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DLN: 93491313007878

OMB No 1545-0052

2017

Form 990-PF

Department of the Treasury Internal Revenue Service

Return of Private Foundation

or Section 4947(a)(1) Trust Treated as Private Foundation

Do not enter social security numbers on this form as it may be made public.
 Information about Form 990-PF and its instructions is at www.irs.gov/form990pf.

Open to Public Inspection

For calendar year 2017, or tax yea	r beginning 04-01-20)17 , a		03-31-20	18 fication number		
THE ELLEN AND ANDREW G CELLI FOUNDATION	I			1087933	ncation number		
% ANDREW CELLI Number and street (or P O box number if mail is i 993 PARK AVENUE APT 5SOUTH	not delivered to street address)	Room/suite			r (see instructions	5)	
City or town, state or province, country, and ZIP on NEW YORK, NY 10028	or foreign postal code	1		exemption appl	ıcatıon ıs pendıng	, check here	
G Check all that apply ☐ Initial return ☐ Final return ☐ Address chain ☐ Address chain ☐ Section 4947(a)(1) nonexempt charitabed I Fair market value of all assets at end of year (from Part II, col (c), line 16) ► \$ 219,525	501(c)(3) exempt private file trust Other taxable	foundation e private foundation Cash Accr	E I u	Foreign organi test, check he f private founda inder section 50 f the foundation	zations, check her zations meeting tre and attach com tion status was te 7(b)(1)(A), check is in a 60-month 7(b)(1)(B), check	he 85% hputation here	
Part I Analysis of Revenue and of amounts in columns (b), (c), and	Expenses (The total	(a) Revenue and expenses per	(b) Net inv	restment (c)	Adjusted net Income	(d) Disburseme for charita purpose	ble
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Form 990-							Page 2
Part II	Balance Sheets	Attached schedules and should be for end-of-ye	amounts in the de	escription column	Beginning of year (a) Book Value	(b) Book Value	of year (c) Fair Market Value
<u> </u>	Cash—non-interest	t-bearing			(a) Book value	(B) Book Value	(c) run riarket value
2		orary cash investment			71,24	3 69,739	69,739
3	Accounts receivabl						
		r doubtful accounts					
4		>	•				
		r doubtful accounts					
5							
6		om officers, directors,					
		is (attach schedule) (s					
7		ans receivable (attach					
	Less allowance for	r doubtful accounts ▶					
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	estic foundations that meet the section 4940(e) requirements in Part V, check	} 1	1,293
	YX.		
<u>, — </u>			
1,			
			Form 990-PF (2017)

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

Exempt operating foundations described in section 4940(d)(2), check here ightharpoonup and enter "N/A" on line 1

Page **4**

Form 990-PF (2017)

Form	990-PF (2017)	Page 5
	rt 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)	No
L	Collision for the form that the second secon	J
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If yes, did the foundation receive any proceeds or have any net income attributable to the transaction?.

7b

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	Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees,
Danie Mart	information About Officers, Directors, Trustees, Foundation Managers, Highly Faid Employees,
Part VIII	and Contractors

