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

OMB No 1545 0052

Department of the Treasury Internal Revenue Service

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Internal	Revenue Service	► Go to www.irs.go	ov/Form990PF for instruct	tions and the latest info	ormation Op	en to Public Inspection
For ca	lendar year 2017 or	tax year beginning	12/01 , 2017	, and ending 11/	30 , 2018	
7101	RON AV TRUST				Employer identification nu 27-4384817	mber
	LUEBERRY HIL			h	3 Telephone number (see ins	structions)
	SEY, NY 10952					
	·				If exemption application is	s pending, check here 🕨 📗
G Ch	eck all that apply	Initial return	Initial return of a forr	ner public charity	1 Foreign organizations, che	ck here
		Final return	Amended return		2 Foreign organizations mee	stung the 85% test check
u Ch	eck type of organiza	Address change	Name change 1(c)(3) exempt private t	foundation	here and attach computati	ion String the 65 76 test, eneck
n Çii		1) nonexempt charitable		• /I	E If private foundation statu	s was terminated
1 Fat	r market value of all asse		connting method. X C		under section 507(b)(1)(A	
	om Part II, column (c), line		Other (specify)	<u> </u>	F If the foundation is in a 6	O-month termination —
₩ 5	<u>'</u>		, column (d) must be or		under section 507(b)(1)(B	
Part			(a) Revenue and	(b) Net investment		(d) Disbursements
	columns (b), (c)	ne total of amounts in , and (d) may not neces-	expenses per books	ıncome	income	for charitable purposes
	sarily equal the (see instructions	amounts in column (a)				(cash basis only)
		ants, etc., received (attach schedule)	34,160.			1111
	1 • — — · · ·	foundation is not required to attach Sch. B		11		
	3 Interest on savings and	d temporary cash investments				11
	4 Dividends and interest					1 5 1
	5 a Gross rents					
	b Net rental income or (loss).			4		1,
R E V	6 a Net gain or (loss) from sale of assets not on line 10 b Gross sales price for all assets on line 6a Capital gain net income (from Part IV, line 2)			į į		, ,
Ž				, ,		1
É N	8 Net short term ca					
U	9 Income modificati	ions				1
Ε	10 a Gross sales less returns and					
	allowances b Less Cost of					1 1
	goods sold C Gross profit or (loss) ((attach schedule)	-			1 11
	11 Other income (att					, , , ,
	12 Total Add lines		34,160.	(0.	i i
	1	officers, directors, trustees, etc salaries and wages	0.			<u></u>
	15 Pension plans, er	•				
А	16 a Legal fees (attach			RF	CEIVED	
A D M	b Accounting fees (attach sch) See St 1	1,495.		0	
N	c Other professional fee	s (attach sch)		68 JA	N 1 4 2019 S	
PS	17 Interest 18 Taxes (attach schedule	al/ana instra)		8 7		
RR	19 Depreciation (atta				JK	11,
A A	schedule) and dep	pletion			DEN, UT	<u>li</u>
N V G E	20 Occupancy 21 Travel conference	es and meetings				
ΑE	22 Printing and publi					
N X	23 Other expenses (a	attach schedule)				
E N		See Statement 2	224.			
S E S		nd administrative nes 13 through 23	1,719.			
S	25 Contributions, gifts, gr	Th 1 1777	31,569.			31,569.
		nd disbursements		<u> </u>		
	Add lines 24 and		33,288.		0.	31,569.
	27 Subtract line 26 fr					
	and disbursemen	-	872.			1
		ncome (if negative, enter -0)		C).	1 1
	C Adjusted net inco	ome (if negative enter 0-)	1	1	0.	1 11 1

