

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

Name of foundation THE GLORIA & SIDNEY DANZIGER FOUNDATION C/O KLEINBERG KAPLAN WOLFF & COHEN PC		A Employer identification number 13-6124448	
Number and street (or P O box number if mail is not delivered to street address) 551 FIFTH AVENUE 18TH FLOOR		Room/suite	B Telephone number (see instructions) (212) 986-6000
City or town, state or province, country, and ZIP or foreign postal code NEW YORK, NY 10176		C If exemption application is pending, check here ▶ <input type="checkbox"/>	
G Check all that apply <input type="checkbox"/> Initial return <input type="checkbox"/> Final return <input type="checkbox"/> Address change <input type="checkbox"/> Initial return of a former public charity <input type="checkbox"/> Amended return <input type="checkbox"/> Name change		D 1. Foreign organizations, check here ▶ <input type="checkbox"/> 2 Foreign organizations meeting the 85% test, check here and attach computation ▶ <input type="checkbox"/>	
H 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		E If private foundation status was terminated under section 507(b)(1)(A), check here ▶ <input type="checkbox"/>	
I Fair market value of all assets at end of year (from Part II, col (c), line 16) ▶ \$ 806,448		F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here ▶ <input type="checkbox"/>	
J Accounting method <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____ (Part I, column (d) must be on cash basis )			

Part 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 for charitable purposes (cash basis only)
Revenue	1 Contributions, gifts, grants, etc , received (attach schedule)				
	2 Check ▶ <input checked="" type="checkbox"/> 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 . . .	19,288	19,288		
	5a Gross rents . . . . .				
	b Net rental income or (loss) _____				
	6a Net gain or (loss) from sale of assets not on line 10	114,999			
	b Gross sales price for all assets on line 6a _____ 301,719				
	7 Capital gain net income (from Part IV, line 2) . . .		114,999		
	8 Net short-term capital gain . . . . .				
	9 Income modifications . . . . .				
	10a Gross sales less returns and allowances _____				
Operating and Administrative Expenses	b Less Cost of goods sold . . . . .				
	c Gross profit or (loss) (attach schedule) . . . . .				
	11 Other income (attach schedule) . . . . .				
	12 Total. Add lines 1 through 11 . . . . .	134,287	134,287		
	13 Compensation of officers, directors, trustees, etc	30,000	10,000		20,000
	14 Other employee salaries and wages . . . . .				
	15 Pension plans, employee benefits . . . . .				
	16a Legal fees (attach schedule) . . . . .	8,152	1,000		0
	b Accounting fees (attach schedule) . . . . .	13,390	1,000		12,390
	c Other professional fees (attach schedule) . . . . .	13,497	13,497		0
	17 Interest . . . . .				
	18 Taxes (attach schedule) (see instructions) . . .	2,123	47		0
	19 Depreciation (attach schedule) and depletion . . .				
	20 Occupancy . . . . .				
	21 Travel, conferences, and meetings . . . . .				
	22 Printing and publications . . . . .				
	23 Other expenses (attach schedule) . . . . .	1,950	1,935		15
	24 Total operating and administrative expenses. Add lines 13 through 23 . . . . .	69,112	27,479		32,405
	25 Contributions, gifts, grants paid . . . . .	239,941			239,941
	26 Total expenses and disbursements. Add lines 24 and 25	309,053	27,479		272,346
	27 Subtract line 26 from line 12				
	a Excess of revenue over expenses and disbursements	-174,766			
	b Net investment income (if negative, enter -0-)		106,808		
c Adjusted net income (if negative, enter -0-) . . .					

Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)			
		Beginning of year (a) Book Value	End of year (b) Book Value (c) Fair Market Value		
Assets	1	Cash—non-interest-bearing . . . . .	16,012	5,506	5,506
	2	Savings and temporary cash investments . . . . .	47,932	16,128	16,128
	3	Accounts receivable ▶ _____ Less allowance for doubtful accounts ▶ _____			
	4	Pledges receivable ▶ _____ Less allowance for doubtful accounts ▶ _____			
	5	Grants receivable . . . . .			
	6	Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions) . . . . .			
	7	Other notes and loans receivable (attach schedule) ▶ _____ Less allowance for doubtful accounts ▶ _____			
	8	Inventories for sale or use . . . . .			
	9	Prepaid expenses and deferred charges . . . . .	512		
	10a	Investments—U S and state government obligations (attach schedule)	58,100	47,271	46,310
	b	Investments—corporate stock (attach schedule) . . . . .	536,763	416,131	711,323
	c	Investments—corporate bonds (attach schedule) . . . . .	17,135	16,773	17,754
	11	Investments—land, buildings, and equipment basis ▶ _____ Less accumulated depreciation (attach schedule) ▶ _____			
	12	Investments—mortgage loans . . . . .			
	13	Investments—other (attach schedule) . . . . .	11,668	11,549	9,427
	14	Land, buildings, and equipment basis ▶ _____ Less accumulated depreciation (attach schedule) ▶ _____			
15	Other assets (describe ▶ _____)				
16	<b>Total assets</b> (to be completed by all filers—see the instructions Also, see page 1, item I)	688,122	513,358	806,448	
Liabilities	17	Accounts payable and accrued expenses . . . . .			
	18	Grants payable . . . . .			
	19	Deferred revenue . . . . .			
	20	Loans from officers, directors, trustees, and other disqualified persons			
	21	Mortgages and other notes payable (attach schedule) . . . . .			
	22	Other liabilities (describe ▶ _____)			
	23	<b>Total liabilities</b> (add lines 17 through 22) . . . . .	0	0	
Net Assets or Fund Balances	<b>Foundations that follow SFAS 117, check here</b> ▶ <input type="checkbox"/> <b>and complete lines 24 through 26 and lines 30 and 31.</b>				
	24	Unrestricted . . . . .			
	25	Temporarily restricted . . . . .			
	26	Permanently restricted . . . . .			
	<b>Foundations that do not follow SFAS 117, check here</b> ▶ <input checked="" type="checkbox"/> <b>and complete lines 27 through 31.</b>				
	27	Capital stock, trust principal, or current funds . . . . .	688,122	513,358	
	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	
	30	<b>Total net assets or fund balances</b> (see instructions) . . . . .	688,122	513,358	
31	<b>Total liabilities and net assets/fund balances</b> (see instructions) .	688,122	513,358		

