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Form 990-PF

Department of the Treasury
Internal Revenue Service

Return of Private Foundation
or Section 4947(a)(1) Trust Treated as Private Foundation

Do not enter social security numbers on this form as it may be made public.

Go to www.irs.gov/Form990PF for instructions and the latest information.

OMB No 1545-0052

2018

Open to Public Inspection

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

Name of foundation
ISRAEL & MOLLIE MYERS FOUNDATION

A Employer identification number
52-1314430

Number and street (or P O box number if mail is not delivered to street address)
3635 OLD COURT ROAD NO 207

Room/suite

B Telephone number (see instructions)
(410) 653-0556

City or town, state or province, country, and ZIP or foreign postal code
BALTIMORE, MD 21208

C If exemption application is pending, check here

G Check all that apply

Initial return

Initial return of a former public charity

Final return

Amended return

Address change

Name change

D 1. Foreign organizations, check here

2 Foreign organizations meeting the 85% test, check here and attach computation

H Check type of organization

Section 501(c)(3) exempt private foundation

Section 4947(a)(1) nonexempt charitable trust

Other taxable private foundation

E If private foundation status was terminated under section 507(b)(1)(A), check here

I Fair market value of all assets at end of year (from Part II, col (c), line 16) \$ 8,989,294

J Accounting method

Cash

Accrual

Other (specify)

(Part I, column (d) must be on cash basis)

F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here

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)	257,950		
	2 Check If the foundation is not required to attach Sch B			
	3 Interest on savings and temporary cash investments			
	4 Dividends and interest from securities	122,408	122,408	
	5a Gross rents			
	b Net rental income or (loss)			
	6a Net gain or (loss) from sale of assets not on line 10	875,782		
	b Gross sales price for all assets on line 6a			
	7 Capital gain net income (from Part IV, line 2)		875,782	
	8 Net short-term capital gain			
	9 Income modifications			
	10a Gross sales less returns and allowances			
b Less Cost of goods sold				
c Gross profit or (loss) (attach schedule)				
11 Other income (attach schedule)	-62,602	-54,621		
12 Total. Add lines 1 through 11	1,193,538	943,569		
Operating and Administrative Expenses	13 Compensation of officers, directors, trustees, etc	25,000	0	25,000
	14 Other employee salaries and wages	10,797	10,797	0
	15 Pension plans, employee benefits	761	761	0
	16a Legal fees (attach schedule)	2,014	2,014	0
	b Accounting fees (attach schedule)	5,085	5,085	0
	c Other professional fees (attach schedule)			
	17 Interest	32,981	32,981	0
	18 Taxes (attach schedule) (see instructions)	2,704	2,607	0
	19 Depreciation (attach schedule) and depletion	157	157	
	20 Occupancy	868	868	0
	21 Travel, conferences, and meetings	106	106	0
	22 Printing and publications			
	23 Other expenses (attach schedule)	36,996	36,996	0
	24 Total operating and administrative expenses. Add lines 13 through 23	117,469	92,372	25,000
	25 Contributions, gifts, grants paid	615,460		615,460
	26 Total expenses and disbursements. Add lines 24 and 25	732,929	92,372	640,460
	27 Subtract line 26 from line 12			
	a Excess of revenue over expenses and disbursements	460,609		
	b Net investment income (if negative, enter -0-)		851,197	
c Adjusted net income (if negative, enter -0-)				

For Paperwork Reduction Act Notice, see instructions.

Cat No 11289X

Form 990-PF (2018)

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	End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value			
Assets	1	Cash—non-interest-bearing					
	2	Savings and temporary cash investments					
	3	Accounts receivable ▶ <u>210,000</u>					
		Less allowance for doubtful accounts ▶ _____	409,000	210,000	210,000		
	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)		14,835	14,835		
	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					
	10a	Investments—U S and state government obligations (attach schedule)					
	b	Investments—corporate stock (attach schedule)					
	c	Investments—corporate bonds (attach schedule)					
	11	Investments—land, buildings, and equipment basis ▶ _____					
	Less accumulated depreciation (attach schedule) ▶ _____						
12	Investments—mortgage loans						
13	Investments—other (attach schedule)	6,902,109	6,678,206	8,762,500			
14	Land, buildings, and equipment basis ▶ _____						
	Less accumulated depreciation (attach schedule) ▶ _____						
15	Other assets (describe ▶ _____)	0	1,959	1,959			
16	Total assets (to be completed by all filers—see the instructions. Also, see page 1, item I)	7,311,109	6,905,000	8,989,294			
Liabilities	17	Accounts payable and accrued expenses	474,249	7,875			
	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 ▶ _____)	389,144	76,000			
	23	Total liabilities (add lines 17 through 22)	863,393	83,875			
Net Assets or Fund Balances	Foundations that follow SFAS 117, check here ▶ <input type="checkbox"/> and complete lines 24 through 26 and lines 30 and 31.						
	24	Unrestricted					
	25	Temporarily restricted					
	26	Permanently restricted					
	Foundations that do not follow SFAS 117, check here ▶ <input checked="" type="checkbox"/> and complete lines 27 through 31.						
	27	Capital stock, trust principal, or current funds	0	0			
	28	Paid-in or capital surplus, or land, bldg, and equipment fund	0	0			
	29	Retained earnings, accumulated income, endowment, or other funds	6,447,716	6,821,125			
	30	Total net assets or fund balances (see instructions)	6,447,716	6,821,125			
31	Total liabilities and net assets/fund balances (see instructions) .	7,311,109	6,905,000				