Pari	t (I	Balance Sheets	column should be for end of year amounts only	Beginning of year	End o	r year
. 41	- ••-		(See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-	•	360.	1,922.	1,922.
	2	Savings and tempora	ry cash investments			
	3	Accounts receivable	•			
		Less [,] allowance for d	oubtful accounts			
	4	Pledges receivable	▶			
		Less allowance for d	oubtful accounts			· · · · · · · · · · · · · · · · · · ·
	5	Grants receivable				
	6	Receivables due from office	ers, directors, trustees, and other	-		
		disqualified persons (attact	n schedule) (see instructions)			
_	7	Other notes and loans recei	vable (attach sch)			
A S S E T		Less allowance for d	oubtful accounts			
š	8	Inventories for sale o	r use			
E	9	Prepaid expenses an	d deferred charges			
Ś	10 a	Investments – US a obligations (attach so	and state government hedule)			
	l t	nvestments – corporate s	tock (attach schedule)			
	1	: Investments — corporate b				
	1	Investments - land, l	·			
		equipment basis	_		<u> </u>	
		Less accumulated deprecia (attach schedule)	ation •			
	12	Investments - mortg	age loans			
	13	Investments - other	(attach schedule)			,
	14	Land, buildings, and	equipment basis►	a 1	<u> </u>	
		Less accumulated deprecia (attach schedule)	ation >			
	15	Other assets (describ	e►See Statement 3	2,150.	1,460.	
		Total assets (to be co	ompleted by all filers — Also, see page 1, item i)	2,510.	3,382.	1,922.
Ļ	17	Accounts payable and	d accrued expenses	·		
Å	18	Grants payable				
В	19	Deferred revenue				
l L	20	Loans from officers, directo	ors, trustees, & other disqualified persons			
Ī	21	Mortgages and other notes	payable (attach schedule)			
T	22	Other liabilities (desc	ribe►)			
Ė	22	Takal liakilikina 7a aa i	17 Abrayah 22)	_	^	
<u> </u>	23	Total liabilities (add		0.	0.	
		and complete lines 2	ow SFAS 117, check here 4 through 26, and lines 30 and 31.			-
NF	24	Unrestricted	Į			[,
E U	25	Temporarily restricted				
D	26	Permanently restricte	[
A B S A E A		Foundations that do and complete lines 2	not follow SFAS 117, check here. ►X 7 through 31.			
ΕĽ	27	Capital stock, trust or	incipal, or current funds			
SN	28		or land, bldg , and equipment fund			
С	29		ated income, endowment, or other funds	2,510.	3,382.	
O E R S	30		ind balances (see instructions)	2,510.	3,382.	
•	31		et assets/fund balances			
		(see instructions)		2,510.	3,382.	111
Part	t III	Analysis of Chang	ges in Net Assets or Fund Balance	es		
1	Total end-	net assets or fund bal	lances at beginning of year – Part II, colu on prior year's return)	mn (a), line 30 (must ag	ree with	2,510.
		r amount from Part I, I			2	872.
		increases not included in line			3	072.
		lines 1, 2, and 3				3,382.
		ases not included in line 2 (it	remize) ►		5	3,302.
		•	ances at end of year (line 4 minus line 5)	- Part II column (b) In		2 202
DAA	, Jiai	not assets of fully bal	andes at end or year (line 4 fillings lifte 5)	- r art ii, colulliii (b), ii	10 30	3,382.

Pai	(a) List and describe	the kind(s) of property sold (for example ouse; or common stock, 200 shares	ole, real estate,	(b) How acqui P — Purchas D — Donatio	e (mo , day, yr)	(d) Date sold (mo , day, yr)
1:	N/A			U — Donatio	"	
)		-			
	:					
	1					
	?					
	(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other bas plus expense of sa		(h) Gain oi ((e) plus (f) n	
)					
		l ring gain in column (h) and owned	by the foundation on 12/31/	169	4D 0 (0-	1. (1.)
	(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	55	(1) Gains (Co gain minus col (k), than -0-) or Losses (1	but not less
	1				· · · · · · · · · · · · · · · · · · ·	
)					
	1					
					·····	
2	3	–	enter in Part I, line 7 ter -0- in Part I, line 7		2	
3	Net short-term capital gain or i	(loss) as defined in sections 1222(5	5) and (6).			
	in Part I, line 8	e 8, column (c) See instructions If		1	3	
		r Section 4940(e) for Reduce oundations subject to the section 4940			ne	
Was		this part blank ction 4942 tax on the distributable a fy under section 4940(e) Do not co	• •	ase period?	Yes	X No
_ 1	Enter the appropriate amount in	each column for each year, see the in		entries		
	(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use ass	sets	(d) Distributio (col (b) divided	
	2016	54,153.		2,102.		25.762607
	2015	46,577.		3,140.		14.833439
	2014	76,435.		2,252.		33.940941
	2013	61,613.		4,413.		13.961704
	2012	101,443.		3,601.		28.170786
2	Total of line 1, column (d)				2	116.669477
3	Average distribution ratio for the number of years the foundation	5-year base period – divide the total on has been in existence if less than	on line 2 by 5 0, or by the i 5 years		3	23.333895
4	4 Enter the net value of noncharitable-use assets for 2017 from Part X, line 5				4	2,160.
5	Multiply line 4 by line 3				5	50,401.
6	Enter 1% of net investment inc	come (1% of Part I, line 27b)			6	
7	Add lines 5 and 6				7	50,401.
8	Enter qualifying distributions fr				8	31,569.
	If line 8 is equal to or greater that Part VI instructions	n line 7, check the box in Part VI, line	e 1b, and complete that part u	ısıng a 1% ta	x rate See the	

