斒 990-PF

Department of the Treasury

**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.

2018

Open to Public Inspection

	_			gov/ Form 990P For Instru		-	
	<u>ر اور</u>	cal	endar year 2018 or tax year beginning	• • •	, 2 <u>018, and endi</u>		<u>, 20 ' ·     </u>
10	1	me <b>l</b> of	foundation .	11/1		A Employeridentifi	cation number
10	<u>کر</u> د	SI VE	FEY FAMILY FOUNDATION	LGKA		1 46-	4345106
	~~	- ,	and street (or PO box number if mail is not delivered to	street address)	- Room/suite		
. `	الأنب	Princi	and street for the box namber it mass is not delivered to	311001 00010007	1		, , , , , , , , , , , , , , , , , , , ,
		•		•	. '	· · · · · · · · ·	
,	í -	P.0	. BOX 1501, NJ2-130-03-31 _			. 60	9-274-6834
			own, state or province, country, and ZIP or foreign posta	l code			
	-	•	•	•	7	C If exemption applicat	tion is
				•		pending, check here	▶ □ □
	·	PEN]	NINGTON, NJ 08534-1501	×	<u> </u>		
_	G	Che	ck all that apply: Initial return	; Initial return of	of a former public char	Ity D 1 Foreign organizati	ions, check here . : >
₹/>				Amended_ret	urn	2 Foreign organizati	
//			Address change	X Name change		85% test, check h	ere and attach
<b>5</b> U	-					computation .	
/ <b>'</b>	H	Che	ck type of organization X Section 501(	c)(3) exempt bilivate to	onugation U	E If private foundation	status was terminated
5		s	ection 4947(a)(1) nonexempt charitable trust	Other taxable pri	vate foundation U	<b>T</b> 1	)(1)(A), check here . >
3	ī	Fair	market value of all assets at J Accou	unting method: X Ca	sh Accrual	E if the ferredeline is	n a 60-month termination
, ,	٠.		1	ther (specifý)		/ 1	)(1)(B), check here .
Ø				· · · · · · · · · · · · · · · · · · ·	1.1		WANDWOOD NOTE:
>		_		column (d) must be on ca	sh basis )		(4) 0
_		art I	Analysis of Revenue and Expenses (The	(a) Revenue and	(L) Not	(a) Advised mas	(d) Disbursements for charitable
₹	-		total of amounts in columns (b), (c), and (d)	expenses per	(b) Net investment income	(c) Adjusted net income	purposes
~ , <i>~</i>			may not necessarily equal the amounts in column (a) (see instructions) )	books	modille .	Alcomo	(cash basis only)
<u> </u>	_	-		, E 304 VEV	Markett Markett	ag mengunsta yan da	HELLENGTH PROPERTY
 1		1	Contributions, gifts, grants, etc , received (attach schedule) .	5,394,050.		inga <u>, sasangan, anggarangangangangangan</u> Ingangangangan, anggaranganganganganganganganganganganganganga	Transference artigogramma
¥		2	Check Lift the foundation is not required to attach Sch B.		AND ASSESSED AND ASSESSED AND ASSESSED.	ine uitigenities in eine in in eine	Karlennerhornshistell
₹		3	Interest on savings and temporary cash investments-				THE CONTRACTOR OF THE PARTY OF
₹		, д	Dividends and interest from securities	252,222.	223,637.	•	STMT#1
ا							ENG-LENALMONISMENT
<b>ာ</b> .			Gross rents	Which the Real Plants of Table 1975	PAGE LANGE CONTRACTOR STREET		SELECTION OF THE PERSON OF THE
		ь	Net rental income or (loss)	WASHINGTON AND THE CONTROL	# 1	APRIL COMPRESSED STREET, WITH WAR	Case to the control of the control o
	_ ຍ	`6a	Net gain or (loss) from sale of assets not on line 10	520,481.	<b>第四种 图 第一种 图</b>	PECELV	EDURAL SERVICE
o @ 2010	≾ ਵ	b	Gross sales price for all 4, 064, 434.			A STANDARD TO SEE THE STANDARD TO SEE	
7	7 8		Capital gain net income (from Part IV, line 2) .		520,481.		
e.g	, æ	′ .	, ' \ "		REAL PROPERTY AND A STREET	DI NOV 07	2019 8 70 138 25 78
G	a –	8	Net short-term capital gain	STATES THE CONTROL OF THE STATES OF THE STAT	10,680 x 14 16 44-10-610-620-627 4 17 1800-60 1 800-77 10-61 10-62 10-640-622 10-74 10-75 1665	101	TANANGAN CANANANANANANANANANANANANANANANANANAN
_		9	Income modifications	THE RESIDENCE OF PROPERTY AND ADDRESS OF ANY	CANCEL OF THE PARTY OF THE COURSE	A SEASON CONTRACTOR OF STREET	the last Cold attention of the Cold attention
·ć	5	ioa	Gross sales-less-returns and allowances RECEIVEN			KIME OGDEN	
ين تر	-	ь	Less Cost of goods sold EIVEN			Man Mark Mark Co. Co. Co. Co. Co.	The second of the second
A NOV	•		Gross profit or (loss) (attach schedule)				
4 N	•	١		3,058.	303,427.	•	MECHES ACCOUNTS O
7	•	11	Other indepte (stept) streamed U1G . 1 1 1 .		1,047,545.		AND ACCORDING CONTROL OF THE
N	<b>.</b> –	12	Total Additiones 1 through 112.	· 6,169,811.	1,047,343.		2524404.4.1242.0.42486.4F51"429.47486108754
S	3	13	Compensation of officers, directors, trustees, etc.,		•		
~	e s	14	Other employee salaries and wages		. NONE	NONE NONE	
N	≥ Si	15	Pension plans, employee benefits	1	NONE	NONE	1
2 7 0	Expen	16-	Legal fees (attach schedule)		1	• •	
-	'nМ			2,500.	NONE	NONE	2,500
്ത്	دة د	b	Accounting fees (attach schedule) STMT 3			INOINE	
	.≧	С	Other professional fees (attach schedule: 4.	44,709.	26,826.		17,884
四	<u>ra</u>	17	Interest		-		•
2	st	17 18 19 20	Taxes (attach schedule) (see instructions. 5.	3,309.	3,309.		
740	Ξ.	10			•		
	<u>_</u> E	19	Depreciation (attach schedule) and depletion.		,		TOWNS OF THE REST WAS ASSOCIATED
-	A	20	Occupancy				
NOV 1 5 2019	ਰ	21	Travel, conferences, and meetings		, NONE	NONE	
	<u> </u>	21 22	Printing and publications :		NONE	<u>N</u> ONE	,
	. 0	22	Other expenses (attach schedule) STMT. 6.		77,526.	1	
ا ہے	<u> </u>	2.3			, ,	•	
・て	촺혈	24	Total operating and administrative expenses	-0 -10	, 107 (61	MONT	20.204
ġ,	띯힐		Add lines 13 through 23	50,518.	107,661.	NONE	
<u> </u>	Ęŏ.	25	Contributions, gifts, grants paid	592,834.			. 592,834
ٷ؞	3	26	Total expenses and disbursements Add lines 24 and 25	643,352.	_107,661.	NONE	613,218
Ų.	<u>~~</u>	27	Subtract line 26 from line 12				BURNELL AND
	13 Batching Ogden Operating	<b>'</b>		E 506 450			
•		١,	Excess of revenue over expenses and disbursements	5,526,459.	-correspondential market	The order properties of the comment	Profesioode, as exclusive accessors with
7			Net investment income (if negative, enter '-0-)		939,884.	Har Steen and Market Harriston	ENGRADO CONTROL NO
	:	c	Adjusted net income (if negative, enter -0-)				

