## **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

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

OMB No 1545-0052

For c	alendar year 2018 or tax year beginning		, 2018,	and endin	g	, 20
Name o	of foundation H7 FOUNDATION				A Employer identif	fication number
FKA	A COMMONWEALTH FOUNDATION II	- 			62-166851	
Numbe	r and street (or P O box number if mail is not delivered t	o street address)		Room/suite	B Telephone numb	er (see instructions)
					4510	
	D. BOX 425				(518) 64	10-5000
City or	town, state or province, country, and ZIP or foreign post-	al code			C If exemption applic.	31/02 16
	10066 0405				pending, check here	
	RATOGA SPRINGS, NY 12866-0425		-6 - 6			. 🗀
G Ch	eck all that apply Initial return	<del></del>	of a former p	ublic charit	- J . , orongin organiza	
	Final return	Amended re			2 Foreign organiza 85% test, check	
	Address change	Name chang		4 6 8	computation .	▶ □
$\overline{}$	eck type of organization X Section 501	`—		- $DU$	E If private foundation	<b>▲ I I</b>
	Section 4947(a)(1) nonexempt charitable trust	Other taxable pr				o)(1)(A), check here .
-		unting method X C	ash Acc	ruai		in a 60-month termination
	· · · · · · · · · · · · · · · · · · ·	ther (specify)	ash beaus \		under section 507(E	o)(1)(B), check here
	, - ·	column (d) must be on ca	ish basis )			(d) Disbursements
Part	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d)	(a) revenue and	(b) Net inve		(c) Adjusted net	for charitable
	may not necessarily equal the amounts in	expenses per books	incom	е	income	purposes (cash basis only)
Τ.	column (a) (see instructions) )		J# 15 11 11 11 11 11 11 11 11 11 11 11 11		Cauromana Lieuvinia	(Cash basis only)
1	Contributions, gifts, grants, etc., received (attach schedule).	. 4 . 223		<del>*************************************</del>		2482
2	attach Sch B	2,338.	<del>                                     </del>	2,338.	<u> </u>	27.6
3	Interest on savings and temporary cash investments.	91,253.		1,253.		
4	Dividends and interest from securities	91,233.		1,233.		
5 a	Gross rents	cr zz	11 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2		RE	CENTED
	Net rental income or (loss)	398,332.	<u> </u>		Langer Samman & Style Style State .	
<b>≘</b>   6a	Net gain or (loss) from sale of assets not on line 10 Gross sales price for all 398, 332.		- · · · · · · · · · · · · · · · · · · ·			
enue 6a b	assets on line oa		<del>  '                                   </del>		V QV	<b>12 3</b> 2019   <b>6</b>
<b>~</b> i	Capital gain net income (from Part IV, line 2).		39			
8	Net short-term capital gain,		2001.2022 2003.2022		OGI	EN WITE
10 a	Income modifications					
	and allowances		Thise Type	**************************************		-A.W
1	Less Cost of goods sold .		SKY2.		<u> </u>	
	Gross profit or (loss) (attach schedule)	56,126.		6,126.		
11	Other income (attach schedule) ATCH, 1	548,049.		8,049.	<del></del>	
12	Total. Add lines 1 through 11	0	34	0,040.		
ဟု 13	Compensation of officers, directors, trustees, etc	20 661		<del></del>		
14	Other employee salaries and wages	23,001.				
15	Pension plans, employee benefits			+		
ĭ 16 a	Legal fees (attach schedule)			+	<del></del>	<del> </del>
16 a b c 17 18 19 20	Accounting fees (attach schedule)			+	· ·	<del>                                     </del>
	Other professional fees (attach schedule)	·		- +	· ·	
17	Interest	86,457.		3,822.		
18	Taxes (attach schedule) (see instructions)[2].	33,137.		-,		<b>80</b> 2-740-736-736-7
E 19	Depreciation (attach schedule) and depletion.	42,917.				5 000. 5 1 00/6
₹ 20	Occupancy		<u> </u>			
21 22	Travel conferences, and meetings					
D 22	4 4	253,428.	25.	3,428.		
5 24	Other_expenses (attach schedule) ATCH .3					
23 24	Total operating and administrative expenses.  Addilines 13 through 23	412,463.	25	7,250.		
ğ ,-	Contributions, gifts, grants paid	1,591,740.		<del></del>		1,591,740.
25 26	Total expenses and disbursements Add lines 24 and 25	2,004,203.		7,250.	man a mene se	1,591,740.
27	Subtract line 26 from line 12				Silv Street Co.	18 10 0 0 0 0 1 0 0 0 0 0 0 0 0 0 0 0 0
	Excess of revenue over expenses and disbursements	-1,456,154.		49.48		
	Net investment income (if negative, enter -0-)	X 42X 435.20	29	0,799.		X
	Adjusted net income (if negative, enter -0-).		280 420		a 20.882a-1-00 /2 1/91	
	perwork Reduction Act Notice, see instructions	·	I want on down to	, , a a Gaong, a. [		Form <b>990-PF</b> (2018)

JSA For Paperwork Reduction Act Notice, see instructions
1170NW B54C 11/5/2019 11:58:32 AM V 18-7.5F

