

For calendar year 2017, or tax year beginning 01-01-2017, and ending 12-31-2017

Name of foundation THE SAMUEL ABA AND SISEL KLURMAN FOUNDATION INC		A Employer identification number 59-2532272	
Number and street (or P.O. box number if mail is not delivered to street address) 4601 SHERIDAN STREET		Room/suite	B Telephone number (see instructions) (954) 985-2400
City or town, state or province, country, and ZIP or foreign postal code HOLLYWOOD, FL 33021		C If exemption application is pending, check here ☐	
G Check all that apply ☐ Initial return ☐ Final return ☐ Address change ☐ Initial return of a former public charity ☐ Amended return ☐ Name change		D 1. Foreign organizations, check here ☐ 2. Foreign organizations meeting the 85% test, check here and attach computation ☐	
H Check type of organization ☒ Section 501(c)(3) exempt private foundation ☐ Section 4947(a)(1) nonexempt charitable trust ☐ Other taxable private foundation		E If private foundation status was terminated under section 507(b)(1)(A), check here ☐	
I Fair market value of all assets at end of year (from Part II, col (c), line 16) \$ 9,684,902		F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here ☐	
J Accounting method ☒ Cash ☐ Accrual ☐ Other (specify) _____ (Part I, column (d) must be on cash basis)			

Part I Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions))		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
Revenue	1 Contributions, gifts, grants, etc., received (attach schedule)	7,600			
	2 Check ☒ If the foundation is not required to attach Sch. B				
	3 Interest on savings and temporary cash investments	3,919	3,919		
	4 Dividends and interest from securities	1,049	1,049		
	5a Gross rents				
	b Net rental income or (loss) _____				
	6a Net gain or (loss) from sale of assets not on line 10 _____	-409,326			
	b Gross sales price for all assets on line 6a _____ 269,438				
	7 Capital gain net income (from Part IV, line 2)				
	8 Net short-term capital gain				
	9 Income modifications				
	10a Gross sales less returns and allowances _____				
Operating and Administrative Expenses	b Less Cost of goods sold				
	c Gross profit or (loss) (attach schedule)				
	11 Other income (attach schedule)	-12,798	-150,567		
	12 Total. Add lines 1 through 11	-409,556	-145,599		
	13 Compensation of officers, directors, trustees, etc				
	14 Other employee salaries and wages				
	15 Pension plans, employee benefits				
	16a Legal fees (attach schedule)				
	b Accounting fees (attach schedule)				
	c Other professional fees (attach schedule)				
	17 Interest				
	18 Taxes (attach schedule) (see instructions)	5,000			
	19 Depreciation (attach schedule) and depletion				
	20 Occupancy				
	21 Travel, conferences, and meetings				
	22 Printing and publications				
	23 Other expenses (attach schedule)	9,682	8,304		1,378
	24 Total operating and administrative expenses. Add lines 13 through 23	14,682	8,304		1,378
	25 Contributions, gifts, grants paid	532,139			532,139
	26 Total expenses and disbursements. Add lines 24 and 25	546,821	8,304		533,517
	27 Subtract line 26 from line 12				
	a Excess of revenue over expenses and disbursements	-956,377			
	b Net investment income (if negative, enter -0-)		0		
c Adjusted net income (if negative, enter -0-)					

Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)		Beginning of year	End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value		
Assets	1 Cash—non-interest-bearing	805,541	32,035	32,035		
	2 Savings and temporary cash investments	7,408,713	7,170,702	7,170,702		
	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 ▶ _____					
	8 Inventories for sale or use					
	9 Prepaid expenses and deferred charges					
	10a Investments—U S and state government obligations (attach schedule)					
	b Investments—corporate stock (attach schedule)	16,752	16,752	18,387		
	c 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)	2,423,776	2,497,359	2,463,778		
	14 Land, buildings, and equipment basis ▶ _____ Less accumulated depreciation (attach schedule) ▶ _____					
15 Other assets (describe ▶ _____)						
16 Total assets (to be completed by all filers—see the instructions Also, see page 1, item I)	10,654,782	9,716,848	9,684,902			
Liabilities	17 Accounts payable and accrued expenses	88,030	81,110			
	18 Grants payable					
	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 Total liabilities (add lines 17 through 22)	88,030	81,110			
Net Assets or Fund Balances	Foundations that follow SFAS 117, check here ▶ ☒ and complete lines 24 through 26 and lines 30 and 31.					
	24 Unrestricted	10,566,752	9,635,738			
	25 Temporarily restricted					
	26 Permanently restricted					
	Foundations that do not follow SFAS 117, check here ▶ ☐ and complete lines 27 through 31.					
	27 Capital stock, trust principal, or current funds					
	28 Paid-in or capital surplus, or land, bldg , and equipment fund					
	29 Retained earnings, accumulated income, endowment, or other funds					
	30 Total net assets or fund balances (see instructions)	10,566,752	9,635,738			
	31 Total liabilities and net assets/fund balances (see instructions) .	10,654,782	9,716,848			

