

Form **990-PF**  
 Department of the Treasury  
 Internal Revenue Service

**Return of Private Foundation**  
**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.**  
 ▶ **Go to [www.irs.gov/Form990PF](http://www.irs.gov/Form990PF) for instructions and the latest information.**

OMB No 1545-0052  
**2018**  
**Open to Public Inspection**

**For calendar year 2018, or tax year beginning 01-01-2018, and ending 12-31-2018**

Name of foundation THE KANDELL FUND		<b>A Employer identification number</b> 13-6117648	
Number and street (or P O box number if mail is not delivered to street address) 59 EAST 54TH STREET		<b>B Telephone number (see instructions)</b> (212) 755-3063	
City or town, state or province, country, and ZIP or foreign postal code NEW YORK, NY 10022		<b>C</b> If exemption application is pending, check here <input type="checkbox"/>	
<b>G</b> Check all that apply: <input type="checkbox"/> Initial return <input type="checkbox"/> Initial return of a former public charity <input type="checkbox"/> Final return <input type="checkbox"/> Amended return <input type="checkbox"/> Address change <input type="checkbox"/> Name change		<b>D 1.</b> Foreign organizations, check here <input type="checkbox"/> <b>2.</b> Foreign organizations meeting the 85% test, check here and attach computation <input type="checkbox"/>	
<b>H</b> Check type of organization: <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		<b>E</b> If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/>	
<b>I</b> Fair market value of all assets at end of year (from Part II, col (c), line 16) ▶ \$ <u>130,467</u>		<b>F</b> If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/>	
<b>J</b> Accounting method: <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____ <i>(Part I, column (d) must be on cash basis)</i>			

<b>Part I Analysis of Revenue and Expenses</b> <i>(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions) )</i>		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
<b>Revenue</b>	<b>1</b> Contributions, gifts, grants, etc., received (attach schedule)	220,000			
	<b>2</b> Check <input type="checkbox"/> if the foundation is <b>not</b> required to attach Sch B				
	<b>3</b> Interest on savings and temporary cash investments	431	431		
	<b>4</b> Dividends and interest from securities				
	<b>5a</b> Gross rents				
	<b>b</b> Net rental income or (loss)				
	<b>6a</b> Net gain or (loss) from sale of assets not on line 10				
	<b>b</b> Gross sales price for all assets on line 6a				
	<b>7</b> Capital gain net income (from Part IV, line 2)			0	
	<b>8</b> Net short-term capital gain				
	<b>9</b> Income modifications				
	<b>10a</b> Gross sales less returns and allowances				
<b>b</b> Less Cost of goods sold					
<b>c</b> Gross profit or (loss) (attach schedule)					
<b>11</b> Other income (attach schedule)					
<b>12 Total.</b> Add lines 1 through 11	220,431	431			
<b>Operating and Administrative Expenses</b>	<b>13</b> Compensation of officers, directors, trustees, etc	0	0		0
	<b>14</b> Other employee salaries and wages				
	<b>15</b> Pension plans, employee benefits				
	<b>16a</b> Legal fees (attach schedule)	2,085	0		2,085
	<b>b</b> Accounting fees (attach schedule)	1,500	500		1,000
	<b>c</b> Other professional fees (attach schedule)				
	<b>17</b> Interest				
	<b>18</b> Taxes (attach schedule) (see instructions)				
	<b>19</b> Depreciation (attach schedule) and depletion				
	<b>20</b> Occupancy				
	<b>21</b> Travel, conferences, and meetings				
	<b>22</b> Printing and publications				
	<b>23</b> Other expenses (attach schedule)	50	0		50
	<b>24 Total operating and administrative expenses.</b> Add lines 13 through 23	3,635	500		3,135
	<b>25</b> Contributions, gifts, grants paid	208,500			208,500
<b>26 Total expenses and disbursements.</b> Add lines 24 and 25	212,135	500		211,635	
<b>27</b> Subtract line 26 from line 12					
<b>a Excess of revenue over expenses and disbursements</b>	8,296				
<b>b Net investment income</b> (if negative, enter -0-)		0			
<b>c Adjusted net income</b> (if negative, enter -0-)					

