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DLN: 93491091003139

2017

OMB No 1545-0052

Return of Private Foundation

Form 990-PF

Department of the Treasury

Internal Revenue Service

or Section 4947(a)(1) Trust Treated as Private Foundation ▶ Do not enter social security numbers on this form as it may be made public.
 ▶ Information about Form 990-PF and its instructions is at www.irs.gov/form990pf.

Open to Public Inspection

| | | ndar year 2017, or tax year beginning 09-01-20 |)17 , ar | nd end | ding 08-31- | | |
|----------------|----------------|---|------------------------------------|----------------|--------------------------------------|---|-------------------------|
| | | indation MELBERG FOUNDATION | | | 13-7200887 | entification numbe | ır |
| Num | ber and | street (or P O box number if mail is not delivered to street address) | Room/suite | | | | <u>.</u> |
| | | NICK 1301 AVE OF AMERICAS | Noonly suice | | B Telephone nu (212) 297-0400 | mber (see instructio | ns) |
| | | , state or province, country, and ZIP or foreign postal code NY 10019 | • | | C If exemption | application is pendin | g, check here |
| G Ch | neck al | l that apply 🔲 Initial return 🔲 Initial return of a | former public charity | | D 1. Foreign or | ganizations, check he | ere 📘 |
| | | Final return Amended return | | | | ganizations meeting k here and attach co | |
| | | Address change Name change | | | | ındatıon status was i | · - |
| | , | pe of organization $lacksquare$ Section 501(c)(3) exempt private 4947(a)(1) nonexempt charitable trust \Box Other taxable | foundation e private foundation | | | n 507(b)(1)(A), chec | |
| | | tet value of all assets at end J Accounting method | Cash Accru | ıal | F If the founda | ition is in a 60-mont | h termination |
| of ' | year <i>(f</i> | rom Part II, col (c), \$ 11,366,576 | | | | n 507(b)(1)(B), chec | |
| Pa | rt I | Analysis of Revenue and Expenses (The total | (a) Revenue and | Τ | | | (d) Disbursements |
| | | of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions)) | expenses per books | (b) N | let investment income | (c) Adjusted net income | for charitable purposes |
| | 1 | Contributions, gifts, grants, etc., received (attach | 1 | | | | (cash basis only) |
| | - | schedule) | | | | | |
| | 2 | Check if the foundation is not required to attach | | | | | |
| | 3 | Sch B Interest on savings and temporary cash investments | 159 | 9 | 159 | | |
| | 4 | Dividends and interest from securities | 188,007 | 7 | 188,007 | | |
| | 5a | Gross rents | | | | | |
| | ь | Net rental income or (loss) | | | | | |
| ne | 6a | Net gain or (loss) from sale of assets not on line 10 | 520,557 | 7 | | | |
| Revenue | ь | Gross sales price for all assets on line 6a | | | | | |
| Re | 7 | Capital gain net income (from Part IV, line 2) | | | 520,557 | | |
| | 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) | -7,476 | | -7,476 | | |
| | 12 | Total. Add lines 1 through 11 | 701,247 | | 701,247 | | |
| | 13 | Compensation of officers, directors, trustees, etc | 126,000 | 0 | 92,400 | | 33,600 |
| _ | 14 | Other employee salaries and wages | | | | | |
| ses | 15 16a | Legal fees (attach schedule) | | | | | |
| Den Den | ь | Accounting fees (attach schedule) | 5,910 |) | 2,955 | | 2,955 |
| Expenses | c | Other professional fees (attach schedule) | 2,510 | + | _,-33 | | |
| llve | 17 | Interest | | + | | | |
| Administrative | 18 | Taxes (attach schedule) (see instructions) | 9 656 | 5 | 656 | | 0 |
| <u> </u> | 19 | Depreciation (attach schedule) and depletion | | | | | |
| Ē | 20 | Occupancy | | | | | |
| Ž | 21 | Travel, conferences, and meetings | | | | | |
| and | 22 | Printing and publications | | | | | |
| bü | 23 | Other expenses (attach schedule) | 8,025 | 5 | 180 | | 7,845 |
| Operating | 24 | Total operating and administrative expenses. | | | | | |
| <u>6</u> | | Add lines 13 through 23 | 140,591 | | 96,191 | | 44,400 |
| ں | 25 | Contributions, gifts, grants paid | 306,900 | P | | | 306,900 |
| | 26 | Total expenses and disbursements. Add lines 24 and 25 | 447,491 | L | 96,191 | | 351,300 |
| | 27 | Subtract line 26 from line 12 | 252 | _ | | | |
| | a | Excess of revenue over expenses and disbursements | 253,756 | | | | |
| | ь | Net investment income (if negative, enter -0-) | | | 605,056 | | |
| | С | Adjusted net income(If negative, enter -0-) | | 1 | | | |
| or | Paper | work Reduction Act Notice, see instructions. | | C | at No 11289X | (For | m 990-PF (2017) |

Page 2

11,366,576

9,094,102

9,094,102

9,094,102

9,094,102

2

3

4

5

6

8,840,346

9,094,102

9.094.102

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0

253,756

8,840,346

8,840,346

8,840,346

8,840,346

0

| | _ | . , | | | | |
|-------|-----|--|-----------|------------|-----------|-----|
| | 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 ▶ | | | | |
| S. | 8 | Inventories for sale or use | | | | |
| ssets | 9 | Prepaid expenses and deferred charges | | | | |
| As | 10a | Investments—U S and state government obligations (attach schedule) | | | | |
| | ь | Investments—corporate stock (attach schedule) | 6,829,429 | چ ا | 7,264,739 | 9,5 |
| | 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 > _ Total assets (to be completed by all filers—see the 16

instructions Also, see page 1, item I)

Other liabilities (describe -_

Unrestricted . . .

Temporarily restricted Permanently restricted . .

and complete lines 27 through 31.

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

Add lines 1, 2, and 3

Decreases not included in line 2 (itemize) ▶

Other increases not included in line 2 (itemize)

Enter amount from Part I, line 27a

Accounts payable and accrued expenses

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 ▶

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) .

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

Analysis of Changes in Net Assets or Fund Balances

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

Mortgages and other notes payable (attach schedule).

