



Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)		
		Beginning of year	End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value
Assets	1 Cash—non-interest-bearing . . . . .	331,250	291,825	291,825
	2 Savings and temporary cash investments . . . . .	4,299,290	4,672,540	4,672,540
	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 ▶ _____			
	8 Inventories for sale or use . . . . .			
	9 Prepaid expenses and deferred charges . . . . .	50,830	78,721	78,721
	10a Investments—U S and state government obligations (attach schedule)			
	b Investments—corporate stock (attach schedule) . . . . .	13,591,175	14,687,704	15,696,783
	c Investments—corporate bonds (attach schedule) . . . . .	12,830,303	12,493,248	12,510,199
	11 Investments—land, buildings, and equipment basis ▶ _____ Less accumulated depreciation (attach schedule) ▶ _____			
	12 Investments—mortgage loans . . . . .			
	13 Investments—other (attach schedule) . . . . .	52,347,598	48,693,598	55,738,942
	14 Land, buildings, and equipment basis ▶ _____ 3,245 Less accumulated depreciation (attach schedule) ▶ _____	9,711	3,245	7,845
15 Other assets (describe ▶ _____)	17,260,900	17,260,900	28,500,000	
16 <b>Total assets</b> (to be completed by all filers—see the instructions Also, see page 1, item I)	100,721,057	98,181,781	117,496,855	
Liabilities	17 Accounts payable and accrued expenses . . . . .			
	18 Grants payable . . . . .			
	19 Deferred revenue . . . . .			
	20 Loans from officers, directors, trustees, and other disqualified persons			
	21 Mortgages and other notes payable (attach schedule). . . . .			
	22 Other liabilities (describe ▶ _____)	97,300	89,440	
	23 <b>Total liabilities</b> (add lines 17 through 22) . . . . .	97,300	89,440	
Net Assets or Fund Balances	<b>Foundations that follow SFAS 117, check here</b> ▶ <input type="checkbox"/> <b>and complete lines 24 through 26 and lines 30 and 31.</b>			
	24 Unrestricted . . . . .			
	25 Temporarily restricted . . . . .			
	26 Permanently restricted . . . . .			
	<b>Foundations that do not follow SFAS 117, check here</b> ▶ <input checked="" type="checkbox"/> <b>and complete lines 27 through 31.</b>			
	27 Capital stock, trust principal, or current funds . . . . .	100,623,757	98,092,341	
	28 Paid-in or capital surplus, or land, bldg , and equipment fund			
	29 Retained earnings, accumulated income, endowment, or other funds			
30 <b>Total net assets or fund balances</b> (see instructions) . . . . .	100,623,757	98,092,341		
31 <b>Total liabilities and net assets/fund balances</b> (see instructions) .	100,721,057	98,181,781		

**Part III Analysis of Changes in Net Assets or Fund Balances**

1 Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return) . . . . .	1	100,623,757
2 Enter amount from Part I, line 27a . . . . .	2	-1,864,868
3 Other increases not included in line 2 (itemize) ▶ _____	3	
4 Add lines 1, 2, and 3 . . . . .	4	98,758,889
5 Decreases not included in line 2 (itemize) ▶ _____	5	666,548
6 Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30 .	6	98,092,341

**Part IV Capital Gains and Losses for Tax on Investment Income**

(a) List and describe the kind(s) of property sold (e g , real estate, 2-story brick warehouse, or common stock, 200 shs MLC Co )		(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr )	(d) Date sold (mo , day, yr )
<b>1a</b> See Additional Data Table				
<b>b</b>				
<b>c</b>				
<b>d</b>				
<b>e</b>				

  

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
<b>a</b> See Additional Data Table			
<b>b</b>			
<b>c</b>			
<b>d</b>			
<b>e</b>			

  

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	
<b>a</b> See Additional Data Table			
<b>b</b>			
<b>c</b>			
<b>d</b>			
<b>e</b>			

  

<b>2</b> Capital gain net income or (net capital loss)	{ If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7	<b>2</b>	3,027,843
<b>3</b> Net short-term capital gain or (loss) as defined in sections 1222(5) and (6) If gain, also enter in Part I, line 8, column (c) (see instructions) If (loss), enter -0- in Part I, line 8		<b>3</b>	-210,115

**Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income**

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income )

If section 4940(d)(2) applies, leave this part blank

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period?



Yes



No

If "Yes," the foundation does not qualify under section 4940(e) Do not complete this part

**1** Enter the appropriate 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 noncharitable-use assets	(d) Distribution ratio (col (b) divided by col (c))
2017	4,678,537	97,462,303	0 04800
2016	2,407,441	91,141,245	0 02641
2015	5,715,996	96,687,185	0 05912
2014	3,973,231	98,477,458	0 04035
2013	2,899,464	97,578,141	0 02971

  

<b>2</b> Total of line 1, column (d)	<b>2</b>	0 203597
<b>3</b> Average distribution ratio for the 5-year base period—divide the total on line 2 by 5 0, or by the number of years the foundation has been in existence if less than 5 years	<b>3</b>	0 040719
<b>4</b> Enter the net value of noncharitable-use assets for 2018 from Part X, line 5	<b>4</b>	97,708,236
<b>5</b> Multiply line 4 by line 3	<b>5</b>	3,978,582
<b>6</b> Enter 1% of net investment income (1% of Part I, line 27b)	<b>6</b>	41,699
<b>7</b> Add lines 5 and 6	<b>7</b>	4,020,281
<b>8</b> Enter qualifying distributions from Part XII, line 4	<b>8</b>	5,856,512

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate See the Part VI instructions

**Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see instructions)**

<b>1a</b>	Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter "N/A" on line 1 Date of ruling or determination letter _____ (attach copy of letter if necessary—see instructions)		
<b>b</b>	Domestic foundations that meet the section 4940(e) requirements in Part V, check here <input checked="" type="checkbox"/> and enter 1% of Part I, line 27b . . . . .	<b>1</b>	41,699
<b>c</b>	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col (b)		
<b>2</b>	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	<b>2</b>	
<b>3</b>	Add lines 1 and 2. . . . .	<b>3</b>	41,699
<b>4</b>	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	<b>4</b>	
<b>5</b>	<b>Tax based on investment income.</b> Subtract line 4 from line 3. If zero or less, enter -0- . . . . .	<b>5</b>	41,699
<b>6</b>	Credits/Payments		
<b>a</b>	2018 estimated tax payments and 2017 overpayment credited to 2018	<b>6a</b>	111,918
<b>b</b>	Exempt foreign organizations—tax withheld at source . . . . .	<b>6b</b>	
<b>c</b>	Tax paid with application for extension of time to file (Form 8868) . . . . .	<b>6c</b>	15,000
<b>d</b>	Backup withholding erroneously withheld . . . . .	<b>6d</b>	
<b>7</b>	Total credits and payments. Add lines 6a through 6d. . . . .	<b>7</b>	126,918
<b>8</b>	Enter any <b>penalty</b> for underpayment of estimated tax. Check here <input checked="" type="checkbox"/> if Form 2220 is attached	<b>8</b>	
<b>9</b>	<b>Tax due.</b> If the total of lines 5 and 8 is more than line 7, enter <b>amount owed</b> . . . . . <b>▶</b>	<b>9</b>	
<b>10</b>	<b>Overpayment.</b> If line 7 is more than the total of lines 5 and 8, enter the <b>amount overpaid</b> . . . . . <b>▶</b>	<b>10</b>	85,219
<b>11</b>	Enter the amount of line 10 to be <b>Credited to 2019 estimated tax</b> <b>▶</b> 85,219 <b>Refunded</b> <b>▶</b>	<b>11</b>	

**Part VII-A Statements Regarding Activities**

	Yes	No
<b>1a</b> During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? . . . . .	<b>1a</b>	No
<b>b</b> Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? (see Instructions for definition). . . . . <i>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</i>	<b>1b</b>	No
<b>c</b> Did the foundation file <b>Form 1120-POL</b> for this year? . . . . .	<b>1c</b>	No
<b>d</b> Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year <b>(1)</b> On the foundation <b>▶</b> \$ _____ <b>(2)</b> On foundation managers <b>▶</b> \$ _____		
<b>e</b> Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers <b>▶</b> \$ _____		
<b>2</b> Has the foundation engaged in any activities that have not previously been reported to the IRS? . . . . . <i>If "Yes," attach a detailed description of the activities</i>	<b>2</b>	No
<b>3</b> 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? <i>If "Yes," attach a conformed copy of the changes</i> . . . . .	<b>3</b>	No
<b>4a</b> Did the foundation have unrelated business gross income of \$1,000 or more during the year? . . . . .	<b>4a</b>	Yes
<b>b</b> If "Yes," has it filed a tax return on <b>Form 990-T</b> for this year? . . . . .	<b>4b</b>	Yes
<b>5</b> Was there a liquidation, termination, dissolution, or substantial contraction during the year? . . . . . <i>If "Yes," attach the statement required by General Instruction T</i>	<b>5</b>	No
<b>6</b> Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either • By language in the governing instrument, or • 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? . . . . .	<b>6</b>	Yes
<b>7</b> Did the foundation have at least \$5,000 in assets at any time during the year? <i>If "Yes," complete Part II, col (c), and Part XV</i> . . . . .	<b>7</b>	Yes
<b>8a</b> Enter the states to which the foundation reports or with which it is registered (see instructions) <b>▶</b> NY _____		
<b>b</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) of each state as required by General Instruction G? <i>If "No," attach explanation</i> .	<b>8b</b>	Yes
<b>9</b> Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2018 or the taxable year beginning in 2018? See the instructions for Part XIV. <i>If "Yes," complete Part XIV</i> . . . . .	<b>9</b>	No
<b>10</b> Did any persons become substantial contributors during the tax year? <i>If "Yes," attach a schedule listing their names and addresses</i> . . . . .	<b>10</b>	No

**Part VII-A Statements Regarding Activities** (continued)

<b>11</b>	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. . . . .	<b>11</b>		<b>No</b>
<b>12</b>	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. . . . .	<b>12</b>		<b>No</b>
<b>13</b>	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address <u>www rahf org</u>	<b>13</b>	<b>Yes</b>	
<b>14</b>	The books are in care of <u>LINDA LE</u> Telephone no <u>(212) 265-3115</u>			

Located at 200 PARK AVENUE SO SUITE 1705 NEW YORK NYZIP+4 10003

<b>15</b>	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of <b>Form 1041</b> —check here . . . . . <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the year . . . . . <u>15</u>			
<b>16</b>	At any time during calendar year 2018, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? . . . . . See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes", enter the name of the foreign country <u></u>	<b>16</b>	<b>Yes</b>	<b>No</b>

**Part 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.**

<b>1a</b>	During the year did the foundation (either directly or indirectly)		<b>Yes</b>	<b>No</b>
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(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)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(6) Agree to pay money or property to a government official? ( <b>Exception.</b> 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). <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
<b>b</b>	If any answer is "Yes" to 1a(1)–(6), did <b>any</b> of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions. . . . . Organizations relying on a current notice regarding disaster assistance check here. <input type="checkbox"/>	<b>1b</b>		<b>No</b>
<b>c</b>	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 2018? . . . . .	<b>1c</b>		<b>No</b>
<b>2</b>	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))			
<b>a</b>	At the end of tax year 2018, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2018? . . . . . <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "Yes," list the years <u>20</u> , <u>20</u> , <u>20</u> , <u>20</u>			
<b>b</b>	Are there any years listed in 2a for which the foundation is <b>not</b> 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 <b>all</b> years listed, answer "No" and attach statement—see instructions). . . . .	<b>2b</b>		<b>No</b>
<b>c</b>	If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here <u>20</u> , <u>20</u> , <u>20</u> , <u>20</u>			
<b>3a</b>	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? . . . . . <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
<b>b</b>	If "Yes," did it have excess business holdings in 2018 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 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 2018). . . . .	<b>3b</b>		<b>No</b>
<b>4a</b>	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	<b>4a</b>		<b>No</b>
<b>b</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 2018?	<b>4b</b>		<b>No</b>

**Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required** (continued)

<b>5a</b>	During the year did the foundation pay or incur any amount to		<b>Yes</b>	<b>No</b>
(1)	Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(2)	Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(3)	Provide a grant to an individual for travel, study, or other similar purposes?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(4)	Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? See instructions.	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(5)	Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
<b>b</b>	If any answer is "Yes" to 5a(1)–(5), did <b>any</b> of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance? See instructions.		<b>5b</b>	<b>No</b>
	Organizations relying on a current notice regarding disaster assistance check here.	<input type="checkbox"/>		
<b>c</b>	If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? If "Yes," attach the statement required by Regulations section 53.4945–5(d)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
<b>6a</b>	Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<b>6b</b>	<b>No</b>
<b>b</b>	Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? If "Yes" to 6b, file Form 8870			
<b>7a</b>	At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<b>7b</b>	<b>No</b>
<b>b</b>	If yes, did the foundation receive any proceeds or have any net income attributable to the transaction?			
<b>8</b>	Is the foundation subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment during the year?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		

**Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors**

<b>1 List all officers, directors, trustees, foundation managers and their compensation. See instructions</b>				
<b>(a)</b> Name and address	<b>(b)</b> Title, and average hours per week devoted to position	<b>(c)</b> Compensation (If not paid, enter -0-)	<b>(d)</b> Contributions to employee benefit plans and deferred compensation	<b>(e)</b> Expense account, other allowances
See Additional Data Table				
<b>2 Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, enter "NONE."</b>				
<b>(a)</b> Name and address of each employee paid more than \$50,000	<b>(b)</b> Title, and average hours per week devoted to position	<b>(c)</b> Compensation	<b>(d)</b> Contributions to employee benefit plans and deferred compensation	<b>(e)</b> Expense account, other allowances
RACHAEL A WATMAN 3170 DUKE ROAD POWHATAN, VA 23139	VP PROGRAMS 40 00	86,000	12,040	
<b>Total</b> number of other employees paid over \$50,000.				<input type="checkbox"/>

**Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)**
**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
DAVIS WARD & HOCHMAN LLP 150 E 58 STREET NEW YORK, NY 10155	AUDIT AND TAX ACCTNG	65,000
MORGAN STANLEY 399 PARK AVE NEW YORK, NY 10022	INVESTMENT ADVISORY	254,516
OFFIT CAPITAL ADVISERS 485 LEXINGTON AVENUE NE YORK, NY 10017	INVESTMENT ADVISORY	345,523

**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 statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.

	Expenses
<b>1</b> N/A	0
<b>2</b>	
<b>3</b>	
<b>4</b>	

**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
<b>1</b>	
<b>2</b>	
All other program-related investments See instructions	
<b>3</b>	
<b>Total.</b> Add lines 1 through 3 . . . . . <b>▶</b>	

**Part X Minimum Investment Return** (All domestic foundations must complete this part. Foreign foundations, see instructions.)

<b>1</b>	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes		
<b>a</b>	Average monthly fair market value of securities.	<b>1a</b>	98,433,858
<b>b</b>	Average of monthly cash balances.	<b>1b</b>	680,355
<b>c</b>	Fair market value of all other assets (see instructions).	<b>1c</b>	81,966
<b>d</b>	<b>Total</b> (add lines 1a, b, and c).	<b>1d</b>	99,196,179
<b>e</b>	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation).	<b>1e</b>	0
<b>2</b>	Acquisition indebtedness applicable to line 1 assets.	<b>2</b>	
<b>3</b>	Subtract line 2 from line 1d.	<b>3</b>	99,196,179
<b>4</b>	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions).	<b>4</b>	1,487,943
<b>5</b>	<b>Net value of noncharitable-use assets.</b> Subtract line 4 from line 3. Enter here and on Part V, line 4	<b>5</b>	97,708,236
<b>6</b>	<b>Minimum investment return.</b> Enter 5% of line 5.	<b>6</b>	4,885,412

**Part XI Distributable Amount** (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here ☐ and do not complete this part.)

<b>1</b>	Minimum investment return from Part X, line 6.	<b>1</b>	4,885,412
<b>2a</b>	Tax on investment income for 2018 from Part VI, line 5.	<b>2a</b>	41,699
<b>b</b>	Income tax for 2018 (This does not include the tax from Part VI).	<b>2b</b>	
<b>c</b>	Add lines 2a and 2b.	<b>2c</b>	41,699
<b>3</b>	Distributable amount before adjustments. Subtract line 2c from line 1.	<b>3</b>	4,843,713
<b>4</b>	Recoveries of amounts treated as qualifying distributions.	<b>4</b>	
<b>5</b>	Add lines 3 and 4.	<b>5</b>	4,843,713
<b>6</b>	Deduction from distributable amount (see instructions).	<b>6</b>	
<b>7</b>	<b>Distributable amount</b> as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1.	<b>7</b>	4,843,713

**Part XII Qualifying Distributions** (see instructions)

<b>1</b>	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
<b>a</b>	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26.	<b>1a</b>	5,856,512
<b>b</b>	Program-related investments—total from Part IX-B.	<b>1b</b>	
<b>2</b>	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes.	<b>2</b>	
<b>3</b>	Amounts set aside for specific charitable projects that satisfy the		
<b>a</b>	Suitability test (prior IRS approval required).	<b>3a</b>	
<b>b</b>	Cash distribution test (attach the required schedule).	<b>3b</b>	
<b>4</b>	<b>Qualifying distributions.</b> Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	<b>4</b>	5,856,512
<b>5</b>	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.	<b>5</b>	41,699
<b>6</b>	<b>Adjusted qualifying distributions.</b> Subtract line 5 from line 4.	<b>6</b>	5,814,813

