2949125801714

OMB No 1545-0052

Department of the Treasury

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.

Go to www.irs.gov/Form990PF for instructions and the latest information.

For	calen	dar year 2017 or tax year beginning	5/1	/2017		, and e	ending	4/30/2018	
Nan	ne of four	ndation				-		identification number	
SAC	CHNO	F FAMILY-CHARITABLE FDN	P	zruc		ļ			
		street (or P O box number if mail is not delivere	d to street address).		Room/s	suite		25-6346205	
BN'	Y Mello	on, N.A P.O. Box 185					B Telephone	number (see instruction	ns)
City	or town,	state or province, country, and ZIP or foreign po	stal code						
Pitt	<u>sburgh</u>		PA	15230	0-018	5		(412) 234-546	8
Fore	eign cour	ntry name Foreign provinc	e/state/county	Foreign	n postal	code	C If exempti	on application is pendin	a check here
									g,
G	Check	all that apply Initial return	Dinitial return	of a former pu	hlic cl	harity	D 1. Foreign	organizations, check h	ere ▶
		Final return	Amended ret		DIIC CI	ilality	_	_	
		Address change	Name change					organizations meeting here and attach comput	
Н	Check		1(c)(3) exempt pri		^^	1/	T .	oundation status was te	-
						94		7(b)(1)(A), check here	→
		n 4947(a)(1) nonexempt charitable tru			_				
			counting method	X Cash	_ Ad	ccruál	F If the four	dation is in a 60-month	termination
		year (from Part II, col (c),	Other (specify)				under sec	tion 507(b)(1)(B), check	here •
	line 16		, column (d) must be	on cash basis)				
Pa	art I	Analysis of Revenue and Expenses	s (The total of	(a) Revenue a	and				(d) Disbursements
		amounts in columns (b), (c), and (d) may	not necessarily	expenses pe			t investment	(c) Adjusted net income	for chantable purposes
		equal the amounts in column (a) (see inst	ructions))	books		"	ICOINE	income	(cash basis only)
	1	Contributions, gifts, grants, etc., received (att	ach schedule)		ş	10.740.78	S. 174700 77		March State Control
	2	Check ▶⊠ if the foundation is not require		The source of th		in the	Call-Are:		
	3	Interest on savings and temporary ca							2 7 7 65
	4	Dividends and interest from securities		12	,668		12,708	RECE	MED
	5a	Gross rents	_	·-	,,,,,,		,		
	b	Net rental income or (loss)			9.6.3			8	3 4 5 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6
Φ	6a	Net gain or (loss) from sale of assets	not on line 10	13	.445	120.463	4.2	POL SEP 1	7018 91
2	l	Gross sales price for all assets on line 6a		10	, 		7.27	W S	3 3 3 3 4 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5
Revenue	7	Capital gain net income (from Part IV			100	errore en sign	13,445	1 to 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
Re	8	Net short-term capital gain	, iiie 2)		25 Co 6 4 4 8 9)		r ogdel	
_	9	Income modifications	•	271	. 1300		37/		
	10a	Gross sales less returns and allowances						1888 CART REPORT	23° 4
				75.25 (A)		#-15			
		Less Cost of goods sold		**************************************	NOK (M)	**		<u> Markarakan dan merupakan dan</u>	
	11	Gross profit or (loss) (attach schedule	e)			<u> </u>	<u> </u>		
	1	Other income (attach schedule)		<u> </u>			00.450		
	12	Total. Add lines 1 through 11			113		26,153	0	2,71.000 00000 0000 0000 0000
Expenses	13	Compensation of officers, directors, t	rustees, etc		,659		995		664
S	14	Other employee salaries and wages		ļ					
Б	15	Pension plans, employee benefits							
Ä	16a	Legal fees (attach schedule)							
ø	Ь	Accounting fees (attach schedule)							
Ę	_ C	Other professional fees (attach sche	dule)						
tra	17	Interest .							
is	18	Taxes (attach schedule) (see instruc	,		205		205		
, Έ	19	Depreciation (attach schedule) and o	lepletion						19660 (1968)
5	20	Occupancy							
Operating and Administrativ	21	Travel, conferences, and meetings							<u> </u>
֝֟֝֝֟֝֝֟֝ <u>֚</u>	22	Printing and publications							
a B	23	Other expenses (attach schedule)]				
₹.Ĕ	24	Total operating and administrative	e expenses.						
ζĒ		Add lines 13 through 23	-	1	1,864		1,200	l	664
, ie	25	Contributions, gifts, grants paid			1,500	KZZ-			14,500
ήŌ	26	Total expenses and disbursements. Add le	nes 24 and 25		3,364		1,200	C	
<u>z</u>	27	Subtract line 26 from line 12		1985 1992 1953	34.34 34.34	1673488	1,200 1,200 #2011	9700 Paris 2460	7.7.2.2.2.2.2.2.2.2.2.2.2.2.2.2.2.2.2.2
とところの	a a	Excess of revenue over expenses and dis	hurcamente		749				27.5
Ę	b	Net investment income (if negative		ACPENTAL BOOK	5 1 4 3 5 2 1 4 3	anterest (24,953	275425 AMERICAN	7.40 Sec. 1.47 Sec. 1.
	C	Adjusted net income (if negative, e		12 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1 2	\$4.675 \$4.55	J. 1933	24,300		17/83/8/37/MAA
<u> </u>	L	Aujusteu net income (ii negative, e	inter -0-)	(A)	\$57× 178/	3.000 22	TWINCIES	C	25 C.

For Paperwork Reduction Act Notice, see instructions.