Total liabilities(add lines 17 through 22)

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17

18

19

20

21

22

23

24

25

26

28

29 Net 30

31

Part III

2

3

4

Liabilities

Fund Balances

5

Assets 27

| | (a) e the kınd(s) of property sold (e g , re arehouse, or common stock, 200 shs | (b) How acquired P—Purchase D—Donation | (c) Date acquired (mo , day, yr) | (d) Date sold (mo , day, yr) | |
|---|---|--|------------------------------------|--|---|
| 1 a PUBLICLY TRADED SEC | URITIES | | | | |
| b CAPITAL GAINS DIVID | ENDS | | Р | | |
| c | | | | | |
| d | | | | | |
| e | | | | | |
| (e) Gross sales price | (f) Depreciation allowed (or allowable) | Cost or | (g) other basis ense of sale | Gain d | h) r (loss)) minus (q) |
| a 2,6 | 554,856 | F100 511F | 2,142,742 | (0) p.s. (. | 512,114 |
| | 8,443 | | | | 8,443 |
| c | -7.11- | | | | -, |
| d | | | | | |
| e | | | | | |
| | ets showing gain in column (h) and ow | road by the foundation | on 12/31/69 | | 1) |
| (i) F M V as of 12/31/6 | (j) Adjusted basis | Excess | (k) s of col (ı) | Gains (Col (col (k), but not | l) h) gain minus less than -0-) or |
| | as of 12/31/69 | over col | l (j), if any | Losses (III | om col (h)) |
| a | | | | | 512,114 |
| b | | | | | 8,443 |
| <u> </u> | | | | | |
| d e | | | | | |
| 3 Net short-term capita | ne or (net capital loss) I gain or (loss) as defined in sections Part I, line 8, column (c) (see instruct | | Part I, line 7 | 3 | 520,557 |
| _ | Under Section 4940(e) for Reprivate foundations subject to the se | | | | |
| If section 4940(d)(2) applies, Was the foundation liable for | , | ble amount of any year | r in the base period? | · | es 🗸 No |
| | amount in each column for each year, | see instructions before | making any entries | | |
| (a) Base period years Calendar year (or tax year beginning in) | (b) Adjusted qualifying distributions | (c) Net value of noncharitab | ole-use assets | (d) Distribution rat (col (b) divided by c | |
| 2016 | 317,260 | | 9,772,349 | | 0 032465 |
| 2015 | 625,809 | | 9,740,458 | | 0 064248 |
| 2014 | 451,611 | | 10,277,012 | | 0 043944 |
| 2013 | 341,015 | | 9,058,303 | | 0 037647 |
| 2012 | 361,038 | | 7,183,404 | | 0 050260 |
| 2 Total of line 1, column | (d) | | 2 | | 0 228564 |
| number of years the fo | tio for the 5-year base period—divide undation has been in existence if less noncharitable-use assets for 2017 fror | than 5 years | , or by the | | 0 045713 10,793,811 |
| 5 Multiply line 4 by line 3 | | | 5 | | 493,417 |
| 6 Enter 1% of net investi | ment income (1% of Part I, line 27b) | | 6 | | 6,051 |
| 7 Add lines 5 and 6 . | | | 7 | | 499,468 |
| | itions from Part XII, line 4 , ireater than line 7, check the box in P | | | g a 1% tax rate Se | 351,300 e the Part VI |
| instructions | | | | | |

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

7b

| Form 990-PF (2 | 17) |
|----------------|--|
| | Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors |

