Form 990-PF

## **Return of Private Foundation**

DLN: 93491317015179 OMB No 1545-0052

|           |                              | f the Treasury<br>nue Service   | ► Do not e   | ection 4947(a)(1) Tr<br>enter social security nun<br>www.irs.gov/Form990PF | nbers on this form                 | as it | may be made                          | public.  | 2018  Open to Public Inspection                                     |
|-----------|------------------------------|---|--|--|------------------------------------|-------|--------------------------------------|--|---|
| or        | caler                        | ndar year 201   | 18, or tax yea                                       | r beginning 01-01-20   | )18 , ar                           | nd e  | nding 12-31-                         | ·2018  |   |
|           |                              | indation  |  |  |                                    |       | A Employer id                        | entification numb  | er  |
| ΙH        | ESTAI                        | nman family foui  | NDATION INC  |  |                                    |       | 13-3980213                           |  |   |
|           |                              | l street (or P O bo<br>HUR J STAINMAN 3                               |  | not delivered to street address)   | Room/suite                         |       | <b>B</b> Telephone nu (212) 697-1000 | ımber (see ınstructio  | ons)  |
|           |                              | , state or province<br>NY 10021                                       | , country, and ZIP o                                 | r foreign postal code  | 1                                  |       | <b>C</b> If exemption                | application is pendi   | ng, check here  |
| G Ch      | neck al                      | l that apply  | ☐ Initial return<br>☐ Final return<br>☐ Address char | Amended return   | former public charity              |       | <b>2</b> Foreign or test, chec       | ganizations, check h<br>ganizations meeting<br>k here and attach co                        | g the 85% omputation  |
| Fai<br>of | Section<br>r mark<br>year (f | pe of organization 4947(a)(1) nor set value of all a rom Part II, col | nexempt charitablessets at end (c),                  |  | e private foundation  Cash         | al    | under section  F If the founds       | undation status was<br>in 507(b)(1)(A), che<br>ation is in a 60-mon<br>n 507(b)(1)(B), che | th termination  |
| Pa        | rt I                         | of amounts in co  |  | Expenses (The total (d) may not necessarily the instructions)              | (a) Revenue and expenses per books | (b)   | Net investment income                | (c) Adjusted net income  | (d) Disbursements<br>for charitable<br>purposes<br>(cash basis only |
|           | 1                            | Contributions, schedule)  | gıfts, grants, etc                                   | , received (attach   | 2,055,665                          |       |                                      |  |   |
|           | 3                            | Sch B   |  | not required to attach   |                                    |       |                                      |  |   |
|           | 4<br>5a                      | Gross rents   | interest from sect                                   | urities  | 445,254                            |       | 445,254                              |  |   |
| ക         | b<br>6a                      | Net rental inco   | , ,  | ssets not on line 10   | 689,128                            |       |                                      |  |   |
| Revenue   | b                            | • ,   | ć<br>ce for all assets o                             | n line 6a  |                                    |       |                                      |  |   |
| Rev       | 7<br>8                       | Capital gain ne<br>Net short-term                                     | t income (from Pa                                    | •  |                                    |       | 2,368,882                            |  |   |
|           | 9                            |   |  |  |                                    |       |                                      |  |   |
|           | 10a<br>b                     | Gross sales less<br>Less Cost of g                                    | s returns and allo                                   | wances   |                                    |       |                                      |  |   |
|           | С                            | _   | (loss) (attach sch                                   | -  |                                    |       |                                      |  |   |
|           | 11                           | Other income (  | attach schedule)                                     |  | -1,568                             |       | -1,568                               |  | 1   |
|           | 12                           | Total. Add line   | s 1 through 11                                       |  | 3,188,479                          |       | 2,812,568                            |  |   |
|           | 13                           | Compensation  | of officers, direct                                  | ors, trustees, etc   | 0                                  |       | 0                                    |  |   |
|           | 14                           | Other employe   | e salarıes and wa                                    | ges  |                                    |       |                                      |  |   |
|           |                              |   |  |  |                                    |       |                                      |  |   |

|                |       | from Part II, col (c),  ▶\$ 17,637,837  (Part I, column (d) mus  | t be on cash basıs )                    |     | under section 507(b)(1)(B), check here |                         |  |
|----------------|-------|--|---|-----|--|-------------------------|--|
| Pa             | rt I  | Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions) ) | (a) Revenue and expenses per books      | (b) | Net investment income                  | (c) Adjusted net income | (d) Disbursements<br>for charitable<br>purposes<br>(cash basis only) |
|                | 1     | Contributions, gifts, grants, etc , received (attach schedule)   | 2,055,665                               |     |  |                         |  |
|                | 2     | Check ▶ ☐ If the foundation is <b>not</b> required to attach Sch B   |   |     |  |                         |  |
|                | 3     | Interest on savings and temporary cash investments   |   |     |  |                         |  |
|                | 4     | Dividends and interest from securities   | 445,254                                 |     | 445,254                                |                         |  |
|                | 5a    | Gross rents  |   |     |  |                         |  |
|                | ь     | Net rental income or (loss)  | _                                       |     |  |                         |  |
| <u>e</u>       | 6a    | Net gain or (loss) from sale of assets not on line 10  | 689,128                                 | 3   |  |                         |  |
| Revenue        | ь     | Gross sales price for all assets on line 6a 6,975,61   | 6                                       |     |  |                         |  |
| æ              | 7     | Capital gain net income (from Part IV, line 2)   |   |     | 2,368,882                              |                         |  |
|                | 8     | Net short-term capital gain  |   |     |  |                         |  |
|                | 9     | Income modifications   |   |     |  |                         |  |
|                | 10a   | Gross sales less returns and allowances  |   |     |  |                         |  |
|                | ь     | Less Cost of goods sold  |   |     |  |                         |  |
|                | С     | Gross profit or (loss) (attach schedule)   |   |     |  |                         |  |
|                | 11    | Other income (attach schedule)   | -1,568                                  | 3   | -1,568                                 |                         |  |
|                | 12    | Total. Add lines 1 through 11  | 3,188,479                               | ,   | 2,812,568                              |                         |  |
|                | 13    | Compensation of officers, directors, trustees, etc   | 0                                       |     | 0                                      |                         | 0  |
|                | 14    | Other employee salaries and wages  |   |     |  |                         |  |
| Sè             | 15    | Pension plans, employee benefits   |   |     |  |                         |  |
| มรย            | 16a   | Legal fees (attach schedule)   |   |     |  |                         |  |
| Expenses       | ь     | Accounting fees (attach schedule)  | 59,666                                  | ,   | 53,699                                 |                         | 5,967  |
| Ē              | С     | Other professional fees (attach schedule)  |   |     |  |                         |  |
| tive           | 17    | Interest   |   |     |  |                         |  |
| tra            | 18    | Taxes (attach schedule) (see instructions)   | 53,915                                  |     | 3,915                                  |                         | 0  |
| SILI S         | 19    | Depreciation (attach schedule) and depletion   |   |     |  |                         |  |
| Administrative | 20    | Occupancy  |   |     |  |                         |  |
| d A            | 21    | Travel, conferences, and meetings  |   |     |  |                         |  |
| anc            | 22    | Printing and publications  |   |     |  |                         |  |
|                | 23    | Other expenses (attach schedule)   | 752                                     | :   | 0                                      |                         | 750  |
| Operating      | 24    | Total operating and administrative expenses.   |   |     |  |                         |  |
| ber            |       | Add lines 13 through 23  | 114,333                                 | ;   | 57,614                                 |                         | 6,717  |
| 0              | 25    | Contributions, gifts, grants paid  | 1,674,900                               |     |  |                         | 1,674,900  |
|                | 26    | <b>Total expenses and disbursements.</b> Add lines 24 and 25   | 1,789,233                               |     | 57,614                                 |                         | 1,681,617  |
|                | 27    | Subtract line 26 from line 12  | , ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, |     | ,                                      |                         |  |
|                | а     | Excess of revenue over expenses and disbursements  | 1,399,246                               |     |  |                         |  |
|                | ь     | <b>Net investment income</b> (If negative, enter -0-)  |   |     | 2,754,954                              |                         |  |
|                | С     | Adjusted net income (If negative, enter -0-)   |   |     | <u>.</u>                               |                         |  |
| For            | Paper | work Reduction Act Notice, see instructions.   | 1                                       | . ( | Cat No 11289>                          | ( Foi                   | rm <b>990-PF</b> (2018)  |
|                |       |  |   |     |  |                         |  |

13,843,688

1,441,796

343.603

492,422

20,264

20.264

16,101,245

16,121,509

16,121,509

16,614,373

2,031

29,791

17,500,491

17,500,491

17,500,491

2

3

4 5

6

16,101,245

17,500,491

17,500,491 Form **990-PF** (2018)

1,399,246

16,751,750

2,000

29,791

17,637,837

|        | ,   |
|--------|-----|
|        | 4   |
|        | 5   |
|        | 6   |
|        | 7   |
| ts     | 8   |
| Assets | 9   |
| As     | 10a |
|        | ŀ   |

11

12

13 14

15

16

17

18

19

20

21

22

23

24

25

30

31 Part III

2

Liabilities

Balances

Grants receivable . . . . . . .

Land, buildings, and equipment basis

instructions Also, see page 1, item I)

Other assets (describe > \_

Grants payable

Deferred revenue .

Other liabilities (describe -\_

Unrestricted . . .

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

Decreases not included in line 2 (itemize) ▶

Enter amount from Part I, line 27a . . . . . .

Other increases not included in line 2 (itemize) -

Temporarily restricted

Receivables due from officers, directors, trustees, and other

Other notes and loans receivable (attach schedule)

Prepaid expenses and deferred charges . . . . .

Investments—land, buildings, and equipment basis ► \_ Less accumulated depreciation (attach schedule) ► \_\_\_\_

Less accumulated depreciation (attach schedule) ▶ \_\_\_

Total assets (to be completed by all filers—see the

Accounts payable and accrued expenses . . . . .

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

Mortgages and other notes payable (attach schedule). . . . . .

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

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

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

Analysis of Changes in Net Assets or Fund Balances

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

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

Foundations that follow SFAS 117, check here ▶  $\Box$ 

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

disqualified persons (attach schedule) (see instructions) . . . . .

| 26             | Permanently restricted   |            |            |
|----------------|--|------------|------------|
| or Fu          | Foundations that do not follow SFAS 117, check here  and complete lines 27 through 31. |            |            |
| န္ <u>မ</u> 27 | Capital stock, trust principal, or current funds                                       | 16,101,245 | 17,500,491 |
| S 28           | Paid-in or capital surplus, or land, bldg , and equipment fund                         | 0          | 0          |
| 29             | Retained earnings, accumulated income, endowment, or other funds                       | 0          | 0          |

