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DLN: 93491319017528

OMB No 1545-0052

2017

Return of Private Foundation

Department of the Treasury Internal Revenue Service

Form 990-PF

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.

Open to Public Inspection

For	caler	ndar year 2017, or tax year beginning 01-01-2	2017 , a	nd er	nding 12-31-	2017	
		indation IK FAMILY FOUNDATION INC			A Employer Id	entification numbe	er
11	IE FRAN	IN PAPILET FOUNDATION INC			58-2082981		
		d street (or P O box number if mail is not delivered to street address	s) Room/suite		B Telephone nu	ımber (see ınstructio	ins)
9.	ZU CRES	ST VALLEY DRIVE NW			(404) 255-7112	2	,
		n, state or province, country, and ZIP or foreign postal code A 30327			C If exemption	application is pendii	ng, check here
G Ch	neck al	Il that apply Initial return Initial return of	a former public charity		D 1. Foreign or	ganizations, check h	ere
		Final return Amended retur	•		2 Foreign of	ganizations meeting	the 85%
		Address change Name change			test, chec	k here and attach co	omputation 🕨 🔽
H C	neck ty	vpe of organization ✓ Section 501(c)(3) exempt privat	e foundation			undation status was n 507(b)(1)(A), che	
	Section		ble private foundation			007 (2)(2)(1),7 0.110	
		ket value of all assets at end J Accounting method	✓ Cash ☐ Accru	ıal		ation is in a 60-mont	
		from Part II, col (c), ◆\$ 8,782,758 ☐ Other (specify)			under sectio	n 507(b)(1)(B), che	ck here
	/-	(Part I, column (d) mu	st be on cash basis)				
Pa	rt I	Analysis of Revenue and Expenses (The total	(a) Revenue and				(d) Disbursements
		of amounts in columns (b), (c), and (d) may not necessarily	expenses per books	(ь)	Net investment income	(c) Adjusted net income	for charitable purposes
		equal the amounts in column (a) (see instructions))					(cash basis only)
	1	Contributions, gifts, grants, etc , received (attach schedule)	50,568	3			
	2	Check ▶ ☐ If the foundation is not required to attach					
		Sch B					
Revenue	3	Interest on savings and temporary cash investments	131	-	131		
	4	Dividends and interest from securities	140,736)	140,736		
	5a	Gross rents					
	b 6a	Net gain or (loss) from sale of assets not on line 10	191,509	,			
	١.	- , ,	131,00	1			
	b	Gross sales price for all assets on line 6a 654,68	39				
ă	7	Capital gain net income (from Part IV, line 2)			191,509		
	8	Net short-term capital gain					
	9	Income modifications					
	10a	Gross sales less returns and allowances					
	b	Less Cost of goods sold					
	C	Gross profit or (loss) (attach schedule)		1			
	11		202.044		222 276		
	12	Total. Add lines 1 through 11	382,944		332,376		
	13	Compensation of officers, directors, trustees, etc)	0		
	14 15	Other employee salaries and wages					
Ses	16a	Legal fees (attach schedule)					
Expenses	ь	Accounting fees (attach schedule)	4,500		2,250		2,250
Ë	c	Other professional fees (attach schedule)	3 ,,,,,,				
and Administrative	17	Interest	27	,	0		
rat	18	Taxes (attach schedule) (see instructions)	1,504	1	42		
115	19	Depreciation (attach schedule) and depletion		 			
Ē	20	Occupancy		 			
A	21	Travel, conferences, and meetings					
and	22	Printing and publications					
	23	Other expenses (attach schedule)	9 158	3	50		
Operating	24	Total operating and administrative expenses.					
ber		Add lines 13 through 23	6,189	,	2,342		2,250
0	25	Contributions, gifts, grants paid	390,425	5			390,425
	26	Total expenses and disbursements. Add lines 24 and 25	396,614	ı	2,342		392,675
	27	Subtract line 26 from line 12			,		
	a	Excess of revenue over expenses and disbursements	-13,670)			
	ь	Net investment income (if negative, enter -0-)			330,034		
	С	Adjusted net income(if negative, enter -0-)					
For	_ Paper	work Reduction Act Notice, see instructions.	1	1	Cat No 11289)	К Fo	rm 990-PF (2017

	2	Savings and temporary cash investments			
	3	Accounts receivable ►			
		Less allowance for doubtful accounts ▶	1,636	679	679
	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 ▶			
S	8	Inventories for sale or use			
sets	9	Prepaid expenses and deferred charges			
As	10a	Investments—U S and state government obligations (attach schedule)			
	b	Investments—corporate stock (attach schedule)	5,482,948	5,024,942	7,440,223
	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)	0	25,000	25,000
	14	Land, buildings, and equipment basis ▶			_
		Less accumulated depreciation (attach schedule)			

6,430,622

6,430,622

6,430,622

6,430,622

6,367,477

6.367,477

6,367,477

6,367,477

1

2

3

4

5

6

6,430,622

6,416,952

6,367,477 Form **990-PF** (2017)

49,475

-13,670

8,782,758

Other assets (describe > _

Deferred revenue .

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

Other liabilities (describe ▶_

instructions Also, see page 1, item I)

Grants payable.

Accounts payable and accrued expenses .

Total assets (to be completed by all filers—see the

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 ▶

Capital stock, trust principal, or current funds

Total net assets or fund balances (see instructions) . . .

Retained earnings, accumulated income, endowment, or other funds

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

Analysis of Changes in Net Assets or Fund Balances

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

Paid-in or capital surplus, or land, bldg, and equipment fund

Loans from officers, directors, trustees, and other disqualified persons

Mortgages and other notes payable (attach schedule).

