Return of Private Foundation

		rtment of the Treasury	➤ Do not en	r Section 4947(a)(1) Trust Trea rter social security numbers o	on this form as it may be ma	ade public. ¶ D	201/
	Intern	al Revenue Service		ww.irs.gov/Form990PF for ins		OCT 31, 2018	Open to Public Inspection
		ne of foundation	or tax year beginning N	OV 1, 2017	, and ending	A Employer Identification	number
	IVal	ile di louridation				Employer lucitanication	iiuiiioci
	0	PEN MEADO	WS FOUNDATION,	INC.	FIVED IN CORRES	13-3312204	
			oox number if mall is not delivered to s		IRS - OSC - 17	B Telephone number	
>		.O. BOX 1	 		IN3 - 030 11	718-885-09	69
5			ovince, country, and ZIP or foreign	gn postal code	NOV 1 3 2020	C If exemption application is pe	ending, check here
Ď		ROOKLYN,					
<u> </u>	G C	theck all that apply:	Initial return		former public charity OGDEN, UTAH	D 1 Foreign organizations	, cneck nere
3			Address change	Foreign organizations me check here and attach cor	eting the 85% test,		
3	H C	Sheck type of organiz		Name change Name change Name change	- 11	E If private foundation stat	
			i) nonexempt charitable trust	Other taxable private found	dation	under section 507(b)(1)	
	i Fa	ir market value of all	assets at end of year J Acco	ounting method: X Cash	Accrual	F If the foundation is in a 6	60-month termination
	•	om Part II, col. (c), I		Other (specify)		under section 507(b)(1)	(B), check here 🕨 🗀
1		\$ Analysis of B	360,155.[(Parti, c	olumn (d) must be on cash bas	1	4 3 4 12 - 4 - 4 - 4	(d) Disbursements
	Pa	The total of am	ounts in columns (b), (c), and (d) may n al the amounts in column (a))	ot (a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	for charitable purposes (cash basis only)
			gifts, grants, etc., received	56,000			4 1 ,
		l	if the foundation is not required to attach Sch. I		, ,		(4 p 4 c c c c c c c c c c c c c c c c c
Ċ		3 fulerest on saving cash investments	gs and temporary	551			STATEMENT 1
SCANNED	,	4 Dividends and	interest from securities	9,256	9,256.	9,256.	STATEMENT 2
Ź		5a Gross rents	•				., .,
	1	Net rental income		9,609	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	40.3	, , , , , , , , , , , , , , , , , , ,
	Ę.	b assets on line 6a	from sale of assets not on line 10 a for all 23,107			,	, . ,
N .	Revenue	l	ncome (from Part IV, line 2)	- 	9,609.		
9	ď	8 Net short-term	capital gain			0.	
•		9 Income modifi					****
<u>.</u>		108 and allowances		5 7 1	~ ' '	• • • • • • • • • • • • • • • • • • • •	
303		b Less Cost of good c Gross profit or		····- -	· · · · · · · · · · · · · · · · · · ·		• • • •
		11 Other income	(1055)		 	- -	· · · · · · · · · · · · · · · · · · ·
			es 1 through 11	75,416	19,416.	9,807.	
		13 Compensation of	officers, directors, trustees, etc	0.	0.	0.	0.
			e salaries and wages				
	S		, employee benefits STMT 3	3,500	. 0.	0.	0.
	Sus	16a Legal fees b Accounting fee		3,300	• •	0.	0.
	χĎ	c Other profession					
	ve	17 Interest					
	rati	18 Taxes	STMT 4	2,180	0.	0.	0.
	nist	19 Depreciation a	nd depletion				
	Ē	20 Occupancy		676	. 0.	0.	0.
	ΑÞ	21 Travel, confere	ences, and meetings	676	• 0 •		. 0.
	gar	23 Other expense		1,673	. 0.	0.	0.
	Operating and Administrative Expenses	•	g and administrative				
	ber		d lines 13 through 23	8,029	0.	0.	0. 9,975.
	0	25 Contributions,		9,975	•		9,975.
			es and disbursements.	18,004.	. 0.	0.	0 075
	—	Add lines 24 a 27 Subtract line 2		10,004		0.	9,975.
		Li Subliaci iiile 2	.v nom img 12,	57 412	1		

723501 01-03-18 LHA For Paperwork Reduction Act Notice, see instructions.

