Form	990-	PF	
FORM	330-		

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

Do not enter social security numbers on this form as it may be made public.
Go to www.irs.gov/Form990PF for instructions and the latest information.

For calendar year 2018 or tax year beginning APR	1, 2018	, and ending	MAR 31, 2019)
Name of foundation		-	A Employer identificatio	n number
FOUNDATION FOR OPIOID RESP	ONSE EFFORTS		82-4973537	7 ,
Number and street (or P O box number if mail is not delivered to street a		Room/suite	B Telephone number	
110 WEST 40TH STREET		400	646-880-35	85
City or town, state or province, country, and ZIP or foreign p	ostal code		C If exemption application is	pending, check here
	Initial return of a fe	ormer public charity	D 1. Foreign organization	s check here
G Check all that apply: Initial return Final return	Amended return	offiler public charity	I. Foreign organization	is, check here
X Address change	Name change		Foreign organizations m check here and attach c	eeting the 85% test, omputation
H Check type of organization: X Section 501(c)(3) ex		$\overline{\mathcal{M}}$	E If private foundation st	
Section 4947(a)(1) nonexempt charitable trust	Other taxable private founda	ation U4	under section 507(b)(1	. —
Fair market value of all assets at end of year J Account	ing method; Cash	X Accrual	F If the foundation is in a	60-month termination
	ther (specify)		under section 507(b)(1	
\$ 101,028,799. (Part I, column	nn (d) must be on cash bası	s.)		T
Part I Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a))	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
1 Contributions, gifts, grants, etc., received			N/A	
2 Check X If the foundation is not required to attach Sch. B				
Interest on savings and temporary cash investments	3,955.	3,955.		STATEMENT 1
4 Dividends and interest from securities	1,043,777.	1,043,777.		STATEMENT 2
5a Gross rents		-		
b Net rental income or (loss)				
68 Net gain or (loss) from sale of assets not on line 10 Cross sales price for all				-
b assets on line 6a				
Gross sales price for all assets on line 5a 7 Capital gain net income (from Part IV, line 2)		0.		
o wet short-term capital gain				+
9 Income modifications Gross sales less returns				
10a and allowances b Less Cost of goods sold				
c Gross profit or (loss)	· · · · · ·			
11 Other income				i
12 Total. Add lines 1 through 11	1,047,732.	1,047,732.		
13 Compensation of officers, directors, trustees, etc	184,872.	22,185.		0.
14 Other employee salaries and wages	15,060.	0.		0.
15 Pension plans, employee benefits	26,297.	3,156.		0.
g 16a Legal fees STMT 3	49,005.	0.		0.
b Accounting fees STMT 4	46,500.	0.		0.
c Other professional fees STMT 5	352,340.	0.		24,299.
17 Interest RECEIVE TMT 6	11 126	0.		10
Fig. Accommendation of the contraction of the contr	11,126.	<u> </u>		10.
19 Deprectage and depletion	32,571.	0.		11,305.
20 Occupancy JAN 3 0 2020	24,569.	3,983.		0.
22 Printing and publications	21,303.	3,503.		
22 Printing and publications EN, STMT 7	39,360.	2,541.		44,700.
EI		_,	· <u>-</u> -	
24 Total operating and administrative expenses. Add lines 13 through 23	781,700.	31,865.		80,314.
25 Contributions, gifts, grants paid	0.			0.
26 Total expenses and disbursements.				
Add lines 24 and 25	781,700.	31,865.		80,314.
27 Subtract line 26 from line 12:				
8 Excess of revenue over expenses and disbursements	266,032.			
b Net investment income (if negative, enter -0-)		1,015,867.		
C Adjusted net income (if negative, enter -0-)	l		N/A	

100,309,367.