| Compensation of their employees paid more than \$50,000 for professional services. Total number of other employees paid more than \$50,000 for professional services. Total number of other responses paid more than \$50,000 for professional services. Total number of other services and address of each person paid more than \$50,000 for professional services. Total number of other responses paid more than \$50,000 for professional services. Total number of other services and address of each person paid more than \$50,000 for professional services. Total number of other services and address of each person paid more than \$50,000 for professional services. Total number of other services and address of each person paid more than \$50,000 for professional services. Total number of other services are prof | 1 List all officers, directors, truste | es, foundation managers a | nd their compensation | · · · · · · · · · · · · · · · · · · · | ı |
|--|---|--|--|--|---------------------------------------|
| Institution | (a) Name and address | hours per week | not paid, enter | Contributions to employee benefit plans and deferred | Expense account, (e) other allowances |
| Compensation of five highest-paid employees (other than those included on line 1 – see instructions). If none, enter "NONE." Name and accines of each employee paid more than 550,000 for professional services (accine that the plants and accines of each employee paid more than 550,000 for professional services (accine that the plants and accines of each employee paid flower professional services (accine that the plants and accines of each employee paid flower professional services (accine that the plants and accines of each employee paid flower professional services (accine that the plants and accine to the employee paid flower professional services (accine that the plants and accine to the employee paid more than 550,000 for professional services (accine that the plants and accine to the employees paid more than 550,000 for professional services (accine that the plants and accine to the person paid more than 550,000 for professional services (accine that the plants and accine to the person paid more than 550,000 for professional services (accine that the plants and accine to the person paid more than 550,000 for professional services (accine that the plants and accine to the person paid more than 550,000 for professional services (accine that the person paid more than 550,000 for professional services (accine that the person paid more than 550,000 for professional services (accine that the person paid more than 550,000 for professional services (accine that the person paid more than 550,000 for professional services (accine that the person paid to the person paid more than 550,000 for professional services (accine that the person paid to the person paid to the person paid more than 550,000 for professional services (accine that the person paid to the | NORMAN HIMELBERG CONHREZNICK 1301 AVENUE OF THE AMERICAS 10TH FL NEW YORK, NY 10019 | | 117,600 | ' | C |
| (c) Compensation Total number of other employees paid over \$50,000. Total number of other employees paid over \$50,000 for professional services (see instructions). If none, enter "NONE". (a) Issne and address of each person baid move than \$50,000 (b) Type of service (c) Compensation (d) Compensation (e) Compensation (e) Compensation Fixed number of other employees paid over \$50,000 for professional services. (e) Compensation (f) Total number of other employees paid over \$50,000 for professional services (see instructions). If none, enter "NONE". (g) Issne and address of each person baid move than \$50,000 (g) Type of service (h) Type of service (g) Compensation (g) Compensation (g) Compensation (g) Compensation (g) Compensation (g) Type of service (h) Type of service (h) Type of service (g) Compensation (h) Type of service (h) Type of ser | RACHAEL S BROOKS CONHREZNICK 1301 AVENUE OF THE AMERICAS 10TH FL | | 8,400 | 0 | C |
| Name and address of actin employee paid more than \$50,000 (b) devoted to position (c) Compensation (d) compensation (d) compensation (e) other allowances (d) compensation (d) compensation (e) other allowances (d) compensation (| 2 Compensation of five highest-pa | id employees (other than t | hose included on line 1 | —see instructions). If no | ne, enter "NONE." |
| 3 Five highest-paid independent contractors for professional services (see instructions). If none, enter "NONE". (a) Name and address of each person paid more than \$50,000 (b) Type of service (c) Compensation NONE | Name and address of each employee pa | aid hours per week | (c) Compensation | employee benefit plans and deferred | |
| Similar of the highest-paid independent contractors for professional services (see instructions). If none, enter "NONE". (a) Name and address of each person paid more than \$50,000 (b) Type of service (c) Compensation | NONE | | | | |
| Similar of the highest-paid independent contractors for professional services (see instructions). If none, enter "NONE". (a) Name and address of each person paid more than \$50,000 (b) Type of service (c) Compensation | | | | | |
| 3 Five highest-paid independent contractors for professional services (see instructions). If none, enter "NONE". (a) Name and address of each person paid more than \$50,000 (b) Type of service (c) Compensation NONE Total number of others receiving over \$50,000 for professional services | Total number of other employees paid ov | er \$50,000 | | | |
| Total number of others receiving over \$50,000 for professional services. Part IX-A Summary of Direct Charitable Activities List the foundation's four largest direct charitable activities of programations and other beneficiaries served, conferences convened, research paper's produced, etc. 2 3 4 Part IX-B Summary of Program-Related Investments (see instructions) Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 Amount All other program-related investments See instructions 3 All other program-related investments See instructions | | | | | <u> </u> |
| Part IX-A Summary of Direct Charitable Activities Let the foundator's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc. 2 3 4 Part IX-B Summary of Program-Related Investments (see instructions) Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 Amount All other program-related investments. See instructions 3 All other program-related investments. See instructions | | n paid more than \$50,000 | (b) Typ | e of service | (c) Compensation |
| Part IX-A Summary of Direct Charitable Activities Ust the foundation's four largest direct charitable activities during the tax year Include relevant statistical information such as the number of gragnizations and other beneficianes served, conferences convened, research papers produced, etc 1 2 2 3 4 4 Part IX-B Summary of Program-Related Investments (see instructions) Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 Amount 1 All other program-related investments See instructions 3 All other program-related investments See instructions 3 All other program-related investments See instructions | NONE | | _ | | |
| Part IX-A Summary of Direct Charitable Activities List the foundation's four largest direct charitable activities during the tax year Include relevant statistical information such as the number of graphications and other beneficiaries served, conferences convened, research papers produced, etc 1 2 3 4 4 Part IX-B Summary of Program-Related Investments (see instructions) Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 Amount 1 All other program-related investments See instructions 3 All other program-related investments See instructions 3 All other program-related investments See instructions | | | | | |
| Part IX-A Summary of Direct Charitable Activities List the foundation's four largest direct charitable activities during the tax year Include relevant statistical information such as the number of graphications and other beneficiaries served, conferences convened, research papers produced, etc 1 2 3 4 4 Part IX-B Summary of Program-Related Investments (see instructions) Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 Amount 1 All other program-related investments See instructions 3 All other program-related investments See instructions 3 All other program-related investments See instructions | | | 1 | | |
| Part IX-A Summary of Direct Charitable Activities List the foundation's four largest direct charitable activities during the tax year Include relevant statistical information such as the number of graphications and other beneficiaries served, conferences convened, research papers produced, etc 1 2 3 4 4 Part IX-B Summary of Program-Related Investments (see instructions) Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 Amount 1 All other program-related investments See instructions 3 All other program-related investments See instructions 3 All other program-related investments See instructions | | | | | |
| Part IX-A Summary of Direct Charitable Activities List the foundation's four largest direct charitable activities during the tax year Include relevant statistical information such as the number of graphications and other beneficiaries served, conferences convened, research papers produced, etc 1 2 3 4 4 Part IX-B Summary of Program-Related Investments (see instructions) Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 Amount 1 All other program-related investments See instructions 3 All other program-related investments See instructions 3 All other program-related investments See instructions | | | | | |
| Part IX-A Summary of Direct Charitable Activities List the foundation's four largest direct charitable activities during the tax year Include relevant statistical information such as the number of graphications and other beneficiaries served, conferences convened, research papers produced, etc 1 2 3 4 4 Part IX-B Summary of Program-Related Investments (see instructions) Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 Amount 1 All other program-related investments See instructions 3 All other program-related investments See instructions 3 All other program-related investments See instructions | | | 4 | | |
| Part IX-A Summary of Direct Charitable Activities List the foundation's four largest direct charitable activities during the tax year Include relevant statistical information such as the number of graphications and other beneficiaries served, conferences convened, research papers produced, etc 1 2 3 4 4 Part IX-B Summary of Program-Related Investments (see instructions) Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 Amount 1 All other program-related investments See instructions 3 All other program-related investments See instructions 3 All other program-related investments See instructions | | | | | |
| Part IX-A Summary of Direct Charitable Activities List the foundation's four largest direct charitable activities during the tax year Include relevant statistical information such as the number of graphications and other beneficiaries served, conferences convened, research papers produced, etc 1 2 3 4 4 Part IX-B Summary of Program-Related Investments (see instructions) Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 Amount 1 All other program-related investments See instructions 3 All other program-related investments See instructions 3 All other program-related investments See instructions | | | 1 | | |
| Expenses Expenses Expenses | Total number of others receiving over \$50 | 0,000 for professional services | 5 | | (|
| Part IX-B Summary of Program-Related Investments (see instructions) Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 All other program-related investments See instructions 3 All other program-related investments See instructions 3 | | | | | |
| 2 3 4 Part IX-B Summary of Program-Related Investments (see Instructions) Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 All other program-related investments See instructions 3 | List the foundation's four largest direct charitable organizations and other beneficiaries served, con | e activities during the tax year Inc offerences convened, research pape | lude relevant statistical inforn rs produced, etc | nation such as the number of | Expenses |
| Part IX-B Summary of Program-Related Investments (see instructions) Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 Amount All other program-related investments See instructions 3 | 1 | , , , | , | | |
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| Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 Amount All other program-related investments See instructions 3 | 3 | | | | |
| Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 Amount All other program-related investments See instructions 3 | | | | | |
| Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 Amount All other program-related investments See instructions 3 | 4 | | | | |
| Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 Amount All other program-related investments See instructions 3 | | | | | |
| All other program-related investments See instructions 3 | 100 100 | | <u> </u> | | |
| 3 | | estments made by the foundation o | during the tax year on lines 1 | and 2 | Amount |
| 3 | | | | | |
| 3 | 2 | | | | |
| | · - | See instructions | | | |
| Total. Add lines 1 through 3 | 3 | | | | |
| 1910 B. D. | Total Add lines 1 through 3 | | | | |

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

1a

1b

2

3a 3h

4

5

351,300

351.300

351.300

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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

income Enter 1% of Part I. line 27b (see instructions).