<b>Part II Balance Sheets</b> Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)		Beginning of year	End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value
<b>Assets</b>	<b>1</b> Cash—non-interest-bearing . . . . .			
	<b>2</b> Savings and temporary cash investments . . . . .	122,171	130,467	130,467
	<b>3</b> Accounts receivable ▶ _____ Less allowance for doubtful accounts ▶ _____			
	<b>4</b> Pledges receivable ▶ _____ Less allowance for doubtful accounts ▶ _____			
	<b>5</b> Grants receivable . . . . .			
	<b>6</b> Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions) . . . . .			
	<b>7</b> Other notes and loans receivable (attach schedule) ▶ _____ Less allowance for doubtful accounts ▶ _____			
	<b>8</b> Inventories for sale or use . . . . .			
	<b>9</b> Prepaid expenses and deferred charges . . . . .			
	<b>10a</b> Investments—U S and state government obligations (attach schedule)			
	<b>b</b> Investments—corporate stock (attach schedule) . . . . .			
	<b>c</b> Investments—corporate bonds (attach schedule) . . . . .			
	<b>11</b> Investments—land, buildings, and equipment basis ▶ _____ Less accumulated depreciation (attach schedule) ▶ _____			
	<b>12</b> Investments—mortgage loans . . . . .			
	<b>13</b> Investments—other (attach schedule) . . . . .			
	<b>14</b> Land, buildings, and equipment basis ▶ _____ Less accumulated depreciation (attach schedule) ▶ _____			
<b>15</b> Other assets (describe ▶ _____)				
<b>16 Total assets</b> (to be completed by all filers—see the instructions Also, see page 1, item I)	122,171	130,467	130,467	
<b>Liabilities</b>	<b>17</b> Accounts payable and accrued expenses . . . . .			
	<b>18</b> Grants payable . . . . .			
	<b>19</b> Deferred revenue . . . . .			
	<b>20</b> Loans from officers, directors, trustees, and other disqualified persons			
	<b>21</b> Mortgages and other notes payable (attach schedule) . . . . .			
	<b>22</b> Other liabilities (describe ▶ _____)			
	<b>23 Total liabilities</b> (add lines 17 through 22) . . . . .	0	0	
<b>Net Assets or Fund Balances</b>	<b>Foundations that follow SFAS 117, check here</b> ▶ <input type="checkbox"/> <b>and complete lines 24 through 26 and lines 30 and 31.</b>			
	<b>24</b> Unrestricted . . . . .			
	<b>25</b> Temporarily restricted . . . . .			
	<b>26</b> Permanently restricted . . . . .			
	<b>Foundations that do not follow SFAS 117, check here</b> ▶ <input checked="" type="checkbox"/> <b>and complete lines 27 through 31.</b>			
	<b>27</b> Capital stock, trust principal, or current funds . . . . .	285,444	285,444	
	<b>28</b> Paid-in or capital surplus, or land, bldg, and equipment fund	0	0	
<b>29</b> Retained earnings, accumulated income, endowment, or other funds	-163,273	-154,977		
<b>30 Total net assets or fund balances</b> (see instructions) . . . . .	122,171	130,467		
<b>31 Total liabilities and net assets/fund balances</b> (see instructions) .	122,171	130,467		

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

<b>1</b> Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)	<b>1</b>	122,171
<b>2</b> Enter amount from Part I, line 27a . . . . .	<b>2</b>	8,296
<b>3</b> Other increases not included in line 2 (itemize) ▶ _____	<b>3</b>	0
<b>4</b> Add lines 1, 2, and 3 . . . . .	<b>4</b>	130,467
<b>5</b> Decreases not included in line 2 (itemize) ▶ _____	<b>5</b>	0
<b>6</b> Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30 .	<b>6</b>	130,467

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

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

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

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

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

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

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

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

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

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

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col (b) divided by col (c))
2017	196,705	144,272	1.363432
2016	216,500	104,408	2.073596
2015	237,595	133,112	1.784925
2014	269,890	103,279	2.613213
2013	284,085	145,742	1.949232

<b>2</b> Total of line 1, column (d)	<b>2</b>	9.784398
<b>3</b> Average distribution ratio for the 5-year base period—divide the total on line 2 by 5.0, or by the number of years the foundation has been in existence if less than 5 years	<b>3</b>	1.956880
<b>4</b> Enter the net value of noncharitable-use assets for 2018 from Part X, line 5	<b>4</b>	175,223
<b>5</b> Multiply line 4 by line 3	<b>5</b>	342,890
<b>6</b> Enter 1% of net investment income (1% of Part I, line 27b)	<b>6</b>	0
<b>7</b> Add lines 5 and 6	<b>7</b>	342,890
<b>8</b> Enter qualifying distributions from Part XII, line 4	<b>8</b>	211,635

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

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

Table with 11 rows for excise tax calculation. Includes fields for exempt foundations, tax under section 511, subtitle A tax, and credits/payments. Total amount due is shown in row 9.

Part VII-A Statements Regarding Activities

Table with 10 rows for activity statements. Columns include question number, 'Yes', and 'No' responses. Questions cover political activities, unrelated business income, and asset requirements.

Part VII-A Statements Regarding Activities (continued)

Table with 3 columns: Question, Yes, No. Rows 11-13 regarding controlled entities, donor advised funds, and public inspection requirements.