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6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30

Part IV Capital Gains	and Lo	sses for Tax on In	vestment	Income						
(a) List and describ 2-story brick v	(a) List and describe the kind(s) of property sold (for example, real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.)		(b)	(b) How acquired P - Purchase D - Donation		Date acquired mo., day, yr.)	(d) Date sold (mo., day, yr.)			
18										
b NO	ONE				ļ		- 			
<u>c</u>					-		-			
<u>d</u>			· · · ·		╁		+			
<u>e</u>	T /6\	Depreciation allowed	(a) Co	st or other basis	l		_i	(h) Gain or (los:	<u> </u>	
(e) Gross sales price	"	(or allowable)	107	expense of sale			((e) plus (f) minus		
a			_							
b										
C										
<u>d</u>										
e										
Complete only for assets show	ing gain in							ains (Col. (h) gair), but not less tha		
(i) FMV as of 12/31/69		(j) Adjusted basis as of 12/31/69	(k) E	xcess of col. (ı) col. (ı), ıf any				osses (from col.		
	 	85 01 12/3 1/03	0401	Col. ()/, if ally						
8	<u> </u>								 	
b c	+									
<u>d</u>	†								·	
e		<u>-</u> -								
		∫ If gain, also enter	ın Part I line	7)					
2 Capital gain net income or (net o	capital loss				♪	2				
3 Net short-term capital gain or (lo	oss) as def	fined in sections 1222(5) an	d (6):		•					
If gain, also enter in Part I, line 8	3, column (. (-/-		}					
If (loss), enter -0- in Part I, line	8 1	Section 4940(e) for	B-Jd	Tour on NeA		3			<u>-</u>	
							ICOIII	-		
(For optional use by domestic priva	te foundati	ions subject to the section 4	940(a) tax on	net investment in	come)				
If section 4940(d)(2) applies, leave	this part b	lank.								
Was the foundation liable for the se	ction 4042	tay on the distributable am	ount of any ve	aar in the hace ner	chai				Yes X No	
If "Yes," the foundation doesn't qual				•	100				163 (22) NO	
1 Enter the appropriate amount in					ntries					
(a) Base period years		(b)			(c)		$\neg \neg$	Diete	(d) bution ratio	
Calendar year (or tax year beginn	ning in)	Adjusted qualifying dist	ributions	Net value of no	ncha	ritable-use ass	ets	(col. (b) divided by col. (c))		
2017			0.				0.		.000000	
2016										
2015										
2014										
2013				i				1	·······	
A. Takat of loss 4. column (d)								ا	.000000	
2 Total of line 1, column (d)3 Average distribution ratio for the	. Fvoor bo	ca pariad - divide the total o	n line 2 by 5 i	O or by the number	or of s	10270	-	2	.000000	
the foundation has been in exist			ill lille 2 by 5.	o, or by the number	51 UI)	years		3	.000000	
the foundation has been in exist	01100 17 1033	s triair 5 years					-	<u> </u>		
4 Enter the net value of noncharita	ible-use as	sets for 2018 from Part X II	ine 5					4 7	0,077,945.	
		,							.,,	
5 Multiply line 4 by line 3							- 1	5	0.	
									-	
6 Enter 1% of net investment inco	me (1% of	Part I, line 27b)					L	6	10,159.	
							Γ			
7 Add lines 5 and 6							L	7	10,159.	
8 Enter qualifying distributions fro	m Part XII	, line 4					L	8	80,314.	
If line 8 is equal to or greater tha	ın line 7, c	heck the box in Part VI, line	1b, and comp	lete that part usin	g a 1º	% tax rate.				
See the Part VI instructions.										