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D4-1	Attached schedules and amounts in the	Beginning of year	En	d of year
Part I	Balance Sheets description column should be for end-of-year amounts only (See instructions )	(a) Book Value	(b) Book Value	(c) Fair Market Value
1	Cash - non-interest-bearing	283,333.	13,789	13,789
2	0			
3	Accounts receivable	PAINTER LINCHS		LANGE CONTRACT
	Less allowance for doubtful accounts ▶	İ		
4	Pledges receivable ▶			
	Less allowance for doubtful accounts ▶			
5	Grants receivable			
6	Receivables due from officers, directors, trustees, and other			
•	disqualified persons (attach schedule) (see instructions)			
7	Other notes and loans receivable (attach schedule)	747 \$ 6 6 6 6 6 7 8 7 8 7 8 7 8 7 8 7 8 7 8 7	7.3866.2775	
'	Less allowance for doubtful accounts ▶			•
<b>1</b> 2	Inventories for sale or use		-	
SSetS 9	Prepaid expenses and deferred charges			
	Investments - U S and state government obligations (attach schedule).			
	Investments - corporate stock (attach schedule)			
116	Investments - corporate bonds (attach schedule)	770 or an Long 20 Card Card Card Card Card Card Card Card		CATCH-4CT-2-CCC
			08 036	234,140
	(attach schedule)			
12	Investments - mortgage loans	16 225 500	15 115 175	41,995,263
13	Investments - other (attach schedule)	10,223,390.	13,113,173	51. Seet an Sees (17)
1.7	equipment basis			
	(attach schedule)			
15	Other assets (describe ► ATCH 6 )		-	
16	Total assets (to be completed by all filers - see the		15 227 202	42 242 102
	instructions Also, see page 1, item I)	16,683,156.	15,227,002	42,243,192
17	Accounts payable and accrued expenses			
18	Grants payable			
19 20 21	Deferred revenue			201 1 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2
<b>≝</b> 20	Loans from officers, directors, trustees, and other disqualified persons		1	
21	Mortgages and other notes payable (attach schedule)			\$1.28\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\
J 22	Other liabilities (describe )			
23	Total liabilities (add lines 17 through 22)	0.		
	Foundations that follow SFAS 117, check here ▶			
24	and complete lines 24 through 26, and lines 30 and 31.			
E 24	Unrestricted			
rs 25	Temporarily restricted			1/3/2018/CA:/6/9363
26	Permanently restricted			
<u> </u>	Foundations that do not follow SFAS 117, check here ► X			
	and complete lines 27 through 31.			
5 27	Capital stock, trust principal, or current funds			
26 27 28 29 30 31 31 32 31 31 31 31 31 31 31 31 31 31 31 31 31	Paid-in or capital surplus, or land, bldg, and equipment fund			
Ø 29	Retained earnings, accumulated income, endowment, or other funds	16,683,156.	15,227,002	
<b>≤</b> 30	Total net assets or fund balances (see instructions)	16,683,156.	15,227,002	L. Jet 'n Mark kari
31	Total liabilities and net assets/fund balances (see			
-	instructions)	16,683,156.	15,227,002	
Part				
	al net assets or fund balances at beginning of year - Part		must agree with	
	d-of-year figure reported on prior year's return)			16,683,156
	ter amount from Part I, line 27a			
			۱ ۵	<del></del>
	d lines 1, 2, and 3			
	creases not included in line 2 (itemize) ▶		5	
e Tel	al net assets or fund balances at end of year (line 4 minus	s line 5) - Part II, column		
9 101	ai net assets of fund valances at end of year (line 4 filling	s mis oj - i artii, colullili	<u>υ, πιο ου   υ</u>	

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Page	3
Date sold	

<del></del>	sand Losses for Tax on Investigation and Losses for Tax on Investigation (for each of the same state o		(b) How	(a) Data assumed	(d) Date sold
, ,	orick warehouse, or common stock, 200	•	àcquired P - Purchase D - Donation		(mo , day, yr )
1 a SEE PART IV SCHE	DULE				
b			ļ		
С					
<u>e</u>		(a) Cost or other bears		# \ C = = = = # = =	
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		(h) Gain or (los ((e) plus (f) minu	
	<u> </u>				
b c			<del></del>		
d					
e	~				
Complete only for assets s	howing gain in column (h) and owned	by the foundation on 12/31/69	(1)	Gains (Col (h) ga	ıın mınuş
(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	col	(k), but not less the Losses (from col	
a					
b					
С				<del></del>	
d	<del></del>		<del>  -</del>		
е		Dott by 7			
2 Capital gain net income	or (net canital loss)	ain, also enter in Part I, line 7 oss), enter -0- in Part I, line 7	2		398,332.
3 Net short-term capital g	gain or (loss) as defined in sections	1222(5) and (6)			
If gain, also enter in P	Part I, line 8, column (c) See ins	structions If (loss), enter -0- in $\}$			
	<u> </u>		3		0.
		duced Tax on Net Investment In e section 4940(a) tax on net investi			
	the section 4942 tax on the distrib	outable amount of any year in the b	ase perio	d?	Yes X No
		ar, see the instructions before make	ing anv er	ntries	
(a)	(b)	(c)		(d)	
Base period years Calendar year (or tax year beginning in)	Adjusted qualifying distributions	Net value of nonchantable-use assets		Distribution ra (col (b) divided by	
2017	8,419,766.	70,747,139.			0.119012
2016	2,025,000.	47,511,206.			0.042622
2015	2,150,000.	50,014,446.			0.042988
2014	2,366,534.	49,613,011.			0.047700
2013					
•					0.00000
			2		0.252322
	io for the 5-year base period - divid		3		0.063081
the number of years the	toundation has been in existence	ıf less than 5 years			0.003001
4 Enter the net value of ne	oncharitable-use assets for 2018 f	from Part X, line 5	4	44,	257,476.
5 Multiply line 4 by line 3,			5	2,	791,806.
			6		2,908.
7 Add lines 5 and 6			7	2,	794,714.
8 Enter qualifying distribut If line 8 is equal to or g Part VI instructions	tions from Part XII, line 4 greater than line 7, check the box	nn Part VI, line 1b, and complete	8 that part		rate See the