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

1	Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)	1	688,122
2	Enter amount from Part I, line 27a . . . . .	2	-174,766
3	Other increases not included in line 2 (itemize) ▶ _____	3	2
4	Add lines 1, 2, and 3 . . . . .	4	513,358
5	Decreases not included in line 2 (itemize) ▶ _____	5	0
6	Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30 .	6	513,358

**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>1 a</b> NEUBERGER	P		
<b>b</b> STATE STREET	P		
<b>c</b>			
<b>d</b>			
<b>e</b>			

  

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
<b>a</b> 185,854		124,337	61,517
<b>b</b> 115,865		62,383	53,482
<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>			61,517
<b>b</b>			53,482
<b>c</b>			
<b>d</b>			
<b>e</b>			

  

<b>2</b> Capital gain net income or (net capital loss)	2	114,999
<b>3</b> Net short-term capital gain or (loss) as defined in sections 1222(5) and (6) If gain, also enter in Part I, line 8, column (c) (see instructions) If (loss), enter -0- in Part I, line 8	3	

**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	278,797	1,156,886	0 240989
2016	262,974	1,266,914	0 207571
2015	289,812	1,512,306	0 191636
2014	292,950	1,754,871	0 166935
2013	293,820	1,772,051	0 165808

  

<b>2</b> Total of line 1, column (d)	2	0 972939
<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	3	0 194588
<b>4</b> Enter the net value of noncharitable-use assets for 2018 from Part X, line 5	4	918,401
<b>5</b> Multiply line 4 by line 3	5	178,710
<b>6</b> Enter 1% of net investment income (1% of Part I, line 27b)	6	1,068
<b>7</b> Add lines 5 and 6	7	179,778
<b>8</b> Enter qualifying distributions from Part XII, line 4	8	272,346

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

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

<b>1a</b>	Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter "N/A" on line 1 Date of ruling or determination letter _____ (attach copy of letter if necessary—see instructions)		
<b>b</b>	Domestic foundations that meet the section 4940(e) requirements in Part V, check here <input checked="" type="checkbox"/> and enter 1% of Part I, line 27b . . . . .	<b>1</b>	1,068
<b>c</b>	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col (b)		
<b>2</b>	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	<b>2</b>	0
<b>3</b>	Add lines 1 and 2. . . . .	<b>3</b>	1,068
<b>4</b>	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	<b>4</b>	0
<b>5</b>	<b>Tax based on investment income.</b> Subtract line 4 from line 3. If zero or less, enter -0- . . . . .	<b>5</b>	1,068
<b>6</b>	Credits/Payments		
<b>a</b>	2018 estimated tax payments and 2017 overpayment credited to 2018	<b>6a</b>	1,680
<b>b</b>	Exempt foreign organizations—tax withheld at source . . . . .	<b>6b</b>	
<b>c</b>	Tax paid with application for extension of time to file (Form 8868) . . . . .	<b>6c</b>	0
<b>d</b>	Backup withholding erroneously withheld . . . . .	<b>6d</b>	0
<b>7</b>	Total credits and payments. Add lines 6a through 6d. . . . .	<b>7</b>	1,680
<b>8</b>	Enter any <b>penalty</b> for underpayment of estimated tax. Check here <input type="checkbox"/> if Form 2220 is attached	<b>8</b>	0
<b>9</b>	<b>Tax due.</b> If the total of lines 5 and 8 is more than line 7, enter <b>amount owed</b> . . . . .	<b>9</b>	
<b>10</b>	<b>Overpayment.</b> If line 7 is more than the total of lines 5 and 8, enter the <b>amount overpaid</b> . . . . .	<b>10</b>	612
<b>11</b>	Enter the amount of line 10 to be <b>Credited to 2019 estimated tax</b> <b>Refunded</b> . . . . .	<b>11</b>	0

