DLN: 93491319008458

OMB No 1545-0052

## 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 <a href="www.irs.gov/form990pf">www.irs.gov/form990pf</a>. 2017

Open to Public Inspection

of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in columns (a) (see instructions)    1 Contributions, gifts, grants, etc., received (attach schedule)    2 Check ▶ ☑ If the foundation is not required to attach Sch B    3 Interest on savings and temporary cash investments    Divideds and interest from securities    5a Gross rents    b Net rental income or (loss)    6a Net gain or (loss) from sale of assets not on line 10    b Gross sales price for all assets on line 6a    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    b Less Cost of goods sold    10 Gross profit or (loss) (attach schedule)    11 Other income (floss) (attach schedule)    12 Total. Add lines 1 through 11    13 Compensation of officers, directors, trustees, etc    17 Interest    18 Taxes (attach schedule)    19 Depreciation (attach schedule)    10 Occupancy    11 Travel, conferences, and meetings    12 Total operating and administrative expenses.    Add lines 13 through 23    24 Total operating and administrative expenses.    Add lines 13 through 23    24 Total operating and administrative expenses.    Add lines 13 through 23    24 Total operating and administrative expenses.    Add lines 13 through 23    24 Total operating and administrative expenses.    Add lines 13 through 23    Contributions, gifts, grants, etc., received (attach schedule)    10			ndar year 2017, or tax year beginning 07-01-20	017 , a	nd er	nding 06-30-		
Discontinue number (see instruction)   Discontinue and seed of P of See instructions   C212 3/39-1112	TH	E RMF	FOUNDATION INC				entification numbe	r
1				)   D/		13-3/9//99		
Cities or bown, sales or province, country, and ZIP or foreces looked code  **Votice, N° 1998  Check all that apply ☐ In tai return ☐ Amended return ☐ Administration ☐ Amended return ☐ Administration ☐ Amended return ☐ Administration ☐ Amended return ☐ Comparison sports are assumed and return of a forece returnation ☐ Comparison sports are returned for a forece returned returns ☐ Comparison sports are returned for a forece returned returned returns ☐ Comparison sports are returned for a forece fo						<b>B</b> Telephone nu	mber (see instruction	ns)
Check all that apply     In bal return     Amended return   Amended return     Amended return     Amended return       Amended return	City	or town	state or province, country, and ZIP or foreign postal code			(212) 678-1147	7	
Final return						<b>C</b> If exemption	application is pendin	g, check here
Control brown and ellasth computation   Cash   Ca	G Ch	neck al	I that apply	former public charity		<b>D 1.</b> Foreign or	ganızatıons, check he	ere .
Check type of organization   More change   Name change   Name change   Section 501(x(3)			☐ Final return ☐ Amended return	ı				
Control part of programation   Description			$\square$ Address change $\square$ Name change					· _
Fair market value of all assess at end of year (from Part II, col (c), hine 16)   \$ 132,226	_							
of year from Part II, col (C).   Other (specify) (Part I, column (c)) (Part II, column (c)) (Part III, column (c)) (P								
or amounts in columns (b), (c), and (d) may not necessarily equal the amounts an extended in comme of the amounts and extended in comments and extend	of '	year <i>(f</i>	from Part II, col (c), <b>\$</b> 132.226 □ Other (specify)		ıal			
of amounts in columns (b), (c), and (g) may not necessarily equal the amounts in columns (a) fee asystemons (a) yee asystemons	Pa	rt I	Analysis of Revenue and Expenses (The total	(a) Revenue and				(d) Disbursements
1   Contributions, girks, grants, etc., received (attach schedule)   2   Check   1   1   1   1   1   1   1   1   1				expenses per	(b)			purposes
Check		1		1				(cash basis only)
Sch B		-						
1		2						
10   Dividends and interest from securities   S   Gross rents   S   Gross rents   S   S   Gross rents   S   S   S   S   S   S   S   S   S		3						
Description			- · · ·					
10		5a	Gross rents					
8 Net short-term capital gain 9 Income modifications 10a Gross sales less returns and allowances b Less Cost of goods sold c Gross profit or (loss) (attach schedule) 11 Other income (attach schedule) 12 Total. Add lines 1 through 11		ь	Net rental income or (loss)	-				
8 Net short-term capital gain 9 Income modifications 10a Gross sales less returns and allowances b Less Cost of goods sold c Gross profit or (loss) (attach schedule) 11 Other income (attach schedule) 12 Total. Add lines 1 through 11	ĭĽe	6a	Net gain or (loss) from sale of assets not on line 10					
8 Net short-term capital gain 9 Income modifications 10a Gross sales less returns and allowances b Less Cost of goods sold c Gross profit or (loss) (attach schedule) 11 Other income (attach schedule) 12 Total. Add lines 1 through 11	3Ve	b	·	_				
9 Income modifications	ž					0		
10a   Gross sales less returns and allowances		_	· -					
b Less Cost of goods sold			I					
11 Other income (attach schedule)   12   Total. Add lines 1 through 11		ь						
12 Total. Add lines 1 through 11		С	Gross profit or (loss) (attach schedule)					