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.

Amounts set aside for specific charitable projects that satisfy the

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

2

3

4

5

527,590

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|--------------------|----------------------|-------------|---------|--|--|--|--|
| Part XIII | Undistributed Income | (see instru | ctions) | | | | |
| | | | | | | | |

b Total for prior years

a From 2012.
b From 2013. . . .
c From 2014.
d From 2015.
e From 2016.

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

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

5 Excess distributions carryover applied to 2017 (If an amount appears in column (d), the

6 Enter the net total of each column as

f Undistributed income for 2017 Subtract lines 4d and 5 from line 1 This amount must

9 Excess distributions carryover to 2018.

10 Analysis of line 9

a Excess from 2013. . . .
 b Excess from 2014. . . .
 c Excess from 2015. . . .
 d Excess from 2016. . . .
 e Excess from 2017. . . .

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

Subtract lines 7 and 8 from line 6a

indicated below:

same amount must be shown in column (a))

(a)

Corpus

0

0

(b)

Years prior to 2016

(c)

2016

441.583

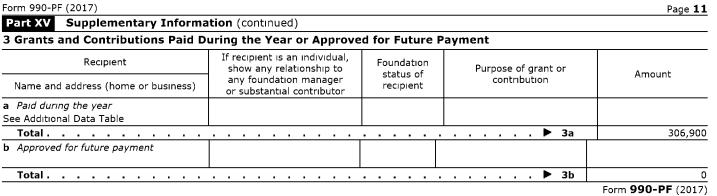
351,300

90.283

527,590

(d)

2017



| ter gross amounts unless otherwise indicated | Unrelated business income | | Excluded by section | 512, 513, or 514 | (e) Related or exempt |
|---|--|---------------|------------------------------------|----------------------|--|
| Program service revenue | (a) Business code | (b) Amount | (c) Exclusion code | (d) Amount | function income (See instructions) |
| a | | | | | |
| b | | | | | |
| c | | | | | |
| e | | | | | |
| f | | | | | |
| g Fees and contracts from government agencies Membership dues and assessments | | | | | |
| Interest on savings and temporary cash | | | | | |
| investments | | | 14 | 159 188,007 | |
| Net rental income or (loss) from real estate | | | | 332,733. | |
| a Debt-financed property | | | | | |
| b Not debt-financed property | | | | | |
| Other investment income | | | | | |
| Gain or (loss) from sales of assets other than | | | | | |
| Inventory | | | 18 | 520,557 | _ |
| Gross profit or (loss) from sales of inventory | | | | | |
| Other revenue | | | | | |
| a FIDELITY b | | | 01 | -7,476 | |
| c | | | | | |
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| d | | | | | |
| d e | | | | | |
| de Subtotal Add columns (b), (d), and (e) | | C | | 701,247 3 | |
| de Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calcu | lations) | | 1 | 701,247 3 | |
| d | lations) ie Accomplisi | nment of Exem | pt Purposes | 3 | |
| de Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculart XVI-B Relationship of Activities to the | lations) le Accomplisi income is report | nment of Exem | pt Purposes f Part XVI-A contribu | 3ited importantly to | |
| d | lations) le Accomplisi income is report | nment of Exem | pt Purposes f Part XVI-A contribu | 3ited importantly to | |
| d | lations) le Accomplisi income is report | nment of Exem | pt Purposes f Part XVI-A contribu | 3ited importantly to | |
| d | lations) le Accomplisi income is report | nment of Exem | pt Purposes f Part XVI-A contribu | 3ited importantly to | |
| d | lations) le Accomplisi income is report | nment of Exem | pt Purposes f Part XVI-A contribu | 3ited importantly to | |
| d | lations) le Accomplisi income is report | nment of Exem | pt Purposes f Part XVI-A contribu | 3ited importantly to | |
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| d | lations) le Accomplisi income is report | nment of Exem | pt Purposes f Part XVI-A contribu | 3ited importantly to | |
| d | lations) le Accomplisi income is report | nment of Exem | pt Purposes f Part XVI-A contribu | 3ited importantly to | |
| d | lations) le Accomplisi income is report | nment of Exem | pt Purposes f Part XVI-A contribu | 3ited importantly to | |
| d | lations) le Accomplisi income is report | nment of Exem | pt Purposes f Part XVI-A contribu | 3ited importantly to | |
| d | lations) le Accomplisi income is report | nment of Exem | pt Purposes f Part XVI-A contribu | 3ited importantly to | |
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| d | lations) le Accomplisi income is report | nment of Exem | pt Purposes f Part XVI-A contribu | 3ited importantly to | |
| d | lations) le Accomplisi income is report | nment of Exem | pt Purposes f Part XVI-A contribu | 3ited importantly to | 701,247 |

