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2018

OMB No 1545-0052

Department of the Treasury Internal Revenue Service

Form 990-PF

Return of Private Foundation

▶ Go to <u>www.irs.gov/Form990PF</u> for instructions and the latest information.

or Section 4947(a)(1) Trust Treated as Private Foundation ▶ Do not enter social security numbers on this form as it may be made public.

Open to Public Inspection

For	caler	ndar year 2018, or tax year beginning 01-01-20)18 , aı	nd en	nding 12-31	-2018	·
		indation LL FAMILY FOUNDATION			A Employer id	entification numbe	r
	IE KROL	LE FAMILET FOUNDATION	13-4154059				
		d street (or P O $$ box number if mail is not delivered to street address) $$ GHTON LANE	B Telephone number (see instructions)				
			(914) 236-313	1			
		n, state or province, country, and ZIP or foreign postal code MANOR, NY 10510			C If exemption	application is pendin	g, check here
G Cl	neck al	l that apply 🔲 Initial return 🔲 Initial return of a	former public charity		D 1. Foreign or	ganizations, check he	ere 🗆
		☐ Final return ☐ Amended return	, ,			rganizations meeting	
		\square Address change \square Name change			<i>'</i>	k here and attach co	—
H C	neck ty	$ \mathbf{V} $ pe of organization \mathbf{V} Section 501(c)(3) exempt private	foundation			undation status was t on 507(b)(1)(A), chec	
<u></u> :	Section	n 4947(a)(1) nonexempt charitable trust 🔲 Other taxabl	e private foundation				
of	year (f	xet value of all assets at end from Part II, col (c), ▶\$ 660,080 J Accounting method □ Other (specify) (Part I, column (d) must	Cash Accru	ıal		ation is in a 60-montl in 507(b)(1)(B), chec	
Pa	rt I	Analysis of Revenue and Expenses (The total		<u> </u>			(d) Disbursements
		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	(Ь)	Net investment income	(c) Adjusted net income	for charitable purposes (cash basis only)
	1	Contributions, gifts, grants, etc , received (attach schedule)					
	2	Check ▶ ✓ If the foundation is not required to attach					
	3	Interest on savings and temporary cash investments	5,663		5,663		
	4	Dividends and interest from securities	17,431		17,431		
	5a	Gross rents					
	ь	Net rental income or (loss)					
ĭte	6a	Net gain or (loss) from sale of assets not on line 10					
Revenue	ь	Gross sales price for all assets on line 6a					
ă	7	Capital gain net income (from Part IV, line 2)					
	8	Net short-term capital gain					
	10a	Income modifications					
	ь	Gross sales less returns and allowances Less Cost of goods sold]				
		Gross profit or (loss) (attach schedule)					
	11	Other income (attach schedule)					
	12	Total. Add lines 1 through 11	23,094		23,094		
	13	Compensation of officers, directors, trustees, etc					
	14	Other employee salaries and wages					
6S	15	Pension plans, employee benefits					
Sui	16a	Legal fees (attach schedule)					
χ	ь	Accounting fees (attach schedule)	1,800				1,800
e E	C	Other professional fees (attach schedule)					
Operating and Administrative Expenses	17	Interest					
Str	18	Taxes (attach schedule) (see instructions)	455		455		
Ē	19	Depreciation (attach schedule) and depletion					
Adı	20	Occupancy					
, bn	21	Travel, conferences, and meetings					
g G	22	Printing and publications	353	-	150		203
Ĭ.	24	Total operating and administrative expenses.	353				200
era		Add lines 13 through 23	2,608		605		2,003
Ö	25	Contributions, gifts, grants paid	69,176				69,176
	26	Total expenses and disbursements. Add lines 24 and 25	74 704		605		74 470
	27	Subtract line 26 from line 12	71,784		003		71,179
	a	Excess of revenue over expenses and					
		disbursements Net investment income (if negative, enter -0-)	-48,690		22.4		
	b c	Adjusted net income (if negative, enter -0-)			22,489		
For	_	work Reduction Act Notice, see instructions.			Cat No 11289	I X For	<u> </u> ·m 990-PF (2018)

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

Mortgages and other notes payable (attach schedule).