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	6,447,716
2	Enter amount from Part I, line 27a	2	460,609
3	Other increases not included in line 2 (itemize) ▶ _____	3	317
4	Add lines 1, 2, and 3	4	6,908,642
5	Decreases not included in line 2 (itemize) ▶ _____	5	87,517
6	Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30 .	6	6,821,125

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)
1 a PARTNERSHIP CAPITAL GAINS	P	2000-01-01	2018-12-31
b UBIT CAPITAL GAIN	P	2000-01-01	2018-12-31
c HIGHFIELDS EXCESS DISTRIBUTION	P	2000-01-01	2018-12-31
d UBIT CAPITAL LOSS	P	2018-01-01	2018-12-31
e ELLIOT DISTRIBUTION	P	2000-01-01	2018-12-31

(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)
a 193,611			193,611
b 2,832			2,832
c 606,586			606,586
d		16,423	-16,423
e 89,176			89,176

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	
a			193,611
b			2,832
c			606,586
d			-16,423
e			89,176

2 Capital gain net income or (net capital loss)	{ If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 }	2	875,782
3 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	752,490	9,636,666	0 078086
2016	780,151	9,449,806	0 082557
2015	661,502	10,005,039	0 066117
2014	676,322	10,233,391	0 066090
2013	696,913	9,610,669	0 072515

2 Total of line 1, column (d)	2	0 365365
3 Average distribution ratio for the 5-year base period—divide the total on line 2 by 5 0, or by the number of years the foundation has been in existence if less than 5 years	3	0 073073
4 Enter the net value of noncharitable-use assets for 2018 from Part X, line 5	4	9,359,907
5 Multiply line 4 by line 3	5	683,956
6 Enter 1% of net investment income (1% of Part I, line 27b)	6	8,512
7 Add lines 5 and 6	7	692,468
8 Enter qualifying distributions from Part XII, line 4	8	640,460

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)

1a	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	Domestic foundations that meet the section 4940(e) requirements in Part V, check here <input type="checkbox"/> and enter 1% of Part I, line 27b	1	17,024
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-)	2	0
3	Add lines 1 and 2.	3	17,024
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4	0
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5	17,024
6	Credits/Payments		
a	2018 estimated tax payments and 2017 overpayment credited to 2018	6a	3,454
b	Exempt foreign organizations—tax withheld at source	6b	
c	Tax paid with application for extension of time to file (Form 8868)	6c	11,000
d	Backup withholding erroneously withheld	6d	0
7	Total credits and payments. Add lines 6a through 6d.	7	14,454
8	Enter any penalty for underpayment of estimated tax. Check here <input type="checkbox"/> if Form 2220 is attached	8	0
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9	2,570
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10	
11	Enter the amount of line 10 to be Credited to 2019 estimated tax <input type="checkbox"/> Refunded <input type="checkbox"/>	11	

Part VII-A Statements Regarding Activities

	Yes	No
1a 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?	1a	No
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? (see Instructions for definition). 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	1b	No
c Did the foundation file Form 1120-POL for this year?	1c	No
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year (1) On the foundation <input type="checkbox"/> \$ 0 (2) On foundation managers <input type="checkbox"/> \$ 0		
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers <input type="checkbox"/> \$ 0		
2 Has the foundation engaged in any activities that have not previously been reported to the IRS? If "Yes," attach a detailed description of the activities	2	No
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	No
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a	Yes
b If "Yes," has it filed a tax return on Form 990-T for this year?	4b	Yes
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? If "Yes," attach the statement required by General Instruction T	5	No
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	No
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	7	Yes
8a Enter the states to which the foundation reports or with which it is registered (see instructions) <input type="checkbox"/> MD		
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? If "No," attach explanation .	8b	Yes
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 taxable year beginning in 2018? See the instructions for Part XIV. If "Yes," complete Part XIV	9	No
10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses	10	No

Part VII-A Statements Regarding Activities (continued)