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Form 990-PF (2018) FOUNDATION FOR OPIOID RESPONSE EFFORTS 82-497 Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see	3537 Page 4 instructions)
1a Exempt operating foundations described in section 4940(d)(2), check here ▶ ☐ and enter "N/A" on line 1.	
Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)	
b Domestic foundations that meet the section 4940(e) requirements in Part V, check here X and enter 1%	10,159.
of Part I, line 27b	
c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations, enter 4% of Part I, line 12, col. (b).	
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)	0.
3 Add lines 1 and 2	10,159.
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-	10,159.
6 Credits/Payments:	1
a 2018 estimated tax payments and 2017 overpayment credited to 2018 6a 0.	-
b Exempt foreign organizations - tax withheld at source 6b 0.	
c Tax paid with application for extension of time to file (Form 8868) 6c 15,000.	
d Backup withholding erroneously withheld 6d 0.	
7 Total credits and payments. Add lines 6a through 6d	15,000.
8 Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	0.
9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	4,841.
11 Enter the amount of line 10 to be: Credited to 2019 estimated tax 4,841. Refunded 11	0.
Part VII-A Statements Regarding Activities .	
1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in	Yes No
' any political campaign?	1a X
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition	1b X
If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or	
distributed by the foundation in connection with the activities.	
c Did the foundation file Form 1120-POL for this year?	1c X
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:	
(1) On the foundation. ▶ \$ 0 . (2) On foundation managers. ▶ \$ 0 .	
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation	
managers. ▶ \$	
2 Has the foundation engaged in any activities that have not previously been reported to the IRS?	2 X
If "Yes," attach a detailed description of the activities.	
3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or	
bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3 X
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a X
b If "Yes," has it filed a tax return on Form 990-T for this year?	4b
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5 X
If "Yes," attach the statement required by General Instruction T	
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:	
By language in the governing instrument, or	
 By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law 	
remain in the governing instrument?	6 X
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.	
CA, 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 G2 If "No," attach explanation	8b X
9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar	
year 2018 or the tax year beginning in 2018? See the instructions for Part XIV. If "Yes," complete Part XIV	9 X ()
10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses	10 X
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4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?

had not been removed from jeopardy before the first day of the tax year beginning in 2018?

b Did the foundation make any investment in a prior year (but after December 31, 1969) that could leopardize its charitable purpose that