**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.



**Part XIII Undistributed Income** (see instructions)

	(a) Corpus	(b) Years prior to 2017	(c) 2017	(d) 2018
<b>1</b> Distributable amount for 2018 from Part XI, line 7				4,843,713
<b>2</b> Undistributed income, if any, as of the end of 2018				
<b>a</b> Enter amount for 2017 only. . . . .			1,234,258	
<b>b</b> Total for prior years 20____, 20____, 20____				
<b>3</b> Excess distributions carryover, if any, to 2018				
<b>a</b> From 2013. . . . .				
<b>b</b> From 2014. . . . .				
<b>c</b> From 2015. . . . .				
<b>d</b> From 2016. . . . .				
<b>e</b> From 2017. . . . .				
<b>f</b> Total of lines 3a through e. . . . .				
<b>4</b> Qualifying distributions for 2018 from Part XII, line 4 ▶ \$ <u>5,856,512</u>				
<b>a</b> Applied to 2017, but not more than line 2a			1,234,258	
<b>b</b> Applied to undistributed income of prior years (Election required—see instructions). . . . .				
<b>c</b> Treated as distributions out of corpus (Election required—see instructions). . . . .	0			
<b>d</b> Applied to 2018 distributable amount. . . . .				4,622,254
<b>e</b> Remaining amount distributed out of corpus				
<b>5</b> Excess distributions carryover applied to 2018 (If an amount appears in column (d), the same amount must be shown in column (a) )				
<b>6 Enter the net total of each column as indicated below:</b>				
<b>a</b> Corpus Add lines 3f, 4c, and 4e Subtract line 5				
<b>b</b> Prior years' undistributed income Subtract line 4b from line 2b . . . . .				
<b>c</b> 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. . . . .				
<b>d</b> Subtract line 6c from line 6b Taxable amount—see instructions . . . . .				
<b>e</b> Undistributed income for 2017 Subtract line 4a from line 2a Taxable amount—see instructions . . . . .				
<b>f</b> Undistributed income for 2018 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2019 . . . . .				221,459
<b>7</b> 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). . . . .				
<b>8</b> Excess distributions carryover from 2013 not applied on line 5 or line 7 (see instructions). . . .				
<b>9 Excess distributions carryover to 2019.</b> Subtract lines 7 and 8 from line 6a . . . . .				
<b>10</b> Analysis of line 9				
<b>a</b> Excess from 2014. . . . .				
<b>b</b> Excess from 2015. . . . .				
<b>c</b> Excess from 2016. . . . .				
<b>d</b> Excess from 2017. . . . .				
<b>e</b> Excess from 2018. . . . .				

**Part XIV Private Operating Foundations** (see instructions and Part VII-A, question 9)

**1a** If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2018, enter the date of the ruling. . . . . ▶

**b** Check box to indicate whether the organization is a private operating foundation described in section ☐ 4942(j)(3) or ☐ 4942(j)(5)

	Tax year	Prior 3 years			(e) Total
	(a) 2018	(b) 2017	(c) 2016	(d) 2015	
<b>2a</b> Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed . . . . .					
<b>b</b> 85% of line 2a . . . . .					
<b>c</b> Qualifying distributions from Part XII, line 4 for each year listed . . . . .					
<b>d</b> Amounts included in line 2c not used directly for active conduct of exempt activities . . . . .					
<b>e</b> Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c . . . . .					
<b>3</b> Complete 3a, b, or c for the alternative test relied upon					
<b>a</b> "Assets" alternative test—enter					
<b>(1)</b> Value of all assets . . . . .					
<b>(2)</b> Value of assets qualifying under section 4942(j)(3)(B)(i)					
<b>b</b> "Endowment" alternative test— enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed. . . . .					
<b>c</b> "Support" alternative test—enter					
<b>(1)</b> Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties) . . . . .					
<b>(2)</b> Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii). . . . .					
<b>(3)</b> Largest amount of support from an exempt organization					
<b>(4)</b> Gross investment income					

**Part XV Supplementary Information (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year—see instructions.)**

**1 Information Regarding Foundation Managers:**

**a** List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000) (See section 507(d)(2) )

**b** List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest

**2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:**

Check here ☒ if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. to individuals or organizations under other conditions, complete items 2a, b, c, and d. See instructions.

**a** The name, address, and telephone number or email address of the person to whom applications should be addressed

**b** The form in which applications should be submitted and information and materials they should include

**c** Any submission deadlines

**d** Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors

**Part XV** **Supplementary Information** (continued)**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)				
<b>a</b> <i>Paid during the year</i> See Additional Data Table				
<b>Total . . . . .</b> ► <b>3a</b>				
<b>b</b> <i>Approved for future payment</i>				
<b>Total . . . . .</b> ► <b>3b</b>				

Enter gross amounts unless otherwise indicated

Enter gross amounts unless otherwise indicated	Unrelated business income		Excluded by section 512, 513, or 514		(e) Related or exempt function income (See instructions )
	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	
<b>1</b> Program service revenue					
<b>a</b> _____					
<b>b</b> _____					
<b>c</b> _____					
<b>d</b> _____					
<b>e</b> _____					
<b>f</b> _____					
<b>g</b> Fees and contracts from government agencies					
<b>2</b> Membership dues and assessments. . . .					
<b>3</b> Interest on savings and temporary cash investments . . . . .			14	3,896	
<b>4</b> Dividends and interest from securities. . . .			14	1,984,158	
<b>5</b> Net rental income or (loss) from real estate					
<b>a</b> Debt-financed property. . . . .					
<b>b</b> Not debt-financed property. . . . .					
<b>6</b> Net rental income or (loss) from personal property					
<b>7</b> Other investment income. . . . .			14	35,839	
<b>8</b> Gain or (loss) from sales of assets other than inventory . . . . .			18	3,027,843	
<b>9</b> Net income or (loss) from special events					
<b>10</b> Gross profit or (loss) from sales of inventory					
<b>11</b> Other revenue					
<b>a</b> PARTNERSHIP INCOME _____					
<b>b</b> _____					
<b>c</b> _____					
<b>d</b> _____					
<b>e</b> _____					
<b>12</b> Subtotal Add columns (b), (d), and (e). .				5,051,736	

<b>13 Total.</b> Add line 12, columns (b), (d), and (e).	<b>13</b>	5,051,736
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(See worksheet in line 13 instructions to verify calculations )

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

[illegible]

## Part XVII

- 1** Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c)(3) (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?
- a** Transfers from the reporting foundation to a noncharitable exempt organization of
- (1)** Cash. . . . .
- (2)** Other assets. . . . .
- b** Other transactions
- (1)** Sales of assets to a noncharitable exempt organization. . . . .
- (2)** Purchases of assets from a noncharitable exempt organization. . . . .
- (3)** Rental of facilities, equipment, or other assets. . . . .
- (4)** Reimbursement arrangements. . . . .
- (5)** Loans or loan guarantees. . . . .
- (6)** Performance of services or membership or fundraising solicitations. . . . .
- c** Sharing of facilities, equipment, mailing lists, other assets, or paid employees. . . . .
- d** If the answer to any of the above is "Yes," complete the following schedule. Column **(b)** should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column **(d)** the value of the goods, other assets, or services received