Total liabilities(add lines 17 through 22)

15

16

17

18

19

20

21

22

23

24

25

26

27

28

29

30

31

Part III

2

3

4

Liabilities

Net Assets or Fund Balances

Page **3**

List and describe 2-story brick ware	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)		
1 a CHARLES SCHWAB			Р		
b CAPITAL GAINS DIVIDEN	IDS		Р		
c					
d					
e					
(e) Gross sales price	(f) Depreciation allowed (or allowable)	Cost or	(g) other basis ense of sale	Gain o	h) r (loss)) minus (g)
a 65	3,164		463,180		189,984
b	1,525				1,525
С					
d					
e					
Complete only for assets	showing gain in column (h) and ow	ned by the foundation	on 12/31/69	1	I)
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	Excess	(k) of col (ı) (¡), ıf any	Gains (Col (col (k), but not	h) gain minus less than -0-) or om col (h))
a					189,984
b					1,525
С					·
d					
e					
If gain, also enter in Pa in Part I, line 8	gain or (loss) as defined in sections art I, line 8, column (c) (see instructi	ons) If (loss), enter -0	· }	3	191,509
Part V Qualification U	Jnder Section 4940(e) for Re	educed Tax on Net	Investment Inc	come	
For optional use by domestic p	rivate foundations subject to the sec	ction 4940(a) tax on ne	t investment incom	e)	
f section 4940(d)(2) applies, le	•				es 🔽 No
	e section 4942 tax on the distributa ot qualify under section 4940(e) Do		in the base period?	Y Ц Y	es 🖭 No
1 Enter the appropriate an	nount in each column for each year,	see instructions before	making any entries	5	
(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitab		(d) Distribution rati (col (b) divided by c	
2016	371,065		7,597,241		0 048842
2015	220,574		8,554,395		0 025785
2014	495,917		8,532,673		0 058120
2013	292,022		7,128,492		0 040965
2012	350,124		5,980,968		0 058540
2 Total of line 1, column (d)		2		0 232252
	for the 5-year base period—divide				0.046450
	idation has been in existence if less ncharitable-use assets for 2017 fron		· · · · · 3		0 046450 8 347 195
5 Multiply line 4 by line 3		•	5		8,347,195
			· · · · 		387,727
	ent income (1% of Part I, line 27b)		6		3,300
			7		391,027
	ons from Part XII, line 4 ,				392,675
If line 8 is equal to or gre instructions	eater than line 7, check the box in Pa	art VI, line 1b, and com	ipiete that part usin	g a 1% tax rate Se	e the Part VI

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

7b

	· · · · · · · · · · · · · · · · · · ·			
Down WIII	Information About Officers,	Directors, Trustees,	Foundation Managers,	Highly Paid Employees,
Part VIII	and Contractors			

1 List all officers, directors, trustee	es, foundation managers ar	nd their compensation	(see instructions).	
(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
See Additional Data Table			Componibution.	
2 Compensation of five highest-pai	d employees (other than t	hose included on line :	L—see instructions). If nor Contributions to	ie, enter "NONE."
(a) Name and address of each employee pa more than \$50,000	Title, and average hours per week (b) devoted to position	(c) Compensation	employee benefit plans and deferred (d) compensation	Expense account, (e) other allowances
NONE			(a) compensation	
				
Total number of other employees paid ove				
3 Five highest-paid independent co				0 E".
(a) Name and address of each person		1	e of service	(c) Compensation
NONE				
		-		
		_		
		-		
Total number of others receiving over \$50	,000 for professional services			0
Part IX-A Summary of Direct C				
List the foundation's four largest direct charitable organizations and other beneficiaries served, con			nation such as the number of	Expenses
1				
2				
3				
4				
-				
Part IX-B Summary of Program	m-Related Investments	(see instructions)		
Describe the two largest program-related inve	stments made by the foundation d	uring the tax year on lines 1	and 2	Amount
1				
				
2				
All II	<u> </u>			
All other program-related investments 3	See instructions			
Total. Add lines 1 through 3 .		· · · · · · · ·		000 PE (2017)

2

3a 3h

4

5

392.675

3.300

389.375

Form **990-PF** (2017)

Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,

Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment

Adjusted qualifying distributions. Subtract line 5 from line 4.

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

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

Amounts set aside for specific charitable projects that satisfy the

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

2

3

4

5

21,385

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(d)

Page 9

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Part XIII	Undistributed Income (see instruc	tions)					

- 2 Undistributed income, if any, as of the end of 2017 a Enter amount for 2016 only.
 - 85.538

(a)

Corpus

182.741

21,385

161,356

64.153

97,203

97,203

(b)

Years prior to 2016

(c)

2016

b Total for prior years Excess distributions carryover, if any, to 2017 From 2012. **b** From 2013. . . . c From 2014. . .

1 Distributable amount for 2017 from Part XI, line 7

- d From 2015. . . .

XII, line 4 🕨 \$ 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

- 97.203 e From 2016. f Total of lines 3a through e. 4 Qualifying distributions for 2017 from Part

d Applied to 2017 distributable amount. . . . e Remaining amount distributed out of corpus **5** Excess distributions carryover applied to 2017

same amount must be shown in column (a))

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

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

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

Subtract lines 7 and 8 from line 6a

9 Excess distributions carryover to 2018.

10 Analysis of line 9

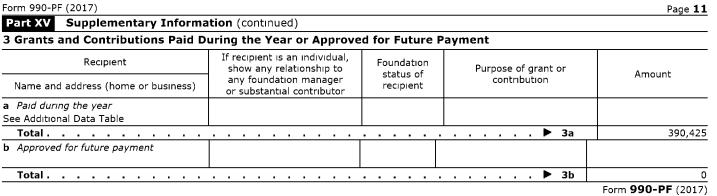
a Excess from 2013. . .

b Excess from 2014. . c Excess from 2015. . . . d Excess from 2016. . . e Excess from 2017. . .

6 Enter the net total of each column as

b Prior years' undistributed income Subtract line 4b from line 2b c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed. d Subtract line 6c from line 6b Taxable amount e Undistributed income for 2016 Subtract line 4a from line 2a Taxable amount—see instructions f Undistributed income for 2017 Subtract lines 4d and 5 from line 1. This amount must be distributed in 2018 7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions) 8 Excess distributions carryover from 2012 not

indicated below:



	A Analysis of Income-Producing	Activities				
nter gross a	amounts unless otherwise indicated	Unrelated b	usiness income	Excluded by sectio	n 512, 513, or 514	(e) Related or exempt function income
1 Program	service revenue	Business code	Amount	Exclusion code	Amount	(See instructions)
_	nd contracts from government agencies					
	ship dues and assessments					
	t on savings and temporary cash			14	131	
4 Dividend	s and interest from securities			14	140,736	
	al income or (loss) from real estate					
	nanced property bt-financed property					
	tal income or (loss) from personal property					
	vestment income					
	(loss) from sales of assets other than					
	ry			18	191,509	
	me or (loss) from special events ofit or (loss) from sales of inventory					
	venue a					
b						
с						
	Add columns (b), (d), and (e).		0		222 276	(
					332,376 . 3	332,376
(See wor	ksheet in line 13 instructions to verify calcul	ations)				332,373
	ksheet in line 13 instructions to verify calcul B Relationship of Activities to th	ations) e Accomplish	nment of Exem	pt Purposes		
(See wor	ksheet in line 13 instructions to verify calcul	ations) e Accomplish ncome is report	nment of Exem ed in column (e) of	pt Purposes F Part XVI-A contrib	uted importantly to	
(See wor Part XVI- Line No.	ksheet in line 13 instructions to verify calcul Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex	ations) e Accomplish ncome is report	nment of Exem ed in column (e) of	pt Purposes F Part XVI-A contrib	uted importantly to	
(See wor Part XVI- Line No.	ksheet in line 13 instructions to verify calcul Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex	ations) e Accomplish ncome is report	nment of Exem ed in column (e) of	pt Purposes F Part XVI-A contrib	uted importantly to	
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(See wor Part XVI- Line No.	ksheet in line 13 instructions to verify calcul Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex	ations) e Accomplish ncome is report	nment of Exem ed in column (e) of	pt Purposes F Part XVI-A contrib	uted importantly to	
(See wor Part XVI- Line No.	ksheet in line 13 instructions to verify calcul Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex	ations) e Accomplish ncome is report	nment of Exem ed in column (e) of	pt Purposes F Part XVI-A contrib	uted importantly to	
(See wor Part XVI- Line No.	ksheet in line 13 instructions to verify calcul Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex	ations) e Accomplish ncome is report	nment of Exem ed in column (e) of	pt Purposes F Part XVI-A contrib	uted importantly to	
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(See wor Part XVI- Line No.	ksheet in line 13 instructions to verify calcul Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex	ations) e Accomplish ncome is report	nment of Exem ed in column (e) of	pt Purposes F Part XVI-A contrib	uted importantly to	
(See wor Part XVI- Line No.	ksheet in line 13 instructions to verify calcul Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex	ations) e Accomplish ncome is report	nment of Exem ed in column (e) of	pt Purposes F Part XVI-A contrib	uted importantly to	
(See wor Part XVI- Line No.	ksheet in line 13 instructions to verify calcul Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex	ations) e Accomplish ncome is report	nment of Exem ed in column (e) of	pt Purposes F Part XVI-A contrib	uted importantly to	
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(See wor Part XVI- Line No.	ksheet in line 13 instructions to verify calcul Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex	ations) e Accomplish ncome is report	nment of Exem ed in column (e) of	pt Purposes F Part XVI-A contrib	uted importantly to	
(See wor Part XVI- Line No.	ksheet in line 13 instructions to verify calcul Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex	ations) e Accomplish ncome is report	nment of Exem ed in column (e) of	pt Purposes F Part XVI-A contrib	uted importantly to	
(See wor Part XVI- Line No.	ksheet in line 13 instructions to verify calcul Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex	ations) e Accomplish ncome is report	nment of Exem ed in column (e) of	pt Purposes F Part XVI-A contrib	uted importantly to n purposes) (See	000 PE (2017

Form 9	90-PF (2	<u> </u>										Pa	ge 13
Part	XVII	Information Re Exempt Organi		ransfer	rs To a	nd Transa	ctio	ns and F	Relatio	nships With Nonch	aritable	_	_
		anization directly or in Code (other than sectio								on described in section 5 organizations?	01	Yes	No
a Tra	nsfers f	rom the reporting foun	dation to a r	oncharita	able exe	mpt organiz	ation	of					
(1)	Cash.										1a(1)		No
(2)	Other	assets									1a(2)		No
b Oth	er trans	sactions											
		of assets to a nonchari	•	_							1b(1)	1	No
		ases of assets from a n									1b(2)	1	No
		l of facilities, equipmer	•								1b(3)	+	No
		oursement arrangemen					•				1b(4)	+	No
٠.		or loan guarantees.									1b(5)	+	No
٠.		nance of services or m	•		-						1b(6)	1	No
	-	facilities, equipment, n									1c		No
of t	he good iny tran	ls, other assets, or ser	vices given b ngement, sh	y the rep low in col	porting f lumn (d	oundation I	f the f of the	oundatior goods, ot	n receive her asse	ways show the fair mark d less than fair market ts, or services received transfers, transactions, and	value	angemer	nts
(a) Eme	. 110	(b) / imount mivored	(c) Hame of	Homenania	abic exer	npe organizatio	511	(4) 5050	eripcion or	eransiers, eransaectons, and	Sharing arre	angemen	165
des	cribed i	dation directly or indire in section 501(c) of the implete the following so (a) Name of organization	Code (other chedule	,	ction 50	,	n secti	ion 527? .			Yes	\	No
		(a) Hame or organization	<u> </u>		,,,	y Type of Orga	medic			(c) Bescription of t	siderorisimp		
	of my		, it is true, c							ng schedules and stater than taxpayer) is based			
Sign		****				 2018-11-15	5	*	****		ay the IRS d	iscuss tl	กเร
Here		ignature of officer or ti	rustee			Date) - _⊤	itle	w b	eturn ith the prepa elow	_	
		<u> </u>		1_	, .			1			ee instr)?	⊻ Yes	⊔ No
		Print/Type preparer's	name	Prepare	er's Sign	ature		Date		Check if self PTIN		C 435	
Paid		CHRISTOPHER B D	AVIS					2018-	11-15	employed ▶ □	P0054	b438	

	7
Paid	
Preparent Use (

desc	cribed i	dation directly or indirectly in section 501(c) of the Coomplete the following sched	de (other than	section 50	1(c)(3)) or in se	ection 527			☐ Yes ☑ No	
		(a) Name of organization		(E) Type of organiza	ation		(c) Descripti	on of relationship	
							_			
	of my		s true, correct						statements, and to the best based on all information of	
Sign Here	*	****		2018-11-		1-15			May the IRS discuss this return with the preparer shown	
	y -	Signature of officer or trustee		Date		Title			below (see instr)?	
		Print/Type preparer's nar	me Prep	arer's Sign	ature	Date		Check if self-	PTIN P00546438	
Paid		CHRISTOPHER B DAVIS CPA				201	18-11-15 employed ▶ L		P00346436	
Preparei Use Only		Firm's name ► HAW APF	RIO LLP						Firm's EIN ▶57-1157523	
	•	Firm's address ► FIVE C	ONCOURSE PA	ARKWAY S	JITE 1000					
		ATLAN	TA, GA 30328	3					Phone no (404) 892-9651	
		<u>I</u>							Form 990-PF (2017)	