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Par	t VI; i Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948	– see instructi	ions)	
	Exempt operating foundations described in section 4940(d)(2), check here	3 4	1 1	4.8
	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,	- 1		0.
	check here. ► and enter 1% of Part I, line 27b	1	7 1	11.11
c	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, col (b)			_11111
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable			
_	foundations only, others, enter -0-)	2		0.
3	Add lines 1 and 2	3		<u>0.</u>
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter-	· —		0.
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5		0.
6	Credits/Payments	1 . 4	·	
	2017 estimated tax pmts and 2016 overpayment credited to 2017 6 a	l '		- \$\dagger{\pi} \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
	Exempt foreign organizations — tax withheld at source Tax and with application for extension of two at a file (Farm 8000)	—	· #	
	Tax paid with application for extension of time to file (Form 8868) 6 c	′ ‡	. 21	44 1
	Backup withholding erroneously withheld Takkup withholding erroneously withheld			ليالاك
	Total credits and payments. Add lines 6a through 6d	7		0.
_	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	8		
	Tax due If the total of lines 5 and 8 is more than line 7, enter amount owed	9		<u>0.</u>
10	Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10		
	Enter the amount of line 10 to be Credited to 2018 estimated tax	► 11		
Par	t VII-A Statements Regarding Activities			- 1
1 a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did participate or intervene in any political campaign?	i it	1 a	es No X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition		1 b	x
	If the answer is 'Yes' to 1a or 1b , attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities	t		
С	Did the foundation file Form 1120-POL for this year?		1 c	X
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year			1111
	(1) On the foundation \$\\ \\$\\ \\$\\ \\$\\ \\$\\ \\$\\ \\$\\ \\$\		<u>).</u>	
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers \$\Bigs \\$\$			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?		2	
2	If 'Yes,' attach a detailed description of the activities			
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 change	es	3	<u> X</u>
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?		4 a	X
	If 'Yes,' has it filed a tax return on Form 990-T for this year?		4 b	N/A
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			
	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either			
	By language in the governing instrument, or		- F	*
	 By state legislation that effectively amends the governing instrument so that no mandatory directions that conf with the state law remain in the governing instrument? 	lict	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			${X}$
	Enter the states to which the foundation reports or with which it is registered. See instructions.	•		^
Ju	NY		,	: 1
h	If the answer is 'Yes' to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General			الــ
	(or designate) of each state as required by General Instruction G^{2} if 'No,' attach explanation		8 b	X
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j) for calendar year 2017 or the tax year beginning in 2017? See the instructions for Part XIV. If 'Yes,' con	(3) or 4942(j)(5	5) 9	
			+	— ^
10	Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing their nan and addresses	ies	10	x
BAA	V 100 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		Form 990-P	F (2017)

Par	t VII÷A	Statements Regarding Activities (continued)					
11	At any ti within th	ime during the year, did the foundation, directly or indirectly, own a controlled entity me meaning of section 512(b)(13)? If 'Yes,' attach schedule. See instructions			11	Yes	No X
12	Did the for advisory	oundation make a distribution to a donor advised fund over which the foundation or a disqualified provingers? If 'Yes,' attach statement. See instructions	person had		12		x
13		foundation comply with the public inspection requirements for its annual returns and exemp	otion applica	ation?	13	X	
14		address ► N/A ks are in care of ► MORDECHAI KLEIN Teleph	none no	845-8		 398	
	Located	at 28 BLUEBERRY HILL RD MONSEY NY ZIP +	4 ► <u>10</u> 9				· – – -
15		4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 — check he er the amount of tax-exempt interest received or accrued during the year		15	Ņ/Ą	•	∐ N/A
16	At any tir	me during calendar year 2017, did the foundation have an interest in or a signature or other autho		<u>'</u>	,	Yes	No
	·	ecurities, or other financial account in a foreign country?			16		X
	enter the	instructions for exceptions and filing requirements for FinCEN Form 114. If 'Yes,' name of the foreign country					
Par	t VII-B	Statements Regarding Activities for Which Form 4720 May Be Require	d				
	File Form	m 4720 if any item is checked in the 'Yes' column, unless an exception applies.	,			Yes	No
1 a	During th	ne year, did the foundation (either directly or indirectly)					1:
	(1) Enga	age in the sale or exchange, or leasing of property with a disqualified person?	Yes	X No		l L	
	(2) Borr	ow money from, lend money to, or otherwise extend credit to (or accept it from) a ualified person?	∏Yes	X No		ļ	
	(3) Furn	nish goods, services, or facilities to (or accept them from) a disqualified person?	Yes	X No		· [
		compensation to, or pay or reimburse the expenses of, a disqualified person?	Yes	X No			I II
	(5) Tran for the	sfer any income or assets to a disqualified person (or make any of either available he benefit or use of a disqualified person)?	Yes	XNo			 - - -
	(6) Agre found of go	ee to pay money or property to a government official? (Exception. Check 'No' if the dation agreed to make a grant to or to employ the official for a period after termination overnment service, if terminating within 90 days)	Yes	ΧNο			
b	If any ar Regulation	nswer is 'Yes' to 1a(1)–(6), did any of the acts fail to qualify under the exceptions describe ons section 53 4941(d)-3 or in a current notice regarding disaster assistance? See instructi	d in ons	_	1 b	 N	ائدا A
	Organiza	ations relying on a current notice regarding disaster assistance, check here	•	· 🔲			12
	that were	foundation engage in a prior year in any of the acts described in 1a, other than excepted a e not corrected before the first day of the tax year beginning in 2017?			1 c	1	X
2	Taxes or private o	n failure to distribute income (section 4942) (does not apply for years the foundation was a operating foundation defined in section 4942(j)(3) or 4942(j)(5)).					1
а	and 6e,	nd of tax year 2017, did the foundation have any undistributed income (lines 6d Part XIII) for tax year(s) beginning before 2017?	Yes	XNo	i		
	If 'Yes,'	list the years ▶ 20 , 20 , 20 , 20				İ	
b	Are there (relating	e any years listed in 2a for which the foundation is not applying the provisions of section 4 to incorrect valuation of assets) to the year's undistributed income? (If applying section 49	942(a)(2) 942(a)(2) to				
		s listed, answer 'No' and attach statement - see instructions)			2 b	N	/A
С		ovisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the year	ars here			i	lk l
	2 0	_ , 20 , 20 , 20					
3 a		foundation hold more than a 2% direct or indirect interest in any business se at any time during the year?	Yes	X No			
b	If 'Yes,'	did it have excess business holdings in 2017 as a result of (1) any purchase by the foundal	ion oved			. 1	
	(3) the la	alified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approximate) period approximately and the section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; appended the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to	or)				<u>i. </u>
	determin	ne if the foundation had excess business holdings in 2017)			3ь	N	/A
4 a		foundation invest during the year any amount in a manner that would jeopardize its le purposes?			4a	<u> </u>	X
b	Did the f	foundation make any investment in a prior year (but after December 31, 1969) that could				ĺ	
	ieopardiz	e its charitable purpose that had not been removed from jeopardy before the first day of year beginning in 2017?			4 b		X
BAA				Fo	rm 990)-PF (

