# Form 990-PF Department of the Treasury

**Return of Private Foundation** 

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

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

Go to warm its gov/Form990PF for instructions and the latest information.

<u>Inte</u> ma	Revenue Service Go to www.irs.g	Jov/FormyyuPF for instr	uctions and ti	ne latest inf	ormation	լ, Մբ	en to rubiic inspection	
For c	alendar year 2018 or tax year beginning	. ``	_, 2018,	and endi	ng		, 20	
	of foundation				Α	Employer identific	cation number	
NEV	<u>I E</u> RA CAP FOUNDATION				1	81-1548325		
	r and street (or P O box number if mail is not delivered to	o street address)		Room/suite	В	Telephone numbe	r (see instructions)	
	•							
FOU	UNDATION SOURCE 501 SILVERSIDE	RD				(800) 83	9-1754	
City or	town, state or province, country, and ZIP or foreign posta	al code						
	, ,				С	If exemption application	ion is	
WII	MINGTON, DE 19809-1377					pending, dieck nere,		
G Ch	eck all that apply   Initial return	Initial return	of a former p	ublic char	ity p	1 Foreign organizati	ons check here	
	Final return	Amended re	-		-   -	2 Foreign organizat		
	Address change	Name chang	е			85% test, check he computation		
H Ch	eck type of organization X Section 501	c)(3) exempt private f	oundation	7/	<del> </del>	•		
_	Section 4947(a)(1) nonexempt charitable trust	Other taxable pr		tion U	E I	If private foundation under section 507(b)	status was terminated	
	r market value of all assets at JAcco						in a 60-month termination	
		ther (specify)					(1)(B), check here	
		column (d) must be on ca	ish basis )		_			
	Analysis of Revenue and Expenses (The	```					(d) Disbursements	
	total of amounts in columns (b), (c), and (d)	expenses per	(b) Net inve			djusted net ncome	for charitable purposes	
	may not necessarily equal the amounts in column (a) (see instructions))	books	Incom	16	'	HOUTHE	(cash basis only)	
$\top_1$	Contributions, gifts, grants, etc., received (attach schedule)	473,682.		<b>建建筑</b>	<b>的</b>	<b>国民党军队会员</b>	<b>超性對於學生的</b>	
2	Check if the foundation is not required to	<b>通過過過過過過過</b>				NOT THE PROPERTY OF	医神经性神经 化	
3	Interest on savings and temporary cash investments.	831.	The same of the sa	831.			<b>医性肾髓性肿瘤</b>	
4	Dividends and interest from securities							
5 a	_			_			THE WALL OF THE SECOND	
	Net rental income or (loss)	大大大大大大大大大大大大大大大大大大大大大大大大大大大大大大大大大大大大大	はないない 十二十二十二十二十二十二十二十二十二十二十二十二十二十二十二十二十二十二十二	" 在新港市	R. P. GW			
OU La	Net gain or (loss) from sale of assets not in the 10	-10	W. C.	THE PARTY OF THE P	W. Hall			
	Gross sales price for all 2.050	THE RESERVE	THE REAL PROPERTY.	THE REAL PROPERTY.	使性性的	/o/\\	PANETER	
9 7	Capital gain net income (from Part IV, line 2) .		And the second of the second s	1,311.		/S/	是自然的	
ŽI.	Net short-term capital gain	The state of the s	李星37798334	AL REAL PROPERTY.	warterstiller t	1 1 0	THE STATE OF THE S	
8 9	Income modifications	· · · · · · · · · · · · · · · · · · ·	THE REAL PROPERTY.	The state of the s			はどのと言葉をいい	
	Gross sales less returns	THE RESERVE OF THE PARTY OF THE	" STATE OF THE PARTY OF THE PAR		W. W. W.			
.   .	and allowances	THE THE PART OF TH	The state of the s				5-2-70/	
- 1	Gross profit or (loss) (attach schedule)	THE THE COMPANY OF THE STATE OF THE	THE STATE OF THE S	ALL SHIP	-14.45 C 1-15 6 19.	The second second second second	V / / / / /	
11	Other income (attach schedule) ATCH 1	5,377.	arther worth of Marin -	Kair Medi Tandres and Thomas			XUX / 2	
12	Total. Add lines 1 through 11	479,880.		2,142.				
13	Compensation of officers, directors, trustees, etc	0.		+			THE WASHINGTON TOWN	
ဖ 13 14	Other employee salaries and wages							
<u>∞</u>  ∵	· · · · · · · · · · · · · · · · · · ·							
8 15 A	Legal fees (attach schedule) ATCH 2	4,131.					4,131	
ລັ∣່ເ	Accounting fees (attach schedule) ATCH 3	10,250.			· ·		10,250	
ა  <u>`</u>	Other professional fees (attach schedule). [.4]	2,790.					2,790	
dministrative Experi	Interest							
	Taxes (attach schedule) (see instructions)[5].	170.						
Ē 10	Depreciation (attach schedule) and depletion.		<u> </u>					
E 20	Occupancy						Commontaines to see, 3.1 + California Libraria Designation	
⋖∣	Travel, conferences, and meetings							
21	Printing and publications			+				
D 22	Other expenses (attach schedule) ATCH . 6.	70,348.		110.			70,238	
23 24	•	,						
E 24	Total operating and administrative expenses.	87,689.		110.			87,409	
ğ	Add lines 13 through 23	620,003.	型素質性的核素性			<b>有3大学生来拉斯</b> 坦!	620,003	
J 25	Contributions, gifts, grants paid	707,692.	a with the state of the state o	110.	Minter of Light Street	0	707,412	
26	Total expenses and disbursements Add lines 24 and 25	37,032.	松龙洲海桃末绿路	EXECUTIVE 1	漢語為	A LONG TO THE PARTY OF THE PART	ENERGY WAS THE WAS A	
27	Subtract line 26 from line 12	-227,812.	THE REAL PROPERTY.					
. å	•	-227,012.	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	2,032.	<b>阿斯斯斯斯</b> <b>阿斯斯斯斯</b>	の で で は に に に に に に に に に に に に に	等。 1975年 1975 1975 1975 1975 1975 1975 1975 1975	
- 1	Net investment income (if negative, enter -0-)	<b>《公司》,《公司》,《公司》,《公司》,《公司》,《公司》,《公司》,《公司》,</b>	<b>数氢物剂用用的</b>	1.0	器器间距离器	1997年のようなない。	是被禁止的使用的 等的主要的	
0	Adjusted net income (if negative, enter -0-)	1. 1950 1953 1953 1953 1953 1953 1953 1953 1953	LONG PROMITE STATE	TO THE STATE OF THE			REMARKS WITH THE WAR WAR TO SEEL	

JSA For Paperwork Reduction Act Notice, see instructions. 8E1410 1 000

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Form **990-PF** (2018)