JSA For Paperwork Reduction Act Notice, see instructions 8E1410 1 000 GZV993 T92P 10/08/2019 11:36:07

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Form 990-PF (2018)

Part II

1

8 Assets

11<sup>c</sup>

12

15

16

17

18

20

21 22

23

24

25

26

27

28

29

Liabilities 19

Balances

or Fund

Assets

Attached schedules and amounts in the

NONE

amounts only (See instructions )

Balance Sheets description column should be for end-of-year

Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions) . . Other notes and loans receivable (attach schedule)

Cash - non-interest-bearing . . . . . . . . .

Savings and temporary cash investments .

Less allowance for doubtful accounts

Less allowance for doubtful accounts

Less allowance for doubtful accounts ▶ 

Investments - land, buildings, and equipment basis Less accumulated depreciation (attach schedule)

Less accumulated depreciation

Other liabilities (describe >\_

and complete lines 27 through 31

Other assets (describe

Land, buildings, and equipment basis

(attach schedule)

Prepaid expenses and deferred charges . . .

Total liabilities (add lines 17 through 22) . . . . . . Foundations that follow SFAS 117, check here . . . . >

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

Foundations that do not follow SFAS 117, check here

Capital stock, trust principal, or current funds . . . . . . . . .

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

Retained earnings, accumulated income, endowment, or other funds . .

10a Investments - U S and state government obligations (attach schedule). .

b Investments - corporate stock (attach schedule) . STMT .7. .

Investments - corporate bonds (attach schedule) . . . . . . .

Investments - other (attach schedule) . . . . . . STMT .8. .

Total assets (to be completed by all filers - see the instructions Also, see page 1, item I) . . . . . . . . . . . . . . .

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

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

Accounts receivable ▶

Pledges receivable ▶

46-4345106 Page 2 Beginning of year End of year (a) Book Value (b) Book Value (c) Fair Market Value 3,131 3,131 4,669 54,682 54,682 69,961 3,000,250 3,429,927 11,890,592 11,675,682 12,133, 889 11,750,312. 14.948.655 15,621,629. NONE

14,948,655

14,948,655

7	30 Total net assets or fund balances (see instructions)	11,750,312.	14,948,	<u>655.</u>	
Se	30 Total net assets or fund balances (see instructions)				
	instructions) ,	11,750,312.	14,948,	<u>655.</u>	
Р	art III Analysis of Changes in Net Assets or Fund Bala	nces			
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_	11,750,312.
2	Enter amount from Part I, line 27a				5,526,459.
3	Other increases not included in line 2 (itemize) > COST ADJUSTM	BNT		3	64,563.
4	Add lines 1, 2, and 3			4	17,341,334.
5	Decreases not included in line 2 (itemize) ► SEE STA	TEMENT 9		5	2,392,679.
	Total net assets or fund balances at end of year (line 4 minus l		o), line 30	6	14,948,655.

11,750,312

11,750,312

Form **990-PF** (2018)

Haran Karabba

Form 990-PF (2018)	and Lagge for Tay on Inve	estment Income	<del></del>		Page
	s and Losses for Tax on Investigation in the kind(s) of property sold (for each		(b) How	1	
	prick warehouse, or common stock, 200		acquired P - Purchase		(d) Date sold (mo , day, yr )
a PUBLICLY TRADED			D Donation		
<b>b</b>	BECONTILES		<del>                                     </del>		
c					-
d					
e					
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		(h) Gain or (lo ((e) plus (f) mini	
a 4,064,434.		3,543,953.			520,481.
b					
<u>c</u>		<u> </u>	<u> </u>		
<u>d</u>					
Clate and of	Land and the state of the state	1 12/21/60		<del></del>	
Complete only for assets s	howing gain in column (h) and owned b	<u> </u>		Gains (Col (h) ga	
(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	COI	(k), but not less t Losses (from co	l (h))
a			<u> </u>	<del></del>	520,481.
<u>b</u>	<del></del>				
<u>c</u>				<del> </del>	
<u>d</u>					
<u>e</u>	, If as	ain, also enter in Part I, line 7			
Capital gain net income	or (not canital loce)	oss), enter -0- in Part I, line 7	2		520,481.
Net short-term capital o					520,101.
	ain or (loss) as defined in sections				
	Part I, line 8, column (c) See ins	· · · · · · · · · · · · · · · · · · ·			
	· · · · · · · · · · · · · · · · · · ·		3		
	Jnder Section 4940(e) for Reduce private foundations subject to the				
	leave this part blank.  the section 4942 tax on the distrib of qualify under section 4940(e) Do	• •	ase perio	d?	Yes X No
	mount in each column for each yea		ng any en	tries	
(a)	(b)	(c)	lg diry on	(d)	
Base period years Calendar year (or tax year beginning in)	Adjusted qualifying distributions	Net value of noncharitable-use assets		Distribution ra (col (b) divided by	
2017	543,916.	8,654,771.			0.062846
2016	278,524.	2,660,464.			0.104690
2015	169,829.	2,637,457.			0.064391
2014	199,064.	2,867,139.			0.069429
2013	NONE	3,000,870.		<u>-</u>	NONE
				-	
Total of line 1, column	(d)		2		0.301356
	no for the 5-year base period - divid				
	e foundation has been in existence		3		0.060271
the hamber of yours the	, roundation had book in existence				
Enter the net value of n	oncharitable-use assets for 2018 fr	om Part X, line 5	4	12,	615,290.
Multiply line 4 by line 3			5		760,336.
Enter 1% of net investm	ent income (1% of Part I, line 27b)		6		9,399.
Add lines 5 and 6			7	· · · · · · · · · · · · · · · · · · ·	769,735.
	tions from Part XII, line 4		8		<u>6</u> 13,218.
If line 8 is equal to or a	greater than line 7, check the box	in Part VI, line 1b, and complete	that part	using a 1% tax	rate See th