13   Compensation of officers, directors, trustees, etc   17,500   0   0   17,50     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)       19   Depreciation (attach schedule) and depletion		11	Other income (attach schedule)					
14 Other employee salaries and wages   15   Pension plans, employee benefits   16a   Legal fees (attach schedule)   16a   Legal fees (attach schedule)   17   Interest   18   Taxes (attach schedule)   19   1,206   0   0   0   1,206   1,2		12	Total. Add lines 1 through 11	C		0	0	
15   Pension plans, employee benefits   16a   Legal fees (attach schedule)				17,500		0	0	17,50
16a Legal fees (attach schedule)			, ,					
Total expenses and disbursements. Add lines 24 and 25  Subtract line 26 from line 12  Excess of revenue over expenses and disbursements  Net investment income (if negative, enter -0-)  C Adjusted net income(if negative, enter -0-)  O 0 74,620  -74,620  O 0 0 74,620  O 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	Ses		1 , 1 ,					
Total expenses and disbursements. Add lines 24 and 25  Subtract line 26 from line 12  Excess of revenue over expenses and disbursements  Net investment income (if negative, enter -0-)  C Adjusted net income(if negative, enter -0-)  O 0 74,620  -74,620  O 0 0 74,620  O 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	ᆵ			3,059		0	0	3,05
Total expenses and disbursements. Add lines 24 and 25  Subtract line 26 from line 12  Excess of revenue over expenses and disbursements  Net investment income (if negative, enter -0-)  C Adjusted net income(if negative, enter -0-)  O 0 74,620  -74,620  O 0 0 74,620  O 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	Ä		,		<u> </u>		0	
Total expenses and disbursements. Add lines 24 and 25  Subtract line 26 from line 12  Excess of revenue over expenses and disbursements  Net investment income (if negative, enter -0-)  C Adjusted net income(if negative, enter -0-)  O 0 74,620  -74,620  O 0 0 74,620  O 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	ιNe	17	Interest	_				
Total expenses and disbursements. Add lines 24 and 25  Subtract line 26 from line 12  Excess of revenue over expenses and disbursements  Net investment income (if negative, enter -0-)  C Adjusted net income(if negative, enter -0-)  O 0 74,620  -74,620  O 0 0 74,620  O 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	st ra	18	Taxes (attach schedule) (see instructions)	1,406		0	0	1,40
Total expenses and disbursements. Add lines 24 and 25  Subtract line 26 from line 12  Excess of revenue over expenses and disbursements  Net investment income (if negative, enter -0-)  C Adjusted net income(if negative, enter -0-)  O 0 74,620  -74,620  O 0 0 74,620  O 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	≣	19	Depreciation (attach schedule) and depletion					
Total expenses and disbursements. Add lines 24 and 25  Subtract line 26 from line 12  Excess of revenue over expenses and disbursements  Net investment income (if negative, enter -0-)  C Adjusted net income(if negative, enter -0-)  O 0 74,620  -74,620  O 0 0 74,620  O 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	<u>=</u>	20	Occupancy					
Total expenses and disbursements. Add lines 24 and 25  Subtract line 26 from line 12  Excess of revenue over expenses and disbursements  Net investment income (if negative, enter -0-)  C Adjusted net income(if negative, enter -0-)  O 0 74,620  -74,620  O 0 0 74,620  O 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	<u> </u>	21						
Total expenses and disbursements. Add lines 24 and 25  Subtract line 26 from line 12  Excess of revenue over expenses and disbursements  Net investment income (if negative, enter -0-)  C Adjusted net income(if negative, enter -0-)  O 0 74,620  -74,620  O 0 0 74,620  O 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	<u> </u>				-		0	
Total expenses and disbursements. Add lines 24 and 25  Subtract line 26 from line 12  Excess of revenue over expenses and disbursements  Net investment income (if negative, enter -0-)  C Adjusted net income(if negative, enter -0-)  O 0 74,620  -74,620  O 0 0 74,620  O 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	Ē			844			0	84-
Total expenses and disbursements. Add lines 24 and 25  Subtract line 26 from line 12  Excess of revenue over expenses and disbursements  Net investment income (if negative, enter -0-)  C Adjusted net income(if negative, enter -0-)  O 0 74,620  -74,620  O 0 0 74,620  O 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	era	<b>24</b>	•	24.170		n	n	24.17
26 Total expenses and disbursements. Add lines 24 and 25  27 Subtract line 26 from line 12  a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) c Adjusted net income(if negative, enter -0-)	o O	25	-		-			50,45
27 Subtract line 26 from line 12  a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) c Adjusted net income(if negative, enter -0-)			Total expenses and disbursements. Add lines 24 and	74 620		0	0	74.62
disbursements b Net investment income (if negative, enter -0-) c Adjusted net income(if negative, enter -0-)		27		74,020			, v	7 7,02
c Adjusted net income(If negative, enter -0-) 0		а	disbursements	-74,620				
			· -			0		
							,	