| orm 990- | PF (2017) | | | | | | Pa | ge 13 |
|-----------------------|---|---------------------|---|-------------|--|----------------|--------|--------------|
| Part X | Information Re Exempt Organi | | fers To and Transact | ions and I | Relationships With Noncha | ritable | | |
| | e organization directly or in the Code (other than section | | | | rganization described in section 50 political organizations? | 1 | Yes | No |
| a Transf | ers from the reporting foun | ndation to a noncha | ırıtable exempt organizatı | on of | | | | |
| (1) C | ash | | | | | 1a(1) | | No |
| (2) 0 | ther assets | | | | | 1a(2) | | No |
| | transactions | | | | | | | |
| | ales of assets to a nonchar | | | | | 1b(1) | | No |
| | urchases of assets from a r | | | | | 1b(2) | | No |
| ٠, | ental of facilities, equipmen | • | | | | 1b(3) 1b(4) | | No |
| ٠, | eimbursement arrangemer oans or loan quarantees. | | | | | 1b(4) | | No No |
| ` ' | rformance of services or m | | | | | 1b(5) | | No |
| ٠ | g of facilities, equipment, r | | = | | | 1c | | No |
| | | | | | should always show the fair marke | | | 110 |
| in any (a) Line No | | | column (a) the value of t aritable exempt organization | | ther assets, or services received cription of transfers, transactions, and s | narıng arra | ngemer | nts |
| | | | · • | | · · · · · · · · · · · · · · · · · · · | | _ | |
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| describ | ," complete the following s | Code (other than | section 501(c)(3)) or in s | ection 527? | | Yes | ✓ | No |
| | (a) Name of organization | UII | (b) Type of organiz | uon | (c) Description of rela | icioriship | | |
| | | | | | | | | |
| | | | | | | | | |
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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 Sign May the IRS discuss this return with the preparer shown 2019-03-28 Here Signature of officer or trustee Date Title (see instr)? 🗹 Yes 🗆 No PTIN Print/Type preparer's name Preparer's Signature Date Check if self-P00851654 employed ▶ □ THOMAS LANNING 2019-03-28 Paid

Preparer Firm's name ▶ COHNREZNICK LLP Firm's EIN ▶22-1478099 **Use Only** Firm's address ▶ 1301 AVENUE OF THE AMERICAS

NEW YORK, NY 10019

Phone no (212) 297-0400

Form **990-PF** (2017)

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 AMERICAN COMMITTEE FOR THE PC AN UNRESTRICTED GRANT TO 12,000 WEIZMANN INSTITUTE OF SCIENCE INC FURTHER THE DONEE'S EXEMPT 633 THIRD AVENUE 20TH FL PURPOSE NEW YORK, NY 10017

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

| AMERICAN FRIENDS OF MAGEN DAVID ADOM 352 SEVENTH AVENUE SUITE 400 NEW YORK, NY 10001 | PC | AN UNRESTRICTED GRANT TO FURTHER THE DONEE'S EXEMPT PURPOSE | 75,000 |
|---|--------------|---|--------|
| AMERICAN RED CROSS 431 18TH STREET WASHINGTON, DC 20006 | PC | AN UNRESTRICTED GRANT TO FURTHER THE DONEE'S EXEMPT PURPOSE | 100 |
| | <u> </u> | | |

Total . 3a 306,900

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 AMERICAN SOCIETY OF YAD VASHEM PC AN UNRESTRICTED GRANT TO 3,000 500 5TH AVE FL 42 FURTHER THE DONEE'S EXEMPT NEW YORK, NY 10110 **PURPOSE**

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

| AMERICAN TECHNION SOCIETY 55 EAST 59TH ST NEW YORK, NY 10022 | PC | AN UNRESTRICTED GRANT TO FURTHER THE DONEE'S EXEMPT PURPOSE | 2,500 |
|--|----|---|-------|
| AMERICAN VET DOGS 71 SCHULMAN VESLAK RD | PC | AN UNRESTRICTED GRANT TO FURTHER THE DONEE'S EXEMPT | 100 |

| NEW TORK, NT 10022 | | PURPUSE | |
|---|----|---|---------|
| AMERICAN VET DOGS 71 SCHULMAN VESLAK RD EAST HADDAM, CT 064231207 | PC | AN UNRESTRICTED GRANT TO FURTHER THE DONEE'S EXEMPT PURPOSE | 100 |
| Total | | | 306,900 |

3a

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient Foundation Purpose of grant or If recipient is an individual, Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year BIRTHRIGHT ISRAEL FOUNDATION PC AN UNRESTRICTED GRANT TO 20,000 PO BOX 5892 FURTHER THE DONEE'S EXEMPT HICKSVILLE, NY 11801 PURPOSE BOY SCOUTS OF AMERICA DC AN LINDESTRUCTED CRANT TO 200

| 571 HOLT AVE MANCHESTER, NH 03109 | - | FURTHER THE DONEE'S EXEMPT PURPOSE | 255 |
|--|----|---|-----|
| CENTRAL PARK CONSERVANCY 14 EAST 60TH STREET NEW YORK NY 10022 | PC | AN UNRESTRICTED GRANT TO FURTHER THE DONEE'S EXEMPT | 500 |

306,900

| MANCHESTER, NH 03109 | | PURPOSE | |
|---|----|---|----|
| CENTRAL PARK CONSERVANCY 14 EAST 60TH STREET NEW YORK, NY 10022 | PC | AN UNRESTRICTED GRANT TO FURTHER THE DONEE'S EXEMPT PURPOSE | 50 |

Total .

| Form 990PF Part XV Line 3 - Grant Recipient | If recipient is an individual, | Foundation | Purpose of grant or | Amount |
|--|--|------------------------|---|--------|
| Name and address (home or business) | show any relationship to any foundation manager or substantial contributor | status of recipient | contribution | |
| a Paid during the year | | | | |
| CHAI LIFELINE151 W 30TH ST THIRD FL NEW YORK, NY 10001 | | PC | AN UNRESTRICTED GRANT TO FURTHER THE DONEE'S EXEMPT PURPOSE | 200 |
| CHILDRENS VILLAGE OF JERUSALEM INC 15 BEEKMAN ST NEW YORK, NY 10038 | | PC | AN UNRESTRICTED GRANT TO FURTHER THE DONEE'S EXEMPT PURPOSE | 200 |

| CHILDRENS VILLAGE OF JERUSALEM INC 15 BEEKMAN ST NEW YORK, NY 10038 | PC | AN UNRESTRICTED GRANT TO FURTHER THE DONEE'S EXEMPT PURPOSE | 200 |
|--|----|---|-----|
| COLEL CHABAD806 EASTERN PARKWAY BROOKLYN, NY 11213 | PC | AN UNRESTRICTED GRANT TO FURTHER THE DONEE'S EXEMPT PURPOSE | 200 |

| NEW YORK, NY 10038 | | | |
|---|------|---|---------|
| COLEL CHABAD806 EASTERN PARKWAY BROOKLYN, NY 11213 | | AN UNRESTRICTED GRANT TO FURTHER THE DONEE'S EXEMPT PURPOSE | 20 |
| Total | | | 306,900 |