Form	990-PF (2018) 46 - 4345106	Page 4
Έaι	t VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see	instructions)
1a	Exempt operating foundations described in section 4940(d)(2), check here	
	Date of ruling or determination letter (attach copy of letter if necessary - see instructions)	
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check	18,798.
	here  and enter 1% of Part I, line 27b	
c	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, col (b)	
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-)	NONE
3		18,798.
4	700 11100 7 0110 2 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7	NONE
_	Tax based on investment income Subtract line 4 from line 3. If zero or less, enter -0	18,798.
5 6	Credits/Payments	
	2018 estimated tax payments and 2017 overpayment credited to 2018 6a 3, 120 .	
ł	Exempt foreign-organizations: -tax-withheld-at-source	
	Tax paid with application for extension of time to file (Form 8868)	
d	Backup withholding erroneously withheld	
7	Total credits and payments Add lines 6a through 6d	20,120.
8	Enter any penalty for underpayment of estimated tax Check here if Form 2220 is attached 8	20/120.
9	Tax due If the total of lines 5 and 8 is more than line 7, enter amount owed	
10	Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	1,322.
11	Enter the amount of line 10 to be Credited to 2019 estimated tax ▶ 1,322. Refunded ▶ 11	
Par	t VII-A Statements Regarding Activities	
	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it	Yes No
	participate or intervene in any political campaign?	1a X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the	
	instructions for the definition	1b X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials	BIG SEE IST
	published or distributed by the foundation in connection with the activities	
c	Did the foundation file Form 1120-POL for this year?	1c X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year	
	(1) On the foundation ► \$(2) On foundation managers ► \$	
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed	
	on foundation managers > \$	
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2 X
	If "Yes," attach a detailed description of the activities	
3	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? If "Yes," attach a conformed copy of the changes	3 <u>X</u>
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a X
b	If "Yes," has it filed a tax return on Form 990-T for this year?	4b
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5 X
	If "Yes," attach the statement required by General Instruction T	
6	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?	6 X X X
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV	THE PORCH NAME
8a	Enter the states to which the foundation reports or with which, it is registered. See instructions.	
L	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General	
b		8b X
۵	(or designate) of each state as required by General Instruction G? If "No," attach explanation	
9	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 tax year beginning in 2018? See the instructions for Part XIV If "Yes,"	xattey-foth editesificity fitting
		g X
	complete Part XIV	
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their	10 X
	names and addresses	900 PE (2012)

Yes   No meaning of section 512(b)(13)* H*Yes,* attach schedula See instructions   11	Par	t VII-A Statements Regarding Activities (continued)			
manning of section 512bil 13)* (if Yes, * attach schedule See instructions				Yes	No
manning of section 512bil 13)* (if Yes, * attach schedule See instructions	11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the			
12 Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person advisory privileges if "Yes," attach statement Sea instructions			11		Ιx
13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application?  13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application?  14 The books are in care of ▶ BANK OF AMERICA  15 Section 4947(a)(1) nonexempt charitable trusts filing form 990-PF in lieu of Form 1041 - check here  15 Section 4947(a)(1) nonexempt charitable trusts filing form 990-PF in lieu of Form 1041 - check here  16 At any time during calendar year 2018, did the foundation have an interest in or a signature or other authority over a bank, securines, or other financial account?  16 At any time during calendar year 2018, did the foundation have an interest in or a signature or other authority over a bank, securines, or other financial account?  16 See the instructions for exceptions and fifting requirements for FinCEN Form 114 if "Yes," enter the name of the foreign country p  20** VIES** 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.  1a During the vair, duties a secondary of the secondary of	12				
13 Dd the foundation comply with the public inspection requirements for its annual returns and exemption application?  14 The books are in care of ▶ BANK OF AMERICA  Located at ▶ 1300 AMERICAN BOULEVARD, PENNINGTON, NJ ZIP+4 ▶ 08534  15 Section 497(a)(1) in one part of the transport of the tra		•	12		l x
Website address   N/A	13		$\vdash$	Х	
14 The books are in care of ▶ RANK OF AMERICA  Located at ▶ 1300 AMERICAN BOULEVARD, PENNINGTON, NJ  15 Section 4947(a)(1) nonexempt charatable trusts thing Form 990-9F in lieu of Form 1041 - check here  16 At any time during cliendary 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?  16 At any time during cliendary 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?  16 X  See the instructions for exceptions and filing requirements for FinCEN Form 114 If "Yes," enter the name of the foreign country ▶  Part VIIB 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.  1a During the year, did the foundation (either directly or indirectly)  10 Engage in the sale or exchange, or lessing of property with a disqualified person? Yes X No  (2) Borrow money from, lend money to, or otherwise extend credit to for accept it from a disqualified person or yes.  (3) Furnish goods, services, or facilities to for accept them from a disqualified person? Yes X No  (4) Pey compensation to, or pay or reimburse the exponses of, a disqualified person? Yes X No  (5) Transfer any income or assest to a disqualified person or make any of either available for the benefit or use of a disqualified person? Yes X No  (6) Agree to pay money or property to a government official? (Exception, Check "No" if the foundation agreed to make a grant to or to employ the official for a pend after termination of government service, afterminating within 90 days), Yes X No  (6) Agree to pay money or property to a government official? (Exception, Check "No" if the foundation of section 4941(a)(a) or 4942(b)(a) or	,,,				·
15 Section 4947(a)(1) nonexempt charizable trusts filing Form 99.0°F in leu of Form 1041 · check here	14		-683	4	
15 Section 4947/al/11) nonexempt charitable trusts filing form 990-Ft in lieu of Form 1041 check here					
and enter the amount of tax-exempt interest received or accrued during the year.  16 At any time during calendar year 2018, did the foundation have an interest in or a signature or other authornty over a bank, securities, or other financial account in a foreign country?  See the instructions for exceptions and filing requirements for FinCEN Form 114 if "Yes," enter the name of the foreign country ▶  Part VII.8 Statements Regarding Activities for Which Form 4720 May Be Required  File Form 4720 if any time is checked in the "Yes" column, unless an exception applies.  1a During the year, did the foundation (either directly or indirectly)  11 Engage in the sale or exchange, or leasing of properly with a disqualified person?	15			_	
Ves   No over a bank, securities, or other financial account in a foreign country?   Ves   No over a bank, securities, or other financial account in a foreign country?   Ves   V	15				ш
over a bank, securities, or other financial account in a foreign country?  See the instructions for exceptions and filing requirements for FinCEN Form 114 if "Yes," enter the name of the foreign country ▶  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.  1a During the year, did the foundation (letter directly or indirectly)  (1) Engage in the sale or exchange, or lessing of property with a disqualified person?	16			Yes	No
See the instructions for exceptions and filing requirements for FinCEN Form 114 If "Yes," enter the name of the foreign country    Part VILB3   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.  1a During the year, did the foundation (either directly or indirectly)  1) Engage in the sale or exchange, or leasing of property with a disqualified person?   Yes   No (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?   Yes   No (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?   Yes   No (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?   Yes   No (5) Transfer any income or assets to a disqualified person?   Yes   No (6) Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a penid after termination of government service, if terminating within 90 days   Yes   No (5) If any answer is "Yes" to 1a(1)-(6), did any of the acts fail videal for a penid after termination of government service, if terminating within 90 days   Yes   No (5) If any answer is "Yes" to 1a(1)-(6), did any of the acts fail videal for a penid after termination of government service, if terminating within 90 days   Yes   No (7) and the foundation engage in a prior year in any of the acts discribed in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2018?   Yes   No (7) and the foundation income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(g)(g) of years undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2018?   Yes   No (7) and the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?   Yes   Xinch	10				
Port 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.  1a During the year, did the foundation (either directly or indirectly)  (1) Engage in the sale or exhange, or leasing of property with a disqualified person?		· · · · · · · · · · · · · · · · · · ·	PTO STATISTIC		7
File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.  1a During the year, did the foundation (either directly or indirectly)  (1) Engage in the sale or exchange, or leasing of property with a disqualified person?					
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1a During the year, did the foundation (either directly or indirectly)  (1) Engage in the sale or exchange, or leasing of property with a disqualified person?			67 13	Yes	No
(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	12	•			<b>4.34</b>
(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?	10				
disqualified person?					
(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?					
(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?					
(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)?  (6) Agree to pay money or property to a government official? (Exception. 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).  b If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53 4941(d)-3 or in a current notice regarding disaster assistance? See instructions.  Organizations relying on a current notice regarding disaster assistance, check here  c 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?  2 Taxes on failure to distribute income (section 4942()(does not apply for years the foundation was a private operating foundation defined in section 4942()(3) or 4942()(5))  a 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?  If "Yes," list the years  b Are there any years listed in 2a for which the foundation is not 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 all years listed, answer "No" and attach statement -see instructions)  c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here  A Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?  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 acq					
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operating foundation defined in section 4942(j)(3) or 4942(j)(5))  a 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?	2	, , , , , , , , , , , , , , , , , , , ,	2.34	<b>30-20</b>	Mar.
a 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?	•				
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3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?	c		X ( )		
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b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its	As		<u> </u>		
			17.18	<b>1</b>	
charitable bribose that had not been removed from leobardy before the first day of the fax year bedilling in 2010, 1 and 1 - 1 - 1 - 1		charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2018?	4b		X