4 11 11 60 11 1 1					
1 List all officers, directors, trustee	es, re	oundation managers ar	id their compensation		
(a) Name and address	(Title, and average hours per week b) devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	Expense account, (e) other allowances
ELLEN UNTERBERG CELLI	nres	dent	0	0	
933 PARK AVE APT 5SOUTH	0 5	dent		0	
NEW YORK, NY 10028					
ANDREW G CELLI JR		president	o	0	c
933 PARK AVE APT 5SOUTH	0 5				
NEW YORK, NY 10028					
EMILY SATLOFF 10 GRACIE SQUARE	vice 0 25	president	0	0	C
APT 9E					
NEW YORK, NY 10028	<u> </u>				. ""
2 Compensation of five highest-pa	ıd er	nployees (other than t	nose included on line 1		ne, enter "NONE."
(a) Name and address of each employee pa more than \$50,000	nd	Title, and average hours per week (b) devoted to position	(c) Compensation	Contributions to employee benefit plans and deferred (d) compensation	Expense account, (e) other allowances
Total number of other employees paid ov		<u> </u>			
3 Five highest-paid independent co		-	_	-	
(a) Name and address of each persor	n pai	d more than \$50,000	(b) Typ	e of service	(c) Compensation
			_		
			-		
			-		
Total number of others receiving over \$50	,000) for professional services			
Part IX-A Summary of Direct (Char	itable Activities			
List the foundation's four largest direct charitable	activ	ities during the tax year Incl	ude relevant statistical inform	nation such as the number of	Expenses
organizations and other beneficiaries served, con	teren	ces convened, research paper	s produced, etc		
1					
2					
3					
4					_
Part IX-B Summary of Program	n-R	elated Investments	(see instructions)	<u>'</u>	
Describe the two largest program-related inve	estme	nts made by the foundation d	uring the tax year on lines 1	and 2	Amount
2					
All other program-related investments 3	See	Instructions			
Total. Add lines 1 through 3 .			<u>.</u> .		
					Form 000-DE (2017)

2c

3

4

5

6

1a

1b

2

3a 3b

4

5

1,293

3.516

3.516

3.516

122,220

122,220

1.293

120.927

Form **990-PF** (2017)

Distributable amount before adjustments Subtract line 2c from line 1.

Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1. . .

Expenses, contributions, gifts, etc —total from Part I, column (d), line 26.

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 paid (including administrative expenses) to accomplish charitable, etc., purposes

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 (see instructions)