Part VII-B Statements Regarding Activit		n 4720 May Be Req	uired (continue	d)	
5 a During the year, did the foundation pay or incur a	•				Yes No
(1) Carry on propaganda, or otherwise attemp	_		Yes	X No	
(2) Influence the outcome of any specific pub on, directly or indirectly, any voter registra	X No				
(3) Provide a grant to an individual for travel,			∐ Yes	X No	
(4) Provide a grant to an organization other than in section 4945(d)(4)(A)? See instructions	a charitable, etc , organi	ization described	Yes	X No	
(5) Provide for any purpose other than religio educational purposes, or for the prevention	n of cruelty to children	or animals?	Yes	X No	
b If any answer is 'Yes' to 5a(1)—(5), did any of described in Regulations section 53 4945 or in a See instructions	the transactions fail to current notice regarding o	qualify under the exce disaster assistance?	ptions		5b N/A
Organizations relying on a current notice rega	rding disaster assistanc	ce, check here	•	· 🗍	1 315
c If the answer is 'Yes' to question 5a(4), does tax because it maintained expenditure respon If 'Yes,' attach the statement required by Regi	sibility for the grant?	•	N/A Yes	□ No	
6 a Did the foundation, during the year, receive an on a personal benefit contract?	ny funds, directly or ind	irectly, to pay premium	s \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	XNo	
b Did the foundation, during the year, pay prem	iums, directly or indirec	tly, on a personal bene	fit contract?		6b X
If 'Yes' to 6b, file Form 8870	dation - mark , to - much			w.	
7 a At any time during the tax year, was the found b If 'Yes,' did the foundation receive any proceed				X No N/A	7b
Part VIII Information About Officers, D					
and Contractors	1.2	·			
List all officers, directors, trustees, and found	T		r .		
(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions employee bene plans and defer compensation	fit (e)	Expense account, other allowances
MORDECHAI KLEIN	Trustee	0.		0.	0.
28 BLUBERRY HILL	1.00			ŀ	
MONSEY, NY 10952					
RACHEL KLEIN	Trustee	0.		o.	0.
28_BLUEBERRY_HILL_ROAD MONSEY, NY 10952	0				
2 Compensation of five highest-paid employees (or	ther than those included	on line 1 – see instructio			
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d)Contributions employee bene plans and deferi compensation	fit (e)	Expense account, other allowances
None					
					. <u>-</u>
·····			-		
Total number of other employees paid over \$50,000)			•	0

3 Five highest-paid independent contractors for professional services. See instru	uctions. If none, enter 'NONE.'	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
None		
T-1-1 (-1) (-1) (-1)	•	
Total number of others receiving over \$50,000 for professional services	1	0
RartlX-All Summary of Direct Charitable Activities		
to the foundation's four largest direct should be admitted division the territory leaded values to tetrated in	ermetion such as the number of	
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical info organizations and other beneficiaries served, conferences convened, research papers produced, etc.	ormation such as the number of	Expenses
1 N/A		
2		
2		
3		
4		
Part IX: By Summary of Program-Related Investments (see instruction		
Describe the two largest program-related investments made by the foundation during the tax	x year on lines 1 and 2	Amount
1 <u>N/A</u>	- 	
		 -
2		
	- -	
All other program-related investments. See instructions		
All other program-related investments See instructions 3		

6

31,569.

	27-430401	
PartiX Minimum Investment Return (All domestic foundations must complete this part. I see instructions.)	-oreign four	idations,
1 Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes a Average monthly fair market value of securities	1 a	
b Average of monthly cash balances	1 b	2,193.
c Fair market value of all other assets (see instructions)	1 c	
d Total (add lines 1a, b, and c)	1 d	2,193.
e Reduction claimed for blockage or other factors reported on lines 1a and		
1c (attach detailed explanation)	0.	
2 Acquisition indebtedness applicable to line 1 assets	2	0.
3 Subtract line 2 from line 1d	3	2,193.
4 Cash deemed held for charitable activities Enter 1-1/2% of line 3 (for greater amount, see instructions)	4	33.
5 Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	2,160.
6 Minimum investment return. Enter 5% of line 5.	6	108.
PartiXI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operand certain foreign organizations, check here □ and do not complete this part.		
1 Minimum investment return from Part X, line 6	1	108.
2 a 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	2 c	
3 Distributable amount before adjustments Subtract line 2c from line 1	3	108.
4 Recoveries of amounts treated as qualifying distributions	4	
5 Add lines 3 and 4	5	108.
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	108.
Part XIII 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	1 a	31,569.
b Program-related investments — total from Part IX-B	1 b	
2 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3 Amounts set aside for specific charitable projects that satisfy the		
a Suitability test (prior IRS approval required)	3 a	
b Cash distribution test (attach the required schedule).	3 Б	
4 Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8; and Part XIII, line 4	4	31,569.
5 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income Enter 1% of Part I, line 27b See instructions	5	

Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years

6 Adjusted qualifying distributions. Subtract line 5 from line 4

BAA

Form **990-PF** (2017)

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2016	(c) 2016	(d) 2017
1 Distributable amount for 2017 from Part XI, line 7				108.
2 Undistributed income, if any, as of the end of 2017			1	100.
a Enter amount for 2016 only		1	0.	, 10°
b Total for prior years 20, 20, 20		0.		
3 Excess distributions carryover, if any, to 2017			,	
a From 2012 101, 263.				
b From 2013 61,392.		1		1
c From 2014 81,272.	, , ,			
d From 2015 . 46, 420.	•		, ,	
e From 2016 54, 048.			;	ţ j `
f Total of lines 3a through e	344,395.	1	1	
4 Qualifying distributions for 2017 from Part		1 1	;	1 1
XII, line 4 \$ 31,569.		1)	<u> </u>	ij 🛶
a Applied to 2016, but not more than line 2a		٠, ١	0.	. I.
 b Applied to undistributed income of prior years (Election required — see instructions) 		0.		, , , <u>, , , , , , , , , , , , , , , , </u>
c Treated as distributions out of corpus				, ,
(Election required - see instructions)	0.		(1 1 .
d Applied to 2017 distributable amount		,1		108.
e Remaining amount distributed out of corpus	31,461.	, 1		
5 Excess distributions carryover applied to 2017 (If an amount appears in column (d), the	0.	,, ,,		0.
same amount must be shown in column (a))		1		
	*		L	
6 Enter the net total of each column as	- 22 2	. or '	∜ •	1 1 2 - 1
indicated below:	275 056	's 1	,	, , , , , , , , , , , , , , , , , , ,
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	375,856.	·		' 1 J.
b Prior years' undistributed income Subtract line 4b from line 2b		0.	,	
c Enter the amount of prior years' undistributed			į	14
income for which a notice of deficiency has been issued, or on which the section 4942(a)				
tax has been previously assessed		0.		((:
d Subtract line 6c from line 6b Taxable		_		
amount – see instructions		0.	1 '	1
e Undistributed income for 2016 Subtract line 4a from line 2a Taxable amount — see instructions		1	0.	1
Tille 2a Taxable alliquit — See Histi uctions			<u> </u>	- 1
f Undistributed income for 2017 Subtract lines			:	
4d and 5 from line 1. This amount must be distributed in 2018.				0.
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).	0.	' .		1 1
8 Excess distributions carryover from 2012 not				, ,
applied on line 5 or line 7 (see instructions)	101,263.	',		* *
9 Excess distributions carryover to 2018.		, ; , ;		1, 6.2
Subtract lines 7 and 8 from line 6a	274,593.	, , ,		S 1 /
10 Analysis of line 9		,	1	1 14
a Excess from 2013 61, 392.		1	,	
b Excess from 2014 81, 272.	ļ		1	,
c Excess from 2015 46, 420.			Ą	
d Excess from 2016 54, 048.		1		
e Excess from 2017 31, 461.	<u> </u>	, i		1 11

Form 990-PF (2017) ZICHRON AV TRUST				27-438481	
Part XIV: Private Operating Founda	<u>_</u>				N/A
1 a If the foundation has received a ruling or detical is effective for 2017, enter the date of the	ruling	,			
b Check box to indicate whether the founda		rating foundation de		4942(J)(3) or	4942(j)(5)
2a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for	Tax year (a) 2017	(b) 2016	Prior 3 years (c) 2015	(d) 2014	(e) Total
each year listed b 85% of line 2a					
c Qualifying distributions from Part XII,			<u> </u>		
line 4 for each year listed d Amounts included in line 2c not used directly					
for active conduct of exempt activities.					
e Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c				/	
3 Complete 3a, b, or c for the alternative test relied upon					
a 'Assets' alternative test - enter:					
(1) Value of all assets					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b 'Endowment' alternative test — enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed					
c 'Support' alternative test - enter					
 Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties) 					
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from an exempt organization					
(4) Gross investment income	(
Part XVi Supplementary Information assets at any time during the	(Complete this	part only if the structions.)	foundation had	\$5,000 or more	in
Information Regarding Foundation Mana- a List any managers of the foundation who have close of any tax year (but only if they have MORDECHAI KLEIN	gers: e contributed more th	an 2% of the total co	ntributions received section 507(d)(2))	by the foundation bef	ore the
b List any managers of the foundation who own a partnership or other entity) of which the None	10% or more of the foundation has a 10	stock of a corporation 0% or greater intere	n (or an equally large st	portion of the owner	ship of
2 Information Regarding Contribution, Grant, Check here X if the foundation only ma requests for funds If the foundation make 2a, b, c, and d See instructions	akes contributions to	preselected charitable			
a The name, address, and telephone number of	r email address of the	e person to whom app	plications should be	addressed	
b The form in which applications should be	submitted and infor	mation and material	s they should inclu	de	
c Any submission deadlines					
d Any restrictions or limitations on awards,	such as by geograp	hical areas, charitab	ole fields, kinds of i	nstitutions, or other	factors