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rm 990-PF (2018) FOUNDATION FOR OPIOID RI Part VII-B Statements Regarding Activities for Which		equired (contin	ued)		
5a During the year, did the foundation pay or incur any amount to:		· (contin	1	Yes	N
(1) Carry on propaganda, or otherwise attempt to influence legislation (secti	on 4945(e)\?		es 🗓 No		
(2) Influence the outcome of any specific public election (see section 4955);					
any voter registration drive?	or 10 02.11, 011, 0110011, 01 111111		es X No		
(3) Provide a grant to an individual for travel, study, or other similar purposi	es?	=	es X No		
(4) Provide a grant to an organization other than a charitable, etc., organization					
4945(d)(4)(A)? See instructions	1011 d00011000 111 00011011		es X No		1
(5) Provide for any purpose other than religious, charitable, scientific, literar	v or educational nurnoses or t				1
the prevention of cruelty to children or animals?	y, or caucational parposes, or t		es X No		
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify u	inder the exceptions described		25 [22] 110		1
section 53.4945 or in a current notice regarding disaster assistance? See ins	-	iii regulations	N/A	5b	1
			₽	"	+
Organizations relying on a current notice regarding disaster assistance, check		unned			
c if the answer is "Yes" to question 5a(4), does the foundation claim exemption		- /			
expenditure responsibility for the grant?	T	1/A 10	es L No		
If "Yes," attach the statement required by Regulations section 53.4945-5(d).					
a Did the foundation, during the year, receive any funds, directly or indirectly, t	o pay premiums on		es X No		
a personal benefit contract?		Y		_ _ —	
b Did the foundation, during the year, pay premiums, directly or indirectly, on a	personal benefit contract?		<u> </u>	6b	X
If "Yes" to 6b, file Form 8870.	_	<u> </u>	(TE)		ł
a At any time during the tax year, was the foundation a party to a prohibited tax		Y ₁	es X No		₩
b If "Yes," did the foundation receive any proceeds or have any net income attri			N/A _	7b	┿
Is the foundation subject to the section 4960 tax on payment(s) of more than	\$1,000,000 in remuneration oi		(-		
excess parachute payment(s) during the year?			es X No		
Information About Officers, Directors, Trus Paid Employees, and Contractors	tees, Foundation Ma	nagers, Hignly	•		
List all officers, directors, trustees, and foundation managers and	their compensation				
List all officers, directors, dustees, and foundation managers and	(b) Title, and average	(c) Compensation	(d) Contributions to	(e) Ex	nense
(a) Name and address	hours per week devoted	(If not paid,	employee benefit plans	account	t, othe
			and deferred		
	to position	enter -0-)	compensation	allowa	ances
			compensation		ances
EE CMAMPMENT 10		enter -0-)	compensation		
EE STATEMENT 10			compensation		
EE STATEMENT 10		enter -0-)	compensation		
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		enter -0-)	compensation		
EE STATEMENT 10		enter -0-)	compensation		O
•	to position	184,872.	compensation		
•	to position	184,872.	12,132.	allowa	0
•	icluded on line 1). If none, (b) Title, and average hours per week	184,872.	compensation	(e) Ex	O pense
Compensation of five highest-paid employees (other than those in	to position to position to position to position	184,872.	12,132.	(e) Ext	penss, oth
Compensation of five highest-paid employees (other than those in	icluded on line 1). If none, (b) Title, and average hours per week	184,872.	12,132.	(e) Ex	o penses
Compensation of five highest-paid employees (other than those in	icluded on line 1). If none, (b) Title, and average hours per week	184,872.	12,132.	(e) Ex	O pense
Compensation of five highest-paid employees (other than those in	icluded on line 1). If none, (b) Title, and average hours per week	184,872.	12,132.	(e) Ex	penss, oth
Compensation of five highest-paid employees (other than those in	icluded on line 1). If none, (b) Title, and average hours per week	184,872.	12,132.	(e) Ex	penss, oth
Compensation of five highest-paid employees (other than those in	icluded on line 1). If none, (b) Title, and average hours per week	184,872.	12,132.	(e) Ex	penss, oth
Compensation of five highest-paid employees (other than those in	icluded on line 1). If none, (b) Title, and average hours per week	184,872.	12,132.	(e) Ex	penss, oth
Compensation of five highest-paid employees (other than those in	icluded on line 1). If none, (b) Title, and average hours per week	184,872.	12,132.	(e) Ex	O pense
Compensation of five highest-paid employees (other than those in	icluded on line 1). If none, (b) Title, and average hours per week	184,872.	12,132.	(e) Ex	penss, oth
Compensation of five highest-paid employees (other than those in	icluded on line 1). If none, (b) Title, and average hours per week	184,872.	12,132.	(e) Ex	penss, oth
Compensation of five highest-paid employees (other than those in (a) Name and address of each employee paid more than \$50,000	icluded on line 1). If none, (b) Title, and average hours per week	184,872.	12,132.	(e) Ex	penss, oth
Compensation of five highest-paid employees (other than those in	icluded on line 1). If none, (b) Title, and average hours per week	184,872.	12,132.	(e) Ex	pensat, oth

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Part VIII Information About Officers, Directors, Trustees, Foundati Paid Employees, and Contractors (continued)		1	
3 Five highest-paid independent contractors for professional services. If none, enter '	'NONE."		
(a) Name and address of each person paid more than \$50,000	(b) Type of ser	vice	(c) Compensation
PHILLIPS OPPENHEIM GROUP INC			
360 LEXINGTON AVE, NEW YORK, NY 10017	RECRUITING		211,215.
			
		•	0
Total number of others receiving over \$50,000 for professional services Part IX-A Summary of Direct Charitable Activities			
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistic number of organizations and other beneficiaries served, conferences convened, research papers product	cal information such as the ced, etc.		Expenses
1 N/A			
2			
<u> </u>			
3			
<u> </u>			
4			
Part IX-B Summary of Program-Related Investments	440		A
Describe the two largest program-related investments made by the foundation during the tax year on lii N/A	nes 1 and 2.		Amount
1 N/A		-	
2			
All other program-related investments. See instructions.			
3			
Total. Add lines 1 through 3		•	0.
		For	m 990-PF (2018)

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Form 990-PF (2018) FOUNDATION FOR OPIOID RESPONSE EFFORTS 82-4973537