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7	_	- 4
,	Page	4

Par	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - Se	e mstructions)
1a	Exempt operating foundations described in section 4940(d)(2), check here  and enter, "N/A" on line 1	
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check	5,816.
	here ▶ ☐ and enter 1% of Part I, line 27b	
С	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of J Part I, line 12, col (b)	
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-)	
3	Add lines_1 and 2	5,816.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-)	0.
5	Tax based on investment income Subtract line 4 from line 3 If zero or less, enter -0	5,816.
6	Credits/Payments	
а	2018 estimated tax payments and 2017 overpayment credited to 2018 6a 85,362.	
b	Exempt foreign organizations - tax withheld at source	
С	Tax paid with application for extension of time to file (Form 8868)	
d	Backup withholding erroneously withheld 6d	
7	Total credits and payments Add lines 6a through 6d	85,362 <u>.</u>
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached 8	
9	Tax due If the total of lines 5 and 8 is more than line 7, enter amount owed	50.516
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	79,546.
11	Enter the amount of line 10 to be Credited to 2019 estimated tax ▶ 79,546. Refunded ▶ 11	
	t VII-A Statements Regarding Activities	<u> </u>
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation, or did	
	participate or intervene in any political campaign?	
þ	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the	1 12
	instructions for the definition	22 60.00 ( ) ()
	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	1c X
	Did the foundation file Form 1120-POL for this year?	
đ	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year	
_	(1) On the foundation \$ (2) On foundation managers \$ \$ Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed	
е	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	\$2.5 \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, article	s Right Alba Mai
_	of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	4   17
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	
	If "Yes," has it filed a tax return on Form 990-T for this year?	4b X
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	ıt   Lâx   B.C Bali
	conflict with the state law remain in the governing instrument?	6 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	7 X
8a	Enter the states to which the foundation reports or with which it is registered. See instructions.	
	VIRGINIA	
ь	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General	1 1 1
	(or designate) of each state as required by General Instruction G <sup>2</sup> If "No," attach explanation	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) o	
	4942(j)(5) for calendar year 2018 or the tax year beginning in 2018? See the instructions for Part XIV If "Yes,	_       <b> </b>
	complete Part XIV	9 X
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their	r
	names and addresses	. 10 X

Pai	rt VII-A Statements Regarding Activities (continued)			
	•		Yes	No
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		X
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	<u></u>	X
13		13	X	<u> </u>
	Website address ► N/A	400	٦	
14	The books are in care of ► JOHN FLAVIN, THE AYCO CO  Located at ►321 BROADWAY SARATOGA SPRINGS, NY  Telephone no ► 518-866  12866-0	260 -	, <u>, , , , , , , , , , , , , , , , , , </u>	
		300		ТТ
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here		• • •	٠ ـــــا٠
40	and enter the amount of tax-exempt interest received or accrued during the year		Yes	No
16	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	7.00 0.000		
	the foreign country			
Par	rt VII-B Statements Regarding Activities for Which Form 4720 May Be Required	1		
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.	44777	Yes	No
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 X No			
_	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a			
	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? Yes X 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)?			
	(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	of fany answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations	4 6		X
	section 53 4941(d)-3 or in a current notice regarding disaster assistance? See instructions	1b	<i>30000</i>	<u>^</u>
_	Organizations relying on a current notice regarding disaster assistance, check here			
С	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	***********	X
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))			
а	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? Yes X No			
	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 )	2b	52422455	NEZ 65528
C	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here			
•	•		77,	
	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise			
	-at any time during the year?-,-,-,-,-,			
b	of 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	, anatroidie	-are vistillii
42	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		X
	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		Χ