	1	Cash—non-interest-bearing	206,846	132,226	132,226
	2	Savings and temporary cash investments			
	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 ▶			
2	8	Inventories for sale or use			
sets	9	Prepaid expenses and deferred charges			
v.	10a	Investments—U S and state government obligations (attach schedule)			
	b	Investments—corporate stock (attach schedule)			
	С	Investments—corporate bonds (attach schedule)			
	11	Investments—land, buildings, and equipment basis ▶			
		Less accumulated depreciation (attach schedule) ▶			
	12	Investments—mortgage loans			
	13	Investments—other (attach schedule)			
	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)	206,846	132,226	132,226
	17	Accounts payable and accrued expenses			
	18	Grants payable			
les	19	Deferred revenue			
를	20	Loans from officers, directors, trustees, and other disqualified persons			
Liabilities	21	Mortgages and other notes payable (attach schedule)			
_	22	Other liabilities (describe)			

206,846

206,846

132,226

132,226

132,226

2

3

4

5

6

206,846

-74,620

132,226

132,226 Form **990-PF** (2017)

0

0

Total liabilities(add lines 17 through 22) . . . . . . . . . . . . .

Foundations that follow SFAS 117, check here ▶

and complete lines 24 through 26 and lines 30 and 31.

Foundations that do not follow SFAS 117, check here ▶

Capital stock, trust principal, or current funds . . . .

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

Retained earnings, accumulated income, endowment, or other funds

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

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

Analysis of Changes in Net Assets or Fund Balances

Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-

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

23

24

25

26

27

28

29

30

31

Part III

2

3

4

Unrestricted

Temporarily restricted

Permanently restricted .

and complete lines 27 through 31.

of-year figure reported on prior year's return)

Other increases not included in line 2 (itemize)

Enter amount from Part I, line 27a

Add lines 1, 2, and 3 . . . . . .

Decreases not included in line 2 (itemize) ▶

Net Assets or Fund Balances

Page **3** 

		<b>(a)</b> the kınd(s) of property sold (e g , re ehouse, or common stock, 200 shs	<b>(b)</b> How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr )	(d) Date sold (mo , day, yr )	
1a						
	<b>(e)</b> Gross sales price	(f) Depreciation allowed (or allowable)	Cost or	( <b>g)</b> other basis ense of sale	Gain d	<b>h)</b> r (loss) ) minus (g)
a		, ,				, (3)
b						
С						
d						
e						
Co	mplete only for assets	showing gain in column (h) and ow	ned by the foundation (	on 12/31/69		I)
	(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	Excess	( <b>k)</b> of col (ı) (յ), ıf any	col (k), but not	h) gain minus less than -0-) <b>or</b> om col (h))
a					·	
b						
С						
d						
e						
<b>3</b> N		or (net capital loss)  gain or (loss) as defined in sections : rt I, line 8, column (c) (see instructi	ons) If (loss), enter -0	Part I, line 7	2	
Part V		Jnder Section 4940(e) for Re		Investment In	come	
For optic	onal use by domestic p	rivate foundations subject to the sec	tion 4940(a) tax on ne	t investment incon	ne)	
f section	4940(d)(2) applies, le	eave this part blank				
Nas the f	foundation liable for th	e section 4942 tax on the distributa ot qualify under section 4940(e) Do		ın the base period	7	es 🔽 No
<b>1</b> En	ter the appropriate an	nount in each column for each year,	see instructions before	making any entrie		
	(a) period years Calendar tax year beginning in)	<b>(b)</b> Adjusted qualifying distributions	(c) Net value of noncharitab	le-use assets	<b>(d)</b> Distribution rat (col (b) divided by c	
	2016	83,800		188,168		0 445347
	2015	66,137		117,045		0 565056
	2014	68,047		107,448		0 633302
	2013	78,209		89,778		0 871138
	2012	77,700		82,881	Т	0 937489
	tal of line 1, column (			2		3 452332
		for the 5-year base period—divide indation has been in existence if less		or by the 3		0 690466
		ncharitable-use assets for 2017 from		4		179,257
<b>5</b> Mu	ltiply line 4 by line 3			5		123,771
		ent income (1% of Part I, line 27b)				0
<b>7</b> Add	d lines 5 and 6			7		123,771
		ons from Part XII, line 4 ,				74,620
	ine 8 is equal to or gre tructions	eater than line 7, check the box in Pa	art VI, line 1b, and com	plete that part usi	ng a 1% tax rate Se	e the Part VI

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

7b

	•	<b>,</b>
	_	Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees,
Down WITT		Information About Officers, Directors, Trustees, Foundation Planagers, Inging Fala Employees,
Part VIII		and Contractors

1 List all officers, directors, trust	6	oundation managers or	d their compensation	(see instructions)	
List all officers, directors, trust  (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
RICHARD M FRIEDBERG 452 RIVERSIDE DR	DIRI 0 50	ECTOR )	0	0	C
NEW YORK, NY 10027 SUSAN N BRESLER	FOLI	NDATION MANAGER	17,500	0	
452 RIVERSIDE DR	25 0		17,500	Ĭ	
NEW YORK, NY 10027			_		
PAMELA WALTER 452 RIVERSIDE DR	0 10	ECTOR )	0	0	
NEW YORK, NY 10027					
JOSHUA SPODEK	DIRI 0 10	ECTOR	0	0	· C
452 RIVERSIDE DR NEW YORK, NY 10027	0 10	,			
2 Compensation of five highest-p	aid e	mployees (other than tl	nose included on line 1	—see instructions). If no	ne, enter "NONE."
(a) Name and address of each employee   more than \$50,000	paid	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
NONE					
		1			
		_			
<b>Total</b> number of other employees paid o					C
3 Five highest-paid independent		-		•	
(a) Name and address of each pers NONE	on pa	id more than \$50,000	( <b>b)</b> Typ	e of service	(c) Compensation
NONE			1		
			1		
			-		
			-		
Total number of others receiving over \$!	50,000	) for professional services			
Part IX-A Summary of Direct	Cha	ritable Activities			
List the foundation's four largest direct charitab organizations and other beneficiaries served, co				nation such as the number of	Expenses
1 NONE	meren	ces convened, research paper	s produced, etc		. 0
2					
3					
4					
Part IX-B Summary of Progra	m-R	elated Investments	(see instructions)		
Describe the two largest program-related in				and 2	Amount
1					
2					
All other program-related investments	500	Instructions			
3	, see	mad ucdons			
Total. Add lines 1 through 3 .	•				(
					E 000 BE (2017

2a

2h

8.963

8.963

8.963

8.963

74,620

74.620

74.620

Form 990-PF (2017)

2c

3

4

5

6

1a

1b

2

3a 3b

4

5

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. . . . . . . . . .