Part III Analysis of Changes in Net Assets or Fund Balances

1 Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)	1	10,566,752
2 Enter amount from Part I, line 27a	2	-956,377
3 Other increases not included in line 2 (itemize) ▶ _____	3	25,363
4 Add lines 1, 2, and 3	4	9,635,738
5 Decreases not included in line 2 (itemize) ▶ _____	5	
6 Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30 .	6	9,635,738

Part IV Capital Gains and Losses for Tax on Investment Income

(a) List and describe the kind(s) of property sold (e g , real estate, 2-story brick warehouse, or common stock, 200 shs MLC Co)	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
1 a ADLER KAWA REAL ESTATE FUND II LLC	P	2016-01-01	2017-12-31
b ADLER REAL ESTATE FUND LLC	P	2016-01-01	2017-12-31
c ADLER WASHINGTON INVESTORS LLC	P	2016-01-01	2017-12-31
d OPPENHEIMER PRIVATE EQUITY FUND I LP	P	2016-01-01	2017-12-31
e SGC GOLD LLC	P	2016-01-01	2017-12-31

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
a 143,942			143,942
b 119,211			119,211
c		82,671	-82,671
d 6,285			6,285
e		596,093	-596,093

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	
a			143,942
b			119,211
c			-82,671
d			6,285
e			-596,093

2 Capital gain net income or (net capital loss)	{ If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 }	2	-409,326
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- in Part I, line 8		3	

Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income)

If section 4940(d)(2) applies, leave this part blank

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period?

☐ Yes☒ No

If "Yes," the foundation does not qualify under section 4940(e) Do not complete this part

1 Enter the appropriate amount in each column for each year, see instructions before making any entries

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col (b) divided by col (c))
2016	571,961	11,200,208	0 05107
2015	729,690	10,951,264	0 06663
2014	719,123	11,040,926	0 06513
2013	679,416	12,125,767	0 05603
2012	623,299	11,168,917	0 05581

2 Total of line 1, column (d)	2	0 294668
3 Average distribution ratio for the 5-year base period—divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years	3	0 058934
4 Enter the net value of noncharitable-use assets for 2017 from Part X, line 5	4	9,997,210
5 Multiply line 4 by line 3	5	589,176
6 Enter 1% of net investment income (1% of Part I, line 27b)	6	
7 Add lines 5 and 6	7	589,176
8 Enter qualifying distributions from Part XII, line 4	8	533,517

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate See the Part VI instructions

Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see instructions)

1a	Exempt operating foundations described in section 4940(d)(2), check here ☐ and enter "N/A" on line 1 Date of ruling or determination letter _____ (attach copy of letter if necessary—see instructions)		
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here ☐ and enter 1% of Part I, line 27b	1	0
c	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col (b)		
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2	
3	Add lines 1 and 2.	3	
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4	
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5	
6	Credits/Payments		
a	2017 estimated tax payments and 2016 overpayment credited to 2017	6a	14,301
b	Exempt foreign organizations—tax withheld at source	6b	
c	Tax paid with application for extension of time to file (Form 8868)	6c	
d	Backup withholding erroneously withheld	6d	
7	Total credits and payments. Add lines 6a through 6d.	7	14,301
8	Enter any penalty for underpayment of estimated tax. Check here ☐ if Form 2220 is attached	8	
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed ▶	9	
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid . . . ▶	10	14,301
11	Enter the amount of line 10 to be Credited to 2018 estimated tax ▶ 14,301 Refunded ▶	11	