Form **990-PF** (2017)

9,807.

19,416

b Net investment income (If negative, enter -0-)

C Adjusted net income (If negative, enter -0-)

Part II Balance Sheets Attached schedules and amounts in the description column should be for end of year amounts only		Balance Sheets Attached schedules and amounts in the description	Beginning of year	End of year				
Ľ	Column should be for end-of-year amounts only		(a) Book Value	(b) Book Value	(c) Fair Market Value			
	1	Cash - non-interest-bearing	9,117.	1,977.	1,977.			
	2	Savings and temporary cash investments	9,664.	27,694.	27,694.			
	3	Accounts receivable ►			,			
	l	Less: allowance for doubtful accounts ▶			,			
	4	Pledges receivable ▶	u_					
	İ	Less; allowance for doubtful accounts ▶	W- 4.5, 1.1	'				
	5	Grants receivable						
	B	Receivables due from officers, directors, trustees, and other						
	"	disqualified persons	·					
	7	Other notes and loans receivable		41				
,	′	Less; allowance for doubtful accounts		•				
	١.							
Assets	!	Inventories for sale or use						
Ass		Prepaid expenses and deferred charges						
•	1	Investments - U.S. and state government obligations	102 441	100 255	176 000			
		Investments - corporate stock STMT 6	103,441.	100,255.	176,988.			
		Investments - corporate bonds STMT 7	111,178.	160,886.	153,496.			
	111	Investments - land, buildings, and equipment basis						
		Less accumulated depreciation						
	12	Investments - mortgage loans						
	13	Investments - other			· · · · · · · · · · · · · · · · · · ·			
	14	Land, buildings, and equipment: basis	a state and a second					
	ı	Less accumulated depreciation						
	15	Other assets (describe ►)						
	16	Total assets (to be completed by all filers - see the						
		instructions. Also, see page 1, item 1)	233,400.	290,812.	360,155.			
	17	Accounts payable and accrued expenses						
	18	Grants payable						
ŝ	19	Deferred revenue						
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons		•				
abi	21	Mortgages and other notes payable						
Ξ	22	Other liabilities (describe >)						
	į							
_	23	Total liabilities (add lines 17 through 22)	0.	0.				
	ł	Foundations that follow SFAS 117, check here						
	1	and complete lines 24 through 26, and lines 30 and 31.						
ances	24	Unrestricted	233,400.	290,812.				
lan	25	Temporarily restricted 4			'			
Fund Bal	26	Permanently restricted						
Ę		Foundations that do not follow SFAS 117, check here						
正	1	and complete lines 27 through 31.						
S or	27	Capital stock, trust principal, or current funds						
Net Assets	28	Paid-in or capital surplus, or land, bldg., and equipment fund						
Ž	29	Retained earnings, accumulated income, endowment, or other funds						
Š	40	Total net assets or fund balances	233,400.	290,812.				
`	[
′_	91	Total liabilities and net assets/fund balances	233,400.	290,812.	<u>L</u>			
F	art	III Analysis of Changes in Net Assets or Fund B	alances					
-	Tota	I net assets or fund balances at beginning of year - Part II, column (a), line	30	1				
'		st agree with end-of-year figure reported on prior year's return)	50	1	233,400.			
9		r amount from Part I, line 27a		2	57,412.			
		r increases not included in line 2 (itemize)		3	0.			
		lines 1, 2, and 3			290,812.			
		eases not included in line 2 (itemize)		5	230,012.			
		I net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	olumn (b), line 30		290,812.			
Ť	. 010	, the second of	ν		Form 990-PF (2017)			

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Form 990-PF (2017) OPEN MEADOWS FOUNDATION, INC.