11	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.	11		No
12	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.	12		No
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ▶ N/A	13	Yes	
14	The books are in care of ▶ JON MYERS JUDITH LANGENTHAL Telephone no ▶ (410) 653-0556			

Located at **▶** 3635 OLD COURT ROAD BALTIMORE MD ZIP+4 **▶** 21208

15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 —check here ▶ <input type="checkbox"/>			
	and enter the amount of tax-exempt interest received or accrued during the year ▶ 15			
16	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?	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 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)		Yes	No
	(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? (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). <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
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. <input type="checkbox"/>	1b		
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?	1c		No
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(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? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	If "Yes," list the years ▶ 20____, 20____, 20____, 20____			
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).	2b		
c	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here ▶ 20____, 20____, 20____, 20____			
3a	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	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).	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		No
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?	4b		No

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

5a	During the year did the foundation pay or incur any amount to		Yes	No
(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	If any answer is "Yes" to 5a(1)–(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance? See instructions.		5b	
	Organizations relying on a current notice regarding disaster assistance check here.	<input type="checkbox"/>		
c	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		
6a	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	6b	No
b	Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? If "Yes" to 6b, file Form 8870			
7a	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	7b	
b	If yes, did the foundation receive any proceeds or have any net income attributable to the transaction?			
8	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

1 List all officers, directors, trustees, foundation managers and their compensation. See instructions				
(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
See Additional Data Table				
2 Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, enter "NONE."				
(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				
Total number of other employees paid over \$50,000.				0

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		
Total 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
1	
2	
3	
4	

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
1	
2	
All other program-related investments. See instructions.	
3	
Total. Add lines 1 through 3 ►	0

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

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes		
a	Average monthly fair market value of securities.	1a	9,451,607
b	Average of monthly cash balances.	1b	50,565
c	Fair market value of all other assets (see instructions).	1c	272
d	Total (add lines 1a, b, and c).	1d	9,502,444
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation).	1e	0
2	Acquisition indebtedness applicable to line 1 assets.	2	0
3	Subtract line 2 from line 1d.	3	9,502,444
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions).	4	142,537
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4.	5	9,359,907
6	Minimum investment return. Enter 5% of line 5.	6	467,995

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.)

1	Minimum investment return from Part X, line 6.	1	467,995
2a	Tax on investment income for 2018 from Part VI, line 5.	2a	17,024
b	Income tax for 2018 (This does not include the tax from Part VI).	2b	
c	Add lines 2a and 2b.	2c	17,024
3	Distributable amount before adjustments. Subtract line 2c from line 1.	3	450,971
4	Recoveries of amounts treated as qualifying distributions.	4	0
5	Add lines 3 and 4.	5	450,971
6	Deduction from distributable amount (see instructions).	6	0
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1.	7	450,971

Part XII Qualifying Distributions (see instructions)

1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
a	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26.	1a	640,460
b	Program-related investments—total from Part IX-B.	1b	0
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes.	2	
3	Amounts set aside for specific charitable projects that satisfy the		
a	Suitability test (prior IRS approval required).	3a	
b	Cash distribution test (attach the required schedule).	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4.	4	640,460
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	0
6	Adjusted qualifying distributions. Subtract line 5 from line 4.	6	640,460

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
1 Distributable amount for 2018 from Part XI, line 7				450,971
2 Undistributed income, if any, as of the end of 2018				
a Enter amount for 2017 only.			0	
b Total for prior years 20____, 20____, 20____		0		
3 Excess distributions carryover, if any, to 2018				
a From 2013.	229,624			
b From 2014.	176,561			
c From 2015.	165,278			
d From 2016.	312,213			
e From 2017.	270,851			
f Total of lines 3a through e.	1,154,527			
4 Qualifying distributions for 2018 from Part XII, line 4 ▶ \$ 640,460				
a Applied to 2017, but not more than line 2a			0	
b Applied to undistributed income of prior years (Election required—see instructions).		0		
c Treated as distributions out of corpus (Election required—see instructions).	0			
d Applied to 2018 distributable amount.				450,971
e Remaining amount distributed out of corpus	189,489			
5 Excess distributions carryover applied to 2018 (If an amount appears in column (d), the same amount must be shown in column (a))	0			0
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	1,344,016			
b Prior years' undistributed income Subtract line 4b from line 2b		0		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed.		0		
d Subtract line 6c from line 6b Taxable amount—see instructions		0		
e Undistributed income for 2017 Subtract line 4a from line 2a Taxable amount—see instructions			0	
f Undistributed income for 2018 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2019				0
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions).	0			
8 Excess distributions carryover from 2013 not applied on line 5 or line 7 (see instructions).	229,624			
9 Excess distributions carryover to 2019. Subtract lines 7 and 8 from line 6a	1,114,392			
10 Analysis of line 9				
a Excess from 2014.	176,561			
b Excess from 2015.	165,278			
c Excess from 2016.	312,213			
d Excess from 2017.	270,851			
e Excess from 2018.	189,489			

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

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

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

	Tax year	Prior 3 years			(e) Total
	(a) 2018	(b) 2017	(c) 2016	(d) 2015	
2a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed					
b 85% of line 2a					
c Qualifying distributions from Part XII, line 4 for each year listed					
d Amounts included in line 2c not used directly for active conduct of exempt activities					
e Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the alternative test relied upon					
a "Assets" alternative test—enter					
(1) Value of all assets					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test— enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed.					
c "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.)