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Par	t VII-B Statements Regarding Activities	for Which Form	4720 May Be Req	uired (cont	inued)		
5a	During the year, did the foundation pay or incur any amo	ount to				` ^' (`` \	res No
1	(1) Carry on propaganda, or otherwise attempt to influe	ence legislation (sectio	n 4945(e))?	. Yes	X No		
	(2) Influence the outcome of any specific public ele	ection (see section 4	1955), or to carry or	ı <b>,</b>			
	directly or indirectly, any voter registration drive?			Yes	X No		
	(3) Provide a grant to an individual for travel, study, or o				X No		[M] [18]
	(4) Provide a grant to an organization other than a						
	section 4945(d)(4)(A)? See instructions	_			X No	) - [3:k]&	
	(5) Provide for any purpose other than religious, cl						
	purposes, or for the prevention of cruelty to children		••••		X No		
ь	If any answer is "Yes" to 5a(1)-(5), did any of the	transactions fail to	qualify under the ex	ceptions des	scribed in		Britan (* 1861 ) Handi Donifis
_	Regulations section 53 4945 or in a current notice regar					5b	
	Organizations relying on a current notice regarding disa	ster assistance, check	here		▶		
c	If the answer is "Yes" to question 5a(4), does the						
·	because it maintained expenditure responsibility for the				X No		
	If "Yes." attach the statement required by Regulations s						
6a	Did the foundation, during the year, receive any fur		ectly, to pay premiun	ns			
va	on a personal benefit contract?				X No	,  391	
h	Did the foundation, during the year, pay premiums, dire					6ь	X
~	If "Yes" to 6b, file Form 8870	.o., o,	<b>P</b> • • • • • • • • • • • • • • • • • • •			1995 2	<del>(20 1. 2</del>
7a	At any time during the tax year, was the foundation a p	arty to a prohibited ta	x shelter transaction?	Yes	X No		
b	If "Yes," did the foundation receive any proceeds or ha					7b	12.00
8	Is the foundation subject to the section 4960 tax on pa					250.0	10 31 3
Ū	remuneration or excess parachute payment(s) during the			. Yes	X No		<u> </u>
Par	t VIII Information About Officers, Directo	rs, Trustees, Fou	indation Managers	Highly P			
	and Contractors						
1	List all officers, directors, trustees, and foundat	(b) Title, and average	(c) Compensation	(d) Contribut	ions to	(e) Expense	
1	(a) Name and address		(c) Compensation (lf not paid, enter -0-)		ions to efit plans	(e) Expense other allow	
	(a) Name and address	(b) Title, and average hours per week	(c) Compensation (If not paid, enter -0-)	(d) Contribut employee beni	ions to efit plans npensation		vances
	(a) Name and address	(b) Title, and average hours per week	(c) Compensation (If not paid,	(d) Contribut employee beni	ions to efit plans		
1 ATC	(a) Name and address	(b) Title, and average hours per week	(c) Compensation (If not paid, enter -0-)	(d) Contribut employee beni	ions to efit plans npensation		vances
	(a) Name and address	(b) Title, and average hours per week	(c) Compensation (If not paid, enter -0-)	(d) Contribut employee beni	ions to efit plans npensation		vances
	(a) Name and address	(b) Title, and average hours per week	(c) Compensation (If not paid, enter -0-)	(d) Contribut employee beni	ions to efit plans npensation		vances
	(a) Name and address	(b) Title, and average hours per week	(c) Compensation (If not paid, enter -0-)	(d) Contribut employee beni	ions to efit plans npensation		vances
	(a) Name and address	(b) Title, and average hours per week	(c) Compensation (If not paid, enter -0-)	(d) Contribut employee beni	ions to efit plans npensation		vances
ATCI	(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (if not paid, enter -0-)	(d) Contributed (d) (d) (d) (d) (d) (d) (d) (d) (d) (d	ions to afit plans inpensation	other allow	0 .
ATCI	(a) Name and address  1 7  Compensation of five highest-paid employees	(b) Title, and average hours per week devoted to position	(c) Compensation (if not paid, enter -0-)	(d) Contributed (d) (d) (d) (d) (d) (d) (d) (d) (d) (d	ions to afit plans inpensation	other allow	0 .
ATCI	(a) Name and address  i 7  Compensation of five highest-paid employees "NONE."	(b) Title, and average hours per week devoted to position  (other than those)	(c) Compensation (if not paid, enter -0-)	(d) Contributemployee beneated contributemployee to contribute the contributemployee to contribute the contributemployee to contribute the contributemployee the contributemploy	nons to effit plans in pensation 0 .	ons). If non	0.
ATCI	(a) Name and address  1 7  Compensation of five highest-paid employees	(b) Title, and average hours per week devoted to position  (other than those b) Title, and average hours per week	(c) Compensation (if not paid, enter -0-)	(d) Contribute employee beautiful (d) Contribute employee to contribute employee beautiful (d) Contribute employee blans and d	nons to effit plans in pensation  0.  nstruction  tions to energit efferred	other allow	0.
2 (a)	(a) Name and address  i 7  Compensation of five highest-paid employees "NONE."	(b) Title, and average hours per week devoted to position  (other than those)	(c) Compensation (if not paid, enter -0-)  0 .	(d) Contribute (d) Contribute (d) Contribute (d) Contribute (d) Contribute (employee b)	nons to effit plans in pensation  0.  nstruction  tions to energit efferred	ons). If non	0.
ATCI	(a) Name and address  i 7  Compensation of five highest-paid employees "NONE."	(b) Title, and average hours per week devoted to position  (other than those b) Title, and average hours per week	(c) Compensation (If not paid, enter -0-)  O .  ce included on line (c) Compensation	(d) Contribute employee beautiful (d) Contribute employee to contribute employee beautiful (d) Contribute employee blans and d	nstructions to seff plans in pensation 0 .	ons). If non	0.  ne, enter account, vances
2 (a)	(a) Name and address  i 7  Compensation of five highest-paid employees "NONE."	(b) Title, and average hours per week devoted to position  (other than those b) Title, and average hours per week	(c) Compensation (if not paid, enter -0-)  0 .	(d) Contribute employee beautiful (d) Contribute employee to contribute employee beautiful (d) Contribute employee blans and d	nons to effit plans in pensation  0.  nstruction  tions to energit efferred	ons). If non	0.
2 (a)	(a) Name and address  i 7  Compensation of five highest-paid employees "NONE."	(b) Title, and average hours per week devoted to position  (other than those b) Title, and average hours per week	(c) Compensation (If not paid, enter -0-)  O .  ce included on line (c) Compensation	(d) Contribute employee beautiful (d) Contribute employee to contribute employee beautiful (d) Contribute employee blans and d	nstructions to seff plans in pensation 0 .	ons). If non	0.  ne, enter account, vances
2 (a)	(a) Name and address  i 7  Compensation of five highest-paid employees "NONE."	(b) Title, and average hours per week devoted to position  (other than those b) Title, and average hours per week	(c) Compensation (If not paid, enter -0-)  O .  ce included on line (c) Compensation	(d) Contribute employee beautiful (d) Contribute employee to contribute employee beautiful (d) Contribute employee blans and d	nstructions to seff plans in pensation 0 .	ons). If non	0.  ne, enter account, vances
2 (a)	(a) Name and address  i 7  Compensation of five highest-paid employees "NONE."	(b) Title, and average hours per week devoted to position  (other than those b) Title, and average hours per week	(c) Compensation (if not paid, enter -0-)  0 .	(d) Contribute employee beautiful (d) Contribute employee to contribute employee beautiful (d) Contribute employee blans and d	nstructions to seff plans in pensation 0 .	ons). If non	0.  ne, enter account, vances
2 (a)	(a) Name and address  i 7  Compensation of five highest-paid employees "NONE."	(b) Title, and average hours per week devoted to position  (other than those b) Title, and average hours per week	(c) Compensation (if not paid, enter -0-)  0 .	(d) Contribute employee beautiful (d) Contribute employee to contribute employee beautiful (d) Contribute employee blans and d	nstructions to seff plans in pensation 0 .	ons). If non	0.  ne, enter account, vances
2 (a)	(a) Name and address  i 7  Compensation of five highest-paid employees "NONE."	(b) Title, and average hours per week devoted to position  (other than those b) Title, and average hours per week	(c) Compensation (if not paid, enter -0-)  0 .	(d) Contribute employee beautiful (d) Contribute employee to contribute employee beautiful (d) Contribute employee blans and d	nstructions to seff plans in pensation 0 .	ons). If non	0.  ne, enter account, vances
2 (a)	(a) Name and address  i 7  Compensation of five highest-paid employees "NONE."	(b) Title, and average hours per week devoted to position  (other than those b) Title, and average hours per week	(c) Compensation (if not paid, enter -0-)  0 .	(d) Contribute employee beautiful (d) Contribute employee to contribute employee beautiful (d) Contribute employee blans and d	nstructions to seff plans in pensation 0 .	ons). If non	0.  ne, enter account, vances
2 (a)	(a) Name and address  i 7  Compensation of five highest-paid employees "NONE."	(b) Title, and average hours per week devoted to position  (other than those b) Title, and average hours per week	(c) Compensation (if not paid, enter -0-)  0 .	(d) Contribute employee beautiful (d) Contribute employee to contribute employee beautiful (d) Contribute employee blans and d	nstructions to seff plans in pensation 0 .	ons). If non	0.  ne, enter account, vances
2 (a) N/A	(a) Name and address  i 7  Compensation of five highest-paid employees "NONE."	(b) Title, and average hours per week devoted to position  (other than those (b) Title, and average hours per week devoted to position	(c) Compensation (if not paid, enter -0-)  0 .	(d) Contribute employee beautiful (d) Contribute employee to contribute employee beautiful (d) Contribute employee blans and d	nstructions to seff plans in pensation 0 .	ons). If non	0.  ne, enter account, vances