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Part II		Balance Chaste	Attached schedules and amounts in the	Beginning of year	End	of year
	artii	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-beari	ng			
	2	Savings and temporary	cash investments	300,123.	72,311.	
		Accounts receivable ▶				
		Less allowance for dou	btful accounts ▶			
	4	Pledges receivable ▶	<u> </u>			
	•	Less allowance for dou	btful accounts ▶ ·			_
	5	Grants receivable				
	6	Receivables due from	officers, directors, trustees, and other			•
		disqualified persons (at	tach schedule) (see instructions)			
	7	Other notes and loans r	eceivable (attach schedule)	The same of the sa		
		Less allowance for dou	btful accounts ▶			-
ষ	8	Inventories for sale or us	e			
ssets	-		eferred charges	1		
As	l		e government obligations (attach schedule)			
	l		stock (attach schedule)			
	l .	•	bonds (attach schedule)			
	11	Investments - land, buildings and equipment basis		THE WHEN STORY	<b>基础对于维护工作证明</b>	
•	• -	Less accumulated deprecia	ation >	INCOMPANIES STATES TO SECTION OF THE PROPERTY	S. config World F. and S. Lindson and Landson	
	12	(attach schedule)	loans			
	13		ach schedule)		,	
•		Land, buildings, and equipment basis	<b>&gt;</b>			The state of the s
		Less accumulated deprecia		- Artifer age tillerage imegeneille Agest or to get to any absented a	SOUNDS AND ADDRESS OF THE PROPERTY OF THE PROP	B. NOT SELECTION AND AND AND AND AND AND AND AND AND AN
	15	(attach schedule) Other assets (describe	·	<del></del>		
			completed by all filers - see the	······································		
		•	age 1, item I)	l	72,311.	72,311.
_	17		accrued expenses		<u></u>	<b>"是我们是我们是我们的</b>
	l	, , ,				
s	19	• -	· · · · · · · · · · · · · · · · · · ·			
iţie	20		ors, trustees, and other disqualified persons.			
Ē	21	·	otes payable (attach schedule)			<b>海罗思斯温度</b>
Liabilities		• •	e >)		•	
	**	Other habilities (describe	,			
	23	Total liabilities (add line	es 17 through 22)		0.	
_			w SFAS 117, check here			
Ś	1		through 26, and lines 30 and 31.			
ည		•	-	•	•	
alances	24				,	<b>全国的国际的国际的</b>
	25 26	•		-		Secretary and the second of th
b	20	•	ot follow SFAS 117, check here	•		<b>福度制度が定法があれては、展展</b>
F		and complete lines 27				
Net Assets or Fund B	2-	•	<del>-</del>		•	
ħ	27 28	·	cipal, or current funds		*	
Se	29	•	r land, bldg, and equipment fund ulated income, endowment, or other funds	300,123.	72,311.	THE STATE OF THE S
ğ	ı	• .		300,123.	72,311.	
et	30 31		d balances (see instructions)	30071201		THE REAL PROPERTY.
z			·	300,123.	72,311.	
F	art II		nges in Net Assets or Fund Bala	<del></del>	,511.	小小学は一個なるないというないないないないないないない
			palances at beginning of year - Part		must agree with	T
7						300,123.
_			ed on prior year's return)			-227,812
			line 27a			227,012
			•	<u></u>		72,311.
				• • • • • • • • • • • • • • • • • • • •		12,311
5	Dec	reases not included in	n line 2 (itemize) ► ealances at end of <u>year (line 4 minus</u>	lino 5) Dest II anti-mar (	b) line 30	72,311.
b	1012	ai net assets of tund b	ialances at end of year (line 4 minus	s iirie 5) - Part II, Column (	b), line 30 6	12,311

Part IV Capital Gains and Losses for Tax on Investment Income

Page 3

		scribe the kind(s) of property sold (for a rick warehouse, or common stock, 200		acquired P - Purchase D - Donation	(c) Date acquired (mo , day, уг)	<b>(d)</b> Date sold (mo , day, уг )
1 a	SEE PART IV SCHED	<del></del>		D - Donation		
<u>'a</u> b						
<u>_</u>						-
d	<del>-</del>					
<u>-</u> е	<del>-</del>	-				
	(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		(h) Gain or (lo ((e) plus (f) minu	
<u> </u>						<del></del>
b						
C						•
d						
e						
	Complete only for assets st	howing gain in column (h) and owned	by the foundation on 12/31/69	Ø	Gains (Col (h) ga	ain minus
	(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	còl	(k), but not less t Losses (from co	han -0-) or
а						
b						
c						
d						<u>.                                    </u>
е				,		
2	Capital gain net income	or (net capital loss)	ain, also enter in Part I, line 7 loss), enter -0- in Part I, line 7	2		1,311.
3		ain or (loss) as defined in sections				
	If gain, also enter in Pa	art I, line 8, column (c). See ins	structions If (loss), enter -0- in			
		<u> </u>		3		0.
Pai	t V Qualification L	<u> Jnder Section 4940(e) for Re</u>	duced Tax on Net Investment I	ncome		
	es," the foundation doesn	't qualify under section 4940(e)	***			Yes X No
1_		nount in each column for each ye	ar, see the instructions before maki	ng any er		
Cale	(a)  Base period years andar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of nonchantable-use assets		(d) Distribution ra (col (b) divided by	
	2017	1,114,631.	220,829.			5.047485
	2016	177,475.	134,538.	!		1.319144
	2015			_		
	2014					
	2013					
2	Total of line 1, column (o	d)		2		6.366629
3	Average distribution ratio	o for the 5-year base period - divid	de the total on line 2 by 5 0, or by			
	the number of years the	foundation has been in existence	ıf less than 5 years	3		3.183315_
4	Enter the net value of no	4		134,724.		
5	Multiply line 4 by line 3.			5		428,869.
6	Enter 1% of net investm	ent income (1% of Part I, line 27b)		6		20.
7	Add lines 5 and 6			7		428,889.
8	Enter qualifying distribut If line 8 is equal to or g Part VI instructions	nons from Part XII, line 4 reater than line 7, check the box	c in Part VI, line 1b, and complete	8 that part	using a 1% ta	707,412. x rate See the

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81-1548325

Par	t VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see	instru	ctions	3)	
1a	Exempt operating foundations described in section 4940(d)(2), check here  and enter "N/A" on line 1			Į	
	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			20.	
	here X and enter 1% of Part I, line 27b	Ì			
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		_	20.	
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-)			20.	
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0			20.	
6	Credits/Payments			₹	
а	2018 estimated tax payments and 2017 overpayment credited to 2018 6a			1	
b	Exempt foreign organizations - tax withheld at source			[	
С	Tax paid with application for extension of time to life (Form 6006)			i	
d	Backup withholding erroneously withheld			5.	
7	Total credits and payments Add lines 6a through 6d				
8	Effect any penalty for underpayment of estimated tax officer field in 1 of the 2220 to distance 1.1.1.1.1.			15.	
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed		_		
10 11	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid				
	t VII-A Statements Regarding Activities		_		
	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it		Yes	No	
ıa	participate or intervene in any political campaign?	1a	,,,,	X	
ь.	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the	1.2	-		
b	Instructions for the definition	1b		Х	
	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			٠.	
С	Did the foundation file Form 1120-POL for this year?	1c		Х	
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year				
	(1) On the foundation ▶ \$				
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed		,		
	on foundation managers > \$			-	
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		Х	
	If "Yes," attach a detailed description of the activities				
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles			,	
	of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		X	
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		Х	
b	If "Yes," has it filed a tax return on Form 990-T for this year?	4b	37	<u> </u>	
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year? . ATCH. 7	5	Х	<del></del>	
	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			1	
	By language in the governing instrument, or			,	
	By state legislation that effectively amends the governing instrument so that no mandatory directions that		X		
	conflict with the state law remain in the governing instrument?	6_	X	<del></del>	
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	- 11	1	
8a	Enter the states to which the foundation reports or with which it is registered. See instructions CA, DE, NY,			!	
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	Х	<del></del> -	_
9	Is the foundation claiming status as a private operating foundation within the meaning of section $4942(j)(3)$ or		-	-	1
	4942(j)(5) for calendar year 2018 or the tax year beginning in 2018? See the instructions for Part XIV If "Yes,"			v	F
	complete Part XIV	9		X	-
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their		Х	ĺ	
	names and addresses . ATCH . 8	10 om 99			
		om MM	ローピアノ	/UIX)	

