128.	
(1770)	
9 Fo	

Form	990-T	Ex	empt Organization		siness Income der section 6033(		rn	OMB No 1545-0687
		For sale	ndar year 2017 or other tax year begin		•	• •	,	മ∧ 47
Donasi	0, Ca	ror care					''——·[	
	ment of the Treasury I Revenue Service	<b>▶</b> Do	► Go to www.irs.gov/Form990 not enter SSN numbers on this form a					Open to Public Inspection for 501(c)(3) Organizations Only
A	Check box if		Name of organization ( Check be					oyer identification number
_	address changed	ļ			•	,		oyees' trust, see instructions )
ВЕхе	mpt under section	٠.	THE GLADYS KRIEBLE	DEL	MAS FOUNDATION			
X	501( C \$ 3 )	Print	Number, street, and room or suite no I	faPO	box, see instructions		51-0	193884
	408(e) 220(e)	Or						lated business activity codes
	408A 530(a)	יסקני ן	275 MADISON AVENUE			2102	(See in	nstructions )
	529(a)		City or town, state or province, country	y, and Z	ZIP or foreign postal code			
C Boo	k value of all assets		NEW YORK, NY 10016-	110	1		9000	99
at e	nd of year	F Gro	up exemption number (See instructi	ions )	<b>&gt;</b>		<u> </u>	<u> </u>
4	12,357,232.				rporation X 501(c)	trust	401(a)	trust Other trust
			rimary unrelated business activity		ATTACHMI			
			corporation a subsidiary in an affili					Yes X No
			identifying number of the parent coi		on <b>&gt;</b>			<del></del>
J Th	e books are in care	e of ► E	EMMA JUDKINS		Telephon	e number ▶ 21	2-687	-0011
Par	ti Unrelated	Trade o	or Business Income		(A) Income	(B) Exper	ses	(C) Net
1 a	Gross receipts or	sales						
b	Less returns and allowa		c Balance ▶	1c				
2	Cost of goods so	d (Sched	ule A, line 7)	2				• . •
3	Gross profit Sub	tract line	2 from line 1c	3			, .	
4 a	Capital gain net ii	ncome (a	ittach Schedule D)	4a		•		
b			Part II, line 17) (attach Form 4797).	4 b		29	•	
c	Capital loss dedu	ction for t	rusts	4 c		•		
5	Income (loss) from	partnershi	ps and S corporations (attach statement)	5	69,719.	· ATCH 2		69,719
6	Rent income (Sch	edule C)		6				<u> </u>
7	Unrelated debt-fil	nanced in	come (Schedule E)	7				
8	Interest, annuities, roya	Ities, and rei	nts from controlled organizations (Schedule F)	8				<u> </u>
9	Investment income of a	section 50	1(c)(7), (9), or (17) organization (Schedule G)	9				<u> </u>
10	Exploited exempt	activity i	ncome (Schedule I)	10				
11	Advertising incon	ne (Sched	fule J)	11		<u> </u>		<u> </u>
12	Other income (Se	ee instruc	ctions, attach schedule)	12		·	<u> </u>	<u> </u>
13			ough 12		69,719.			69,719
Par	t II Deductio	ns Not	Taken Elsewhere (See insti	ructio	ons for limitations on d	eductions)(	Except	for contributions,
	deduction	s must	be directly connected with t	he u	nrelated business inco	me)	<del></del> _	<del></del>
14	Compensation of	officers,	directors, and trustees (Schedule K)				14	<del> </del>
15	-							<del> </del>
16								
17								<del> </del>
18							_	<del> </del>
19								00 016
20			See instructions for limitation rules)			40 tate 1 .		<del> </del>
21			4562)					
22	•		on Schedule A and elsewhere on re			<del></del>	22b	1
23	Depletion				DECENTED.			†
24			compensation plans					<del> </del>
25	Employee benefit	program	s	اه		}	25	<del></del>
26	Excess exempt ex	coenses (	Schedule I)	. 15	NOV-19-2018 - 19		26	<del></del>
27	Excess readership	costs (S	ichedule J) (	ပ∤ .			27	
28	- Utner deductions	ramach s	schedule)					
29	i otal deductions	. Add line	es 14 through 28	· · · · ·	doduction Cubications	20 from line		40 003
30			ole income before net operating					<del></del>
31			ion (limited to the amount on line 30					40.000
32			e income before specific deduction					1 000
33	•		rally \$1,000, but see line 33 instruc				1	<del> </del>
34			ible income. Subtract line 33 fr					47,803
For F			line 32	<del>· · ·</del>	<u> </u>	<del></del>	34	Form 990-T (201