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Part VIII	Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employand Contractors (continued)	yees,
3 Five h	ighest-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
N/A		
		0
	,	
		-
* <del>-</del>		
Total numbe	r of others receiving over \$50,000 for professional services	
Part IX-A	Summary of Direct Charitable Activities	<u> </u>
	dation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of	
organizations	and other beneficianes served, conferences convened, research papers produced, etc	Expenses
1 THE F	DUNDATION IS NOT INVOLVED IN ANY DIRECT CHARITABLE	
·	ITIES. IT'S PRIMARY PURPOSE IS TO SUPPORT, BY	
	IBUTIONS, OTHER 501(C)(3) EXEMPT ORGANIZATIONS.	
2	IDDITIONS, CIMER SOLICO, (S) EMERILI SIGNALIZATIONS.	_
-		· · · · ·
3		
4		
Part IX-B	Summary of Program-Related Investments (see instructions)	<u> </u>
	two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
	two largest program-related investments made by the loundation during the tax year on lines 1 and 2	
1 N/A	The state of the s	
2		
All other pro		
	gram-related investments. See instructions	
3 <u>N/A</u>		
Total. Add li	nes 1 through 3	Form <b>990-PF</b> (2018

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H7 FOUNDATION

Form	990-PF (2018)		Page 8
Pa	Minimum Investment Return (All domestic foundations must complete this part. Fore see instructions.)	gn foun	dations,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purposes		
а	Average monthly fair market value of securities	1a	
	Average of monthly cash balances	1b	463,192.
	Fair market value of all other assets (see instructions),	1c	44,468,256.
	Total (add lines 1a, b, and c)	1d	44,931,448.
e			
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	44,931,448.
4	Cash deemed held for charitable activities Enter 1 1/2 % of line 3 (for greater amount, see		
	instructions)	4	673,972.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V. line 4.	5	44,257,476.
6	Minimum investment return. Enter 5% of line 5	6	2,212,874.
	TEXI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating four	ndations	
	and certain foreign organizations, check here ▶ and do not complete this part )		
1	Minimum investment return from Part X, line 6	1	2,212,874.
	Tax on investment income for 2018 from Part VI, line 5 2a 5,816.		- · · · · · · · · · · · · · · · · · · ·
	Income tax for 2018 (This does not include the tax from Part VI).		
	Add lines 2a and 2b	2c	5,816.
3	Distributable amount before adjustments Subtract line 2c from line 1	3	2,207,058.
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	2,207,058.
6	Deduction from distributable amount (see instructions)	6	<u> </u>
7	Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII,		
•	line 1	7	2,207,058.
Pai	t XII Qualifying Distributions (see Instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
	Expenses, contributions, gifts, etc - total from Part I, column (d), line 26	1a	1,591,740.
	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	
3	Amounts set aside for specific charitable projects that satisfy the		
а		3a	
	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	1,591,740.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income	<del>-</del>	
•	Enter 1% of Part I, line 27b See instructions.	5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	1,591,740.
Ü	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when ca		
	140te. The amount on time of will be used in fact v, column (b), in subsequent years when ca		strict the foundation