Form **990-PF** (2017)

5 Decreases not included in line 2 (itemize) ▶

6 Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30

Form 990-PF (2017) SACHNOFF FAMILY-CHARITABLE FDN 25-6346205 Page 2 End of year Attached schedules and amounts in the description column Beginning of year Part II **Balance Sheets** should be for end-of-year amounts only (See instructions) (a) Book Value (b) Book Value (c) Fair Market Value Cash-non-interest-bearing 20,576 2 Savings and temporary cash investments 25.985 9,045 Accounts receivable 3 Less allowance for doubtful accounts 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) Other notes and loans receivable (attach schedule) 7 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) Investments—corporate stock (attach schedule) b Investments—corporate bonds (attach schedule) C 11 Investments—land, buildings, and equipment basis Less accumulated depreciation (attach schedule) Investments-mortgage loans 12 13 Investments—other (attach schedule) 547.083 560,490 14 Land, buildings, and equipment basis Less accumulated depreciation (attach schedule) Other assets (describe 15 16 Total assets (to be completed by all filers-see the instructions Also, see page 1, item I) 576,704 17 Accounts payable and accrued expenses 18 Grants pavable 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) Foundations that follow SFAS 117, check here **Balances** and complete lines 24 through 26, and lines 30 and 31. 24 Unrestricted 25 Temporarily restricted 26 Permanently restricted Fund Foundations that do not follow SFAS 117, check here ▶ 🏻 and complete lines 27 through 31. 5 27 Capital stock, trust principal, or current funds 576,704 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) 576,704 let. 31 Total liabilities and net assets/fund balances (see instructions) 576,704 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) 576.704 2 Enter amount from Part I, line 27a 2 9.749 3 Other increases not included in line 2 (itemize) ► FEDERAL TAX REFUND 3 4 Add lines 1, 2, and 3

Form 990-PF (2017)

586,475

586.475

4

5

orm 99	0-PF (2017) SACHNO	FF FAMILY-CHARITABLE FDN					25-63	346205	Page 3
Part I	V Capital Gains and	Losses for Tax on Investm	ent In	come					
	a) List and describe the kin	d(s) of property sold (for example, real esta se, or common stock, 200 shs MLC Co)			(b) How acquired P—Purchase D—Donation		ate acquired o , day, yr)	(d) Date (mo , da	
1a	DREYFUS EMG MKT DEE	BT LOC C-Y					12/20/2013	11/	/29/2017
b	DREYFUS EMG MKT DEE	BT LOC C-Y					12/30/2013	11/	/29/2017
<u> </u>									
<u>d</u>									
e	Capital Gains Distributions				L	ļ			
	(e) Gross sales price	(f) Depreciation allowed (or allowable)		,	other basis nse of sale		(h) Gain ((e) plus (f)		
	4,010	(or anowable)		pida expe			((c) pids (i)		400
<u>a</u> b	19				4,500 21	<u> </u>			<u>-490</u> -2
~ _				-		 -			
d									
e						<u> </u>			13,937
	Complete only for assets sh	owing gain in column (h) and owned	by the	foundation	on 12/31/69		(I) Gains (Col	(b) gain mini	
	(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69			s of col (i) (j), if any	}	col (k), but not l Losses (fro	ess than -0-)	
a									-490
b									-2
c									
<u>d</u>			L						
<u>e</u>			<u> </u>			ļ			13,937
2	Capital gain net income or	inercanitalines) i			rt I, line 7 rt I, line 7	,			12 445
3	Net short-term capital gain	or (loss) as defined in sections	•		•	2			13,445
3	, ,	, line 8, column (c) See instructi	•	, ,					
	Part I, line 8	, into o, column (o) occ instruor	0113 11	(1033), CII	}	3			c
Part		er Section 4940(e) for Redu	iced T	ax on N	et Investment		ne		
(For c	ptional use by domestic pri	vate foundations subject to the s	ection	4940(a) 1	tax on net investr	ment ir	ncome)		
If sec	tion 4940(d)(2) applies, leav	ve this part blank							
		section 4942 tax on the distribut ualify under section 4940(e) Do				ase pe	eriod?	Ye:	s 🗓 No
1		ount in each column for each yea		_ 		king a	ny entries		
	(a)	(b)	1		(c)			(d)	
Cal	Base period years endar year (or tax year beginning in	Advisated avaletions distabilities	ıs	Net value	of nonchantable-use a	assets		nbution ratio livided by co	L (c))
	2016		6,213		61	4.605	(40: 70)		0 091462
	2015		9,090		60	5,981			0 081009
	2014	4.	4,993		54	8,506			0 082028
	2013		1,614			8,869			0 088754
	2012	8	3,667		39	1,068			0 213945
							į		
2	Total of line 1, column (d)						2		<u>0 557198</u>
3		for the 5-year base period—divid				/			0 444 44
	the number of years the fo	oundation has been in existence	it less	than 5 ye	ears		3		0 111440
4	Enter the net value of non	charitable-use assets for 2017 f	rom Pa	art X, line	5		4		615,442
5	Multiply line 4 by line 3					i	5		68,58
6	Enter 1% of net investmen	nt income (1% of Part I, line 27b)				6		25
7	Add lines 5 and 6						7		68,83
8	Enter qualifying distribution If line 8 is equal to or great Part VI instructions	ons from Part XII, line 4 ater than line 7, check the box in	Part V	71, line 1b,	and complete th	nat par	8 using a 1%	tax rate S	15,16 See the