3 Grants and Contributions Paid During the Ye	ar or Approved for Fut	ure Paymen	t	
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient	Contribution	
a Paid during the year				
See Statement 4				
	ı			
			,	
			:	
Total			► 3a	31,569.
b Approved for future payment				
Total			S 61	
ı oldi			► 3b	

Enter gross amounts unless otherwise indicated	Unrelate	ed business income	Exclude	by section 512, 513, or 514	(e)
Program service revenue	(a) Business code	(b) Amount	(c) Exclu- sion code	(d) Amount	Related or exempt function income (See instructions)
a			1 0000		
b					
С					
d					
е					
f					
g Fees and contracts from government agencies			ļ .		
2 Membership dues and assessments			ļ		
3 Interest on savings and temporary cash investments			ļ <u>-</u> .		
4 Dividends and interest from securities	F 5,	923 3 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	e e (45 c	17 3 4 4 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	1344 th 24 18 mg.
5 Net rental income or (loss) from real estate a Debt-financed property		21 12 15 15 15 15 15 15 15 15 15 15 15 15 15	411	1793 A 1 1 1 1 1 1 1	4. 11 11 11 27
b Not debt-financed property			<u> </u>		
6 Net rental income or (loss) from personal property					
7 Other investment income			+	<u>-</u>	
8 Gain or (loss) from sales of assets other than inventory			<u> </u>		
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory			 		
11 Other revenue	Martinton was to and Aminimphosphilips	morning the same and the same of the same	سا الس	was an amount of the same	-11:
a	<u> </u>				
b					
С					
d					
e					
12 Subtotal Add columns (b), (d), and (e)			#11		
13 Total. Add line 12, columns (b), (d), and (e)				13	0.
See worksheet in line 13 instructions to verify calculation	•				
Part XVI-B. Relationship of Activities to the	•		<u>-</u>		
Line No. Explain below how each activity for which is accomplishment of the foundation's exempt	ncome is rep t purposes (o	orted in column (e) of F ther than by providing t	Part XVI- funds for	A contributed important such purposes) (See i	ily to the nstructions)
N/A					15511
					. <u>. </u>
			-		
	•				
		 	<u></u>		·
* "					
				-	
1					
					

PartiXVIII Information Regarding Transfers to and Transactions and Relationships With Noncharitable Exempt Organizations

d free a T	lescribe elating fransfe (1) Cas (2) Oth (2) Puri (3) Ren (4) Ren (5) Loa (6) Per (6) Eharing france good	er assets ansactions es of assets to a i chases of assets ital of facilities, en mbursement arran ns or loan guaran formance of servi of facilities, equi nswer to any of th is, other assets, or	ic) of the Code (cizations? Ing foundation to the concharitable expression and the concharitable expression and the code is the code of t	empt organizable exempt er assets hip or fundralists, other as	ection 501(c)(3 table exempt of zation t organization aising solicitation seets, or paid the following so	ons employeethedule	ees Columdation of	n (b) should a	ways show	the fair r	1 a (1) 1 a (2) 1 b (1) 1 b (2) 1 b (3) 1 b (4) 1 b (5) 1 b (6) 1 c	Yes	X X X X X X X X X
		nsaction or sharin							·				
(a) Line	e no	(b) Amount involved	(c) Name	of noncharitabl	e exempt organiza	tion	(d	Description of tra	insters, transac	tions, and	sharing arrar	gement	<u>s</u>
N/A			<u> </u>	- "=							-		
	-												
			+		· · · · · ·								
						1							
								••••••					
						<u> </u>		<u></u>					
											 		
		 											
d	escribe	undation directly or ed in section 501(complete the foll	c) of the Code (d	ed with, or rel other than se	ated to, one or ection 501(c)(3	more ta: 3)) or in	x-exemp section	ot organizations i 527?			Yes	X	No
) Name of organia		(b)	Type of organ	nization			c) Description	on of rela	ationship		
N/A	<u>,</u>				<u> </u>			<u> </u>			•	 -	
	•												
		penalties of perjury, I de and complete Declara								knowledge	e and belief, i	t is true	
Sign Here	D	× 7/	Dake	Kli	(- ^	1-(名	•		ougo		May the I this return preparer	n with the	ie .
	Signa	ture of officer or truster	e		Date	- 1		<u> Trustee </u>			See instri	uctions Yes	¬ _{No}
	1 3.4	Print/Type preparer's		Prep	arer's signature	•	•	Date	Check	X ıf	PTIN	162	140
ם:ים					-	dman	Eλ		self-emp	_	P00236	321	
Paid		Aharon Fri			aron Frie			.l <u></u>				1001	
Prepa		Firm's name	Aharon Fr			d' TU	٠.		Firm's EIN	41-2	710676		
Use C	ліу	Firm's address	5 Remsen		surce 1				Phone no	(01E	\ /DE. /	2000	
BAA		<u> </u>	Monsey, N	1 10332					I none no	(045)) <u>425-(</u> Form 99 0		2017
											こういい マダ	J-FF (.	4UI/)