Form	990-PF (2018) NEW ERA CAP FOUNDATION 81-1548	325	F	Page <b>5</b>
Par	t 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>	<u>X</u>
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Х	
	Website address ▶ N/A		_	
14	The books are in care of ► FOUNDATION SOURCE  Telephone no ► 800-839-	175	4	
	Located at ▶501 SILVERSIDE ROAD, SUITE 123 WILMINGTON, DE ZIP+4 ▶ 19809-13	3//_		т—г
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here		▶	· 🔲
	and enter the amount of tax-exempt interest received or accrued during the year		I V	
16	At any time during calendar year 2018, did the foundation have an interest in or a signature or other authority	$\overline{}$	Yes	No
	over a bank, securities, or other financial account in a foreign country?	16		- 1
	See the instructions for exceptions and filing requirements for FinCEN Form 114 If "Yes," enter the name of			
Dar	the foreign country ▶ t VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
гаг			Yes	No
4.	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.  During the year, did the foundation (either directly or indirectly)		103	
Ia	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?			
	(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?			
	(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)?	٠.		1
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the	Ι ΄	ľ	
	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 ) Yes			
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	1b	Х	
	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			ليــا
	were not corrected before the first day of the tax year beginning in 2018?	1 c		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			1
	6e, Part XIII) for tax year(s) beginning before 2018?			1
	If "Yes," list the years			
a	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	2b		
_	all years listed, answer "No" and attach statement - see instructions)	1	-	
·	• The providence of section foreign applied to any of the years listed in Za, list the years liefe			
32	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise			
Ju	at any time during the year?			
b	If "Yes," did it have excess business holdings in 2018 as a result of (1) any purchase by the foundation or			
_	disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the			
	Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of	l		
	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		X
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	,	X
	Fo	m 99	0-PF	(2018)

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Га	t VII-B	Statements Regarding Activities	TOF WHICH FORM	4/20 May be Keq	uneu (conti	iueu)			
5a	During the	e year, did the foundation pay or incur any am	ount to		_	_		Yes	No
	(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))? Yes X No								1
	(2) Influence the outcome of any specific public election (see section 4955), or to carry on,								
	directly or indirectly, any voter registration drive?								{
	(3) Provid	le a grant to an individual for travel, study, or o	other similar purposes?	·	. Yes	X No	-		
		le a grant to an organization other than a							{
	sectio	n 4945(d)(4)(A)? See instructions			Yes	X No			{
	(5) Provid	le for any purpose other than religious, c	haritable, scientific, I	iterary, or educationa	ıl				{
	purposes, or for the prevention of cruelty to children or animals? Yes X No								ļ
ь	If any an	swer is "Yes" to 5a(1)-(5), did any of the	transactions fail to	qualify under the ex	ceptions desc	cribed in			1
	Regulations section 53 4945 or in a current notice regarding disaster assistance? See instructions								
	Organizat	ions relying on a current notice regarding disa	ster assistance, check	here		▶			Ì
С	If the an	swer is "Yes" to question 5a(4), does the	foundation claim e	xemption from the ta	ax				
	because i	t maintained expenditure responsibility for the	grant?	·	. Yes	No			
	If "Yes," a	ittach the statement required by Regulations s	ection 53 4945-5(d)						į
6a	Did the f	oundation, during the year, receive any ful	nds, directly or indire	ectly, to pay premiun	ns				į
	on a perso	onal benefit contract?			Yes	X No	_ 1		<u>.</u> .
b		undation, during the year, pay premiums, dire			ct?		6b		X
	If "Yes" to	6b, file Form 8870							į
7a	At any tim	e during the tax year, was the foundation a p	arty to a prohibited tax	shelter transaction?.	. Yes	X No			!
b	If "Yes," o	lid the foundation receive any proceeds or ha	ve any net income attr	ibutable to the transacti	on?		7b		
8	Is the fou	ndation subject to the section 4960 tax on pa	yment(s) of more tha	n \$1,000,000 in			-		į
		tion or excess parachute payment(s) during the				X No			
Pa	rt VIII	Information About Officers, Directo and Contractors	rs, Trustees, Fou	indation Managers	s, Highly Pa	id Empl	oyees,		
1	List all of	ficers, directors, trustees, and foundat			See instructi	ions.			
		(a) Name and address	(b) Title, and average	(c) Compensation	(d) Contribution		(e) Expen	se acco	unt,
		(a) Name and address	nours per week	(if not paid,	employee benefi	it pians	· other of		
		(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	and deferred comp		` other al	lowance	es 
<u> </u>	<u> </u>	(a) Name and address	devoted to position	enter -0-)		pensation	other al	lowance	
ATC	H 9	(a) Name and address	devoted to position	enter -0-)			` óther al	lowance	0 .
ATC	Н 9	(a) Name and address	devoted to position	enter -0-)		pensation	other al	lowance	
ATC	H 9	(a) Name and address	devoted to position	enter -0-)		pensation	other al	lowance	
ATC	Н 9	(a) Ivalile allu auuress	devoted to position	enter -0-)		pensation	other al	lowance	
ATC	H 9	(a) Ivalile allu auuress	devoted to position	enter -0-)		pensation	other al	lowance	
ATC	H 9	(a) Name and address	devoted to position	enter -0-)		pensation	`óther al	lowance	
			devoted to position	0 .	and deferred comp	O .	other al		0.
ATC:		ation of five highest-paid employees	devoted to position	0 .	and deferred comp	0.	other al		0.
2	Compens "NONE."	ation of five highest-paid employees	(other than thos	0.	and deferred comp	O .	other al	one,	0.
2	Compens "NONE."		(other than thos	0 .	e 1 - see in  (d) Contributi	ons to enefit lerred	ns). If n	one,	0. enter
2	Compens "NONE."	ation of five highest-paid employees	(other than thos	0.	and deferred comp	ons to enefit lerred	ns). If n	one,	0. enter
2	Compens "NONE."	ation of five highest-paid employees	(other than thos	0.	e 1 - see in  (d) Contributi	ons to enefit lerred	ns). If n	one,	0. enter
2	Compens "NONE." Name and a	ation of five highest-paid employees	(other than thos	0.	e 1 - see in  (d) Contributi	ons to enefit lerred	ns). If n	one,	0. enter
2	Compens "NONE." Name and a	ation of five highest-paid employees	(other than thos	0.	e 1 - see in  (d) Contributi	ons to enefit lerred	ns). If n	one,	0. enter
2	Compens "NONE." Name and a	ation of five highest-paid employees	(other than thos	0.	e 1 - see in  (d) Contributi	ons to enefit lerred	ns). If n	one,	0. enter
2	Compens "NONE." Name and a	ation of five highest-paid employees	(other than thos	0.	e 1 - see in  (d) Contributi	ons to enefit lerred	ns). If n	one,	0. enter
2	Compens "NONE." Name and a	ation of five highest-paid employees	(other than thos	0.	e 1 - see in  (d) Contributi	ons to enefit lerred	ns). If n	one,	0. enter
2	Compens "NONE." Name and a	ation of five highest-paid employees	(other than thos	0.	e 1 - see in  (d) Contributi	ons to enefit lerred	ns). If n	one,	0. enter
2	Compens "NONE." Name and a	ation of five highest-paid employees	(other than thos	0.	e 1 - see in  (d) Contributi	ons to enefit lerred	ns). If n	one,	0. enter
2	Compens "NONE." Name and a	ation of five highest-paid employees	(other than thos	0.	e 1 - see in  (d) Contributi	ons to enefit lerred	ns). If n	one,	0. enter
(a)	Compens "NONE."  Name and a	ation of five highest-paid employees	(other than thos  (b) Title, and average hours per week devoted to position	enter -0-)  0 .  e included on line (c) Compensation	e 1 - see in  (d) Contributi	ensation  0.  struction  ons to enefit ferred alon	ns). If n	one,	0. enter