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

Pa	rt XIII Undistributed Income (see instr	uctions)	<u> </u>		
1	Distributable amount for 2018 from Part XI,	(a) Corpus	(b) Years prior to 2017	(c) 2017	(d) 2018
•	line 7		1.00 (L) 1.30 (L)		2,207,058.
	Undistributed income, if any, as of the end of 2018 Enter amount for 2017 only		\$ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\		
	Total for prior years 20 16 ,20 15 ,20 14				
3	Excess distributions carryover, if any, to 2018	: :5	76 - 1		B. 4. 8. 10 10 1
a	From 2013				
	From 2014				
	From 2015				
	From 2016				
	From 2017 4,330,314.				
_	Total of lines 3a through e	4,330,314.	Millian Jacki		
4	Qualifying distributions for 2018 from Part XII,				
	line 4 ▶ \$ 1,591,740.				
а	Applied to 2017, but not more than line 2a		18 18 18 18 18 18 18 18 18 18 18 18 18 1	1 122 max 2	15 - 12 - 12 - 12 - 12 - 12 - 12 - 12 -
b	Applied to undistributed income of prior years (Election required - see instructions)				
С	Treated as distributions out of corpus (Election required - see instructions)				
d	Applied to 2018 distributable amount	AN THAT'S YES		\$44.T. \$41.8	1,591,740.
е	Remaining amount distributed out of corpus		e sull signer		
5	Excess distributions carryover applied to 2018 (If an amount appears in column (d), the same	615 310			615,318.
	amount must be shown in column (a) )	615,318.			613,310.
6	Enter the net total of each column as indicated below:				
а	Corpus Add lines 3f, 4c, and 4e Subtract line 5	3,714,996.			
b	Prior years' undistributed income Subtract line 4b from line 2b				
С	Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed				
d	Subtract line 6c from line 6b Taxable amount - see instructions				
е	Undistributed income for 2017 Subtract line 4a from line 2a Taxable amount - see instructions				
f	Undistributed income for 2018 Subtract lines 4d and 5 from line 1. This amount must be distributed in 2019				
7	Amounts treated as distributions out of corpus to satisfy requirements imposed by section	-			
	170(b)(1)(F) or 4942(g)(3) (Election may be required -see instructions)				
8	Excess distributions carryover from 2013 not applied on line 5 or line 7 (see instructions)				
9	Excess distributions carryover to 2019.	2 714 000			
	Subtract lines 7 and 8 from line 6a	3,714,996.	72% 47 0	(2) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1	4, 1 , N
	Analysis of line 9				
	Excess from 2014				de Ma
	Excess from 2015		K. Babb. 4		
	Excess from 2016				
	EXOCOG HOMEOTY				
<u>е</u>	Excess from 2018	<u> </u>	1 4 7 7 7 7 7 2 2 2 2 2 2 2 2 2 2 2 2 2 2	15 2 20 28 7 1 202	Form <b>990-PF</b> (2018)

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Forn	n 990-PF (2018)	H7 FOUNDAT	rion		62-	-1668517 Page <b>10</b>
Pa	rt XIV Private Ope	rating Foundations	(see instructions	and Part VII-A, ques	stion 9)	NOT APPLICABLE
1 a	If the foundation has re	eceived a ruling or de	termination letter th	at it is a private ope	erating	
	foundation, and the ruling	is effective for 2018, en	ter the date of the rulin	g	▶[	
þ	Check box to indicate will	hether the foundation is	s a private operating	foundation described	in section 4942(	(3) or 4942(j)(5)
2 a	Enter the lesser of the ad-	Тах уеаг		Prior 3 years		(e) Total
	Justed net income from Part I or the minimum investment return from Part X for each	(a) 2018	(b) 2017	(c) 2016	(d) 2015	(-,
	year listed		····			
b	85% of line 2a		<del></del>		<del>                                     </del>	
С	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		··-			
е	Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c					
3 a	Complete 3a, b, or c for the alternative test relied upon  "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 invest- ment 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 (I(3)(B)(III))					
	(3) Largest amount of support from an exempt organization					
	(4) Gross investment income.					<u> </u>
Pa		tary Information (C iring the year - see i		rt only if the found	dation had \$5,000 c	or more in assets at
1	Information Regarding					
а	List any managers of the before the close of any					
	-	MOLLY G. HARDII				
b	List any managers of to ownership of a partners	he foundation who o	wn 10% or more			y large portion of the
	Ownership of a partiters	mp or other entity) or	on the loundation			

N/A

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

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

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

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

c Any submission deadlines

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

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Part XV	Supplementary Information	(continued)		<del></del>	
3 Grants	s and Contributions Paid Du	ring the Year or App	roved for	Future Payment	
Nome	s and Contributions Paid Du Recipient nd address (home or business)	show any relationship to any foundation manager	status of	Purpose of grant or contribution	Amount
a Paid dui	ring the year	or substantial contributor	recipient		
<b>a</b> , <b>a</b> , <b>a a</b>	mg me you.				
ATCH 8					
		ļ. <i>'</i>			
	•				
			L		1,591,740.
	ed for future payment	<u> </u>	<u> </u>	<u> </u>	1,391,740.
<b>b</b> Approve	to fature payment				
					,
		<u> </u>	<u> </u>	<u> </u>	
Total .		<u></u>		<u> ▶ 3b</u>	<u> </u>