	t VII-B Statements Regarding Activities 1	or Which Form 4	720 May Be Reg	uired (continued)	
5a	During the year, did the foundation pay or incur any amo		<u> </u>		Yes No
-	(1) Carry on propaganda, or otherwise attempt to influe		n 4945(e))?	Yes X No	
	(2) Influence the outcome of any specific public ele				
	directly or indirectly, any voter registration drive?.				
	(3) Provide a grant to an individual for travel, study, or o				
	(4) Provide a grant to an organization other than a		•		
	section 4945(d)(4)(A)? See instructions	-		Yes X No	
	(5) Provide for any purpose other than religious, c			nl	
	purposes, or for the prevention of cruelty to children			1 1 1 771	
ь	If any answer is "Yes" to 5a(1)-(5), did any of the	transactions fail to	qualify under the e	xceptions described in	
	Regulations section 53 4945 or in a current notice regard				5b
	Organizations relying on a current notice regarding disas	ster assistance, check	here		
-c	"If the answer is "Yes" to question 5a(4); does the	foundation- claim re:	xemption -from -the t	ax	
	because it maintained expenditure responsibility for the	grant?		. Yes No	
	If "Yes," attach the statement required by Regulations se	ection 53 4945-5(d)			
6a	Did the foundation, during the year, receive any fu	nds, directly or indire	ectly, to pay premiui		
	on a personal benefit contract?			. Yes X No	
þ	Did the foundation, during the year, pay premiums, direct	ctly or indirectly, on a	personal benefit contra	act?	6b X
	If "Yes" to 6b, file Form 8870			<u> </u>	
7a	At any time during the tax year, was the foundation a pa				
b	If "Yes," did the foundation receive any proceeds or have			ion'	7b
8	Is the foundation subject to the section 4960 tax on pay			. Yes X No	
Dox	remuneration or excess parachute payment(s) during the tyll Information About Officers, Director	rs Trustees Fou	ndation Manage	s. Highly Paid Emp	lovees.
	and Contractors	·····			
1	List all officers, directors, trustees, and foundation	(b) Title, and average	(c) Compensation	(d) Contributions to	(e) Expense account,
	(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	employee benefit plans and deferred compensation	other allowances
	NCE HALL GUFFEY	DIRECTOR/PRESIDE			
62 BE	ACH STREET PHA, NEW YORK, NY 10013		-0-	-0-	-0-
	MACKILLIGIN GUFFEY	DIRECTOR/PRESIDE			
62 BE				_	
	ACH STREET PHA, NEW YORK, NY 10013		-0-	-0-	-0-
HAMIS	SH BURT	DIRECTOR			
HAMIS		DIRECTOR	-0-	-0-	-0-
HAMIS	SH BURT	DIRECTOR			
HAMIS 860 W	SH BURT WASHINGTON ST, 6TH FL, NEW YORK, NY 10014		-0-	-0-	-0-
HAMIS 860 W	SH BURT		-0-	-0-	-0-
HAMIS 860 W	SH BURT WASHINGTON ST, 6TH FL, NEW YORK, NY 10014 Compensation, of five highest-paid employees "NONE"	(other than thos	-0- e included on lin	e 1 - see instructio	-0-
HAMIS 860 W	SH BURT WASHINGTON ST, 6TH FL, NEW YORK, NY 10014  Compensation, of five highest-paid employees	(other than thos	-0-	-0-  (d) Contributions to employee benefit plans and deferred	-0- ns). If none, enter
HAMIS 860 W	SH BURT WASHINGTON ST, 6TH FL, NEW YORK, NY 10014 Compensation, of five highest-paid employees "NONE"	(other than thos	-0- e included on lin	-0-  e 1 - see instructio  (d) Contributions to employee benefit	ns). If none, enter
HAMIS 860 W	Compensation of five highest-paid employees "NONE"  Name and address of each employee paid more than \$50,000	(other than thos	e included on lin	- 0 -  e 1 - see instructio  (d) Contributions to employee benefit plans and deferred compensation	ns). If none, enter  (e) Expense account, other allowances
HAMIS 860 W	Compensation of five highest-paid employees "NONE"  Name and address of each employee paid more than \$50,000	(other than thos	-0- e included on lin	-0-  (d) Contributions to employee benefit plans and deferred	ns). If none, enter
HAMIS 860 W	Compensation of five highest-paid employees "NONE"  Name and address of each employee paid more than \$50,000	(other than thos	e included on lin	- 0 -  e 1 - see instructio  (d) Contributions to employee benefit plans and deferred compensation	ns). If none, enter  (e) Expense account, other allowances
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HAMIS 860 W	Compensation of five highest-paid employees "NONE"  Name and address of each employee paid more than \$50,000	(other than thos	e included on lin	- 0 -  e 1 - see instructio  (d) Contributions to employee benefit plans and deferred compensation	ns). If none, enter  (e) Expense account, other allowances
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HAMIS 860 W	Compensation of five highest-paid employees "NONE"  Name and address of each employee paid more than \$50,000	(other than thos	e included on lin	- 0 -  e 1 - see instructio  (d) Contributions to employee benefit plans and deferred compensation	-()-  ns). If none, enter  (e) Expense account, other allowances  NONE
HAMIS 860 V	Compensation of five highest-paid employees "NONE"  Name and address of each employee paid more than \$50,000	(other than thos  (b) Title, and average hours per week devoted to position	- 0 -  e included on lin  (c) Compensation  NONE	- 0 -  e 1 - see instructio  (d) Contributions to employee benefit plans and deferred compensation	ns). If none, enter  (e) Expense account, other allowances