ارچە

|  | e the kınd(s) of property sold (e g ,<br>rehouse, or common stock, 200 shs                                     | How acquired P—Purchase D—Donation | (c) Date acquired (mo , day, yr ) | (d)<br>Date sold<br>(mo , day, yr )                     |   |
|--|--|------------------------------------|-----------------------------------|---|---|
| 1 a PUBLICLY TRADED SECU                                       | RITIES   |                                    | Р                                 |   |   |
| <b>b</b> PUBLICLY TRADED SECU                                  |  | D                                  |                                   |   |   |
| c CAPITAL LOSS FROM CIL  | . & D LLC K-1  |                                    | Р                                 |   |   |
| d CAPITAL GAINS DIVIDEN  | IDS  |                                    | Р                                 |   |   |
| e  |  |                                    |                                   |   |   |
| (e)  | (f)  |                                    | g)                                |   | h)  |
| Gross sales price  | Depreciation allowed   |                                    | ther basis                        |   | r (loss)                                  |
| - 4 14   | (or allowable)   | pius expei                         | nse of sale                       | , , , ,   | ) minus (g)                               |
|  | 5,976  |                                    | 4,230,203                         |   | -84,227                                   |
| ·  | 4,104  |                                    | 375,911<br>620                    |   | 1,658,193                                 |
| C  | F F36  |                                    | 620                               |   | -620                                      |
|  | 5,536  |                                    |                                   |   | 795,536                                   |
| e  |  |                                    |                                   |   |   |
| Complete only for assets                                       | showing gain in column (h) and ow  | i                                  |                                   |   | l)  |
| (i)  | (j)<br>Adjusted basis  |                                    | <b>k)</b><br>of col (ı)           |   | h) gain minus<br>less than -0-) <b>or</b> |
| FMV as of 12/31/69   | as of 12/31/69   |                                    | (j), if any                       |   | om col (h))                               |
| a  |  |                                    | 37,                               |   | -84,227                                   |
| b  |  |                                    |                                   |   | 1,658,193                                 |
| c  |  |                                    |                                   |   | -620                                      |
| d  |  |                                    |                                   |   | 795,536                                   |
| <b>e</b>   |  |                                    |                                   |   | ,   |
|  | or (net capital loss)  gain or (loss) as defined in sections art I, line 8, column (c) (see instructi          |                                    |                                   | 3   | 2,368,882                                 |
|  | Jnder Section 4940(e) for Re<br>rivate foundations subject to the sec<br>eave this part blank                  |                                    |                                   | ne )  |   |
|  | e section 4942 tax on the distributa<br>ot qualify under section 4940(e) Do                                    | • •                                | n the base period                 | γ <u> </u>  | es 🗹 No                                   |
|  | nount in each column for each year,  | see instructions before i          | making any entrie                 |   |   |
| (a) Base period years Calendar year (or tax year beginning in) | <b>(b)</b><br>Adjusted qualifying distributions  | (c)<br>Net value of noncharitable  | e-use assets                      | <b>(d)</b><br>Distribution rat<br>(col (b) divided by c |   |
| 2017   | 1,987,169  |                                    | 23,396,216                        |   | 0 084935                                  |
| 2016   | 1,721,296  |                                    | 19,528,899                        |   | 0 088141                                  |
| 2015   | 1,051,382  |                                    | 20,342,892                        |   | 0 051683                                  |
| 2014   | 1,322,077  |                                    | 21,606,282                        |   | 0 061189                                  |
| 2013   | 1,370,970  |                                    | 20,575,734                        |   | 0 066630                                  |
| 2 Total of line 1, column (                                    | •  |                                    |                                   |   | 0 352578                                  |
| number of years the four                                       | ofor the 5-year base period—divide idation has been in existence if less incharitable-use assets for 2018 from | than 5 years<br>n Part X, line 5   | ), or by the                      |   | 0 070516<br>21,855,553<br>1,541,166       |
| •                        | ent income (1% of Part I, line 27b)  |                                    | 6                                 |   | 27,550                                    |
|  |  |                                    | 7                                 |   | 1,568,716                                 |
|  | ons from Part XII, line 4 ,  |                                    | 8                                 |   | 1,681,617                                 |
|  | eater than line 7, check the box in Pa   |                                    |                                   |   |   |

Page **6** 

|          | Chatamanta Baran  | 12     | A _41 .141 - F - 101 7 1                | F 4E30 :- =                             | B 1 11   |          | -/1                                  |                  |       |         | age ( |
|----------|---|--------|---|---|--|----------|--------------------------------------|------------------|-------|---------|-------|
|          |   |        | Activities for Which                    | Form 4720 May Be                        | Required (Co                                     | ontinue  | a)                                   | П                |       |         |       |
| 5a       | During the year did the foundation  |        | •                                       | . ,                                     |  |          |                                      |                  |       | Yes     | No    |
|          |   |        |   | gislation (section 4945(e))? Yes V No   |  |          |                                      |                  |       |         |       |
|          | (2) Influence the outcome of any s  | **     | _                                       | _                                       | _  |          |                                      |                  |       |         |       |
|          | on, directly or indirectly, any vo  |        | -                                       |   | • • [  | Yes      | <b>✓</b>                             | No               |       |         |       |
|          | (3) Provide a grant to an individual  |        | • |   | . [  | Yes      | ✓                                    | No               |       |         |       |
|          | (4) Provide a grant to an organization                                      |        |   | · -                                     |  | _        | _                                    |                  |       |         |       |
|          | in section 4945(d)(4)(A)? See ii  |        |   |   |  | 」 Yes    | ✓                                    | No               |       |         |       |
|          | (5) Provide for any purpose other t   |        |   | * | _  | _        | _                                    |                  |       |         |       |
| <b>L</b> | educational purposes, or for the  |        | •                                       |   | · · L  | Yes      | ✓                                    | No               |       |         |       |
| b        | If any answer is "Yes" to 5a(1)–(5),<br>Regulations section 53 4945 or in a |        | •                                       |   |  | pea in   |                                      |                  | 5b    |         |       |
|          | <del>-</del>  |        |   |   |  |          |                                      | H                | 30    |         |       |
| _        | Organizations relying on a current r  |        | -                                       |   |  |          | Ш                                    |                  |       |         |       |
| С        | If the answer is "Yes" to question 5  |        |   | •                                       | _  | _        | _                                    |                  |       |         |       |
|          | tax because it maintained expenditu<br>If "Yes," attach the statement requi |        |   |   | ٠  | 」 Yes    | Ш                                    | No               |       |         |       |
| 6a       | Did the foundation, during the year,  |        |   |   | ıms on   |          |                                      |                  |       |         |       |
|          | a personal benefit contract?  |        |   |   |  | Yes      | <b>✓</b>                             | No               |       |         |       |
| Ь        | Did the foundation, during the year,  | , pay  | premiums, directly or ind               | irectly, on a personal be               | nefit contract? .                                |          | •                                    | L                | 6b    |         | No    |
|          | If "Yes" to 6b, file Form 8870  |        |   |   |  |          |                                      |                  |       |         |       |
| 7a       | At any time during the tax year, wa   |        |   |   |  | Yes      | <b>✓</b>                             | No               |       |         |       |
|          | If yes, did the foundation receive ar                                       |        | •                                       |   |  |          |                                      | -                | 7b    |         |       |
| 8        | Is the foundation subject to the sec  |        | . , , ,                                 |   | in remuneration                                  | or       |                                      |                  |       |         |       |
|          | excess parachute payment during the   | he ye  | ar <sup>7</sup>                         |   | • • [  | Yes      | <b>✓</b>                             | No L             |       |         |       |
| Pa       | Information About (   | Offic  | ers, Directors, Trust                   | ees, Foundation Ma                      | anagers, Higl                                    | nly Pai  | d En                                 | ploy             | ees,  |         |       |
|          | and Contractors   |        |   |   |  |          |                                      |                  |       |         |       |
| 1        | List all officers, directors, truste  | es, fo | undation managers ar                    | •                                       |  |          |                                      |                  |       |         |       |
|          | (a) Name and address  | (      | b) Title, and average                   | (c) Compensation (If                    | (d) Contrib                                      |          |                                      | (e) l            | Expen | se acc  | ount, |
|          | (a) Name and address  |        | hours per week<br>devoted to position   | not paid, enter<br>-0-)                 | employee benefit plans and deferred compensation |          |                                      | other allowances |       |         | es    |
| ARTH     | UR J STAINMAN   | PRES   | IDENT                                   | 0                                       |  |          | 0                                    |                  |       |         | (     |
|          | AST 72ND STREET   | 0 00   |   |   |  |          |                                      |                  |       |         |       |
|          | YORK, NY 10021  |        | FOREST                                  |   |  |          |                                      |                  |       |         |       |
|          | STAINMAN<br>AGT JONE GEREET   | 0 00   | ESIDENT                                 | 0                                       |  | C        |                                      |                  |       |         | (     |
|          | AST 72ND STREET<br>YORK, NY 10021   |        |   |   |  |          |                                      |                  |       |         |       |
|          | STAINMAN  | SECR   | ETARY                                   | 0                                       |  | 0        |                                      | ,                |       | (       |       |
|          | ERN COURT   | 0 00   |   |   |  |          |                                      |                  |       |         |       |
|          | HESTER, VT 05446  | : -1   |   | and included on line 4                  |  | :\ T     | ·£                                   |                  | WI    | NONE    | 71    |
|          | Compensation of five highest-pa   | ıa en  | -                                       | lose included on line 1                 |  |          |                                      | ie, en           | ter i | NONE.   | 1     |
| (a)      | Name and address of each employee   | paid   | (b) Title, and average                  |   | (d) Contrib<br>employee                          |          | ۰                                    | (e) E            | xpens | se acco | unt,  |
| . ,      | more than \$50,000  |        | hours per week<br>devoted to position   | (c) Compensation                        | plans and  | 1        | (e) Expense account other allowances |                  |       |         |       |
|          |   |        | acrocca to position                     |   | compen   | sation   |                                      |                  |       |         |       |
| NON      |   |        |   |   |  |          |                                      |                  |       |         |       |
|          |   |        |   |   |  |          |                                      |                  |       |         |       |
|          |   |        |   |   |  |          |                                      |                  |       |         |       |
|          |   |        |   |   |  |          |                                      |                  |       |         |       |
|          |   |        |   |   |  |          |                                      |                  |       |         |       |
|          |   |        |   |   |  |          |                                      |                  |       |         |       |
|          |   |        |   |   |  |          |                                      |                  |       |         |       |
|          |   |        |   |   |  |          |                                      |                  |       |         |       |
|          |   |        |   |   |  |          |                                      |                  |       |         |       |
|          |   |        |   |   |  |          |                                      |                  |       |         |       |
|          |   |        |   |   |  |          |                                      |                  |       |         |       |
| Tota     | I number of other employees paid ov   | er \$5 | 0,000                                   |   |  | <b>•</b> |                                      |                  |       |         |       |

| Part VIII  and Contractors (continued)  | stees, Foundation Managers, Highly Paid E | imployees,                |
|---|---|---------------------------|
| and contractors (continued)   |   |                           |
| 3 Five highest-paid independent contractors for professional  |   |                           |
| (a) Name and address of each person paid more than \$50,000   | (b) Type of service                       | (c) Compensation          |
| CITRIN COOPERMAN & COMPANY LLP  | ACCOUNTING AND CONSULTING SERVICES        | 59,666                    |
| 529 FIFTH AVENUE<br>NEW YORK, NY 10017  |   |                           |
|   |   |                           |
|   | _   |                           |
|   |   |                           |
| <b>Total</b> number of others receiving over \$50,000 for professional service  | s ▶                                       | 0                         |
| Part IX-A Summary of Direct Charitable Activities   |   |                           |
| List the foundation's four largest direct charitable activities during the tax year. Inc<br>organizations and other beneficiaries served, conferences convened, research pape |   | Expenses                  |
| 1   |   |                           |
|   |   |                           |
| 2   |   |                           |
| 3   |   |                           |
| 4   |   |                           |
|   |   |                           |
| Part IX-B Summary of Program-Related Investments  | •   |                           |
| Describe the two largest program-related investments made by the foundation<br>1  | during the tax year on lines 1 and 2      | Amount                    |
|   |   | -                         |
| 2   |   |                           |
| All other program-related investments See instructions  |   |                           |
| 3   |   | -                         |
|   | _   |                           |
| Total. Add lines 1 through 3  | <u> </u>                                  | Form <b>990-PF</b> (2018) |

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

1b

2

3a 3h

4

5

1,681,617

1.654.067

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27,550

Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4

Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,

Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment

Adjusted qualifying distributions. Subtract line 5 from line 4. . . . . . . . . . . . . . . .

Amounts set aside for specific charitable projects that satisfy the

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

2

3

4

5

a From 2013. . . . .

**b** From 2014. . . . c From 2015. . .

d From 2016. . . . .

e From 2017. . . . .

1,065,228

1,065,228

Form **990-PF** (2018)

0

Page 9

| _ | _ | _ | _ | _ | ٠, | _ | _ |  |
|---|---|---|---|---|----|---|---|--|
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| i |   | ж | L | щ |    |   |   |  |
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| 0-PF | (2 | 01 | 8 | ) |  |
|------|----|----|---|---|--|
|      | ı  |    |   | - |  |

| Form 990-PF (20 | 018)                 |                    |
|-----------------|----------------------|--------------------|
| Part XIII       | Undistributed Income | (see instructions) |

- 1 Distributable amount for 2018 from Part XI, line 7 2 Undistributed income, if any, as of the end of 2018 a Enter amount for 2017 only. . . . . . **b** Total for prior years

(Election required—see instructions). . . . . c Treated as distributions out of corpus (Election required—see instructions). . . . . . . . . .

**d** Applied to 2018 distributable amount. . . . . e Remaining amount distributed out of corpus

same amount must be shown in column (a) )

5 Excess distributions carryover applied to 2018

a Corpus Add lines 3f, 4c, and 4e Subtract line 5

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

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

9 Excess distributions carryover to 2019.

10 Analysis of line 9

a Excess from 2014. . .

c Excess from 2016. . . .

d Excess from 2017. . .

e Excess from 2018. . .