1 Information Regarding Foundation Managers:

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

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

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

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

a The name, address, and telephone number or e-mail address of the person to whom applications should be addressed
ISRAEL MOLLIE MYERS FOUNDATION JONA
3635 OLD COURT ROAD SUITE 207
BALTIMORE, MD 212083906
(410) 653-0556

b The form in which applications should be submitted and information and materials they should include
NO SPECIFIC FORM

c Any submission deadlines
NO DEADLINES

d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors
NO RESTRICTIONS

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)				
a <i>Paid during the year</i> See Additional Data Table				
Total			▶ 3a	
b <i>Approved for future payment</i>				
Total			▶ 3b	

Enter gross amounts unless otherwise indicated

	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	(e) (See instructions)
1 Program service revenue					
a _____					
b _____					
c _____					
d _____					
e _____					
f _____					
g Fees and contracts from government agencies					
2 Membership dues and assessments. . . .					
3 Interest on savings and temporary cash investments					
4 Dividends and interest from securities. . . .			14	122,408	
5 Net rental income or (loss) from real estate					
a Debt-financed property.					
b Not debt-financed property.					
6 Net rental income or (loss) from personal property					
7 Other investment income.					
8 Gain or (loss) from sales of assets other than inventory	523000	-13,591	18	889,373	
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue					
a PTNSHIP K-1 INCOME (LOSS)	523000	-7,981	14	-52,188	
b OTHER K-1 INCOME	523000		14	-2,433	
c _____					
d _____					
e _____					
12 Subtotal Add columns (b), (d), and (e). .		-21,572		957,160	0
13 Total. Add line 12, columns (b), (d), and (e).					935,588

[illegible]

Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

- | | | | | |
|--|--|--------------|------------|-----------|
| 1 Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) (other than section 501(c)(3) organizations) or in section 527, relating to political organizations? | | | Yes | No |
| a Transfers from the reporting foundation to a noncharitable exempt organization of | | | | |
| (1) Cash. | | 1a(1) | | No |
| (2) Other assets. | | 1a(2) | | No |
| b Other transactions | | | | |
| (1) Sales of assets to a noncharitable exempt organization. | | 1b(1) | | No |
| (2) Purchases of assets from a noncharitable exempt organization. | | 1b(2) | | No |
| (3) Rental of facilities, equipment, or other assets. | | 1b(3) | | No |
| (4) Reimbursement arrangements. | | 1b(4) | | No |
| (5) Loans or loan guarantees. | | 1b(5) | | No |
| (6) Performance of services or membership or fundraising solicitations. | | 1b(6) | | No |
| 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.		
	***** _____ Signature of officer or trustee	2019-11-15 _____ Date	***** _____ Title

May the IRS discuss this return with the preparer shown below
 (see instr.) ☒ **Yes** ☐ **No**

Paid Preparer Use Only	Print/Type preparer's name	Preparer's Signature	Date	Check if self-employed <input type="checkbox"/>	PTIN
	DAWN D EBELING		2019-11-14		P00525980
	Firm's name ▶ GROSS MENDELSON & ASSOCIATES PA				Firm's EIN ▶ 52-0982413
	Firm's address ▶ 1801 PORTER STREET SUITE 500 BALTIMORE, MD 21230				Phone no (410) 685-5512