P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations	dations,	see instructions)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
2	Average monthly fair market value of securities	1a	322,492.
	Average of monthly cash balances	1b	70,793,994.
c	Fair market value of all other assets	1c	28,636.
d	Total (add lines 1a, b, and c)	10	71,145,122.
	Reduction claimed for blockage or other factors reported on lines 1a and		
·	1c (attach detailed explanation) 1e 0 •		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	71,145,122.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	1,067,177.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	70,077,945.
6	Minimum investment return. Enter 5% of line 5	6	3,503,897.
	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations an foreign organizations, check here and do not complete this part.)	d certain	, , , , , , , , , , , , , , , , , , , ,
1	Minimum investment return from Part X, line 6	1	3,503,897.
2a	Tax on investment income for 2018 from Part VI, line 5		·
b	Income tax for 2018. (This does not include the tax from Part VI.)		
c	Add lines 2a and 2b	2c	10,159.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	3,493,738.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	3,493,738.
6	Deduction from distributable amount (see instructions)	6	Ō.
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	3,493,738.
P	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	80,314.
ь	Program-related investments - total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8; and Part XIII, line 4	4	80,314.
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	5	10,159.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	70,155.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation q	ualifies fo	

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Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2017	(c) 2017	(d) 2018
1 Distributable amount for 2018 from Part XI,				•
line 7				3,493,738.
2 Undistributed income, if any, as of the end of 2018				
a Enter amount for 2017 only			0.	
b Total for prior years:				
		0.		
3 Excess distributions carryover, if any, to 2018:				
a From 2013				
b From 2014				
c From 2015				
d From 2016				
e From 2017				
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2018 from				
Part XII, line 4: ►\$ 80, 314.			'	
a Applied to 2017, but not more than line 2a			0.	
b Applied to undistributed income of prior years (Election required - see instructions)		0.		
, ,				
c Treated as distributions out of corpus	0.			
(Election required - see instructions)	<u> </u>			80,314.
d Applied to 2018 distributable amount				00,314.
e Remaining amount distributed out of corpus	0.			
5 Excess distributions carryover applied to 2018 (If an amount appears in column (d), the same amount must be shown in column (a))	. 0.			
6 Enter the net total of each column as indicated below:				
8 Corpus Add lines 3f, 4c, and 4e Subtract line 5	0.			
b Prior years' undistributed income. Subtract				
line 4b from line 2b		0.		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b. Taxable				[
amount - see instructions		0.		
e Undistributed income for 2017. Subtract line			-	
4a from line 2a. Taxable amount - see instr.			0.	ļ
f Undistributed income for 2018. Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2019				3,413,424.
7 Amounts treated as distributions out of				1
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3) (Election				
may be required - see instructions)	0.			
8 Excess distributions carryover from 2013				1
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2019.				1
Subtract lines 7 and 8 from line 6a	0.			
IO Analysis of line 9:				
a Excess from 2014				4
b Excess from 2015			İ	
c Excess from 2016				•
d Excess from 2017				ì
e Excess from 2018				