**b** Excess from 2015. .

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

6 Enter the net total of each column as

b Prior years' undistributed income Subtract line 4b from line 2b . . . . . . . . . . c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed. . . . . . d Subtract line 6c from line 6b Taxable amount e Undistributed income for 2017 Subtract line 4a from line 2a Taxable amount—see instructions . . . . . . f Undistributed income for 2018 Subtract lines 4d and 5 from line 1. This amount must be distributed in 2019 . . . . . . 7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions) . . . . . . . . . 8 Excess distributions carryover from 2013 not

indicated below:

- Excess distributions carryover, if any, to 2018
  - 393.895

  - 266,069
    - 70 650

(a)

Corpus

2.392.461

616,389

3,008,850

393,895

2,614,955

266.069 70,650

817.043

844.804

616.389

(b)

Years prior to 2017

(c)

2017

- 817.043
- 844,804
- f Total of lines 3a through e. . . . . . . .
- 4 Qualifying distributions for 2018 from Part XII, line 4 > \$ 1,681,617 a Applied to 2017, but not more than line 2a
- **b** Applied to undistributed income of prior years



| nter gross amounts unless otherwise indicated  | Unrelated bu                                | siness income | Excluded by section                 | (e)<br>Related or exempl |  |
|--|---|---------------|-------------------------------------|--------------------------|--|
| 1 Program service revenue  | (a)<br>Business code                        | (b)<br>Amount | (c)<br>Exclusion code               | (d)<br>Amount            | function income<br>(See instructions ) |
| a<br>b   | -   |               |                                     |                          |  |
| C  |   |               |                                     |                          |  |
| d  |   |               |                                     |                          |  |
| e  |   |               |                                     |                          |  |
| f  |   |               |                                     |                          |  |
| g Fees and contracts from government agencies  |   |               |                                     |                          |  |
| <ul> <li>Membership dues and assessments</li> <li>Interest on savings and temporary cash investments</li></ul>   |   |               |                                     |                          |  |
| 4 Dividends and interest from securities   | <u> </u>                                    |               | 14                                  | 445,254                  |  |
| 5 Net rental income or (loss) from real estate   |   |               | 14                                  | 443,234                  |  |
| a Debt-financed property   |   |               |                                     |                          |  |
| <b>b</b> Not debt-financed property  |   |               |                                     |                          |  |
| <b>6</b> Net rental income or (loss) from personal property  |   |               |                                     |                          |  |
| 7 Other investment income  |   |               |                                     |                          |  |
| 8 Gain or (loss) from sales of assets other than inventory   |   |               |                                     |                          |  |
| •  |   |               | 18                                  | 689,128                  |  |
| <ul><li>9 Net income or (loss) from special events</li><li>0 Gross profit or (loss) from sales of inventory</li></ul>  |   |               |                                     |                          |  |
| 1 Other revenue  |   |               |                                     |                          |  |
| a ORDINARY LOSS FROM PASSTHROUGH ENTITY  |   |               | 01                                  | -1,568                   |  |
| b  |   |               |                                     |                          |  |
| c  |   |               |                                     |                          |  |
| d  |   |               |                                     |                          |  |
|  |   |               |                                     |                          |  |
| e  |   |               |                                     |                          |  |
|  |   | (             |                                     | 1,132,814                |  |
| 2 Subtotal Add columns (b), (d), and (e)  3 Total. Add line 12, columns (b), (d), and (e)  | lations )                                   |               | 13                                  | 1,132,814<br><b>3</b>    |  |
|  | lations )                                   |               |                                     |                          |  |
| 2 Subtotal Add columns (b), (d), and (e)  3 Total. Add line 12, columns (b), (d), and (e)  (See worksheet in line 13 instructions to verify calcular to the second         | lations )  IE Accomplish  Income is reporte | ment of Exem  | pt Purposes  If Part XVI-A contribu | ted importantly to       | 1,132,814                              |
| 2 Subtotal Add columns (b), (d), and (e).  3 Total. Add line 12, columns (b), (d), and (e).  (See worksheet in line 13 instructions to verify calcular to the line No.  Explain below how each activity for which the accomplishment of the foundation's explain below how the foundation's explain below how each activity for which the accomplishment of the foundation's explain below how each activity for which the accomplishment of the foundation's explain below how each activity for which the accomplishment of the foundation's explain the line of the lin | lations )  IE Accomplish  Income is reporte | ment of Exem  | pt Purposes  If Part XVI-A contribu | ted importantly to       | 1,132,814                              |
| 2 Subtotal Add columns (b), (d), and (e).  3 Total. Add line 12, columns (b), (d), and (e).  (See worksheet in line 13 instructions to verify calcular to the line No.  Explain below how each activity for which the accomplishment of the foundation's explain below how the foundation's explain below how each activity for which the accomplishment of the foundation's explain below how each activity for which the accomplishment of the foundation's explain below how each activity for which the accomplishment of the foundation's explain the line of the lin | lations )  IE Accomplish  Income is reporte | ment of Exem  | pt Purposes  If Part XVI-A contribu | ted importantly to       | 1,132,814                              |
| 2 Subtotal Add columns (b), (d), and (e).  3 Total. Add line 12, columns (b), (d), and (e).  (See worksheet in line 13 instructions to verify calcular to the line No.  Explain below how each activity for which the accomplishment of the foundation's explain below how the foundation's explain below how each activity for which the accomplishment of the foundation's explain below how each activity for which the accomplishment of the foundation's explain below how each activity for which the accomplishment of the foundation's explain the line of the lin | lations )  IE Accomplish  Income is reporte | ment of Exem  | pt Purposes  If Part XVI-A contribu | ted importantly to       | 1,132,814                              |
| 2 Subtotal Add columns (b), (d), and (e).  3 Total. Add line 12, columns (b), (d), and (e).  (See worksheet in line 13 instructions to verify calcular to the line No.  Explain below how each activity for which the accomplishment of the foundation's explain below how the foundation's explain below how each activity for which the accomplishment of the foundation's explain below how each activity for which the accomplishment of the foundation's explain below how each activity for which the accomplishment of the foundation's explain the line of the lin | lations )  IE Accomplish  Income is reporte | ment of Exem  | pt Purposes  If Part XVI-A contribu | ted importantly to       | 1,132,814                              |
| 2 Subtotal Add columns (b), (d), and (e).  3 Total. Add line 12, columns (b), (d), and (e).  (See worksheet in line 13 instructions to verify calcular to the line No.  Explain below how each activity for which the accomplishment of the foundation's explain below how the foundation's explain below how each activity for which the accomplishment of the foundation's explain below how each activity for which the accomplishment of the foundation's explain below how each activity for which the accomplishment of the foundation's explain the line of the lin | lations )  IE Accomplish  Income is reporte | ment of Exem  | pt Purposes  If Part XVI-A contribu | ted importantly to       | 1,132,814                              |
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| 2 Subtotal Add columns (b), (d), and (e). 3 Total. Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify calcular table)  Part XVI-B  Relationship of Activities to the second below how each activity for which the accomplishment of the foundation's explain below how the foundation's explain below how each activity for which the accomplishment of the foundation's explain below how each activity for which the accomplishment of the foundation's explain the foun | lations )  IE Accomplish  Income is reporte | ment of Exem  | pt Purposes  If Part XVI-A contribu | ted importantly to       | 1,132,814                              |
| 2 Subtotal Add columns (b), (d), and (e). 3 Total. Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify calcular t XVI-B Relationship of Activities to the Line No.  Explain below how each activity for which the accomplishment of the foundation's explain to the second to the | lations )  IE Accomplish  Income is reporte | ment of Exem  | pt Purposes  If Part XVI-A contribu | ted importantly to       | 1,132,814                              |
| 2 Subtotal Add columns (b), (d), and (e). 3 Total. Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify calcular t XVI-B Relationship of Activities to the Line No.  Explain below how each activity for which the accomplishment of the foundation's explain to the second to the | lations )  IE Accomplish  Income is reporte | ment of Exem  | pt Purposes  If Part XVI-A contribu | ted importantly to       | 1,132,814                              |
| 2 Subtotal Add columns (b), (d), and (e). 3 Total. Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify calcular table)  Relationship of Activities to the second below how each activity for which the accomplishment of the foundation's expressions.  | lations )  IE Accomplish  Income is reporte | ment of Exem  | pt Purposes  If Part XVI-A contribu | ted importantly to       | 1,132,814                              |
| 2 Subtotal Add columns (b), (d), and (e). 3 Total. Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify calcular table)  Relationship of Activities to the second below how each activity for which the accomplishment of the foundation's expressions.  | lations )  IE Accomplish  Income is reporte | ment of Exem  | pt Purposes  If Part XVI-A contribu | ted importantly to       | 1,132,814                              |
| 2 Subtotal Add columns (b), (d), and (e). 3 Total. Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify calcular t XVI-B Relationship of Activities to the Line No.  Explain below how each activity for which the accomplishment of the foundation's explain to the second to the | lations )  IE Accomplish  Income is reporte | ment of Exem  | pt Purposes  If Part XVI-A contribu | ted importantly to       | 1,132,814                              |
| 2 Subtotal Add columns (b), (d), and (e). 3 Total. Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify calcular table)  Part XVI-B  Relationship of Activities to the second below how each activity for which the accomplishment of the foundation's explain below how the foundation's explain below how each activity for which the accomplishment of the foundation's explain below how each activity for which the accomplishment of the foundation's explain the foun | lations )  IE Accomplish  Income is reporte | ment of Exem  | pt Purposes  If Part XVI-A contribu | ted importantly to       | 1,132,814                              |
| 2 Subtotal Add columns (b), (d), and (e). 3 Total. Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify calcular t XVI-B Relationship of Activities to the Line No.  Explain below how each activity for which the accomplishment of the foundation's explain to the second to the | lations )  IE Accomplish  Income is reporte | ment of Exem  | pt Purposes  If Part XVI-A contribu | ted importantly to       | 1,132,814                              |
| 2 Subtotal Add columns (b), (d), and (e). 3 Total. Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify calcular table)  Part XVI-B  Relationship of Activities to the second below how each activity for which the accomplishment of the foundation's explain below how the foundation's explain below how each activity for which the accomplishment of the foundation's explain below how each activity for which the accomplishment of the foundation's explain the foun | lations )  IE Accomplish  Income is reporte | ment of Exem  | pt Purposes  If Part XVI-A contribu | ted importantly to       | 1,132,814                              |
| 2 Subtotal Add columns (b), (d), and (e). 3 Total. Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify calcular table)  Part XVI-B  Relationship of Activities to the second below how each activity for which the accomplishment of the foundation's explain below how the foundation's explain below how each activity for which the accomplishment of the foundation's explain below how each activity for which the accomplishment of the foundation's explain the foun | lations )  IE Accomplish  Income is reporte | ment of Exem  | pt Purposes  If Part XVI-A contribu | ted importantly to       | 1,132,814                              |
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| 2 Subtotal Add columns (b), (d), and (e). 3 Total. Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify calcular table)  Part XVI-B  Relationship of Activities to the second below how each activity for which the accomplishment of the foundation's explain below how the foundation's explain below how each activity for which the accomplishment of the foundation's explain below how each activity for which the accomplishment of the foundation's explain the foun | lations )  IE Accomplish  Income is reporte | ment of Exem  | pt Purposes  If Part XVI-A contribu | ted importantly to       | 1,132,814                              |
| 2 Subtotal Add columns (b), (d), and (e).  3 Total. Add line 12, columns (b), (d), and (e).  (See worksheet in line 13 instructions to verify calcular to the line No.  Explain below how each activity for which the accomplishment of the foundation's explain below how the foundation's explain below how each activity for which the accomplishment of the foundation's explain below how each activity for which the accomplishment of the foundation's explain below how each activity for which the accomplishment of the foundation's explain the line of the lin | lations )  IE Accomplish  Income is reporte | ment of Exem  | pt Purposes  If Part XVI-A contribu | ted importantly to       | 1,132,814                              |
| 2 Subtotal Add columns (b), (d), and (e).  3 Total. Add line 12, columns (b), (d), and (e).  (See worksheet in line 13 instructions to verify calcular to the line No.  Explain below how each activity for which the accomplishment of the foundation's explain below how the foundation's explain below how each activity for which the accomplishment of the foundation's explain below how each activity for which the accomplishment of the foundation's explain below how each activity for which the accomplishment of the foundation's explain the line of the lin | lations )  IE Accomplish  Income is reporte | ment of Exem  | pt Purposes  If Part XVI-A contribu | ted importantly to       | 1,132,814                              |