Part IV Capital Gains	and Losses for Tax on I	ivestmen	Lincome				
	the kind(s) of property sold (for exa rehouse; or common stock, 200 sh		te,	(b) How a P - Pur D - Dor	acquired chase nation	(c) Date acquire (mo., day, yr.)	
18 GENERAL MILLS					P		
b ILLINOIS TOOL					P		
c JOHNSON & JOHN	SON				P		
d							
e (e) Gross sales price	(f) Depreciation allowed (or allowable)		st or other basis expense of sale			(h) Gain or (((e) plus (f) mi	loss) nus (g))
a 13,428.			9,91	5.		((-) (-)	3.513.
b 4,901.			1,29				3,605. 2,491.
c 4,778.			2,28	7.			2,491.
d							
e			10.001.00				
Complete only for assets showin	g gain in column (h) and owned by	,	 			I) Gains (Col. (h) I. (k), but not less	
(I) FMV as of 12/31/69					Losses (from o	col (h))	
8			<u> </u>				3,513.
b						 	3,605. 2,491.
d d				_		· · · · · · · · · · · · · · · · ·	2,491.
e							
Capital gain net income or (net ca	pital loss) { If gain, also ente	r in Part I, line	7	} 2	T		9,609.
, ,	•			7 -	+		3,003.
3 Net short-term capital gain or (los if gain, also enter in Part i, line 8,		10 (6):		}			0.
If (loss), enter -0- in Part I, line 8 Part V Qualification U	nder Section 4940(e) for	Reduced	Tax on Net	Invest	ment Inc	come	<u> </u>
(For optional use by domestic private							
If section 4940(d)(2) applies, leave th Was the foundation liable for the sect If "Yes," the foundation doesn't qualif	ion 4942 tax on the distributable an			od?			Yes X No
Enter the appropriate amount in 6		•		ntries.			
(a) Base period years Calendar year (or tax year beginnir	(b)		Net value of nor	(c)	e-use assets	Di (col. (b	(d) stribution ratio) divided by col. (c))
2016		7,650.	•			((7
2015		5,912.			· ·		
2014	1	8,842.					
2013		6,389.					
2012		4,378.				1 -	
2 Total of line 1, column (d)						2	.000000
3 Average distribution ratio for the 5 the foundation has been in exister		on line 2 by 5.0	0, or by the numbe	r of years		3	.000000
4 Enter the net value of noncharitab	le-use assets for 2017 from Part X,	line 5				4	338,125.
5 Multiply line 4 by line 3						5	0.
6 Enter 1% of net investment incom	e (1% of Part I, line 27b)					6	194.
7 Add lines 5 and 6						7	194.
8 Enter qualifying distributions from	Part XII, line 4					8	9,975.
	line 7, check the box in Part VI, line	t 1b, and comp	lete that part using	g a 1% tax	rate.		<u>.</u>

	312204	Page 4
Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - s	ee instruc	ctions)
1a Exempt operating foundations described in section 4940(d)(2), check here ▶ and enter "N/A" on line 1.		
Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)		
b Domestic foundations that meet the section 4940(e) requirements in Part V, check here 🕨 🛣 and enter 1%		194.
of Part I, line 27b		
c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations, enter 4% of Part I, line 12, col. (b).	<u>.</u> .	-
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)		<u> </u>
3 Add lines 1 and 2		194.
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)		0.
5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-		194.
6 Credits/Payments;		
a 2017 estimated tax payments and 2016 overpayment credited to 2017 . 6a 0 .		
b Exempt foreign organizations - tax withheld at source 6b 0.		
c Tax paid with application for extension of time to file (Form 8868) 6c 250.		
d Backup withholding erroneously withheld 6d 0.		
7 Total credits and payments. Add lines 6a through 6d		250.
8 Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached 8		0.
9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed		
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid		56.
11 Enter the amount of line 10 to be; Credited to 2018 estimated tax ▶ 0 • Refunded ▶ 11		56.
Part VII-A Statements Regarding Activities		
1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in		Yes No
any political campaign?	18	X
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition	16	X
If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or		İ
distributed by the foundation in connection with the activities.		
c Did the foundation file Form 1120-POL for this year?	10	<u> </u>
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:		
(1) On the foundation. ► \$ 0 . (2) On foundation managers. ► \$ 0 .		}
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation		ſ
managers. ► \$0 .		<u>.</u> .
2 Has the foundation engaged in any activities that have not previously been reported to the IRS?	2	X
If "Yes," attach a detailed description of the activities.		ł
3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or		
bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3	<u> </u>
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?	48	Х
b If "Yes," has it filed a tax return on Form 990-T for this year?	-	-
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5	X
If "Yes," attach the statement required by General Instruction T		
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:		
By language in the governing instrument, or		ļ
By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law		-
remain in the governing instrument?	6	X
7 Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV	7	X
Constitution to the Constitution of the Consti		
8a Enter the states to which the foundation reports or with which it is registered. See Instructions.	-	,
NY	— I	
b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)		x
of each state as required by General Instruction G? If "No," attach explanation	8b	^ ^
9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar		x d
year 2017 or the tax year beginning in 2017? See the instructions for Part XIV. If "Yes," complete Part XIV	9	$\frac{\mathbf{x}}{\mathbf{x}}$
10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses	10 Sorm 990.	- PF (2017)
	LOUIN 220.	-1 1 (2017)