Form 990PF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation

(a) Name and address	Title, and average hours per week (b) devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	Expense account, (e) other allowances
JEFFREY ABERBANEL	DIRECTOR 1 00	0	0	0
10096 RED RUN BLVD SUITE 200 OWINGS MILLS, MD 21117				
JONATHAN P MYERS	PRESIDENT 10 00	0	0	0
3635 OLD COURT ROAD SUITE 207 BALTIMORE, MD 21208				
DAVID GOLDNER	TREASURER 1 00	0	0	0
1801 PORTER STREET SUITE 500 BALTIMORE, MD 21230				
HERSCHEL L LANGENTHAL	VICE PRESIDENT 10 00	0	0	0
3635 OLD COURT ROAD SUITE 207 BALTIMORE, MD 21208				
JUDITH LANGENTHAL	PRESIDENT 10 00	0	0	0
3635 OLD COURT ROAD SUITE 207 BALTIMORE, MD 21208				
BEVERLY MYERS	VICE PRESIDENT 10 00	0	0	0
3635 OLD COURT ROAD SUITE 207 BALTIMORE, MD 21208				
CAROL ROGERS	SECRETARY 1 00	0	0	0
3635 OLD COURT ROAD SUITE 207 BALTIMORE, MD 21208				
JENNIFER MYERS	DIRECTOR 1 00	0	0	0
3635 OLD COURT ROAD SUITE 207 BALTIMORE, MD 21208				
DAVID MYERS	DIRECTOR 1 00	0	0	0
3635 OLD COURT ROAD SUITE 207 BALTIMORE, MD 21208				
JEFFREY MYERS	DIRECTOR 1 00	25,000	0	0
3635 OLD COURT ROAD SUITE 207 BALTIMORE, MD 21208				
DANIEL LANGENTHAL	DIRECTOR 1 00	0	0	0
3635 OLD COURT ROAD SUITE 207 BALTIMORE, MD 21208				
JOSHUA LANGENTHAL	DIRECTOR 1 00	0	0	0
3635 OLD COURT ROAD SUITE 207 BALTIMORE, MD 21208				

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).

JONATHAN P MYERS
HERSCHEL L LANGENTHAL
JUDITH LANGENTHAL
BEVERLY MYERS

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)				
a <i>Paid during the year</i>				
ACTIVE MINDS 2001 S STREET NW SUITE 450 WASHINGTON, DC 20009	NONE	PUBLIC	UNRESTRICTED	15,000
ASSOCIATED JCFB (BHI LIBRARY PLEDGE) 101 WEST MOUNT ROYAL AVENUE BALTIMORE, MD 21201	NONE	PUBLIC	UNRESTRICTED	210,765
BALTIMORE COMMUNITY FOUNDATION-WOMEN'S GIVING CIRCLE 2 EAST READ STREET 9TH FLOOR BALTIMORE, MD 21202	NONE	PUBLIC	UNRESTRICTED	1,160
Total ▶ 3a				615,460

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)				
a <i>Paid during the year</i>				
BETH AM (DUES)2501 EUTAW PLACE BALTIMORE, MD 21217	NONE	PUBLIC	UNRESTRICTED	9,140
BETH AM (TRADITION & TRANSFORMATION FUND) 2501 EUTAW PLACE BALTIMORE, MD 21217	NONE	PUBLIC	UNRESTRICTED	15,000
BETH EL CONGREGATION 8101 PARK HEIGHTS AVENUE BALTIMORE, MD 21208	NONE	PUBLIC	UNRESTRICTED	3,835
Total ▶ 3a				615,460

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)				
a <i>Paid during the year</i>				
BNAI VAIL19 VAIL ROAD VAIL, CO 81657	NONE	PUBLIC	UNRESTRICTED	1,100
BOSTON LANDMARKS ORCHESTRA 214 LINCOLN ST SUITE 331 BOSTON, MA 02134	NONE	PUBLIC	UNRESTRICTED	350
BOSTON LATIN SCHOOL 78 LOUIS PASTOR AVENUE BOSTON, MA 02115	NONE	PUBLIC	UNRESTRICTED	1,000
Total ▶ 3a				615,460

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)				
a <i>Paid during the year</i>				
BRANDEIS UNIVERSITY 415 SOUTH STREET MD 122 WALTHAM, MA 022549110	NONE	PUBLIC	UNRESTRICTED	40,000
CAMP GREENTOP 1111 EAST COLD SPRING LANE BALITMORE, MD 21239	NONE	PUBLIC	UNRESTRICTED	10,000
CHARLES RIVER CONSERVANCY 4 BRATTLE STREET CAMBRIDGE, MA 02138	NONE	PUBLIC	UNRESTRICTED	1,000
Total ▶ 3a				615,460

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)				
a <i>Paid during the year</i>				
CHESTNUT RIDGE FIRE DEPARTMENT 12020 GREENSPRING AVENUE OWINGS MILLS, MD 21117	NONE	PUBLIC	UNRESTRICTED	1,000
CITY SPROUTS 678 MASSACHUSETTES AVENUE CAMBRIDGE, MA 02139	NONE	PUBLIC	UNRESTRICTED	3,000
COLORADO ROCKY MOUNTAIN SCHOOL 1493 COUNTY ROAD 106 CARBONDALE, CO 81623	NONE	PUBLIC	UNRESTRICTED	1,000
Total ▶ 3a				615,460

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)				
a <i>Paid during the year</i>				
COMMUNITY FOOD SHARE 6363 HORIZON LANE LONGMONT, CO 80503	NONE	PUBLIC	UNRESTRICTED	8,850
CONNECTICUT FOOD BANK 2 RESEARCH PARKWAY WALLINGFORD, CT 06492	NONE	PUBLIC	UNRESTRICTED	2,350
CREATIVE ALLIANCE 3134 EASTERN AVENUE BALTIMORE, MD 21224	NONE	PUBLIC	UNRESTRICTED	10,000
Total ▶ 3a				615,460