Form 990-PF (2018)

Par	Minimum Investment Return (All domestic foundations must complete this part. Forei see instructions.)	gn found	ations,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		<del></del>
9	Average monthly fair market value of securities	1a	12,678,900.
h	Average of monthly cash balances	1b	128,501.
	Fair market value of all other assets (see instructions)	1c	NONE
	Total (add lines 1a, b, and c)	1d	12,807,401.
e	Reduction claimed for blockage or other factors reported on lines 1a and		<u> </u>
•	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	NONE
3	Subtract line 2 from line 1d	3	12,807,401.
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see		
•	instructions)	4	192,111.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	12,615,290.
6	Minimum investment return. Enter 5% of line 5	6	630,765.
	<b>TXI</b> Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating found and certain foreign organizations, check here ▶ and do not complete this part)	dations	
1	Minimum investment return from Part X, line 6	1	630,765.
2a	Tax on investment income for 2018 from Part VI, line 5 2a 18,798.		
ь			
c	Add lines 2a and 2b	2c	18,798.
3	Distributable amount before adjustments Subtract line 2c from line 1	3	611,967.
4	Recoveries of amounts treated as qualifying distributions	4	NONE
5	Add lines 3 and 4	5	611,967.
6	Deduction from distributable amount (see instructions)	6	NONE
7	Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1	7	611,967.
Par	t XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes.		
а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	613, <u>218.</u>
b	Program-related investments - total from Part IX-B	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
	purposes	2	NONE
3	Amounts set aside for specific charitable projects that satisfy the:		
а	Suitability test (prior IRS approval required)	3a	NONE
b	Cash distribution test (attach the required schedule)	3b	NONE
4	Qualifying distributions Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	613,218.
5	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	5	N/A
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	613,218.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when ca qualifies for the section 4940(e) reduction of tax in those years	lculating	whether the foundation

Form **990-PF** (2018)

lıı <b>2</b> U	Undistributed Income (see instributable amount for 2018 from Part XI,	(a)	. (b)	(-)	
lıı <b>2</b> U		Corpus	Years prior to 2017	(c) 2017	(d) 2018
<b>2</b> U	ine 7				611,967.
аг	Undistributed income, if any, as of the end of 2018  Enter amount for 2017 only.			NONE	
	· · · · · · · · · · · · · · · · · · ·		NONE		
	otal for prior years 20,20,20 Excess distributions carryover, if any, to 2018	14.14.14.14.14.14.14.14.14.14.14.14.14.1			
	1 27027				
	From 2013 NONE				
	From 2014				
	rom 2016				
	From 2017				
	Total of lines 3a through e	384,476.			
	Qualifying distributions' for 2018 from Part XII,			^	
	ine 4 ▶ \$ 613,218.			,	
	Applied to 2017, but not more than line 2a			NONE	
	Applied to undistributed income of prior years				
	Election required - see instructions)		NONE		
сΤ	Freated as distributions out of corpus (Election				
	equired - see instructions)	NONE			
d A	Applied to 2018 distributable amount				611,967.
	Remaining amount distributed out of corpus	1,251.			
(1:	Excess distributions carryover applied to 2018   If an amount appears in column (d), the same   Impount must be shown in column (a) )	NONE			NONE
6 E	Enter the net total of each column as ndicated below:	1			
, a C	Corpus Add lines 3f, 4c, and 4e Subtract line 5	385,727.			
b P	Prior years' undistributed income Subtract ine 4b from line 2b		. NONE		
	Enter the amount of prior years' undistributed				
ır b	ncome for which a notice of deficiency has been issued, or on which the section 4942(a) ax has been previously assessed		NONE		
	· · · · · · · · · · · · · · · · · · ·				
	Subtract line 6c from line 6b Taxable amount - see instructions		NONE		
e U 4	Undistributed income for 2017 Subtract line tall from line 2a Taxable amount - see instructions			NONE	
		HAFTER KALEN			
4	Undistributed income for 2018 Subtract lines and 5 from line 1. This amount must be				NONE
	distributed in 2019	THE RESERVE OF THE PROPERTY OF	THE PARTY OF THE P	AND THE PROPERTY OF THE PROPER	
	Amounts treated as distributions out of corpus				
	o satisfy requirements imposed by section				
	I70(b)(1)(F) or 4942(g)(3) (Election may be equired - see instructions)	NONE			
	Excess distributions carryover from 2013 not	1			
	applied on line 5 or line 7 (see instructions)	; NONE			
	Excess distributions carryover to 2019.				
	Subtract lines 7 and 8 from line 6a	385,727.			
	Analysis of line 9				
	Excess from 2014				
	xcess from 2015 38,876.				
	xcess from 2016 153, 624 .				
	xcess from 2017 117, 413 .				
" d E	xcess from 2018 1,251.				