$D \sim $	•	•
rau		

NONE  Total number of of Part IX-A S  List the foundation	st-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 of Part IX-A State of the foundation organizations and of the N/A	(a) Name and address of each person paid more than \$50,000  (b) Type of service	
Total number of of Part IX-A SI List the foundation organizations and of N/A	others receiving over \$50,000 for professional services	
Total number of of Part IX-A SI List the foundation organizations and of the N/A	others receiving over \$50,000 for professional services	
Part IX-A Since List the foundation organizations and control N/A	others receiving over \$50,000 for professional services	
Part IX-A Since List the foundation organizations and control N/A	others receiving over \$50,000 for professional services	
Part IX-A Si List the foundation organizations and co	others receiving over \$50,000 for professional services	
Part IX-A Si List the foundation organizations and co	others receiving over \$50,000 for professional services	
Part IX-A Since List the foundation organizations and control N/A	others receiving over \$50,000 for professional services	
Part IX-A Si List the foundation organizations and co	others receiving over \$50,000 for professional services	
Part IX-A Si List the foundation organizations and co	others receiving over \$50,000 for professional services	
Part IX-A Si List the foundation organizations and co	others receiving over \$50,000 for professional services	
Part IX-A Since List the foundation organizations and control N/A	others receiving over \$50,000 for professional services	
Part IX-A Si List the foundation organizations and co	others receiving over \$50,000 for professional services	
List the foundation organizations and of 1 N/A		l
1 N/A	summary of Direct Charitable Activities	
	n's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of other beneficianes served, conferences convened, research papers produced, etc.	Expenses
2		
2		
2		
	· · · · · · · · · · · · · · · · · · ·	
_		
3		
4		
	Summary of Program-Related Investments (see instructions)	
	largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1 NONE		
		ļ
2		1
<del></del>		
All other program-	-related investments. See instructions	
3		
NONE	· · · · · · · · · · · · · · · · · · ·	

Form 990-PF (2018)

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Par	see instructions)	ign toun	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	136,776.
	Fair market value of all other assets (see instructions)	1c	
d		1d	136,776.
	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)	_	
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	136,776.
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see		
	instructions)	4	2,052.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4.	5	134,724.
6	Minimum investment return. Enter 5% of line 5	6	6,736.
Pai	TXI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating fou and certain foreign organizations, check here ▶ and do not complete this part)	ndations	
1	Minimum investment return from Part X, line 6	1	6,736.
2 a	Tax on investment income for 2018 from Part VI, line 5 2a 20.		
b	Income tax for 2018 (This does not include the tax from Part VI).	]	
	Add lines 2a and 2b	2c	20.
3	Distributable amount before adjustments Subtract line 2c from line 1	3	6,716.
4	Recoveries of amounts treated as qualifying distributions	I I	
5	Add lines 3 and 4	[ [	6,716.
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII,		
	line 1	7	6,716.
	t XII Qualifying Distributions (see instructions)	<del></del>	
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		707 410
	Expenses, contributions, gifts, etc - total from Part I, column (d), line 26		707,412.
	Program-related investments - total from Part IX-B		
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,	l i	
	purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the		
	Suitability test (prior IRS approval required)	3a	
	Cash distribution test (attach the required schedule)	3b	707,412.
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	707,412.
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		20.
6	Adjusted qualifying distributions. Subtract line 5 from line 4		707,392.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculated for the section 4940(e) reduction of tax in those years	liculating	whether the foundation

Page 9

Pa	rt XIII Undistributed Income (see instr	uctions)	<del>-</del>	<u> </u>	
1	Distributable amount for 2018 from Part XI,	(a) Corpus	(b) Years prior to 2017	(c) 2017	(d) 2018
•	line 7	-			6,716.
•	Undistributed income, if any, as of the end of 2018				,
	· •				1
	Enter amount for 2017 only		··· <del>-</del>		
	· · · — · — · · · · · · · · · · · · · ·			υ <b>Σ</b> η Ε , εκ	1,
	Excess distributions carryover, if any, to 2018.	, the state of the state of	The Thirty House	er call to be more	
	From 2014				'
	From 2015				
	From 2016 170,762.				1
	From 2017 1,093,756.				,
-	Total of lines 3a through c	1,264,518.	San Nation		1 1 2 1
	Qualifying distributions for 2018 from Part XII,				
•	line 4 ▶ \$				
	Applied to 2017, but not more than line 2a				,
ŀ	Applied to undistributed income of prior years (Election required - see instructions)				
c	: Treated as distributions out of corpus (Election required - see instructions)				1
	Applied to 2018 distributable amount				6,716.
	Remaining amount distributed out of corpus	700,696		and the second of the second	and a second of the second
5	Excess distributions carryover applied to 2018 (If an amount appears in column (d), the same amount must be shown in column (a) )				
6	Enter the net total of each column as indicated below:			4, , 4 , 14	المال و ما سا
ā	Corpus Add lines 3f, 4c, and 4e Subtract line 5	1,965,214.		56 2 - Table 20 1	
	Prior years' undistributed income Subtract	<del></del>			
٠	line 4b from line 2b				
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				
	Subtract line 6c from line 6b Taxable				
•	amount - see instructions				
6	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				
-	Amounts treated as distributions out of corpus				1
′	•				
	to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be				
	required - see instructions)	10,000.			,
۰	Excess distributions carryover from 2013 not		· · · · · · · · · · · · · · · · · · ·		i
8	applied on line 5 or line 7 (see instructions)				1
9	Excess distributions carryover to 2019.				,
	Subtract lines 7 and 8 from line 6a	1,955,214.			1
10	Analysis of line 9				,
	Excess from 2014				
t	Excess from 2015				'
	Excess from 2016 170,762.				
	1 Excess from 2017 1,093,756.				'
	Excess from 2018 690, 696.				1

Рa	rt XIV Private Op	erating Foundations	(see instructions ai	nd Part VII-A, questi	on 9)1	NOT APPLICABLE
1 a	If the foundation has	_			= 1	
	foundation, and the ruling	_				
	Check box to indicate v		is a private operating		section 4942(j	)(3) or 4942(j)(5)
2 a	Enter the lesser of the ad- justed net income from Part	Taxyear	(b) 0047	Prior 3 years	(4) 2045	(e) Total
	I or the minimum investment	(a) 2018	(b) 2017	(c) 2016	(d) 2015	
	return from Part X for each					
L	year listed			<u> </u>		
	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					
е	Qualifying distributions made					
	directly for active conduct of exempt activities Subtract line 2d from line 2c					
3	Complete 3a, b, or c for the			X		
а	alternative test refled upon "Assets" alternative test - enter		/			!
	(1) Value of all assets					
	(2) Value of assets qualifying under section					
	4942(j)(3)(B)(i)					
Ь	"Endowment" alternative test- enter 2/3 of minimum invest-					
	ment return shown in Part X,					
_	line 6 for each year listed					
С	"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 sup-					
	port from an exempt organization					
	(4) Gross investment income .					<u> </u>
	any time d	uring the year - see	instructions.)	only if the founda	ition nad \$5,000 o	r more in assets at
1	Information Regarding List any managers of			e than 2% of the tota	ul contributions receiv	red by the foundation
a	before the close of any					rea by the roundation
h	NONE List any managers of	the foundation who	own 10% or more of	the stock of a corn	oration (or an equal)	/ large portion of the
b	ownership of a partner					y large portion of the
	, ,	,		J		
	N/A					
2	Information Regarding	g Contribution, Grant	, Gift, Loan, Scholarsh	ip, etc., Programs:		
	Check here ► X if the unsolicited requests for	or funds If the found	ation makes gifts, gra	to preselected charints, etc., to individua	table organizations a ls or organizations ur	and does not accept nder other conditions,
	complete items 2a, b, o			<u> </u>		
а	The name, address, a	nd telephone number	or email address of th	e person to whom app	lications should be add	Iressed
b	The form in which app	lications should be sub	omitted and information	n and materials they	should include	
С.	Any submission deadli	nes				
•	y sabimosion doddii					
d	Any restrictions or lift	mitations on awards	such as by geogra	aphical areas, charita	ble fields, kinds of	institutions, or other

Part XV Supplementary Information	(continued)		<del></del>	<del> </del>
3 Grants and Contributions Paid Dur Recipient Name and address (home or business)	ring the Year or App	roved for	Future Payment	
Recipient	show any relationship to any foundation manager	status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		
a Paid during the year				
ATCH 10				
AICH 10				
		1		
				1
		Ì		
		Ì		1
Total			▶ 3a	620,003.
b Approved for future payment			i -	
2 y pp. com ver ratare paymont				
		1		
Total	•			