Amounts set aside for specific charitable projects that satisfy the

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

3

4 5

6

1

2

3

4

5

Part XII

Part XIV Private Operating Foundations (see instructions and Part VIII-A, question 9) If the foundation has received an upper determination letter that it is a private operating foundation. and the ruling seffective for 2017, enter the date of the ruling. Checks box to indicate whether the regressivate near a morate operating foundation described in section 4942(j)(3) or 4942(j)(5) In Einst the lesser of the adjusted retirement Tax year Prior 3 years (e) Total Self-eith the lesser of the adjusted retirement Tax year Prior 3 years (e) Total Self-eith the lesser of the adjusted retirement Tax year Prior 3 years (e) Total Self-eith the lesser of the adjusted retirement Tax year Prior 3 years (e) Total Self-eith the lesser of the adjusted retirement Tax year Prior 3 years (e) Total Self-eith the lesser of the adjusted retirement Tax year Prior 3 years (e) Total Self-eith the lesser of the adjusted retirement Tax year Prior 3 years (e) Total Self-eith the lesser of the adjusted retirement Tax year Prior 3 years (e) Total Self-eith the lesser of the adjusted retirement Tax year Prior 3 years (e) Total Self-eith the lesser of the adjusted retirement Tax year Prior 3 years (e) Total Self-eith the lesser of the adjusted retirement Tax year Prior 3 years (e) Total Self-eith the lesser of the adjusted retirement Tax year Prior 3 years (e) Total Self-eith the lesser of the adjusted retirement Tax year Prior 3 years (e) Total Self-eith the lesser of the adjusted retirement Tax year Prior 3 years (e) Total Self-eith the lesser of the adjusted retirement Tax year Prior 3 years (e) Total Self-eith the lesser of the adjusted retirement Tax year Prior 3 years (e) Total Self-eith the lesser of the adjusted retirement Tax year Prior 3 years (e) Total Self-eith the lesser of the adjusted retirement Tax year Prior 3 years (e) Total Self-eith the lesser of the adjuste		n 990-PF (2017) Part XIV Private Operating Found	ations (soo instri	ictions and Part	V/II-A guestion Q)		Page 10
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) a Enter the lesser of the adjusted net income from Part 1 or the minimum movement retrum from Part X for each year listed (a). Qualifying distributions from Part XII, line 4 for each year listed (b). A Amounts included in line 2c not used directly for active conduct of exempt activities. Subtract line 2c from fine 2c. Committee 3 is no or for the 2c.							
Tax year Prior 3 years (e) Total minum minum terturn from Part X for each year listed	La						
income from Part I or the minimum investment return from Part X for each year listed. S8% of line 2a. Qualifying distributions from Part XII, line 4 for each year listed and the second directly for active conduct of exempt activities Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c. Commerce 1a. h. or r. for the	Ь	Check box to indicate whether the organizati	on is a private opera	atıng foundatıon de	scribed in section	ا 4942(ر)(3) or 🛭	☐ 4942(j)(5)
investment return from Part X for each year listed . b 85% of line 2a . Coullifying distributions from Part XII, line 4 for each year listed . d Amounts included in line 2 not used directly for active conduct of exempt soft for line 2c. Countifying distributions made exitivities Subtract line 2c from line 2c. Commilete 3a, b, or of for the	2a		Tax year		Prior 3 years		(a) Total
year lated. B 58% of fine 2a. Qualifying distributions from Part XII, line 4 for each year listed. d Amounts included in line 2c not used directly of active conduct of eventh activities. Qualifying distributions make directly. Subtract line 26 from line 2c. Compilers 3a. h. or of for the			(a) 2017	(b) 2016	(c) 2015	(d) 2014	(e) Iotal
C Qualifying distributions from Part XII, line 4 for each year listed 4. d Amounts included in line 2c not used directly for active conduct of exempt activities		year listed					
In e for each year listed							
directly for active conduct of exempt activities Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c. Complete 3a bit or of for the	С	line 4 for each year listed					
activities Qualifying distributions made directly for active conduct of exempt activities Subtract line 2cf from line 2c. Complete 3a h. or o for the	d						
e Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c		· ' '					