[illegible]

- 2a** Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) (other than section 501(c)(3)) or in section 527? ☐ Yes ☒ No

**b** If "Yes," complete the following schedule

(a) Name of organization	(b) Type of organization	(c) Description of relationship

<b>Sign Here</b>	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.		
	*****	2019-11-13	*****
	_____ Signature of officer or trustee	_____ Date	_____ Title

May the IRS discuss this return with the preparer shown below  
 (see instr.) ☒ **Yes** ☐ **No**

<b>Paid Preparer Use Only</b>	Print/Type preparer's name	Preparer's Signature	Date	Check if self-employed <input type="checkbox"/>	PTIN  P01343472
	WILLIAM E SPIRO				
	Firm's name ▶ Davis Ward & Hochman LLP				Firm's EIN ▶ 20-0494412
	Firm's address ▶ 150 E 58th St 20TH Flr New York, NY 10155				Phone no (212) 230-2600

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d

List and describe the kind(s) of property sold (e g , real estate, (a) 2-story brick warehouse, or common stock, 200 shs MLC Co )	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr )	(d) Date sold (mo , day, yr )
1 CHARLES SCHWAB - 1100	P	2018-01-01	2018-12-31
1 CHARLES SCHWAB - 1100	P	2017-01-01	2018-12-31
CHARLES SCHWAB - 5542	P	2018-01-01	2018-12-31
CHARLES SCHWAB - 5542	P	2017-01-01	2018-12-31
CHARLES SCHWAB - 7408	P	2018-01-01	2018-12-31
CHARLES SCHWAB - 7824	P	2018-01-01	2018-12-31
CHARLES SCHWAB - 7824	P	2017-01-01	2018-12-31
CHARLES SCHWAB - 9718	P	2018-01-01	2018-12-31
CHARLES SCHWAB - 9718	P	2017-01-01	2018-12-31
STATE STREET - 1270	P	2018-01-01	2018-12-31

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
910,011		909,285	726
2,839,828		2,708,396	131,432
38,351		41,418	-3,067
756,830		419,698	337,132
133,268		126,642	6,626
7,913		7,259	654
610,148		350,787	259,361
587,206		601,332	-14,126
380,775		379,083	1,692
89,039		89,270	-231

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - l

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	
			726
			131,432
			-3,067
			337,132
			6,626
			654
			259,361
			-14,126
			1,692
			-231

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d			
List and describe the kind(s) of property sold (e g , real estate, (a) 2-story brick warehouse, or common stock, 200 shs MLC Co )	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr )	(d) Date sold (mo , day, yr )
STATE STREET - 1270	P	2017-01-01	2018-12-31
1 CAPITAL GAIN DIVIDENDS	P	2017-01-01	2018-12-31
MORGAN STANLEY - 012105	P	2018-01-01	2018-12-31
MORGAN STANLEY - 012106	P	2018-01-01	2018-12-31
MORGAN STANLEY - 012107	P	2018-01-01	2018-12-31
MORGAN STANLEY - 016180	P	2018-01-01	2018-12-31
MORGAN STANLEY - 016180	P	2017-01-01	2018-12-31
MORGAN STANLEY - 023508	P	2018-01-01	2018-12-31
MORGAN STANLEY - 023508	P	2017-01-01	2018-12-31
MORGAN STANLEY - 121134	P	2018-01-01	2018-12-31

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h

(e) Gross sales price	Depreciation allowed (f) (or allowable)	Cost or other basis (g) plus expense of sale	Gain or (loss) (h) (e) plus (f) minus (g)
1,311,574		1,312,217	-643
72,544			72,544
1,747,900		1,691,946	55,954
117,784		141,366	-23,582
239,752		281,143	-41,391
3,616,796		3,646,215	-29,419
1,897,103		1,430,465	466,638
1,245,109		1,350,575	-105,466
645,917		623,687	22,230
1,162,702		1,153,024	9,678

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - l

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(I) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
(i) F M V as of 12/31/69	Adjusted basis (j) as of 12/31/69	Excess of col (i) (k) over col (j), if any	
			-643
			72,544
			55,954
			-23,582
			-41,391
			-29,419
			466,638
			-105,466
			22,230
			9,678

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d

List and describe the kind(s) of property sold (e g , real estate, (a) 2-story brick warehouse, or common stock, 200 shs MLC Co )		(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr )	(d) Date sold (mo , day, yr )
MORGAN STANLEY - 121134		P	2017-01-01	2018-12-31
1	MORGAN STANLEY - 131676	P	2018-01-01	2018-12-31
	MORGAN STANLEY - 131676	P	2017-01-01	2018-12-31
	MORGAN STANLEY - 131681	P	2018-01-01	2018-12-31
	MORGAN STANLEY - 131681	P	2017-01-01	2018-12-31
	MORGAN STANLEY - 158919	P	2018-01-01	2018-12-31
	MORGAN STANLEY - 158919	P	2017-01-01	2018-12-31
	MORGAN STANLEY - 115997	P	2018-01-01	2018-12-31
	MORGAN STANLEY - 115997	P	2017-01-01	2018-12-31
	MORGAN STANLEY - 131672	P	2018-01-01	2018-12-31

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h

(e) Gross sales price	Depreciation allowed (f) (or allowable)	Cost or other basis (g) plus expense of sale	Gain or (loss) (h) (e) plus (f) minus (g)
2,160,199		1,778,396	381,803
409,173		473,817	-64,644
955,098		958,617	-3,519
6,078,120		6,203,688	-125,568
2,236,687		2,297,301	-60,614
138,469		164,974	-26,505
406,039		302,631	103,408
199,342		240,669	-41,327
441,461		456,766	-15,305
3,048,697		3,157,732	-109,035

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - l

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(I) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
(i) F M V as of 12/31/69	Adjusted basis (j) as of 12/31/69	Excess of col (i) (k) over col (j), if any	
			381,803
			-64,644
			-3,519
			-125,568
			-60,614
			-26,505
			103,408
			-41,327
			-15,305
			-109,035



**Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d**

List and describe the kind(s) of property sold (e g , real estate, (a) 2-story brick warehouse, or common stock, 200 shs MLC Co )		(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr )	(d) Date sold (mo , day, yr )
MORGAN STANLEY - 131672		P	2017-01-01	2018-12-31
1	S/T CAP GAINS FROM PS ALT INV	P	2018-01-01	2018-12-31
	L/T CAP GAINS FROM PS ALT INV	P	2017-01-01	2018-12-31

**Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h**

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
1,571,850		1,647,802	-75,952
300,608			300,608
1,617,751			1,617,751

**Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - l**

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	
			-75,952
			300,608
			1,617,751

Form 990PF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation				
(a) Name and address	Title, and average hours per week (b) devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	Expense account, (e) other allowances
LIZANNE FONTAINE	Director 1 00	0		
91 COLUMBIA HEIGHTS BROOKLYN, NY 11201				
KRISTEN CHOI	Director 1 00	0		
11616 CHENAULT STREET 1 LOS ANGELES, CA 90049				
AHRIN MISHAN	VP/Sec/Ex Dir 40 00	376,250	55,000	
200 PARK AVENUE SO STE1705 NEW YORK, NY 10003				
DAVID GOULD	Director 1 00	0		
496 EAST 17TH STREET BROOKLYN, NY 11226				
DORI JAFFE	ASST TREAS 20 00	66,000		
200 PARK AVENUE SO STE 1705 NEW YORK, NY 10003				
PAUL GARFINKLE	Director 1 00	0		
2001 SO E SAILFISH PT BLVD STUART, FL 34996				
LINDA LE	ASST SEC/VP OPS 40 00	160,000	22,400	
200 PARK AVENUE SO STE 1705 NEW YORK, NY 10003				
RAYMOND J MCGUIRE	Director 1 00	0		
388 GREENWICH ST - 39 FLOOR NEW YORK, NY 10013				
ADAM E MAX	President/Treas 1 00	0		
200 PARK AVENUE SO STE1705 NEW YORK, NY 10003				
DR JENNIFER MIERES	Director 1 00	0		
1725 YORK AVE NEW YORK, NY 10128				
MEGAN MONAHAN	Director 1 00	0		
1201 HUDSON ST HOBOKEN, NJ 07030				

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)				
<b>a</b> <i>Paid during the year</i>				
BROOKLYN ACADEMY OF MUSIC 30 LAFAYETTE AVE BROOKLYN, NY 11217	NONE	PC	ADVANCE VISUAL ARTS	389,000
INTERNATIONAL CENTER FOR PHOTOGRAPH 1114 AVENUE OF AMERICAS NEW YORK, NY 10036	NONE	PC	SUPPORT ART OF PHOTOGRAPHY	183,700
UNIVERSITY OF PENN SCHOOL OF NURSIN 418 CURIE BLVD ROOM 430 PHILADELPHIA, PA 19104	NONE	PC	SUPPORT NURSING EDUCATION	436,976
<b>Total . . . . . ▶ 3a</b>				4,660,738

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)				
<b>a</b> <i>Paid during the year</i>				
METROPOLITAN MUSEUM OF ART 1000 FIFTH AVENUE NEW YORK, NY 10028	NONE	PC	SUPPORT VISUAL ARTS	10,000
AMERICAN ACADEMY OF NURSING 1000 NW VERMONT AVE SUITE 910 WASHINGTON, DC 20005	NONE	PC	SUPPORT NURSING EDUCATION	10,000
UNIVERSITY OF PENNSYLVANIA 418 CURIE BLVD PHILADELPHIA, PA 19104	NONE	PC	SUPPORT NURSING EDUCATION	50,000
<b>Total . . . . . ▶ 3a</b>				4,660,738

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)				
<b>a</b> <i>Paid during the year</i>				
AMERICAN NURSES FOUNDATION 8515 GEORGIA AVENUE SIVER SPRING, MD 20910	NONE	PC	SUPPORT NURSING EDUCATION	72,500
UNC CHAPEL HILL250 E FRANKLIN ST CHAPEL HILL, NC 27516	NONE	PC	SUPPORT NURSING EDUCATION	640,427
NY INTL CHILDREN'S FILM FESTIVAL 225 BROADWAY NEW YORK, NY 10007	NONE	PC	SUPPORT VISUAL ARTS	2,000
<b>Total . . . . . ▶ 3a</b>				4,660,738

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)				
<b>a</b> <i>Paid during the year</i>				
NLN FOUNDATION 2600 VIRGINIA AVE NW 8TH FL WASHINGTON, DC 20037	NONE	PC	SUPPORT NURSING EDUCATION	10,000
THE SPENCE SCHOOL22 E 91 STREET NEW YORK, NY 10128	NONE	PC	SUPPORT CHILDREN'S EDUCATION	20,000
NATONAL NURSING CENTERS CONSORTIUM 1500 MARKET ST PHILADELPHIA, PA 19102	NONE	PC	SUPPORT NURSING EDUCATION	200,000
<b>Total . . . . .</b> ► <b>3a</b>				4,660,738

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)				
<b>a</b> <i>Paid during the year</i>				
ACADEMY HEALTH1150 17 STREE NW WASHINGTON, DC 20036	NONE	PC	SUPPORT NURSING RESEARCH	500
THE BROOKLYN HOSPITAL FDN 121 DEKALB AVENUE BROOKLYN, NY 11201	NONE	PC	SUPPORT HEALTH CARE	10,000
MARTIN MEMORIAL FDN INC 2135 SE OCEAN BLVD STUART, FL 34996	NONE	PC	SUPPORT NURSING EDUCATION	10,000
<b>Total . . . . . ▶ 3a</b>				4,660,738

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)				
<b>a</b> <i>Paid during the year</i>				
REGENTS UNIVERSITY OF CALIFORNIA 2450 48TH STREET SACRAMENTO, CA 95817	NONE	PC	HEALTH OF VULNERABLE POPULATON	204,432
FOUR SEASONS COMPASSION FOR LIFE 571 S ALLEN ROAD FLAT ROCK, NC 28731	NONE	PC	HEALTH OF VULNERABLE POPULATION	192,220
TRUSTEES OF THE UNIVERSITY OF PENN 3451 WALNUT ST P221 FRANKLIN BLDG PHILADELPHIA, PA 19104	NONE	PC	SUPPORT NURSING EDUCATION	5,000
<b>Total . . . . . ▶ 3a</b>				4,660,738