Tax on investment income for 2017 from Part VI, line 5. . . . . .

Income tax for 2017 (This does not include the tax from Part VI ). . .

Qualifying Distributions (see instructions)

Amounts set aside for specific charitable projects that satisfy the

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

1

2a

3

4 5

6

1

2

3

4

5

Part XII

8,963

Form 990-PF (2017)

0

(d)

2017

Form 990-PF (2	017)
Part XIII	Und

990-PF (20	017)		
t XIII	Undistributed Income	(see instructions)	

**b** Total for prior years

From 2012. . . . .

**b** From 2013. . . . c From 2014. . .

e From 2016. . . . .

4 Qualifying distributions for 2017 from Part XII, line 4 🕨 \$ a Applied to 2016, but not more than line 2a **b** Applied to undistributed income of prior years (Election required—see instructions). . . . . c Treated as distributions out of corpus (Election 

d From 2015. . . .

1 Distributable amount for 2017 from Part XI, line 7

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

Excess distributions carryover, if any, to 2017

**d** Applied to 2017 distributable amount. . . . e Remaining amount distributed out of corpus

same amount must be shown in column (a) )

**5** Excess distributions carryover applied to 2017

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 e Undistributed income for 2016 Subtract line 4a from line 2a Taxable amount—see instructions . . . . . . . . . f Undistributed income for 2017 Subtract lines 4d and 5 from line 1. This amount must be distributed in 2018 . . . . . 7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions) . . . . . . . . . 8 Excess distributions carryover from 2012 not

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

Subtract lines 7 and 8 from line 6a . . . .

9 Excess distributions carryover to 2018.

10 Analysis of line 9

a Excess from 2013. . .

c Excess from 2015. . . .

d Excess from 2016. . .

e Excess from 2017. . .

**b** Excess from 2014. .

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

6 Enter the net total of each column as

indicated below:

73,720 62 675 60.285 74,392 f Total of lines 3a through e. . . . . . . .

73.556

(a)

Corpus

344.628

65.657

410,285

73.556

336,729

73.720 62,675

60.285

74.392

65.657

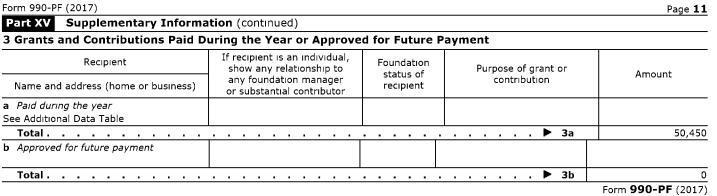
0

(b)

Years prior to 2016

(c)