**Part VII-A Statements Regarding Activities**

<b>1a</b>	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? . . . . .	<b>1a</b>	Yes	No
<b>b</b>	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? (see Instructions for definition). . . . . <i>If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities</i>	<b>1b</b>		No
<b>c</b>	Did the foundation file <b>Form 1120-POL</b> for this year? . . . . .	<b>1c</b>		No
<b>d</b>	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year (1) On the foundation <b>\$</b> _____ 0 (2) On foundation managers <b>\$</b> _____ 0			
<b>e</b>	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers <b>\$</b> _____ 0			
<b>2</b>	Has the foundation engaged in any activities that have not previously been reported to the IRS? . . . . . <i>If "Yes," attach a detailed description of the activities</i>	<b>2</b>		No
<b>3</b>	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? <i>If "Yes," attach a conformed copy of the changes</i> . . . . .	<b>3</b>		No
<b>4a</b>	Did the foundation have unrelated business gross income of \$1,000 or more during the year? . . . . .	<b>4a</b>		No
<b>b</b>	If "Yes," has it filed a tax return on <b>Form 990-T</b> for this year? . . . . .	<b>4b</b>		
<b>5</b>	Was there a liquidation, termination, dissolution, or substantial contraction during the year? . . . . . <i>If "Yes," attach the statement required by General Instruction T</i>	<b>5</b>		No
<b>6</b>	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument? . . . . .	<b>6</b>	Yes	
<b>7</b>	Did the foundation have at least \$5,000 in assets at any time during the year? <i>If "Yes," complete Part II, col (c), and Part XV</i> . . . . .	<b>7</b>	Yes	
<b>8a</b>	Enter the states to which the foundation reports or with which it is registered (see instructions) <b>NY</b>			
<b>b</b>	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? <i>If "No," attach explanation</i> .	<b>8b</b>	Yes	
<b>9</b>	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2018 or the taxable year beginning in 2018? See the instructions for Part XIV <i>If "Yes," complete Part XIV</i> . . . . .	<b>9</b>		No
<b>10</b>	Did any persons become substantial contributors during the tax year? <i>If "Yes," attach a schedule listing their names and addresses</i> . . . . .	<b>10</b>		No

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

<b>11</b>	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule. See instructions. . . . .	<b>11</b>		<b>No</b>
<b>12</b>	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement. See instructions. . . . .	<b>12</b>		<b>No</b>
<b>13</b>	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address <b>▶</b> N/A	<b>13</b>	<b>Yes</b>	
<b>14</b>	The books are in care of <b>▶</b> ARLENE C FISCHER Telephone no <b>▶</b> (212) 986-6000			

Located at **▶** 551 FIFTH AVENUE 18TH FLOOR NEW YORK NYZIP+4 **▶** 10176

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

**Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required****File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.**

<b>1a</b>	During the year did the foundation (either directly or indirectly)		<b>Yes</b>	<b>No</b>
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(6) Agree to pay money or property to a government official? ( <b>Exception.</b> Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days). <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
<b>b</b>	If any answer is "Yes" to 1a(1)–(6), did <b>any</b> of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions. . . . . <input type="checkbox"/>	<b>1b</b>		
<b>c</b>	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2018? . . . . . <input type="checkbox"/>	<b>1c</b>		<b>No</b>
<b>2</b>	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5))			
<b>a</b>	At the end of tax year 2018, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2018? . . . . . <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	If "Yes," list the years <b>▶</b> 20____, 20____, 20____, 20____			
<b>b</b>	Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to <b>all</b> years listed, answer "No" and attach statement—see instructions). . . . .	<b>2b</b>		
<b>c</b>	If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here <b>▶</b> 20____, 20____, 20____, 20____			
<b>3a</b>	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? . . . . . <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
<b>b</b>	If "Yes," did it have excess business holdings in 2018 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2018). . . . .	<b>3b</b>		
<b>4a</b>	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	<b>4a</b>		<b>No</b>
<b>b</b>	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2018?	<b>4b</b>		<b>No</b>

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

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

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

<b>1 List all officers, directors, trustees, foundation managers and their compensation. See instructions</b>				
(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
JAMIE KREITMAN 4 DAVIS ROAD PORT WASHINGTON, NY 11050	DIRECTOR 2 00	5,000	0	0
ROBERT E FISCHER UNTIL 52318 277 PARK AVENUE 20TH FLOOR NEW YORK, NY 10172	DIRECTOR 5 00	10,000	0	0
STANLEY T MILLER 101 PLAZA REAL SOUTH 406 BOCA RATON, FL 33432	DIRECTOR 3 00	10,000	0	0
ARLENE FISCHER FROM 52318 277 PARK AVENUE 20TH FLOOR NEW YORK, NY 10172	DIRECTOR 2 00	5,000	0	0
<b>2 Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, enter "NONE."</b>				
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE				
<b>Total number of other employees paid over \$50,000.</b>				<b>0</b>

**Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)**
**3 Five highest-paid independent contractors for professional services (see instructions). If none, enter "NONE".**