Form 990PF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation (a) Name and address Title, and average (c) Compensation (If (d) Expense account, hours per week not paid, enter Contributions to (e) other allowances (b) devoted to position -0-) employee benefit plans and deferred compensation LOIS FRANK PRESIDENT 0.00 920 CREST VALLEY DRIVE NW ATLANTA, GA 30327 LARRY FRANK CHAIRMAN OF BOARD 0.00 920 CREST VALLEY DRIVE NW ATLANTA, GA 30327 ISAAC FRANK DIRECTOR O 0.00 920 CREST VALLEY DRIVE NW ATLANTA, GA 30327 M JOSHUA FRANK TREASURER 0.00 920 CREST VALLEY DRIVE NW ATLANTA, GA 30327 ADAM FRANK SECRETARY 0.00 920 CREST VALLEY DRIVE NW ATLANTA, GA 30327 AARON FRANK DIRECTOR 0 00 920 CREST VALLEY DRIVE NW

ATLANTA, GA 30327

Form 990PF Part XV Line 1a - List an	y managers of the foundation w	ho have contributed mor	e than 2% of the tota
contributions received by the founda	tion before the close of any tax	year (but only if they have	e contributed more
than \$5,000).			

ADAM FRANK

AARON FRANK

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient Foundation Purpose of grant or If recipient is an individual, Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year AMERICAN CIVIL LIBERTIES UNION NONE PC. UNRESTRICTED 750 125 BROAD STREET 18TH FLOOR NEW YORK, NY 10004

*				
ALEXANDER MUSS HIGH SCHOOL IN ISRAEL 78 RANDALL AVE ROCKVILLE CENTRE, NY 11570	NONE	PC	UNRESTRICTED	3,500
AMERICAN JEWISH COMMITTEE 3525 PIEDMONT RD NE ATIANTA GA 30305	NONE	PC	UNRESTRICTED	10,500

390,425 За

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient Foundation Purpose of grant or If recipient is an individual, Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year AMERICAN PARDES FOUNDATION NONE PC. UNRESTRICTED 17,500 5 W 37TH STREET 802 NEW YORK, NY 10018 NIONIE l nc 251 MIDTOWAL ACCICTANCE CENTED LINIDECEDICEED

30 PORTER PL NE ATLANTA, GA 30308	NONE	PC	UNKESTRICTED	251
ANONYMOUS FOR ANIMALS PO BOX 11915 TEL AVIV 61119 IS	NONE	PC	UNRESTRICTED	3,000

390,425 За

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient Foundation Purpose of grant or If recipient is an individual, Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year ANTI DEFAMATION LEAGUE NONE PC UNRESTRICTED 1,500 3490 PIEDMONT RD NE 610

ATLANTA, GA 30305				İ
ARAVA INSTITUTE 1320 CENTRE ST SUITE 206 NEWTON CENTRE, MA 02459	NONE	PC	UNRESTRICTED	

NEWTON CENTRE, MA 02459				
ART START	NONE	PC	UNRESTRICTED	

NEWTON CENTRE, MA 02439				
ART START 526 WEST 26TH STREET SUITE 501	NONE	PC	UNRESTRICTED	

ART START	NONE	PC	UNRESTRICTED	
326 WEST 26TH STREET SUITE 501				
IEW YORK, NY 10001				

Total .

За

ART START	NONE	PC	UNRESTRICTED	
526 WEST 26TH STREET SUITE 501 NEW YORK, NY 10001				

ART START	NONE	PC	UNRESTRICTED	1,000
326 WEST 26TH STREET SUITE 501 NEW YORK, NY 10001				
NEW TORK, INT 10001				

20,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient Foundation Purpose of grant or If recipient is an individual, Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year ATLANTA FOOD BANK NONE PC UNRESTRICTED 2.665 732 JOSEPH EAST LOWERY BLVD ATLANTA CA 20219

ATLANTA, GA 30316				
ATLANTA JEWISH FILM FESTIVAL 6 PIEDMONT CENTER 501 ATLANTA, GA 30305	NONE	PC	UNRESTRICTED	1,870
ATLANTA WOMEN'S FOUNDATION	NONE	PC	UNRESTRICTED	1,000

6 PIEDMONT CENTER 501 ATLANTA, GA 30305				_,-
ATLANTA WOMEN'S FOUNDATION 50 HURT PLAZA SE ATLANTA, GA 30303	NONE	PC	UNRESTRICTED	1,0

Total .

За

ATLANTA, GA 30305				
ATLANTA WOMEN'S FOUNDATION 50 HURT PLAZA SE ATLANTA, GA 30303	NONE	PC	UNRESTRICTED	1,0

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient Foundation Purpose of grant or If recipient is an individual, Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year BE THE MATCH NONE PC UNRESTRICTED 3,800 3001 BROADWAY STREET NE SUITE 601 MINNEAPOLIS, MN 55413

BEIT HATFUTSOT 633 THIRD AVENUE 21ST FLOOR NEW YORK, NY 10017	NONE	PC	UNRESTRICTED	500
BLAZESPORTS AMERICA INC 1670 OAKBROOK DRIVE SUITE 331	NONE	PC	UNRESTRICTED	1,129

633 THIRD AVENUE 21ST FLOOR NEW YORK, NY 10017				
BLAZESPORTS AMERICA INC 1670 OAKBROOK DRIVE SUITE 331 NORCROSS 64 30093	NONE	PC	UNRESTRICTED	1,1

Total .