Form 99	2-PF (2017) SACHNOFF FAMILY-CHARITABLE FDN	_		25-6	346205	Pa	age 4	
Part \	Excise Tax Based on Investment Income (Section 4940(a), 4940	(b), 4	1940(e), or 4948—see	instructi	ions)			
		nd en essary	ter "N/A" on line 1 /—see instructions)	1		499		
-	here ▶ ☐ and enter 1% of Part I, line 27b	٠, ٥,	look					
С	All other domestic foundations enter 2% of line 27b Exempt foreign organization, line 12, col. (b)	nızatı	ons, enter 4% of					
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundation	s only	, others, enter -0-)	2		이		
3	Add lines 1 and 2			3		499		
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundation			4				
5	Tax based on investment income. Subtract line 4 from line 3 If zero or Credits/Payments	less,	, enter -0-	5		499	ess	
6 a	2017 estimated tax payments and 2016 overpayment credited to 2017	6a	166		TV			
b	Exempt foreign organizations—tax withheld at source	6b	100	- F , A (4.7	
C	Tax paid with application for extension of time to file (Form 8868)		1					
d	Backup withholding erroneously withheld	6c 6d	<u> </u>	7				
7	Total credits and payments Add lines 6a through 6d			7	_	166		
8	Enter any penalty for underpayment of estimated tax. Check here if	Form	n 2220 is attached	8				
9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed								
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 11 Enter the amount of line 10 to be Credited to 2018 estimated tax Refunded 11								
			Refunded ▶	171		0		
1a	VII-A Statements Regarding Activities During the tax year, did the foundation attempt to influence any national,	ctato	or local legislation or	did it	55.73	Yes	No	
Ia	participate or intervene in any political campaign?	State	, or local legislation or	did it	1a	163	X	
b	Did it spend more than \$100 during the year (either directly or indirectly)	for po	olitical purposes? See	the			<u> </u>	
	instructions for the definition				1b	j	Х	
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the act	ivities	s and copies of any ma	iterials		-		
	published or distributed by the foundation in connection with the activities	3						
C	Did the foundation file Form 1120-POL for this year?				1c	33. ***	Χ	
d	Enter the amount (if any) of tax on political expenditures (section 4955) ii							
_	(1) On the foundation \$ (2) On foundation ma	_			- M	3		
е	Enter the reimbursement (if any) paid by the foundation during the year f on foundation managers >\$	or po	illicai expenditure tax i	mposea			1.7	
2	Has the foundation engaged in any activities that have not previously be	en rei	ported to the IRS?		2	9-1	X	
_	If "Yes," attach a detailed description of the activities	J.,	ported to the inte				5/2	
3	Has the foundation made any changes, not previously reported to the IRS, in its g	joverr	ning instrument, articles		1			
	of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformation of incorporation of the similar instruments?		_		3		Х	
4a	Did the foundation have unrelated business gross income of \$1,000 or m	ore o	during the year?		4a		X	
b	If "Yes," has it filed a tax return on Form 990-T for this year?					N/A	<u> </u>	
5	Was there a liquidation, termination, dissolution, or substantial contraction	n du	ring the year?		5	3. % €	X	
6	If "Yes," attach the statement required by <i>General Instruction T</i> Are the requirements of section 508(e) (relating to sections 4941 through	. 404	E) actiofied oither					
O	 By language in the governing instrument, or 	1 494	o) saustied either					
	By state legislation that effectively amends the governing instrument so	h that	t no mandatory directio	ns that	\$			
	conflict with the state law remain in the governing instrument?	J tilai	the managery ancone	no mac	6	X		
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," of	omple	te Part II, col (c), and Part	XV .	7	Х		
8a	Enter the states to which the foundation reports or with which it is registe				25			
	PA	- -						
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Fo			General				
_	(or designate) of each state as required by General Instruction G? If "No				8b	X	. ***	
9	Is the foundation claiming status as a private operating foundation within							
	or 4942(j)(5) for calendar year 2017 or the tax year beginning in 2017? §	see th	ne instructions for Part	N II			_	
10	"Yes," complete Part XIV Did any persons become substantial contributors during the tax year? If	"Vac	" attach a schodulo lis	ting their	9		X	
10	names and addresses	165	, anach a scriedule lis	ung un c ii	10		X	
$\overline{}$						_		

Form **990-PF** (2017)

Form 99	0-PF (2017) SACHNOFF FAMILY-CHARITABLE FDN	:	25-6346	205	Pa	age 5
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	the		11	Yes	No X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a dis-	qualified	T			
	person had advisory privileges? If "Yes," attach statement See instructions	•		12		_X_
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption applic	cation?		13	<u> </u>	
	Website address ► N/A					
14	The books are in care of ► BNY MELLON, N A Telephone r					- <i></i>
45		+4 ► <u>1</u> 5	5230-018	35		·
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041—check and enter the amount of tax-exempt interest received or accrued during the year		N/A			▶ □
16	At any time during calendar year 2017, did the foundation have an interest in or a signature or other.			$\neg \tau$	Yes	No
• •	over a bank, securities, or other financial account in a foreign country?		···, [16		X
	See the instructions for exceptions and filing requirements for FinCEN Form 114 If "Yes," enter	the		,		
	name of the foreign country			<u> </u>		
Par	VII-B Statements Regarding Activities for Which Form 4720 May Be Required			Carried		
_	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.				Yes	No
1a	During the year, did the foundation (either directly or indirectly)	٦., ١				
	The second se	Yes	X) No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?	Yes	X No			ž. 1
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	Yes	= 10			
		= :	No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for	ا ٠٠٠ ا				
		Yes	X 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	-	ľ			
			X No			
þ	If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions describ		ľ		ملك	
	Regulations section 53 4941(d)-3 or in a current notice regarding disaster assistance? See instru Organizations relying on a current notice regarding disaster assistance, check here	ictions	▶ □ [<u>1b</u>	(28).35°	
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted	acts tha	[
Ū	were not corrected before the first day of the tax year beginning in 2017?	a010, 111a	` I	1c		X
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))		ļ			
а	At the end of tax year 2017, did the foundation have any undistributed income (lines 6d and	.				6.
	6e, Part XIII) for tax year(s) beginning before 2017?	∐ Yes	X No			2.3
	If "Yes," list the years 20, 20, 20, 20	4040/-1	<u>(a)</u>			
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section					
	all years listed, answer "No" and attach statement—see instructions)	4342(0)(4	2,10	2b	N/A	100
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the y	ears her	e l	<u>.</u>	3	80%
	▶ 20 , 20 , 20 , 20					
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise		_	19		
	at any time during the year?	Yes Yes	_	4		
b	If "Yes," did it have excess business holdings in 2017 as a result of (1) any purchase by the four					
	disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period app					
	Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (se		140	
	of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine foundation had excess business holdings in 2017.)	ະ ແ ເກe		3b	N/A	
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purpo	ses?		4a	137	X
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize			- T	4 2	
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in			4b		X