(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
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>	931,490
<b>b</b>	Average of monthly cash balances.	<b>1b</b>	897
<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>	932,387
<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>	932,387
<b>4</b>	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions).	<b>4</b>	13,986
<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>	918,401
<b>6</b>	<b>Minimum investment return.</b> Enter 5% of line 5.	<b>6</b>	45,920

**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>	45,920
<b>2a</b>	Tax on investment income for 2018 from Part VI, line 5.	<b>2a</b>	1,068
<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>	1,068
<b>3</b>	Distributable amount before adjustments. Subtract line 2c from line 1.	<b>3</b>	44,852
<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>	44,852
<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>	44,852

**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>	272,346
<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>	272,346
<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>	1,068
<b>6</b>	<b>Adjusted qualifying distributions.</b> Subtract line 5 from line 4.	<b>6</b>	271,278

**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				44,852
<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. . . . . 208,867				
<b>b</b> From 2014. . . . . 209,084				
<b>c</b> From 2015. . . . . 216,493				
<b>d</b> From 2016. . . . . 202,156				
<b>e</b> From 2017. . . . . 224,305				
<b>f</b> <b>Total</b> of lines 3a through e. . . . .	1,060,905			
<b>4</b> Qualifying distributions for 2018 from Part XII, line 4 ▶ \$ 272,346				
<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. . . . .				44,852
<b>e</b> Remaining amount distributed out of corpus	227,494			
<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			0
<b>6</b> <b>Enter the net total of each column as indicated below:</b>				
<b>a</b> Corpus Add lines 3f, 4c, and 4e Subtract line 5	1,288,399			
<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). . . . .	208,867			
<b>9</b> <b>Excess distributions carryover to 2019.</b> Subtract lines 7 and 8 from line 6a . . . . .	1,079,532			
<b>10</b> Analysis of line 9				
<b>a</b> Excess from 2014. . . . . 209,084				
<b>b</b> Excess from 2015. . . . . 216,493				
<b>c</b> Excess from 2016. . . . . 202,156				
<b>d</b> Excess from 2017. . . . . 224,305				
<b>e</b> Excess from 2018. . . . . 227,494				

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

<b>1a</b> 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>b</b> Check box to indicate whether the organization is a private operating foundation described in section <input type="checkbox"/> 4942(j)(3) or <input type="checkbox"/> 4942(j)(5)					
<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 . . . . .	Tax year	Prior 3 years			(e) Total
	(a) 2018	(b) 2017	(c) 2016	(d) 2015	
<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					
(1) Value of all assets . . . . .					
(2) 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					
(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties) . . . . .					
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii). . . . .					
(3) Largest amount of support from an exempt organization . . . . .					
(4) Gross investment income . . . . .					

**Part 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.)**

<b>1 Information Regarding Foundation Managers:</b>	
<b>a</b> 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>b</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	
<b>2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:</b>	
Check here <input checked="" type="checkbox"/> 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.	
<b>a</b> The name, address, and telephone number or email address of the person to whom applications should be addressed	
<b>b</b> The form in which applications should be submitted and information and materials they should include	
<b>c</b> Any submission deadlines	
<b>d</b> Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors	

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

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

## Enter gross amounts unless otherwise indicated

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

Line No.	Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes) (See instructions )

Form **990-PF** (2018)

## Part XVII

- |   |  |    |  |    |
|---|--|----|--|----|
| c | Sharing of facilities, equipment, mailing lists, other assets, or paid employees. . . . .  | 1c |  | No |
| d | If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received. |    |  |    |

[illegible]

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

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

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

**Sign  
Here**

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

\* \* \* \* \*

Title

May the IRS discuss this  
return  
with the preparer shown  
below

(see instr )? ☒ Yes ☐ No

**Paid  
Preparer  
Use Only**

<b>Paid Preparer Use Only</b>	Print/Type preparer's name  PAULA VUKSIC CPA MST	Preparer's Signature	Date	Check if self-employed <input type="checkbox"/>	PTIN  P00360739
	Firm's name ▶ CITRIN COOPERMAN & COMPANY LLP				Firm's EIN ▶ 22-2428965
	Firm's address ▶ 529 FIFTH AVENUE  NEW YORK, NY 100174683				Phone no (212) 697-1000

**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).**

JAMIE KREITMAN
ROBERT E FISCHER UNTIL 52318
STANLEY T MILLER

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> Paid during the year				
AFMDA (AMERICAN FRIENDS MAGEN DAVID ADOM) 352 7TH AVE 400 NEW YORK, NY 10001	NONE	PC	ART	1,800
ALS801 RIVERSIDE DRIVE NEW YORK, NY 10032	NONE	PC	SOCIAL	50
ALZHEMER DISEASE RESEARCH 110 EAST 42 STREET NEW YORK, NY 10017	NONE	PC	HEALTH	100
Total . . . . . ▶ 3a				239,941