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|-----|---|
| +4  | Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations |
|     |   |

| Part  | XVII       | Information Re<br>Exempt Organis   |                  | ransters To a     | and Transacti                  | ons and        | Relatio      | nships With Nonc           | haritable               |           |      |
|---|------------|--|------------------|-------------------|--------------------------------|----------------|--------------|----------------------------|-------------------------|-----------|------|
|   |            | ganization directly or in than section 501(c)(3)                               | directly enga    |                   |                                |                |              |                            | 501                     | Yes       | No   |
| ` '   | `          | ` ,` ,   | -                | ,                 | , , ,                          | _              | , arm Lacion | •                          |                         |           |      |
| a Transfers from the reporting foundation to a noncharitable exempt organization of  (1) Cash |            |  |                  |                   |                                |                |              | 1a(1)                      |                         | No        |      |
|   |            | rassets  |                  |                   |                                |                | · · · · · ·  |                            | . 1a(2)                 |           | No   |
|   |            | nsactions  |                  |                   |                                |                |              |                            | -  (-)                  |           |      |
|   |            | of assets to a nonchari  | table exemp      | t organization.   |                                |                |              |                            | . 1b(1)                 |           | No   |
|   |            | nases of assets from a n   | •                | -                 |                                |                |              |                            | . 1b(2)                 |           | No   |
|   |            | al of facilities, equipmen   |                  |                   |                                |                |              |                            | . 1b(3)                 |           | No   |
| (4)   | Reım       | bursement arrangemen   | ts               |                   |                                |                |              |                            | 1b(4)                   |           | No   |
| (5)   | Loan       | s or loan guarantees.  |                  |                   |                                |                |              |                            | . 1b(5)                 |           | No   |
| (6)   | Perfor     | mance of services or m   | embership o      | r fundraısıng sol | licitations                    |                |              |                            | 1b(6)                   |           | No   |
| <b>c</b> Sha  | ring of    | f facilities, equipment, n   | nailing lists,   | other assets, or  | paid employees.                |                |              |                            | 1c                      |           | No   |
|   |            | wer to any of the above  |                  |                   |                                |                |              |                            |                         |           |      |
|   |            | ds, other assets, or ser<br>nsaction or sharing arra                           |                  |                   |                                |                |              |                            |                         |           |      |
| iii u   | ily ciai   | isaction or sharing arra   | ngement, sn      | ow in column (c   | a) the value of th             | ic goods, o    | tilei asse   | is, or services receive    | ·u                      |           |      |
| (a) Line  | No         | (b) Amount involved  | (c) Name of      | noncharitable exe | mpt organization               | <b>(d)</b> Des | cription of  | transfers, transactions, a | nd sharing arra         | ngemen    | ts   |
|   |            |  |                  |                   |                                |                |              |                            |                         |           |      |
|   |            |  |                  |                   |                                |                |              |                            |                         |           |      |
|   |            |  |                  |                   |                                |                |              |                            |                         |           |      |
|   |            |  |                  |                   |                                |                |              |                            |                         |           |      |
|   |            |  |                  |                   |                                |                |              |                            |                         |           |      |
|   |            |  |                  |                   |                                |                |              |                            |                         |           |      |
|   |            |  |                  |                   |                                |                |              |                            |                         |           |      |
|   |            |  |                  |                   |                                |                |              |                            |                         |           |      |
|   |            |  |                  |                   |                                |                |              |                            |                         |           |      |
|   |            |  |                  |                   |                                |                |              |                            |                         |           |      |
|   |            |  |                  |                   |                                |                |              |                            |                         |           |      |
|   |            |  |                  |                   |                                |                |              |                            |                         |           |      |
|   |            |  |                  |                   |                                |                |              |                            |                         |           |      |
|   |            |  |                  |                   |                                |                |              |                            |                         |           |      |
| 3- I- t   | h a 6a     |  |                  | ماداده ما ساد ا   | <u> </u>                       |                |              |                            |                         |           |      |
|   |            | ndation directly or indire   | •                |                   | •                              |                |              |                            | <b>✓</b> No             |           |      |
|   |            | in section 501(c) (other   |                  | 1 501(c)(3)) or   | in section 52//.               |                |              | ⊔ Yes                      | INO                     |           |      |
| B If "  | res," c    | omplete the following so<br>(a) Name of organization                           |                  | 1 4               | <b>b)</b> Type of organization | tion           | 1            | (c) Description o          | f rolationshin          |           |      |
|   |            | (a) Name of organization   | <i>/</i> 11      | ,                 | b) Type of Organiza            | uon            |              | (c) Description o          | r relationship          |           |      |
|   |            |  |                  |                   |                                |                |              |                            |                         |           |      |
|   |            |  |                  |                   |                                |                |              |                            |                         |           |      |
|   |            |  |                  |                   |                                |                |              |                            |                         |           |      |
|   |            |  |                  |                   |                                |                |              |                            |                         |           |      |
|   | of m       | er penalties of perjury,<br>ny knowledge and belief<br>th preparer has any kno | , it is true, co |                   |                                |                |              |                            |                         |           |      |
| Sign  |            |  | meage            |                   | 1                              |                |              |                            | May the IRS di          | scuss th  | ııs  |
| Here  |            | *****  |                  |                   | 2019-11-12                     | \ \ \ \ \ \ '  | *****        |                            | return                  | ror chou  | un.  |
|   | <b>  ▶</b> |  |                  |                   | _                              | — <b>)</b> :   |              |                            | with the prepa<br>below | iei silow | VIII |
|   |            | Signature of officer or ti   | rustee           |                   | Date                           |                | 7 T.+1-      |                            | (see instr )?           | ✓ Yes [   | □No  |
|   |            | Print/Type preparer's  | name             | Preparer's Sign   | nature                         | Date           |              | PT<br>Check if self-       | IN                      |           |      |
|   |            |  |                  |                   |                                |                |              | employed ▶ □               | P01404                  | 1903      |      |
| Paid NILES L CITRIN   |            |  |                  |                   |                                | 2019           | -11-11       | Cilipioyed P               |                         |           |      |
| _   | 3r^~       |  |                  |                   |                                |                |              |                            |                         |           |      |
| Prep<br>Use (   |            | I I II I I I I I I I I I I I I I I I I   | IN COOPERN       | 1AN & COMPAN      | / LLP                          |                |              | Fii                        | rm's EIN ▶22            | -24289    | 65   |
| USE (   | Jilly      |  | 9 FIFTH AVE      | NUE               |                                |                |              |                            |                         |           |      |
|   |            |  |                  |                   |                                |                |              |                            | none no (212            | ) 697-1   | 1000 |
|   |            | NE   | W YORK, NY       | 100174683         |                                |                |              |                            | 110 (212                | ,, -      |      |
|   |            |  |                  |                   |                                |                |              |                            |                         |           |      |

Form 990PF Part XV Line 1a - 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).

LOIS STAINMAN

ARTHUR J STAINMAN

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

| ABINGDON THEATRE COMPANY<br>312 W 36TH ST<br>NEW YORK, NY 10018 | N/A | 501C3 | GENERAL | 20,000 |
|---|-----|-------|---------|--------|
| ABORTION CARE NETWORK   | N/A | 501C3 | GENERAL | 5.000  |

| ABORTION CARE NETWORK<br>PO BOX 16323<br>MINNEAPOLIS, MN 55416 | N/A | 501C3 | GENERAL | 5,000  |
|--|-----|-------|---------|--------|
| ACLU - AMERICAN CIVIL LIBERTIES UNION FOUNDATION               | N/A | 501C3 | GENERAL | 30,000 |

| MINNEAPOLIS, MN 55416  |     |       |         |        |
|--|-----|-------|---------|--------|
| ACLU - AMERICAN CIVIL LIBERTIES<br>UNION FOUNDATION<br>125 BROAD STREET 18TH FLOOR<br>NEW YORK, NY 10004 | N/A | 501C3 | GENERAL | 30,000 |

Total .

| ACLU - AMERICAN CIVIL LIBERTIES<br>UNION FOUNDATION<br>125 BROAD STREET 18TH FLOOR<br>NEW YORK, NY 10004 | N/A | 501C3 | GENERAL | 30,000 |
|--|-----|-------|---------|--------|
|  |     |       |         |        |

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

| ALLIANCE FOR POSITIVE CHANGE<br>64 WEST 35TH STREET 3RD FLOOR<br>NEW YORK, NY 10001 | N/A | 501C3 | GENERAL | 1,000 |
|---|-----|-------|---------|-------|
| AMERICAN FRIENDS OF THE MUSEE   | N/A | 501C3 | GENERAL | 9,000 |

| DORSAY<br>1345 AVENUE OF THE AMERICAS<br>NEW YORK, NY 10105 |     | 30163 |         | 3,000  |
|---|-----|-------|---------|--------|
| AMERICAN JEWISH WORLD SERVICES                              | N/A | 501C3 | GENERAL | 25,000 |

| NEW YORK, NY 10105  |     |       |         |        |
|---|-----|-------|---------|--------|
| AMERICAN JEWISH WORLD SERVICES<br>45 WEST 36TH STREET<br>NEW YORK, NY 10018 | N/A | 501C3 | GENERAL | 25,000 |

| AMERICAN JEWISH WORLD SERVICES | N/A | 501C3 | GENERAL | 25,000 |
|--------------------------------|-----|-------|---------|--------|
| 45 WEST 36TH STREET            |     |       |         |        |
| NEW YORK, NY 10018             |     |       |         |        |
|                                |     |       |         |        |

Total .

Recipient Purpose of grant or If recipient is an individual, Foundation Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year AMERICAN ASSOCIATES OF THE N/A 501C3 **GENERAL** 1,000 NATIONAL THEATRE 247 WEST 30TH STREET SUITE 8F

| NEW YORK, NY 10001  |     |       |         |        |
|---|-----|-------|---------|--------|
| AMNESTY INTERNATIONAL<br>5 PENN PLAZA<br>NEW YORK, NY 10001 | N/A | 501C3 | GENERAL | 30,000 |
| BED-STUY CAMPAIGN AGAINST<br>HUNGER                         | N/A | 501C3 | GENERAL | 75,000 |

▶ 3a

1,674,900

2010 FULTON STREET BROOKLYN, NY 11233

Total .

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

| a Paid during the year                                    |     |       |         |       |
|---|-----|-------|---------|-------|
| BOYS AND GIRLS CLUB OF<br>BURLINGTON INC<br>62 OAK STREET | N/A | 501C3 | GENERAL | 3,500 |

| BURLINGTON, VT 05401                                      |     |       |         |        |
|---|-----|-------|---------|--------|
| BRONX CHILDREN'S MUSEUM<br>PO BOX 1381<br>BRONX, NY 10451 | N/A | 501C3 | GENERAL | 25,000 |

| PO BOX 1381<br>BRONX, NY 10451           |     |       |         |        |
|--|-----|-------|---------|--------|
| BRONXWORKS INC<br>60 EAST TREMONT AVENUE | N/A | 501C3 | GENERAL | 10,000 |

| BRONX, NY 10451   |     |       |         |        |
|---|-----|-------|---------|--------|
| BRONXWORKS INC<br>60 EAST TREMONT AVENUE<br>BRONX, NY 10453 | N/A | 501C3 | GENERAL | 10,000 |

| BRONXWORKS INC<br>60 EAST TREMONT AVENUE<br>BRONX, NY 10453 | N/A | GENERAL            | 10,00     |
|---|-----|--------------------|-----------|
| Total   |     | <br><b>&gt;</b> 3a | 1,674,900 |

Purpose of grant or Recipient If recipient is an individual, Foundation Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year CANCER RESEARCH INSTITUTE N/A 501C3 GENERAL 10,000 55 BROADWAY SUITE 1802

| NEW YORK, NY 10006                                |     |       |         |       |
|---|-----|-------|---------|-------|
| CARE151 ELLIS STREET NE<br>ATLANTA, GA 30303      | N/A | 501C3 | GENERAL | 8,500 |
| CENTER FOR REPRODUCTIVE RIGHTS<br>120 WALL STREET | N/A | 501C3 | GENERAL | 6,000 |

| ATLANTA, GA 30303   |     |       |         |       |
|---|-----|-------|---------|-------|
| CENTER FOR REPRODUCTIVE RIGHTS<br>120 WALL STREET<br>NEW YORK, NY 10005 | N/A | 501C3 | GENERAL | 6,000 |
|   |     |       |         | i     |

Total .