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art XVI-	amounts unless otherwise indicated	Unrela	ated business income	Excluded b	y section 512, 513, or 514	(e)
•	service revenue	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income (See instructions)
-	service revenue		<u>-</u> :	<del> </del>	<del></del>	(Occ manactions)
. —			-			
			_			
e	•					
f						
g Feesa	and contracts from government agencies					
Members	hip dues and assessments			14	2,338.	_
	savings and temporary cash investments .			14	91,253.	· · · · · · · · · · · · · · · · · · ·
	s and interest from securities	( % ) NO				·
				, , , , , , , , , , , , , , , , , , , ,		
	financed property	-				
	income or (loss) from personal property	-			\	
	restment income			01	56,126.	
	ess) from sales of assets other than inventory			18	398,332.	
Net incor	ne or (loss) from special events			ļ		
Gross pro	ofit or (loss) from sales of inventory					
Other rev	enue a	_		ļ		
b	·					
						•
d		_			1007	
e	Add	, ~" <sub>4</sub> , <sub>v</sub> , §		1 8 18 9 9 1 1	548 049	1
Total. Ad	Add columns (b), (d), and (e) d line 12, columns (b), (d), and (e) eet in line 13 instructions to verify calci	ulations)			13	548,04
Subtotal Total. Ad e worksh art XVI-	d line 12, columns (b), (d), and (e) eet in line 13 instructions to verify calcumate Relationship of Activities  Explain below how each activity	ulations) s to the A y for which	ccomplishment of Ex	xempt Pur	poses  of Part XVI-A contrib	
Subtotal Total. Ad e worksh irt XVI-I ne No	d line 12, columns (b), (d), and (e) eet in line 13 instructions to verify calci  Relationship of Activities	ulations) s to the A y for which	ccomplishment of Ex	xempt Pur	poses  of Part XVI-A contrib	uted importantly to
Subtotal Total. Ad e worksh irt XVI-I ne No	d line 12, columns (b), (d), and (e) eet in line 13 instructions to verify calcumate and the color of the color of the color of the foundation of the foundation of the color of the co	ulations) s to the A y for which	ccomplishment of Ex	xempt Pur	poses  of Part XVI-A contrib	uted importantly to
Subtotal Total. Ad e worksh irt XVI-I ne No	d line 12, columns (b), (d), and (e) eet in line 13 instructions to verify calcumate and the color of the color of the color of the foundation of the foundation of the color of the co	ulations) s to the A y for which	ccomplishment of Ex	xempt Pur	poses  of Part XVI-A contrib	uted importantly to
Subtotal Total. Ad e worksh irt XVI-I ne No	d line 12, columns (b), (d), and (e) eet in line 13 instructions to verify calcumate and the color of the color of the color of the foundation of the foundation of the color of the co	ulations) s to the A y for which	ccomplishment of Ex	xempt Pur	poses  of Part XVI-A contrib	uted importantly to
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Subtotal Total. Ad e worksh irt XVI-I ne No	d line 12, columns (b), (d), and (e) eet in line 13 instructions to verify calcumate and the color of the color of the color of the foundation of the foundation of the color of the co	ulations) s to the A y for which	ccomplishment of Ex	xempt Pur	poses  of Part XVI-A contrib	uted importantly to
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Subtotal Total. Ad e worksh int XVI- ne No  /A	d line 12, columns (b), (d), and (e) eet in line 13 instructions to verify calculated a Relationship of Activities  Explain below how each activity accomplishment of the foundation NOT APPLICABLE	ulations) s to the A y for which on's exemp	ccomplishment of Ex	kempt Pur	poses  of Part XVI-A contrib	uted importantly to
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Subtotal Total. Ad e worksh int XVI- ne No  / A	d line 12, columns (b), (d), and (e) eet in line 13 instructions to verify calculated a Relationship of Activities  Explain below how each activity accomplishment of the foundation NOT APPLICABLE	ulations) s to the A y for which on's exemp	ccomplishment of Ex	kempt Pur	poses  of Part XVI-A contrib	uted importantly to
Subtotal Total. Ad e worksh art XVI- ne No  I/A	d line 12, columns (b), (d), and (e) eet in line 13 instructions to verify calculated a Relationship of Activities  Explain below how each activity accomplishment of the foundation NOT APPLICABLE	ulations) s to the A y for which on's exemp	ccomplishment of Ex	kempt Pur	poses  of Part XVI-A contrib	uted importantly to

Form 99	0-PF (2		H7 FOUND					62-1668			ge <b>13</b>
Part	XVII	Information Exempt O	on Regarding Tra rganizations	ansfers to and T	ransacti	ons and	Relationships V	Vith Nonc	harit	able	
ir	n sec						y other organization on 527, relating to		`	Yes	No
	•		orting foundation to	a noncharitable ex	empt organ	ization of					
											_X
(	2) Oth	ner assets							1a(2)		X
		ransactions									
											X
											X
											X
											Х
								1			X
											<u>X</u>
							Column (b) should a				
							If the foundation re- of the goods, other a				
(a) Line		(b) Amount involv		noncharitable exempt orga			cription of transfers, transac			-	
(4) 2		N/A	(0), (12			N/A				<u> </u>	
						1.					
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	$\rightarrow$			<u>.</u>							
	-										
d	escrib	ed in section 50	01(c) (other than sec following schedule		section 52		e tax-exempt organiz			sX	 
							<del></del>				
	Under	nenalties of penucy	I declare that I have exami	ned this return including a	ccompanying sc	hedules and	statements, and to the best	of my knowledge	and be	elief it	is true
			ration of preparer (other than t								
Sign Here	Sign	nature of officer or to	Mardie ustee		g)	Treus Title	tuver Sely.	May the IRS with the prep See instructions	arer sh		
	1	D-A/T	-do 1000	Depressed			Data		FINI		
Paid		Print/Type prepare		Preparer's signature	1.1	1.		·	ΓΙΝ - Ο 1 5 Ο	0066	6
Prepa	arer		DOCK THE AYCO COM	PANÝ, LP	Padde	·u_	Firm's EIN	00 11	0159 8743		<del>-</del>
Use C			► PO BOX 860			·	FilmSEIN	, = 55 11	<del></del>		
	,		SARATOGA SPR	INGS, NY		128	366-0860 Phone no	518-88	6-40	00	