14 The books are in care of DEBRA FECHTER Telephone no (212) 755-3063

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15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here and enter the amount of tax-exempt interest received or accrued during the year 15

Table with 3 columns: Question, Yes, No. Row 16 regarding interest in foreign countries.

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required

File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.

Main table with 3 columns: Question, Yes, No. Rows 1a-4b regarding Form 4720 exceptions and requirements.



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

<b>3 Five highest-paid independent contractors for professional services (see instructions). If none, enter "NONE".</b>		
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
<b>Total</b> number of others receiving over \$50,000 for professional services. . . . . ▶		0

**Part IX-A Summary of Direct Charitable Activities**

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
<b>1</b>	
<b>2</b>	
<b>3</b>	
<b>4</b>	

**Part IX-B Summary of Program-Related Investments (see instructions)**

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
<b>1</b>	
<b>2</b>	
All other program-related investments. See instructions.	
<b>3</b>	
<b>Total.</b> Add lines 1 through 3 . . . . . ▶	0

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

<b>1</b>	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes		
<b>a</b>	Average monthly fair market value of securities.	<b>1a</b>	0
<b>b</b>	Average of monthly cash balances.	<b>1b</b>	177,891
<b>c</b>	Fair market value of all other assets (see instructions).	<b>1c</b>	0
<b>d</b>	<b>Total</b> (add lines 1a, b, and c).	<b>1d</b>	177,891
<b>e</b>	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation).	<b>1e</b>	0
<b>2</b>	Acquisition indebtedness applicable to line 1 assets.	<b>2</b>	0
<b>3</b>	Subtract line 2 from line 1d.	<b>3</b>	177,891
<b>4</b>	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions).	<b>4</b>	2,668
<b>5</b>	<b>Net value of noncharitable-use assets.</b> Subtract line 4 from line 3. Enter here and on Part V, line 4	<b>5</b>	175,223
<b>6</b>	<b>Minimum investment return.</b> Enter 5% of line 5.	<b>6</b>	8,761

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

<b>1</b>	Minimum investment return from Part X, line 6.	<b>1</b>	8,761
<b>2a</b>	Tax on investment income for 2018 from Part VI, line 5.	<b>2a</b>	
<b>b</b>	Income tax for 2018 (This does not include the tax from Part VI).	<b>2b</b>	
<b>c</b>	Add lines 2a and 2b.	<b>2c</b>	0
<b>3</b>	Distributable amount before adjustments. Subtract line 2c from line 1.	<b>3</b>	8,761
<b>4</b>	Recoveries of amounts treated as qualifying distributions.	<b>4</b>	0
<b>5</b>	Add lines 3 and 4.	<b>5</b>	8,761
<b>6</b>	Deduction from distributable amount (see instructions).	<b>6</b>	0
<b>7</b>	<b>Distributable amount</b> as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1.	<b>7</b>	8,761

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

<b>1</b>	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
<b>a</b>	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26.	<b>1a</b>	211,635
<b>b</b>	Program-related investments—total from Part IX-B.	<b>1b</b>	0
<b>2</b>	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes.	<b>2</b>	
<b>3</b>	Amounts set aside for specific charitable projects that satisfy the		
<b>a</b>	Suitability test (prior IRS approval required).	<b>3a</b>	
<b>b</b>	Cash distribution test (attach the required schedule).	<b>3b</b>	
<b>4</b>	<b>Qualifying distributions.</b> Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	<b>4</b>	211,635
<b>5</b>	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b. See instructions.	<b>5</b>	0
<b>6</b>	<b>Adjusted qualifying distributions.</b> Subtract line 5 from line 4.	<b>6</b>	211,635