. Pai	rt III Tax Computation			rage Z
35	Organizations Taxable as Corporations. See instructions for tax computation Controlled group	T T		
	members (sections 1561 and 1563) check here See instructions and	•		
а	Enter your share of the \$50,000, \$25,000, and \$9,925,000 taxable income brackets (in that order)	-		
	(1) \$   (2) \$   (3) \$	1 1		
b	Enter organization's share of (1) Additional 5% tax (not more than \$11,750) \$			
	(2) Additional 3% tax (not more than \$100,000)	1:.		
С	Income tax on the amount on line 34	35c		
36	Trusts Taxable at Trust Rates. See instructions for tax computation income tax on			
	the amount on line 34 from Tax rate schedule or X Schedule D (Form 1041)	36	8,	554.
37	Proxy tax. See instructions	37	<u>·</u>	
38	Alternative minimum tax	38		
39	Tax on Non-Compliant Facility Income. See instructions	39		
40	Total. Add lines 37, 38 and 39 to line 35c or 36, whichever applies		8,	554.
Par	t IV Tax and Payments	<del></del>		
41 a				
	Other credits (see instructions)	1. • }		
	General business credit Attach Form 3800 (see instructions)	1		
	Credit for prior year minimum tax (attach Form 8801 or 8827)	1,		
	Total credits. Add lines 41a through 41d	41e		
42	Subtract line 41e from line 40	42	8,	554.
43	Other taxes Check if from Form 4255 Form 8611 Form 8697 Form 8866 Other (attach schedule).	43		
44	Total tax. Add lines 42 and 43	44	8,	554.
	Payments A 2016 overpayment credited to 2017			
	2017 estimated tax payments	1 " ]		
c	16.000	1 1		
	Foreign organizations Tax paid or withheld at source (see instructions)	1-		
e	Backup withholding (see instructions)	1 '		
f	Credit for small employer health insurance premiums (Attach Form 8941)	1.		
g		1 .		
J	Form 4136 Other Total ▶ 45g	- `		
46	Total payments. Add lines 45a through 45g	46	24,	400.
47	Estimated tax penalty (see instructions) Check if Form 2220 is attached	47		118.
48	Tax due. If line 46 is less than the total of lines 44 and 47, enter amount owed	48		
49	Overpayment. If line 46 is larger than the total of lines 44 and 47, enter amount overpaid		15,	728.
50	Enter the amount of line 49 you want Credited to 2018 estimated tax ▶15,728. Refunded ▶			
Pa	rt V Statements Regarding Certain Activities and Other Information (see instruction	s)		<u></u>
51	At any time during the 2017 calendar year, did the organization have an interest in or a signature or	other au	thority Yes	No
	over a financial account (bank, securities, or other) in a foreign country? If YES, the organization m	ay have	to file -	] ' 🛊
	FinCEN Form 114, Report of Foreign Bank and Financial Accounts If YES, enter the name of the	foreign o	ountryن	11
	here ▶			X
52	During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a fore	ign trust?.		X
	If YES, see instructions for other forms the organization may have to file		1.	
<u>53</u>	Enter the amount of tax-exempt interest received or accrued during the tax year ▶ \$			1 4
	Under penalties of penury, I declare that I have examined this return, including accompanying schedules and statements, and to the use, correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge	oest of my k	nowledge and b	elief it is
Sig		ay the IRS	discuss this	return
He	re 11/15/2018 1 rustee wi	th the pre	parer shown	
		e instructions)		No
De:	Print/Type preparer's name Preparette signature Date Chec	k if	PTIN	
Paid	ITALI K TEKK	employed	P003609	
	parer Firm's name WITHUM SMITH + BROWN PC Firm's name For CARNEGIE CENTER STE 400 PRINCETON NI 08540-6243		-2027092	
	Firm's address ► 506 CARNEGIE CENTER STE 400, PRINCETON, NJ 08540-6243 Phon	eno 60	9-520-11	

Form **990-1** (2017)