orn	n 990-PF (2017) OPEN MEADOWS FOUNDATION, INC. 13-33	12204	:	Page 5
Pa	art VII-A Statements Regarding Activities (continued)			
			Yes	No
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of			
	section 512(b)(13)? If "Yes," attach schedule. See instructions	11		X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges?			
	If "Yes," attach statement. See instructions	12		Х
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	
	Website address > WWW.OPENMEADOWS.ORG			
14	The books are in care of ► SANDRA LARA Telephone no. ►718-	768-4	015	
	Located at ≥ 200 11TH ST, BROOKLYN, NY ZIP+4 ≥	11215		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here		•	$\cdot \Box$
	and enter the amount of tax-exempt interest received or accrued during the year	N	/A	
16	At any time during calendar year 2017, did the foundation have an interest in or a signature or other authority over a bank,		Yes	No
	securities, or other financial account in a foreign country?	16		X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the			
	foreign country			
Ρί	art VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
,	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
18	a During the year, did the foundation (either directly or indirectly):			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	0		!
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			Ì
	a disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?			1
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	0		ĺ
	(5) Transfer any income or assets to a disqualified person (or make any of either available			·
	for the benefit or use of a disqualified person)?	0		
	(6) Agree to pay money or property to a government official? (Exception Check "No"			
	if the foundation agreed to make a grant to or to employ the official for a period after			,
	termination of government service, if terminating within 90 days.)	0		
- 1	b If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations	i		1
	section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions	<u> 1b</u>		<u> </u>
	Organizations relying on a current notice regarding disaster assistance, check here	」		۱ ۱
(c Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected			
	before the first day of the tax year beginning in 2017?	10		X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation			
	defined in section 4942(j)(3) or 4942(j)(5)):	1	1	,
- 1	a At the end of tax year 2017, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning	ŧ		
	before 2017?	o		1
	If "Yes," list the years			
	b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect			
	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach	1		
	statement - see instructions) N/A	26		<u> </u>
(c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.	ļ		
_	P			
31	a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			
	during the year? Yes X N	°		٠ ا
ļ	b If "Yes," did it have excess business holdings in 2017 as a result of (1) any purchase by the foundation or disqualified persons after]
	May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose	1		
	of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C,			
,	Form 4720, to determine if the foundation had excess business holdings in 2017.) N/A		 	-
4	a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	48	1	X

b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that

had not been removed from jeopardy before the first day of the tax year beginning in 2017?

Form **990-PF** (2017)

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

Form 990-PF (2017) OPEN MEADOWS FOUNDATION, INC.	13-	-3312204 Page 7
Part VIII Information About Officers, Directors, Trustees, Foun Paid Employees, and Contractors (continued)	ndation Managers, Highly	
3 Five highest-paid independent contractors for professional services. If none, et		· · · · · · · · · · · · · · · · · · ·
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services	-	> (
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant st number of organizations and other beneficiaries served, conferences convened, research papers pages 1 N/A	tatistical information such as the produced, etc.	Expenses
2		
3		
4		<u> </u>
Part IX-B Summary of Program-Related Investments		<u> </u>
Describe the two largest program-related investments made by the foundation during the tax year	on lines 1 and 2.	Amount
1 N/A		-
2		
All other program-related investments. See instructions.		<u> </u>

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Total. Add lines 1 through 3