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

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

	(a) Corpus	(b) Years prior to 2017	(c) 2017	(d) 2018
<b>1</b> Distributable amount for 2018 from Part XI, line 7				8,761
<b>2</b> Undistributed income, if any, as of the end of 2018				
<b>a</b> Enter amount for 2017 only. . . . .			0	
<b>b</b> Total for prior years 20___, 20___, 20___		0		
<b>3</b> Excess distributions carryover, if any, to 2018				
<b>a</b> From 2013. . . . .	276,698			
<b>b</b> From 2014. . . . .	264,726			
<b>c</b> From 2015. . . . .	230,939			
<b>d</b> From 2016. . . . .	211,280			
<b>e</b> From 2017. . . . .	189,491			
<b>f</b> Total of lines 3a through e. . . . .	1,173,134			
<b>4</b> Qualifying distributions for 2018 from Part XII, line 4 ▶ \$ <u>211,635</u>				
<b>a</b> Applied to 2017, but not more than line 2a			0	
<b>b</b> Applied to undistributed income of prior years (Election required—see instructions). . . . .		0		
<b>c</b> Treated as distributions out of corpus (Election required—see instructions). . . . .	0			
<b>d</b> Applied to 2018 distributable amount. . . . .				8,761
<b>e</b> Remaining amount distributed out of corpus	202,874			
<b>5</b> Excess distributions carryover applied to 2018 (If an amount appears in column (d), the same amount must be shown in column (a) )				0
<b>6</b> Enter the net total of each column as indicated below:				
<b>a</b> Corpus Add lines 3f, 4c, and 4e Subtract line 5	1,376,008			
<b>b</b> Prior years' undistributed income Subtract line 4b from line 2b . . . . .		0		
<b>c</b> Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed. . . . .		0		
<b>d</b> Subtract line 6c from line 6b Taxable amount—see instructions . . . . .		0		
<b>e</b> Undistributed income for 2017 Subtract line 4a from line 2a Taxable amount—see instructions . . . . .			0	
<b>f</b> Undistributed income for 2018 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2019 . . . . .				0
<b>7</b> Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions). . . . .		0		
<b>8</b> Excess distributions carryover from 2013 not applied on line 5 or line 7 (see instructions). . . . .	276,698			
<b>9</b> Excess distributions carryover to 2019. Subtract lines 7 and 8 from line 6a . . . . .	1,099,310			
<b>10</b> Analysis of line 9				
<b>a</b> Excess from 2014. . . . .	264,726			
<b>b</b> Excess from 2015. . . . .	230,939			
<b>c</b> Excess from 2016. . . . .	211,280			
<b>d</b> Excess from 2017. . . . .	189,491			
<b>e</b> Excess from 2018. . . . .	202,874			

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

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

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

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

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

**1 Information Regarding Foundation Managers:**

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

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

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

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

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

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

**c** Any submission deadlines

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

**Part XV** **Supplementary Information** (continued)**3 Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i> See Additional Data Table				
<b>Total . . . . .</b>				<b>▶ 3a</b>
<b>b</b> <i>Approved for future payment</i>				
<b>Total . . . . .</b>				<b>▶ 3b</b>





**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).**

ALICE KANDELL

LESLIE KANDELL

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

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
<b>a</b> <i>Paid during the year</i>				
AARP FOUNDATION 601 E STREET NW WASHINGTON, DC 20049		PC	TO FURTHER DONEE'S EXEMPT PURPOSE	250
AMERICAN CANCER SOCIETY MANHATTAN OFFICE NEW YORK, NY 101010910		PC	TO FURTHER DONEE'S EXEMPT PURPOSE	3,000
AMERICAN MUSEUM OF NATURAL HISTORY 15 WEST 77TH STREET NEW YORK, NY 101320013		PC	TO FURTHER DONEE'S EXEMPT PURPOSE	5,000
<b>Total . . . . .</b> ▶ <b>3a</b>				208,500

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
AMERICAN RED CROSS PO BOX 4002018 DES MOINES, IA 505402018		PC	TO FURTHER DONEE'S EXEMPT PURPOSE	1,500
AMERICAN JEWISH COMMITTEE PO BOX 170800 MILWAUKEE, WI 53217		PC	TO FURTHER DONEE'S EXEMPT PURPOSE	3,000
ARTHUR M SACKLER GALLERY SMITHSONIAN INSTITUTION PO BOX 37012 MRC 707 WASHINGTON, DC 200137012		PC	TO FURTHER DONEE'S EXEMPT PURPOSE	10,000
<b>Total . . . . .</b> ▶ <b>3a</b>				208,500

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
BANK ST COLLEGE OF EDUCATION ANNUAL FUND PO BOX 250865 NEW YORK, NY 10025		PC	TO FURTHER DONEE'S EXEMPT PURPOSE	2,000
BIDE A WEE410 EAST 38TH ST NEW YORK, NY 10016		PC	TO FURTHER DONEE'S EXEMPT PURPOSE	350
BOSTON SYMPHONY ORCHESTRA 301 MASSACHUSETTS AVE BOSTON, MA 021154511		PC	TO FURTHER DONEE'S EXEMPT PURPOSE	10,000
<b>Total . . . . .</b> ▶ <b>3a</b>				208,500

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
BRC315 BOWERY NEW YORK, NY 10003		PC	TO FURTHER DONEE'S EXEMPT PURPOSE	1,000
BROADWAY MALL ASSOCIATION 2095 BROADWAY SUITE 403 NEW YORK, NY 10023		PC	TO FURTHER DONEE'S EXEMPT PURPOSE	100
BROOKLYN MUSEUM 200 EASTERN PARKWAY BROOKLYN, NY 112389982		PC	TO FURTHER DONEE'S EXEMPT PURPOSE	1,000
<b>Total . . . . .</b>				208,500