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.irs.gov/Form990 for the latest information. OMB No 1545-0047

2017

Schedule B (Form 990, 990-EZ, or 990-PF) (2017)

Name of the organization		Employer identification number
ZICHRON AV TRUST		27-4384817
Organization type (check one)		
Filers of:	Section:	
Form 990 or 990-EZ	501(c)() (enter number) organiza	ation
	4947(a)(1) nonexempt charitable trust n	not treated as a private foundation
	527 political organization	
Form 990-PF	X 501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust to	reated as a private foundation
	501(c)(3) taxable private foundation	
		<u></u>
Check if your organization is covered by	the General Rule or a Special Rule.	
Note. Only a section 501(c)(7), (8),	or (10) organization can check boxes for both the Gener	ral Rule and a Special Rule. See instructions
General Rule		•
X For an organization filing Form 9 property) from any one contribut	990, 990-EZ, or 990-PF that received, during the year, cor Complete Parts I and II See instructions for determ	ontributions totaling \$5,000 or more (in money or inning a contributor's total contributions
Special Rules		
For an organization described in under sections 509(a)(1) and 170(b)	section 501(c)(3) filing Form 990 or 990-EZ that met the b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), or, during the year, total contributions of the greater of (ii) Form 990-EZ, line 1 Complete Parts I and II	. Part II. line 13, 16a, or 16b, and that
during the year, total contribution	section 501(c)(7), (8), or (10) filing Form 990 or 990-E2 ns of more than \$1,000 <i>exclusively</i> for religious, charital of cruelty to children or animals. Complete Parts I, II, an	ble, scientific, literary, or educational
during the year, contributions ex \$1,000 If this box is checked, e charitable, etc., purpose Don't of	section 501(c)(7), (8), or (10) filing Form 990 or 990-Exclusively for religious, charitable, etc., purposes, but no inter here the total contributions that were received during complete any of the parts unless the General Rule applies, charitable, etc., contributions totaling \$5,000 or more	o such contributions totaled more than ng the year for an <i>exclusively</i> religious, les to this organization because
990-PF), but it must answer 'No' on	overed by the General Rule and/or the Special Rules do Part IV, line 2, of its Form 990; or check the box on lini t meet the filing requirements of Schedule B (Form 990	ie H of its Form 990-EZ or on its Form 990-PF,

BAA For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF.

	B (Form 990, 990-EZ, or 990-PF) (2017)	Page	1 of 1 of Part
Name of org	ON AV TRUST		oyer identification number -4384817
Part I	Contributors (see instructions). Use duplicate copies of Part I if additional space	is needed	
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	MOTTY'S SUPERMARKET 19 MAIN ST MONSEY, NY 10952	\$ 25,900	Person X Payroll Noncash (Complete Part II for noncash contributions)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	BAIS HAMEDRASH YESHIAS ISRAEL 1315 54TH STREET BROOKLYN, NY 11219	\$7,900	Person X Payroll Noncash (Complete Part II for noncash contributions)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
~ ~ ~		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Complete Part II for noncash contributions)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash Complete Part II for noncash contributions)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
BAA	TEEA0702L 08/09/17	Schedule B (Form	990, 990-EZ, or 990-PF) (2017)

Page

1 to 1 of Part II

ZICHRON AV TRUST

Employer identification number

27-4384817

Part II	Noncash Property (see instructions) Use duplicate copies of Part II if additional sp	pace is needed	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
	N/A		
		 \$	
(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
	}	\$ 	
BAA	Sche	dule B (Form 990, 990-E	Z. or 990-PF) (2017

	3 (Form 990, 990-EZ, or 990-PF) (2017)		Page 1 to	1 of Part III		
Name of organ	N AV TRUST	,		r identification number 384817		
Partillia	Exclusively religious, charitable, et or (10) that total more than \$1,000 for the following line entry For organizations or contributions of \$1,000 or less for the year Use duplicate copies of Part III if additional	ne year from any one contribut ompleting Part III, enter the total of (Enter this information once See	zations described in secti tor. Complete columns (a) through (of of exclusively religious, charitable	on 501(c)(7), (8),		
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	Description of	(d) how gift is held		
	N/A					
	Transferee's name, addres	(e) Transfer of gift s, and ZIP + 4	(e) ransfer of gift Relationship of transferor to t			
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	Description of	(d) how gift is held		
	Transferee's name, address	(e) Transfer of gift s, and ZIP + 4	Relationship of transferor to transferee			
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	Description of	d) how gift is held		
	Transferee's name, address	Relationship of transferor to transferee				
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	Description of	d) how gift is held		
	Transferee's name, address	(e) Transfer of gift s, and ZIP + 4	Relationship of transferor to transferee			
-						