	cundations (/333/ Page 1
Part XIV Private Operating F			-A, question 9)	N/A	
1 a If the foundation hab received a ruling o					
foundation, and the ruling ic effective fo			▶ └		
b Check box to indicate whether the found		ng foundation described in	**	4942(j)(3) or4	942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year	41.0047	Prior 3 years	443 0045	(2) 72421
income from Part I or the minimum	(a) 2018	(b) 2017	(c) 2016	(d) 2015	(e) Total
investment return from Part X for					
each year listed					
b 85% of line 2a					
c Qualifying distributions from Part XII,					
line 4 for each year listed					
d Amounts included in line 2c not					ł
used directly for active conduct of					
exempt activities					
e Qualifying distributions made directly		\	1		
for active conduct of exempt activities.					
Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the alternative test relied upon:					
a "Assets" alternative test - enter:					
(1) Value of all assets					
(2) Value of assets qualifying			\		
under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test - enter					
2/3 of minimum investment return shown in Part X, line 6 for each year					
listed					
c "Support" alternative test - enter:	-				
(1) Total support other than gross					
investment income (interest,					\
dividends, rents, payments on securities loans (section			!		
512(a)(5)), or royalties)					
(2) Support from general public					
and 5 or more exempt organizations as provided in				1	
section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from					
an exempt organization					\
(4) Gross investment income					
Part XV Supplementary Info			f the foundation I	nad \$5,000 or moi	e in assets
at any time during t	he year-see instru	uctions.)			
1 Information Regarding Foundatio	n Managers:				
a List any managers of the foundation wh			ibutions received by the f	oundation before the clos	c of any tax
year (but only if they have contributed n	nore than \$5,000). (See se	ection 507(d)(2).)			
NONE					
b List any managers of the foundation wh			or an equally large portio	n of the ownership of a pa	rtnership or
other entity) of which the foundation has	s a 10% or greater interes	it.			
NONE					
2 Information Regarding Contributi					
Check here 🕨 🗶 if the foundation of	nly makes contributions t	o preselected charitable o	organizations and does no	ot accept unsolicited requi	ests for funds. If
the foundation makes gifts, grants, etc.,					
a The name, address, and telephone number	per or email address of the	e person to whom applica	ations should be address	ed:	
b The form in which applications should b	e submitted and informat	ion and materials they sh	ould include;		
A succession and the H					
c Any submission deadlines:					
d Any restrictions or limitations on awards	c, such as by geographica	l areas, charitable fields, l	kınds of institutions, or o	ther factors:	-

			!
Total		▶ 3a	0.
Approved for future payment	-		
NONE .			

▶ 3b

Total

Form 990-PF (2018)

a Paid during the year

NONE

Part XV

Supplementary Information (continued)

Name and address (home or business)

ter grace amounts unless otherwise indicated	Unrelated	business income	Exclud	led by section 512, 513, or 514	(e)
ter gross amounts unless otherwise indicated.	(a) Business	(b)	(C) Exclu- sion	(d)	Related or exempt function income
Program service revenue: a	code	Amount	code	Amount	Tunction income
a					
c	_			•	
d	_		1		
e			+ +		
g Fees and contracts from government agencies		 	1	<u> </u>	
Membership dues and assessments			1 1		
Interest on savings and temporary cash					
investments			14	3,955.	
Dividends and interest from securities			14	1,043,777.	
Net rental income or (loss) from real estate:			\vdash		
a Debt-financed property			\vdash		
 Not debt-financed property Net rental income or (loss) from personal 			┼┈┤		
property					
Other investment income					
Gain or (loss) from sales of assets other					• • • • • • • • • • • • • • • • • • • •
than inventory					
Net income or (loss) from special events			+		
Gross profit or (loss) from sales of inventory Other revenue:			\vdash		
8			1 1		
b					
c .					
d			\vdash		
Cubasal Add calumns (b) (d) and (c)	_	0.	\vdash	1,047,732.	(
Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e)				1,047,732.	1,047,732
ee worksheet in line 13 instructions to verify calculations	:)	,			2,021,713
Part XVI-B Relationship of Activities		plishment of Ex	empt l	Purposes	
ine No. Explain below how each activity for which i					nlishment of
the foundation's exempt purposes (other th				nod importantly to the decom	phoninon of
				1	
					1
				 .	<u> </u>

Page 13

FOUNDATION FOR OPIOID RESPONSE EFFORTS

Part XVII	Information Re Exempt Organ		sfers to a	nd Transactions ar	nd Relations	nips With Nonchari	table	•	<u> </u>
1 Did the or			of the followin	g with any other organization	on described in sec	tion 501(c)	T	Yes	No
				to political organizations?		, a.c., co (c)			
,	from the reporting found								1
(1) Cash	. •			,			1a(1)		X
(2) Othe							1a(2)		Х
	nsactions:								
	s of assets to a noncharita	ible exempt organizat	tion				1b(1)		X
• •	hases of assets from a no						1b(2)		X
(3) Rent	al of facilities, equipment,	or other assets					1b(3)		X
(4) Reim	bursement arrangements						1b(4)		Х
(5) Loan	s or loan guarantees						1b(5)		X
(6) Perfo	ormance of services or me	embership or fundrais	sıng solıcıtatıo	ns			1b(6)		X
	f facilities, equipment, ma						10		Х
						market value of the goods,		ets,	
or service	es given by the reporting fo	oundation. If the four	ndation receive	ed less than fair market valu	ie in any transactio	n or sharing arrangement, s	how in		
column (d) the value of the goods,	, 			<u> </u>				
(a) Line no	(b) Amount involved	(c) Name of		e exempt organization	(d) Description	on of transfers, transactions, and s	sharing arr	angemen	its
	·		N/A						
									