P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign four	ndations, se	ee instructions.)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
а	Average monthly fair market value of securities	1a	320,289.
	Average of monthly cash balances	1b	22,985.
	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	343,274.
	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 1e 0.		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	343,274.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	5,149.
5	Net value of noncharitable-use assets Subtract line 4 from line 3 Enter here and on Part V, line 4	5	338,125.
6	Minimum investment return. Enter 5% of line 5	6	16,906.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and foreign organizations, check here ► X and do not complete this part.)	id certain	
1	Minimum investment return from Part X, line 6	1	· · · · · · · · · · · · · · · · · · ·
2a	Tax on investment income for 2017 from Part VI, line 5		
b	Income tax for 2017. (This does not include the tax from Part VI.)		
C	Add lines 2a and 2b	2c	
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	
P	art XII Qualifying Distributions (see Instructions)	•	
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
a	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	9,975.
b	Program-related investments - total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
a	Surtability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8; and Part XIII, line 4	4	9,975.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		÷
	income. Enter 1% of Part I, line 27b	5	194.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	9,781.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation of 4940(e) reduction of tax in those years	qualifies for the	ne section

Form **990-PF** (2017)

Part XIII Undistributed Income (see instructions) N/A								
	(a)	(b)	(c)	(d)				
	Corpus	Years prior to 2016	2016	2017				
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		•		1				
b Total for prior years:								
, ,								
3 Excess distributions carryover, if any, to 2017				•				
a From 2012								
b From 2013 c From 2014	,	,		·				
d From 2015								
e From 2016	,							
f Total of lines 3a through e								
4 Qualifying distributions for 2017 from		<u> </u>						
Part XII, line 4: >\$								
a Applied to 2016, but not more than line 2a	"		,	ı				
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 compare applied to 2017		 		<u> </u>				
(If an amount appears in column (d), the same amount must be shown in column (a))				,				
6 Enter the net total of each column as indicated below.				,				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5								
b Prior years' undistributed income. Subtract								
line 4b from line 2b								
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed								
d Subtract line 6c from line 6b. Taxable								
amount - see instructions								
e Undistributed income for 2016. Subtract line	, , , , , , , , , , , , , , , , , , , ,							
4a from line 2a. Taxable amount - see instr.								
f Undistributed income for 2017. Subtract								
lines 4d and 5 from line 1. This amount must								
be distributed in 2018		<u>ļ </u>						
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)			<u> </u>					
8 Excess distributions carryover from 2012								
not applied on line 5 or line 7	· ·	 						
9 Excess distributions carryover to 2018								
Subtract lines 7 and 8 from line 6a								
10 Analysis of line 9:								
a Excess from 2013			1					
b Excess from 2014 c Excess from 2015	•							
d Excess from 2015								
e Excess from 2017								
V ENGUMO II OTIT EV 17	L		I	L				

Part XV Supplementary Information (continued) Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, show any relationship to Recipient Purpose of grant or contribution Foundation Amount any foundation manager or substantial contributor status of Name and address (home or business) recipient a Paid during the year NATIONAL PERFORMANCE NETWORK NONE EOF DOCUMENTARY 1024 ELYSIAN FIELDS AVE 2,000. NEW ORLEANS, LA 70117 WOLFBIRD DANCE NONE EOF YOUNG ARTIST 205 SE SPOKANE ST STE 300 EMPOWERMENT CAMP PORTLAND, OR 97202 2,000. THE DANCE BRIGADE WALLFLOWER ORDER NONE ROF DANCE PERFORMANCE 3316 24TH ST SAN FRANCISCO, CA 94110 2,000. AMIGAS DE CORAZON NONE EOF HEALING WORKSHOP PO BOX 10561 SPOKANE, WA 99209 1,975. FRACTURED ATLAS NONE EOF NEW PLAY WORKSHOP FIRST READ 248 W 35TH ST 2,000. NEW YORK, NY 10001 9,975. ▶ 3a Total b Approved for future payment NONE Total **▶** 3b

Form **990-PF** (2017)

Part XVI.A	Analysis of Income-Producing Activities
	Allaryons of mooning i readoning Activities