Part VII-A Statements Regarding Activities

		Yes	No
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?	1a	No
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for definition)? <i>If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities</i>	1b	No
c	Did the foundation file Form 1120-POL for this year?	1c	No
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year (1) On the foundation ▶ \$ _____ (2) On foundation managers ▶ \$ _____		
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers ▶ \$ _____		
2	Has the foundation engaged in any activities that have not previously been reported to the IRS? <i>If "Yes," attach a detailed description of the activities</i>	2	No
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? <i>If "Yes," attach a conformed copy of the changes</i>	3	No
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a	Yes
b	If "Yes," has it filed a tax return on Form 990-T for this year?	4b	Yes
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year? <i>If "Yes," attach the statement required by General Instruction T</i>	5	No
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?	6	Yes
7	Did the foundation have at least \$5,000 in assets at any time during the year? <i>If "Yes," complete Part II, col (c), and Part XV</i>	7	Yes
8a	Enter the states to which the foundation reports or with which it is registered (see instructions) ▶ FL _____		
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? <i>If "No," attach explanation</i>	8b	No
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2017 or the taxable year beginning in 2017 (see instructions for Part XIV)? <i>If "Yes," complete Part XIV</i>	9	No
10	Did any persons become substantial contributors during the tax year? <i>If "Yes," attach a schedule listing their names and addresses</i>	10	No

Part VII-A Statements Regarding Activities (continued)

11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions).	11		No
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement (see instructions)	12		No
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ► N/A	13	Yes	
14	The books are in care of ► ZIPORA BEN-AVIV Telephone no ► (954) 985-2400			

Located at **►** 4601 SHERIDAN STREET SUITE 600 HOLLYWOOD FL ZIP+4 **►** 33021

15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 —Check here ► ☐ and enter the amount of tax-exempt interest received or accrued during the year ► 15			
16	At any time during calendar year 2017, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? See instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). If "Yes," enter the name of the foreign country ►	16	Yes	No

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required

File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.

1a	During the year did the foundation (either directly or indirectly)		Yes	No
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? ☐ Yes ☒ No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? ☐ Yes ☒ No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? ☐ Yes ☒ No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? ☐ Yes ☒ No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? ☐ Yes ☒ No			
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days). ☐ Yes ☒ No			
b	If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)? ☐ 1b			No
c	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2017? ☐ 1c			No
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5))			
a	At the end of tax year 2017, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2017? ☐ Yes ☒ No If "Yes," list the years ► 20____, 20____, 20____, 20____			
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement—see instructions). ☐ 2b			No
c	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here ► 20____, 20____, 20____, 20____			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? ☒ Yes ☐ No			
b	If "Yes," did it have excess business holdings in 2017 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2017). ☐ 3b			No
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		No
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2017?	4b		No

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required (Continued)

5a	During the year did the foundation pay or incur any amount to			
	(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?	☐ Yes ☒ No		
	(2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive?	☐ Yes ☒ No		
	(3) Provide a grant to an individual for travel, study, or other similar purposes?	☐ Yes ☒ No		
	(4) Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? (see instructions).	☐ Yes ☒ No		
	(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?	☐ Yes ☒ No		
b	If any answer is "Yes" to 5a(1)–(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)? Organizations relying on a current notice regarding disaster assistance check here.	☐	5b	No
c	If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? <i>If "Yes," attach the statement required by Regulations section 53.4945–5(d)</i>	☐ Yes ☒ No		
6a	Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	☐ Yes ☒ No		
b	Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? <i>If "Yes" to 6b, file Form 8870</i>	☐	6b	No
7a	At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?	☐ Yes ☒ No		
b	If yes, did the foundation receive any proceeds or have any net income attributable to the transaction?	☐	7b	No

Part VIII

Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors

1 List all officers, directors, trustees, foundation managers and 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
SISEL KLURMAN 9999 COLLINS AVENUE 5A BAL HARBOUR, FL 33154	Pres Emerita 0 00	0		
ZIPORA BEN AVIV 1067 FORDHAM LANE WOODMERE, NY 11598	PRES/DIR 1 00	0		
MATAN BEN-AVIV 4601 SHERIDAN STREET SUITE 600 HOLLYWOOD, FL 33021	VP/DIR 1 00	0		
HARVEY L LICHTMAN 641 NE 177TH STREET NORTH MIAMI BEACH, FL 33162	SEC/TREAS 1 00	0		

2 Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, enter "NONE."