**▶ 3a**

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
BRYN MAWR COLLEGE 101 NORTH MERION AVENUE BRYN MAWR, PA 19010		PC	TO FURTHER DONEE'S EXEMPT PURPOSE	6,000
CANCER CARE 275 SEVENTH AVE FLR 22 NEW YORK, NY 10001		PC	TO FURTHER DONEE'S EXEMPT PURPOSE	2,500
CARINGKIND 360 LEXINGTON AVENUE 4TH FLOOR NEW YORK, NY 10017		PC	TO FURTHER DONEE'S EXEMPT PURPOSE	3,000
<b>Total . . . . .</b> ▶ <b>3a</b>				208,500

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
CITY & COUNTRY SCHOOL 146 WEST 13TH STREET NEW YORK, NY 10011		PC	TO FURTHER DONEE'S EXEMPT PURPOSE	1,000
CITY HARVEST 575 EIGHTH AVENUE 4TH FLR NEW YORK, NY 100183069		PC	TO FURTHER DONEE'S EXEMPT PURPOSE	2,500
COMPASSIONATE FRIENDS NYC CHAPTER 7 WEST 55TH STREET NEW YORK, NY 100194902		PC	TO FURTHER DONEE'S EXEMPT PURPOSE	2,000
<b>Total . . . . .</b>				<b>208,500</b>

▶ **3a**

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
COVENANT HOUSE TIMES SQUARE STATION NEW YORK, NY 101080900		PC	TO FURTHER DONEE'S EXEMPT PURPOSE	300
CYSTIC FIBROSIS FOUNDATION 6931 ARLINGTON ROAD BETHESDA, MD 20814		PC	TO FURTHER DONEE'S EXEMPT PURPOSE	500
DALLAS SYMPHONY ORCHESTRA 2301 FLORA STREET DALLAS, TX 75201		PC	TO FURTHER DONEE'S EXEMPT PURPOSE	10,000
<b>Total . . . . .</b> ▶ <b>3a</b>				208,500

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
DOCTORS WITHOUT BORDERS 333 SEVENTH AVENUE 2ND FLOOR NEW YORK, NY 10001		PC	TO FURTHER DONEE'S EXEMPT PURPOSE	500
FEED THE CHILDRENPO BOX 16 OKLAHOMA CITY, OK 731010036		PC	TO FURTHER DONEE'S EXEMPT PURPOSE	1,000
FOOD BANK FOR NEW YORK CITY 355 FOOD CENTER DRIVE BRONX, NY 104749939		PC	TO FURTHER DONEE'S EXEMPT PURPOSE	2,500
<b>Total . . . . .</b> ▶ <b>3a</b>				208,500

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
FRIENDS OF HIGH LINE 529 WEST 20TH STREET SUITE 8W NEW YORK, NY 100112800		PC	TO FURTHER DONEE'S EXEMPT PURPOSE	1,500
FRIENDS OF THE UPPER EAST SIDE 20 EAST 69TH STREET NEW YORK, NY 10021		PC	TO FURTHER DONEE'S EXEMPT PURPOSE	1,000
HABITAT FOR HUMANITY 111 JOHN STREET 23RD FLR NEW YORK, NY 100383109		PC	TO FURTHER DONEE'S EXEMPT PURPOSE	1,000
<b>Total . . . . .</b> ▶ <b>3a</b>				208,500

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
HELEN KELLER INTERNATIONAL 352 PARK AVENUE SOUTH STE 1200 NEW YORK, NY 10010		PC	TO FURTHER DONEE'S EXEMPT PURPOSE	500
HISTORIC DISTRICTS COUNCIL 232 E 11TH ST NEW YORK, NY 10003		PC	TO FURTHER DONEE'S EXEMPT PURPOSE	1,000
HOSPITAL FOR SPECIAL SURGERY PO BOX 30610 NEW YORK, NY 100870610		PC	TO FURTHER DONEE'S EXEMPT PURPOSE	1,000
<b>Total . . . . .</b> ▶ <b>3a</b>				208,500

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
HUMANE SOCIETY OF NYC 306 E 59TH STREET NEW YORK, NY 10022		PC	TO FURTHER DONEE'S EXEMPT PURPOSE	300
JAMES LENOX HOUSE ASSOCIATION INC 49 EAST 73RD STREET NEW YORK, NY 10021		PC	TO FURTHER DONEE'S EXEMPT PURPOSE	2,000
JEWISH BRAILLE INSTITUTE 110 E 30TH STREET NEW YORK, NY 100167375		PC	TO FURTHER DONEE'S EXEMPT PURPOSE	500
<b>Total . . . . .</b> ▶ <b>3a</b>				208,500