Form 99	90-PF (2017) SACHNOFF FAMILY	-CHARITAE	BLE FD	N _					25-63	46205	Page 6
Pari	VII-B Statements Regarding A				20 May	Be Requ	iired (d	continue	d)		
5a	During the year, did the foundation pay (1) Carry on propaganda, or otherwise				(sectioi	n 4945(e))?	•	Yes	X No		
	(2) Influence the outcome of any specific			see section 4	1955), d	r to carry o	n,		[⊽] Na		
	directly or indirectly, any voter regis (3) Provide a grant to an individual for the			ner sımılar nu	rnnses'	2		∐ Yes ☐ Yes	X No		
	(4) Provide a grant to an organization of	_		•	□ 163	[Z] 140					
	section 4945(d)(4)(A)? See instruct		Ç. IGI NO	.5.5, 5.5 , 5.9	arnea(i	311 00001100	· · · · · ·	☐ Yes	X No		-
	(5) Provide for any purpose other than purposes, or for the prevention of c	religious, chruelty to chi	haritabl Idren o	e, scientific, l r animals?	literary,	or education	onal	Yes	X No		
b	If any answer is "Yes" to 5a(1)–(5), did Regulations section 53 4945 or in a cu								bed in	5b 1	J/A
С	Organizations relying on a current notice of the answer is "Yes" to question 5a(4) because it maintained expenditure residents.	, does the f	oundat	ion claim exe			эх	☐ Yes	► □ No		
6a	If "Yes," attach the statement required Did the foundation, during the year, recon a personal benefit contract?					pay prem	iums	Yes	X No		
b	Did the foundation, during the year, pa If "Yes" to 6b, file Form 8870	y premiums	, direct	ly or indirecti	y, on a	personal b	enefit c	ontract?		6b	X
7a	At any time during the tax year, was the fou							Yes		J	
	If "Yes," did the foundation receive any t VIII Information About Officer										V/A]
	and Contractors	, Directo	,,,,,,,	usices, i o	anaa u	on manag	JC1 3, 11	nginy i	414 LII	ipioyee.	J ,
1	List all officers, directors, trustees,	and founda									
	(a) Name and address		hou	e, and average rs per week ed to position	(lf r	mpensation not paid, iter -0-)	emplo	Contribution byee benefit erred comp	plans		se account, owances
See /	Attached Statement			00	l	0					
				00		0					
				00		0	ļ			: 	
				00	ļ	0					
2	Compensation of five highest-paid ("NONE."	employees 	(other	than those	include	ed on line	1—see ———				enter
	(a) Name and address of each employee paid mo	re than \$50,00	0	(b) Title, and a hours per v devoted to p	veek	(c) Compe	nsation	(d) Contrib employed plans and comper	e benefit deferred	(e) Expen	se account, lowances
иои	<u>E.</u>										
Tota	number of other employees paid over S	\$50,000							>	NONE	<u> </u>
										rom 330	-PF (2017)

Form 9	m 990-PF (2017) SACHNOFF FAMILY-CHARITABLE FDN	Į	25-6346205 Pa	age 7
Pai	Part VIII Information About Officers, Directors, Trustee and Contractors (continued)	s, Foundation Managers, F	lighly Paid Employees,	
3_		I services. See instructions. I	none, enter "NONE."	
	(a) Name and address of each person paid more than \$50,000	(b) Type of	service (c) Compensa	tion
NON	ONE			
Tota	otal number of others receiving over \$50,000 for professional service	es	► NONE	
Pa	Part IX-A Summary of Direct Charitable Activities			
	List the foundation's four largest direct chantable activities during the tax year. Include organizations and other beneficianes served, conferences convened, research papers		e number of Expenses	
1	1 NONE			
•				
2	2			
3	3			
4	4			
P:	Part IX-B Summary of Program-Related Investments	(see instructions)		
_	Describe the two largest program-related investments made by the foundation during		Amount	
1				
2	2			
Al	All other program-related investments. See instructions			
3	3 NONE			
='				
Tot	otal. Add lines 1 through 3		► NONE	

Form 99	0-PF (2017) SACHNOFF FAMILY-CHARITABLE FUN	25-6346205	Page 8
Part	_ , , , , , , , , , , , , , , , , , , ,	i foundations,	
	see instructions)		
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc , purposes		
а	Average monthly fair market value of securities	1a	600,019
	Average of monthly cash balances	1b	24,795
С	Fair market value of all other assets (see instructions)	1c	
d	Total (add lines 1a, b, and c)	1d	624,814
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	624,814
4	Cash deemed held for charitable activities Enter 1½ % of line 3 (for greater amount, see		
	instructions)	4	9,372
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	615,442
6	Minimum investment return. Enter 5% of line 5	6	30,772
Part	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundational and certain foreign organizations, check here and do not complete this part)	ons	
1	Minimum investment return from Part X, line 6	1	30,772
2a		1.3	
b	Income tax for 2017 (This does not include the tax from Part VI)		
С	Add lines 2a and 2b	2c	499
3	Distributable amount before adjustments Subtract line 2c from line 1	3	30,273
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	30,273
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	30,273
Part	XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
а	Expenses, contributions, gifts, etc —total from Part I, column (d), line 26	1a	15,164
b	Program-related investments—total from Part IX-B	1b NONE	
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	15,16
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	15,16
-	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating w		
	qualifies for the section 4940(e) reduction of tax in those years		