(a) Name and address of each employee paid more than \$50,000	Title, and average hours per week (b) devoted to position	(c) Compensation	Contributions to employee benefit plans and deferred compensation (d)	Expense account, (e) other allowances
NONE				

Total number of other employees paid over \$50,000. ▶

3 Five highest-paid independent contractors for professional services (see instructions). If none, enter "NONE".

(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		

Total number of others receiving over \$50,000 for professional services. ▶

Part IX-A

Summary of Direct Charitable Activities

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1	
2	
3	
4	

Part IX-B

Summary of Program-Related Investments (see instructions)

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1	
2	
All other program-related investments. See instructions.	
3	

Total. Add lines 1 through 3 ▶

Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.)

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes		
a	Average monthly fair market value of securities.	1a	2,297,660
b	Average of monthly cash balances.	1b	7,851,792
c	Fair market value of all other assets (see instructions).	1c	0
d	Total (add lines 1a, b, and c).	1d	10,149,452
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation).	1e	0
2	Acquisition indebtedness applicable to line 1 assets.	2	
3	Subtract line 2 from line 1d.	3	10,149,452
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions).	4	152,242
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	9,997,210
6	Minimum investment return. Enter 5% of line 5.	6	499,861

Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here ☐ and do not complete this part.)

1	Minimum investment return from Part X, line 6.	1	499,861
2a	Tax on investment income for 2017 from Part VI, line 5.	2a	
b	Income tax for 2017 (This does not include the tax from Part VI).	2b	
c	Add lines 2a and 2b.	2c	
3	Distributable amount before adjustments. Subtract line 2c from line 1.	3	499,861
4	Recoveries of amounts treated as qualifying distributions.	4	
5	Add lines 3 and 4.	5	499,861
6	Deduction from distributable amount (see instructions).	6	
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1.	7	499,861

Part XII Qualifying Distributions (see instructions)

1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
a	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26.	1a	533,517
b	Program-related investments—total from Part IX-B.	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes.	2	
3	Amounts set aside for specific charitable projects that satisfy the		
a	Suitability test (prior IRS approval required).	3a	
b	Cash distribution test (attach the required schedule).	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	533,517
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b (see instructions).	5	
6	Adjusted qualifying distributions. Subtract line 5 from line 4.	6	533,517

Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years.

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2016	(c) 2016	(d) 2017
1 Distributable amount for 2017 from Part XI, line 7				499,861
2 Undistributed income, if any, as of the end of 2017				
a Enter amount for 2016 only.			39,892	
b Total for prior years 20____, 20____, 20____				
3 Excess distributions carryover, if any, to 2017				
a From 2012.				
b From 2013.				
c From 2014.				
d From 2015.				
e From 2016.				
f Total of lines 3a through e.				
4 Qualifying distributions for 2017 from Part XII, line 4 ▶ \$ <u>533,517</u>				
a Applied to 2016, but not more than line 2a			39,892	
b Applied to undistributed income of prior years (Election required—see instructions).				
c Treated as distributions out of corpus (Election required—see instructions).	0			
d Applied to 2017 distributable amount.				493,625
e Remaining amount distributed out of corpus				
5 Excess distributions carryover applied to 2017 (If an amount appears in column (d), the same amount must be shown in column (a))				
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5				
b Prior years' undistributed income Subtract line 4b from line 2b.				
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed.				
d Subtract line 6c from line 6b Taxable amount—see instructions.				
e Undistributed income for 2016 Subtract line 4a from line 2a Taxable amount—see instructions.				
f Undistributed income for 2017 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2018.				6,236
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. Subtract lines 7 and 8 from line 6a.				
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.				