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 FRIENDS OF ISRAEL MUSEUM 500 FIFTH AVENUE SUITE 2540 NEW YORK, NY 10110	NONE	PC	ART	2,500
AMERICAN FRIENDS OF NEVE HANNA INC 136 EAST 39TH STREET NEW YORK, NY 10016	NONE	PC	EDUCATION	51,500
AMERICAN FRIENDS OF THE TEL-AVIV UNIVERSITY 122 EAST 42ND STREET SIUITE 4507 NEW YORK, NY 10168	NONE	PC	ART	7,950
<b>Total . . . . . ▶ 3a</b>				239,941



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> Paid during the year				
AMERICAN RED CROSS 431 18TH STREET NW WASHINGTON, DC 20006	NONE	PC	HEALTH	115
AMERICAN SUPPORT FOR ISRAEL 551 FIFTH AVE 18TH FLOOR NEW YORK, NY 10175	NONE	PC	SOCIAL	1,000
AMERICAN UNIVERSTIY CENTER FOR ISRAEL STUDIES 4400 MASSACHUSETTS AVE NW WASHINGTON, DC 20016	NONE	PC	SOCIAL	1,000
Total . . . . . ► 3a				239,941

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> Paid during the year				
ARTHRITIS FOUNDATION 122 E 42ND ST 18 NEW YORK, NY 10168	NONE	PC	EDUCATION	600
BIRTHRIGHT ISRAEL FOUNDATION PO BOX 58 92 HICKSVILLE NEW YORK, NY 11802	NONE	PC	SOCIAL	500
BOCA MUSEUM 501 PLAZA REAL MIZNER PARK BOCA RATON, FL 33432	NONE	PC	ART	100
Total . . . . . ▶ 3a				239,941

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>				
BOCA RATON REGIONAL HOSPITAL INC 800 MEADOWS ROAD BOCA RATON, FL 33486	NONE	PC	HEALTH	15,000
BOCA WEST FOUNDATION 7649 WOOD DUCK DRIVE BOCA RATON, FL 33434	NONE	PC	HEALTH	2,000
BWCPC4745 ARAPAHOE AVE 110 BOULDER CO, CO 80330	NONE	PC	SOCIAL	465
<b>Total . . . . . ▶ 3a</b>				239,941

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>				
CAMERA551 FIFTH AVE 18TH FLOOR NEW YORK, NY 10175	NONE	PC	SOCIAL	500
CENTRAL PARK CONSERVANCY 14 EAST 60TH STREET NEW YORK, NY 10022	NONE	PC	SOCIAL	250
CENTRAL SYNAGOGUE 123 EAST 55TH STREET NEW YORK, NY 10022	NONE	PC	RELIGIOUS	11,400
<b>Total . . . . . ▶ 3a</b>				239,941

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>				
CHABAD AU166 W 97TH ST NEW YORK, NY 10025	NONE	PC	EDUCATION	5,800
CHABAD OF FRANKLIN LAKES 375 PULIS AVE FRANKLIN LAKES, NJ 07417	NONE	PC	SOCIAL	1,000
CHANNEL 13356 W 58TH ST NEW YORK, NY 10019	NONE	PC	ENTERTAINMENT	100
<b>Total . . . . . ▶ 3a</b>				239,941

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>				
CHILDREN'S HEARING INSTITUTE 363 7TH AVENUE 10TH FLOOR NEW YORK, NY 10001	NONE	PC	EDUCATION	500
CITY TECH FOUNDATION300 JAY ST BROOKLYN, NY 11201	NONE	PC	EDUCATION	250
CONGREGATION YESMEI TESHUVA PO BOX 810339 BOCA RATON, FL 33481	NONE	PC	ART	412
<b>Total . . . . .</b> ▶ <b>3a</b>				239,941

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>				
CROHN'S & COLITIS FOUNDATION 8031 WEST CENTER ROAD OMAHA, NE 68124	NONE	PC	HEALTH	1,000
DIABETES RESEARCH INSTITUTE FOUNDATION 381 PARK AVE 1118 NEW YORK, NY 10016	NONE	PC	HEALTH	135
DISABLED AMERICAN VETERANS 12055 QUEENS BLVD JAMAICA, NY 11424	NONE	PC	HEALTH	125
<b>Total . . . . . ▶ 3a</b>				239,941

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>				
ENGLEWOOD HOSPITAL & MEDICAL CENTER FOUNDATION 350 ENGLE STREET ENGLEWOOD, NJ 07631	NONE	PC	SOCIAL	250
FABSCRAPS140 58TH STREET BROOKLYN, NY 11220	NONE	PC	SOCIAL	1,000
FARE7925 JONES BRANCH DR MCLEAN, VA 22102	NONE	PC	HEALTH	1,000
<b>Total . . . . . ▶ 3a</b>				239,941



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>				
FOUNDATION FIGHTING BLINDNESS 111 W EVELYN AVE SUNNYVALE, CA 94086	NONE	PC	SOCIAL	160
FRIENDS OF THE ISRAEL DEFENSE FORCES PO BOX 4224 NEW YORK, NY 10163	NONE	PC	SOCIAL	613
FRIENDS OF UNITED HATZOLAH 208 EAST 51ST STREET NEW YORK, NY 10022	NONE	PC	SOCIAL	500
<b>Total . . . . . ▶ 3a</b>				239,941