Part XVI	A Analysis of Income-Prod	ucing Act	ivities			
Enter gross	amounts unless otherwise indicated	Unrela (a) Business code	(b) Amount	(c)	y section 512, 513, or 514 (d) Amount	(e) Related or exempt function income
1 Program	service revenue	Business code	Amount	Exclusion code	Amount	(See instructions)
a						
b				<u> </u>		
c				<b></b>		
d						
е					· <u>-</u> -	
f						<del></del>
g Fees	and contracts from government agencies					
2 Member	ship dues and assessments			1.1		<del></del>
3 Interest o	n savings and temporary cash investments -			14	831.	
4 Dividend	is and interest from securities			_ <del> </del>		
5 Net renta	al income or (loss) from real estate					
a Debt-	-financed property			<del>                                     </del>		
b Not d	debt-financed property					
6 Net renta	l income or (loss) from personal property					
7 Other in	vestment income					
8 Gain or (I	oss) from sales of assets other than inventory			18	-10.	
9 Net inco	me or (loss) from special events					
10 Gross pi	rofit or (loss) from sales of inventory					
11 Other re-	venue a					
ь <u>А</u>	ATCH 11				5,377.	
c						·
d			_			
е						
12 Subtotal	Add columns (b), (d), and (e)				6,198.	
13 Total. Ad	dd line 12, columns (b), (d), and (e)				13	6,198.
	neet in line 13 instructions to verify calc					
Part XVI-	B Relationship of Activitie	s to the A	ccomplishment of E	xempt Pur	poses	
Line No	Explain below how each activit	y for which	n income is reported	ın column (	e) of Part XVI-A contrib	uted importantly to the
▼	accomplishment of the foundation	on's exemp	t purposes (other than	by providing	funds for such purpose	s) (See instructions)
					<del></del>	
						<del>.</del>
					· - · - · - · - · - · - · - · · - · · - ·	
				<del></del>		
	•		<u></u>			
	-					
		<del></del>				
		<del> </del>				
			. <u> </u>	_		
		_				
			<u> </u>			

81-1548325 Page **13** Information Regarding Transfers to and Transactions and Relationships With Noncharitable Exempt Organizations Part XVII

1	Did the	e organization directl	ly or indirectly e	ngage in any of	the following	with any	other orga	nization o	lescribed		Yes	No
	in sec	ction 501(c) (other	than section	501(c)(3) organi	zations) or	in sectio	n 527, re	lating to	political			
		zations?		( ), (	,		•	J	•			ĺ
а	•	fers from the reporting	o foundation to a	a noncharitable e	xempt organ	zation of						
_		sh								1a(1)		Х
		her assets										X
<b>h</b>		transactions							• • • • • •	ا <i>رڪيت</i> ا ا		
D												х
		les of assets to a nor		•						$\overline{}$		X
		rchases of assets fro										
		ental of facilities, equip								1b(3)		X
	(4) Re	eimbursement arrange	ements				• • • • •			1b(4)		X
	(5) Lo	ans or Ioan guarantee	s							1b(5)		X
	(6) Pe	rformance of service	s or membership	p or fundraising se	olicitations					1b(6)		X
С	Sharın	ng of facilities, equipm	ent, mailing lists	, other assets, or	paid employe	ees				1c		X
d	If the	answer to any of the	e above is "Yes	," complete the	following sc	hedule C	olumn (b) s	should alv	ways show	the t	fair m	ıarket
	value	of the goods, other a	assets, or servic	es given by the i	reporting fou	indation I	f the found	lation rec	eived less	than	faır m	ıarket
	value	in any transaction or	sharing arrange	ement, show in c	olumn (d) th	ne value o	f the goods	, other a	ssets, or s	ervice	s rec	eived
(a) Li	ne no	(b) Amount involved	(c) Name of no	oncharitable exempt or	ganization	(d) Desci	ription of transf	fers, transact	ions, and shar	ing arra	ngeme	nts
		N/A	<del></del>	·	-	N/A						
				•								
				-								
			<del></del>									—
	+			-								
	-+											
	-											
	-											
2a	Is the	foundation directly of	or indirectly affil	lated with, or re	lated to, one	or more	tax-exemp	t organiza	ations			
		bed in section 501(c)	-				•	_			es X	No
		s." complete the follow		( // //					_			-
		(a) Name of organization		(b) Type of	organization		(	(c) Descripti	on of relations	hip		
-		<del> </del>							_			
			-									
			<del></del>	-								—
							<del></del>					
	Unde	r penalties of perjury I declar	re that I have examine	ed this return, including	accompanying sci	nedules and s	tatements, and t	o the best of	mv knowleda	e and b	elief. it	is true.
	correc	ct, and complete Declaration of							,		,	
Sigr		V P(.K)-		11/12/	19	Tro	00000	[	May the IRS	discus	s this	retum
Here	,   🖳	ran wee-			<u> </u>	110	<u>42010</u>		with the pre	- F	1	oelow?
	Sigi	nature of officer or trustee		Date •		Title			See instructions	s <u>X</u>	Yes	No
	Ш.	72		<u></u>			1					
Paid		Print/Type preparer's nar		Preparer's signatur			Date	Che	·∽ [ "	MIT		_
		JEFFREY D HASK		JEFFREY D	HASKELL		11/05/2	2019 self-		P013		<u>U</u>
	oarer		UNDATION SO					Firm's EIN	▶51039	98347	7	
Use	Only	Firm's address ► ON!	E HOLLOW LN	, STE 212								
		LA	KE SUCCESS,	NY		110	42	Phone no	800-83	39-17	754	
										- 000	DE	/2010\

### Schedule B

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

### Schedule of Contributors

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

Go to www.irs.gov/Form990 for the latest information.

OMB No 1545-0047

2018

Employer identification number Name of the organization NEW ERA CAP FOUNDATION 81-1548325 Organization type (check one) Filers of: Section: 501(c)( Form 990 or 990-EZ ) (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization Form 990-PF 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See instructions General Rule For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions Special Rules For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000, or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1 Complete Parts I and II For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000 If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions

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

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	ARTHURS, GLENN W.  4228 LOWER RIVER ROAD  YOUNGSTOWN, NY 141749702	\$12,000.	Person  Payroll  Noncash  (Complete Part II for noncash contributions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
2	BANK OF AMERICA CORP  3400 PAWTUCKET AVE  EAST PROVIDENCE, RI 02915	\$5,616.	Person X Payroll Noncash (Complete Part II for noncash contributions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
3	BISON BASEBALL INC.  P.O. BOX 245  BUFFALO, NY 14240	\$ 5,616.	Person X Payroll Noncash (Complete Part II for noncash contributions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
4	BLUE STAR OPERATIONS SERVICES LLC  ONE COWBOYS WAY  FRISCO, TX 75034	\$10,000.	Person X Payroll Noncash (Complete Part II for noncash contributions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
5	C.H. ROBINSON INTERNATIONAL INC.  14701 CHARLSON RD  EDEN PRAIRIE, MN 55347	\$ 5,616.	Person X Payroll Noncash (Complete Part II for noncash contributions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
6	CAA SPORTS  2000 AVENUE OF THE STARS  LOS ANGELES, CA 90067	\$ 20,616.	Person  Payroll  Noncash  (Complete Part II for noncash contributions)		

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		
7_	DELAWARE NORTH COMPANIES, INC.  250 DELAWARE AVE  BUFFALO, NY 14202	- - \$5,616.	Person  Payroll  Noncash  (Complete Part II for noncash contributions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
8	FANATICS  8100 NATIONS WAY  JACKSONVILLE, FL 32256	5,616.	Person  Payroll  Noncash  (Complete Part II for noncash contributions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
9	FREED MAXICK CPAS, P.C.  424 MAIN ST., SUITE 800  BUFFALO, NY 14202	- - \$	Person  Payroll  Noncash  (Complete Part II for noncash contributions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
10	GABE'S COLLISION EAST, LLC  5817 TRANSIT ROAD  EAST AMHERST, NY 14051	- \$\$	Person  Payroll  Noncash  (Complete Part II for noncash contributions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
11	HARTER SECREST & EMERY LLP  50 FOUNTAIN PLAZA, SUITE 1000  BUFFALO, NY 14202	- _ \$5,616.	Person X Payroll Noncash (Complete Part II for noncash contributions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
12	HEALTHNOW NEW YORK INC.  257 WEST GENESEE STREET  BUFFALO, NY 14202	- - \$\$.	Person  Payroll  Noncash  (Complete Part II for noncash contributions)		