Enter gross amounts unless otherwise indicated.	Unrelate	d business income	Exclu	ided by section 512, 513, or 514	(e)
Enter gross amounts unioss otherwise molested.	(a)	(b)	(C) Exclu-	(d)	Related or exempt
1 Program service revenue	Business code	Amount	sion	Amount	function income
8	Cone		1		
h	 		 	· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·
0	 		+		
d	 	· · · · · · · · · · · · · · · · · · ·	+	 	· · · · · · · · · · · · · · · · · · ·
	 	 	+	<u> </u>	· · · · · · · · · · · · · · · · · · ·
· · · · · · · · · · · · · · · · · · ·	<u> </u>		+		
g Fees and contracts from government agencies			1		
2 Membership dues and assessments	· · · · ·	· · · · · · · · · · · · · · · · · · ·	+		
3 Interest on savings and temporary cash					
investments	1 1		14	551.	
4 Dividends and interest from securities		···· - ··· - ··· - · · · · · · · · · ·	14		
5 Net rental income or (loss) from roal estate;		1			
a Debt-financed property			1		
b Not debt-financed property			1		
6 Net rental income or (loss) from personal					
property	1 !		1		
7 Other investment income					
8 Gain or (loss) from sales of assets other					
than inventory .			<u>.</u>		9,609.
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue:	1				
8			ļ		
b			<u> </u>		
c			1		
d	1				
e	—		1		
12 Subtotal. Add columns (b), (d), and (e)	<u> </u>	0	•	9,807.	9,609.
13 Total. Add line 12, columns (b), (d), and (e)				13	19,416.
(See worksheet in line 13 instructions to verify calculations.)	 				

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

Line No. ▼	the foundation's exempt purposes (other than by providing funds for such purposes).	portainty to the accomplishment of
N/A	N/A	
		<u> </u>
	<u> </u>	
		· · · · · · · · · · · · · · · · · · ·
		
		Form 990-PF (2017)
723621 01-0	03-18	FOIIII 330-P F (2017)

1 Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c)									Yes	No
•		, , , , ,	•	-	g to political organizations?	1				ĺ
a Transfers from the reporting foundation to a noncharitable exempt organization of: (1) Cash										
								1a(1)		X
	Other							18(2)		X
		sactions;								
		of assets to a noncharital						1b(1)		X
•		ases of assets from a noi	•	organization				1b(2)		X
		l of facilities, equipment,					•	1b(3)		X
•		oursement arrangements						1b(4)		X
•		or loan guarantees				·		1b(5)		X
• •		rmance of services or me	•	-				1b(6)		X
	-	facilities, equipment, ma	• .		•			10	لـــــا	X
							market value of the goods, o		ets,	
		• • •			ed less than fair market vall	ue in any transactio	on or sharing arrangement, sl	iow in		
) the value of the goods,			a avamet arganization	(d) 5 (a)				
(a)Line r	<u> </u>	(b) Amount involved	(c) Name (exempt organization	(u) Description	on of transfers, transactions, and s	haring arr	angeme	nts
-	-		 	N/A						
										
	_		 							
			ļ							
					· · · · · · · · · · · · · · · · · · ·		 			
	+									
	+		 							
			 			- 				
	-	<u>-</u>	 			-				
			 				<u> </u>			
						 				
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	+									
	-	 	 	 	 					
	-		ļ							
0 1	<u> </u>	d-N d d d d	1	-1-41 4						
					or more tax-exempt organi	izations described	_	٦.,	v] No
		501(c) (other than section		section 52/7			<u> </u>	_ Yes	LA	Ŋ0
D 11"	Yes," co	mplete the following scho			(h) Type of properties	T	(a) Deparietion of relationsh	<u></u>		
		(a) Name of org	janization		(b) Type of organization		(c) Description of relationsh	ıp		
		N/A								
										