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>				
FUND FOR PARK AVENUE 445 PARK AVENUE SUITE 1000 NEW YORK, NY 10022	NONE	PC	SOCIAL	100
GREYSTON FOUNDATION21 PARK AVE YONKERS, NY 10703	NONE	PC	SOCIAL	1,000
HALAWA INITATIVE 616 CORPORATE WAY VALLEY COTTAGE, NY 10989	NONE	PC	SOCIAL	4,000
<b>Total . . . . . ▶ 3a</b>				239,941

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> Paid during the year				
HARMONIE PRESERVATION FOUNDATION 4 EAST 60TH STREET NEW YORK, NY 10022	NONE	PC	SOCIAL	1,000
HASASSAH529 5TH AVENUE NEW YORK, NY 10017	NONE	PC	GENERAL	500
HASBARA FELLOWSHIP 313 WEST 83RD STREET NEW YORK, NY 10024	NONE	PC	SOCIAL	1,200
<b>Total . . . . . ▶ 3a</b>				239,941

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>				
HAVERSTRAW RIVER ARTS 16 FRONT ST EMELINE PARK HAVERSTRAW, NY 10927	NONE	PC	ART	3,000
HILLEL INTERNATIONAL800 8TH ST NW WASHINGTON, DC 20001	NONE	PC	EDUATION	1,200
HOLOCAUST MUSEUM 100 RAOUL WALLENBERG PL SW WASHINGTON, DC 20024	NONE	PC	SOCIAL	100
<b>Total . . . . . ▶ 3a</b>				239,941

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>				
HONEST REPORTING 551 FIFTH AVE 18TH FLOOR NEW YORK, NY 10175	NONE	PC	SOCIAL	366
HOW (HEARING THE OVARIAN CANCER WHISPER) 360 CYPRESS DRIVE JUPITER, FL 33469	NONE	PC	SOCIAL	350
JASA247 W 37TH ST NEW YORK, NY 10018	NONE	PC	SOCIAL	500
<b>Total . . . . . ▶ 3a</b>				239,941

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 BRAILLE INSTITUTE 110 E 30TH STREET NEW YORK, NY 10016	NONE	PC	SOCIAL	200
JEWISH FEDERATION OF S PALM BEACH CTY 21300 RUTH AND BARON COLEMAN BLVD BOCA RATON, FL 33428	NONE	PC	SOCIAL	4,190
JEWISH MUSEUM1109 5TH AVE NEW YORK, NY 10128	NONE	PC	ART	2,000
<b>Total . . . . . ▶ 3a</b>				239,941

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>				
KOL RINAH829 N HANLEY ROAD ST LOUIS, MO 63130	NONE	PC	SOCIAL	1,050
KRAVIS CENTER FOR THE PERFORMING ARTS 701 OKEECHOBEE BLVD WEST PALM BEACH, FL 33401	NONE	PC	ART	2,000
LAWYERS FOR CHILDREN 110 LAFAYETTE STREET NEW YORK, NY 10013	NONE	PC	SOCIAL	500
<b>Total . . . . . ▶ 3a</b>				239,941

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>				
LETS GET READY50 BROADWAY NEW YORK, NY 10004	NONE	PC	EDUCATION	1,500
LINCOLN CENTRE FOR PERFORMONG ARTS 10 LINCOLN CENTER PLAZA NEW YORK, NY 10023	NONE	PC	ART	500
LYMPHOMA RESEARCH FOUNDATION 115 BROADWAY SUITE 1301 NEW YORK, NY 10006	NONE	PC	HEALTH	22,000
<b>Total . . . . . ▶ 3a</b>				239,941



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>				
MANDEL JCC5221 HOOD ROAD PALM BEACH, FL 33418	NONE	PC	SOCIAL	19,000
MAYO CLINIC5777 E MAYO BLV PHOENIZ, AZ 85054	NONE	PC	HEALTH	1,000
METROPOLIS CC FOUNDATION 289 DOBBS FERRY ROAD WHITE PLAINS, NY 10607	NONE	PC	SOCIAL	300
<b>Total . . . . . ▶ 3a</b>				239,941

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> Paid during the year				
MORSEL LIFE FOUNDATON 4920 LORING DR WEST PALM BEACH, FL 33417	NONE	PC	HEALTH	1,000
MT SINAI HOSPITAL 1 GUSTAVE L LEVY PLACE NEW YORK, NY 10029	NONE	PC	HEALTH	500
MUSEUM OF JEWISH HERITAGE 18 FIRST PLACE NEW YORK, NY 10009	NONE	PC	SOCIAL	600
Total . . . . . ▶ 3a				239,941

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 MODERN ART 11 WEST 53 STREET NEW YORK, NY 10019	NONE	PC	ART	140
NEFESH B'NEFESH50 EISENHOWER DR PARAMUS, NJ 07652	NONE	PC	SOCIAL	1,000
NEW YORK BOTANICAL GARDENS 2900 SOUTHERN BLVD BRONX, NY 10458	NONE	PC	SOCIAL	110
<b>Total . . . . . ▶ 3a</b>				239,941