Total liabilities(add lines 17 through 22)

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

Foundations that follow SFAS 117, check here ▶

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

Foundations that do not follow SFAS 117, check here ▶

Paid-in or capital surplus, or land, bldg, and equipment fund

Capital stock, trust principal, or current funds

Retained earnings, accumulated income, endowment, or other funds

Total net assets or fund balances (see instructions)

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

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

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

Analysis of Changes in Net Assets or Fund Balances

Land, buildings, and equipment basis

instructions Also, see page 1, item I)

Other assets (describe > _

Other liabilities (describe ▶_

Unrestricted

and complete lines 27 through 31.

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

Decreases not included in line 2 (itemize) ▶.

Other increases not included in line 2 (itemize) -

Enter amount from Part I, line 27a

Permanently restricted . . .

Temporarily restricted

Grants payable

122,790

502,911

747,780

747,780

747,780

747,780

40,391

483.338

660,080

660,080

660,080

660,080

1

2

3

4

5

6

40,391

483.338

660,080

	7
2	8
Assets	9
As	10a
	ŀ
	(

11

12

13

14

15

16

17

18

19 20

21

22

23

24

25

28

29

30

31

Part III

2

3

4

Liabilities

Balances

Fund 26

ō

Assets 27

Net

699,090 39,010 660,080 Form **990-PF** (2018)

747,780

-48,690

If section 4940(d)(2) applies, leave this part blank Yes 🗸 No Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? If "Yes," the foundation does not qualify under section 4940(e) Do not complete this part

Net value of noncharitable-use assets

754,486

797,827

833,463

863,198

883,635

2

4

5

6 7

(d) Distribution ratio

(col (b) divided by col (c))

0 088451

0 083834

0 065017

0 052676

0 099340

0 389318

0 077864

696,112

54,202

54,427 71,179

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225

Enter the appropriate amount in each column for each year, see instructions before making any entries

66,735

66,885

54,189

45,470

87,780

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

Adjusted qualifying distributions

3 Average distribution ratio for the 5-year base period—divide the total on line 2 by 5 0, or by the

.

number of years the foundation has been in existence if less than 5 years

4 Enter the net value of noncharitable-use assets for 2018 from Part X, line 5

6 Enter 1% of net investment income (1% of Part I, line 27b) .

8 Enter qualifying distributions from Part XII, line 4

(a)

Base period years Calendar

year (or tax year beginning in)