2016



Enter gross amounts unless otherwise indicated		Unrelated bus	siness income	Excluded by section	(e) Related or exempt	
	service revenue	(a) Business code	<b>(b)</b> Amount	(c) Exclusion code	<b>(d)</b> Amount	function income (See instructions
-						
	and contracts from government agencies ship dues and assessments.					
Interes	st on savings and temporary cash					
	ds and interest from securities					
	tal income or (loss) from real estate					
	financed property					
	ntal income or (loss) from personal property					
	nvestment income.					
Gain o	r (loss) from sales of assets other than					
	ory					
	rofit or (loss) from sales of inventory					
	evenue a					
b						
d						
d e			0		(	
d e ! Subtota ! Total. /	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e)		0	1	<b>3</b>	))
de Subtota Total. /	al Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  Adshrives in line 13 instructions to verify calcul	ations )				
d e Subtota Total. / (See wo	al Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  Add line 13 instructions to verify calculus.  B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex	ations ) e Accomplishi income is reporte	ment of Exemp	ot Purposes Part XVI-A contribu	3	(
de Subtota Total. / (See wo art XVI	Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  Add line 13 instructions to verify calculated and the color of the co	ations ) e Accomplishi income is reporte	ment of Exemp	ot Purposes Part XVI-A contribu	3	
de Subtota Total. / (See wo art XVI	al Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  Add line 13 instructions to verify calculus.  B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex	ations ) e Accomplishi income is reporte	ment of Exemp	ot Purposes Part XVI-A contribu	3	(
de Subtota Total. / (See wo art XVI	al Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  Add line 13 instructions to verify calculus.  B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex	ations ) e Accomplishi income is reporte	ment of Exemp	ot Purposes Part XVI-A contribu	3	(
de Subtota Total. / (See wo art XVI	al Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  Add line 13 instructions to verify calculus.  B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex	ations ) e Accomplishi income is reporte	ment of Exemp	ot Purposes Part XVI-A contribu	3	
de Subtota Total. / (See wo art XVI	al Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  Add line 13 instructions to verify calculus.  B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex	ations ) e Accomplishi income is reporte	ment of Exemp	ot Purposes Part XVI-A contribu	3	
de Subtota Total. / (See wo art XVI	al Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  Add line 13 instructions to verify calculus.  B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex	ations ) e Accomplishi income is reporte	ment of Exemp	ot Purposes Part XVI-A contribu	3	
de Subtota Total. / (See wo art XVI	al Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  Add line 13 instructions to verify calculus.  B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex	ations ) e Accomplishi income is reporte	ment of Exemp	ot Purposes Part XVI-A contribu	3	
de Subtota Total. / (See wo art XVI	al Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  Add line 13 instructions to verify calculus.  B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex	ations ) e Accomplishi income is reporte	ment of Exemp	ot Purposes Part XVI-A contribu	3	
de Subtota Total. / (See wo art XVI	al Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  Add line 13 instructions to verify calculus.  B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex	ations ) e Accomplishi income is reporte	ment of Exemp	ot Purposes Part XVI-A contribu	3	
de Subtota Total. / (See wo art XVI	al Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  Add line 13 instructions to verify calculus.  B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex	ations ) e Accomplishi income is reporte	ment of Exemp	ot Purposes Part XVI-A contribu	3	(
de Subtota Total. / (See wo	al Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  Add line 13 instructions to verify calculus.  B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex	ations ) e Accomplishi income is reporte	ment of Exemp	ot Purposes Part XVI-A contribu	3	(
de Subtota Total. / (See wo art XVI	al Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  Add line 13 instructions to verify calculus.  B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex	ations ) e Accomplishi income is reporte	ment of Exemp	ot Purposes Part XVI-A contribu	3	(
de Subtota Total. / (See wo	al Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  Add line 13 instructions to verify calculus.  B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex	ations ) e Accomplishi income is reporte	ment of Exemp	ot Purposes Part XVI-A contribu	3	
de Subtota Total. / (See wo	al Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  Add line 13 instructions to verify calculus.  B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex	ations ) e Accomplishi income is reporte	ment of Exemp	ot Purposes Part XVI-A contribu	3	(
de Subtota Total. / (See wo	al Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  Add line 13 instructions to verify calculus.  B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex	ations ) e Accomplishi income is reporte	ment of Exemp	ot Purposes Part XVI-A contribu	3	(
de Subtota Total. / (See wo	al Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  Add line 13 instructions to verify calculus.  B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex	ations ) e Accomplishi income is reporte	ment of Exemp	ot Purposes Part XVI-A contribu	3	(
de Subtota Total. / (See wo	al Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  Add line 13 instructions to verify calculus.  B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex	ations ) e Accomplishi income is reporte	ment of Exemp	ot Purposes Part XVI-A contribu	3	(
de Subtota Total. / (See wo	al Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  Add line 13 instructions to verify calculus.  B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex	ations ) e Accomplishi income is reporte	ment of Exemp	ot Purposes Part XVI-A contribu	3	(
de Subtota Total. / (See wo art XVI	al Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  Add line 13 instructions to verify calculus.  B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex	ations ) e Accomplishi income is reporte	ment of Exemp	ot Purposes Part XVI-A contribu	3	(

orm 990-PF (2	<u> </u>									Pa	ge <b>13</b>
Part XVII	Information Reg Exempt Organiz		nsfers To a	nd Transaction	ns and Re	elation	ships With No	ncharita	ble		
	janization directly or ind Code (other than section							ion 501		Yes	No
a Transfers f	rom the reporting found	lation to a non-	charitable exe	mpt organization	of						
( <b>1)</b> Cash.								. 1	La(1)		No
(2) Other	assets							[1	La(2)		No
<b>b</b> Other trans	sactions										
(1) Sales	of assets to a noncharit	able exempt o	rganization.					[1	lb(1)		No
	ases of assets from a no								lb(2)		No
	l of facilities, equipment	•							lb(3)		No
	oursement arrangement								lb(4)		No
• •	or loan guarantees nance of services or me								lb(5) lb(6)		No No
• •	facilities, equipment, m	·	<del>-</del>					· F	1c		No
-	ver to any of the above i	-		, ,				market va			NO
	ds, other assets, or services saction or sharing arran	gement, show		) the value of the	goods, othe	er assets		ıved		ngemen	ts
described i	dation directly or indirect n section 501(c) of the omplete the following sch	Code (other th hedule	an section 50:	1(c)(3)) or in sect	ion 527? .	-			Yes	<b>✓</b>	No
	(a) Name of organization	1	(Б	) Type of organization	n		(c) Description	n of relation	ship		
of my which	er penalties of perjury, I y knowledge and belief, n preparer has any knov	it is true, corre						ased on a	ll infor	matior	n of
Sign Here <b>l</b>	****			2018-10-11	***	****		May the return			
-	signature of officer or tru	ustee		Date	Title	le		with the below (see ins		_	
	Print/Type preparer's	name Pi	reparer's Sign	ature	Date		Check if self-	PTIN	00082	583	
Paid	MOEHRINGER HARC	DLD W				,	employed ▶ 🔲	٢	00002	203	
Preparer Use Only		S PANETH LLP			•			Fırm's EIN	N <b>▶</b> 11-	35188	342
	Firm's address ► 685	THIRD AVENU	UÉ							_	
	NEV	W YORK, NY 1	.0017					Phone no	(212)	503-8	3800

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager recipient Name and address (home or business) or substantial contributor

a Daid during the year

a Palu during the year			
ACRIA575 8TH AVENUE SUITE 502 NEW YORK, NY 10018	PC	CHARITABLE	2,400
ALLIANCE FOR JUSTICE	PC	CHARITABLE	100