Part XIV Private Operating Foundations (see instructions and Part VII-A, question 9)

1a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2017, enter the date of the ruling. ▶

b Check box to indicate whether the organization is a private operating foundation described in section ☐ 4942(j)(3) or ☐ 4942(j)(5)

	Tax year	Prior 3 years			(e) Total
	(a) 2017	(b) 2016	(c) 2015	(d) 2014	
2a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed					
b 85% of line 2a					
c Qualifying distributions from Part XII, line 4 for each year listed					
d Amounts included in line 2c not used directly for active conduct of exempt activities					
e Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the alternative test relied upon					
a "Assets" alternative test—enter					
(1) Value of all assets					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test— enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed.					
c "Support" alternative test—enter					
(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii).					
(3) Largest amount of support from an exempt organization					
(4) Gross investment income					

Part XV Supplementary Information (Complete this part only if the organization had \$5,000 or more in assets at any time during the year—see instructions.)

1 Information Regarding Foundation Managers:

a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000) (See section 507(d)(2))

b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest

2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:

Check here ☒ if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d

a The name, address, and telephone number or email address of the person to whom applications should be addressed

b The form in which applications should be submitted and information and materials they should include

c Any submission deadlines

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

Part XV **Supplementary Information** (continued)**3 Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i> See Additional Data Table				
Total			3a	532,139
b <i>Approved for future payment</i>				
Total			3b	

Enter gross amounts unless otherwise indicated

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

Form **990-PF** (2017)

Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

1 Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?		Yes	No
a Transfers from the reporting foundation to a noncharitable exempt organization of			
(1) Cash.	1a(1)		No
(2) Other assets.	1a(2)		No
b Other transactions			
(1) Sales of assets to a noncharitable exempt organization.	1b(1)		No
(2) Purchases of assets from a noncharitable exempt organization.	1b(2)		No
(3) Rental of facilities, equipment, or other assets.	1b(3)		No
(4) Reimbursement arrangements.	1b(4)		No
(5) Loans or loan guarantees.	1b(5)		No
(6) Performance of services or membership or fundraising solicitations.	1b(6)		No
c Sharing of facilities, equipment, mailing lists, other assets, or paid employees.	1c		No
d If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received.			

(a) Line No	(b) Amount involved	(c) Name of noncharitable exempt organization	(d) Description of transfers, transactions, and sharing arrangements

2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? ☐ Yes ☒ No

b If "Yes," complete the following schedule

(a) Name of organization	(b) Type of organization	(c) Description of relationship

Sign Here	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.		
	*****	2018-11-16	*****
	Signature of officer or trustee	Date	Title

May the IRS discuss this return with the preparer shown below (see instr.)? ☐ Yes ☒ No

Paid Preparer Use Only	Print/Type preparer's name	Preparer's Signature	Date	Check if self-employed ☒	PTIN
	HARVEY L LICHTMAN				P01470560
	Firm's name ► Harvey L Lichtman				Firm's EIN ► 27-1534802
	Firm's address ► 4601 Sheridan Street Suite 600 Hollywood, FL 33021				Phone no. (954) 985-2400

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
AISH SOUTH FLORIDA 3150 SHERIDAN AVENUE MIAMI BEACH, FL 33140	NONE	PUBLIC	EDUCATIONAL ADVANCEMENT	14,500
AMERICAN COMMITTEE FOR SHAARE ZEDEK 3275 W HILLSBORO BLVD STE 200 DEERFIELD BEACH, FL 33442	NONE	PUBLIC	MEDICAL ADVANCEMENT AND WELFARE	25,000
AMERICAN COMM WEIZMANN INSTITUTE OF 633 THIRD AVENUE NEW YORK, NY 10017	NONE	PUBLIC	EDUCATIONAL ADVANCEMENT	10,000
Total ▶ 3a				532,139

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
AMERICAN CANCER SOCIETY 250 Williams St NW Atlanta, GA 30303	NONE	PUBLIC	MEDICAL ADVANCEMENT	100
AMERICAN LUNG ASSOCIATION 2020 South Andrews Ave Ft Lauderdale, FL 33316	NONE	PUBLIC	MEDICAL ADVANCEMENT	150
AMERICAN SOCIETY FOR YAD VASHEM 500 Fifth Ave Suite 4200 New York, NY 10110	NONE	PUBLIC	EDUCATIONAL ADVANCEMENT	1,800
Total ▶ 3a				532,139