_	-
Page	J

Form 990-T (2017)										F	age 3
Schedule A - Cost of Go	oods Sold. E	nter method	d of invente	ory valuatioi	<u>1</u>	<u> </u>	·				
1 Inventory at beginning of y				6 Invento	ry a	at end of yea	ar	6			
2 Purchases				7 Cost	of	goods so	ld. Subtract line	1 "			
3 Cost of labor	3			6 from	ı I	ine 5 En	iter here and in	`			
4a Additional section 263A co	osts			Part I, li	ne	2		7			
(attach schedule)	4a						section 263A (w	ith re	spect to	Yes	No
b Other costs (attach schedu	le) . 4b			property	y	produced	or acquired for	resal	e) apply		
5 Total. Add lines 1 through				to the o	rga	anization?	<u> </u>	<u></u> .			X
Schedule C - Rent Income (see instructions)	(From Real F	Property a	nd Perso	nal Proper	ty	Leased V	Vith Real Proper	ty)			
1. Description of property											
(1)		<del>-</del>			_		<del></del>				
(2)									<del></del>		
(3)					_						
(4)	·			·	_						
.,,	2. Rent rece	ved or accrue	ed		_				——		
(a) From personal property (if the			·	personal prope	rtu i	(f the	3/a) Deductions di	ractly ca	nnacted with th	0 1000	ma
for personal property is more than 50%)	an 10% but not	percenta	age of rent fo	r personal proper personal proper based on profit	erty	exceeds	exceeds in columns 2(a) and 2(b) (attach schedule)				IIIC
(1)									<del>-</del> -		
(2)	<del></del>										
(3)											
(4)		<u> </u>									
Total		Total		· · · · · · · · · · · · · · · · · · ·							
(c) Total income. Add totals of co	olumns 2(a) and 2						(b) Total deduction Enter here and on				
here and on page 1, Part I, line 6							Part I, line 6, colur				
Schedule E - Unrelated De			e instructi	ons)			•				
1. Description of det		<del></del>	2. Gross	income from or			Deductions directly cor debt-financ	ed prope	rty		
·		·	р	property (a) Straig			traight line depreciation (attach schedule)		(b) Other deductions (attach schedule)		
(1)		<u></u>			_						
(2)		<del></del> .			_					_	
(3)					_	_					
(4)					_						
<ol> <li>Amount of average acquisition debt on or allocable to debt-financed property (attach schedule)</li> </ol>	5 Average adju of or alloca debt-financed (attach sch	able to I property	4	Column divided column 5			income reportable n 2 x column 6)		Allocable dedu mn 6 x total of 3(a) and 3(b)	colum	
(1)			<u> </u>		%	<del>_</del>					
(2)					%						
(3)					%						
(4)			<u> </u>		%						
					}		re and on page 1, ne 7, column (A)	Ente Part	r here and on I, line 7, colu	page mn (B	: 1, 3)
Total dividends-received deduct	• • • • • • • •				<b>▶</b>	· · · · · ·	▶		Form 99	0-T	(2017)

Schedule F - Interest, Annu	ities, Royalties,	and Ren	ts Fro	m Contro	lled Or	ganiza	tions (see	instructio	ns)	<u></u>	
				ntrolled Or			<u>·</u>				
1 Name of controlled organization	2. Employer identification number	7 (		ated income	(	of specified included in the control organization's gross in		in the contro	olling	6. Deductions directly connected with income in column 5	
(1)							Ţ				
(2)											
(3)								_			
(4)											
Nonexempt Controlled Organiz	ations										
7 Taxable Income	8 Net unrelated ind (loss) (see instruction			Total of specific ayments made		ınclu	art of column ded in the co ization's gross	ntrolling		I. Deductions directly inected with income in column 10	
(1)											
(2)											
(3)											
(4)											
Totals	come of a Sec	tion 501(	c)(7),	(9), or (17		Part		nn (A)		er here and on page 1, rt I, line 8, column (B)	
1 Description of income	2. Amount of	income	-	directly cor (attach sch	nected	_		t-asides schedule)	_	and set-asides (col 3 plus col 4)	
(1)		<del></del>	<del> </del>						-+		
(2)			+-					<del></del> -	-+		
(3)			+-			— <del>-</del>				<del></del>	
(4)	Enter here and o Part I, line 9, co		· .							Enter here and on page Part I, line 9, column (B	
Totals	empt Activity Inc	ome, Oth	ner Th	an Advert	ising Ir	come	(see instru	ctions)		<del></del> _	
1 Description of exploited activity	2. Gross unrelated business income from trade or business	3. Expen directi connected productio unrelate business in	rectly or business 2 minus col lf a gain, collected with uction of related		ted tradé (column lumn 3) ompute	from a	ess income activity that unrelated ess income	6, Expe attributa colum	ble to	7. Excess exempt expenses (column 6 minus column 5, but not more than column 4)	
(1)		<del></del>		<del>                                     </del>							
(2)						-					
(3)											
(4)	<del>                                     </del>		<del></del>	<u> </u>		ļ — —		ļ · - · · ·			
	Enter here and on page 1, Part I, line 10, col (A)	Enter here a page 1, P line 10, co	art I,					Enter here and on page 1, Part II, line 26			
Totals ▶ Schedule J - Advertising In	como (soo instri	ictions)		<u> </u>					<u> </u>		
Part I Income From Per			oneol	idated Ra	sis -						
	2 Gross	3. Dire		4. Adver	tising ss) (col	<b>5</b> . C	irculation	6. Reade	ership	7. Excess readership costs (column 6 minus column 5, but	
1. Name of periodical	advertising income	advertising	costs	2 minus c a gain, co cols 5 thr	mpute	11	ncome	cost	ts	not more than column 4)	
(1)	<del>                                     </del>			4	•			<b></b>		<b>⊣</b> , • •	
(2)	<del> </del>			4		<u> </u>				<del>- </del>	
(3)	<del> </del>			- · ·				<del> </del>			
(4)				<del>                                     </del>				<del> </del>		<del></del>	
Totals (carry to Part II, line (5))							· <u></u>			Form 990-T (2017	
										1 51111 0 0 0 - 1 (2017	