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		
13	HUNT REAL ESTATE ERA  430 DICK RD.  DEPEW, NY 14043	\$ 5,616.	Person Payroll Noncash (Complete Part II for noncash contributions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
14	KEYBANK NATIONAL ASSOCIATION  C/O MICHAEL MCMAHON, ONE PENN'S WAY  NEW CASTLE, DE 19720	\$ 5,616.	Person Payroll Noncash (Complete Part II for noncash contributions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
15	KRIEGER, NANCY S.  272 MC KINLEY PKY.  BUFFALO, NY 14220	\$ 5,616.	Person X Payroll Noncash (Complete Part II for noncash contributions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
16	LA LIVE PROPERTIES LLC  800 W. OLYMPIC BLVD. SUITE 305  LOS ANGELES, CA 90015	\$ 5,616.	Person Payroll Noncash (Complete Part II for noncash contributions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
17	LAWLEY SERVICES INC.  361 DELAWARE AVE  BUFFALO, NY 14202	\$ 5,616.	Person X Payroll Noncash (Complete Part II for noncash contributions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
18	LIDS FOUNDATION, INC.  10555 LIDS WAY  ZIONSVILLE, IN 46077	\$\$	Person Payroll Noncash (Complete Part II for noncash contributions)		

Part I	Contributors (see instructions) Use duplicate copies	of Part I if additional space	e is needed
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contribution	(d) ns Type of contribution
19	LOS ANGELES DODGERS LLC	_	Person X
	1000 VIN SCULLY AVE	\$io,c	000. Payroll Noncash
	LOS ANGELES, CA 900121199	_	(Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contribution	(d) Type of contribution
20	M&T BANK		Person X
	C/O MARK HOFFMAN, ONE FOUNTAIN PLAZA	\$ 5,6	Payroll Noncash
	BUFFALO, NY 14203	_	(Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contribution	(d) Type of contribution
21	M&T INSURANCE AGENCY		Person X
	P.O. BOX 767	\$ 5,6	Payroll Noncash
	BUFFALO, NY 14240	_	(Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contribution	(d) ns Type of contribution
22_	MAJOR LEAGUE BASEBALL CHARITIES, INC.		Person X
	245 PARK AVE	\$25,6	Payroll Noncash
	NEW YORK, NY 10167	_	(Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contribution	(d) Type of contribution
23	MAJOR LEAGUE SOCCER, LLC		Person X
	420 5TH AVE, 7TH FL	\$10,0	Payroll Noncash
	NEW YORK, NY 10018	_	(Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contribution	(d) Type of contribution
24	NBA PROPERTIES, INC.	_	Person X
	100 PLAZA DR.	\$10,0	Payroll Noncash
l		<u> </u>	Noncasii

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		
25	NEW ENGLAND PATRIOTS FOUNDATION  C/O DONNA SPIGAROLO, 1 PATRIOT PLACE	s 5,616.	Person X Payroll		
	FOXBORO, MA 02035-1374	\$ 5,616.	Noncash (Complete Part II for noncash contributions )		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
26_	NEW ERA CAP CO., INC.	_	Person X		
	160 DELAWARE AVE	\$69,121.	Payroll Noncash		
	BUFFALO, NY 14202	_	(Complete Part II for noncash contributions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
27	NEW ERA PARK CAPS  3950 BROADWAY  DEPEW, NY 14043	\$5,616.	Person  Payroll  Noncash  (Complete Part II for noncash contributions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
28	NEW YORK YANKEES  C/O M. TUSIANI, ONE EAST 161ST ST.  BRONX, NY 10451	\$\$	Person   X     Payroll     Noncash     (Complete Part II for noncash contributions )		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
29_	NFL VENTURES LP  345 PARK AVENUE  NEW YORK, NY 10154	\$15,616.	Person  Payroll  Noncash  (Complete Part II for noncash contributions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
30	O'MARA, BRIAN J.  28 ST. GEORGE PLACE  PALM BEACH GARDENS, FL 33418	\$5,616.	Person  Payroll  Noncash  (Complete Part II for noncash contributions)		
		<del>-</del>			

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			
31	PEGULA SPORTS AND ENTERTAINMENT, LLC  1 SEYMOUR H. KNOX III PLAZA  BUFFALO, NY 14203	\$15,716.	Person Payroll Noncash  (Complete Part II for noncash contributions)			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
32	RAINBOW SANDALS, INC.  900 CALLE NEGOCIO  SAN CLEMENTE, CA 92673	\$\$, 	Person X Payroll Noncash (Complete Part II for noncash contributions)			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
33	SPEED MOTOR EXPRESS OF W.N.Y., INC. DBA  C/O JOEY CASULLO, 2299 KENMORE AVENUE  BUFFALO, NY 142071311	5,616.	Person  Payroli  Noncash  (Complete Part II for noncash contributions)			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
34	STERLING METS, L.P.  120-01 ROOSEVELT AVE  FLUSHING, NY 11368	\$10,616.	Person  Payroll  Noncash  (Complete Part II for noncash contributions)			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
35	THE EMBLEM SOURCE, LLC  C/O BRIAN RUTT, 4575 WESTGROVE, STE 500  ADDISON, TX 75001	5,616.	Person  Payroll  Noncash  (Complete Part II for noncash contributions)			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
36	THE MARTIN GROUP LLC  C/O TOD MARTIN, 620 MAIN STREET  BUFFALO, NY 14202	\$ 5,616.	Person  Payroll  Noncash  (Complete Part II for noncash contributions)			

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		
37_	TURNER BROADCASTING SYSTEM	_	Person X		
	ONE CNN CENTER, 12SE	\$15,000.	Payroll Noncash		
	ATLANTA, GA 30303	_	(Complete Part II for noncash contributions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
38	UBS AG		Person X		
	PO BOX 120312	_   <b>\$</b> 16,232.	Payroll Noncash		
	STAMFORD, CT 069120312	-	(Complete Part II for noncash contributions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
39	UPMC		Person		
	600 GRANT STREET, 59TH FLOOR	_ <b>\$</b> 5,616.	Payroll Noncash		
	PITTSBURGH, PA 15219	_	(Complete Part II for noncash contributions)		
(a) No	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
40	XPO LOGISTICS WORLDWIDE	_	Person X		
	P.O. BOX 3197	\$5,616.	Payroll Noncash		
	PORTLAND, OR 97208	_	(Complete Part II for noncash contributions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
41	MARK HUTCHINSON	_	Person		
	1375 DELAWARE AVENUE	\$9,000.	Payroll X		
	BUFFALO, NY 14209	_	(Complete Part II for noncash contributions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
42	TOWNE AUTOMOTIVE GROUP	_	Person		
	3531 SOUTHWESTERN BLVD	\$ 10,000.	Payroll X		
	ORCHARD PARK, NY 14127	_	(Complete Part II for noncash contributions)		

Part II	Noncash Property	(see instructions	Use duplicate co	pies of Part II if additional	space is needed
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aitii	(coo management)				
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received		
	AUCTION ITEM				
28					
		\$	08/06/2018		
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received		
31	AUCTION ITEMS				
		<b>\$</b>	08/06/2018		
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See Instructions)	(d) Date received		
41	AUCTION ITEMS	_			
		<b>\$</b> 9,000.	08/06/2018		
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions )	(d) Date received		
42	VEHICLE				
		\$	08/29/2018		
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received		
		<u> </u>			
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received		
		\$			

