c) (a) (d) (b) FMV (or estimate) No. from Part I Description of noncash property given Date received (See instructions) 4,210 SHS UNITEDHEALTH GROUP INC \$ 711,616 2017-03-10 755 SHS LABORATORY CORP AMER H 2017-05-11 \$ 106,916

<u>1</u>	980 SHS UNITEDHEALTH GROUP INC	\$ 165,649	2017-03-10
<u>1</u>	15.085 SHS CBS CORP - CLASS B	\$ 854,490	2017-10-17