Form **990-PF** (2017)

25-6346205 SACHNOFF FAMILY-CHARITABLE FDN Form 990-PF (2017) Page 9 Undistributed Income (see instructions) Part XIII (a) (b) (c) 2017 Years prior to 2016 2016 Corpus Distributable amount for 2017 from Part XI, 30,273 2 Undistributed income, if any, as of the end of 2017 a Enter amount for 2016 only **b** Total for prior years 20 . 20 3 Excess distributions carryover, if any, to 2017 a From 2012 64,281 **b** From 2013 19,855 c From 2014 18,014 d From 2015 e From 2016 f Total of lines 3a through e Qualifying distributions for 2017 from Part XII, line 4 ► \$ 15,164 a Applied to 2016, but not more than line 2a b Applied to undistributed income of prior years (Election required—see instructions) c Treated as distributions out of corpus (Election required-see instructions) d Applied to 2017 distributable amount e Remaining amount distributed out of corpus Excess distributions carryover applied to 2017 (If an amount appears in column (d), the same amount must be shown in column (a)) 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 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 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) Excess distributions carryover from 2012 not applied on line 5 or line 7 (see instructions) Excess distributions carryover to 2018. Subtract lines 7 and 8 from line 6a 82,863 Analysis of line 9 a Excess from 2013 b Excess from 2014 18,014 c Excess from 2015 19,345 d Excess from 2016 25,649 e Excess from 2017

Form 9	90-PF (2017) SACHNOFF FAMILY-0	CHARITABLE FD	N		25-6346	205 Page 10
Part	XIV Private Operating Foundation	ons (see instruc	tions and Part VI	II-A, question 9)		N/A
1a	If the foundation has received a ruling of	or determination le	etter that it is a priv	ate operating	-	
	foundation, and the ruling is effective for	or 2017, enter the	date of the ruling	•		/
p	Check box to indicate whether the foundation	on is a private opera	ting foundation desc	cribed in section	4942(j)(3)	or 4942(j)(5)
2a	Enter the lesser of the adjusted net	Tax year		Prior 3 years		(e) Total
	income from Part I or the minimum investment return from Part X for	(a) 2017	(b) 2016	(c) 2015	(d) 2014	(e) 10tai
	each year listed					0
b	85% of line 2a				_/	0
C	Qualifying distributions from Part XII,					
	line 4 for each year listed					0
d	Amounts included in line 2c not used directly	_				
	for active conduct of exempt activities .					0
е	Qualifying distributions made directly					
	for active conduct of exempt activities					
	Subtract line 2d from line 2c		1			0
3	Complete 3a, b, or c for the			1		
	alternative test relied upon			1		
а	"Assets" alternative test—enter					
	(1) Value of all assets					0
	(2) Value of assets qualifying under					
	section 4942(j)(3)(B)(i)					0
b	"Endowment" alternative test—enter 2/3					
	of minimum investment return shown in Part X, line 6 for each year listed		<u>/</u>			0
С	"Support" alternative test—enter					
	(1) Total support other than gross					
	investment income (interest,]	
	dividends, rents, payments on securities loans (section		1		1	
	512(a)(5)), or royalties)					0
	(2) Support from general public			T		
	and 5 or more exempt organizations as provided in	/				
	section 4942(j)(3)(B)(iii)					0
	(3) Largest amount of support from					
	an exempt organization					0
	(4) Gross investment income					0
Par	t XV Supplementary Informatio	n (Complete th	is part only if th	ne foundation ha	d \$5,000 or more	in assets at
	any time during the year—	see instruction	ns.)			
1	Information Regarding Foundation		- ——			
а	List any managers of the foundation w					e foundation
	before the close of any tax year (but o	nly if they have co	ontributed more that	an \$5,000) (See se	ection 507(d)(2))	
NON	IE					
b	List arry managers of the foundation w	ho own 10% or m	ore of the stock of	f a corporation (or a	an equally large por	tion of the
	ownership of a partnership or other en	itity) of which the	foundation has a 1	10% or greater inter	est	
NON	<u> [</u>					
2	Information Regarding Contribution	n, Grant, Gift, Lo	an, Scholarship,	etc., Programs:		
	Check here ▶ 🗓 if the foundation of	nly makes contrib	utions to preselec	ted charitable orga		
	unsolicited requests for funds. If the fo			o individuals or org	anızatıons under ot	her
	conditions, complete items 2a, b, c, ar	nd d See instructi	ons			
а	The name, address, and telephone nu	ımber or email ad	dress of the perso	n to whom applicat	ions should be addi	ressed
NOT	APPLICABLE					
	The form in which applications should	be submitted and	information and r	materials they shou	ld include	
				•		
<u>N</u> OT	APPLICABLE					
	Any submission deadlines					
	APPLICABLE					
d	Any restrictions or limitations on awar	ds, such as by ge	ographical areas,	charitable fields, kii	nds of institutions, o	r other
	factors	. •	•			
NOT	APPLICABLE					

SACHNOFF FAMILY-CHARITABLE FDN 25-6346205 Form 99O-PF (2017) Page 11 Part XV Supplementary Information (continued) Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Foundation show any relationship to Purpose of grant or status of recipient Amount any foundation manager contribution Name and address (home or business) or substantial contributor Paid during the year See Attached Statement Total 14,500 3a Approved for future payment NONE

Total

3b NONE

▶

	/I-A Analysis of Income-Producing Ac					<u> </u>
.nter gro	ess amounts unless otherwise indicated	Unrelated bu	siness income	Excluded by sect	on 512, 513, or 514	(e)
1 Pro	gram service revenue	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exemp function income (See instructions
a				<u> </u>		
				 		