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

| a Paid during the year  |     |       |         |       |
|---|-----|-------|---------|-------|
| CHITTENDEN FOOD SHELF<br>228 NORTH WINOOSKI AVE<br>BURLINGTON, VT 05401 | N/A | 501C3 | GENERAL | 1,000 |

| BURLINGTON, VT 05401                            |     |       |         |       |
|---|-----|-------|---------|-------|
| CHARITY WATCHPO BOX 578460<br>CHICAGO, IL 60657 | N/A | 501C3 | GENERAL | 100   |
| COALITION FOR THE HOMELESS                      | N/A | 501C3 | GENERAL | 7,500 |

| CHICAGO, IL 60657   |     |       |         |       |
|---|-----|-------|---------|-------|
| COALITION FOR THE HOMELESS<br>129 FULTON STREET<br>NEW YORK, NY 10038 | N/A | 501C3 | GENERAL | 7,500 |

| NEW YORK, NY 10038                              |     |       | ▶ 3a          | 1,674,900 |
|---|-----|-------|---------------|-----------|
| COALITION FOR THE HOMELESS<br>129 FULTON STREET | N/A | 501C3 | 501C3 GENERAL | 7,500     |

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

| a Paid during the year  |     |       |         |       |
|---|-----|-------|---------|-------|
| COALITION ON TEMPORARY SHELTER<br>2211 E JEFFERSON AVE STE 400<br>DETROIT, MI 48207 | N/A | 501C3 | GENERAL | 7,500 |

| DETROIT, MI 48207   |     |       |         |       |
|---|-----|-------|---------|-------|
| COLCHESTER COMMUNITY FOOD SHELF<br>INC<br>PO BOX 33<br>NORTH HERO, VT 05474 | N/A | 501C3 | GENERAL | 1,000 |

| INC<br>PO BOX 33<br>NORTH HERO, VT 05474          |     |       |         |       |
|---|-----|-------|---------|-------|
| COMMUNITY FOOD ADVOCATES<br>15 MAIDEN LN STE 1200 | N/A | 501C3 | GENERAL | 5,000 |

|   | NORTH HERO, VT 05474  |     |       |         |      |
|---|---|-----|-------|---------|------|
| П | COMMUNITY FOOD ADVOCATES<br>15 MAIDEN LN STE 1200<br>NEW YORK, NY 10038 | N/A | 501C3 | GENERAL | 5,00 |

| COMMUNITY FOOD ADVOCATES<br>15 MAIDEN LN STE 1200 | N/A | 501C3 | GENERAL | 5,00 |
|---|-----|-------|---------|------|
| NEW YORK, NY 10038                                |     |       |         |      |
|   |     |       |         |      |

Total .

Recipient Purpose of grant or If recipient is an individual, Foundation Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year D O F FUND232 FAST 84TH STREET N/A 501C3 GENERAL 4.000

NEW YORK NY 10020

333 7TH AVE NEW YORK, NY 10001

Total . .

| NEW TORK, NT 10028  |     |       |         |         |
|---|-----|-------|---------|---------|
| DNDI NORTH AMERICA<br>40 WALL STREET 24TH FLOOR<br>NEW YORK, NY 10005 | N/A | 501C3 | GENERAL | 50,000  |
| DOCTORS WITHOUT BORDERS   | N/A | 501C3 | GENERAL | 100,000 |

1,674,900

▶ 3a

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

| a Paid during the year   |     |       |         |       |
|--|-----|-------|---------|-------|
| EAST SIDE HOUSE SETTLEMENT<br>337 ALEXANDER AVE<br>BRONX, NY 10454 | N/A | 501C3 | GENERAL | 5,000 |

| EPISCOPAL CHARITIES OF THE N/A 501C3 GENERAL                           |                       |     |       |         |     |
|--|-----------------------|-----|-------|---------|-----|
| DIOCESE OF NEW YORK INC<br>1047 AMSTERDAM AVENUE<br>NEW YORK, NY 10025 | 1047 AMSTERDAM AVENUE | N/A | 501C3 | GENERAL | 800 |

| 1047 AMSTERDAM AVENUE<br>NEW YORK, NY 10025 |     |       |         |        |
|---|-----|-------|---------|--------|
| FEEDING FLORIDA<br>3760 FOWLER STREET       | N/A | 501C3 | GENERAL | 15,000 |

| NEW YORK, NY 10025  |     |       |         |        |
|---|-----|-------|---------|--------|
| FEEDING FLORIDA<br>3760 FOWLER STREET<br>FORT MYERS, FL 33901 | N/A | 501C3 | GENERAL | 15,000 |

| Total   |        |        | ▶ 3a     | 1,674,900 |
|---|--------|--------|----------|-----------|
| FEEDING FLORIDA<br>3760 FOWLER STREET<br>FORT MYERS, FL 33901 | N/A    | 501C3  | GENERAL  | 15,00     |
| EFFDING FLORIDA   | I NI/A | 150103 | LCENERAL | 1 5 000   |

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

|  | or substantial contributor |       |         |         |
|--|----------------------------|-------|---------|---------|
| a Paid during the year                             |                            |       |         |         |
| FOOD BANK FOR NYC39 BROADWAY<br>NEW YORK, NY 10006 | N/A                        | 501C3 | GENERAL | 640,000 |

| NEW YORK, NY 10006   |     |       |         |        |
|--|-----|-------|---------|--------|
| FOUNTAIN HOUSE<br>425 WEST 47TH STREET<br>NEW YORK, NY 10036 | N/A | 501C3 | GENERAL | 7,500  |
| FRACTURED ATLAS INC  | N/A | 501C3 | GENERAL | 22 500 |

| NEW YORK, NY 10036  |     |       |         |        |
|---|-----|-------|---------|--------|
| FRACTURED ATLAS INC<br>248 W 35TH STREET 10TH FLOOR<br>NEW YORK, NY 10001 | N/A | 501C3 | GENERAL | 22,500 |

1,674,900

| •   |     |       |         |        |
|---|-----|-------|---------|--------|
| FRACTURED ATLAS INC<br>248 W 35TH STREET 10TH FLOOR<br>NEW YORK, NY 10001 | N/A | 501C3 | GENERAL | 22,500 |
|   |     |       |         |        |

Total .

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

|   | or substantial contributor |       |         |       |
|---|----------------------------|-------|---------|-------|
| a Paid during the year                    |                            |       |         |       |
| GROW NYC - COUNCIL ON THE ENVIRONMENT INC | N/A                        | 501C3 | GENERAL | 5,000 |

| 51 CHAMBERS STREET<br>NEW YORK, NY 10007 |     |       |         |       |
|--|-----|-------|---------|-------|
| HENRY STREET SETTLEMENT 265 HENRY STREET | N/A | 501C3 | GENERAL | 4,000 |

| HENRY STREET SETTLEMENT<br>265 HENRY STREET<br>NEW YORK, NY 10002 | N/A | 501C3 | GENERAL | 4,000  |
|---|-----|-------|---------|--------|
| HOUSING WORKS INC<br>57 WILLOUGHBY STREET                         | N/A | 501C3 | GENERAL | 12,500 |

| NEW YORK, NY 10002  |     |       |         |        |
|---|-----|-------|---------|--------|
| HOUSING WORKS INC<br>57 WILLOUGHBY STREET<br>BROOKLYN, NY 11201 | N/A | 501C3 | GENERAL | 12,500 |

| HOUSING WORKS INC    | N/A | 501C3 | GENERAL | 12,500 |
|----------------------|-----|-------|---------|--------|
| 57 WILLOUGHBY STREET |     |       |         |        |
| BROOKLYN, NY 11201   |     |       |         |        |
|                      |     |       |         | 1      |

Total .

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

| a Paid during the year   |     |       |         |        |
|--|-----|-------|---------|--------|
| INTERNATIONAL RESCUE COMMITTEE<br>122 EAST 42 STREET<br>NEW YORK, NY 10168 | N/A | 501C3 | GENERAL | 45,000 |

| NEW YORK, NY 10168                       |      |        |         |       |
|--|------|--------|---------|-------|
| IPASPO BOX 9990<br>CHAPEL HILL, NC 27515 | N/A  | 501C3  | GENERAL | 3,500 |
| KEW FOUNDATION AMEDICA                   | NI/A | F01 C3 | CENEBAL | 350   |

|   | CHAPEL HILL, NC 27515                                     |     | 30103 | OLIVE VIEW | 3,300 |
|---|---|-----|-------|------------|-------|
| ı | KEW FOUNDATION AMERICA<br>180 N STETSON AVENUE SUITE 3500 | N/A | 501C3 | GENERAL    | 250   |

| KEW FOUNDATION AMERICA<br>180 N STETSON AVENUE SUITE 3500 | N/A | 501C3 | GENERAL | 25 |
|---|-----|-------|---------|----|
| CHICAGO, IL 60601   |     |       |         |    |

Total .

Recipient If recipient is an individual, show any relationship to any foundation manager or substantial contributor

a Paid during the year

If recipient is an individual, show any relationship to any foundation manager or substantial contributor

Purpose of grant or contribution

Amount

| BURLINGTON, VT 05401  | N/A | 501C3 | GENERAL | 1,000 |
|---|-----|-------|---------|-------|
| LINCOLN CENTER THEATER<br>150 W 65TH STREET<br>NEW YORK, NY 10023 | N/A | 501C3 | GENERAL | 1,250 |

E0460

4 000

1,674,900

▶ 3a

| NEW YORK, NY 10023   |     |       |         |       |
|--|-----|-------|---------|-------|
| LITERACY NEW JERSEY INC<br>224 MAIN STREET<br>METUCHEN, NJ 08840 | N/A | 501C3 | GENERAL | 1,000 |

Total .

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

a Daid during the year

Total .

| a Faid during the year  |     |       |         |       |
|---|-----|-------|---------|-------|
| MAP INTERNATIONAL<br>4700 GLYNCO PARKWAY<br>BRUNSWICK, GA 31525 | N/A | 501C3 | GENERAL | 2,500 |
| BRONSWICK, GA 31323   |     |       |         |       |

| MEALS ON WHEELS355 LEXINGTON AVE<br>NEW YORK, NY 10017 | N/A | 501C3 | GENERAL | 8,500  |
|--|-----|-------|---------|--------|
| METROPOLITAN MUSEUM OF ART<br>1000 FIFTH AVENUE        | N/A | 501C3 | GENERAL | 11,000 |

| 11EW 10KK, 141 10017  |     |       |         |        |
|---|-----|-------|---------|--------|
| METROPOLITAN MUSEUM OF ART<br>1000 FIFTH AVENUE<br>NEW YORK, NY 10028 | N/A | 501C3 | GENERAL | 11,000 |

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

David division that were

Total .

| <b>a</b> Paid during the year                            |     |       |         |       |
|--|-----|-------|---------|-------|
| MOTT HAVEN ACADEMY<br>170 BROWN PLACE<br>BRONX, NY 10454 | N/A | 501C3 | GENERAL | 2,500 |
|  |     |       |         |       |

| ,   |     |       |         |       |
|---|-----|-------|---------|-------|
| MUSEUM AT ELDRIDGE STREET<br>12 ELDRIDGE ST<br>NEW YORK, NY 10002 | N/A | 501C3 | GENERAL | 7,000 |

| NEW YORK, NY 10002                                 |     |       |         |         |
|--|-----|-------|---------|---------|
| NARAL FOUNDATION470 PARK AVE<br>NEW YORK, NY 10016 | N/A | 501C3 | GENERAL | 100,000 |

| 14E44 TORK, 141 10002                              |     |       |         |        |
|--|-----|-------|---------|--------|
| NARAL FOUNDATION470 PARK AVE<br>NEW YORK, NY 10016 | N/A | 501C3 | GENERAL | 100,00 |

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Purpose of grant or Amount Foundation show any relationship to contribution status of

any foundation manager.