ALLIANCE FOR JUSTICE 11 DUPONT CIRCLE NW SUITE 200 WASHINGTON, DC 20036	PC	CHARITABLE	
AMERICAN FRIENDS OF MAGEN DAVID	PC	CHARITABLE	

WASHINGTON, DC 20036			
AMERICAN FRIENDS OF MAGEN DAVID ADOM	PC	CHARITABLE	200
352 SEVENTH AVENUE SUITE 400			

AMERICAN FRIENDS OF MAGEN DAVID	PC	CHARITABLE	
ADOM			
352 SEVENTH AVENUE SUITE 400			
NEW YORK, NY 10001			

AMERICAN FRIENDS OF MAGEN DAVID	PC	CHARITABLE	20
ADOM			
352 SEVENTH AVENUE SUITE 400			
NEW YORK, NY 10001			
		•	

Tatal		FO 4F0
352 SEVENTH AVENUE SUITE 400 NEW YORK, NY 10001		

Total			50.450
IEW YORK, NY 10001			
52 SEVENTH AVENUE SUITE 400			1

NEW TORK, NT 10001		
Total	 	 50,450

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year AMERICAN FRIENDS OF NSWAS PC. CHARITABLE 400 229 NORTH CENTRAL AVENUE SUITE 401 GLANDALE, CA 91203

AMERICAN FRIENDS SERVICE COMMITTEE 1501 CHERRY STREET PHILADELPHIA, PA 191021403	PC	CHARITABLE	600
AMERICAN FRIENDS SERVICE COMMITTEE 1501 CHERRY STREET	PC	CHARITABLE	200

PHILADELPHIA, PA 191021403			
AMERICAN FRIENDS SERVICE COMMITTEE 1501 CHERRY STREET	PC	CHARITABLE	2
DUTI A DEL DUTA DA 101021402			

AMERICAN FRIENDS SERVICE	PC	CHARITABLE	200
COMMITTEE			
1501 CHERRY STREET			
PHILADELPHIA, PA 191021403			

Total		•	50.450
PHILADELPHIA, PA 191021403			
1501 CHERRY STREET			1

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year AMERICARES88 HAMILTON AVENUE PC CHARITABLE 200 STAMFORD, CT 06902 **ASHOKA** PC CHARITABLE 700

1700 NORTH MOORE STREET SUITE 2000 ARLINGTON, VA 22209			,,,,
BEACON INSTITUTE FOR RIVERS AND ESTUARIES 199 MAIN STREET	PC	CHARITABLE	2,400

BEACON, NY 12508

50,450

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient Foundation Purpose of grant or If recipient is an individual, Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year BRENNAN CENTER FOR JUSTICE PC CHARITABLE 200 120 BROADWAY SUITE 1750

NEW YORK, NY 102/1			
CENTER FOR CONSTITUTIONAL RIGHTS 666 BROADWAY 7TH FLOOR NEW YORK, NY 10012	PC	CHARITABLE	1,000
CHARITY WATCH 3450 NORTH LAKE SHORE DRIVE SUITE	PC	CHARITABLE	50

Total	 		50,450
CHARITY WATCH 3450 NORTH LAKE SHORE DRIVE SUITE 2802 CHICAGO, IL 60657	PC	CHARITABLE	50
NEW YORK, NY 10012			

За

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

200

2,800

CITY	HADVECT	DC.	CHARITARIE	
520	SS- IN- THE- SCHOOLS 8TH AVENUE 2ND FLOOR YORK, NY 10018	PC	CHARITABLE	

ITY HARVEST EAST 32ND STREET 5TH FLOOR EW YORK, NY 100165422	PC	CHARITABLE	
OALITION FOR THE HOMELESS	DC.	CHADITABLE	

NEW YORK, NY 100165422			
COALITION FOR THE HOMELESS 129 FULTON STREET	PC	CHARITABLE	
NEW YORK NY 10039			

NEW YORK, NY 100165422			
COALITION FOR THE HOMELESS 129 FULTON STREET NEW YORK, NY 10038	PC	CHARITABLE	

11217 TORR, 111 100105-122			
COALITION FOR THE HOMELESS 129 FULTON STREET NEW YORK, NY 10038	PC	CHARITABLE	100

129 FULTON STREET NEW YORK, NY 10038		CHANTADEL	100
Total	 		50,450

NEW YORK, NY 10038		
Total	 	 50,450

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year

DRUG POLICY ALLIANCE 131 WEST 33RD STREET 15TH FLOOR NEW YORK, NY 10001	PC	CHARITABLE	100
DZI FOUNDATION	PC	CHARITABLE	750

DZI FOUNDATION 565 SHERMAN STREET 7 RIDGEWAY, CO 81432	PC	CHARITABLE	750
ECONOMIC POLICY INSTITUTE	PC	CHARITABI F	200

RIDGEWAY, CO 81432			
ECONOMIC POLICY INSTITUTE 1225 EYE STREET NW SUITE 600 WASHINGTON, DC 20005	PC	CHARITABLE	200

ECONOMIC POLICY INSTITUTE 1225 EYE STREET NW SUITE 600 WASHINGTON, DC 20005	PC	CHARITABLE	200
Total	 		50,450

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient Foundation Purpose of grant or If recipient is an individual, Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year EDUCATIONAL FUND TO STOP GUN PC CHARITABLE 100 VIOLENCE 805 15TH STREET NW SUITE 502