2018 FORM 990-PF H7 FOUNDATION 62-1668517
FORM 990-PF - PART IV
CAPITAL GAINS AND LOSSES FOR TAX ON INVESTMENT INCOME

		INS AND LO		•		P	Date	Date sold
Kind of F	roperty		Desc	ription		or	acquired	Date Solu
Gross sale	Depreciation	Cost or	FMV	Adj basis	Excess of	М	Gain	
price less	allowed/	other	as of 12/31/69	l as of	FMV over		or (loss)	
expenses of sale	allowable	basis	12/31/69	12/31/69	adj basis	+	(IOSS)	<del>-</del>
					7110			
		TOTAL LONG-						
		PARTNERSHIP			THER			
		ESTATES OR	TRUST GAIN (	OR LOSS			398,332.	
							'	
								-
'OTAL GAIN(L	)SS)		. <b></b> .	. <b></b>			398,332.	
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62-1668517

FORM 990PF, PART I - OTHER INCOME

AND EXPENSES PER BOOKS REVENUE

NET INVESTMENT INCOME 56,126.

DESCRIPTION OTHER INCOME - K-1S

TOTALS

56,126.

56,126.

FORM 990PF, PART I - TAXES

	NET	INVESTMENT	INCOME	3,822.		
REVENUE	AND	EXPENSES	PER BOOKS	3,822.	.000,08	2,635.
			DESCRIPTION	FOREIGN TAXES PAID	FEDERAL TAXES PAID	PAYROLL TAXES

86,457.

TOTALS

3,822.

62-1668517

ATTACHMENT 2

H7 FOUNDATION

62-1668517

ATTACHMENT 3

- OTHER EXPENSES PART I FORM 990PF, REVENUE AND

46,825. EXPENSES PER BOOKS

INVESTMENT

INCOME 46,825. 206,603.

253,428.

TOTALS

INV. INT. EXP. - K-1S OTHER DEDUCTIONS - K-1S

DESCRIPTION

253,428.

)

20161688F1

2018 FORM 990-PF

H7 FOUNDATION

ACCUMULATED DEPRECIATION DETAIL ATTACHMENT 4 INVESTMENTS - LAND, BUILDINGS, EQUIPMENT FIXED ASSET DETAIL

BALANCE ENDING ADDITIONS DISPOSALS BALANCE

BEGINNING

ENDING BALANCE

ADDITIONS DISPOSALS

BEGINNING

METHOD/ CLASS

ASSET DESCRIPTION

BALANCE

98,038

98,038

98,038

98,038

TOTALS

LAND

62-1668517

ATTACHMENT 5

ATTACHMENT 5

INVESTMENTS
- OTHER
ΙΙ
PART
990PF,
FORM

ENDING <u>FMV</u>	2,518,648. 2,809,966. 5,859,954. 98,933. 8,418,584. 8,968,058. 3,984,493. 7,605,659.	41,995,263.
ENDING BOOK VALUE	1,132,499. 2,572,530. 5,317,112. 98,933. 799,413. 2,819,279. 2,375,409.	15,115,175.
BEGINNING BOOK VALUE	1,354,936. 1,380,387. 2,439,220. 4,958,021. 98,933. 799,413. 2,819,279. 2,375,409.	16,225,598.
DESCRIPTION	BAY STREET ASSOCIATES FIR TREE INT'L VALUE FUND LONE CASCADE PARK WEST INVESTORS FARALLON CAPITAL INST. PTRS IMPALA FUND SRS PARTNERS VALIENT CAPITAL PARTNERS LONE CEDAR	TOTALS

H7 FOUNDATION

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62-1668517

PART II - OTHER ASSETS FORM 990PF,

DESCRIPTION

BEGINNING BOOK VALUE

ENDING BOOK VALUE

ENDING FMV

'DISTRIBUTIONS RECEIVABLE

76,187.

76,187.

TOTALS

20161688F1

H7 FOUNDATION

γ.

62-1668517

FORM 990PE, PART VIII - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES	CERS, DIRECTORS, AND TRUSTEES		ATTACH	ATTACHMENT 7
NAME AND ADDRESS	TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION	COMPENSATION	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	EXPENSE ACCT AND OTHER ALLOWANCES
ROBERT D. HARDIE P.O. BOX 425 SARATOGA SPRINGS, NY 12866-0425	DIRECTOR - AS NEEDED		Ö	ö
MOLLY G. HARDIE P.O. BOX 425 SARATOGA SPRINGS, NY 12866-0425	DIRECTOR - AS NEEDED		. 0	Ö
	GRAND TOTALS	0	0	0

2018 FORM 990-PF 62-1668517	GRANTS AND CONTRIBUTIONS PAID DUBING THE YEAR	BUTOR	TION	GENERAL CHARITABLE FURFOSES 1,591,740	TOTAL CONTRIBUTIONS PAID 1,591,740				
BING THE YEAR		RELATIONSHIP TO SUBSTANTIA AND FOUNDATION STANTIS	FOUNDATION STATUS OF R	NONE. PC	·				
2018	UTIONS PAID DU	<del>-</del>	<del></del>	<del>-</del>		 	 <del></del> -	 	 
	AMTS AND CONTRIB	ų	2						
H7 FOUNDATION	FORM 990PF, PART XV - GRA	DETIDIENT MAME AND ADDRES	KECIFIENI NAME AND ADDRES	SEE ALIACHEU LISI					

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