Employer identification number

81-1548325

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 additi						
(a) No. from							
from Part I	(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held			
		<del></del>					
				-			
				<del></del>			
		(e) Transi	er of aft	<u> </u>			
		(c) Trunsi	ci oi giit				
	Transferee's name, address, an	nd 7IP + 4	Relatio	nship of transferor to transferee			
	Transferee 3 name, address, ar		T. C.	namp of transferor to transferor			
		<del>.</del>	-	·			
(a) No.	·· · · · · · · · · · · · · · ·			<u> </u>			
from	(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held			
Part I							
	<del></del>						
			<del></del>				
				_ <del></del>			
	(e) Transfer of gift						
	Transferee's name, address, an	nd ZIP + 4	Relatio	nship of transferor to transferee			
			·				
				<u> </u>			
(a) No. from	(b) Purpose of gift (c) Use		of aift	(d) Description of how gift is held			
Part I	(4), 44,444	, , , , , , , , , , , , , , , , , , ,		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
	(e) Transfer of gift						
	Transferee's name, address, an	id ZIP + 4	Relatio	nship of transferor to transferee			
				<u>.</u>			
(a) No. from	(b) Purpose of gift	(c) Use	of aut	(d) Description of how gift is held			
Part I	(b) Furpose or girt	(c) Use		(a) Description of now gire is field			
		· · · · · · · · · · · · · · · · · · ·		-			
	(e) Transfer of gift						
	(-),						
	Transferee's name, address, an	d ZIP + 4	Relatio	nship of transferor to transferee			
			<del></del>				

DESCRIPTION

ATTACHMENT 1

FORM 990PF, PART I - OTHER INCOME

FUNDRAISING EVENT REVENUE - SEE ATTACHED

REVENUE AND

EXPENSES

PER BOOKS

<del>5,</del>377.

TOTALS

5,377.

NEW ERA CAP FOUNDATION FORM 990PF, PART I - LEGAL FEES	2018 FORM 990-PF		ATTACHMENT 2	81-1548325
DESCRIPTION	REVENUE AND EXPENSES PER BOOKS	NET INVESTMENT INCOME	ADJUSTED NET INCOME	

4,131.

4,131.

TOTALS

GENERAL CONSULTATIONS

4,131.

4,131.

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CHARITABLE PURPOSES	10,250.	10,250.
ADJUSTED NET INCOME		
NET INVESTMENT INCOME		
REVENUE AND EXPENSES PER BOOKS	10,250.	10,250.
		TOTALS
DESCRIPTION	AUDIT FEES	

ATTACHMENT 3

NEW ERA CAP FOUNDATION

81-1548325

ATTACHMENT

- OTHER PROFESSIONAL FEES PART I FORM 990PF,

DESCRIPTION

REVENUE AND EXPENSES PER BOOKS

2,790.

2,790.

TOTALS

WEBSITE DEVELOPMENT

CHARITABLE PURPOSES

2,790.

2,790.

ATTACHMENT 5

## FORM 990PF, PART I - TAXES

REVENUE AND EXPENSES PER BOOKS

DESCRIPTION

990-PF EXTENSION FOR 2017

170.

TOTALS

170.

81-1548325

ATTACHMENT 6

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CHARITABLE	PURPOSES 20,000.	43,690.	1,785. 4,713.	70,238.
NET INVESTMENT	INCOME 110.			110.
REVENUE AND EXPENSES	PER BOOKS 20,000.	43,690.	1,785. 4,713.	70,348.
	DESCRIPTION ADMINISTRATIVE FEES BANK CHARGES	FUNDRAISING EVENT EXPENSES STATE OR LOCAL FILING FEES	CREDIT CARD PROCESSING FEES PROGRAM SUPPLIES	TOTALS

2018 FORM 990-PF NEW ERA CAP FOUNDATION 81-1548325
FORM 990-PF - PART IV
CAPITAL GAINS AND LOSSES FOR TAX ON INVESTMENT INCOME

Groce page   Depresention   Control   FAM   Age of   FAM   Control   FAM   C	Kınd of P	roperty		Desc	ription		P 5 D	Date Date	Date sold
PUBLICLY-TRADED SECURITIES 739. 1,311.	Gross sale	Depreciation allowed/	other	I FMV	Adı basıs	FMV over	P	acquired Gain or	
2,050.	expenses of sale	allowable				i adi dasis		(loss)	
OTAL GAIN(LDSS)	2,050.			ADED SECURI	ITE2			1,311.	
OTAL GAIN(10SS)									
	OTAL CAINIL	nee i						1 311	
	JIND UNINCLE	,55,				• • • • • •			
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ATTACHMENT 7

### FORM 990PF, PART VII-A - LIQUIDATION, TERMINATION, ETC. STATEMENT

AS EXPLAINED BELOW, THE FOUNDATION HAS NO PLANS FOR DISSOLUTION.

THIS STATEMENT IS SUBMITTED TO REPORT THE DISTRIBUTION OF CERTAIN ASSETS DURING THE YEAR. THE DISTRIBUTIONS RESULTED IN A SUBSTANTIAL CONTRACTION OF ASSETS.

THE FOLLOWING INFORMATION IS SUBMITTED IN ACCORDANCE WITH TREASURY REGULATION SECTION 1.6043-3(A)(1) AND THE FORM 990-PF INSTRUCTIONS:

DURING THE TAXABLE YEAR ENDING DECEMBER 31, 2018, THE FOUNDATION MADE DISTRIBUTIONS FROM ASSETS FROM SOURCES OTHER THAN CURRENT INCOME. COLLECTIVELY, THE DISTRIBUTIONS IN EXCESS OF CURRENT INCOME TOTALED \$620,003. THIS AMOUNT REPRESENTS 25% OR MORE OF THE FOUNDATION'S NET ASSETS OF \$300,123 (AS MEASURED BY FAIR MARKET VALUE) AT THE BEGINNING OF THE FOUNDATION'S TAXABLE YEAR ENDING DECEMBER 31, 2018. ALTHOUGH THE FOUNDATION TECHNICALLY EXPERIENCED A SUBSTANTIAL CONTRACTION, IT WILL CONTINUE IN EXISTENCE AND HAS NO PLANS FOR DISSOLUTION.

THE FOUNDATION MADE DISTRIBUTIONS OF CASH TO THE GRANTEES LISTED IN THE ATTACHMENT TO PART XV, LINE 3A; EACH SUCH GRANT WAS MADE SOLELY FOR THE CHARITABLE PURPOSE SPECIFIED THEREIN.

NEW ERA CAP FOUNDATION

ATTACHMENT 8

# - SUBSTANTIAL CONTRIBUTORS PART VII-A, LINE 10 FORM 990PF,

# NAME AND ADDRESS

LIDS FOUNDATION, INC. 10555 LIDS WAY ZIONSVILLE, IN 46077 NEW YORK YANKEES C/O M. TUSIANI, ONE EAST 161ST ST. BRONX, NY 10451

NEW ERA CAP FOUNDATION	2018 FORM 990-PF			81-1548325
FORM 990PF, PART VIII - LIST OF OFFICERS,	ERS, DIRECTORS, AND TRUSTEES		ATTACHMENT	MENT 9
NAME AND ADDRESS	TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION	COMPENSATION	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	EXPENSE ACCT AND OTHER ALLOWANCES
CHRISTOPHER H KOCH FOUNDATION SOURCE 501 SILVERSIDE RD WILMINGTON, DE 19809-1377	PRES, DIR 1.00	° o	Ö	·o
LORRIE TURNER FOUNDATION SOURCE 501 SILVERSIDE RD WILMINGTON, DE 19809-1377	DIR, SEC 1.00	Ö	Ö	·
KEVIN WILSON FOUNDATION SOURCE 501 SILVERSIDE RD WILMINGTON, DE 19809-1377	DIR, TREAS 1.00	Ö	Ö	·
	- GRAND TOTALS	0.	0.	0

New Era Cap Foundation EIN: 81-1548325 Taxable Year Ending December 31, 2018

Form 990-PF, Part XIII, Line 7

New Era Cap Foundation (the "Foundation") received a grant of \$10,000 in the taxable year ending December 31, 2018 from New England Patriots Foundation, a private non-operating foundation. As reported in Part XIII, Line 7, the Foundation is treating \$10,000 of its 2018 qualifying distributions in excess of the immediately preceding tax year's undistributed income as distributions out of corpus as required by Internal Revenue Code Section 4942(g)(3) and Treasury Regulations Section 53.4942(a)-3(c)(2). Additionally, as required, the Foundation has no remaining undistributed income for 2018.