WASHINGTON, DC 20005			
ELECTRONIC FRONTIER FOUNDATION 815 EDDY STREET SAN FRANCISCO, CA 94109	PC	CHARITABLE	750
ENVIRONMENTAL DEFENSE FUND 257 PARK AVENUE SOUTH	PC	CHARITABLE	1,800

NEW YORK, NY 10010

50,450

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount contribution show any relationship to status of any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year FOOD BANK FOR NEW YORK CITY PC CHARITABLE 2.800 39 BROADWAY 10TH FLOOR NEW YORK, NY 10006 EDIENDS OF THE NEW YORK CHARTTARIE 100

PHILHARMONIC DAVID GEFFEN HALL 10 LINCOLN CENTER PLAZA NEW YORK, NY 10023	PC	CHARITABLE	100
GLOBAL GIVING	PC	CHARITABLE	1,000

CENTER PLAZA NEW YORK, NY 10023			
GLOBAL GIVING	PC	CHARITABLE	1,00

WASHINGTON, DC 20005

Total .

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

179 BOYLSTON STREET BOSTON, MA 02130	-	CHARTABLE	100	
HIAS1300 SPRING STREET SUITE 500 SILVER SPRING, MD 20910	PC	CHARITABLE	200	l

DC

CHADITABLE

100

CDASSDOOTS INTERNATIONAL

BOSTON, MA 02130			
HIAS1300 SPRING STREET SUITE 500 SILVER SPRING, MD 20910	PC	CHARITABLE	200
INTERNATIONAL ACTIONPO BOX 15188 WASHINGTON, DC 20003	PC	CHARITABLE	200

				50.450
INTERNATIONAL ACTIONPO BOX 15188 WASHINGTON, DC 20003		PC	CHARITABLE	200
SILVER SPRING, MD 20910				

INTERNATIONAL ACTIONPO BOX 15188 WASHINGTON, DC 20003		PC	CHARITABLE	200
Total	50.450			

WASHINGTON, DC 20003		
Total		 50.450

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year JP HAITIAN RELIEF ORGANIZATION PC CHARITABLE 450

6464 SUNSET BOULEVARD 1140 HOLLYWOOD, CA 90028			
LAKESIDE PARTNERS OF WILMINGTON INC 811 MARTIN STREET	PC	CHARITABLE	400
WILMINGTON NO 20404			

LAKESIDE PARTNERS OF WILMINGTON INC 811 MARTIN STREET WILMINGTON, NC 28401	PC	CHARITABLE	400
MERCY SHIPSPO BOX 2020	PC	CHARITABLE	400

811 MARTIN STREET WILMINGTON, NC 28401			
MERCY SHIPSPO BOX 2020 GARDEN VALLEY, TX 75771	PC	CHARITABLE	400

MERCY SHIPSPO BOX 2020 GARDEN VALLEY, TX 75771	PC	CHARITABLE	400
Total	 		50,450

<b>-</b>	l		F-0
GARDEN VALLEY, TX 75771			
MERCI SHIPSPO BOX 2020	PC	CHARITABLE	

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient Foundation Purpose of grant or If recipient is an individual, Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year NATIONAL IMMIGRATION LAW CENTER PC CHARITABLE 300 3435 WILSHIRE BLVD SUITE 1600 LOS ANGELES, CA 90010

NATURAL RESOURCES DEFENSE COUNCIL 40 WEST 20TH STREET 11TH FLOOR NEW YORK, NY 10011	PC	CHARITABLE	2,100
NEW ISRAEL FUND 6 FAST 39TH STREET SUITE 301	PC	CHARITABLE	400

NEW YORK, NY 100160112

50,450 За

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business)

2.000

1,600

100

50,450

a Paid during the year			
OCEAN ALLIANCE32 HORTON STREET	PC	CHARITABLE	

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

SLOUCESTER, MA 01930			
DXFAM AMERICA 26 CAUSEWAY STREET 5TH FLOOR	PC	CHARITABLE	

or substantial contributor

226 CAUSEWAY STREET 5TH FLOOR BOSTON, MA 021142206	PC	CHARITABLE	
PARTNERS IN HEALTH	PC	CHARITABLE	

BOSTON, MA 021142206			
PARTNERS IN HEALTH 800 BOYLSTON STREET SUITE 300 BOSTON MA 02199	PC	CHARITABLE	

ARTNERS IN HEALTH	PC	CHARITABLE	
00 BOYLSTON STREET SUITE 300 OSTON, MA 02199			
031011,1111 02133			

00 BOYLSTON STREET SUITE 300 OSTON, MA 02199			
Total			

800 BOYLSTON STREET SUITE 300 BOSTON, MA 02199	
'	

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount contribution show any relationship to status of any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year PATHFINDER INTERNATIONAL PC CHARITABLE 2,000 9 GALEN STREET SUITE 217 WATERTOWN, MA 02472 PC DI ANNIED DADENTHOOD FEDERATION CHADITABLE 2 000

OF AMERICA 123 WILLIAM STREET 10TH FLOOR NEW YORK, NY 10038		GIANTABLE	2,000
PLOUGHSHARES FUND 1808 WEDEMEYER STREET SUITE 200 THE PRESIDIO OF SAN FRANCISCO SAN FRANCISCO, CA 94129	PC	CHARITABLE	1,200

Total .