-					-				
						·			
	_ 	 			 				
		1		<u></u> ,,					
					1				
		†			· - ·				
				-					
						 	-		
ın section	ndation directly or indirec i 501(c) (other than sectio omplete the following sch	n 501(c)(3)) or in se		or more tax-exempt organi	zations described		Yes	X] No
	(a) Name of org			(b) Type of organization		(c) Description of relations	hip		
	N/A				ļ				
									
	<u> </u>			L	<u> </u>				
Sign Here	elief, it is true, correct, and com	nplete Declaration of pre		accompanying schedules and st taxpayer) is based on all informa	PRESI	has any knowledge retuined sho	y the IRS of an with the own below X Yes	9 See ins	Y
	nature of officer or trustee		I	Date	Title	Charle - d Server			
	Print/Type preparer's na	ame	Preparer's s	gnature	Date	Check if PTIN			
Paid			loven	1 aw	12/3/19	self- employed	0000	000	
	JOSEPH L.			<u> </u>	13717		2093		
Preparer Use Only	Firm's name ► PKF	OCONNOR	DAVIE	S, LLP		Firm's EIN ▶ 27-1	1289	45	
-	Firm's address ▶ 66	5 FIFTH A	VENUE			1			
	NEW YORK, NY 10022					Phone no. 212-28	86-2	600	

FORM 990-PF INTERE	ST ON SAVI	NGS AND TEM	PORARY	CASH IN	VESTMENTS	STATEMENT 1	
SOURCE CHARLES SCHWAB TOTAL TO PART I, LINE 3		REVE	(A) REVENUE PER BOOKS 3,955.		(B) VESTMENT COME	(C) ADJUSTED NET INCOME	
		-			3,955.		
					3,955.		
FORM 990-PF	DIVIDENDS	S AND INTER	EST FRO	M SECUR	ITIES	STATEMENT 2	
SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDEND	RE	(A) EVENUE BOOKS	(B) NET INVES MENT INCO		
WELLS FARGO CHARLES SCHWAB	1,042,333		0. 1,0 0.	42,333. 1,444.			
TO PART I, LINE 4	1,043,777	•	0. 1,043,777.		1,043,77	77.	
FORM 990-PF		LEGAL	FEES (B		(C)	STATEMENT 3	
DESCRIPTION		EXPENSES PER BOOKS		WEST-	ADJUSTED NET INCOM	CHARITABLE	
ADLER AND COLVIN EWENSTEIN AND ROTH, LLP		44,842. 4,163.				0.	
TO FM 990-PF, PG 1,	LN 16A =	49,005.		0.		0.	
FORM 990-PF		ACCOUNTI	NG FEES			STATEMENT 4	
DESCRIPTION		(A) EXPENSES PER BOOKS	(B NET IN MENT I	VEST-	(C) ADJUSTED NET INCOM		
DELOITTE-AUDIT AND SERVICES		30,500.		0.		0.	
PKF O'CONNOR DAVIES LLP-AUDIT AND TAX SERVICES		16,000.		0.		0.	
TO FORM 990-PF, PG 1, LN 16B		46,500.	•	0.		0.	