2017

2016

2015

2014

2013

2 Total of line 1, column (d)

5 Multiply line 4 by line 3

instructions

Page **6**

Pai	t VII-B	Statements Regard	ling	Activities for Which	Form 4720 May Be	Required (continu	ied)				
5a	During the	e year did the foundation p	oay o	ncur any amount to						Yes	No
	(1) Carry	on propaganda, or otherv	vise a	e attempt to influence legislation (section 4945(e))?							
(2) Influence the outcome of any speci			pecific	fic public election (see section 4955), or to carry							
	on, dı	rectly or indirectly, any vo	ter re	gistration drive?		· · □ Ye		No			
	(3) Provid	de a grant to an individual	for tr	avel, study, or other sım	ılar purposes?	☐ Ye		No			
	(4) Provid	de a grant to an organizati	on ot	her than a charitable, etc	, organization described						
	ın sec	tion 4945(d)(4)(A)? See ir	nstrud	tions		· · · Ye:	. •	No			
		de for any purpose other t		• .							
		tional purposes, or for the	•	•		⊔ Ye:	, ~	No			
b	If any answer is "Yes" to 5a(1)–(5), did any of the transactions fail to qualify under the exceptions described in										
	Regulations section 53 4945 or in a current notice regarding disaster assistance? See instructions										
	-	, ,		J J			' <u>Ц</u>				
С		wer is "Yes" to question 5			•		_				
		se it maintained expenditu Sttach the statement requi		·		· ·	s 📙	No			
c-		•		-							
6 a		undation, during the year, I hanefit contract?			indirectly, to pay premit	_					
b	•	I benefit contract? undation, during the year,			rectly on a personal be	· L Ye	. '	No	6b		No
U		o 6b, file Form 8870	pay	premiums, affectly of ma	frectiy, off a personal be	ment contract.	•	ŀ	0.0		140
7a		ne during the tax year, wa	s the	foundation a party to a n	robibited tax shelter tran	nsaction?					
		the foundation receive ar				⊥ Ye:	. ⊻	No	7b		
8		ndation subject to the sec		·			-	İ			
		rachute payment during th				_					
		Information About (sid Er	No l	/00C		
Pai	t VIII	and Contractors)IIIC	ers, Directors, Trust	ees, roundation Ma	magers, mighty F	aid Ei	прю	yccs,		
1	List all of	ficers, directors, truste	oe fo	undation managers ar	d their compensation	See instructions					
	LISC UII OI	neers, unrectors, truster	1	b) Title, and average	(c) Compensation (If	(d) Contributions	to	Τ,,	_		
	(a) Na	me and address	,	hours per week	not paid, enter	employee benefit pla	ns and			se acc Iowano	
LOTE	/DOLL		DDEC	devoted to position	-0-)	deferred compensa					
	KROLL EIGHTON LAI	NE	000 (IDENT 00	0		C	'			0
24 CR	EIGHTON LAI	NE									
		R, NY 10510			_						
	A KROLL	N.F.	000 (PRESIDE 00	0		C	7			0
	EIGHTON LAI EIGHTON LAI										
		R, NY 10510									
	DEL PRIORE		TREA 1000 (SURER 10	0		C	기			0
	EIGHTON LAI EIGHTON LAI										
		R, NY 10510	<u> </u>								
	Compens	ation of five highest-pa	id en	ployees (other than the	nose included on line 1			ne, er	nter "	NONE.	
(a)	Name and a	address of each employee	paid	(b) Title, and average		(d) Contributions employee benef		(e) i	Expens	se acco	ount.
(-)		ore than \$50,000	P	hours per week devoted to position	(c) Compensation	plans and deferr				owanc	
				devoted to position		compensation					
NON											
_		<u> </u>		0.000							
ıota	number of	f other employees paid ov	er \$5	0,000		<u> • • • • • • • • • • • • • •</u>					

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Part VIII Information About Officers, Directors, Trust and Contractors (continued)	ees, Foundation Managers, Highly I	Paid Employees,
3 Five highest-paid independent contractors for professional s	services (see instructions). If none, ente	er "NONE".
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services.		<u> </u>
Part IX-A Summary of Direct Charitable Activities	de velevent statistical information such as the number	of
List the foundation's four largest direct charitable activities during the tax year Inclu organizations and other beneficiaries served, conferences convened, research papers	s produced, etc	Expenses
1		
2		
3		
4		
Part IX-B Summary of Program-Related Investments	•	A
Describe the two largest program-related investments made by the foundation du 1 N/A	uring the tax year on lines 1 and 2	Amount
2		
All other program-related investments See instructions		
3		
Total. Add lines 1 through 3		. •
		Form 990-PF (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

3a 3b

4

5

71.179

70.954

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225

Amounts set aside for specific charitable projects that satisfy the

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

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

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

3

4

5

2018

Page 9

34,581

34,581

Form **990-PF** (2018)

Form	990-PF (2	018)
Pa	rt XIII	Und

990-PF (20	018)		
t 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)

Corpus

119.290

36.598

155,888

45.010

110,878

3.061 13,376

28.082

29.761

36.598

45.010 3,061 (b)

Years prior to 2017

(c)

2017

- a Enter amount for 2017 only.
- **b** Total for prior years Excess distributions carryover, if any, to 2018
- a From 2013. **b** From 2014. . . . c From 2015. .

a Applied to 2017, but not more than line 2a **b** Applied to undistributed income of prior years (Election required—see instructions). c Treated as distributions out of corpus (Election required—see instructions).

- d From 2016. . . . e From 2017.
- 13 376 28.082 29,761 f Total of lines 3a through e. 4 Qualifying distributions for 2018 from Part XII, line 4 🕨 \$

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

a Corpus Add lines 3f, 4c, and 4e Subtract line 5 b Prior years' undistributed income Subtract line 4b from line 2b c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed. d Subtract line 6c from line 6b Taxable amount 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

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. .