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)				
a <i>Paid during the year</i>				
FRIENDS OF GREAT KIDS FARM 6601 BALTIMORE NATIONAL PIKE CATONSVILLE, MD 21228	NONE	PUBLIC	UNRESTRICTED	15,000
FRIENDS OF THE JEWISH CHAPEL 5700 PARK HEIGHTS AVENUE BALTIMORE, MD 21215	NONE	PUBLIC	UNRESTRICTED	1,000
HARVARD124 MOUNT AUBURN STREET CAMBRIDGE, MA 021385795	NONE	PUBLIC	UNRESTRICTED	1,000
Total ▶ 3a				615,460

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)				
a <i>Paid during the year</i>				
ITINERIS2050A ROCKROSE AVENUE BALTIMORE, MD 21211	NONE	PUBLIC	UNRESTRICTED	31,850
JCC ASSOCIATION520 8TH AVENUE NEW YORK, NY 10018	NONE	PUBLIC	UNRESTRICTED	21,350
JEMICY SCHOOL11 CELADON ROAD OWINGS MILLS, MD 21117	NONE	PUBLIC	UNRESTRICTED	4,000
Total ▶ 3a				615,460

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)				
a <i>Paid during the year</i>				
JEWISH MUSEUM OF MARYLAND (BOARD LEADERSHIP) 15 LLOYD STREET BALTIMORE, MD 21202	NONE	PUBLIC	UNRESTRICTED	5,000
JEWISH STUDIO PROJECT 2643 DANA STREET BERKELEY, CA 94704	NONE	PUBLIC	UNRESTRICTED	3,000
JOHNS HOPKINS UNIVERSITY - HEART & VASCULAR INSTITUTE 100 N CHARLES STREET321 BALITMORE, MD 21201	NONE	PUBLIC	UNRESTRICTED	3,000
Total ▶ 3a				615,460

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)				
a <i>Paid during the year</i>				
JUVENILE DIABETES RESEARCH 120 WALL STREET 19TH FLOOR NEW YORK, NY 100054001	NONE	PUBLIC	UNRESTRICTED	1,000
KESHET284 AMORY STREET JAMAICA PLAIN, MA 02130	NONE	PUBLIC	UNRESTRICTED	1,000
LAGOND MUSIC SCHOOL 9 HAVEN STREET ELMSFORD, NY 10523	NONE	PUBLIC	UNRESTRICTED	2,500
Total ▶ 3a				615,460

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)				
a <i>Paid during the year</i>				
LEFT HAND FIRE DISTRICT 900 LEFTHAND CANYON DRIVE BOULDER, CO 80302	NONE	PUBLIC	UNRESTRICTED	500
LEVINDALE AUXILIARY 2434 WEST BELVEDERE AVENUE BALTIMORE, MD 21215	NONE	PUBLIC	UNRESTRICTED	2,500
MARYLAND SCHOOL FOR THE BLIND 3501 TAYLOR AVENUE BALTIMORE, MD 21236	NONE	PUBLIC	UNRESTRICTED	15,000
Total ► 3a				615,460

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)				
a <i>Paid during the year</i>				
MCDANIEL COLLEGE2 COLLEGE HILL WESTMINSTER, MD 211574390	NONE	PUBLIC	UNRESTRICTED	2,000
MCDONOGH SCHOOLPO BOX 380 OWINGS MILLS, MD 21117	NONE	PUBLIC	UNRESTRICTED	2,500
MENTORING MALE TEENS IN THE HOOD 8 MARKET PLACE 5TH FLOOR BALITMORE, MD 21202	NONE	PUBLIC	UNRESTRICTED	5,000
Total ▶ 3a				615,460

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)				
a <i>Paid during the year</i>				
MERIT HOPKINS BAYVIEW MEDICAL CENTER 5200 EASTERN AVENUE BALITMORE, MD 21224	NONE	PUBLIC	UNRESTRICTED	10,000
MIRIAM LODGE KSB 7310 PARK HEIGHTS AVE BALITMORE, MD 21208	NONE	PUBLIC	UNRESTRICTED	10,000
MISSION OF MERCY 22 S MARKET STREET SUITE 6D FREDERICK, MD 21701	NONE	PUBLIC	UNRESTRICTED	10,000
Total ► 3a				615,460