C.						
d				-		
e f				 		
•	Food and contracts from accomment as an acc			 		
	Fees and contracts from government agencies mbership dues and assessments	 				
	rest on savings and temporary cash investments			 		
	idends and interest from securities			14	12,668	
	rental income or (loss) from real estate	2.2007	10 × 12 × 12 × 12 × 12 × 12 × 12 × 12 ×		12,000	5745466
	Debt-financed property	333C37-100 C2 % 15 5 000 A	100 TO 10		2.30	3 5 5 73 5 74 5 500 50 5 5 5 5
	Not debt-financed property					
	t rental income or (loss) from personal property					
7 Oth	ner investment income					
8 Gai	n or (loss) from sales of assets other than inventory			18	13,445	
9 Net	t income or (loss) from special events					
10 Gro	oss profit or (loss) from sales of inventory					
11 Oth	ner revenue a			<u> </u>	ļ	<u> </u>
b						ļ
C		·		 		
				· F		
d						1
е					26.442	,
e 12 Su	btotal Add columns (b), (d), and (e)			0 🔆 🔆	26,113	
e 12 Su 13 To	btotal Add columns (b), (d), and (e) tal. Add line 12, columns (b), (d), and (e)			0	26,113 13	
e 12 Su 13 To (See wo	btotal Add columns (b), (d), and (e) tal. Add line 12, columns (b), (d), and (e) irksheet in line 13 instructions to verify calculatio	ns)				
e 12 Su 13 To (See wo	btotal Add columns (b), (d), and (e) tal. Add line 12, columns (b), (d), and (e) rksheet in line 13 instructions to verify calculatio VI-B Relationship of Activities to the A	ns) Accomplishm	ent of Exemp	ot Purposes	13d importantly to th	26,11 e
e 12 Su 13 To See wo Part X Line No	btotal Add columns (b), (d), and (e) tal. Add line 12, columns (b), (d), and (e) rksheet in line 13 instructions to verify calculation VI-B Relationship of Activities to the A Explain below how each activity for which incomaccomplishment of the foundation's exempt pu	ns) Accomplishm	ent of Exemp	ot Purposes	13d importantly to th	26,1°
e 12 Su 13 To See wo Part X Line No	btotal Add columns (b), (d), and (e) tal. Add line 12, columns (b), (d), and (e) rksheet in line 13 instructions to verify calculatio VI-B Relationship of Activities to the A Explain below how each activity for which inco	ns) Accomplishm	ent of Exemp	ot Purposes	13d importantly to th	26,1°
e 12 Su 13 To See wo Part X Line No	btotal Add columns (b), (d), and (e) tal. Add line 12, columns (b), (d), and (e) rksheet in line 13 instructions to verify calculation VI-B Relationship of Activities to the A Explain below how each activity for which incomaccomplishment of the foundation's exempt pu	ns) Accomplishm	ent of Exemp	ot Purposes	13d importantly to th	26,1°
e 12 Su 13 To See wo Part X Line No	btotal Add columns (b), (d), and (e) tal. Add line 12, columns (b), (d), and (e) rksheet in line 13 instructions to verify calculation VI-B Relationship of Activities to the A Explain below how each activity for which incomaccomplishment of the foundation's exempt pu	ns) Accomplishm	ent of Exemp	ot Purposes	13d importantly to th	26,1 e
e 12 Su 13 To See wo Part X Line No	btotal Add columns (b), (d), and (e) tal. Add line 12, columns (b), (d), and (e) rksheet in line 13 instructions to verify calculation VI-B Relationship of Activities to the A Explain below how each activity for which incomaccomplishment of the foundation's exempt pu	ns) Accomplishm	ent of Exemp	ot Purposes	13d importantly to th	26,1 e
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e 12 Su 13 To See wo Part X Line No	btotal Add columns (b), (d), and (e) tal. Add line 12, columns (b), (d), and (e) rksheet in line 13 instructions to verify calculation VI-B Relationship of Activities to the A Explain below how each activity for which incomaccomplishment of the foundation's exempt pu	ns) Accomplishm	ent of Exemp	ot Purposes	13d importantly to th	26,1 e
e 12 Su 13 To See wo Part X Line No	btotal Add columns (b), (d), and (e) tal. Add line 12, columns (b), (d), and (e) rksheet in line 13 instructions to verify calculation VI-B Relationship of Activities to the A Explain below how each activity for which incomaccomplishment of the foundation's exempt pu	ns) Accomplishm	ent of Exemp	ot Purposes	13d importantly to th	26,1°
e 12 Su 13 To See wo Part X Line No	btotal Add columns (b), (d), and (e) tal. Add line 12, columns (b), (d), and (e) rksheet in line 13 instructions to verify calculation VI-B Relationship of Activities to the A Explain below how each activity for which incomaccomplishment of the foundation's exempt pu	ns) Accomplishm	ent of Exemp	ot Purposes	13d importantly to th	26,1°
e 12 Su 13 To See wo Part X Line No	btotal Add columns (b), (d), and (e) tal. Add line 12, columns (b), (d), and (e) rksheet in line 13 instructions to verify calculation VI-B Relationship of Activities to the A Explain below how each activity for which incomaccomplishment of the foundation's exempt pu	ns) Accomplishm	ent of Exemp	ot Purposes	13d importantly to th	26,1°
e 12 Su 13 To See wo Part X Line No	btotal Add columns (b), (d), and (e) tal. Add line 12, columns (b), (d), and (e) rksheet in line 13 instructions to verify calculation VI-B Relationship of Activities to the A Explain below how each activity for which incomaccomplishment of the foundation's exempt pu	ns) Accomplishm	ent of Exemp	ot Purposes	13d importantly to th	26,1°
e 12 Su 13 To See wo Part X Line No	btotal Add columns (b), (d), and (e) tal. Add line 12, columns (b), (d), and (e) rksheet in line 13 instructions to verify calculation VI-B Relationship of Activities to the A Explain below how each activity for which incomaccomplishment of the foundation's exempt pu	ns) Accomplishm	ent of Exemp	ot Purposes	13d importantly to th	26,1 e
e 12 Su 13 To See wo Part X Line No	btotal Add columns (b), (d), and (e) tal. Add line 12, columns (b), (d), and (e) rksheet in line 13 instructions to verify calculation VI-B Relationship of Activities to the A Explain below how each activity for which incomaccomplishment of the foundation's exempt pu	ns) Accomplishm	ent of Exemp	ot Purposes	13d importantly to th	26,1°
e 12 Su 13 To See wo Part X Line No	btotal Add columns (b), (d), and (e) tal. Add line 12, columns (b), (d), and (e) rksheet in line 13 instructions to verify calculation VI-B Relationship of Activities to the A Explain below how each activity for which incomaccomplishment of the foundation's exempt pu	ns) Accomplishm	ent of Exemp	ot Purposes	13d importantly to th	26,1°
e 12 Su 13 To See wo Part X Line No	btotal Add columns (b), (d), and (e) tal. Add line 12, columns (b), (d), and (e) rksheet in line 13 instructions to verify calculation VI-B Relationship of Activities to the A Explain below how each activity for which incomaccomplishment of the foundation's exempt pu	ns) Accomplishm	ent of Exemp	ot Purposes	13d importantly to th	26,1°
e 12 Su 13 To See wo Part X Line No	btotal Add columns (b), (d), and (e) tal. Add line 12, columns (b), (d), and (e) rksheet in line 13 instructions to verify calculation VI-B Relationship of Activities to the A Explain below how each activity for which incomaccomplishment of the foundation's exempt pu	ns) Accomplishm	ent of Exemp	ot Purposes	13d importantly to th	26,1°