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
JEWISH NATIONAL FUND 42 EAST 69TH ST NEW YORK, NY 10021		PC	TO FURTHER DONEE'S EXEMPT PURPOSE	1,000
LINCOLN CENTER FOR PERFORMING 70 LINCOLN CENTER PLAZA 9TH FL NEW YORK, NY 100236585		PC	TO FURTHER DONEE'S EXEMPT PURPOSE	5,500
LOWER EAST SIDE TENEMENT MUSEUM 91 ORCHARD STREET NEW YORK, NY 10002		PC	TO FURTHER DONEE'S EXEMPT PURPOSE	500
<b>Total . . . . .</b> ▶ <b>3a</b>				208,500

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

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
<b>a</b> <i>Paid during the year</i>				
MACCABI USA 1926 ARCH STREET 4R PHILADELPHIA, PA 19103		PC	TO FURTHER DONEE'S EXEMPT PURPOSE	500
MADD 511 EJOHN CARPENTER FREEWAY STE 700 IRVING, TX 75062		PC	TO FURTHER DONEE'S EXEMPT PURPOSE	500
MAKE A WISH FOUNDATION OF METRO 1111 MARCUS AVE STE LL22 LAKE SUCESS, NY 11042		PC	TO FURTHER DONEE'S EXEMPT PURPOSE	1,000
<b>Total . . . . .</b> ▶ <b>3a</b>				208,500

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
MARCH OF DIMESPO BOX 8972 TOPEKA, KS 666088972		PC	TO FURTHER DONEE'S EXEMPT PURPOSE	500
MEMORIAL SLOAN KETTERING CANCER CENTER PO BOX 27105 NEW YORK, NY 101172504		PC	TO FURTHER DONEE'S EXEMPT PURPOSE	2,500
METROPOLITAN MUSEUM OF ART 1000 FIFTH AVE NEW YORK, NY 100280198		PC	TO FURTHER DONEE'S EXEMPT PURPOSE	15,000
<b>Total . . . . .</b> ▶ <b>3a</b>				208,500

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
MUSEUM OF JEWISH HERITAGE 36 BATTERY PLACE NEW YORK, NY 10004		PC	TO FURTHER DONEE'S EXEMPT PURPOSE	500
MUSEUM OF THE CITY OF NEW YORK 1220 FIFTH AVENUE NEW YORK, NY 10029		PC	TO FURTHER DONEE'S EXEMPT PURPOSE	1,000
NATIONAL CORALE 1650 BROADWAY 301 NEW YORK, NY 10019		PC	TO FURTHER DONEE'S EXEMPT PURPOSE	5,000
<b>Total . . . . .</b> ▶ <b>3a</b>				208,500

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
NEW YORK HISTORICAL SOCIETY 170 CENTRAL PARK W NEW YORK, NY 10024		PC	TO FURTHER DONEE'S EXEMPT PURPOSE	500
NEW YORK RESTORATION PROJECT 254 WEST 31ST STREET FLR 10 NEW YORK, NY 100212813		PC	TO FURTHER DONEE'S EXEMPT PURPOSE	1,250
NEW YORK PUBLIC LIBRARY FIFTH AVENUE AT 42ND STREET NEW YORK, NY 10018		PC	TO FURTHER DONEE'S EXEMPT PURPOSE	2,500
<b>Total . . . . .</b> ▶ <b>3a</b>				208,500

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
NY WEILL CORNELL MEDICAL CENTER 525 E 68TH STREET NEW YORK, NY 101310051		PC	TO FURTHER DONEE'S EXEMPT PURPOSE	1,000
NYC POLICE FOUNDATION 555 FIFTH AVE 15TH FLOOR NEW YORK, NY 10017		PC	TO FURTHER DONEE'S EXEMPT PURPOSE	15,000
PARKINSONS DISEASE FOUNDATION INC 1359 BROADWAY SUITE 1509 NEW YORK, NY 10018		PC	TO FURTHER DONEE'S EXEMPT PURPOSE	500
<b>Total . . . . .</b>				<b>208,500</b>

▶ **3a**

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
PLANNED PARENTHOOD OF NEW YORK CITY 26 BLEECKER STREET NEW YORK, NY 100122413		PC	TO FURTHER DONEE'S EXEMPT PURPOSE	1,000
REALTY FOUNDATION OF NY 551 FIFTH AVENUE SUITE 415 NEW YORK, NY 101760166		PC	TO FURTHER DONEE'S EXEMPT PURPOSE	7,500
RIVERSIDE SYMPHONY 225 WEST 99TH ST NEW YORK, NY 100255014		PC	TO FURTHER DONEE'S EXEMPT PURPOSE	1,000
<b>Total . . . . . ▶ 3a</b>				208,500