NEW ERA CAP FOUNDATION

ATTACHMENT 10

FORM 990PF, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND		
RECIPIENT NAME AND ADDRESS	FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
AMERICAN HEART ASSOCIATION INC PO BOX 50085 PRESCOIT, AZ 86304	N/A PC	CHARITABLE EVENT	10,000
AMYOTROPHIC LATERAL SCLEROSIS ASSOCIATION 890 7TH N ST STE 108 LIVERPOOL, NY 13088	N/A PC	CHARITABLE EVENT	10,000
ANGELS BASEBALL FOUNDATION INC 2000 E GENE AUTRY WAY ANAHEIM, CA 92806	N/A PC	GENERAL & UNRESTRICTED	5, 000
BOYS & GIRLS CLUBS OF BUFFALO INC 282 BABCOCK ST BUFFALO, NY 14210	N/A PC	2018 PLAY BALL' SUMMER BASEBALL PROGRAM	25,000
INDIGENT INDIVIDUALS/HARDSHIP RECEIPIENTS WHO RECEIVED LESS THAN \$1,000 AND ARE NOT DISQUALIFIED PERSONS	NONE I	MEDICAL ASSISTANCE	253
BUFFALO BILLS ALUMNI FOUNDATION INC 81 STONECROFT LN EGGERTSVILLE, NY 14226	N/A PC	CHARITABLE EVENT	10,000

81-1548325

ATTACHMENT 10 (CONT'D)

NEW ERA CAP FOUNDATION

FORM 990PF, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

2018 FORM 990-PF

ATTACHMENT 10 (CONT'D)

FORM 990PE, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

AIBUTOR	NT PURPOSE OF GRANT OR CONTRIBUTION	CHARITABLE EVENT	CHARITABLE EVENT 2,000	CHARITABLE EVENT	CHARITABLE EVENT	CHARITABLE EVENT 5,000	CHARITABLE EVENT 5,000
RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND	FOUNDATION STATUS OF RECIPIENT	N/A PC	N/A PC	N/A PC	N/A PC	N/A PC	N/A PC
	RECIPIENT NAME AND ADDRESS	FJC, ENCOUNTER PROJECT 520 8TH AVE, 20TH FL NEW YORK, NY 10018	FOOT LOCKER FOUNDATION INC 330 W 34TH ST NEW YORK, NY 10001	FOOT LOCKER FOUNDATION INC 330 W 34TH ST NEW YORK, NY 10001	GREATER BUFFALO SPORTS HALL OF FAME INC 703 WASHINGTON ST BUFFALO, NY 14203	GREATER BUFFALO SPORTS HALL OF FAME INC 703 WASHINGTON ST BUFFALO, NY 14203	GREATER BUFFALO SPORTS HALL OF FAME INC 703 WASHINGTON ST

2018 FORM 990-PF

ATTACHMENT 10 (CONT'D)

FORM 990PE, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND		
RECIPIENT NAME AND ADDRESS	FOUNDATION STATUS OF RECIPIENT	PURFOSE OF GRANT OR CONTRIBUTION	AMOUNT
JACKIE ROBINSON FOUNDATION INC 75 VARICK ST, 2ND FL NEW YORK, NY 10013	N/A PC	CHARITABLE EVENT	130,000
JACKIE ROBINSON FOUNDATION INC 75 VARICK ST, 2ND FL NEW YORK, NY 10013	N/A PC	CHARITABLE EVENT	20,000
JACKIE ROBINSON FOUNDATION INC 75 VARICK ST, 2ND FL NEW YORK, NY 10013	N/A PC	CHARITABLE EVENT	5, 000
LIDS FOUNDATION 10555 LIDS WAY ZIONSVILLE, IN 46077	N/A PC	CHARITABLE EVENT	25,000
MAKE-A-WISH FOUNDATION OF METRO NEW YORK AND WESTE 500 5TH AVE NO 2900 NEW YORK, NY 10110	N/A PC	CHARITABLE EVENT	3,000
MEALS ON WHEELS FOUNDATION OF WESTERN NEW YORK INC 100 JAMES E CASEY DR BUFFALO, NY 14206	N/A PC	CHARITABLE EVENT	2,500

NEW ERA CAP FOUNDATION

ATTACHMENT 10 (CONT'D)

FORM 990PF, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR		
	AND		
RECIPIENT NAME AND ADDRESS	FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
N A R D I N ACADEMY	K/2	GENERAL & UNRESTRICTED	2,500
135 CLEVELAND AVE	PC		
BUFFALO, NY 14222			
NEW YORK METS FOUNDATION INC	N/A	GENERAL & UNRESTRICTED	15,000
CITI FIELD	PC PC		
FLUSHING, NY 11368			
NEW YORK YANKEES FOUNDATION INC	N/A	GENERAL & UNRESTRICTED	15,000
1 E 161ST ST	PC		
BRONX, NY 10451			
POLICE ATHLETIC LEAGUE OF BUFFALO INC	N/A	CHARITABLE EVENT	1,500
65 NIAGARA SQ 21ST FL	PC		
BUFFALO, NY 14202			
SAINT MARK SCHOOL	N/A	GENERAL & UNRESTRICTED	1,000
399 WOODWARD AVE	PC		
BUFFALO, NY 14214			
SCHOOL OF MANAGEMENT ALUMNI ASSOC STATE UNIV OF N	N/A	CHARITABLE EVENT	750
150 JACOBS MANAGEMENT CTR	O. O.		
BUFFALO, NY 14260			

ATTACHMENT 10 (CONT'D)

FORM 990PF, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND		
RECIPIENT NAME AND ADDRESS	FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
ST ROSE OF LIMA ROMAN CATHOLIC CHURCH 2 BAYVIEW AVE MASSAPEQUA, NY 11758	N/A PC	GENERAL & UNRESTRICTED	200
THE LOS ANGELES DODGERS FOUNDATION 1000 VIN SCULLY AVE LOS ANGELES, CA 90090	N/A PC	CHARITABLE EVENT	25,000
THE WOMEN AND CHILDRENS HOSPITAL OF BUFFALO FOUNDA C/O KALEIDA HEALTH 726 EXCHANGE ST BUFFALO, NY 14210	N/A PC	PUNT FUND - BRIAN'S LOCKER PROGRAM 2018 SPONSORSHIP	35,000
UNITED WAY OF BUFFALO AND ERIE COUNTY 742 DELAWARE AVE BUFFALO, NY 14209	N/A PC	2017 NEW ERA CAMPAIGN	20,000
VOICES FOR CASA CHILDREN INC, 4300 N MILLER RD STE 116 SCOTTSDALE, AZ 85251	N/A PC	CHARITABLE EVENT	7,500
MNY WOMENS FOUNDATION 742 DELAWARE AVE BUFFALO, NY 14209	N/A PC	CHARITABLE EVENT	10,000

620,003

2018 FORM 990-PF
ERA CAP FOUNDATION

NEW

FORM 990-PF, PART XVI-A - ANALYSIS OF OTHER REVENUE

81-1548325

				ATTACHMENT 11	11
DESCRIPTION	BUSINESS	AMOUNT	EXCLUSION	AMOUNT	RELATED OR EXEMPT FUNCTION INCOME
NET FUNDRAISING EVENT REVENUE			01	5,377.	•
TOTALS				5,377.	

New Era Cap Foundation EIN: 81-1548325

Taxable Year Ending December 31, 2018

# Part I, Line 11, Other Income

SPECIAL EVENT	TOTAL	EXCLUDED	GROSS	DIRECT	NET
	PROCEEDS	CONTRIBUTIONS	REVENUE	EXPENSES	REVENUE
		Included on Part I,			Part I, Line
		Line 1			11
AUCTION	43,415	6,562	36,853	31,476	5,377
GOLF TOURNAMENT	460,000	286,832	173,168	173,168	0
TOTAL	503,415	293,394	210,021	204,644	5,377