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
ANSHEI LUBAVITCH OF GREATER MIAMI 1436 Alton Road PO Box 398216 Miami Beach, FL 33239	NONE	PUBLIC	EDUCATIONAL ADVANCEMENT	400
ARIEL UNIVERSITY CENTER 136 East 39th Street New York, NY 10016	NONE	PUBLIC	EDUCATIONAL ADVANCEMENT	67,500
BAR ILAN UNIVERSITY OF ISRAEL 4600 Sheridan Street Suite 201 Hollywood, FL 33021	NONE	PUBLIC	EDUCATIONAL ADVANCEMENT	7,500
Total ▶ 3a				532,139

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
BIKUR CHOLIM OF NORTH MIAMI BEACH 990 NE 171 Street North Miami Beach, FL 33162	NONE	PUBLIC	SOCIAL WELFARE	500
BIRTHRIGHT FOUNDATION 33 east 33rd Street 7th Floor New York, NY 10016	NONE	PUBLIC	EDUCATIONAL ADVANCEMENT	1,800
BONEI OLAM1755 46th Street Brooklyn, NY 11204	NONE	PUBLIC	SOCIAL WELFARE	1,000
Total ▶ 3a				532,139

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
CHAI LIFELINE SOUTH FLORIDA 151 W 30th Street New York, NY 10001	NONE	PUBLIC	SOCIAL WELFARE	3,000
DOR YESHURIM429 Wythe Ave Brooklyn, NY 11249	NONE	PUBLIC	MEDICAL ADVANCEMENT AND WELFARE	1,000
FOUNDATION FAMILIES FALLEN PARATROO 121 Rokach Street Ramat Gan, Ramat Gan 52535 IS	NONE	PUBLIC	SOCIAL WELFARE	10,000
Total ▶ 3a				532,139

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
FRIENDS OF THE ISRAEL DEFENSE FORCE 2040 NE 163rd Street Suite 207 North Miami Beach, FL 33162	NONE	PUBLIC	SOCIAL WELFARE	25,000
FRIENDS OF LUBAVITCH 17330 NW 7th Ave Miami, FL 33021	NONE	PUBLIC	EDUCATIONAL ADVANCEMENT	1,800
FRIENDS OF TEL AVIV SOURASKY MED CE 1461 First Ave Box 150 New York, NY 10075	NONE	PUBLIC	MEDICAL ADVANCEMENT AND WELFARE	5,000
Total 				532,139
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, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
GREATER MIAMI JEWISH FEDERATION 4200 Biscayne Blvd Miami, FL 33137	NONE	PUBLIC	SOCIAL WELFARE	110,000
HACHNOSSOS KALLAH OF GREATER MIAMI 1400 Lenox Ave Miami Beach, FL 33139	NONE	PUBLIC	SOCIAL WELFARE	18,000
HATZALAH OF MIAMI-DADE 16101 NE 11th Ct North Miami Beach, FL 33162	NONE	PUBLIC	SOCIAL WELFARE	360
Total ► 3a				532,139

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
INSTITUTE FOR THE STUDY OF MODERN I 1256 Briarcliff Rd A-427N Atlanta, GA 30322	NONE	PUBLIC	EDUCATIONAL ADVANCEMENT	1,800
JEWISH ADOPTION FOSTER CARE OPTIONS 4200 North University Drive Sunrise, FL 33351	NONE	PUBLIC	SOCIAL WELFARE	1,800
KESHER18900 NE 25th Ave North Miami Beach, FL 33180	NONE	PUBLIC	EDUCATIONAL ADVANCEMENT	3,600
Total ► 3a				532,139