			·····							
	Lindor	nonalting of norther I doglers	that I have everylace	ble return leaburdle	a coormanuum ochoduloo and	l statements, and to th	a boot of my knowledge			
C:		penaities of perjury, I declare this in the control of the control			ig accompanying schedules and n taxpayer) is based on all inforr		May	the IHS d n with the	Iscuss t	his er
Sign Here		Kinka	Alita	14 /	17/20/20	A) MDTTGM	shov	vn below?	? See Ins	str
Here			1000		1/20/2004	TRUST	EE L	Yes	Ь	J No
	Sign	ature of officer or trustee		I December 2	Date	Title	Chook L. L. & T.DTIN			
		Print/Type preparer's na	11116	Preparer's si	ignature	Date	Check if PTIN			
المنط			<	1 a	Det	alaslas	self- employed			
Paid	~~~	SANFORD MI		T TOTAL	700 110	-7/28/20		186		
Prep		Firm's name ► STE	PHEN M S	MTTH &	CO, TITC	-	Firm's EIN ► 13-39	339	g /	
Use	Unly	F1								
		Firm's address ▶ 50					==			
		NE NE	W YORK,	NY 1002	2-5501		Phone no. 212-75			
							Fo	rm 990)-PF	(2017)

723622 01-03-18

Schedule B (Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Schedule of Contributors

➤ Attach to Form 990, Form 990-EZ, or Form 990-PF.
➤ Go to www.lrs.gov/Form990 for the latest information.

OMB No 1545-0047

2017

Name of the organization

Employer identification number

C	PEN MEADOWS FOUNDATION, INC.	13-3312204
Organization type (check	cone):	-
Filers of:	Section:	
Form 990 or 990-EZ	501(c)() (enter number) organization	
	4947(a)(1) nonexempt charitable trust not treated as a private foundation	
	527 political organization	
Form 990-PF	501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a private foundation	
	501(c)(3) taxable private foundation	
·	n is covered by the General Rule or a Special Rule . (c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special	al Rule See instructions
General Rule		
	ion filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions tot ny one contributor. Complete Parts I and II. See instructions for determining a contrib	-
Special Rules		
sections 509(a)(any one contribu	ion described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% supply and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, utor, during the year, total contributions of the greater of (1) \$5,000, or (2) 2% of the aid EZ, line 1 Complete Parts I and II	16a, or 16b, and that received from
year, total contri	ion described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received fr butions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or e f cruelty to children or animals Complete Parts I, II, and III	
year, contributio is checked, ente purpose. Don't c	ion described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received fins exclusively for religious, charitable, etc., purposes, but no such contributions totaled there the total contributions that were received during the year for an exclusively religions complete any of the parts unless the General Rule applies to this organization becaus ble, etc., contributions totaling \$5,000 or more during the year	ed more than \$1,000 If this box grous, charitable, etc.,
but it must answer "No" o	that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on it the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PE)	•

LHA For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2017)

Name of organization

Employer identification number

OPEN MEADOWS FOUNDATION, INC.

13-3312204

Part I	Contributors (see instructions) Use duplicate copies of Part I if add	litional space is needed	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	EDITH WINDSOR TRUST C/O FREIMAN, FRANCO 125 PARK AVE NEW YORK, NY 10017	ss	Person X Payroll . Noncash . (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	. (d) Type of contribution
		\$	Person Payroll Noncash Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		 \$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
723452 11-0		\$\$	Person Payroll Noncash (Complete Part II for noncash contributions) 990, 990-EZ, or 990-PF) (2017)

Employer identification number

OPEN MEADOWS FOUNDATION, INC.

13-3312204

Part II	Noncash Property (see instructions). Use duplicate copies of Part II if	additional space is needed.	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
200450 44 0			990 990-F7 or 990-PF\/2017

lame of organization				Emp	loyer identification number		
OPEN MEADOWS FO	UNDATION, INC.	•		1	.3-3312204		
the year from an completing Part III, e	igious, charitable, etc., contri y one contributor. Complete contents the total of exclusively religious, copies of Part III if additiona	olumns (a) through (e) and , charitable, etc., contributions of	the following line:	entry. For organizations	that total more than \$1,000 for \$		
(a) No.	pose of gift	(c) Use of gift		(d) Description of how gift is held			
Transi	feree's name, address, an	(e) Transfe	•	elationship of transfer	or to transferee		
(a) No. from (b) Pur	pose of gift	(c) Use of gi	ft	(d) Description	on of how gift is held		
Transi	ieree's name, address, an	(e) Transfe d ZIP + 4	-	elationship of transfer	or to transferee		
(a) No. from (b) Pur Part I	pose of gift	(c) Use of gi	ft .	(d) Description	on of how gift is held		
		(e) Transfe	er of gift				
Transi	feree's name, address, an			elationship of transfer	or to transferee		
(a) No. from (b) Pui	pose of gift	(c) Use of gi	ft	(d) Description	on of how gift is held		
Transi	eree's name, address, an	(e) Transfe d ZIP + 4		elationship of transfer	or to transferee		