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> Paid during the year				
NEW YORK CITY BALLET 20 LINCOLN CENTER PLAZA NEW YORK, NY 10023	NONE	PC	ART	5,650
NLEOMF (NATIONAL LAW ENFORCEMENT OFFICER FUND) 418 F NW ST WASHINGTON, DC 20001	NONE	PC	SOCIAL	25
NORTON MUSEUM OF ART 1450 S DIXIE HWY WEST PALM BEACH, FL 33401	NONE	PC	SOCIAL	450
Total . . . . . ► 3a				239,941

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>				
NYC RESCUE MISSION90 LAFAYETTE ST NEW YORK, NY 10013	NONE	PC	HEALTH	250
PAPS178 BARRACKS ST PERTH AMBOY, NJ 08861	NONE	PC	SOCIAL	350
ROUND TABLE CULTURAL SEMINARS 45 E 78TH ST NEW YORK, NY 10075	NONE	PC	EDUCATION	2,850
<b>Total . . . . . ▶ 3a</b>				239,941

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> Paid during the year				
SHOMREI TORAH CONGREGATION 7353 VALLEY CIR BLVD WEST HILLS, CA 91307	NONE	PC	SOCIAL	5,850
SOLOMON R GUGGENHEIM FOUNDATION 1071 5TH AVE NEW YORK, NY 10128	NONE	PC	SOCIAL	140
SOUTHERN POVERTY LAW CENTER 400 WASHINGTON AVE MONTGOMERY, AL 36104	NONE	PC	GENERAL	100
<b>Total . . . . . ▶ 3a</b>				239,941

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>				
SPECIAL OLYMPICS504 BALTOWN ROAD SCHENECTADY, NY 12304	NONE	PC	SPORTS	100
STAND WITH USPO BOX 341069 LOS ANGELES, CA 900341069	NONE	PC	GENERAL	500
THE CENTRAL OHIO DIABETES ASSOCIATION 1100 DENNISON AVE COLUMBUS, OH 43201	NONE	PC	SOCIAL	5,000
<b>Total . . . . . ▶ 3a</b>				239,941

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> Paid during the year				
THE CHILDREN'S HEARING INSTITUTE 363 SEVENTH AVE NEW YORK, NY 10001	NONE	PC	SOCIAL	500
THE DALTON SCHOOL108 E 89TH ST NEW YORK, NY 10128	NONE	PC	SOCIAL	500
THE GUGGENHEIM MUSEUM 1071 5TH AVE NEW YORK, NY 10128	NONE	PC	SOCIAL	140
Total . . . . . ▶ 3a				239,941



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 ISRAEL FOREVER FOUNDATION 1146 19TH ST NW WASHINGTON, DC 20036	NONE	PC	SOCIAL	6,500
THE ISRAEL PROJECTPO BOX 27999 WASHINGTON, DC 27999	NONE	PC	SOCIAL	200
THE JEWISH FEDERATION OF GREATER PITTSBURGH 2000 TECHNOLOGY DRIVE PITTSBURGH, PA 15219	NONE	PC	SOCIAL	1,500
<b>Total . . . . . ▶ 3a</b>				239,941

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 OF FLORIDA 301 WASHINGTON AVE MIAMI, FL 33139	NONE	PC	SOCIAL	1,000
THE JEWISH MUSEUM1109 5TH AVE NEW YORK, NY 10128	NONE	PC	SOCIAL	125
THE LALAWA INITIATIVE 551 FIFTH AVE 18TH FLOOR NEW YORK, NY 10176	NONE	PC	SOCIAL	2,000
<b>Total . . . . . ▶ 3a</b>				239,941

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 NEW YORK BOARD OF RABBIS 171 MADISON AVENUE1602 NEW YORK, NY 10016	NONE	PC	SOCIAL	1,000
THE OLGA LENGYEL INSTITUTE 58 EAST 79TH STREET NEW YORK, NY 10075	NONE	PC	SOCIAL	500
THE WHITNEY MUSEUM 99 GANSEVOORT ST NEW YORK, NY 10014	NONE	PC	SOCIAL	140
<b>Total . . . . . ▶ 3a</b>				239,941

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>				
TRUST BRIDGE HOSPICE 5300 EAST AVENUE WEST PALM BEACH, FL 33407	NONE	PC	GENERAL	100
US HOLOCAUST MUSEUM 100 RAOUL WALENBERG PLACE WASHINGTON, DC 20024	NONE	PC	SOCIAL	250
US SUPPORTERS OF THE LONE SOLDIER CENTER 1500 BROADWAY SUITE 903 NEW YORK, NY 10036	NONE	PC	SOCIAL	800
<b>Total . . . . . ▶ 3a</b>				239,941

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 130 EAST 59TH STREET NEW YORK, NY 10022	NONE	PC	SOCIAL	10,000
VALLEY CHABAD100 OVERLOOK DRIVE WOODCLIFF LAKE, NJ 07677	NONE	PC	SOCIAL	100
VERITANS225 POMPTON ROAD HALEDON, NJ 07508	NONE	PC	SOCIAL	2,500
<b>Total . . . . . ▶ 3a</b>				239,941