Subtract line 2d from line 2c. Complete 3a h arc for the	e	Qualifying distributions made directly					
Complete 3a h or office the							
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Form 990-PF (2017)								Page 12
Part XVI-A Analysis of	Income-Producing	Activitie	es					
Enter gross amounts unless othe	erwise indicated	Unrela	ated b	usiness income	Excluded	by sectio	n 512, 513, or 514	(e) Related or exempt
1 Program service revenue	(a) Business	code	(b) Amount	(c) Exclusion	code	(d) Amount	function income (See instructions)	
a								
b								
c								
d								
e								
f								
g Fees and contracts from g	overnment agencies							
Membership dues and assesInterest on savings and ter investments	nporary cash							
4 Dividends and interest from	securities				14		543	;
5 Net rental income or (loss) f	rom real estate							
a Debt-financed property.								
b Not debt-financed property	/							
6 Net rental income or (loss)	from personal property							
7 Other investment income.								
C (1) f e-laz-e-	<u> </u>	J			<u> </u>		<u> </u>	1
if section 4940(d)(2) applies, lea Nas the foundation liable for the if "Yes," the foundation does not	section 4942 tax on the				n the base p	period?	☐ Ye	es 🗹 No
1 Enter the appropriate am	ount in each column for	each year,	see II	nstructions before i	making any	entries		
(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distr	ibutions	Net	(c) value of noncharitable	e-use assets		(d) Distribution rati (col (b) divided by co	
2016		86,099			54,658		, , , , , , , , , , , , , , , , , , , ,	1 575231
2015		35,650			20,014			1 781253
2014		48,738			42,545			1 145564
2013		48,110			67,196			0 715965
2012		47,013			117,076			0 40156
2 Total of line 1, column (d)					2		5 619573
3 Average distribution ratio number of years the found					or by the	3		1 123915
4 Enter the net value of non	charitable-use assets fo	r 2017 fror	m Part	: X, line 5		4		96,171
5 Multiply line 4 by line 3						5		108,088
6 Enter 1% of net investme	nt income (1% of Part I,	line 27b)				6		1,293
7 Add lines 5 and 6						7		109,381
8 Enter qualifying distribution	ons from Part XII, line 4	,				8		122,220
7 Add lines 5 and 6 8 Enter qualifying distribution from 8 is equal to or ero	ons from Part XII, line 4	,			 Nato that na	8	a 10/2 tay rata Cay	122,220
<u> </u>								
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orm	990-PF	(2017)							Pag	ge 13
Pai	t XVI	Information Re Exempt Organi		fers To a	ind Transaction	ns and Relat	ionships With Non	charitable		
		organization directly or in e Code (other than section						n 501	Yes	No
a Tr	ansfers	from the reporting foun	dation to a nonch	arıtable exe	empt organization	of				
(1	L) Cash	h						. 1a(1)		No
(2	2) Othe	er assets						. 1a(2)		No
b 0	ther tra	insactions								
(1	L) Sale	es of assets to a nonchar	ıtable exempt orga	anızatıon.				. 1b(1)		No
(2	2) Purc	chases of assets from a r	noncharitable exen	npt organiz	ation			. 1b(2)		No
(3	B) Reni	tal of facilities, equipmer	nt, or other assets					. 1b(3)		No
(4	l) Rein	mbursement arrangemer	its					. 1b(4)		No
(5) Loar	ns or loan guarantees.						. 1b(5)		No
(6) Perfo	ormance of services or m	embership or fund	draising sol	icitations			. 1b(6)		No
c Si	rarıng d	of facilities, equipment, r	nailing lists, other	assets, or	paid employees.			. 1c		No
of	the go any tra	swer to any of the above ods, other assets, or ser ansaction or sharing arra (b) Amount involved	vices given by the	reporting to column (d	foundation If the f) the value of the	foundation rece goods, other as	ived less than fair mark	et value ed	ngemen	ts
		undation directly or indired in section 501(c) of the	•	•	•			. 🗆 Yes	✓	No
b If	"Yes,"	complete the following s								
		(a) Name of organization	on	(b) Type of organization	on	(c) Description (of relationship		
<u> </u>	of r wh	der penalties of perjury, my knowledge and belief ich preparer has any kno	, it is true, correct					sed on all infor	mation	n of
Sig		*****			2018-11-05	*****	k	May the IRS di return	scuss th	115
Her		Signature of officer or t	rustee		Date	Title		with the prepa below (see instr)?	_	
	•	Print/Type preparer's	name Pren	arer's Sign	ature	Date	р	TIN		
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Paid	t	KOBEKI LEVIN				2018-11-05	·			
Pre	pare Only		IERAMPER LLP			1	F	ırm's EIN ▶		
	J	_	0 THIRD AVENUE							
							P	hone no (212) 949-8	3700
NEW YORK, NY 100172703							,			