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 DANA-FARBER CANCER INSTITUTE PC AN UNRESTRICTED GRANT TO 1,000 **450 BROOKLINE AVENUE** FURTHER THE DONEE'S EXEMPT **PURPOSE** BOSTON, MA 02115

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

| , , | | | |
|--|----|---|-------|
| DOCTORS WITHOUT BORDERS 333 SEVENTH AVE 2ND FLOOR NEW YORK, NY 10001 | PC | AN UNRESTRICTED GRANT TO FURTHER THE DONEE'S EXEMPT PURPOSE | 3,000 |
| DOROT INCPO BOX 5151 | PC | AN UNRESTRICTED GRANT TO | 200 |

| NEW YORK, NY 10001 | | PURPOSE | I |
|--|----|---|----|
| DOROT INCPO BOX 5151 LOUISVILLE, KY 402550151 | PC | AN UNRESTRICTED GRANT TO FURTHER THE DONEE'S EXEMPT PURPOSE | 20 |

| PURPOSE |
|---------|
|---------|

| OUISVILLE, KY 402550151 | | FURTHER THE DONEE'S EXEMPT PURPOSE | |
|-------------------------|--|------------------------------------|--|

| | | PURPOSE | |
|---|--|---------|---------|
| T | | | 206.000 |

| | PURPOSE | |
|-------|---------|---------|
| Total | | 306,900 |

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Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year FRIENDS OF YAD SARAH PC AN UNRESTRICTED GRANT TO 9.000 445 PARK AVENUE SUTE 1702 FURTHER THE DONEE'S EXEMPT NEW YORK, NY 10022 **PURPOSE**

| GUIDE DOGS FOR THE BLIND INC PO BOX 151200 SAN RAFAEL, CA 94915 | PC | AN UNRESTRICTED GRANT TO FURTHER THE DONEE'S EXEMPT PURPOSE | 100 |
|---|----|---|--------|
| HADASSAH HOSPITAL 50 WEST 58TH STREET NEW YORK, NY 10019 | PC | AN UNRESTRICTED GRANT TO FURTHER THE DONEE'S EXEMPT PURPOSE | 12,000 |

3a

| NEW YORK, NY 10019 | | PURPOSE | 306,900 |
|--|----|---|---------|
| | | | |
| HADASSAH HOSPITAL 50 WEST 58TH STREET | PC | AN UNRESTRICTED GRANT TO FURTHER THE DONEE'S EXEMPT | 12,000 |

| Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment | | | | |
|--|--|--------------------------------------|---|--------|
| Recipient | If recipient is an individual, show any relationship to any foundation manager or substantial contributor | Foundation status of recipient | Purpose of grant or contribution | Amount |
| Name and address (home or business) | | | | |
| a Paid during the year | | | | |
| HIAS US1300 SPRING STREET SILVER SPRING, MD 20910 | | PC | AN UNRESTRICTED GRANT TO FURTHER THE DONEE'S EXEMPT PURPOSE | 5,000 |
| HILLEL THE FOUNDATION FOR JEWISH CAMPUS LIFE 800 8TH ST NW WASHINGTON DC 20001 | | PC | AN UNRESTRICTED GRANT TO FURTHER THE DONEE'S EXEMPT PURPOSE | 5,000 |

| HILLEL THE FOUNDATION FOR JEWISH CAMPUS LIFE 800 8TH ST NW WASHINGTON, DC 20001 | PC | AN UNRESTRICTED GRANT TO FURTHER THE DONEE'S EXEMPT PURPOSE | 5,000 |
|--|----|---|-------|
| ISRAEL CHILDRENS CANCER FOUNDATION 141 WASHINGTON AVENUE LAWRENCE, NY 115590000 | PC | AN UNRESTRICTED GRANT TO FURTHER THE DONEE'S EXEMPT PURPOSE | 300 |

За

306,900

Recipient Purpose of grant or If recipient is an individual, Foundation 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 JARRETTSVILLE PUBLIC LIBRARY PC AN UNRESTRICTED GRANT TO 8.500 3722 NORRISVILLE RD FURTHER THE DONEE'S EXEMPT INDRETTOVILLE MD 21004 DUDDAGE

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

| JARRETTSVILLE, MD 21064 | | PURPUSE | |
|--|----|---|--------|
| JOHN HOPKINS CHILDRENS CENTER 500 SEVENTH AVENUE SOUTH 4TH FLOOR STPETERSBURG, FL 33701 | PC | AN UNRESTRICTED GRANT TO FURTHER THE DONEE'S EXEMPT PURPOSE | 10,000 |
| MAKE-A-WISH FOUNDATION | PC | AN UNRESTRICTED GRANT TO | 1,200 |

| FLOOR STPETERSBURG, FL 33701 | | PURPOSE | |
|--|----|---|-------|
| MAKE-A-WISH FOUNDATION 4742 N 24TH STREET SUITE 400 PHOENIX A7 85016 | PC | AN UNRESTRICTED GRANT TO FURTHER THE DONEE'S EXEMPT | 1,200 |

| STPETERSBURG, FL 33701 | | TON OSE | |
|--|----|---|-----|
| MAKE-A-WISH FOUNDATION 4742 N 24TH STREET SUITE 400 PHOENIX.AZ 85016 | PC | AN UNRESTRICTED GRANT TO FURTHER THE DONEE'S EXEMPT PURPOSE | 1,2 |

| T | | _ | 205 000 |
|-----------------------------|------|----------------------------|---------|
| HOENIX, AZ 85016 | | PURPOSE | |
| 742 N 24TH STREET SUITE 400 | ' - | FURTHER THE DONEE'S EXEMPT | 1,200 |
| IAKE-A-WISH FOUNDATION I | I DC | I AN UNRESTRICTED GRANT TO | 1,200 |

| | | | 225 222 |
|------------------------------|--|----------------------------|---------|
| PHOENIX, AZ 85016 | | PURPOSE | I |
| 4/42 N 241H STREET SUITE 400 | | FURTHER THE DONEE'S EXEMPT | ı |

| PHOENIX, AZ 85016 | | PURPOSE | |
|-------------------|------|---------|---------|
| Total | | | 306,900 |

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 MUSEUM OF JEWISH HERITAGE PC. AN UNRESTRICTED GRANT TO 3,500 2929 RICHMOND ROAD FURTHER THE DONEE'S EXEMPT BEACHWOOD, OH 44122 PURPOSE