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

Page **11** 

Part XV Supplementary Information ( 3 Grants and Contributions Paid Duri	continued)	roved for	Future Payment	
3 Grants and Contributions Paid Duri Recipient Name and address (home or business)	If recipient is an individual,	Foundation	Process of court of	1
Name and address (home or business)	show any relationship to any foundation manager	status of	Purpose of grant or contribution	Amount
a Paid during the year	or substantial contributor	recipient		
a Tala daring the year				
SEE STATEMENT 14				592,834.
SEE STATEMENT 14				392,634.
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	<u> </u>			
Total	· · · · · · · · · · · · · · · · · · ·	<u> </u>	<u></u>	592,834.
b Approved for future payment				
		ł	}	
		ļ		
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	}			
		1	}	1
	1	}	1	
		L	<b>.</b>	
Total	<u></u>		▶ 3b	l

r gross amounts unless otherwise indicated	Unrela	ated business income	Excluded by	section 512, 513, or 514	(e)
Program service revenue	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income (See instructions)
a					
b					
<u> </u>					<u> </u>
d			ļ. <u> —</u>		
e					
·					
g Fees and contracts from government agencies					. <u> </u>
Membership dues and assessments			<b>_</b>		
nterest on savings and temporary cash investments •			<del></del>		<u> </u>
Dividends and interest from securities			14	252,222.	
Net rental income or (loss) from real estate			<del> </del>		
a Debt-financed property					
Not debt-financed property					
Net rental income or (loss) from personal property			<del> </del>		
Other investment income			10	500 401	<del> </del>
Gain or (loss) from sales of assets other than inventory			18	520,481.	<del></del>
Net income or (loss) from special events · · ·	ļ <del>-</del>		<del> </del>		<del></del>
Gross profit or (loss) from sales of inventory		<u> </u>	<del></del>		
Other revenue a			+,	2 050	
FEDERAL TAX REFUND	<u> </u>		1	3,058.	
		<u></u>		<del>-</del>	
i	Ĺ				
·	*		<u> </u>	775 761	
Subtotal Add columns (b), (d), and (e)				775,761.	775 761
Subtotal Add columns (b), (d), and (e)  Fotal Add line 12, columns (b), (d), and (e)					775,761
Subtotal Add columns (b), (d), and (e)	ilations)	ccomplishment of E	xempt Pur	13	
Subtotal Add columns (b), (d), and (e)  Fotal Add line 12, columns (b), (d), and (e)  worksheet in line 13 instructions to verify calculated the state of the st	ilations) to the A	ccomplishment of E	xempt Pur	Doses  Poses  Poses  Poses	ted importantly to
Subtotal Add columns (b), (d), and (e)  Fotal Add line 12, columns (b), (d), and (e)  worksheet in line 13 instructions to verify calcutationship of Activities  Relationship of Activities  e No. Explain below how each activity	ilations) to the A	ccomplishment of E	xempt Pur	Doses  Poses  Poses  Poses	ted importantly to
Subtotal Add columns (b), (d), and (e)  Fotal Add line 12, columns (b), (d), and (e)  worksheet in line 13 instructions to verify calculated the No.  Explain below how each activities	ilations) to the A	ccomplishment of E	xempt Pur	Doses  Poses  Poses  Poses	ted importantly to
Subtotal Add columns (b), (d), and (e)  Fotal Add line 12, columns (b), (d), and (e)  worksheet in line 13 instructions to verify calculated the No.  Explain below how each activities	ilations) to the A	ccomplishment of E	xempt Pur	Doses  Poses  Poses  Poses	ted importantly to
Subtotal Add columns (b), (d), and (e)  Fotal Add line 12, columns (b), (d), and (e)  worksheet in line 13 instructions to verify calculated the No.  Explain below how each activities	ilations) to the A	ccomplishment of E	Exempt Puring in column (e.g., by providing	Doses  Poses  Poses  Poses	ted importantly to
Subtotal Add columns (b), (d), and (e)  Fotal Add line 12, columns (b), (d), and (e)  worksheet in line 13 instructions to verify calculated the No.  Explain below how each activities	ilations) to the A	ccomplishment of En income is reported to purposes (other than	Exempt Puring in column (e.g., by providing	Doses  Poses  Poses  Poses	ted importantly to
Subtotal Add columns (b), (d), and (e)  Fotal Add line 12, columns (b), (d), and (e)  worksheet in line 13 instructions to verify calculated the No.  Explain below how each activities	ilations) to the A	ccomplishment of En income is reported to purposes (other than	Exempt Puring in column (e.g., by providing	Doses  Poses  Poses  Poses	ted importantly to
Subtotal Add columns (b), (d), and (e)  Fotal Add line 12, columns (b), (d), and (e)  worksheet in line 13 instructions to verify calculated the No.  Explain below how each activities	ilations) to the A	ccomplishment of En income is reported to purposes (other than	Exempt Puring in column (e.g., by providing	Doses  Poses  Poses  Poses	ted importantly to
Subtotal Add columns (b), (d), and (e)  Fotal Add line 12, columns (b), (d), and (e)  worksheet in line 13 instructions to verify calculated the No.  Explain below how each activities	ilations) to the A	ccomplishment of En income is reported to purposes (other than	Exempt Puring in column (e.g., by providing	Doses  Poses  Poses  Poses	ted importantly to
Subtotal Add columns (b), (d), and (e)  Fotal Add line 12, columns (b), (d), and (e)  worksheet in line 13 instructions to verify calculated the No.  Explain below how each activities	ilations) to the A	ccomplishment of En income is reported to purposes (other than	Exempt Puring in column (e.g., by providing	Doses  Poses  Poses  Poses	ted importantly to
Subtotal Add columns (b), (d), and (e)  Fotal Add line 12, columns (b), (d), and (e)  worksheet in line 13 instructions to verify calculated the No.  Explain below how each activities	ilations) to the A	ccomplishment of En income is reported to purposes (other than	Exempt Puring in column (e.g., by providing	Doses  Poses  Poses  Poses	ted importantly to
Subtotal Add columns (b), (d), and (e)  Fotal Add line 12, columns (b), (d), and (e)  worksheet in line 13 instructions to verify calculated the No.  Explain below how each activities	ilations) to the A	ccomplishment of En income is reported to purposes (other than	in column (e	Doses  Poses  Poses  Poses	ted importantly to t
Subtotal Add columns (b), (d), and (e)  Fotal Add line 12, columns (b), (d), and (e)  worksheet in line 13 instructions to verify calculated the No.  Explain below how each activities	ilations) to the A	ccomplishment of En income is reported to purposes (other than	in column (e	Doses  Poses  Poses  Poses	ted importantly to t
Subtotal Add columns (b), (d), and (e)  Fotal Add line 12, columns (b), (d), and (e)  worksheet in line 13 instructions to verify calculated the No.  Explain below how each activities	ilations) to the A	ccomplishment of En income is reported to purposes (other than	in column (e	Doses  Poses  Poses  Poses	ted importantly to t