390,425 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				
CAMP TWIN LAKES 1100 SPRING ST NW 260 ATLANTA, GA 30309	NONE	PC	UNRESTRICTED	

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

CANINE ASSISTANTS 3160 FRANCIS ROAD MILTON, GA 30004	NONE	PC	UNRESTRICTED	

3a

3160 FRANCIS ROAD MILTON, GA 30004				
CARE151 ELLIS STREET NE	NONE	PC	UNRESTRICTED	

11121 011, 011 00001				
CARE151 ELLIS STREET NE ATLANTA, GA 30303	NONE	PC	UNRESTRICTED	3,000

1.000

250

CARE151 ELLIS STREET NE ATLANTA, GA 30303	NONE	PC	UNRESTRICTED	3
Total				390,425

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				
CARING FOR OTHERS 3537 BROWNS MILL ROAD	NONE	PC	UNRESTRICTED	450

B537 BROWNS MILL ROAD ATLANTA, GA 30354				
CASA FOR GEORGIA11 N SAGE ST FOCCOA, GA 30577	NONE	PC	UNRESTRICTED	10

CASA FOR GEORGIA11 N SAGE ST TOCCOA, GA 30577	NONE	PC	UNRESTRICTED	100
CATSKILL ANIMAL SANCTUARY 316 OLD STAGE RD	NONE	PC	UNRESTRICTED	250

10CCOA, GA 30377				
CATSKILL ANIMAL SANCTUARY 316 OLD STAGE RD SAUGERTIES, NY 12477	NONE	PC	UNRESTRICTED	250

CATSKILL ANIMAL SANCTUARY 316 OLD STAGE RD SAUGERTIES, NY 12477	NONE	PC	UNRESTRICTED	

CATSKILL ANIMAL SANCTUARY 316 OLD STAGE RD SAUGERTIES, NY 12477	NONE	PC	UNRESTRICTED	250
Total				390,425

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 CHATTAHOOCHEE RIVERKEEPER NONE PC. UNRESTRICTED 500 916 JOSEPH E LOWERY BLVD NW ATLANTA, GA 30318

CHILDREN'S HEALTHCARE OF ATLANTA 11577 NORTHEAST EXPRESSWAY SUITE A ATLANTA, GA 30329	NONE	PC	UNRESTRICTED	3,820
CLIMATE REALITY PROJECT 750 9TH STREET NW WASHINGTON DC 20001	NONE	PC	UNRESTRICTED	4,000

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 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 CROHN'S & COLITIS FOUNDATION NONE PC UNRESTRICTED 300 2250 N DRUID HILLS ROAD ATLANTA, GA 30329

DEKALB COMMUNITY COLLEGE 3251 PANTHERSVILLE RD DECATUR, GA 30034	NONE	PC	UNRESTRICTED	1,250
EMORY UNIVERSITY	NONE	PC	UNRESTRICTED	1,980

DECATUR, GA 30034				
EMORY UNIVERSITY 1518 CLIFTON ROAD NE ATLANTA, GA 30329	NONE	PC	UNRESTRICTED	1,9

DECATUR, GA 30034				
EMORY UNIVERSITY 1518 CLIFTON ROAD NE ATLANTA, GA 30329	NONE	PC	UNRESTRICTED	1,

Total .

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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				
ETGARPO BOX 2212 DECATUR, GA 30031	NONE	PC	UNRESTRICTED	

FAITH ALLIANCE METRO ATLANTA	NONE	PC	UNRESTRICTED	
1589 PEACHTREE ST NE				
ATLANTA, GA 30309				

1589 PEACHTREE ST NE ATLANTA, GA 30309				
FREE TO BREATHE	NONE	PC	UNRESTRICTED	

*				
FREE TO BREATHE	NONE	PC	UNRESTRICTED	
1 POINT PLACE SUITE 200				i
MADISON, WI 53719				i

REE TO BREATHE POINT PLACE SUITE 200 ADISON, WI 53719	NONE	PC	UNRESTRICTED	

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FREE TO BREATHE	NONE	PC	UNRESTRICTED	3
1 POINT PLACE SUITE 200				
MADISON, WI 53719				

REE TO BREATHE NONE PC POINT PLACE SUITE 200 ADISON, WI 53719	UNRESTRICTED	3,810

1.000

250

	200 425
Total	390,425

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient Foundation Purpose of grant or If recipient is an individual, Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year GEORGIA BUDGET AND POLICY NONE PC UNRESTRICTED 3,000 100 EDGEWOOD AVENUE NE SUITE 950 ATLANTA, GA 30303

GEORGIA TRANSPLANT FOUNDATION 50 SUGAR MILL ROAD SUITE 170-A ATLANTA, GA 30350	NONE	PC	UNRESTRICTED	3,815
GRADY HEALTH FOUNDATION 191 PEACHTREE STREET NE SUITE 820 ATLANTA, GA 30303	NONE	PC	UNRESTRICTED	2,004

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 HIAS NONE PC UNRESTRICTED 1.500 333 SEVENTH AVENUE 16TH FLOOR

HILLELS OF GA 735 GATEWOOD ROAD NE ATLANTA, GA 30329 NONE PC UNRESTRICTED 1,000	NEW YORK, NY 10001				
	735 GATEWOOD ROAD NE	NONE	PC	UNRESTRICTED	1,000

500

390,425

735 GATEWOOD ROAD NE ATLANTA, GA 30329	110.12		omizona or zo	-/
HOSEA FEED THE HUNGRY 1035 DONNELLY AVENUE SW	NONE	PC	UNRESTRICTED	

AIBANIA, GA 30323				
HOSEA FEED THE HUNGRY 1035 DONNELLY AVENUE SW ATLANTA, GA 30310	NONE	PC	UNRESTRICTED	

Total .

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HOSEA FEED THE HUNGRY	NONE	PC	UNRESTRICTED	
1035 DONNELLY AVENUE SW ATLANTA, GA 30310				

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 INTERFAITH COMMUNITY INITIATIVES NONE PC. UNRESTRICTED 1,250 669 EAST SIDE AVE SE ATLANTA, GA 30316

JEWISH COUNCIL FOR PUBLIC AFFAIRS 116 E 27TH ST 10TH FL NEW YORK, NY 10016	NONE	PC	UNRESTRICTED	15,400
JERUSALEM SOCIETY FOR PREVENTION OF CRUELTY TO ANIMALS 630 THIRD AVENUE NEW YORK, NY 10017	NONE	PC	UNRESTRICTED	2,350

390,425 За

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient Foundation Purpose of grant or If recipient is an individual, Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year JEWISH COMMUNITY RELATIONS NONE PC. UNRESTRICTED 5.000 COUNCIL 1440 SPRING STREET NW ດດ

ATLANTA, GA 30309				
JEWISH EDUCATIONAL LOAN FUND 4549 CHAMBLEE DUNWOODY RD DUNWOODY, GA 30338	NONE	PC	UNRESTRICTED	1,00
				1