SACHNOFF FAMILY-CHARITABLE FDN Form 990-PF (2017) 25-6346205 Page 13 Part XVII Information Regarding Transfers to and Transactions and Relationships With Noncharitable **Exempt Organizations** No Did the organization directly or indirectly engage in any of the following with any other organization described Yes in section 501(c) (other than section 501(c)(3) organizations) or in section 527, relating to political Transfers from the reporting foundation to a noncharitable exempt organization of (1) Cash 1a(1) (2) Other assets 1a(2) Other transactions (1) Sales of assets to a noncharitable exempt organization 1b(1) (2) Purchases of assets from a noncharitable exempt organization 1b(2) (3) Rental of facilities, equipment, or other assets 1b(3) (4) Reimbursement arrangements 1b(4) (5) Loans or loan guarantees 1b(5) (6) Performance of services or membership or fundraising solicitations 1b(6) Sharing of facilities, equipment, mailing lists, other assets, or paid employees 1c 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 (c) Name of noncharitable exempt organization (d) Description of transfers, transactions, and sharing arrangements NOT APPLICABLE Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations ☐ Yes X No described in section 501(c) (other than section 501(c)(3)) or in section 527? b If "Yes," complete the following schedule (a) Name of organization (b) Type of organization (c) Description of relationship 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

7/10/2018

Date

Preparer's signature

▶ PRICEWATERHOUSECOOPERS LLP

Firm's address ► 600 GRANT STREET, PITTSBURGH, PA 15219

VICE PRESIDENT

Sign

Here

Paid

Preparer

Use Only

Signature of officer or trustee

Shawn P Hanlon

Firm's name

Print/Type preparer's name

Form 990-PF (2017)

X Yes No

May the IRS discuss this return

IP00965923

See instructions

13-4008324

(412) 355-6000

Check X If

self-employed

Firm's EIN

Phone no

7/10/2018

Part I, Line <u>6 (990-PF)</u>	- Gain/Loss from Sale of Assets Other Than Inventory

	Amount							Totals	Gre		Cost or Other B			Gain
Long Term CG Distributions	13,937	ī					c	apital Gains/Losses	Sa	17.966	Depreciation as	nd Adjustments 4.521		13.445
Short Term CG Distributions								Other sales		C	1	- 0		0
				Check "X" if										
	1	Check "X"		Purchaser			i :				Expense of Sale	1	,	
_		to include		18 9	Acquisition	Date	Date	Gross Sales	Cost or	Valuation	and Cost of	· '	1	Net Gain
	CUSIP #	in Part IV	Purchaser	Business	Method	Acquired	Sold	Price	Other Bass	Method	Improvements	Depreciation	Adjustments	or Loss
1 DREYFUS EMG MKT DEBT LO		X		<u> </u>		12/20/2013	11/29/2017	4,010	4,500				0'	-490
2 DREYFUS EMG MKT DEBT L	261980460	1_ ×		1		12/30/2013	11/29/2017	19	21		I		0	-2

Part I, Line 18 (990-PF) - Taxes

	205	205	0	0
	Revenue			Disbursements
	and Expenses	Net Investment	Adjusted	for Charitable
Description	per Books	Income	Net Income	Purposes
1 FOREIGN TAX WITHHELD	205	205		