6 Enter the net total of each column as

indicated below:



Enter gross	s amounts unless otherwise indicated	Unrelated bu	isiness income	Excluded by section	512, 513, or 514	(e) Related or exempt
_	n service revenue	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	function income (See instructions)
е						
_	and contracts from government agencies					
	ership dues and assessments					
	st on savings and temporary cash nents			14	5,663	
	nds and interest from securities			14	17,431	
	ntal income or (loss) from real estate					
	-financed property					
	lebt-financed property					
	ntal income or (loss) from personal property nvestment income.			14		
	r (loss) from sales of assets other than			14		
invento	• •					
9 Net inc	come or (loss) from special events					
	profit or (loss) from sales of inventory					
	revenue a					
	al Add columns (b), (d), and (e).				23,094	
l3 Total.	Add line 12, columns (b), (d), and (e)			13	3	23,094
(See w	orksheet in line 13 instructions to verify calcu	ılatıons) ne Accomplish	ment of Even	nt Burnoses		
Line No. ▼	Explain below how each activity for which the accomplishment of the foundation's exinstructions)	income is reporte	ed in column (e) o	of Part XVI-A contribu		
	, , , , , , , , , , , , , , , , , , , ,					
	1					

1 (20	510)
П	Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations
	EXCIIDI OI GAIIZALIOIIS

rait /	7.VIII	Exempt Organi:	zations							
1 Did t	he org	anization directly or in- han section 501(c)(3)	directly engag					ion 501	Yes	No
a Trans	sfers fr	om the reporting foun	dation to a no	ncharitable ex	empt organization	of				
(1)	Cash.							. 1a(1)	No
(2)	Other	assets						1a(2		No
b Othe	r trans	actions								
(1)	Sales	of assets to a noncharı	table exempt	organızatıon.				1b(1)	No
		ases of assets from a n						1b(2)	No
		of facilities, equipmen						1b(3	_	No
		ursement arrangemen						. 1b(4	_	No
٠,		or loan guarantees.						. 1b(5	_	No
٠,		nance of services or m		-				1b(6)	No
	-	facilities, equipment, m er to any of the above	-	· ·						No
of th	e good y trans	s, other assets, or servesaction or sharing arra (b) Amount involved	vices given by ngement, sho	the reporting w in column (c	foundation If the	foundation recei goods, other as	ved less than fair ma	rket value Ived	angemen	nts
3 - T - +l-	- 6	d			4	.				
		dation directly or indire					_	∕es ☑ No		
		n section 501(c) (other		501(c)(3)) or i	in section 52//.		L	es 🖭 No		
D IT YE	es, co	mplete the following so (a) Name of organizatio		1 0	b) Type of organization	on I	(c) Description	n of relationship		
		(a) Name or organization	···		b) Type of Organization)II	(c) Descriptio	ir or relationship		
	of my	r penalties of perjury, v knowledge and belief n preparer has any kno	, it is true, cor		•		, ,			
Sign Here	*	****			2019-10-23	*****		May the IRS of return with the prep below		
	s	ignature of officer or ti	rustee		Date		Title		✓ Yes	□ No
		Print/Type preparer's	name	Preparer's Sıgr	nature	Date	Check if self-	PTIN P0127	2154	
Paid		STEWART GUBENK	o			2019-10-24	employed ▶ ☑	F 01 2/	_154	
Prepa Jse O		Firm's name ► STEV	VART GUBENK	O CPA				Fırm's EIN ▶		
	-	Firm's address ▶ 10	0 MERRICK RI	STE 320E						
		RC	OCKVILLE CEN	TRE, NY 1157	04883			Phone no (51	5) 766-0	0954

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 husiness)

Hame and address (nome or business)	or substantial contributor		
a Paid during the year			

AMERICAN RED CROSSPO BOX 37839 BOONE, IA 50037	PUB CHARITY	GENERAL OPERATING SUPPORT	250
BLUEPATH SERVICE DOGS 8 COUNTRY CLUB ROAD	PUB CHARITY	GENERAL OPERATING SUPPORT	207

BLUEPATH SERVICE DOGS 8 COUNTRY CLUB ROAD HOPEWELL JUNCTION, NY 12533	Pl	UB CHARITY	GENERAL OPERATING SUPPORT	207
BOSTON MEDICAL CENTER 801 MASSASACHUSETTTS AVE	Pl	UB CHARITY	GENERAL OPERATING SUPPORT	250

8 COUNTRY CLUB ROAD HOPEWELL JUNCTION, NY 12533			
BOSTON MEDICAL CENTER 801 MASSASACHUSETTTS AVE 1ST FL	PUB CHARITY	GENERAL OPERATING SUPPORT	2

Total .