FORM 990-PF	OTHER PROFES	SIONAL FEES	STATEMENT 5			
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES		
CONSULTING-RECRUITING OTHER CONSULTING	211,215. 141,125.	0.		0. 24,299.		
TO FORM 990-PF, PG 1, LN 160	352,340.	0.		24,299.		
FORM 990-PF	ТАХ	ES	STATEMENT 6			
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES		
FEDERAL EXCISE TAX STATE FILING FEES	11,116. 10.	0.		0.		
TO FORM 990-PF, PG 1, LN 18	11,126.	0.		10.		
FORM 990-PF	OTHER E	XPENSES	S	TATEMENT 7		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES		
OFFICE EXPENSES FURNITURE RENTAL/PURCHASE BUSINESS INSURANCE BANK CHARGES DUES AND SUBSCRIPTIONS	12,604. 6,934. 18,883. 146. 793.	2,395. 0. 0. 146.		0. 6,934. 37,766. 0.		
TO FORM 990-PF, PG 1, LN 23	39,360.	2,541.		44,700.		

FORM 990-PF	OTHER INVESTMENTS		STATEMENT 8
DESCRIPTION	VALUATION METHOD	BOOK VALUE	FAIR MARKET VALUE
INVESCO QQQ TRUST-QQQ (10,000 SHARES)	FMV	1,796,600.	1,796,600.
ISHARES ESG MSCI EM ETF-ESGE (15,000 SHARES)	FMV	510,951.	510,951.
ISHARES MSCI USA ESG-SUSA (25,0 SHARES)	00 FMV	2,956,245.	·
VANECK VECTORS RUSSIA-RSX (40,0 SHARES)	00 FMV	824,000.	824,000.
VANECK VECTORS VIETNAM-VNM (20, SHARES)		331,200.	331,200.
VANGUARD ESG US STOCK-ESGV (15, SHARES)		736,200.	736,200.
XTRCKR HRVST GSI 300 ASHR (20,0 SHARES)		574,600.	574,600.
PE PREMIER CVC SSII OFFSHR TOTAL TO FORM 990-PF, PART II,	FMV	7,739,796.	
TOTAL TO FORM 390-FF, FART II,	HINE 13	1,133,130.	
FORM 990-PF	OTHER LIABILITIES		STATEMENT 9
DESCRIPTION		BOY AMOUNT	EOY AMOUNT
DUE TO RELATED PARTY FEDERAL EXCISE TAX PAYABLE	·	0.	580,242. 11,116.
DEFERRED FEDERAL EXCISE TAX		0.	884.
TOTAL TO FORM 990-PF, PART II,	LINE 22	0.	592,242.

ORM 990-PF PART VIII - LIST OF OFFICERS, DIRECTORS TRUSTEES AND FOUNDATION MANAGERS						STATEMENT 10		
NAME AND ADDRESS	TITLE AND AVRG HRS/WK		COMPEN-				EXPENSE	
ANDREA BARTHWELL, M.D., DFASAM 110 WEST 40TH STREET, SUITE 400 NEW YORK, NY 10018	BOARD CHAIR- 5.00	AS	OF	9/2	5/20 0.	0.	0.	
ADRIENNE M. BROWN, MSW, LMSW 110 WEST 40TH STREET, SUITE 400 NEW YORK, NY 10018	DIRECTOR- AS 2.00	OF	1/7	/20:	19 0.	0.	0.	
LORI A. SCHECHTER, J.D 110 WEST 40TH STREET, SUITE 400 NEW YORK, NY 10018	DIRECTOR- AS 2.00	OF	9/2	6/20	018	0.	0.	
PETER SLONE 110 WEST 40TH STREET, SUITE 400 NEW YORK, NY 10018	DIRECTOR- AS 2.00	OF	1/7	/201	19 0.	0.	0.	
ADAM USDAN 110 WEST 40TH STREET, SUITE 400 NEW YORK, NY 10018	DIRECTOR- AS 5.00	OF	11/	9/20	0.	0.	0.	
KAREN A. SCOTT, MD, MPH 110 WEST 40TH STREET, SUITE 400 NEW YORK, NY 10018	PRESIDENT- AS 40.00	S ()1	7 10 18	/14, 4,8	/201 72.	18 12,132.	0.	
TOTALS INCLUDED ON 990-PF, PAGE 6	PART VIII	_	18	4,8	72.	12,132.	0.	