NEW YORK, NY 10001

Total .

| Name and address (home or business)   | or substantial contributor | recipient |         |        |
|---|----------------------------|-----------|---------|--------|
| a Paid during the year  |                            |           |         |        |
| NEIGHBORHOOD COALITION FOR<br>SHELTER<br>157 EAST 86TH STREET<br>NEW YORK, NY 10028 | N/A                        | 501C3     | GENERAL | 5,000  |
| NEW YORK COMMON PANTRY<br>8 EAST 109TH STREET<br>NEW YORK, NY 10029                 | N/A                        | 501C3     | GENERAL | 17,500 |
| NY CARES214 WEST 29TH STREET  | N/A                        | 501C3     | GENERAL | 3,500  |

1,674,900

recipient

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution

| Name and address (home or business)                         | any foundation manager<br>or substantial contributor | recipient |         |        |
|---|--|-----------|---------|--------|
| a Paid during the year                                      |  |           |         |        |
| OPEN SPACE INSTITUTE<br>1350 BROADWAY<br>NEW YORK, NY 10018 | N/A  | 501C3     | GENERAL | 25,000 |

| NEW YORK, NY 10018   |     |       |         |  |
|--|-----|-------|---------|--|
| OPPORTUNITY NETWORK<br>55 EXCHANGE PLACE 503<br>NEW YORK, NY 10005 | N/A | 501C3 | GENERAL |  |

Total .

| 55 EXCHANGE PLACE 503<br>NEW YORK, NY 10005 |     |       |         |       |
|---|-----|-------|---------|-------|
| PARTNERSHIP FOR THE HOMELESS<br>305 7TH AVE | N/A | 501C3 | GENERAL | 5,000 |

5,000

| 14EW TORK, 141 10005  |     |       |         |      |
|---|-----|-------|---------|------|
| PARTNERSHIP FOR THE HOMELESS<br>305 7TH AVE<br>NEW YORK, NY 10001 | N/A | 501C3 | GENERAL | 5,00 |

Recipient If recipient is an individual, show any relationship to status of recontribution Spaid During the Year or Approved for Future Payment

Recipient If recipient is an individual, show any relationship to status of contribution

Purpose of grant or contribution

recipient

1,674,900

any foundation manager

Name and address (home or business)

BRONX, NY 10454

| Name and address (nome or business)   | or substantial contributor | ·     |         |        |
|---|----------------------------|-------|---------|--------|
| a Paid during the year  |                            |       |         |        |
| PATHFINDER INTERNATIONAL<br>9 GALEN STREET SUITE 217<br>WATERTOWN, MA 02472 | N/A                        | 501C3 | GENERAL | 5,000  |
| PEOPLE FOR THE AMERICAN WAY<br>2000 M STREET<br>WASHINGTON, DC 20036        | N/A                        | 501C3 | GENERAL | 25,000 |
| PER SCHOLAS INC<br>804 E 138TH STREET 2ND FL                                | N/A                        | 501C3 | GENERAL | 12,500 |

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount

| Name and address (home or business) | any foundation manager<br>or substantial contributor | recipient | contribution |  |
|-------------------------------------|--|-----------|--------------|--|
| a Paid during the year              |  |           |              |  |

| a Paid during the year                       |     |       |         | 1      |
|--|-----|-------|---------|--------|
| PLANNED PARENTHOOD NYC<br>26 BLEECKER STREET | N/A | 501C3 | GENERAL | 40,000 |

| NEW YORK, NY 10012                             |     |       |         |  |
|--|-----|-------|---------|--|
| PROJECT RENEWAL<br>200 VARICK STREET NO 9TH FL | N/A | 501C3 | GENERAL |  |
| JEW VORK NV 10014                              |     | I     |         |  |

| 200 VARICK STREET NO 9TH FL<br>NEW YORK, NY 10014 | N/A | 501C3 | GENERAL | 1,000 |
|---|-----|-------|---------|-------|
| RED HOOK INITIATIVE INC                           | N/A | 501C3 | GENERAL | 3,500 |

| NEW YORK, NY 10014      |     |       |         |       |
|-------------------------|-----|-------|---------|-------|
| RED HOOK INITIATIVE INC | N/A | 501C3 | GENERAL | 3,500 |
| 767 HICKS STREET        |     |       |         |       |
| DDOOKLAN NA 11331       | 1   | 1     | I .     |       |

| RED HOOK INITIATIVE INC<br>767 HICKS STREET | N/A | 501C3 | GENERAL | 3,50 |
|---|-----|-------|---------|------|
| BROOKLYN, NY 11231                          |     |       |         |      |

| 767 HICKS STREET<br>BROOKLYN, NY 11231 |      |                |           |
|--|------|----------------|-----------|
| Total                                  | <br> | <b>&gt;</b> 3a | 1,674,900 |

Recipient Purpose of grant or If recipient is an individual, Foundation Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year ROTHKO CHAPEL3900 YUPON ST N/A 501C3 GENERAL 5.000 HOUSTON, TX 77006

| ROUNDABOUT THEATRE COMPANY<br>231 WEST 39TH STREET | N/A | 501C3 | GENERAL | 2,500 |
|--|-----|-------|---------|-------|
| NEW YORK, NY 10018                                 |     |       |         |       |
| SARA HOLBROOK COMMUNITY CENTER<br>66 NORTH AVENUE  | N/A | 501C3 | GENERAL | 1,000 |

1,674,900

▶ 3a

BURLINGTON, VT 05401

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution

any foundation manager

Name and address (home or business)

Total .

| ,   | or substantial contributor |       |         |        |
|---|----------------------------|-------|---------|--------|
| a Paid during the year  |                            |       |         |        |
| SHELBURNE MUSEUM INCORPORATED<br>6000 SHELBURNE RD<br>SHELBURNE, VT 05482 | N/A                        | 501C3 | GENERAL | 1,000  |
| ST NICK'S ALLIANCE  | N/A                        | 501C3 | GENERAL | 10,000 |

recipient

| STILLBORNE, VT 05402  |     |       |         |        |
|---|-----|-------|---------|--------|
| ST NICK'S ALLIANCE<br>2 KINGSLAND AVENUE 1ST FL<br>BROOKLYN, NY 11211 | N/A | 501C3 | GENERAL | 10,000 |
| STORM KING ART CENTER   | N/A | 501C3 | GENERAL | 5,000  |

| 2 KINGSLAND AVENUE 1ST FL<br>BROOKLYN, NY 11211                            |     |       |         |      |
|--|-----|-------|---------|------|
| STORM KING ART CENTER<br>OLD PLEASANT HILL ROAD<br>MOUNTAINVILLE, NY 12553 | N/A | 501C3 | GENERAL | 5,00 |

|   | BROOKLYN, NY 11211   |     |       |         |     |
|---|--|-----|-------|---------|-----|
|   | STORM KING ART CENTER<br>OLD PLEASANT HILL ROAD<br>MOUNTAINVILLE, NY 12553 | N/A | 501C3 | GENERAL | 5,0 |
| 1 |  |     |       |         |     |

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

| a Paid during the year   |     |       |         |       |
|--|-----|-------|---------|-------|
| SYRIAN AMERICAN MEDICAL SOCIETY<br>FOUNDATION<br>1012 14TH ST NW<br>WASHINGTON, DC 20005 | N/A | 501C3 | GENERAL | 5,000 |

| WASHINGTON, DC 20005  |     |       |         |       |
|---|-----|-------|---------|-------|
| THE CHILDRENS AID SOCIETY<br>711 THIRD AVENUE STE 700<br>NEW YORK, NY 10017 | N/A | 501C3 | GENERAL | 2,500 |
| THE DOOR  | N/A | 501C3 | GENERAL | 1,000 |

| 711 THIRD AVENUE STE 700<br>NEW YORK, NY 10017               |     |       |         |       |
|--|-----|-------|---------|-------|
| THE DOOR<br>121 AVENUE OF THE AMERICAS<br>NEW YORK, NY 10013 | N/A | 501C3 | GENERAL | 1,000 |

| THE DOOR 121 AVENUE OF THE AMERICAS SO1C3 GENERAL 1 |                            |     |       |         |      |
|---|----------------------------|-----|-------|---------|------|
| NEW YORK, NY 10013                                  | 121 AVENUE OF THE AMERICAS | N/A | 501C3 | GENERAL | 1,00 |
|   |                            |     | •     |         |      |

Total .

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution

recipient

1,674,900

any foundation manager

Name and address (home or business)

Total .

| Marine and dadress (frome or business)                           | or substantial contributor |       |         |        |
|--|----------------------------|-------|---------|--------|
| a Paid during the year   |                            |       |         |        |
| THE PUBLIC THEATER<br>425 LAFAYETTE STREET<br>NEW YORK, NY 10003 | N/A                        | 501C3 | GENERAL | 14,000 |
| THIRD WAVE FUNDPO BOX 1159<br>BROOKLYN, NY 11238                 | N/A                        | 501C3 | GENERAL | 1,500  |
| THOMAS COLE NATIONAL HISTORIC                                    | N/A                        | 501C3 | GENERAL | 1,000  |

| 11211 101117111 10005                                |     |       |         |    |
|--|-----|-------|---------|----|
| THIRD WAVE FUNDPO BOX 1159<br>BROOKLYN, NY 11238     | N/A | 501C3 | GENERAL | 1, |
| THOMAS COLE NATIONAL HISTORIC SITE 218 SPRING STREET | N/A | 501C3 | GENERAL | 1, |

| BROOKLYN, NY 11238                 | N/A | 501C3 | GENERAL | 1,: |
|------------------------------------|-----|-------|---------|-----|
| THOMAS COLE NATIONAL HISTORIC SITE | N/A | 501C3 | GENERAL | 1,  |
| 218 SPRING STREET                  |     |       |         |     |

| THOMAS COLE NATIONAL HISTORIC | N/A | 501C3 | GENERAL | 1,00 |
|-------------------------------|-----|-------|---------|------|
| SITE                          |     |       |         |      |
| 218 SPRING STREET             |     |       |         |      |
| CATCUTUL NIV 42444            |     | 1     | 1       | l    |

| Ш | THOMAS COLE NATIONAL HISTORIC | IN/A | 1 20103 | GENERAL | 1 |
|---|-------------------------------|------|---------|---------|---|
|   | SITE                          |      |         |         |   |
|   | 218 SPRING STREET             |      |         |         |   |
|   | CATSKILL, NY 12414            |      |         |         |   |

Recipient If recipient is an individual, show any relationship to any foundation manager or substantial contributor

Status of recipient recipient Purpose of grant or contribution

Purpose of grant or contribution

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

a Paid during the year

Total .

| TRUST WOMEN FOUNDATION INC<br>200 W DOUGLAS SUITE 600<br>WICHITA, KS 67202 | N/A | 501C3 | GENERAL | 25,000 |
|--|-----|-------|---------|--------|
|  |     |       |         |        |

| UNITED NEIGHBORHOOD HOUSES<br>70 WEST 36TH STREET 503<br>NEW YORK, NY 10018 | N/A | 501C3 | GENERAL | 85,000 |
|---|-----|-------|---------|--------|
|   |     |       |         |        |

| NEW YORK, NY 10018                                 |     |       |         |       |
|--|-----|-------|---------|-------|
| VERMONT FOOD BANK33 PARKER ROAD<br>BARRE, VT 05641 | N/A | 501C3 | GENERAL | 2,500 |

1,674,900

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution

any foundation manager

Name and address (home or business)

Total .

|  | or substantial contributor |       |         |        |
|--|----------------------------|-------|---------|--------|
| a Paid during the year   |                            |       |         |        |
| WILDERNESS SOCIETY<br>1615 M STREET NW<br>WASHINGTON, DC 20036 | N/A                        | 501C3 | GENERAL | 30,000 |
| WINOOSKI FOOD SHELF 27 WEST ALLEN ST                           | N/A                        | 501C3 | GENERAL | 1,000  |

recipient

1,674,900

| WASHINGTON, DC 20030  |     |       |         |    |
|---|-----|-------|---------|----|
| WINOOSKI FOOD SHELF<br>27 WEST ALLEN ST<br>WINOOSKI, VT 05404 | N/A | 501C3 | GENERAL | 1, |
| WORLD CENTRAL KITCHEN   | N/A | 501C3 | GENERAL | 2, |

| 27 WEST ALLEN ST<br>WINOOSKI, VT 05404       |     |       |         |      |
|--|-----|-------|---------|------|
| WORLD CENTRAL KITCHEN<br>1342 FLORIDA AVENUE | N/A | 501C3 | GENERAL | 2,00 |
| WASHINGTON DC 20000                          |     |       |         |      |

| WORLD CENTRAL KITCHEN | N/A | 501C3 | GENERAL | 2,000 |
|-----------------------|-----|-------|---------|-------|
| 1342 FLORIDA AVENUE   |     |       |         |       |
| WASHINGTON, DC 20009  |     |       |         |       |

Recipient If recipient is an individual, show any relationship to any foundation manager or substantial contributor

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

Total .

| a Paid during the year                              |     |       |         |       |
|---|-----|-------|---------|-------|
| WOMEN HAVE OPTIONSPO BOX 1611<br>COLUMBUS. OH 43216 | N/A | 501C3 | GENERAL | 1,000 |

1,674,900

| Name: THE STAINMAN FAMILY FOUNDATION INC  EIN: 13-3980213  Category Amount Net Investment Adjusted Net Disbursements |                |        |   |                    |  |  |
|--|----------------|--------|---|--------------------|--|--|
| TY 2018 Accounting Fees Schedule   |                |        |   |                    |  |  |
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| Category | Amount | Net Investment<br>Income | Adjusted Net<br>Income | Disbursements<br>for Charitable<br>Purposes |
|----------|--------|--------------------------|------------------------|---|