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)				
a <i>Paid during the year</i>				
MOVEABLE FEASTPO BOX 2298 BALTIMORE, MD 212032298	NONE	PUBLIC	UNRESTRICTED	15,000
PAUL'S PLACE INC1118 WARD STREET BALTIMORE, MD 21230	NONE	PUBLIC	UNRESTRICTED	5,000
PLANNED PARENTHOOD HUDSON VALLEY 7 COATES DRIVE GOSHEN, NY 10924	NONE	PUBLIC	UNRESTRICTED	3,000
Total ▶ 3a				615,460


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)				
a <i>Paid during the year</i>				
ROXBURY LATIN SCHOOL 101 ST THERESA AVENUE WEST ROXBURY, MA 021323496	NONE	PUBLIC	UNRESTRICTED	1,000
SEED SCHOOL200 FONT HILL AVENUE BALITMORE, MD 21223	NONE	PUBLIC	UNRESTRICTED	15,000
SHRIVER HALL CONCERT SERIES 3400 N CHARLES STREET BALITMORE, MD 212182698	NONE	PUBLIC	UNRESTRICTED	500
Total ▶ 3a				615,460

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)				
a <i>Paid during the year</i>				
SISTERS CIRCLEPO BOX 84 TIMONIUM, MD 21094	NONE	PUBLIC	UNRESTRICTED	12,000
ST VINCENT DE PAUL BALTIMORE 2305 N CHARLES ST BALTIMORE, MD 21218	NONE	PUBLIC	UNRESTRICTED	15,000
TALMAR1994 CROMWELL BRIDGE RD PARKVILLE, MD 21234	NONE	PUBLIC	UNRESTRICTED	10,000
Total ▶ 3a				615,460

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)				
a <i>Paid during the year</i>				
TEMPLE BETH ZION 1566 BEACON STREET BROOKLINE, MA 02446	NONE	PUBLIC	UNRESTRICTED	3,000
THE FAMILY TREE 2108 N CHARLES STREET BALTIMORE, MD 21218	NONE	PUBLIC	UNRESTRICTED	10,000
THE THREAD INCPO BOX 1584 BALTIMORE, MD 21203	NONE	PUBLIC	UNRESTRICTED	12,000
Total ▶ 3a				615,460

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)				
a <i>Paid during the year</i>				
UMMC CHILDREN'S HOSPITAL NICU 110 S PACA STREET 9TH FLOOR BALITMORE, MD 21201	NONE	PUBLIC	UNRESTRICTED	16,000
UNIV MD GREENEBAUM CANCER CENTER 22 S GREEN ST BALTIMORE, MD 21201	NONE	PUBLIC	UNRESTRICTED	3,500
UNIVERSTY OF MARYLAND BALTIMORE FOUNDATION 620 W LEXINGTON AVE BALTIMORE, MD 21201	NONE	PUBLIC	UNRESTRICTED	1,350
Total ▶ 3a				615,460

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)				
a <i>Paid during the year</i>				
UNIVERSTY OF TOLEDO FOUNDATION PO BOX 586 TOLEDO, OH 43697	NONE	PUBLIC	UNRESTRICTED	3,000
VARIOUS PASSTHROUGH ENTITIES ADDRESS OF RECIPIENTS - VARIOUS BALTIMORE, MD 21208	NONE	PUBLIC	UNRESTRICTED	360
WILMER MEMORIAL FUND - JOHNS HOPKINS MEDICAL INSTITUTE 600 N WOLFE WILMER 112 BALITMORE, MD 212879015	NONE	PUBLIC	UNRESTRICTED	7,500
Total ▶ 3a				615,460

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)				
a <i>Paid during the year</i>				
ZICHRON CHAIM YAAKOV 4011 BROOKHILL ROAD BALTIMORE, MD 21215	NONE	PUBLIC	UNRESTRICTED	500
Total  3a				615,460

TY 2018 Accounting Fees Schedule**Name:** ISRAEL & MOLLIE MYERS FOUNDATION**EIN:** 52-1314430

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
ACCOUNTING FEES	5,085	5,085		0

TY 2018 Investments - Other Schedule**Name:** ISRAEL & MOLLIE MYERS FOUNDATION**EIN:** 52-1314430**Investments Other Schedule 2**

Category/ Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value
WESTGATE INTERNATIONAL	AT COST	147,723	1,425,159
M/L THREE, LLC	AT COST	5,652,159	6,391,288
JMD PARTNERSHIP	AT COST	818,324	788,665
CRP EXEMPT FUND	AT COST	60,000	71,000
HIGHFIELDS CAPITAL	AT COST	0	86,388

TY 2018 Legal Fees Schedule**Name:** ISRAEL & MOLLIE MYERS FOUNDATION**EIN:** 52-1314430

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
LEGAL FEES	2,014	2,014		0

TY 2018 Other Assets Schedule

Name: ISRAEL & MOLLIE MYERS FOUNDATION

EIN: 52-1314430

Other Assets Schedule

Description	Beginning of Year - Book Value	End of Year - Book Value	End of Year - Fair Market Value
EXCISE TAX	0	1,959	1,959