DUNWOODY, GA 30338				I
JEWISH FAMILY & CAREER SERVICES 4549 CHAMBLEE DUNWOODY RD	NONE	PC	UNRESTRICTED	

За

JEWISH FAMILY & CAREER SERVICES	NONE	I PC	UNRESTRICTED	2,200
4549 CHAMBLEE DUNWOODY RD				I
ATLANTA, GA 30338				<u> </u>

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient Foundation Purpose of grant or If recipient is an individual, Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year JEWISH NATIONAL FUND NONE PC. UNRESTRICTED 6,500 42 EAST 69TH STREET NEW YORK, NY 10021

JEWISH WOMEN'S FUND 1440 SPRING STREET NW ATLANTA, GA 30309	NONE	PC	UNRESTRICTED	6,000
JUSTUS & KARIN ROSENBERG FOUNDATION PO BOX 170 BROOKLYN, NY 11218	NONE	PC	UNRESTRICTED	1,000

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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				
KEHILLA OF SANDY SPRINGS 5075 ROSWELL ROAD NE ATLANTA, GA 30342	NONE	PC	UNRESTRICTED	500

KIDS FOR PEACE3303 JAMES DR CARLSBAD, CA 92008	NONE	PC	UNRESTRICTED	
LEUKEMIA & LYMPHOMA SOCIETY	NONE	PC	UNRESTRICTED	

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KIDS FOR PEACE3303 JAMES DR CARLSBAD, CA 92008	NONE	PC	UNRESTRICTED	500
LEUKEMIA & LYMPHOMA SOCIETY 3715 NORTHSIDE PARKWAY ATLANTA, GA 30327	NONE	PC	UNRESTRICTED	100

CARLSBAD, CA 92008				
LEUKEMIA & LYMPHOMA SOCIETY 3715 NORTHSIDE PARKWAY ATLANTA, GA 30327	NONE	PC	UNRESTRICTED	10

LEUKEMIA & LYMPHOMA SOCIETY 3715 NORTHSIDE PARKWAY ATLANTA, GA 30327	NONE	PC	UNRESTRICTED	100
Total				390,425

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				
TEMIMA HICH SCHOOL 1839 LAVISTA RD	NONE	PC	UNRESTRICTED	400

ATLANTA, GA 30329				
IMMUD1440 SPRING STREET NW ATLANTA, GA 30309	NONE	PC	UNRESTRICTED	

LIMMUD1440 SPRING STREET NW ATLANTA, GA 30309	NONE	PC	UNRESTRICTED	
MASORTI FOUNDATION	NONE	PC	UNRESTRICTED	

ATLANTA, GA 30309				l
MASORTI FOUNDATION 475 RIVERSIDE DRIVE	NONE	PC	UNRESTRICTED	

MASORTI FOUNDATION	NONE	PC	UNRESTRICTED	5,000
475 RIVERSIDE DRIVE				
NEW YORK, NY 10115				

F75 RIVERSIDE DRIVE NEW YORK, NY 10115				
ASSOCIATION	NONL	۲۵	ONKESTRICTED	

Tatal		30
NEW YORK, NY 10115		
475 RIVERSIDE DRIVE		

Total		•	390 425
NEW YORK, NY 10115			

NEW TORK, NY TOTTS		
Total	 	390,425

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

MED SHARE 3240 CLIFTON SPRINGS ROAD DECATUR, GA 30034	NONE	PC	UNRESTRICTED	1,000
MJCC5432 TILLY MILL ROAD	NONE	PC	UNRESTRICTED	2,250

MJCC5432 TILLY MILL ROAD ATLANTA, GA 30338	NONE	PC	UNRESTRICTED	2,250
NATIONAL CENTER FOR CIVIL AND HUMAN RIGHTS 100 IVAN ALLEN JR BLVD	NONE	PC	UNRESTRICTED	1,000

MJCC5432 TILLY MILL ROAD ATLANTA, GA 30338	NONE	PC	UNRESTRICTED	2,3
NATIONAL CENTER FOR CIVIL AND HUMAN RIGHTS 100 IVAN ALLEN JR BLVD	NONE	PC	UNRESTRICTED	1,0

NATIONAL CENTER FOR CIVIL AND HUMAN RIGHTS LOO IVAN ALLEN JR BLVD ATLANTA, GA 30313	NONE	PC	UNRESTRICTED	1,000

T				200 425
100 IVAN ALLEN JR BLVD ATLANTA, GA 30313				
HUMAN RIGHTS				·
NATIONAL CENTER FOR CIVIL AND	INONE	FC	UNKESTRICTED	1,000

ATLANTA, GA 30313		
Total	 	390,425

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 NATIONAL FOUNDATION FOR CANCER NONE PC UNRESTRICTED 1,500 RESEARCH 4600 EAST WEST HWY SUITE 525 BETHESDA, MD 20814 50

NATIONAL COUNCIL FOR JEWISH WOMEN 2055 L ST NW SUITE 650 STE 1901 WASHINGTON, DC 20036	NONE	PC	UNRESTRICTED	2,850
NEW ISRAEL FUND - NIF	NONE	PC	UNRESTRICTED	7,700

WASHINGTON, DC 20036				
NEW ISRAEL FUND - NIF 330 SEVENTH AVENUE 11TH FLOOR	NONE	PC	UNRESTRICTED	
NEW YORK NV 10001				

Total.

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

WASHINGTON, DC 20030				
NEW ISRAEL FUND - NIF 330 SEVENTH AVENUE 11TH FLOOR NEW YORK, NY 10001	NONE	PC	UNRESTRICTED	,

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 raid during the year				
NORTH FULTON COMMUNITY CHARITIES 11270 ELKINS ROAD ROSWELL, GA 30076	NONE	PC	UNRESTRICTED	

NATIONAL JEWISH HEALTH HOSPITAL	NONE	PC	UNRESTRICTED	
1400 JACKSON STREET				
DENVER, CO 80206				

a Paid during the year

NATIONAL JEWISH HEALTH HOSPITAL 1400 JACKSON STREET DENVER, CO 80206	NONE	PC	UNRESTRICTED	
OR HADACHTAGO TROWRRINGE ROAD	NONE	l pc	LINDESTRICTED	

DENVER, CO 80206				
OR HADASH7460 TROWBRIDGE ROAD	NONE	PC	UNRESTRICTED	

*				
OR HADASH7460 TROWBRIDGE ROAD SANDY SPRINGS, GA 30328	NONE	PC	UNRESTRICTED	2,300

1.000

Total				
SANDY SPRINGS, GA 30328				
OR HADASH7460 TROWBRIDGE ROAD	NONE	PC	UNRESTRICTED	

SANDY SPRINGS, GA 30328			
Total		•	390 425

Total	 	390,425

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 ORT AMERICA NONE l PC UNRESTRICTED 1.200