HOPEWELL JONC HON, NT 12555			
BOSTON MEDICAL CENTER 801 MASSASACHUSETTTS AVE 1ST FL BOSTON, MA 02118	PUB CHARITY	GENERAL OPERATING SUPPORT	25

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			
BOSTON MEDICAL CENTER 801 MASSASACHUSETTTS AVE 1ST FL BOSTON, MA 02118	PUB CHARITY	GENERAL OPERATING SUPPORT	250

BOSTON, MA 02118			
BRIDGING BIONICS FOUNDATION PO BOX 3767 BASALT, CO 81621	PUB CHARITY	GENERAL OPERATING SUPPORT	250
DOCTORS WITHOUT BORDERS	DUB CHARITY	GENERAL OPERATING SUPPORT	200

PO BOX 3767 BASALT, CO 81621	PUB CHARITY	GENERAL OPERATING SUPPORT	250
DOCTORS WITHOUT BORDERS 333 7TH AVENUE NEW YORK, NY 10001	PUB CHARITY	GENERAL OPERATING SUPPORT	200

BASALT, CO 81621			
DOCTORS WITHOUT BORDERS 333 7TH AVENUE NEW YORK, NY 10001	PUB CHARITY	GENERAL OPERATING SUPPORT	200
Total	 	▶ 3a	69,176

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

Total .

	or substantial contributor			
a Paid during the year				
ESL INCOME PROGRAM 1894 E WILLIAMS ST 4-125		PUB CHARITY	GENERAL OPERATINF SUPPORT	250

CARSON CITY, NV 89701			
GENERATION HOPE 4025 CAMINO DEL RIO SOUTH STE 300 SAN DIEGO, CA 92108	PUB CHARITY	GENERAL OPERATING SUPPORT	250

4025 CAMINO DEL RIO SOUTH STE 300 SAN DIEGO, CA 92108	FOD CHARTT	GENERAL OF ENATING SOFFORT	230
LEO ZOO404 TACONIC ROAD	PUB CHARITY	GENERAL OPERATING SUPPORT	15,000

STE 300 SAN DIEGO, CA 92108			
LEO ZOO404 TACONIC ROAD GREENWICH, CT 06831	PUB CHARITY	GENERAL OPERATING SUPPORT	15,000

SAN DIEGO, CA 92108			
LEO ZOO404 TACONIC ROAD	PUB CHARITY	GENERAL OPERATING SUPPORT	15,000

LEO ZOO404 TACONIC ROAD	PUB CHARITY	GENERAL OPERATING SUPPORT	15,000
GREENWICH, CT 06831			

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

Total .

a Paid during the year			
LEUKEMIA & LYMPHOMA SOCIETY 1311 MARMARONECK AVE WHITE PLAINS, NY 10605	PUB CHARITY	GENERAL OPERATING SUPPORT	500

WHITE PLAINS, NY 10605			
LEUKEMIA & LYMPHOMA SOCIETY 1311 MARMARONECK AVE WHITE PLAINS, NY 10605	PUB CHARITY	GENERAL OPERATING SUPPORT	10,000
LEUKEMIA & LYMPHOMA SOCIETY	PUB CHARITY	GENERAL OPERATING SUPPORT	4,290

1311 MARMARONECK AVE WHITE PLAINS, NY 10605		05 017 11211	CENTER OF ENGINEERS OF FORM	10,000
LEUKEMIA & LYMPHOMA SOCIETY 1311 MARMARONECK AVE WHITE PLAINS, NY 10605	PL	UB CHARITY	GENERAL OPERATING SUPPORT	4,290

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)

a Paid during the year			
LEUKEMIA & LYMPHOMA SOCIETY 1311 MARMARONECK AVE	PUB CHARITY	GENERAL OPERATING SUPPORT	200

WHITE PLAINS, NY 10605		
LEUKEMIA & LYMPHOMA SOCIETY 1311 MARMARONECK AVE WHITE PLATNS NY 10605	PUB CHARITY	GENERAL OPERATING SUPP

or substantial contributor

LEUKEMIA & LYMPHOMA SOCIETY 1311 MARMARONECK AVE WHITE PLAINS, NY 10605	PUB CHARITY	GENERAL OPERATING SUPPORT	
LEUKEMIA & LYMPHOMA SOCIETY	PUB CHARITY	GENERAL OPERATING SUPPORT	15