53,699

5,967

59,666

ACCOUNTING AND BOOKKEEPING

FEES

| efile GRAPHIC print - DO NOT PROCESS | As Filed Data - | DLN: 93491317015179  |
|--------------------------------------|-----------------|----------------------|
| TY 2018 Investments Corporat         | e Bonds Sche    | dule                 |
| Name:                                | THE STAINMAN F  | AMILY FOUNDATION INC |

2,000

2,031

| 11411101                              |            |
|---------------------------------------|------------|
| EIN:                                  | 13-3980213 |
| Tavastorenta Carmarata Banda Cabadula |            |

2000 ALLEGIANT TRAVEL CO GTD FXD RT SR NT 5.5%

| Investments Corporate Bonds Schedule |                           |                                  |  |  |
|--------------------------------------|---------------------------|----------------------------------|--|--|
| Name of Bond                         | End of Year Book<br>Value | End of Year Fair<br>Market Value |  |  |
|                                      |                           |                                  |  |  |

## **TY 2018 Investments Corporate Stock Schedule**

Name: THE STAINMAN FAMILY FOUNDATION INC

**EIN:** 13-3980213

**Investments Corporation Stock Schedule** 

| Investments Corporation Stock Schedule                  |                           |                                  |  |  |  |
|---|---------------------------|----------------------------------|--|--|--|
| Name of Stock   | End of Year Book<br>Value | End of Year Fair<br>Market Value |  |  |  |
| 10000 SHS AGROFRESH SOLUTIONS INC. WARRANT EXP 07/31/20 | 18,076                    | 1,598                            |  |  |  |
| 101700 SHS CHESAPEAKE ENERGY CORP                       | 678,666                   | 213,570                          |  |  |  |
| 12500 SHS PRESTIGE BRANDS                               | 81,690                    | 386,000                          |  |  |  |
| 130000 SHS DUNDEE PRECIOUS METALS INC                   | 189,725                   | 342,706                          |  |  |  |
| 14000 SHS AMERICAN INTL GROUP INC COM                   | 410,351                   | 551,740                          |  |  |  |
| 145000 SHS AGROFRESH SOLUTIONS INC.                     | 991,839                   | 606,400                          |  |  |  |
| 15000 SHS CITIGROUP INC COM NEW                         | 730,960                   | 775,694                          |  |  |  |
| 168250 SHS TEEKAY OFFSHORE PARTNERS LP                  | 417,752                   | 203,583                          |  |  |  |
| 1750 SHS LIBERTY MEDIA SERIES C COMMON                  | 23,670                    | 53,725                           |  |  |  |
| 19282 SHS FRMO CORP COM NEW                             | 37,509                    | 98,338                           |  |  |  |
| 195475 SHS DUNDEE BANCORP INC. CL-A SUB VTG             | 972,487                   | 298,980                          |  |  |  |
| 20000 SHS HUTTIG BUILDING PRODS INC. COM                | 124,400                   | 36,000                           |  |  |  |
| 20000 SHS ONEX CORP SUB VTG                             | 859,949                   | 1,007,230                        |  |  |  |
| 20075 SHS APPROACH RES INC COM                          | 53,840                    | 17,505                           |  |  |  |
| 2021 SHS LIBERTY BROADBAND CORP COM SER C               | 68,010                    | 145,573                          |  |  |  |
| 22500 SHS BROOKFIELD ASSET MNGMT INC                    | 238,524                   | 862,875                          |  |  |  |
| 25000 SHS NEWELL BRANDS INC.                            | 661,097                   | 650,650                          |  |  |  |
| 25500 SHS HORIZON GLOBAL CORP COM                       | 323,456                   | 71,500                           |  |  |  |
| 28832 SHS TRISURA GROUP LTD.                            | 464,457                   | 551,050                          |  |  |  |
| 30000 SHS PLATFORM SPECIALTY PRODS CORP                 | 515,116                   | 520,632                          |  |  |  |
| 33200 SHS BRESLER & REINER INC. COM                     | 4,557                     | 166                              |  |  |  |
| 35461 SHS NEW HOME CO INC.                              | 471,925                   | 237,238                          |  |  |  |
| 40500 SHS JEFFERIES FINL GROUP INC COM                  | 725,487                   | 703,080                          |  |  |  |
| 41100 SHS SAFEGUARD SCIENTIFIC INC COM NEW              | 566,578                   | 445,378                          |  |  |  |
| 45000 SHS BRT REALTY TRUST                              | 288,815                   | 514,800                          |  |  |  |
| 45000 SHS TITAN INTERNATIONAL INC ILL COM               | 226,104                   | 209,700                          |  |  |  |
| 47500 SHS TRIMAS CORP COM NEW                           | 287,464                   | 1,296,275                        |  |  |  |
| 47975 SHS CAPITAL SR LIVING CORP COM                    | 734,537                   | 360,230                          |  |  |  |
| 49987 SHS CARROLS RESTAURANT GROUP INC COM              | 124,710                   | 491,872                          |  |  |  |
| 5550 SHS ASBURY AUTOMOTIVE GROUP INC.                   | 366,621                   | 369,963                          |  |  |  |

Investments Corporation Stock Schedule

| Name of Stock  | End of Year Book<br>Value | End of Year Fair<br>Market Value |
|--|---------------------------|----------------------------------|
| 59464 SHS PACIFIC MERCANTILE BANCORP                     | 329,128                   | 425,168                          |
| 65000 SHS CBIZ INC COM                                   | 422,558                   | 1,238,145                        |
| 8750 SHS SOUTHERN NATL BANCORP VA INC COM                | 52,500                    | 115,675                          |
| 9126 SHS TRINITY PL HLDGS INC COM                        | 107,531                   | 61,307                           |
| 7675 SHS GATES INDUSTRIAL CORPORATION PLC REGISTERED SHS | 122,047                   | 101,617                          |
| 45000 SHS CWC ENERGY SVCS CORP COM                       | 6,325                     | 3,790                            |
| 40000 SHS GRAFTECH INTL LTD COM                          | 739,754                   | 457,600                          |
| 17500 SHS LENNAR CORP CL A                               | 855,377                   | 685,125                          |
| 200 SHS MERIDIAN BK PAOLI PA COM                         | 3,540                     | 3,434                            |
| 9675 SHS SPECTRUM BRANDS HLDGS INC NEW COM               | 846,949                   | 408,769                          |
| 25675 SHS TEEKAY OFFSHORE PARTNERS LP PFD UNITS          | 598,238                   | 459,583                          |
| 12150 SHS ISHARES TR US HOME CONSTRUCTION ETF FD         | 355,215                   | 364,986                          |
| 25000 SHS BROOKFIELD PPTY REIT INC                       | 516,839                   | 402,500                          |

Name: THE STAINMAN FAMILY FOUNDATION INC.

ETN: 12 2000212

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|-----|----------|----|

DUE FROM BROKER

|   | Description            | Beginning of Year - | End of Year - Book |
|---|------------------------|---------------------|--------------------|
| ( | Other Assets Schedule  |                     |                    |
|   | <b>EIN.</b> 15 5700215 |                     |                    |

**Book Value** 

492,422

DLN: 93491317015179

End of Year - Fair Market Value

29.791

Value

29,791

| efile GRAPHIC print - DO NOT PROCESS        | As Filed Data -                      |                          | DLN                    | : 93491317015179                            |  |  |
|---|--------------------------------------|--------------------------|------------------------|---|--|--|
| TY 2018 Other Expenses Schedule             |                                      |                          |                        |   |  |  |
|   |                                      |                          |                        |   |  |  |
| Name: THE STAINMAN FAMILY FOUNDATION INC    |                                      |                          |                        |   |  |  |
| EIN:  | <b>EIN:</b> 13-3980213               |                          |                        |   |  |  |
| Other Expenses Schedule                     |                                      |                          |                        |   |  |  |
| Description                                 | Revenue and<br>Expenses per<br>Books | Net Investment<br>Income | Adjusted Net<br>Income | Disbursements for<br>Charitable<br>Purposes |  |  |
| NYS FILING FEES                             | 750                                  | 0                        |                        | 750   |  |  |
| NON-DEDUCTIBLE EXPENSE FROM CIL & D LLC K-1 | 2                                    | 0                        |                        | 0   |  |  |

ORDINARY LOSS FROM PASSTHROUGH ENTITY

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-1.568

Name: THE STAINMAN FAMILY FOUNDATION INC.

**EIN:** 13-3980213

Other Income Schedule

Net Investment Income

-1,568

**Adjusted Net Income** 

-1.568

DLN: 93491317015179

Revenue And

As Filed Data -

Description

**Expenses Per Books** 

| efile GRAPHIC print - DO NOT PROCESS     | As Filed Data - |                                   | D                           | LN: 934913170151 | L79 |  |
|--|-----------------|-----------------------------------|-----------------------------|------------------|-----|--|
| TY 2018 Other Liabilities Schedule       |                 |                                   |                             |                  |     |  |
|  |                 |                                   |                             |                  |     |  |
| Name: THE STAINMAN FAMILY FOUNDATION INC |                 |                                   |                             |                  |     |  |
| <b>EIN:</b> 13-3980213                   |                 |                                   |                             |                  |     |  |
| Description                              |                 | Beginning of Year<br>- Book Value | End of Year -<br>Book Value |                  |     |  |
| OTHER LIABILITIES                        |                 |                                   | 20,264                      |                  | 0   |  |

| efile GRAPHIC print - DO NOT PROCESS | S As Filed Data      | -                        | DL                     | N: 93491317015179                           |
|--------------------------------------|----------------------|--------------------------|------------------------|---|
| TY 2018 Taxes Schedule               |                      |                          |                        | _   |
|                                      |                      |                          |                        |   |
| Nam                                  | e: THE STAINM        | IAN FAMILY FOUNI         | DATION INC             |   |
| EI                                   | <b>N:</b> 13-3980213 |                          |                        |   |
| Category                             | Amount               | Net Investment<br>Income | Adjusted Net<br>Income | Disbursements<br>for Charitable<br>Purposes |
| FEDERAL TAXES                        | 50,000               | 0                        |                        | 0   |
| FOREIGN TAX WITHHELD                 | 3,915                | 3,915                    |                        | 0   |

| efile GRAPHIC print - D  | O NOT PROCESS As Filed Da  | ta -   |  | DLN: 93491317015179   |  |  |
|--|--|--|--|---|--|--|
| Schedule B   | Sche   | edule of Contributors  |  | OMB No 1545-0047  |  |  |
| (Form 990, 990-EZ,<br>or 990-PF)<br>Department of the Treasury<br>Internal Revenue Service |  | ch to Form 990, 990-EZ, or 990-PF<br><u>rrs gov/Form990</u> for the latest inform  | nation   | 2018  |  |  |
| Name of the organization   |  |  | Employer id  | dentification number  |  |  |
| Organization type (chec  | rk one)  |  | 13-3980213   | 1   |  |  |
|  | ,  |  |  |   |  |  |
| Filers of:   | Section:   |  |  |   |  |  |
| Form 990 or 990-EZ   |  |  |  |   |  |  |
| 4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private four                 |  |  |  |   |  |  |
|  | ☐ 527 political organization   | on   |  |   |  |  |
| Form 990-PF  | ✓ 501(c)(3) exempt privat  | te foundation  |  |   |  |  |
|  | 4947(a)(1) nonexempt   | 4947(a)(1) nonexempt charitable trust treated as a private foundation  |  |   |  |  |
|  | 501(c)(3) taxable privat   | te foundation  |  |   |  |  |
|  |  | 990-PF that received, during the year<br>or Complete Parts I and II See in   |  |   |  |  |
| Special Rules  |  |  |  |   |  |  |
| under sections 50 received from an   | 09(a)(1) and 170(b)(1)(A)(vi), that  | filing Form 990 or 990-EZ that me<br>checked Schedule A (Form 990 or<br>total contributions of the greater<br>Complete Parts I and II  | or 990-EZ), Part II, line 13,  | , 16a, or 16b, and that   |  |  |
| during the year, t   | otal contributions of more than \$1  | , (8), or (10) filing Form 990 or 99<br>I,000 <i>exclusively</i> for religious, cha<br>en or animals Complete Parts I, II  | aritable, scientific, literary, d  |   |  |  |
| during the year, of<br>If this box is check<br>purpose Don't co                            | contributions exclusively for religion<br>ked, enter here the total contribut<br>complete any of the parts unless th | , (8), or (10) filing Form 990 or 990 ous, charitable, etc., purposes, buttions that were received during the <b>General Rule</b> applies to this or 000 or more during the year | t no such contributions tota<br>e year for an exclusively re<br>ganization because it rece | aled more than \$1,000 eligious, charitable, etc , eved <i>nonexclusively</i> |  |  |
| 990-EZ, or 990-PF), but  | t <b>must</b> answer "No" on Part IV, lii  | al Rule and/or the Special Rules d<br>ne 2, of its Form 990, or check the<br>y that it doesn't meet the filing req   | e box on line H of its   |   |  |  |
| For Paperwork Reduction A for Form 990, 990-EZ, or 990                                     | ct Notice, see the Instructions<br>-PF   | Cat No 30613X  | Schedule B (Form 990   | 0, 990-EZ, or 990-PF) (2018)  |  |  |