Form 99	0 PF (21	18)				46-4345106			Page 13
Part 2	(VII	Information R Exempt Orga	legarding Tra	ansfers to and Tra	nsactions	and Relationship	s With Nonc	haritab	le
ır o a T	n sect rganiz ransfe	organization direct ion 501(c) (other ations? rs from the reportin	ly or indirectly than section g foundation to	501(c)(3) organization a noncharitable exem	ons) or in pt organization		g to political		es No
									X X
	•	er assets					• • • • • • •	1a(2)	<del>- -^-</del>
			charitable exem	nnt organization		<b></b> .		15(1)	Х
									X
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						ition If the foundation			
						alue of the goods, oth			
(a) Line	no	(b) Amount involved	(c) Name of r	oncharitable exempt organiz	zation (	d) Description of transfers, tr	insactions, and shar	ing arrange	ments
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22 15		foundation directly	or undergothe of	filinated with or relate	d 10 000 01	more tax-exempt org			
				ction 501(c)(3)) or in s			anizations	Yes	X No
		complete the follow							
		(a) Name of organization		(b) Type of orga	mization	(c) De	scription of relations	ship	
				<del></del>	<del></del>				
		····	<del></del>				<del></del>		
					<del></del>	<del></del>			
		<del></del>		<del></del>					
				ned this return, including acco expayer) is based on all informati		es and statements, and to the	best of my knowledg	e and belie	l it is truo,
Sign	b				h.		May the IRS	discuss t	his return
Here	<u> </u>	ature of officer or trustee	<del>. /</del>	09/26/201		RESIDENT	with the pro	parer shov	n polow)
		WRENCE GUFFEY	,~	Date	Title		Sea instruction	5 <u>X</u> Y	es No
n	T 11/1	Print/Type preparer's na		Preparer's signature		Date	Check if F	TIN	
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		PR	OVIDENCE,	RI	02901	-18U2   Phor	ne no 888-86		F (2018)
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## Schedule B (Form 990, 990-EZ, or 990-PF)

or 990-PF)
Department of the Treasury
Internal Revenue Service

## **Schedule of Contributors**

► Attach to Form 990, Form 990-EZ, or Form 990-PF.

Go to www.irs gov/Form990for the latest information.

OMB No 1545-0047

2018

**Employer identification number** Name of the organization 46-4345106 GUFFEY FAMILY FOUNDATION Organization type (check one): Section: Filers of: 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** X 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 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 1/3% 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 (entering "N/A" in column (b) instead of the contributor name and address), 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 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 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF

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

Name of organization
GUFFEY FAMILY FOUNDATION

Employer identification number 46-4345106

Part I	Contributors (see instructions). Use duplicate copie	s of Part I if additional space is n	eeded.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	LAWRENCE H. GUFFEY  860 WASHINGTON ST., FL 6  NEW YORK, NY 10014	\$ 5,389,389.	Person Payroll Noncash  (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person Payroll Noncash (Complete Part II for noncash contributions)

GUFFEY FAMILY FOUNDATION

Employer identification number

46-4345106

Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from	(b)	(c) FMV (or estimate)	(d)
Part I	Description of noncash property given	(See instructions )	Date received
1_	539829 SHS ICE AND 539823 SHS NETI INTL HLD		
		\$5,389,389.	12/13/2018
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions )	(d) Date received
		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions )	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	' (d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	

FORM 990PF, PART I - DIVIDENDS AND INTEREST FROM SECURITIES

NET INVESTMENT INCOME	κο 4	223,637.
REVENUE AND EXPENSES PER BOOKS	3,849 29,112 10,126 74,065 43 15,573 2,618 461 7,550 08,557	252,222.
DESCRIPTION	USGI REPORTED AS NONQUALIFIED DIVIDENDS FOREIGN DIVIDENDS NONDIVIDEND DISTRIBUTIONS DOMESTIC DIVIDENDS OTHER INTEREST EXEMPT INTEREST NOT SUBJECT TO AMT - STA EXEMPT INTEREST SUBJECT TO AMT - TER EXEMPT INTEREST SUBJECT TO AMT - STATES OUGUALIFIED FOREIGN DIVIDENDS NONQUALIFIED FOREIGN DIVIDENDS	TOTAL

7

STATEMENT

FORM 990PF, PART I - OTHER INCOME ====================================	DESCRIPTION	FEDERAL TAX REFUND FROM PARTNERSHIP/S-CORP

NET INVESTMENT INCOME	303,42	303,427
AND EXPENSES PER BOOKS	3,058	3,058.

TOTALS

REVENUE

FORM 990PF, PART I - ACCOUNTING FEES

	          		-	
	KEVENOE AND FXPFNSFS	NET	ADJUSTED NET	CHARITABLE
	PER BOOKS	INCOME	INCOME	PURPOSES
		i ! !	- <del></del>	† t t t t t t t t t t t t t t t t t t t
TAX PREPARATION FEES	2,500.		-	2,500.
TOTALS	3,500.	NONE	NONE	 
		H H H H H H H H H H H H H H H H H H H		
			-	

CHARITABLE PURPOSES	1 1 1 1 1	17,884.	17,884.	
NET INVESTMENT INCOME	1 1 1	26,826.		H 11 11 11 11 11 11 11 11 11 11 11 11 11
REVENUE AND EXPENSES PER BOOKS	!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!	44,709.		11 11 11 11 11 11 11 11 11
DESCRIPTION	; ; ; ; ; ; ; ; ; ; ; ; ;	INVESTMENT MANAGEMENT FEES	TOTALS	

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	NET	INVESTMENT	INCOME	1 1 1 1 1 1 1 1	2,560.	749.		3,309.	## ## ## ## ## ## ## ## ## ## ## ## ##
REVENUE	AND	EXPENSES	PER BOOKS	1 1 1 1 1 1 1 1	2,560.	749.	1 1 1 1 1 1 1 1 1 1	3,309.	H H H H H H H H H H H H H H H H H H H
			DESCRIPTION		FOREIGN TAXES	FOREIGN TAXES ON NONQUALIFIED		TOTALS	

FORM 990PF, PART I - OTHER EXPENSES 

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NET INVESTMENT INCOME	1 1 1 1 1	77,526
REVENUE AND EXPENSES PER BOOKS		
DESCRIPTION		FROM PARTNERSHIP/S-CORP

TOTALS

77,526.

77,526.

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GUFFEY	FORM

46-4345106

FORM 990PF, PART II - CORPORATE STOCK

DESCRIPTION

R3331D106 NET1 INTL HLDG AS R0028G103 ICE GROUP AS

TOTALS

ENDING FMV	1 1	312,881. 3,117,046.	3,429,927.	
ENDING POOK VALUE		3,000,250.	3,000,250.	