51-0193884

Part II	Income From Periodicals Reported on a Separate Basis (Fo	r each periodical listed in	n Par	t II, fill	in columns
	2 through 7 on a line-by-line basis)	•			

1. Name of periodical	2. Gross advertising income	3. Direct , advertising costs	4. Advertising gain or (loss) (col 2 minus col 3) If a gain, compute cols 5 through 7	5. Circulation income	6 Readership costs	7. Excess readership costs (column 6 minus column 5, but not more than column 4)
(1)						
(2)						
(3)						
(4)						
Totals from Part I			<b>阿斯斯斯斯斯斯斯斯斯斯斯斯斯斯斯斯斯斯斯斯斯斯斯斯斯斯斯斯斯斯斯斯斯斯斯斯</b>	是种型的社会。这	<b>的是一种人们的</b>	
. Totals, Part II (lines 1-5) ▶	Enter here and on page 1, Part I, line 11, col (A)	Enter here and on page 1, Part I, line 11, col (B)				Enter here and on page 1, , Part II, line 27

Schedule K - Compensation of Officers, Directors, and Trustees (see instructions)

. 1. Name	2 Title	3. Percent of time devoted to business	Compensation attributable to unrelated business
(1)		. %	
(2)		%	
(3)		%	
(4)		%	
Total. Enter here and on page 1, Part II, line 14, .			

Form 990-T (2017)

## ATTACHMENT 2

FORM 990T - LINE 5 -INCOME (LOSS) FROM PARTNERSHIPS	
NB CO INVESTMENTS PARTNERS LP HOLT DISTRESSED PROP FUND PARA HOLT DISTRESSED PROPERTY FUND 2010 HOLT OPPORTUNITY FUND 2013 PAR MERCED PARTNERS III KUEMPER HOLDINGS VORTUS INVESTMENTS LP VORTUS NPR CO INVESTMENT LP NB CROSSROADS FUND XVII PERRY CREEK CAPITAL FUND I LP ROSEMAWR CAPITAL II LP RS FUND II LP POPLAR POINT CAPITAL PARTNERS LP	-372. 29,939. 7,145. 2,7276,180. 20,5481,826. 3,922. 162599. 11,68132. 2,604.
INCOME (LOSS) FROM PARTNERSHIPS	69,719.

ATTACHMENT 3

FORM 990T - PART II - LINE 20 - CHARITABLE CONTRIBUTIONS	
CHARITABLE CONTRIBUTION (TOTAL TO 30% AND 50% ORGANIZATIONS) LESS: CHARITABLE CONTRIBUTION (TO PORTION OF 50% ORGANIZATIOINS) NET CHARITABLE CONTRIBUTION	1,613,860. 0. 1,613,860.
UNRELATED TRADE OR BUSINESS INCOME  LESS: DEDUCTIONS WITHOUT CHARITABLE CONTRIBUTIONS  NET INCOME BEFORE CHARITABLE CONTRIBUTIONS	69,719. 0. 69,719.
CHARITABLE CONTRIBUTION LIMITATION (30%)	20,916.
CHARITABLE CONTRIBUTION LIMITATION (50%)	34,860.
CHARITABLE CONTRIBUTION LIMITATION (IF PORTION APPLIES)	20,916.
CHARITABLE CONTRIBUTION DEDUCTION	20,916.