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

| NATIONAL JEWISH OUTREACH PROGRAM 989 SIXTH AVENUE 10TH FL NEW YORK, NY 10018 | PC | AN UNRESTRICTED GRANT TO FURTHER THE DONEE'S EXEMPT PURPOSE | 1,000 |
|---|----|---|-------|
| NATIONAL PARK FOUNDATION 1110 VERMONT AVE NW SUITE 200 | PC | AN UNRESTRICTED GRANT TO FURTHER THE DONEE'S EXEMPT | 500 |

| 989 SIXTH AVENUE 10TH FL NEW YORK, NY 10018 | | PURPOSE | |
|---|----|---|----|
| NATIONAL PARK FOUNDATION 1110 VERMONT AVE NW SUITE 200 WASHINGTON. DC 20005 | PC | AN UNRESTRICTED GRANT TO FURTHER THE DONEE'S EXEMPT PURPOSE | 50 |

306,900

| Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment | | | | |
|---|---|-------------------------|---|--------|
| Recipient | If recipient is an individual, show any relationship to | Foundation status of | Purpose of grant or contribution | Amount |
| Name and address (home or business) | any foundation manager or substantial contributor | recipient | | |
| a Paid during the year | | | | |
| NEW YORK PUBLIC LIBRARY FIFTH AVENUE AND 42ND STREET NEW YORK, NY 10018 | | PC | AN UNRESTRICTED GRANT TO FURTHER THE DONEE'S EXEMPT PURPOSE | 500 |
| NEW YORK UNIVERSITY SCHOOL OF MEDICINE 8625 ANDREW CARNEGIE BLVD CHARLOTTE, NC 28262 | | PC | AN UNRESTRICTED GRANT TO FURTHER THE DONEE'S EXEMPT PURPOSE | 75 |
| NEW YORK UNIVERSITY STERN OF SCHOOL BUSINESS C/O KAUFMAN MGMT CTR-44 WEST 4TH ST NEW YORK, NY 10012 | | PC | AN UNRESTRICTED GRANT TO FURTHER THE DONEE'S EXEMPT PURPOSE | 5,000 |

| MEDICINE 8625 ANDREW CARNEGIE BLVD CHARLOTTE, NC 28262 | | FURTHER THE DONEE'S EXEMPT PURPOSE | |
|---|----|---|-------|
| NEW YORK UNIVERSITY STERN OF SCHOOL BUSINESS C/O KAUFMAN MGMT CTR-44 WEST 4TH ST NEW YORK, NY 10012 | PC | AN UNRESTRICTED GRANT TO FURTHER THE DONEE'S EXEMPT PURPOSE | 5,000 |

306,900 За

| orm 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment | | | | | |
|---|---|-------------------------|---|--------|--|
| Recipient | If recipient is an individual, show any relationship to | Foundation status of | Purpose of grant or contribution | Amount | |
| Name and address (home or business) | any foundation manager or substantial contributor | recipient | | | |
| a Paid during the year | | | | | |
| PROSTATE CANCER FOUNDATION 1250 FOURTH STREET SANTA MONICA, CA 90401 | | PC | AN UNRESTRICTED GRANT TO FURTHER THE DONEE'S EXEMPT PURPOSE | 200 | |
| SELF-HELP SERVICES CORP 301 W MAIN ST DURHAM, NC 27701 | | PC | AN UNRESTRICTED GRANT TO FURTHER THE DONEE'S EXEMPT PURPOSE | 2,000 | |
| | 1 | | • | | |

| SELF-HELP SERVICES CORP 301 W MAIN ST DURHAM, NC 27701 | PC | AN UNRESTRICTED GRANT TO FURTHER THE DONEE'S EXEMPT PURPOSE | 2,000 |
|--|----|---|--------|
| SHAARE ZEDEK MEDICAL CENTER 8671 WILSHIRE BLVD STE 712 | PC | AN UNRESTRICTED GRANT TO FURTHER THE DONEE'S EXEMPT | 12,000 |

PURPOSE

BEVERLY HILLS, CA 90211

306,900 3a

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year SHRINERS HOSPITAL FOR CHILDREN PC AN UNRESTRICTED GRANT TO 3,000 2000 NI DOCKY DOINT DDIVE CLIDTHED THE DONIEE'S EVEMBT

| TAMPA, FL 33607 | | PURPOSE | |
|---|----|---|-------|
| SIMON WIESENTHAL CENTER 1399 S ROXBURY 2ND FL LOS ANGELES, CA 90035 | PC | AN UNRESTRICTED GRANT TO FURTHER THE DONEE'S EXEMPT PURPOSE | 4,000 |
| | | | |

| LOS ANGELES, CA 90035 | | PURPOSE | |
|---|------|---|---------|
| SPECIAL OLYMPICS NY 504 BALLTOWN RD SCHENECTADY, NY 12304 | PC | AN UNRESTRICTED GRANT TO FURTHER THE DONEE'S EXEMPT PURPOSE | 200 |
| Total | | | 306,900 |

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Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year ST JUDE CHILDREN'S RESEARCH PC AN UNRESTRICTED GRANT TO 10,000 HOSPITAL FURTHER THE DONEE'S EXEMPT 501 ST JUDE PLACE PURPOSE MEMPHIS, TN 38105

| THE BLUE CARD INC 171 MADISON AVE STE 1405 NEW YORK, NY 10016 | PC | AN UNRESTRICTED GRANT TO FURTHER THE DONEE'S EXEMPT PURPOSE | 8,000 |
|--|------|---|---------|
| THE HEBREW FREE BURIAL ASSOCIATION 125 MAIDEN LANE UNIT 5B NEW YORK, NY 10038 | PC | AN UNRESTRICTED GRANT TO FURTHER THE DONEE'S EXEMPT PURPOSE | 14,000 |
| Total | | | 306,900 |

| Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment | | | | |
|--|---|--------------------------------------|---|--------|
| Recipient | If recipient is an individual, show any relationship to | Foundation status of recipient | Purpose of grant or contribution | Amount |
| Name and address (home or business) | any foundation manager or substantial contributor | | | |
| a Paid during the year | | | | |
| THE JEWISH BRAILLE INSTITUTE 741 NORTH VERMONT AVENUE LOS ANGELES, CA 90029 | | PC | AN UNRESTRICTED GRANT TO FURTHER THE DONEE'S EXEMPT PURPOSE | 700 |
| THE JEWISH MUSEUM1109 5TH AVE NEW YORK, NY 10128 | | PC | AN UNRESTRICTED GRANT TO FURTHER THE DONEE'S EXEMPT | 425 |

| THE JEWISH MUSEUM1109 5TH AVE NEW YORK, NY 10128 | PC | AN UNRESTRICTED GRANT TO FURTHER THE DONEE'S EXEMPT PURPOSE | 425 |
|--|----|---|--------|
| UNITED HATZALAH OF ISRAEL 205 EAST 42ND STREET 19TH FLOOR NEW YORK, NY 10017 | PC | AN UNRESTRICTED GRANT TO FURTHER THE DONEE'S EXEMPT PURPOSE | 52,000 |

| HEN FORK, IN 1912 | | PURPOSE | |
|--|----|---|------|
| UNITED HATZALAH OF ISRAEL 205 EAST 42ND STREET 19TH FLOOR NEW YORK, NY 10017 | PC | AN UNRESTRICTED GRANT TO FURTHER THE DONEE'S EXEMPT PURPOSE | 52,0 |

306,900

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 UNITED JEWISH APPEAL FEDERATION PC. AN UNRESTRICTED GRANT TO 4,000 OF JEWISH PHILANTHROPIES OF NY FURTHER THE DONEE'S EXEMPT 130 E 59TH ST **PURPOSE**

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

| NEW YORK, NY 10022 | | | | |
|--|--|----|---|--------|
| UNITED STATES HOLOCAUST MUSEUM 100 RAOUL WALLENBERG PL SW WASHINGTON, DC 20024 | | PC | AN UNRESTRICTED GRANT TO FURTHER THE DONEE'S EXEMPT PURPOSE | 12,800 |
| | | l | | · |

| WASHINGTON, DC 20024 | | PURPOSE | |
|--|----|---|----|
| WEILL CORNELL MEDICAL CENTER 100 BROADWAY 8TH FLOOR NEW YORK, NY 10005 | PC | AN UNRESTRICTED GRANT TO FURTHER THE DONEE'S EXEMPT PURPOSE | 50 |

| WASHINGTON, DC 20024 | | PURPOSE | |
|--|----|---|-----|
| WEILL CORNELL MEDICAL CENTER 100 BROADWAY 8TH FLOOR NEW YORK, NY 10005 | PC | AN UNRESTRICTED GRANT TO FURTHER THE DONEE'S EXEMPT PURPOSE | 500 |

306,900

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 WORLD JEWISH CONGRESS PC AN UNRESTRICTED GRANT TO 200 POBOX 11032 FURTHER THE DONEE'S EXEMPT

| LEWISTON, ME 04243 | | PURPOSE | |
|--|----|---|-------|
| WOUNDED WARRIOR PROJECT 4899 BELFORT ROAD SUITE 300 JACKSONVILLE, FL 32256 | PC | AN UNRESTRICTED GRANT TO FURTHER THE DONEE'S EXEMPT PURPOSE | 3,000 |

| JACKSONVILLE, FL 32256 | | PURPOSE | |
|-----------------------------|----|----------------------------|--|
| 4899 BELFORT ROAD SUITE 300 | | FURTHER THE DONEE'S EXEMPT | |
| WOUNDED WARRIOR PROJECT | PC | AN UNRESTRICTED GRANT TO | |

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

| JACKSONVILLE, FL 32256 | I | PURPOSE | |
|------------------------|------|---------|---------|
| Total | | | 306.900 |

| efile GRAPHIC print - DO NOT P | ROCESS | As Filed Data - | | DI | N: 93491091003139 | |
|----------------------------------|--------|-----------------|------------------------|------------------------|---|--|
| TY 2017 Accounting Fees Schedule | | | | | | |
| | | | | | | |
| Name: DAVID HIMELBERG FOUNDATION | | | | | | |
| EIN: 13-7200887 | | | | | | |
| Accounting Fees Schedule | | | | | | |
| Category | Amo | unt Net | t Investment Income | Adjusted Net Income | Disbursements for Charitable Purposes | |

2,955

2,955

5,910

COHNREZNICK

Name: DAVID HIMELBERG FOUNDATION

| EIN: 13-7200887 | | |
|------------------------|--|--|
| Name of Stock | | |

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

PUBLICLY TRADED SECURITIES

End of Year Book

7,264,739

Value

End of Year Fair

DLN: 93491091003139

Market Value

9,537,213

| efile GRAPHIC print - DO NOT PROCESS | As Filed Data - | | DLN | : 93491091003139 |
|--------------------------------------|--------------------------------------|--------------------------|------------------------|---|
| TY 2017 Other Expenses Schedule | | | | |
| | | | | |
| Name: DAVID HIMELBERG FOUNDATION | | | | |
| EIN: 13-7200887 | | | | |
| Other Expenses Schedule | | | | |
| Description | Revenue and Expenses per Books | Net Investment Income | Adjusted Net Income | Disbursements for Charitable Purposes |
| BANK CHARGES | 180 | 180 | | 0 |
| NYS FILING FEE | 750 | 0 | | 750 |
| OTHER | 7,095 | 0 | · | 7,095 |

efile GRAPHIC print - DO NOT PROCESS

Name: DAVID HIMELBERG FOUNDATION

Other Income Schedule

FIDELITY

EIN: 13-7200887

Description

As Filed Data -

DLN: 93491091003139

-7.476

Net Investment Income

-7,476

Adjusted Net Income

-7,476

Revenue And **Expenses Per Books**

| efile GRAPHIC print - DO NOT PROCES | SS As Filed Data | - | DLN | N: 93491091003139 | | |
|--|------------------|--------------------------|------------------------|---|--|--|
| TY 2017 Taxes Schedule | | | | | | |
| | | | | | | |
| Name: DAVID HIMELBERG FOUNDATION EIN: 13-7200887 | | | | | | |
| Category | Amount | Net Investment Income | Adjusted Net Income | Disbursements for Charitable Purposes | | |

FOREIGN TAXES