WHITE PLAINS, NY 10605			
LEUKEMIA & LYMPHOMA SOCIETY 1311 MARMARONECK AVE WHITE PLAINS, NY 10605	PUB CHARITY	GENERAL OPERATING SUPPORT	15,000

200

,			
LEUKEMIA & LYMPHOMA SOCIETY 1311 MARMARONECK AVE WHITE PLAINS, NY 10605	PUB CHARITY	GENERAL OPERATING SUPPORT	15,000
Total	 	> 3a	69,176

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

MEANS DATABASE 1629 K STREET STE 300 STE 600 WASHINGTON, DC 20036	PUB CHARITY	GENERAL OPERATING SUPPORT	250
NAMI3803 N FAIRFAX DRIVR	 PUB CHARITY	GENERAL OPERATING SUPPORT	200

WASHINGTON, DC 20036			
NAMI3803 N FAIRFAX DRIVR STE 100 ARLINGTON, VA 22203	PUB CHARITY	GENERAL OPERATING SUPPORT	200
NATIONAL WILDLIFE FEDERATION	PUB CHARITY	GENERAL OPERATING SUPPORT	5,000

STE 100 ARLINGTON, VA 22203			
NATIONAL WILDLIFE FEDERATION PO BOX 1691 MERRIFIELD VA, VA 22116	PUB CHARITY	GENERAL OPERATING SUPPORT	5,000

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			
NATIONAL WILDLIFE FEDERATION PO BOX 1691	PUB CHARITY	GENERAL OPERATING SUPPORT	1,000

MERRIFIELD VA, VA 22116			
NEW ROCHELE FUND FOR EXCELLANCE 265 CLOVE ROAD NEW ROCHELE, NY 10801	PUB CHARITY	GENERAL OPERATING SUPPORT	

NEW ROCHELE FUND FOR EXCELLANCE 265 CLOVE ROAD NEW ROCHELE, NY 10801	PUB CHARITY	GENERAL OPERATING SUPPORT	257
NEW ROCHELE FUND FOR EXCELLANCE 265 CLOVE ROAD	PUB CHARITY	GENERAL OPERATING SUPPORT	250

NEW ROCHELE, NY 10801			
NEW ROCHELE FUND FOR EXCELLANCE 265 CLOVE ROAD NEW ROCHELE, NY 10801	PUB CHARITY	GENERAL OPERATING SUPPORT	250

NEW ROCHELE FUND FOR EXCELLANCE 265 CLOVE ROAD NEW ROCHELE, NY 10801	PUB CHARITY	GENERAL OPERATING SUPPORT	25
Total	 	> 3a	69,176

Recipient Foundation Purpose of grant or If recipient is an individual, Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year NETWORK FOR GOOD PUB CHARITY | GENERAL OPERATING SUPPORT 1.819

1140 CONNECTICUT AVE STE 7000 WASHINGTON, DC 20036			,
NETWORK FOR GOOD 1140 CONNECTICUT AVE	PUB CHARITY	GENERAL OPERATING SUPPORT	416

NETWORK FOR GOOD 1140 CONNECTICUT AVE STE 7000 WASHINGTON, DC 20036	PUB CHARITY	GENERAL OPERATING SUPPORT	416
PAN MASS CHALLENGE 77 FOURTH AVENUE	PUB CHARITY	GENERAL OPERATING SUPPORT	205

STE 7000 WASHINGTON, DC 20036			
PAN MASS CHALLENGE 77 FOURTH AVENUE	PUB CHARITY	GENERAL OPERATING SUPPORT	20
NEEDHAM MA 02494			

PAN MASS CHALLENGE 77 FOURTH AVENUE NEEDHAM, MA 02494	PUB CHARITY	GENERAL OPERATING SUPPORT	20

Total .