TY 2018 Other Decreases Schedule

Name: ISRAEL & MOLLIE MYERS FOUNDATION

EIN: 52-1314430

Description	Amount
PASSTHROUGH NONDEDUCTIBLE EXPENSES	87,517

TY 2018 Other Expenses Schedule

Name: ISRAEL & MOLLIE MYERS FOUNDATION

EIN: 52-1314430

Other Expenses Schedule

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
INVESTMENT FEES	12,604	12,604		0
MANAGEMENT FEES	165	165		0
CUSTODIAL FEES	820	820		0
EMPLOYEE BENEFITS	3,754	3,754		0
OFFICE EXPENSE	11,670	11,670		0
POSTAGE & SHIPPING	72	72		0
INSURANCE	165	165		0
TELEPHONE	178	178		0
REPAIRS & MAINTENANCE	244	244		0
BROKER FEES	7,324	7,324		0

TY 2018 Other Income Schedule**Name:** ISRAEL & MOLLIE MYERS FOUNDATION**EIN:** 52-1314430**Other Income Schedule**

Description	Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income
PTNSHIP K-1 INCOME (LOSS)	-60,169	-52,188	-60,169
OTHER K-1 INCOME	-2,433	-2,433	-2,433

TY 2018 Other Increases Schedule

Name: ISRAEL & MOLLIE MYERS FOUNDATION
EIN: 52-1314430

Description	Amount
TAX EXEMPT INTEREST	317

TY 2018 Other Liabilities Schedule**Name:** ISRAEL & MOLLIE MYERS FOUNDATION**EIN:** 52-1314430

Description	Beginning of Year - Book Value	End of Year - Book Value
DUE TO INVESTMENT PARTNERSHIP	388,000	76,000
EXCISE TAX PAYABLE	1,144	0

TY 2018 Taxes Schedule**Name:** ISRAEL & MOLLIE MYERS FOUNDATION**EIN:** 52-1314430

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
PAYROLL TAX	654	654		0
TAXES & LICENSE	3	3		0
ML 3 STATE TAXES PAID	8	8		0
JMD STATE TAXES PAID	256	256		0
FOREIGN TAXES PAID	1,686	1,686		0
EXCISE TAX	97	0		0

Schedule B (Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service	Schedule of Contributors ▶ Attach to Form 990, 990-EZ, or 990-PF ▶ Go to www.irs.gov/Form990 for the latest information	OMB No 1545-0047 2018
	Name of the organization ISRAEL & MOLLIE MYERS FOUNDATION	Employer identification number 52-1314430

Organization type (check one)

Filers of:	Section:
Form 990 or 990-EZ	<input type="checkbox"/> 501(c)() (enter number) organization
	<input type="checkbox"/> 4947(a)(1) nonexempt charitable trust not treated as a private foundation
	<input type="checkbox"/> 527 political organization
Form 990-PF	<input checked="" type="checkbox"/> 501(c)(3) exempt private foundation
	<input type="checkbox"/> 4947(a)(1) nonexempt charitable trust treated as a private foundation
	<input type="checkbox"/> 501(c)(3) taxable private foundation

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

General Rule

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

Special Rules

☐ For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33¹/₃% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.

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

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

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

Name of organization ISRAEL & MOLLIE MYERS FOUNDATION	Employer identification number 52-1314430
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Part I **Contributors** (See instructions) Use duplicate copies of Part I if additional space is needed

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	ISRAEL MYERS CHARITABLE LEAD 3635 OLD COURT ROAD 207 BALTIMORE, MD 21208	\$ 212,950	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
2	DANIEL LANGENTHAL 66 WINCHESTER STREET BROOKLINE, MA 02139	\$ 45,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
.		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
.		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
.		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
.		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
.		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)

Employer identification number

52-1314430

Part II	Noncash Property
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(a) No. from Part I	(b) Description of noncash property given <small>(See instructions) Use duplicate copies of Part II if additional space is needed</small>	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$ _____	_____
		\$ _____	_____
		\$ _____	_____
		\$ _____	_____
		\$ _____	_____

Name of organization ISRAEL & MOLLIE MYERS FOUNDATION	Employer identification number 52-1314430
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Part III	Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once. See instructions.) ▶ \$ _____ Use duplicate copies of Part III if additional space is needed
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(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	<div></div> <div></div>	<div></div> <div></div>	<div></div> <div></div>
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4		Relationship of transferor to transferee
	<div></div> <div></div>	<div></div> <div></div>	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	<div></div> <div></div>	<div></div> <div></div>	<div></div> <div></div>
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4		Relationship of transferor to transferee
	<div></div> <div></div>	<div></div> <div></div>	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
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