7

FORM 990PF, PART II - OTHER INVESTMENTS

IPTION	COST/ FMV CORF	BEGINNING BOOK VALUE	ENDING BOOK VALUE	ENDING FMV 
8950920	ر	14 99	1 9 0	7 2 7
58620103 DOUBLELINE TOTAL RE	ט ני	91,55	74.23	70,72
21908844 VANGUARD DIVIDEND	O	54,92	28.74	18,39
922042858 VANGUARD INTL EQTY I	Ü	198,213.	190,366.	198,615.
7065Q699 NUVEEN SHORT DURA	บ	17,05	40,53	67,21
6881N202 RIVERNORTH DOUBLE L	บ	96,87	01,90	87,77
2008F606 FIRST EA	ບ	37,74	63,42	01,85
0254T759 UAM FPA	U	88,41	04,23	39,49
67829884 NATIXIS GATEWAY	บ	06,63	24,68	25,46
2290876	บ	62,09	96,03	74,52
6166Y404 TORTOISE MLP &	บ	15,46	12,41	55,52
5273E822 MFS INTE	ບ	88,72	79,11	34,93
43916167 LORD ABBETT FLOATIN	บ	86,91	23,03	06,83
77125107 MATTHEWS	ບ	43,12	41,19	60,83
21943858 VANGUARD EUROPE PAC	บ	85,46	89,71	99,15
43916464 LORD ABBETT	ט	97,47	02,83	92,28
0203H859 AQR	ט	83,40	94,46	42,89
0203H792	บ	09'90		
LANCE	ບ			
0	ט	2,500,000.		
$\alpha$	บ		2,500,000.	
TELAMON CAPI	ບ		00'00	00,
6AQO40000 ARCADIA BMC INVESTOR			04,56	04,5
CE	 8.14TOT	11 675 602	1 6	100 001
		700'6/0'77	41,69U,39	12,133,88
	il			

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FORM 990PF, PART III - OTHE	R DECREASES IN NET W	WORTH OR FUND BALANCES
DESCRIPTION		AMOUNT 
TYE INCOME ADJUSTMENT TYE SALES ADJUSTMENT MARKET TO COST ADJUSTMENT		597. 2,943. 2,389,139.
	TOTAL	2,392,679. === <b>====</b> ======

GUFFEY FAMILY FOUNDATION 46-4345106 FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID RECIPIENT NAME: DANA FARBER CANCER INSTITUTE ADDRESS: 10 BROOKLINE PLACE, WEST 6TH FL BROOKLINE, MA 02445 RELATIONSHIP: N/A PURPOSE OF GRANT: SUPPORT LEGERE MATCHING GIFT CAMPAIGN FOUNDATION STATUS OF RECIPIENT: PC 100,000. AMOUNT OF GRANT PAID ..... RECIPIENT NAME: South Fork Natural History Society ADDRESS: PO BOX 455 Bridgehampton, NY 11932-0455 **RELATIONSHIP:** N/APURPOSE OF GRANT: UNRESTRICTED GENERAL SUPPORT FOUNDATION STATUS OF RECIPIENT: PC 500. AMOUNT OF GRANT PAID ..... RECIPIENT NAME: Childrens Museum Of The East End ADDRESS: PO BOX 316 Bridgehampton, NY 11932-0316 RELATIONSHIP: PURPOSE OF GRANT: UNRESTRICTED GENERAL SUPPORT FOUNDATION STATUS OF RECIPIENT:

AMOUNT OF GRANT PAID .....

10,000.

RECIPIENT NAME: BRIGEHAMPTON FIRE DEPARTMENT ADDRESS: P.O. BOX 1280 BRIDGEHAMPTON, NY 11932 RELATIONSHIP: N/A PURPOSE OF GRANT: UNRESTRICTED GENERAL SUPPORT FOUNDATION STATUS OF RECIPIENT:

AMOUNT OF GRANT PAID ..... 500.

RECIPIENT NAME: FRESH AIR FUND ADDRESS: 633 THIRD AVENUE NEW YORK, NY 10017 RELATIONSHIP:

PC

N/A PURPOSE OF GRANT: SUPPORT 2018 FALL BENEFIT FOUNDATION STATUS OF RECIPIENT: PC

1,000. AMOUNT OF GRANT PAID .....

RECIPIENT NAME: SOCIETY OF MSK ADDRESS: 1233 YORK AVENUE, SUITE B101 NEW YORK, NY 10065 RELATIONSHIP: N/A PURPOSE OF GRANT:

SUPPORT PEDIATRIC PRECISION TRANSPLANT

FOUNDATION STATUS OF RECIPIENT:

AMOUNT OF GRANT PAID ..... 10,000. GUFFEY FAMILY FOUNDATION 46-4345106 FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID

RECIPIENT NAME: CHILDREN'S MUSEUM OF MANHATTAN ADDRESS: 212 W. 83RD ST NEW YORK, NY 10024 RELATIONSHIP: N/A PURPOSE OF GRANT: SUPPORT 2018 ANNUAL GALA FOUNDATION STATUS OF RECIPIENT: PC AMOUNT OF GRANT PAID ..... 10,000. RECIPIENT NAME: Paris Review Foundation Inc. ADDRESS: 62 WHITE STREET, 4TH FLOOR New York, NY 10001-5537 RELATIONSHIP: N/A PURPOSE OF GRANT: UNRESTRICTED GENERAL SUPPORT FOUNDATION STATUS OF RECIPIENT: ЪС AMOUNT OF GRANT PAID ..... 92,500. RECIPIENT NAME: AMERICAN MUSUEM OF NATURAL HISTORY ADDRESS: 79TH ST & CENTRAL PARK W NEW YORK, NY 10024 **RELATIONSHIP:** N/A

PURPOSE OF GRANT:

SUPPORT EARLY CHILDHOOD EDUCATION FUND

FOUNDATION STATUS OF RECIPIENT:

AMOUNT OF GRANT PAID ..... 10,000.

GUFFEY FAMILY FOUNDATION 46-4345106 FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID \_\_\_\_\_\_ RECIPIENT NAME: WINDSOR CHARITABLE FOUNDATION ADDRESS: 3125 WINDSOR BLVD VERO BEACH, FL 32963 RELATIONSHIP: N/A PURPOSE OF GRANT: UNRESTRICTED GENERAL SUPPORT FOUNDATION STATUS OF RECIPIENT: PC AMOUNT OF GRANT PAID ..... 10,000. RECIPIENT NAME: Tsinghua Education Foundation N A Inc ADDRESS: 2200 SAND HILL RD STE 160 Menlo Park, CA 94025-6936 RELATIONSHIP: N/A PURPOSE OF GRANT: UNRESTRICTED GENERAL SUPPORT FOUNDATION STATUS OF RECIPIENT: PC RECIPIENT NAME: FRIEDREICH'S ATAXIA RESEARCH ALLIANCE ADDRESS: 533 W. UWCHLAN AVENUE DOWNINGTON, PA 19335 RELATIONSHIP: N/A PURPOSE OF GRANT:

AMOUNT OF GRANT PAID .....

SUPPORT COREY SPIVEY 2018 SOCAL RIDE

FOUNDATION STATUS OF RECIPIENT:

5,000.

GUFFEY FAMILY FOUNDATION 46-4345106 FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID

RECIPIENT NAME: RICE UNIVERSITY

ADDRESS:

N note

P.O. BOX 1892

HOUSTON, TX 77251-1892

**RELATIONSHIP:** 

N/A

PURPOSE OF GRANT:

SUPPORT RICE ANNUAL FUND

FOUNDATION STATUS OF RECIPIENT:

PC

TOTAL GRANTS PAID:

592,834.