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)				
<b>a</b> <i>Paid during the year</i>				
UNIVERSITY OF KENTUCKY 172 FUNKHOUSER DR KINKEAD HALL 207 LEXINGTON, KY 40508	NONE	PC	HEALTH OF VULNERABLE POPULATION	201,211
JOHNS HOPKINS UNIVERSITY 525 N WOLFE STREET PINKARD 336 BALTIMORE, MD 21205	NONE	PC	SUPPORT NURSING RESEARCH	200,000
NATIONAL PROGRAM OFFICE UNIV OF PEN 418 CURIE BLVD PHILADELPHIA, PA 19104	NONE	PC	SUPPORT NURSING EDUCATION	123,366
<b>Total . . . . . ▶ 3a</b>				4,660,738

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)				
<b>a</b> <i>Paid during the year</i>				
DUKE UNIVERSITY 2200 WEST MAIN STREET SUITE 900 DURHAM, NC 27705	NONE	PC	SUPPORT NURSING RESEARCH	50,000
FJC520 8TH AVENUE 20TH FLOOR NEW YORK, NY 10018	NONE	PC	HEALTH OF VULNERABLE POPULATION	10,000
HOFSTRA UNIVERSITY 500 HOFSTRA UNIVERSITY HEMPSTEAD, NY 11549	NONE	PC	SUPPORT PERFORMING ARTS	5,000
<b>Total . . . . . ▶ 3a</b>				4,660,738

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)				
<b>a</b> <i>Paid during the year</i>				
NEW YORKERS FOR CHILDREN 450 SEVENTH AVENUE SUITE 403 NEW YORK, NY 10123	NONE	PC	SUPPORT NEEDY POPULATION	5,000
JOHNS HOPKINS UNIVERSITY CAPABLE 525 North Wolfe Street 424 BALTIMORE, MD 21205	NONE	PC	HEALTH OF VULNERABLE POPULATION	844,158
HENRY FORD HEALTH SYSTEM 1 Ford Place 5A DETROIT, MI 48202	NONE	PC	HEALTH OF VULNERABLE POPULATION	199,998
<b>Total . . . . . ▶ 3a</b>				4,660,738

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)				
<b>a</b> <i>Paid during the year</i>				
FLORIDA STATE UNIVERSITY 2010 Levy Avenue Tallahassee, FL 32310	NONE	PC	EDUCATION	150,000
OHIO STATE UNIVERSITY 1585 Neil Avenue Columbus, OH 43210	NONE	PC	EDUCATION	100,000
JOHNS HOPKINS UNIVERSITY HEI 525 N Wolfe Street Baltimore, MD 21205	NONE	PC	SUPPORT NURSING EDUCATION	50,000
<b>Total . . . . .</b> ► <b>3a</b>				4,660,738

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)				
<b>a</b> <i>Paid during the year</i>				
UNIVERSITY OF MINNESOTA 410 Church St SE Minneapolis, MN 55455	NONE	PC	SUPPORT OF HEALTH EDUCATION	50,000
UNIVERSITY OF UTAH 75 South 2000 East Salt Lake City, UT 84112	NONE	PC	EDUCATION	50,000
UNIVERSITY OF VIRGINIA PO Box 800782 McLeod Hall Charlottesville, VA 22908	NONE	PC	SUPPORT OF HEALTH EDUCATION	50,000
<b>Total . . . . . ▶ 3a</b>				4,660,738

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)				
<b>a</b> <i>Paid during the year</i>				
UNIVERSITY OF ARKANSAS 4301 West Markham St 748 Little Rock, AR 72205	NONE	PC	SUPPORT HEALTHCARE & EDUCATION	25,000
GRANTMAKERS IN AGING 2001 Jefferson Davis Hwy STE 1011 ARLINGTON, VA 22202	NONE	PC	HEALTH OF VULNERABLE POPULATION	10,000
HOSPICE AND PALLIATIVE NURSES FOUND One Penn Center West Suite 425 Pittsburgh, PA 15276	NONE	PC	SUPPORT NURSING EDUCATION	10,000
<b>Total . . . . . ▶ 3a</b>				4,660,738

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)				
<b>a</b> <i>Paid during the year</i>				
BROOKLYN MUSEUM 200 Eastern Parkway Brooklyn, NY 11238	NONE	PC	EDUCATION & ARTS	30,000
PS ARTS6701 Center Drive W Suite 550 Los Angeles, CA 90045	NONE	PC	SUPPORT OF ART EDUCATION	10,000
DREAM YARD PROJECT INC 1085 Washington Ave GROUND FLOOR Bronx, NY 10456	NONE	PC	SUPPORT CHILDREN'S ART EDUCATION	10,000
<b>Total . . . . . ▶ 3a</b>				4,660,738

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)				
<b>a</b> <i>Paid during the year</i>				
ARTS EAST NEW YORK INC 534 Livonia Avenue Brooklyn, NY 11205	NONE	PC	SUPPORT OF ART EDUCATION	10,000
IFP FISCAL SPONSORSHIP 30 John Street BROOKLYN, NY 11201	NONE	PC	SUPPORT OF FILMMAKING PROJECTS	10,000
PUBLIC HEALTH SOLUTIONS 40 Worth Street 5th Floor NEW YORK, NY 10013	NONE	PC	HEALTH OFVULNERABLEPOPULATION	3,000
<b>Total . . . . .</b> ► <b>3a</b>				4,660,738



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)				
<b>a</b> <i>Paid during the year</i>				
UNITED HOSPITAL FUND 1411 Broadway 12th Floor NEW YORK, NY 10018	NONE	PC	HEALTH OF VULNERABLE POPULATION	3,000
PRIMARY CARE DEVELOPMENT CORPORATION 45 Broadway Suite 530 NEW YORK, NY 10006	NONE	PC	SUPPORT NEEDY POPULATION	2,000
CENTER FOR URBAN COMMUNITY SERVICES 198 E 121st Street NEW YORK, NY 10035	NONE	PC	SUPPORT NEEDY POPULATION	2,000
<b>Total . . . . . ▶ 3a</b>				4,660,738

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)				
<b>a</b> <i>Paid during the year</i>				
MEMORIAL SLOAN KETTERING CANCER CEN 1275 York Avenue NEW YORK, NY 10065	NONE	PC	SUPPORT HEALTH RESEARCH	250
<b>Total . . . . .</b> ► <b>3a</b>				4,660,738