75 MIADEN LANE 10TH FLOOR NEW YORK, NY 10038	No.		omico mico Es	1,200
PLANNED PARENTHOOD 434 WEST 33RD STREET	NONE	PC	UNRESTRICTED	500

PLANNED PARENTHOOD 434 WEST 33RD STREET NEW YORK, NY 10001	NONE	PC	UNRESTRICTED	500
PROJECT INTERCHANGE 1156 15TH STREET NW WASHINGTON, DC 20005	NONE	PC	UNRESTRICTED	15,000

I ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' '	NEW YORK, NY 10001			
	PROJECT INTERCHANGE 1156 15TH STREET NW WASHINGTON, DC 20005	NONE	UNRESTRICTED	15,000

PROJECT INTERCHANGE	NONE	PC	UNRESTRICTED	15,00
1156 15TH STREET NW WASHINGTON, DC 20005				
WASHINGTON, BC 20003				

Total . 390,425 За

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient Foundation Purpose of grant or If recipient is an individual, Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year SHAMAYUM V'ARETZ914 SOUTH STREET NONE PC. UNRESTRICTED 2.500 SACRAMENTO, CA 95811

SOCIETY FOR ADVANCEMENT OF EDUCATION PO BOX 16252 JERUSALEM 91162 IS	NONE	PC	UNRESTRICTED	1,360
SOCIETY FOR PROTECTION OF ANIMALS 424 E 92ND ST	NONE	PC	UNRESTRICTED	4,000

JERUSALEM 91162 IS				
SOCIETY FOR PROTECTION OF ANIMALS 424 E 92ND ST NEW YORK, NY 10128	NONE	PC	UNRESTRICTED	4,000
i i i i i i i i i i i i i i i i i i i				

IS				
SOCIETY FOR PROTECTION OF ANIMALS 424 E 92ND ST NEW YORK, NY 10128	NONE	PC	UNRESTRICTED	4,0

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 SOJOURN1530 DEKALB AVE SUITE A NONE PC UNRESTRICTED 550 ATLANTA, GA 30307

SUSAN KOMEN 5005 LBJ FREEWAY SUITE 250 DALLAS, TX 75244	NONE	PC	UNRESTRICTED	500
THE WILLIAM BREMAN JEWISH HERITAGE MUSEUM 1440 SPRING STREET NW ATLANTA, GA 30309	NONE	PC	UNRESTRICTED	500

Total .

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, 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 THE WILLIAM BREMAN JEWISH HOME NONE PC. UNRESTRICTED 2.700 3150 HOWELL MILL RD NW ATLANTA, GA 30327

UNITED WAY 100 EDGEWOOD AVENUE NE ATLANTA, GA 30303	NONE	PC	UNRESTRICTED	1,000
UNIVERSITY OF GA FOUNDATION 394 S MILLEDGEVILLE AVENUE SUITE 100	NONE	PC	UNRESTRICTED	3,000

ATHENS, GA 30605

390,425

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 WABE901 PBA740 BISMARK RD NE NONE PC UNRESTRICTED 365 ATLANTA, GA 30324

WEINSTEIN HOSPICE 3150 HOWELL MILL RD NW ATLANTA, GA 30327	NONE	PC	UNRESTRICTED	500
YEMIN ORDE4340 EAST-WEST HWY BETHESDA, MD 20814	NONE	PC	UNRESTRICTED	2,000

Total . 3a 390,425

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

2.500

500

a Paid during the year				
CALIFORNIA WILDLIFEPO BOX 2022 MALIBU, CA 90265	NONE	PC	UNRESTRICTED	

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

ASIAN WOMEN'S SHELTER	NONE	PC	UNRESTRICTED	
3543 18TH ST 19				
SAN FRANCISCO, CA 94110				

3543 18TH ST 19 SAN FRANCISCO, CA 94110				
GIVE WELL FOUNDATION INC 949 LEYDEN ST	NONE	PC	UNRESTRICTED	

SAN FRANCISCO, CA 94110				
GIVE WELL FOUNDATION INC 949 LEYDEN ST	NONE	PC	UNRESTRICTED	
DENVER, CO 80220				

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GIVE WELL FOUNDATION INC 949 LEYDEN ST DENVER, CO 80220	NONE	PC	UNRESTRICTED	50,000

			_	
DENVER, CO 80220				
GIVE WELL FOUNDATION INC 949 LEYDEN ST	NONE	PC	UNRESTRICTED	

DENVER, CO 80220		
Total	 	 390,425

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient Foundation Purpose of grant or If recipient is an individual, Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year AMERICAN FRIENDS OF AACI NONE PC UNRESTRICTED 500 CKROOT 21 E CHESTNUT STREET CHICAGO, IL 60611

TAL TORAH FOUNDATION INC 14419 68TH RD FLUSHING, NY 11367	NONE	PC	UNRESTRICTED	2,000
JEWISH UNITY INTERNTIONAL INC 1428 HOLLY IN NE	NONE	PC	UNRESTRICTED	1,000

14419 68TH RD FLUSHING, NY 11367				_,-
JEWISH UNITY INTERNTIONAL INC 1428 HOLLY LN NE ATLANTA GA 30329	NONE	PC	UNRESTRICTED	1,00

Total .

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, 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 CONGREGATION BETH EL NONE PC UNRESTRICTED 3,090 1301 OXFORD STREET BERKELEY, CA 94709 D.C. 2 000 LINDECTRICTER

GIFT PROCESSING VU STATION B 357727 2301 VANDERBILT PLACE NASHVILLE, TN 37235	NONE	PC	UNRESTRICTED	2,000
AHAVATH ACHIM CONGREGATION 600 PEACHTREE BATTLE AVE NW ATLANTA, GA 30327	NONE	PC	UNRESTRICTED	1,318

Total.