2017	Federal Sta	tements		Page 1		
	ZICHRON AV	ZICHRON AV TRUST				
Statement 1 Form 990-PF, Part I, Line 16b Accounting Fees		•				
ACCOUNTING	(a) Expense <u>per Book</u> \$ 1,49 Total \$ 1,49	s Inco 95.	ment Adjusted			
Statement 2 Form 990-PF, Part I, Line 23 Other Expenses						
Amortization Bank Charges	<u> </u>	s Invest		N/A		
Statement 3 Form 990-PF, Part II, Line 15 Other Assets						
Net Intangible Assets		Tota	<u>Book Value</u> \$ 1,460.	Fair Market Value 0.		
Statement 4 Form 990-PF, Part XV, Line 3a Recipient Paid During the Year						
Name and Address	Donee <u>Relationship</u>	Found- ation Status	Purpose of Grant	Amount		
CONG NOAM ELIEZER SKULEN 4 BLUEBERY HILL SPRING VALLEY NY 10977	None	Exempt	GENERAL CONTRIBUTION	\$ 14,680		
CONG SEDILKOV 19 SAM LAW MONSEY NY 10952	None	Exempt	GENERAL CONTRIBUTION	725		
UNITED TALMUDICAL ACADEMY OF MONSEY INC 89 S MAIN ST	None	Exempt	GENERAL CONTRIBUTION	2,800		

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40	ı	•

Federal Statements

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ZICHRON AV TRUST

27-4384817

Statement 4 (continued) Form 990-PF, Part XV, Line 3a Recipient Paid During the Year

Name and Address	Donee <u>Relationship</u>	Found- ation Status	Purpose of Grant	Amount
CONGREGATION MESIVTA OHR TORAH INC PO BOX 451 MONSEY NY 10952	None	Exempt	GENERAL CONTRIBUTION	\$ 440.
YESHIVA TZOIN YOSEF PUPA INC 15 WIDMAN CT SPRING VALLEY NY 10977	None	Exempt	GENERAL CONTRIBUTION	1,200.
CONGREGATION YESHIVAS VIZNITS INC PO BOX 446 MONSEY NY 10952	None	Exempt	GENERAL CONTRIBUTION	180.
TECHNOLOGY AWARENESS GROUP 31 HERRICK AVE UNIT B SPRING VALLEY NY 10977	None	Exempt	GENERAL CONTRIBUTION	102.
TORAS EMACHU INC 246 NORTH MAIN STREET SPRING VALLEY NY 10977	None	Exempt	GENERAL CONTRIBUTION	600.
CHESED LAVRAHAM 5317 13TH AVE BROOKLYN NY 11219	None	Exempt	GENERAL CONTRIBUTION	610.
EIZER BACHURIM D'MONSEY 151 ROUTE 306 MONSEY NY 10952	None	Exempt	GENERAL CONTRIBUTION	100.
CONG NASUED INC 5 HORIZON CT MONSEY NY 10952	None	EXEMPT	GENERAL CONTRIBUTION	920.
NOAM HATORAH INC 947 PARK AVE LAKEWOOD NJ 08701	None	EXEMPT	GENERAL CONTRIBUTION	500.
TZIDKAS RACHEL SKULEN HACHNASOS KALLA IN 1315 54TH STREET BROOKLYN NY 11219	None	EXEMPT	GENERAL CONTRIBUTION	180.
BAIS MEDRASH BNAI NAFTALI YESHAYA CORP 82 FOREST RD UNIT 302 MONROE NY 10950	None	EXEMPT	GENERAL CONTRIBUTION	180.

2017	Federal Statements
	ZICHRON AV TRUST

27-4384817

Page 3

Statement 4 (continued)
Form 990-PF, Part XV, Line 3a
Recipient Paid During the Year

Name and Address	Donee Relationship	Found- ation Status	Purpose of Grant	Amount
CONGREGATION BELZER SHTIBEL OF SV 26 DORSET ROAD SPRING VALLEY NY 10977	None	EXEMPT	GENERAL CONTRIBUTION	\$ 1,000.
CHASDEI ELIEZER INC 3047 AVENUE U, 2ND FL BROOKLYN NY 11229	None	EXEMPT	GENERAL CONTRIBUTION	202.
CONG BARDITCHEV 21 RITA AVENUE MONSEY NY 10952	None	EXEMPT	GENERAL CONTRIBUTION	700.
YESHIVA INSTITUTE DIVREI SHMUEL INC 2 PHYLLIS TERRACE MONSEY NY 10952	None	EXEMPT	GENERAL CONTRIBUTION	300.
CONG EIZER LAMUZEN INC 31 WARSOFF PL BROOKLYN NY 11205	None	EXEMPT	GENERAL CONTRIBUTION	1,000.
CONGREGATION TIFERETH ISRAEL 55 WEST MAPLE AVENUE MONSEY NY 10952	None .	EXEMPT	GENERAL CONTRIBUTION	200.
KHAL IMREI CHAIM 3054 BEDFORD AVE BROOKLYN NY 11210	None	EXEMPT	GENERAL CONTRIBUTION	2,000.
CONGREGATION AND KOLLEL ZICHRON MENACHEM 1441 59TH STREET BROOKLYN NY 11219	None	EXEMPT	GENERAL CONTRIBUTION	1,400.
YESHIVA SHAAR EFRAIM 5 ACER CT MONSEY NY 10952	None	EXEMPT	GENERAL CONTRIBUTION	50.
CONG TAHSBAR NACHLAS CHAIM PO BOX 657 MONSEY NY 10952	None	EXEMPT	GENERAL CONTRIBUTION	500.
CONG EZRA KODESH 5218 16TH AVE BROOKLYN NY 11204	None	EXEMPT	GENERAL CONTRIBTUION	1,000.
			Tot	al <u>\$ 31,569.</u>