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>				
WAYNE STATE UNIVERSITY 42 W WARREN AVE DETROIT, MI 48202	NONE	PC	SOCIAL	1,000
WHITNEY MUSEUM99 GANSEVOORT ST NEW YORK, NY 10014	NONE	PC	ART	140
WIN5 E 98TH ST NEW YORK, NY 10029	NONE	PC	HEALTH	500
<b>Total . . . . . ▶ 3a</b>				239,941

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>				
WINSTON PREPARATORY SCHOOL 126 W 17TH STREET NEW YORK, NY 10011	NONE	PC	EDUCATION	5,500
WOMEN'S DIVISION EINSTEIN COLLEGE OF MEDICINE 1300 MORRIS PARK AVE BRONX, NY 10461	NONE	PC	SOCIAL	1,000
WPBT 214901 NE 20TH AVENUE MIAMI, FL 33181	NONE	PC	SOCIAL	50
<b>Total . . . . . ▶ 3a</b>				239,941

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>				
WXEL3401 S CONGRESS AVE BOYNTON BEACH, FL 33426	NONE	PC	SOCIAL	50
YALE LAW SCHOOL127 WALL STREET NEW HAVEN, CT 06511	NONE	PC	EDUCATION	2,000
<b>Total . . . . . ▶ 3a</b>				239,941



**TY 2018 Accounting Fees Schedule**

**Name:** THE GLORIA & SIDNEY DANZIGER FOUNDATION  
C/O KLEINBERG KAPLAN WOLFF & COHEN PC

**EIN:** 13-6124448

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
ACCOUNTING FEES	13,390	1,000		12,390

## TY 2018 Investments Corporate Bonds Schedule

**Name:** THE GLORIA & SIDNEY DANZIGER FOUNDATION  
C/O KLEINBERG KAPLAN WOLFF & COHEN PC

**EIN:** 13-6124448

### Investments Corporate Bonds Schedule

Name of Bond	End of Year Book Value	End of Year Fair Market Value
SEE ATTACHED SCHEDULE	16,773	17,754

**TY 2018 Investments Corporate Stock Schedule**

**Name:** THE GLORIA & SIDNEY DANZIGER FOUNDATION  
C/O KLEINBERG KAPLAN WOLFF & COHEN PC  
**EIN:** 13-6124448

**Investments Corporation Stock Schedule**

<b>Name of Stock</b>	<b>End of Year Book Value</b>	<b>End of Year Fair Market Value</b>
SEE ATTACHED SCHEDULE	416,131	711,323

**TY 2018 Investments Government Obligations Schedule**

**Name:** THE GLORIA & SIDNEY DANZIGER FOUNDATION  
C/O KLEINBERG KAPLAN WOLFF & COHEN PC

**EIN:** 13-6124448

**US Government Securities - End  
of Year Book Value:**

47,271

**US Government Securities - End  
of Year Fair Market Value:**

46,310

**State & Local Government  
Securities - End of Year Book  
Value:**

0

**State & Local Government  
Securities - End of Year Fair  
Market Value:**

0

## TY 2018 Investments - Other Schedule

**Name:** THE GLORIA & SIDNEY DANZIGER FOUNDATION  
C/O KLEINBERG KAPLAN WOLFF & COHEN PC

**EIN:** 13-6124448

### Investments Other Schedule 2

Category/ Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value
FOREIGN GOVERNMENT BONDS	AT COST	11,549	9,427

**TY 2018 Legal Fees Schedule**

**Name:** THE GLORIA & SIDNEY DANZIGER FOUNDATION  
C/O KLEINBERG KAPLAN WOLFF & COHEN PC

**EIN:** 13-6124448

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
LEGAL FEES	8,152	1,000		0

**TY 2018 Other Expenses Schedule**

**Name:** THE GLORIA & SIDNEY DANZIGER FOUNDATION  
C/O KLEINBERG KAPLAN WOLFF & COHEN PC

**EIN:** 13-6124448

**Other Expenses Schedule**

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
BANK CHARGES	30	15		15
FILING FEES	250	250		0
MISCELLANEOUS	1,670	1,670		0

**TY 2018 Other Increases Schedule**

**Name:** THE GLORIA & SIDNEY DANZIGER FOUNDATION  
C/O KLEINBERG KAPLAN WOLFF & COHEN PC

**EIN:** 13-6124448

Description	Amount
ADJUSTMENT	2



**TY 2018 Other Professional Fees Schedule**

**Name:** THE GLORIA & SIDNEY DANZIGER FOUNDATION  
C/O KLEINBERG KAPLAN WOLFF & COHEN PC

**EIN:** 13-6124448

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
INVESTMENT ADVISORY FEES	13,497	13,497		0

**TY 2018 Taxes Schedule**

**Name:** THE GLORIA & SIDNEY DANZIGER FOUNDATION  
C/O KLEINBERG KAPLAN WOLFF & COHEN PC

**EIN:** 13-6124448

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
TAXES	2,076	0		0
FOREIGN TAXES	47	47		0