FORM 990-PF INTERE	ST ON SAVI	NGS AN	ID TEME	PORARY	CASH IN	VESTMENTS	STATEMENT	1
SOURCE						(B) VESTMENT ICOME	(C) ADJUSTED NET INCOME	
RBC WEALTH MANAGEME	NT		551.			551.	551. 551.	
TOTAL TO PART I, LI	NE 3					551.		
FORM 990-PF	DIVIDEND	S AND	INTERE	EST FRO	OM SECUR	ITIES	STATEMENT	2
SOURCE	GROSS AMOUNT	G	APITAL GAINS /IDENDS	RI	(A) EVENUE R BOOKS	(B) NET INVEST MENT INCO		
RBC WEALTH MANAGEMENT	9,256	•	().	9,256.	9,25	9,25	
TO PART I, LINE 4	9,256	- - -	(). 	9,256.	9,25	9,2	56.
FORM 990-PF	<u>,</u>		LEGAL	FEES			STATEMENT	3
DESCRIPTION		(A EXPEN PER E	ISES	NET II	3) NVEST- INCOME	(C) ADJUSTED NET INCOM		
LEGAL FEES		3	3,500.		0.	- 11 - 11 - 11 - 11 - 11 - 11 - 11 - 1	0.	0.
TO FM 990-PF, PG 1,	LN 16A	3	3,500.		0.	(0.	0.
FORM 990-PF			TAXE	ES			STATEMENT	4
DESCRIPTION		(A EXPEN PER E	ISES	NET II	3) · NVEST- INCOME			
NYS TAXES IRS TAXES AND FEES		2	100.		0.		0.	0.
TO FORM 990-PF, PG	1, LN 18	2	2,180.		0.		0.	0.
	=							

FORM 990-PF	OTHER E	XPENSES		STATEMENT			5
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME		(C) ADJUSTED NET INCOME		(D) CHARITABLE PURPOSES	
BANK CHARGES INSURANCE OFFICE EXPENSES	120. 1,010. 543.		0.		0. 0. 0.		0. 0. 0.
TO FORM 990-PF, PG 1, LN 23	1,673.		0.		0.		0.
FORM 990-PF	CORPORAT	E STOCK			STA	TEMENT	6
DESCRIPTION			вос	OK VALUE		R MARKET	r
				100,255.		176,98	88.
TOTAL TO FORM 990-PF, PART II	I, LINE 10B	=		100,255.		176,98	88.
FORM 990-PF	CORPORAT	E BONDS			STA	TEMENT	7
DESCRIPTION			вос	OK VALUE		R MARKET	r
		_		160,886.		153,49	96.
TOTAL TO FORM 990-PF, PART II	T.TNR 10C	_		160,886.		153,49	

	- LIST OF OFFICERS, D S AND FOUNDATION MANA		STAT	EMENT 8
NAME AND ADDRESS	TITLE AND AVRG HRS/WK	COMPEN- SATION	EMPLOYEE BEN PLAN CONTRIB	
DI ECKERLE 120 ELGAR PL #21E BRONX, NY 10475	ED/TRUSTEE 5.00	0.	0.	- O.
JULIA R. COHEN 79-10 34TH AVE #6J JACKSON HEIGHTS, NY 11372	SECY/TRUSTEE 5.00	0.	0.	0.
SANDRA LARA 200 11TH ST BROOKLYN, NY 11215	TREAS/TRUSTEE 5.00	0.	0.	0.
ANDREA LEPCIO 33 BLACK DOG RD BAR HARBOR, ME 04609	TRUSTEE 5.00	0.	0.	0.
MARRIANE BROWN 205 22ND ST BROOKLYN, NY 11215	TRUSTEE 2.00	0.	0.	0.
TOTALS INCLUDED ON 990-PF, P	AGE 6, PART VIII	0.	0.	0.