Name of organization THE STAINMAN FAMILY FOUNDATION INC

**Employer identification number** 

|                    |  | 13-39802                   | 213   |
|--------------------|--|----------------------------|---|
| Part I             | Contributors (See Instructions) Use duplicate copies of Part I if additional space | ıs needed                  |   |
| (a)<br>No.         | (b)<br>Name, address, and ZIP + 4  | (c)<br>Total contributions | (d)<br>Type of<br>contribution                                      |
|                    | See Additional Data Table  | s                          | Person Payroll Noncash  (Complete Part II for noncash contribution) |
| (a)<br>No.         | (b)<br>Name, address, and ZIP + 4  | (c)<br>Total contributions | (d)<br>Type of<br>contribution                                      |
|                    |  | \$                         | Person Payroll Noncash  (Complete Part II for noncash contribution) |
| (a)<br>No.         | (b)<br>Name, address, and ZIP + 4  | (c)<br>Total contributions | (d)<br>Type of<br>contribution                                      |
|                    |  | \$                         | Person  |
| (a)<br><b>N</b> o. | (b)<br>Name, address, and ZIP + 4  | (c)<br>Total contributions | for noncash contribution )  (d) Type of contribution                |
|                    |  | s                          | Person Payroll Noncash  (Complete Part II for noncash contribution) |
| (a)<br>No.         | (b)<br>Name, address, and ZIP + 4  | (c)<br>Total contributions | (d) Type of contribution  |
|                    |  | s                          | Person Payroll Noncash  (Complete Part II for noncash contribution) |
| (a)<br>No.         | (b)<br>Name, address, and ZIP + 4  | (c)<br>Total contributions | (d)<br>Type of<br>contribution                                      |
|                    |  | s                          | Person Payroll Noncash  (Complete Part II for noncash contribution) |

Page 3

Name of organization THE STAINMAN FAMILY FOUNDATION INC

number

|                           |   |  | 13-3980213           |
|---------------------------|---|--|----------------------|
| Part II                   | Noncash Property (See Instructions) Use duplicate copies of Part II if additional space is needed | ed                                       |                      |
| (a)<br>No. from<br>Part I | (b)<br>Description of noncash property given  | (c) FMV (or estimate) (See instructions) | (d)<br>Date received |
| _                         | See Additional Data Table   | \$                                       |                      |
| (a)<br>No. from<br>Part I | (b)<br>Description of noncash property given  | (c) FMV (or estimate) (See instructions) | (d)<br>Date received |
|                           |   | \$                                       |                      |
| (a)<br>No. from<br>Part I | (b)<br>Description of noncash property given  | (c) FMV (or estimate) (See instructions) | (d)<br>Date received |
|                           |   | \$                                       |                      |
| (a)<br>No. from<br>Part I | (b)<br>Description of noncash property given  | (c) FMV (or estimate) (See instructions) | (d)<br>Date received |
|                           |   | \$                                       |                      |
| (a)<br>No. from<br>Part I | (b)<br>Description of noncash property given  | (c) FMV (or estimate) (See instructions) | (d)<br>Date received |
|                           |   | _\$                                      |                      |
| (a)<br>No. from<br>Part I | (b)<br>Description of noncash property given  | (c) FMV (or estimate) (See instructions) | (d)<br>Date received |
|                           |   | _\$                                      |                      |

Schedule B (Form 990, 990-EZ, or 990-PF) (2018)

## **Additional Data**

## Software ID:

**Software Version:** 

**EIN:** 13-3980213

Name: THE STAINMAN FAMILY FOUNDATION INC

Form 990 Schedule B, Part I - Contributors (see Instructions) Use duplicate copies of Part I if additional space is needed.

|            | B, Part 1 - Contributors (see instructions) Ose duplicate copies | <u> </u>                   |  | <u> </u>                |
|------------|--|----------------------------|--|-------------------------|
| (a)<br>No. | (b)<br>Name, address, and ZIP + 4                                | (c)<br>Total contributions | (d)<br>Type of contribution              |                         |
|            | ARTHUR J STAINMAN  |                            | Person                                   |                         |
| 1          | 320 EAST 72ND STREET   |                            | Payroll                                  |                         |
|            | NEW YORK, NY 10021   | \$ 904,862                 | Noncash                                  | ☑                       |
|            | ,  |                            | (Complete Part II for no contributions ) | ncash                   |
|            | ARTHUR J STAINMAN  |                            | Person                                   |                         |
| 2          | 320 EAST 72ND STREET   |                            | Payroll                                  |                         |
|            | NEW YORK, NY 10021   | \$ 354,333                 | Noncash                                  | $ \mathbf{V}$           |
|            | MEN (SAR) III 20022  |                            | (Complete Part II for no contributions ) | ncash                   |
|            | ARTHUR J STAINMAN  |                            | Person                                   | $\Box$                  |
| 3          | 320 EAST 72ND STREET   |                            | Payroll                                  |                         |
|            | NEW YORK, NY 10021   | \$ 118,418                 | Noncash                                  | ☑                       |
|            | ,  |                            | (Complete Part II for no contributions ) | ncash                   |
|            | LOIS K STAINMAN  |                            | Person                                   |                         |
| 4          | 320 EAST 72ND STREET   | 1                          | Payroll                                  |                         |
|            | NEW YORK, NY 10021   | \$ 124,918                 | Noncash                                  | ✓                       |
|            | MEN (ONLY III 2002)  |                            | (Complete Part II for no contributions ) | ncash                   |
|            | LOIS K STAINMAN  |                            | Person                                   |                         |
| <u>5</u>   | 320 EAST 72ND STREET   |                            | Payroll                                  |                         |
|            | NEW YORK, NY 10021   | \$ 19,014                  | Noncash                                  | ✓                       |
|            | NEW TORRY WT 19921   |                            | (Complete Part II for no contributions ) | ncash                   |
|            | LOIS K STAINMAN  |                            | Person                                   | $\square$ 1             |
| <u>6</u>   | 320 EAST 72ND STREET   | ╡                          | Payroll                                  |                         |
|            | NEW YORK, NY 10021   | \$ 47,711                  | Noncash                                  | $\overline{\mathbf{V}}$ |
|            | NEW TOTAL TOTAL  |                            | (Complete Part II for no contributions ) | ncash                   |

| (a)<br>No.   | (b)<br>Name, address, and ZIP + 4      | (c)<br>Total contributions | (d)<br>Type of contribi              | ution        |
|--------------|--|----------------------------|--------------------------------------|--------------|
|              | LOIG IX STATAINAAN                     |                            | Person                               |              |
| <u>7</u> ——  | LOIS K STAINMAN 320 EAST 72ND STREET   |                            | Payroll                              |              |
|              | 320 EAST 72ND STREET                   |                            | •                                    |              |
|              | NEW YORK NIV 10021                     | \$ 151,944                 | Noncash                              | <b>✓</b>     |
|              | NEW YORK, NY 10021                     |                            |                                      |              |
|              |  |                            | (Complete Part II fo<br>contribution |              |
|              |  |                            | Person                               | ,            |
| <u>8</u> —   | LOIS K STAINMAN                        |                            | _ "                                  |              |
| -            | 320 EAST 72ND STREET                   |                            | Payroll                              |              |
|              |  | \$ 136,200                 | Noncash                              | <b>✓</b>     |
|              | NEW YORK, NY 10021                     |                            |                                      | V            |
|              |  |                            | (Complete Part II fo                 |              |
|              |  |                            | contribution                         | ıs )         |
|              | LOIS K STAINMAN                        |                            | Person                               |              |
| 9 —          | 320 EAST 72ND STREET                   |                            | Payroll                              |              |
|              |  | \$ 66,225                  | Noncash                              | ᆜ            |
| l ——         | NEW YORK, NY 10021                     | 3 00,223                   | Noncasii                             | <b>✓</b>     |
|              | ,                                      |                            | (Complete Part II fo                 | or noncach   |
|              |  |                            | contribution                         |              |
|              |  |                            | Person                               |              |
| <u>10</u> —— | ARTHUR J STAINMAN 320 EAST 72ND STREET |                            | Payroll                              |              |
|              | 320 EAST 72ND STREET                   |                            | •                                    |              |
|              | NEW YORK NIV 10021                     | \$ 100,640                 | Noncash                              | <b>✓</b>     |
|              | NEW YORK, NY 10021                     |                            |                                      |              |
|              |  |                            | (Complete Part II fo                 |              |
|              |  |                            | Person                               | <u> </u>     |
| 11 —         | LOIS K STAINMAN                        |                            |                                      |              |
| <u></u>      | 320 EAST 72ND STREET                   |                            | Payroll                              |              |
|              |  | \$ 31,400                  | Noncash                              |              |
|              | NEW YORK, NY 10021                     |                            |                                      | $\checkmark$ |
|              |  |                            | (Complete Part II fo                 | or noncash   |
|              |  |                            | contribution                         | ıs)          |

Form 990 Schedule B, Part II - Noncash Property (see Instructions) Use duplicate copies of Part II if additional space is needed (c) (b)
Description of noncash property given (d) (a) FMV (or estimate) No. from Part I Date received

|   | bescription of noneasin property given         | (See instructions) | Date received |
|---|--|--------------------|---------------|
| 1 | 36,180 SHARES FOREST CITY RLTY TR INC COM CL A | \$ 904,86 <u>2</u> | 2018-07-31    |
| 2 | 14,100 SHARES FOREST CITY RLTY TR INC COM CL A | \$ 354,333         | 2018-09-24    |
| 3 | 4,716 SHARES FOREST CITY RLTY TR INC COM CL A  | \$ 118,418         | 2018-10-02    |
| 4 | F 037 CHARES HOME BANCSHARES INC COM           | ¢ 124 019          | 2018 01 24    |

| <u>4</u> | 5,037 SHARES HOME BANCSHARES INC COM             | \$ 124,918 | 2018-01-24 |
|----------|--|------------|------------|
| 51       | 805 SHARES HOME BANCSHARES INC COM               | \$ 19,014  | 2018-02-08 |
| <u>6</u> | 1,118 SHARES SANDY SPRING BANCORP INC CMT<br>COM | <u> </u>   | 2018-06-11 |

| <u>5</u> | 805 SHARES HOME BANCSHARES INC COM               | \$ 19,014  | 2018-02-08 |
|----------|--|------------|------------|
| <u>6</u> | 1,118 SHARES SANDY SPRING BANCORP INC CMT<br>COM | \$ 47,711  | 2018-06-11 |
| <u>7</u> | 5,200 SHARES ACCESS NATIONAL CORP COM            | \$ 151,944 | 2018-10-10 |
| 8_       | 5,000 SHARES ACCESS NATIONAL CORP COM            | \$ 136,200 | 2018-10-15 |
|          |  |            |            |

| <u>6</u> | 1,118 SHARES SANDY SPRING BANCORP INC CMT<br>COM | \$ 47,711  | 2018-06-11 |
|----------|--|------------|------------|
| 7        | 5,200 SHARES ACCESS NATIONAL CORP COM            | \$ 151,944 | 2018-10-10 |
| <u>8</u> | 5,000 SHARES ACCESS NATIONAL CORP COM            | \$ 136,200 | 2018-10-15 |

| _        | 5,000 SHARES ACCESS NATIONAL CORP COM | \$ 136,200       | 2018-10-15 |
|----------|---------------------------------------|------------------|------------|
| <u>9</u> | 2,500 SHARES ACCESS NATIONAL CORP COM | <u>\$ 66,225</u> | 2018-11-05 |

\$ 100,640

2018-11-02

| 9   | 2,500 SHARES ACCESS NATIONAL CORP COM | \$ 66,225 | 2018-11-05 |
|-----|---------------------------------------|-----------|------------|
| 1.0 |                                       |           |            |

Form 990 Schedule B, Part II - Noncash Property (see Instructions) Use duplicate copies of Part II if additional space is needed (d) FMV (or estimate) No. from Part I Description of noncash property given Date received (See instructions) 1,250 SHARES FOREST CITY RLTY TR INC COM CL A \$ 31,400 2018-09-24