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year QUEST YOUTH ORGANIZATION INC PC CHARITABLE 200

PO BOX 26724 BROOKLYN, NY 11202			
RIVERKEEPER20 SECOR ROAD OSSINING, NY 10562	PC	CHARITABLE	100
SEMPER FI FUND 825 COLLEGE BOULEVARD SUITE 102 PMB	PC	CHARITABLE	900

OSSINING, NY 10562	PC	CHARITABLE	10
SEMPER FI FUND 825 COLLEGE BOULEVARD SUITE 102 PMB 609	PC	CHARITABLE	90

50,450

OCEANSIDE, CA 92057

За

Recipient Foundation If recipient is an individual, Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business)

5,000

150

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

a Falu during the year			
SHARE FOUNDATION 2425 COLLEGE AVENUE BERKELEY, CA 94704	PC	CHARITABLE	

or substantial contributor

Daid during the year

3a

SHARE FOUNDATION PC CHARITABLE 2425 COLLEGE AVENUE BERKELEY, CA 94704

SOIL HAITI124 CHURCH ROAD PC CHARITABLE

SHERBURNE, NY 13460

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year SOUTHERN POVERTY LAW CENTER PC CHARITABLE 4.000

MONTGOMERY, AL 36104			
THE CARTER CENTER ONE COPENHILL 453 FREEDOM PARKWAY NE ATLANTA, GA 30307	PC	CHARITABLE	300

Total			E0 4E0
THE DOE FUND232 EAST 84TH STREET NEW YORK, NY 10028	PC	CHARITABLE	700
ONE COPENHILL 453 FREEDOM PARKWAY NE ATLANTA, GA 30307			

NE ATLANTA, GA 30307			
THE DOE FUND232 EAST 84TH STREET NEW YORK, NY 10028	PC	CHARITABLE	70

50,450 За

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business)

a Paid during the year			
THE SENTENCING PROJECT 1705 DESALES STREET NW 8TH FLOOR WASHINGTON, DC 20036	PC	CHARITABLE	

THE SMILE TRAIN 41 MADISON AVENUE 28TH FLOOR NEW YORK, NY 10010		PC	CHARITABLE	
	l .			

or substantial contributor

41 MADISON AVENUE 28TH FLOOR NEW YORK, NY 10010			
THE USOPO BOX 96860 WASHINGTON, DC 200777677	PC	CHARITABLE	

NEW YORK, NY 10010			
THE USOPO BOX 96860 WASHINGTON, DC 200777677	PC	CHARITABLE	

,			
THE USOPO BOX 96860 WASHINGTON, DC 200777677	PC	CHARITABLE	100
Total			50.450

300

200

'			
THE USOPO BOX 96860 WASHINGTON, DC 200777677	PC	CHARITABLE	10

Total	 	50,450

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year THE VET HUNTERS PROJECT PC CHARITABLE 900

PO BOX 3174 SOUTH EL MONTE, CA 91733			
TRUST WOMEN FOUNDATION PO BOX 3222	PC	CHARITABLE	2,000

WICHITA, KS 67201			
UNION OF CONCERNED SCIENTISTS TWO BRATTLE SQUARE SUITE 6	PC	CHARITABLE	

Total . За

WICHITA, K5 6/201			
UNION OF CONCERNED SCIENTISTS TWO BRATTLE SQUARE SUITE 6	PC	CHARITABLE	
CAMBRIDGE, MA 021383780			l

Wiening No 07201			
UNION OF CONCERNED SCIENTISTS TWO BRATTLE SQUARE SUITE 6 CAMBRIDGE, MA 021383780	PC	CHARITABLE	8

800

50,450

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient

or substantial contributor

Name and address (home or business)

Total 3a

a Paid during the year			
USA FOR UNHCR 1800 MASSACHUSETTS AVENUE NW SUITE 500 WASHINGTON, DC 20036	PC	CHARITABLE	200

50,450

efile GRAPHIC print - DO NOT P	ROCESS	As Filed D	ata -		D	LN: 93491319008458		
TY 2017 Accounting Fees Schedule								
Name: THE RMF FOUNDATION INC								
C/O RICHARD FRIEDBERG								
	EIN:	13-3797	799					
Accounting Fees Schedule								
Category	Amo	ount	Net Investn Income		Adjusted Net Income	Disbursements for Charitable Purposes		
ACCOUNTING FEES		3,059		0	0	3,059		

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN:	93491319008458			
TY 2017 Other Expenses Schedule							
Name:	Name: THE RMF FOUNDATION INC						
	C/O RICHARD FRIEDBERG						
EIN:	13-3797799						
Other Expenses Schedule							
Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes			
BANK FEES	196	0	0	196			

NYS FILING FEE

WORKMEN'S COMP

efile GRAPHIC print - DO NOT PROCE	SS As Filed Data	ata - DLN: 93491319008458					
TY 2017 Other Professional Fees Schedule							
Name: THE RMF FOUNDATION INC							
	C/O RICHARD FRIEDBERG						
E	<b>EIN:</b> 13-3797799						
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes			

1,206

PAYROLL SERVICES

efile GRAPHIC print - DO NOT PROCESS As Filed Data - DLN: 93491319008458								
TY 2017 Taxes Schedule								
Name:	THE RMF FO	UNDATION INC						
C/O RICHARD FRIEDBERG								
EIN:	13-3797799							
Category A	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes				
PAYROLL TAXES	1,406	0	0	1,406				