Part II, Line 13 (990-PF) - Investments - Other

			0	560,490	606,737
		Basis of	Book Value	Book Value	FMV
L	Asset Description	Valuation	Beg of Year	End of Year	End of Year
_1				0	
2	ASG MANAGED FUTURES STRAT-Y		0	8,111	7,346
3	DREYFUS SELECT MGER S/C GR-Y		0	12,740	14,151
4	DREYFUS US EQUITY FUND-Y		0	35,579	35,509
5	DREYFUS SELECT MGER S/C VL-Y		o	10,356	12,788
6	TCW EMERGING MARKETS INCOME FUN		O.	4,489	4,372
7	VIRTUS EMERGING MKTS OPPOR-I		0	8,237	10,488
8	ADVANTAGE DYN TOTAL RET -Y		0	26,295	25,446
9	DREYFUS STRATEGIC VALUE F-Y		0	34,701	35,431
10	DREYFUS OPPORT SM CAP-Y		o	11,289	12,953
11	BNY MELLON INCOME STK FD CL M		0	27,141	29,303
12	BNY MELLON CORP BOND-M		0	29,000	28,742
13	BNY MELLON MID CAP STK FD CL M		0	45,155	54,357
14	BNY MELLON INTERMEDIATE BOND FD C		0	80,636	77,233
15	BNY MELLON BOND FD CL M		0	25,456	25,221
16	DFA EMERG MKTS CORE EQUITY		0	11,878	14,483
17	DREYFUS SELECT MGR L/S EQ-Y		0	51,230	54,020
18	DREYFUS FLOATING RATE INC-Y		0	30,039	28,778
19	DREYFUS L/C EQUITY FUND-Y		0	35,520	47,825
20	DREYFUS DIVERSIFIED INTL-Y		0	49,548	59,483
21	DREYFUS INTL SMALL CAP-Y		0	23,090	28,808

Part IV (990-PF) - Capital Gains and Losses for Tax on Investment Income

Long Term CG Distributions Short Term CG Distributions					4.000							_	
CHOIL COM CO CIALIDOLIONS					4,029		0	4,521	-492	U	0	U	492
								Cost or Other		FMV	Adjusted Basis	Excess of FMV	Gains Minus
		Acquisition	Date	Date	Gross	Depreciation		Basis Plus		as of	as of	Over	Excess FMV Over
Description of Property Sold	CUSIP #	Method	Acquired	Sold	Sales Price	Allowed	Adjustments	Expense of Sale	Gain or Loss	12/31/89	12/31/69	Adjusted Bases	Adl Basis or Losses
1 DREYFUS EMG MKT DEBT LO	261980460		12/20/2013	11/29/2017	4,010			4,500	-490	0	0		490
2 DREYFUS EMG MKT DEBT LO	261980460	I	12/30/2013	11/29/2017			o	21	-2	ŏ	ŏ		

Part VIII, Line 1 (990-PF) - Compensation of Officers, Directors, Trustees and Foundation Managers

Name	Check "X" if Business		Street	City	State	Zip Code	Foreign Country	Title	Avg Hrs Per Week	Compensation	Benefits	Expense Account
BNY Mellon N.A	×	P O Box 185		PITTSBURGH	PA	15230-0185		CO- TRUSTEE	SEE ATTAC	5 119	NONE	NONE
BNY Mellon N A	×	P O Box 185		PITTSBURGH	PA	15230-0185		FEE	REIMBURSI	-3,460	N/A	N/A
BRÜCE SACHNÖFF				PITTSBURGH	PA			CO- TRUSTEE	0 50	o	NONE	NONE
TREASURE SACHNOFF				PITTSBURGH	PA			CO- TRUSTEE	0 50	0	NONE	NONE
BRIAN ANDERSON				PITTSBURGH "	PA			CO- TRUSTEE	0 50	ŏ	NONE	NONE "

Part VI, Line 6a (990-PF) - Estimated Tax Payments

	Date	Amount
Credit from prior year return	1	166
2 First quarter estimated tax payment	2	
3 Second quarter estimated tax payment	3	
4 Third quarter estimated tax payment	4	
5 Fourth quarter estimated tax payment	5	
6 Other payments	6	
7 Total	7	166

SACHNOFF FAMILY-CHARITABLE			. <u> </u>	<u>25-6346</u>		
Continuation of Part XV, Lir	<u>ne 3a (990-PF) - (</u>	<u>Grant</u>	s and Cont	<u>ributions Paid</u>	During the	<u>Year</u>
Recipient(s) paid during the year						
Name						
THE SALVATION ARMY Street		_				
700 N BELL AVENUE P O BOX 742						
City		State	Zip Code	Foreign Count	try	
CARNEGIE			15106			
Relationship	Foundation Status					
NONE	PC				IA	
Purpose of grant/contribution GENERAL OPERATING PURPOSES					Amount	2,500
						2,000
Name THE AMERICAN RED CROSS						
Street			 -			
225 BOULEVARD OF THE ALLIES						
City	<u> </u>	State	Zip Code	Foreign Coun	try	
PITTSBURGH			15230			
Relationship	Foundation Status					
NONE	PC				T	
Purpose of grant/contribution					Amount	F 000
GENERAL OPERATING PURPOSES						5,000
Name						
JEWISH FEDERATION OF GREATER	PITTSBURGH					
Street						
234 MCKEE PLACE City		State	Zip Code	Foreign Coun	tn.	
PITTSBURGH			15213	Foreign Coun	uу	
Relationship	Foundation Status		110210			
NONE	PC					
Purpose of grant/contribution					Amount	
GENERAL OPERATING PURPOSES				* -	<u> </u>	7,000
Name						
Street						
City		04-4-	Tail O. I.		4	
City		State	Zip Code	Foreign Coun	itry	
Relationship	Foundation Status		<u> </u>			
Purpose of grant/contribution					Amount	
Name						
Street	··-	-				
City		State	Zip Code	Foreign Cour	itry	
Relationship	Foundation Status		<u> </u>			
Relationship	Foundation Status					
Purpose of grant/contribution	·				Amount	
Name						
Name						
Street						
City		State	Zip Code	Foreign Cour	ntry	
			<u> </u>			
Relationship	Foundation Status					
Purpose of grant/contribution					Amount	
					IVIIIVIIII	

Attachment to Form 990PF Part VIII, Column (b) Title and Average Hours Per Week Devoted To Position

The compensation reported in column (b) paid to BNY Mellon, N.A. as Corporate Trustee is calculated based on market value and current fee schedule. It is not determined on an hourly basis. Corporate Trustee services include administrative responsibilities, grant requirements, recordkeeping, investment management, income collection, statement and accounting services, and regulatory reporting.