**TY 2018 Accounting Fees Schedule****Name:** THE RITA AND ALEX HILLMAN FOUNDATION**EIN:** 13-2560546**Software ID:** 18007218**Software Version:** 2018v3.1

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
AUDIT AND TAX COMPLIANCE	65,000	13,000	0	52,000

**TY 2018 General Explanation Attachment****Name:** THE RITA AND ALEX HILLMAN FOUNDATION**EIN:** 13-2560546**Software ID:** 18007218**Software Version:** 2018v3.1**General Explanation Attachment**

Identifier	Return Reference	Explanation	
1		General Explanation Supplemental Information for Form 990-PF	STATEMENT A TAXPAYER HAS EXTENSIVE HOLDINGS OF EQUITY AND FIXED INCOME SECURITIES AND HAS REALIZED CAPITAL GAINS AND LOSSES FROM NUMEROUS SECURITY TRANSACTIONS, DISPOSITION OF INVESTMENT PARTNERSHIPS AND PASS THROUGH FROM INVESTMENT PARTNERSHIPS THE HOLDINGS AND TRANSACTIONS ARE AVAILABLE FROM BOOKS AND RECORDS MAINTAINED BY THE TAXPAYER. SCHEDULE OF INVESTMENT HOLDINGS ARE HELD IN CUSTODY ACCOUNTS AND ARE MANAGED BY LICENSED INVESTMENT ADVISORS AS FOLLOWS (FAIR MARKET VALUE) SECURITY OFFIT CAP ADVISERS POLK-MORGAN STANLEY TOTAL EQUITIES 5,756,769 9,940,014 15,696,783 BONDS 7,476,575 5,033,624 12,510,199 OTHER EXCHANGE TRADED FUNDS 1,373,374 9,626,996 MUTUAL FUNDS 15,306,551 4,757,964 ALTERNATIVE INVESTMENTS 14,168,462 10,505,595 30,848,387 24,890,555 55,738,942 MISCELLANEOUS ADJUST 35,257 TOTAL OTHER 55,774,199

**General Explanation Attachment**

Identifier	Return Reference	Explanation	
2		General Explanation Supplemental Information for Form 990-PF	STATEMENT BTHE FOUNDATION IS REPORTING \$33,744 UNRELATED BUSINESS INCOME IN FORM 990T FOR THE CURRENT YEAR THIS INCOME ALL ORIGINATES FROM K-1 FORMS PROVIDED BY INVESTMENT PARTNERSHIPS THE K-1 FORMS DO NOT INCLUDE ANY INFORMATION ABOUT THE SOURCE OF THE INCOME AND ACCORDINGLY THERE ARE NO DOLLAR AMOUNTS INCLUDED ON THIS SCHEDULE

**General Explanation Attachment**

Identifier	Return Reference	Explanation	
3		General Explanation Supplemental Information for Form 990-PF	STATEMENT CINSURANCE EXPENSE INCLUDES PREMIUMS PAID FOR EMPLOY EE MEDICAL, FIRE AND THEFT AND LIABILITY COVERAGE

**TY 2018 Land, Etc.  
Schedule****Name:** THE RITA AND ALEX HILLMAN FOUNDATION**EIN:** 13-2560546**Software ID:** 18007218**Software Version:** 2018v3.1

Category / Item	Cost / Other Basis	Accumulated Depreciation	Book Value	End of Year Fair Market Value
Furniture and Fixtures	3,245		3,245	7,845

**TY 2018 Other Assets Schedule****Name:** THE RITA AND ALEX HILLMAN FOUNDATION**EIN:** 13-2560546**Software ID:** 18007218**Software Version:** 2018v3.1**Other Assets Schedule**

Description	Beginning of Year - Book Value	End of Year - Book Value	End of Year - Fair Market Value
ARTWORK EXHIBITED	17,260,900	17,260,900	28,500,000



**TY 2018 Other Decreases Schedule****Name:** THE RITA AND ALEX HILLMAN FOUNDATION**EIN:** 13-2560546**Software ID:** 18007218**Software Version:** 2018v3.1

Description	Amount
ADJUSTMENTS NOT REFLECTED IN PARTNERSHIP COST BASIS	666,548

**TY 2018 Other Expenses Schedule****Name:** THE RITA AND ALEX HILLMAN FOUNDATION**EIN:** 13-2560546**Software ID:** 18007218**Software Version:** 2018v3.1**Other Expenses Schedule**

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
ADMINISTRATIVE EXPENSE	36,629	5,494		31,135
INSURANCE (NOTE C)	120,426	12,689		107,737
OFFICE EXPENSE	3,344	502		2,842

**TY 2018 Other Income Schedule****Name:** THE RITA AND ALEX HILLMAN FOUNDATION**EIN:** 13-2560546**Software ID:** 18007218**Software Version:** 2018v3.1**Other Income Schedule**

Description	Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income
Other Investment Income	35,839		

**TY 2018 Other Liabilities Schedule****Name:** THE RITA AND ALEX HILLMAN FOUNDATION**EIN:** 13-2560546**Software ID:** 18007218**Software Version:** 2018v3.1

Description	Beginning of Year - Book Value	End of Year - Book Value
RETIREMENT PLAN OBLIGATION	97,300	89,440

**TY 2018 Other Professional Fees Schedule****Name:** THE RITA AND ALEX HILLMAN FOUNDATION**EIN:** 13-2560546**Software ID:** 18007218**Software Version:** 2018v3.1

<b>Category</b>	<b>Amount</b>	<b>Net Investment Income</b>	<b>Adjusted Net Income</b>	<b>Disbursements for Charitable Purposes</b>
CONSULTING FEES-NURSING SERVICES	138,691	0	0	138,691
CURATORIAL SERVICES	30,000	0	0	30,000
INVESTMENT ADVISORY FEES	706,305	706,305	0	0

**TY 2018 Taxes Schedule****Name:** THE RITA AND ALEX HILLMAN FOUNDATION**EIN:** 13-2560546**Software ID:** 18007218**Software Version:** 2018v3.1

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
EXCISE TAX	178,240			
FOREIGN TAX WITHHELD	45,102	45,102		
PAYROLL TAXES	35,726	3,546		32,180