▶ 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

PPGF (EDWARD CHARLES FOUNDATION) 2211 N FIRST STREET SAN JOSE, CA 95131	PUB CHARITY	GENERAL OPERATING SUPPORT	250
DDCE (KINGS ACAINST VIOENCE INIT)	DUD CHADITY	CENERAL OBERATING SUPPORT	350

3/11/3032, 6/1 33131			
PPGF (KINGS AGAINST VIOENCE INIT) 2211 N FIRST STREET SAN JOSE, CA 95131	PUB CHARITY	GENERAL OPERATING SUPPORT	250
PPGF (POETIC JUSTICE INC)	PUB CHARITY	GENERAL OPERATING SUPPORT	250

SAN JOSE, CA 95131			
PPGF (POETIC JUSTICE INC) 2211 N FIRST STREET SAN JOSE, CA 95131	PUB CHARITY	GENERAL OPERATING SUPPORT	250

Total		▶ 3a	69 176
PPGF (POETIC JUSTICE INC) 2211 N FIRST STREET	PUB CHARITY	GENERAL OPERATING SUPPORT	25

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

PRGF (SHELTER FOR KIDS WITH CANCER) 2211 N FIRST STREET SAN JOSE, CA 95131	PUB CHARITY	GENERAL OPERATING SUPPORT	250
DDGE (VETERANG COMMUNITY	BUID GLIABTEL	CENERAL OPERATING CURRORT	350

SAN JOSE, CA 95131			
2211 N FÍRST STREET			
PROJECT)	FOD CHARTT	GENERAL OF ERATING SOFT ORT	230
PPGF (VETERANS COMMUNITY	PUB CHARITY	GENERAL OPERATING SUPPORT	250

2211 N FIRST STREET SAN JOSE, CA 95131			
RAZOO (THE BRONX IS BLOOMING) PO BOX 6070	PUB CHARITY	GENERAL OPERATING SUPPORT	212
PRONV NV 104E1			i

▶ 3a

69,176

SAN JOSE, CA 95131			
RAZOO (THE BRONX IS BLOOMING) PO BOX 6070	PUB CHARITY	GENERAL OPERATING SUPPORT	2
BRONX, NY 10451			

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			
SLEEP IN HEAVENLY PEACEPO BOX 116 KIMBERLY, ID 83341	PUB CHARITY	GENERAL OPERATING SUPPORT	250
KIMBERLY, ID 83341			

KIMBERLY, ID 83341			
SONGWRITING FOR SOLDIERS 30 MUSIC SQUARE WEST NASHVILLE, TN 37203	PUB CHARITY	GENERAL OPERTING SUPPORT	206
SOUTHERN LAW POVERTY CENTER	PUB CHARITY	GENERAL OPERATING SUPPORT	250

NASHVILLE, ŤN 37203			
SOUTHERN LAW POVERTY CENTER 400 WASHINGTON AVE MONTGOMERY, AL 36104	PUB CHARITY	GENERAL OPERATING SUPPORT	250
		_	

Total			▶ 3a	69,176
400 WASHINGTON AVE MONTGOMERY, AL 36104				
SOUTHERN LAW POVERTY CENTER		POR CHARITY	GENERAL OPERATING SUPPORT	250

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				
STUDENT ADVOCACY		PUB CHARITY	GENERAL OPERATING SUPPORT	300

ELMSFORD, NY 10523			
STUDENT ADVOCACY 3 WEST MAIN STREET ELMSFORD, NY 10523	PUB CHARITY	GENERAL OPERATING SUPPORT	1,000

==:::::::::::::::::::::::::::::::::::::			
STUDENT ADVOCACY 3 WEST MAIN STREET ELMSFORD, NY 10523	PUB CHARITY	GENERAL OPERATING SUPPORT	1,000
THE CORNELL LAB OF ORNITHOLOGY 159 SAPSUCKER WOODS RD	PUB CHARITY	GENERAL OPERATING SUPPORT	1,500

3 WEST MAIN STREET ELMSFORD, NY 10523	TOD CHARTT	CENTENAL OF ENATING SOFT ON	1,000
THE CORNELL LAB OF ORNITHOLOGY 159 SAPSUCKER WOODS RD ITHACA, NY 14850	PUB CHARITY	GENERAL OPERATING SUPPORT	1,500

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			
THE INNOCENCE PROJECT 40 WORTH STREET SUITE701	PUB CHARITY	GENERAL OPERATING SUPPORT	1,000