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
MESIVTA BEVET CHAZON-ISH 8210-21 Ave Brooklyn, NY 11214	NONE	PUBLIC	EDUCATIONAL ADVANCEMENT	10,000
MOUNT SINAI MEDICAL CENTER FOUNDATI 4300 Alton Road Miami Beach, FL 33140	NONE	PUBLIC	MEDICAL ADVANCEMENT AND WELFARE	7,500
MUSEUM OF JEWISH HERITAGE 36 Battery Place New York, NY 10280	NONE	PUBLIC	EDUCATIONAL ADVANCEMENT	1,000
Total ▶ 3a				532,139

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
NEVE YERUSHALAYIM 25 Broadway Suite 403 New York, NY 10004	NONE	PUBLIC	EDUCATIONAL ADVANCEMENT	200
ONE ISRAEL FUND-BNEI DAVID ELI 1175 West Broadway Suite 10 Hewlett, NY 11557	NONE	PUBLIC	EDUCATIONAL ADVANCEMENT	5,000
RABBINICAL SEMINARY OF AMERICA 76-01 147th Street Flushing, NY 11367	NONE	PUBLIC	EDUCATIONAL ADVANCEMENT	3,600
Total ▶ 3a				532,139

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
ST JUDES CHILDRENS HOSPITAL 262 Danny Thomas Place Memphis, TN 38105	NONE	PUBLIC	MEDICAL ADVANCEMENT SOCIAL WELFARE	150
TOMCHEI SHABBOS OF NORTH MIAMI BEAC 1545 Washington Ave Miami Beach, FL 33139	NONE	PUBLIC	SOCIAL WELFARE	1,000
TORAS EMES ACADEMY OF MIAMI 1099 NE 164th Street North Miami Beach, FL 33162	NONE	PUBLIC	EDUCATIONAL ADVANCEMENT	100,000
Total ▶ 3a				532,139

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
US HOLOCAUST MEMORIAL MUSEUM 100 Raoul Wallenberg Place SW Washington, DC 20024	NONE	PUBLIC	EDUCATIONAL ADVANCEMENT	1,800
WIZO1150 Kane Concourse Fifth Floor Bay Harbour Islands, FL 33154	NONE	PUBLIC	SOCIAL WELFARE	18,000
AMERICAN KIDNEY FUND 11921 ROCKVILLE PIKE SUITE 300 ROCKVILLE, MD 20852	NONE	PUBLIC	MEDICAL ADVANCEMENT	150
Total ▶ 3a				532,139

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
MAKE A WISH OF SOUTHERN FLORIDA 4491 S STATE ROAD 7 SUITE 201 FORT LAUDERDALE, FL 33314	NONE	PUBLIC	SOCIAL WELFARE	150
MIAMI BEACH JEWISH COMMUNITY CENTER 4221 PINE TREE DRIVE MIAMI BEACH, FL 33140	NONE	PUBLIC	SOCIAL WELFARE	660
PEF ISRAEL ENDOWMENT FUNDS INC 317 MADISON AVENUE SUITE 607 NEW YORK, NY 10017	NONE	PUBLIC	SOCIAL WELFARE	21,800
Total ► 3a				532,139

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
US FRIENDS MENACHEM BEGIN HERITAGE 3901 WEST 86 STREET INDIANAOLIS, IN 46268	NONE	PUBLIC	EDUCATIONAL ADVANCEMENT	5,000
WOUNDED WARRIORS PROJECT PO BOX 758517 TOPEKA, KS 66675	NONE	PUBLIC	SOCIAL WELFARE	100
YOUNG ISRAEL OF BAL HARBOUR 9592 HARDING AVENUE BAL HARBOUR, FL 33154	NONE	PUBLIC	SOCIAL WELFARE	1,000
Total ▶ 3a				532,139

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
AMERICAN ISRAEL EDUCATION FOUNDATIO 251 H STREET NW WASHINGTON, DC 20001	NONE	PUBLIC	EDUCATIONAL ADVANCEMENT	9,069
ALZHEIMERS ASSOCIATION 333 FOREST HILL BOULEVARD WEST PALM BEACH, FL 33406	NONE	PC	EDUCATIONAL ADVANCEMENT	100
CHABAD HOUSE IN MIAMI BEACH 669 LINCOLN LANE NORTH MIAMI BEACH, FL 33139	NONE	PC	SOCIAL WELFARE	2,000
Total ▶ 3a				532,139