3a

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient Foundation Purpose of grant or If recipient is an individual, Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year EPSTEIN SCHOOL335 COLEWOOD WAY NONE PC. UNRESTRICTED 250 ATLANTA, GA 30328 ---

KRAKOW MIODOWA 24 KRAKOW 31-055 PL	NONE	PC	UNRESTRICTED	250
JUVENILE DIABETES RESEARCH 100 W 10TH ST 1103	NONE	PC	UNRESTRICTED	100

KRAKOW 31-055 PL				
JUVENILE DIABETES RESEARCH 100 W 10TH ST 1103 WILMINGTON, DE 19801	NONE	PC	UNRESTRICTED	100
Total				390,425

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient Foundation Purpose of grant or If recipient is an individual, Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year VALLEY OF THE SUN JEWISH NONE PC. UNRESTRICTED 120 COMMUNITY CENTER 12701 N SCOTTSDALE RD STE 203

SCOTTSDALE, AZ 85254				
NATIONAL SPORTS CENTER FOR THE DISABLED INC 1801 MILE HIGH STADIUM CIRCLE 1500 DENVER, CO 80204	NONE	PC	UNRESTRICTED	100,000
FAITH IN PUBLIC LIFEPO BOX 33668	NONE	PC	UNRESTRICTED	250

DISABLED INC 1801 MILE HIGH STADIUM CIRCLE 1500 DENVER, CO 80204				
FAITH IN PUBLIC LIFEPO BOX 33668 WASHINGTON, DC 20033	NONE	PC	UNRESTRICTED	250

За

390,425

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient Foundation If recipient is an individual, Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business)

a Paid during the year				
JERUSALEM CENTER FOR PUBLIC AFFAIRS 13 TEL HAI ST	NONE	PC	UNRESTRICTED	

or substantial contributor

3a

JERUSALEM 9210/1/ IS		
Total	 	 390,425

efile GRAPHIC print - DO NOT I	PROCESS	As Filed Data -		D	LN: 93491319017528	
TY 2017 Accounting Fees Schedule						
Name: THE FRANK FAMILY FOUNDATION INC						
EIN: 58-2082981						
Accounting Fees Schedule						
Category	Amo	ount Ne	t Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes	

2,250

4,500

ACCOUNTING FEES

TY	2017	Investments Corporate Stock Schedule	
		•	

Name: THE FRANK FAMILY FOUNDATION INC.

EIN: 58-2082981 Name of Stock **End of Year Book**

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

5,024,942

Value

End of Year Fair

7,440,223

CHARLES SCHWAB

DLN: 93491319017528

Market Value

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN: 93491319017528
TY 2017 Investments - Other	Schedule		
Name:	THE FRANK FAMI	LY FOUNDATION INC	
EIN:	58-2082981		
Investments Other Schedule 2			

Investments Other Schedule 2					
Category/ Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value		
ISRAEL BONDS	AT COST	25,000	25,000		

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN: 93491319017528		
TY 2017 Other Decreases Schedule					
Name:	THE FRANK FA	MILY FOUNDATION INC			
EIN:	58-2082981				
De	escription		Amount		

BOOK/TAX ADJUSTMENT

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN	: 93491319017528		
TY 2017 Other Expenses Schedule						
Name:	THE FRANK FAM	1ILY FOUNDATIO	N INC			
EIN:	EIN: 58-2082981					
Other Expenses Schedule						
Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes		
BANK CHARGES	50	50		0		

LICENSE FEE

NONDEDUCTIBLE EXPENSES

efile GRAPHIC print - DO NOT PROCESS	As Filed Data	-	DLI	N: 93491319017528		
TY 2017 Taxes Schedule						
Name: THE FRANK FAMILY FOUNDATION INC EIN: 58-2082981						
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes		
FOREIGN TAXES PAID	42	42		0		

TAXES

efile GRAPHIC print - D	O NOT PROCESS	As Filed Data -				DLN: 93491319017528
Schedule B		Schedu	ule of Contributo	rs		OMB No 1545-0047
(Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service	► Information a	about Schedule B (F	h to Form 990, 990-EZ, or 990-PF B (Form 990, 990-EZ, or 990-PF) and its instructions is at <u>www irs gov/form990</u>			2017
Name of the organization					Employer id	dentification number
Organization type (che	ck one)				58-2082981	
Organization type (che	ok one)					
Filers of:	Section:					
Form 990 or 990-EZ	☐ 501(c)() (enter number) o	organization			
	☐ 4947(a)(1) nonexempt chai	ritable trust not treated a	s a private founda	tion	
	☐ 527 polit	ical organization				
Form 990-PF	✓ 501(c)(3)) exempt private fo	undation			
	☐ 4947(a)(4947(a)(1) nonexempt charitable trust treated as a private foundation				
501(c)(3) taxable private foundation						
			PF that received, during t omplete Parts I and II So			
Special Rules						
under sections 5	09(a)(1) and 170(b))(1)(A)(vı), that che luring the year, tota	g Form 990 or 990-EZ the cked Schedule A (Form s al contributions of the gre plete Parts I and II	990 or 990-EZ), P	art II, line 13,	16a, or 16b, and that
during the year, t	otal contributions o	of more than \$1,000	or (10) filing Form 990 of the control of the contr	, charitable, scient		
during the year, of If this box is check purpose Don't co	contributions <i>exclus</i> cked, enter here the complete any of the i	sively for religious, e total contributions parts unless the G	or (10) filing Form 990 c charitable, etc., purposes that were received during eneral Rule applies to the or more during the year	s, but no such con ng the year for an is organization be	itributions tota exclusively re cause it recei	aled more than \$1,000 eligious, charitable, etc , ived <i>nonexclusively</i>
990-EZ, or 990-PF), but	it must answer "No	o" on Part IV, line 2	lle and/or the Special Rul , of its Form 990, or chec it it doesn't meet the filing	ck the box on line	H of its	
For Paperwork Reduction A for Form 990, 990-EZ, or 990		tructions	Cat No 30613X	Schedu	ıle B (Form 990	o, 990-EZ, or 990-PF) (2017)

Schedule B (Fo	rm 990, 990-EZ, or 990-PF) (2017)		Page 2	
Name of organ THE FRANK FAM	ization ILY FOUNDATION INC	Employer identification 58-2082981	number	
Part I	Contributors (See instructions) Use duplicate copies of Part I if ad-	ditional space is needed		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
1	AARON FRANK		Person 🗸	
	920 CREST VALLEY DRIVE NW	\$ 50,568		
	ATLANTA, GA 30327		(Complete Part II for noncash contributions)	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
			Person	
-			Payroll	
		\$	Noncash	
	(1)	(2)	(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)	
		Schedule B (E	orm 990 990-E7 or 990-DE\ (2017)	

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