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
SOLOMON R GUGGENHEIM MUSEUM 1071 FIFTH AVE NEW YORK, NY 10128		PC	TO FURTHER DONEE'S EXEMPT PURPOSE	500
SOUTHERN POVERTY LAW CENTER 400 WASHINGTON AVE MONTGOMERY, AL 141035632		PC	TO FURTHER DONEE'S EXEMPT PURPOSE	1,000
SPARKS & WIRY CRIES 145 SIXTH AVE NEW YORK, NY 10013		PC	TO FURTHER DONEE'S EXEMPT PURPOSE	3,000
<b>Total . . . . .</b>				208,500

▶ **3a**

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
ST JUDES CHILDREN'S RESEARCH HOSPITAL 501 ST JUDE PLACE MEMPHIS, TN 38105		PC	TO FURTHER DONEE'S EXEMPT PURPOSE	2,500
SYMPHONY SPACE 2537 BROADWAY NEW YORK, NY 10025		PC	TO FURTHER DONEE'S EXEMPT PURPOSE	1,000
THE ACTORS FUND OF AMERICA 729 SEVENTH AVENUE 10TH FLOOR NEW YORK, NY 200906126		PC	TO FURTHER DONEE'S EXEMPT PURPOSE	1,000
<b>Total . . . . .</b> ▶ <b>3a</b>				208,500

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
THE BOYS CLUB OF NEW YORK 287 EAST 10TH STREET NEW YORK, NY 10009		PC	TO FURTHER DONEE'S EXEMPT PURPOSE	1,000
THE CARNEGIE HALL SOCIETY INC 881 SEVENTH AVE NEW YORK, NY 10019		PC	TO FURTHER DONEE'S EXEMPT PURPOSE	2,500
THE DOE FUND 232 EAST 84TH STREET NEW YORK, NY 10028		PC	TO FURTHER DONEE'S EXEMPT PURPOSE	1,000
<b>Total . . . . .</b>				208,500

**▶ 3a**

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

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
<b>a</b> <i>Paid during the year</i>				
THE FRESH AIR FUND 633 THIRD AVE 14TH FLR NEW YORK, NY 10017		PC	TO FURTHER DONEE'S EXEMPT PURPOSE	1,000
THE FRICK COLLECTION 1 EAST 70TH STREET NEW YORK, NY 10021		PC	TO FURTHER DONEE'S EXEMPT PURPOSE	2,500
THE FUND FOR PARK AVE 445 PARK AVENUE SUITE 1000 NEW YORK, NY 10022		PC	TO FURTHER DONEE'S EXEMPT PURPOSE	6,000
<b>Total . . . . .</b> ▶ <b>3a</b>				208,500

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
THE JEWISH MUSEUM 1109 FIFTH AVENUE NEW YORK, NY 10128		PC	TO FURTHER DONEE'S EXEMPT PURPOSE	3,000
THE LENOX LIBRARY 18 MAIN STREET LENOX, MA 012402310		PC	TO FURTHER DONEE'S EXEMPT PURPOSE	500
THE METROPOLITAN OPERA LINCOLN CENTER NEW YORK, NY 10023		PC	TO FURTHER DONEE'S EXEMPT PURPOSE	10,000
<b>Total . . . . .</b>				<b>208,500</b>

**▶ 3a**

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
THE MUSEUM OF MODERN ART PO BOX 3948 NEW YORK, NY 100083948		PC	TO FURTHER DONEE'S EXEMPT PURPOSE	1,000
THE NEW YORK BOTANICAL GARDEN 200TH STREET KAZIMOFF BRONX, NY 104585126		PC	TO FURTHER DONEE'S EXEMPT PURPOSE	1,500
THE NEW YORK POPS 333 W 52ND STREET SUITE 600 NEW YORK, NY 100196238		PC	TO FURTHER DONEE'S EXEMPT PURPOSE	1,000
<b>Total . . . . .</b> ▶ <b>3a</b>				208,500

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
THE USOPO BOX 96860 WASHINGTON, DC 200777677		PC	TO FURTHER DONEE'S EXEMPT PURPOSE	500
TRIANGLE ADVISING 3717 UNIVERSITY DRIVE DURHAM, NC 27707		PC	TO FURTHER DONEE'S EXEMPT PURPOSE	2,500
TRIANGLE ADVISING 3717 UNIVERSITY DRIVE DURHAM, NC 27707		PC	TO FURTHER DONEE'S EXEMPT PURPOSE	3,000
<b>Total . . . . .</b> ▶ <b>3a</b>				208,500