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
CHABAD IN SOUTH BEACH 320 MERIDIAN AVENUE MIAMI BEACH, FL 33139	NONE	PC	SOCIAL WELFARE	1,500
MAZON A JEWISH RESPONSE TO HUNGER 10495 SANTA MONICA BLVD STE 100 LOS ANGELES, CA 90025	NONE	PC	SOCIAL WELFARE	2,000
THE FAMILY SHUL INC 2601 NE 211 TERRACE AVENTURA, FL 33180	NONE	PC	EDUCATIONAL ADVANCEMENT	16,000
Total ► 3a				532,139

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
FRIENDS OF BROWARD CO ANIMAL CARE 4030 COCONUT BLVD WEST PALM BEACH, FL 33411	NONE	PC	SOCIAL WELFARE	1,000
PET ALLIANCE OF GREATER ORLANDO 2727 CONROY ROAD ORLANDO, FL 32839	NONE	PC	SOCIAL WELFARE	1,000
770 MOSHIACH COMMUNITY CENTER 4538 INVERRARY BLVD LAUDERHILL, FL 33319	NONE	PC	SOCIAL WELFARE	2,500
Total 				532,139
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, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
HOSPICE OF BROWARD COUNTY 5300 EAST AVENUE WEST PALM BEACH, FL 33486	NONE	PC	SOCIAL WELFARE	100
HUGH O'BRIAN YOUTH LEADERS 31255 CEDAR VALLEY DR 327 WESTLAKE VILLAGE, CA 91362	NONE	PC	EDUCATIONAL ADVANCEMENT	500
LEHRMAN COMMUNITY DAY SCHOOL 727 77TH STREET MIAMI BEACH, FL 33141	NONE	PC	EDUCATIONAL ADVANCEMENT	5,000
Total  3a				532,139

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
THE LEARNING CENTER 4008 N 46 AVENUE HOLLYWOOD, FL 33021	NONE	PC	EDUCATIONAL ADVANCEMENT	2,500
YAD ELIEZER1102 E 26TH STREET BROOKLYN, NY 11210	NONE	PC	SOCIAL WELFARE	150
Total ▶ 3a				532,139

TY 2017 Explanation of Non-Filing with Attorney General Statement

Name: THE SAMUEL ABA AND SISEL KLURMAN
FOUNDATION INC

EIN: 59-2532272

Software ID: 17005038

Software Version: 2017v2.2

Statement:

THIS ORGANIZATION IS EXEMPT FROM FURNISHING THE FLORIDA ATTORNEY GENERAL'S OFFICE WITH A COPY OF 990-PF IN ACCORDANCE WITH CHAPTER 496 OF THE FLORIDA STATUTES.

TY 2017 Other Expenses Schedule

Name: THE SAMUEL ABA AND SISEL KLURMAN
FOUNDATION INC

EIN: 59-2532272

Software ID: 17005038

Software Version: 2017v2.2

Other Expenses Schedule

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
ANNUAL REPORT	61			61
DUES	243			243
FILING FEES	25			25
FOREIGN TAX CREDIT	21	21		
INVESTMENT INTEREST EXPENSE	10	10		
MEETINGS	726			726
OTHER DEDUCTIONS	5,348	5,348		
PORTFOLIO DEDUCTIONS	2,925	2,925		
STATE REPRESENTATION	323			323

TY 2017 Other Income Schedule

Name: THE SAMUEL ABA AND SISEL KLURMAN
FOUNDATION INC

EIN: 59-2532272

Software ID: 17005038

Software Version: 2017v2.2

Other Income Schedule

Description	Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income
	-12,798		

TY 2017 Other Increases Schedule

Name: THE SAMUEL ABA AND SISEL KLURMAN
FOUNDATION INC

EIN: 59-2532272

Software ID: 17005038

Software Version: 2017v2.2

Description	Amount
BOOK/TAX DIFFERENCE	25,363

TY 2017 Taxes Schedule

Name: THE SAMUEL ABA AND SISEL KLURMAN
FOUNDATION INC

EIN: 59-2532272

Software ID: 17005038

Software Version: 2017v2.2

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
FEDERAL INCOME TAXES PAID 990T	5,000			