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Υ	2017	Investments	Corporate	Stock	Schedule	

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1,475 SHS PIMCO ENHANCED SHRT

Name: THE ELLEN AND ANDREW G CELLI FOUNDATION

EIN: 13-4087933

Name of Stock **End of Year Book**

149,880

End of Year Fair

DLN: 93491313007878

Value

Market Value

149,786

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TY 2017 Other Expenses Schedule											
	THE ELLEN AND	ANDREW G CEL	LI FOUNDATION								
Other Expenses Schedule	13-400/933										
Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes							
FILING FEE	50			50							

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TY 2017 Taxes Schedule							
Name: THE ELLEN AND ANDREW G CELLI FOUNDATION EIN: 13-4087933							
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes			
FEDERAL EXCISE TAX	658						

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Schedule B (Form 990, 990-EZ,	Schedule of Contrib	utors	OMB No 1545-0047			
or 990-PF) Department of the Treasury Internal Revenue Service	► Attach to Form 990, 990-EZ, or 9 Information about Schedule B (Form 990, 990-EZ, or 9 www.irs.gov/form990	2017				
Name of the organizat THE ELLEN AND ANDREV			identification number			
Organization type (ch	eck one)	13-408793	3			
Filers of:	Section:					
Form 990 or 990-EZ	501(c)() (enter number) organization					
	4947(a)(1) nonexempt charitable trust not treated as a private foundation					
	☐ 527 political organization					
Form 990-PF	501(c)(3) exempt private foundation	☑ 501(c)(3) exempt private foundation				
	4947(a)(1) nonexempt charitable trust treated a	4947(a)(1) nonexempt charitable trust treated as a private foundation				
	501(c)(3) taxable private foundation	501(c)(3) taxable private foundation				
money or othe contributions	ation filing Form 990, 990-EZ, or 990-PF that received, dur r property) from any one contributor Complete Parts I and					
Special Rules						
under sections a received from a	tion described in section 501(c)(3) filing Form 990 or 990-E 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Fo ny one contributor, during the year, total contributions of the ne 1h, or (ii) Form 990-EZ, line 1 Complete Parts I and II	orm 990 or 990-EZ), Part II, line 1:	3, 16a, or 16b, and that			
during the year,	tion described in section 501(c)(7), (8), or (10) filing Form 9 total contributions of more than \$1,000 <i>exclusively</i> for relig the prevention of cruelty to children or animals. Complete I	ious, charitable, scientific, literary,				
during the year.	tion described in section 501(c)(7), (8), or (10) filing Form 9 contributions exclusively for religious, charitable, etc., purp	oses, but no such contributions to	taled more than \$1,000			
	4. 59.20		=			
	-					
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Name of organization Employer identification number THE ELLEN AND ANDREW G CELLI FOUNDATION 13-4087933 Part I Contributors (See instructions) Use duplicate copies of Part I if additional space is needed (a) (d) (b) No. **Total contributions** Type of contribution Name, address, and ZIP + 4 Person ELLEN U CELLI 2007 REVOCABLE TRUST **Payroll** 993 PARK AVENUE S 5 \$ 75,000 Noncash NEW YORK, NY 10028 (Complete Part II for noncash contributions) (a) (b) (c) (d) No. Name, address, and ZIP + 4 Total contributions Type of contribution Person ELLEN U CELLI 2007 REVOCABLE TRUST Payroll 993 PARK AVENUE 5 SOUTH \$ 160,125 Noncash NEW YORK, NY 10028 (Complete Part II for noncash contributions) (b) (a) (c) (d) No. **Total contributions** Type of contribution Name, address, and ZIP + 4 Person **ELLEN CELLI Payroll** 993 PARK AVENUE S 5 \$ 37,000 Noncash NEW YORK, NY 10028 (Complete Part II for noncash contributions) (a) (b) (c) (d) No. **Total contributions** Type of contribution Name, address, and ZIP + 4 Person Payroll Noncash (Complete Part II for noncash contributions) (a) (b) (c) (d) **Total contributions** No. Name, address, and ZIP + 4 Type of contribution Person Payroll Noncash (Complete Part II for noncash contributions) (c) (d) (a) (b) No. **Total contributions** Type of contribution Name, address, and ZIP + 4 Person **Payroll** \$ Noncash (Complete Part II for noncash contributions)

Schedule B (Form 9	990, 990-EZ, or 990-PF) (2017)			Page 4
Name of organization THE ELLEN AND ANDREW G CELLI FOUNDATION			Employer identification number 13-4087933	
than \$1,	000 for the year from any one contributor.	Complete columns (a) thro	d in section 501(c)(7), (8), or (10) that total m ugh (e) and the following line entry. For table, etc., contributions of \$1,000 or less	
the year	c. (Enter this information once. See instructional space is related to the copies of Part III if additional space is referred.)	tions.) ► \$	———	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift	is held
	Transferee's name, address, and Z	(e) Transfer of gift	Relationship of transferor to transferee	
	Transieree's name, address, and 2		Relationship of transferor to transferee	
(a)	(b) Durnose of gift	(c) Use of aift	/d\ Description of how aift	ic hold
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North Company				
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