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
UJA FEDERATION OF NEW YORK PO BOX 4056 NEW YORK, NY 102614056		PC	TO FURTHER DONEE'S EXEMPT PURPOSE	7,000
UNITED STATES HOLOCAUST MEMORIAL MUSEUM POBOX 7022 ALBERT LEA, MN 560078022		PC	TO FURTHER DONEE'S EXEMPT PURPOSE	450
UNITED STATES OLYMPIC COMMITTEE PO BOX 7010 ALBERT LEA, MN 560078010		PC	TO FURTHER DONEE'S EXEMPT PURPOSE	5,000
<b>Total . . . . . ▶ 3a</b>				208,500

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
WHITNEY MUSEUM OF AMERICAN ART 945 MADISON AVE NEW YORK, NY 10131		PC	TO FURTHER DONEE'S EXEMPT PURPOSE	1,000
WNYC160 VARICK STREET NEW YORK, NY 10013		PC	TO FURTHER DONEE'S EXEMPT PURPOSE	2,500
WORLD JEWISH CONGRESS PO BOX 90400 WASHINGTON, DC 200900400		PC	TO FURTHER DONEE'S EXEMPT PURPOSE	5,000
<b>Total . . . . .</b>				<b>208,500</b>

▶ **3a**

**TY 2018 Accounting Fees Schedule****Name:** THE KANDELL FUND**EIN:** 13-6117648

<b>Category</b>	<b>Amount</b>	<b>Net Investment Income</b>	<b>Adjusted Net Income</b>	<b>Disbursements for Charitable Purposes</b>
MARKS PANETH LLP	1,500	500		1,000

**TY 2018 Legal Fees Schedule****Name:** THE KANDELL FUND**EIN:** 13-6117648

<b>Category</b>	<b>Amount</b>	<b>Net Investment Income</b>	<b>Adjusted Net Income</b>	<b>Disbursements for Charitable Purposes</b>
BALLARD SPAHR LLC	2,085	0		2,085

**TY 2018 Other Expenses Schedule****Name:** THE KANDELL FUND**EIN:** 13-6117648**Other Expenses Schedule**

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
NYS ATTORNEY GENERAL - FILING FEE	50	0		50

**Schedule B**  
(Form 990, 990-EZ,  
or 990-PF)  
Department of the Treasury  
Internal Revenue Service

**Schedule of Contributors**  
▶ Attach to Form 990, 990-EZ, or 990-PF  
▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information

OMB No 1545-0047  
**2018**

**Name of the organization**  
THE KANDELL FUND

**Employer identification number**  
13-6117648

**Organization type** (check one)

**Filers of:**

**Section:**

Form 990 or 990-EZ

501(c)( ) (enter number) organization

4947(a)(1) nonexempt charitable trust **not** treated as a private foundation

527 political organization

Form 990-PF

501(c)(3) exempt private foundation

4947(a)(1) nonexempt charitable trust treated as a private foundation

501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.

**Note.** Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

**General Rule**

For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or other property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

**Special Rules**

For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33<sup>1</sup> 3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year. . . . . ▶ \$ \_\_\_\_\_

**Caution.** An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Form 990PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

<b>Name of organization</b> THE KANDELL FUND	<b>Employer identification number</b> 13-6117648
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<b>Part I Contributors</b> (See instructions) Use duplicate copies of Part I if additional space is needed			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	ALICE KANDELL 130 E 75TH STREET NY, NY 10021	\$ 70,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions )
2	ANDREW JOSEPH C/O DIGBY MGMT 59 E 54TH STREET NY, NY 10022	\$ 15,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions )
3	BENJAMIN JOSEPH C/O DIGBY MGMT 59 E 54TH STREET NY, NY 10022	\$ 40,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions )
4	CYNTHIA MARVELL C/O DIGBY MGMT 59 E 54TH STREET NY, NY 10022	\$ 25,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions )
5	LESLIE KANDELL 395 RIVERSIDE DRIVE NY, NY 10025	\$ 70,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions )
.		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions )



<b>Name of organization</b> THE KANDELL FUND	<b>Employer identification number</b> 13-6117648
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**Part III** Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once. See instructions.) ▶ \$ \_\_\_\_\_  
Use duplicate copies of Part III if additional space is needed

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	_____	_____	_____
	_____	_____	_____

(e) Transfer of gift Transferee's name, address, and ZIP 4	Relationship of transferor to transferee
_____	_____
_____	_____

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	_____	_____	_____
	_____	_____	_____

(e) Transfer of gift Transferee's name, address, and ZIP 4	Relationship of transferor to transferee
_____	_____
_____	_____

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	_____	_____	_____
	_____	_____	_____

(e) Transfer of gift Transferee's name, address, and ZIP 4	Relationship of transferor to transferee
_____	_____
_____	_____

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	_____	_____	_____
	_____	_____	_____

(e) Transfer of gift Transferee's name, address, and ZIP 4	Relationship of transferor to transferee
_____	_____
_____	_____