NEW YORK, NY 10013			
THE INNOCENCE PROJECT 40 WORTH STREET SUITE701 NEW YORK, NY 10013	PUB CHARITY	GENERAL OPERATING SUPPORT	2

40 WORTH STREET SUITE701 NEW YORK, NY 10013	PUB CHARITT	GENERAL OPERATING SUPPORT	208
THE NATURE CONSERVANCY 4245 N FAIRFAX DR STE 100	PUB CHARITY	GENERAL OPERATING SUPPORT	206

200

69,176

NEW YORK, NY 10013			
THE NATURE CONSERVANCY 4245 N FAIRFAX DR STE 100 ARLINGTON, VA 22203	PUB CHARITY	GENERAL OPERATING SUPPORT	206

Total .

Recipient

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

Recipient

Foundation status of recipient

recipient

a Paid during the year

WESTCHESTED COMMUNITY COLLEGE

Total .

75 GRASSLANDS ROAD VALHALLA, NY 10595	TOB CHARTT	CENTERNIE OF EIGHT MO SOFT OICH	1,000
WESTCHESTER JEWISH COMMUNITY SVCES	PUB CHARITY	GENERAL OPERATING SUPPORT	300

DUR CHADITY

GENERAL OPERATING SUPPORT

1 000

SVCES 845 NORTH BROADWAY WHITE PLAINS, NY 10603	TOD CHARTT	GENERAL OF ENATING SOFT OR	300
WILDLIFE CONSERVATION SOCIETY 2300 SOUTHERN BLVD BRONX, NY 10460	PUB CHARITY	GENERAL OPERATING SUPPORT	5,000

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TY 2018 Accounting Fees Schedule							
Name: THE KROLL FAMILY FOUNDATION EIN: 13-4154059							
Category	Am	ount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes		
TAX PREPARATION FEES							
STEWART GUBENKO, CPA		1,800			1,800		

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491301004679						
TY 2018 Investments Corporate Bonds Schedule								
N	FUE KDOLL FARATI	V FOLINDATION						

Name: THE KROLL FAMILY FOUNDATION

EIN: 13-4154059

Investments Corporate Bonds Schedule					
Name of Bond	End of Year Book Value	End of Year Fair Market Value			
40000 JP MORGAN CHASE 6.3% 4/23/19	40,391	40,391			
40000 KRAFT FOODS 6125% 7/15/18					
40000 VODAPHONE GRP 4.625% 7/15/18					

eme GRAPHIC PHILE - DO NOT PROCESS AS Filed Data -	DLN. 93491301004079
TV 0040 Terror land to Other Calculate	
TY 2018 Investments - Other Schedule	
Name: THE KROLL FAMILY FOU	UNDATION

DI N. 02401201004670

150,737

228,745

150,737

228,745

Name: THE KROLL FAMILY FOUNDATION EIN: 13-4154059

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14061.3100 PGIM ST CORP BD FD

24205.8390 PRINCIPAL PFD SEC FD C

Investments Other Schedule 2 Category / Item Listed at Cost or FMV Book Value End of Year Fair Market Value 5187.6090 THORNBURG INC BUILDER FMV 103,856

FMV

FMV

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491301004679				
TY 2018 Other Decreases Schedule						
Nama	THE KROLL FAMILY FOUNDATION					
name:	THE KROLL FAMILY FOUNDATION					
EIN:	13-4154059					
De	escription	Amount				
NET UNREALIZED LOSS ON INVESTMENT	rs	39,010				

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN:	: 93491301004679		
TY 2018 Other Expenses Sche	dule					
Name:	THE KROLL FAM	11LY FOUNDATION	N			
EIN:	EIN: 13-4154059					
Other Expenses Schedule						
Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes		
EXPENSES						
MERRILL LYNCH-ANNUAL FEE	150	150				
POSTAL FEES	103			103		

FILING FEES - NYS

efile GRAPHIC print - DO NOT PROCESS	As Filed Data	-	DLI	N: 93491301004679
TY 2018 Taxes Schedule				
Name: THE KROLL FAMILY FOUNDATION				
EIN:	13-4154059			
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
FOREIGN TAXES - DIVIDENDS	455	455		