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 www irs.gov/Form990PFfor instructions and the latest information.

2949105302807 UOA L OMB No 1545-0 OMB No 1545-0052

Open to Public Inspection

		endar year 2018 or tax year beginning	10/	$\sqrt{01}$, 2018, and end	ing		09/30, 20 19	
Na	me of	foundation			A Emp	oloyer (dentific	ation number	
_	<u>U/A FOR HELENE FULD HEALTH TRUST 10-205620</u> 13-6309307							
Number and street (or P O box number if mail is not delivered to street address) Room/suite B Telephone number (see instruc								
	1 W	EST 39TH STREET, 5TH FLR				716	5-841-5471	
Cı	ty or to	wn, state or province, country, and ZIP or foreign posta	l code	- ·				
					C If exe	emption application	on is	
	NEW	YORK, NY 10018						
G	Che	ck all that apply. Initial return	Initial return	of a former public cha	rity D 1 Fo	oreign organization	ns, check here >	
		Final return	Amended re	turn	2 Fo	oreign organizatio	ns meeting the	
		X Address change	Name chang	е		5% test, check her imputation		
Н	Che	ck type of organization: X Section 501(c)(3) exempt private f	oundation (1)	1	·		
	X s	ection 4947(a)(1) nonexempt charitable trust	Other taxable pr	ivate foundation U	~ \		tatus was terminated 1)(A), check here	
ī	Fair	market value of all assets at J Accou	unting method X C	ash Accrual			a 60-month termination	
	end	of year (from Part II, col. (c), line Of	ther (specify)		l l		1)(B), check here . >	
	16)	▶ \$ 150,855,711. (Part i, c	column (d) must be on ca	ash basis)				
B	art l	Analysis of Revenue and Expenses (The	(a) Revenue and		4 3 4 3		(d) Disbursements for charitable	
		total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in	expenses per	(b) Net investment income	(c) Adjus		purposes	
		column (a) (see instructions))	books				(cash basis only)	
	1							
	2	Check X if the foundation is not required to attach Sch B.					1	
	3	Interest on savings and temporary cash investments.					1	
	4	Dividends and interest from securities	3,063,924.	2,993,936.			STMT 1	
	5a	Gross rents					1	
	l .	Net rental income or (loss)						
a		Net gain or (loss) from sale of assets not on line 10	6,954,478.					
Š	ь	Gross sales price for all assets on line 6a 40,571,006.	-					
Revenue	7	Capital gain net income (from Part IV, line 2) .		6,954,478.			<u> </u>	
č	8	Net short-term capital gain						
	9	Income modifications						
	10a	Gross sales less returns and allowances • • • • • • • • • • • • • • • • • • •		•			<u> </u>	
	ь	Less Cost of goods sold .						
	С	Gross profit or (loss) (attach schedule)						
	11	Other income (attach schedule)	-22,079.				STMT 2	
_	12	Total Add lines 1 through 11	9,996,323.				<u> </u>	
	13	Compensation of officers, directors, trustees, etc	855,696.				<u>171,139</u> .	
enses	14	Other employee salaries and wages		NONE		NONE		
ë	15	Pension plans, employee benefits		NONE		NONE		
Š	16a	Legal fees (attach schedule)		<u></u>				
ند	ь	Accounting fees (attach schedule)						
.≚	16a b c 17 18 19 20 21	Other professional fees (attach schedule)						
ra	17	Interest						
is	18	Taxes (attach schedule) (see instructions. 3.	240,049	. 31,775.				
Ē	19	Depreciation (attach schedule) and depletion.						
ğ	20	Occupancy						
₽	21	Travel, conferences, and meetings	<u> </u>	NONE		NONE		
ē	22	Printing and publications	·	NONE		NONE		
2	23	Other expenses (attach schedule)						
ati	23 24 25	Total operating and administrative expenses		F14 222		37037	101 110	
oe.]	Add lines 13 through 23	1,095,745	. 716,332.		NONE	171,139.	
Ō		Contributions, gifts, grants paid	13,944,822			NONE	13,944,822.	
_	26	Total expenses and disbursements Add lines 24 and 25	15,040,567	. 716,332.		NONE	14,115,961.	
	27	Subtract line 26 from line 12	F 04. 04.					
		Excess of revenue over expenses and disbursements	-5,044,244					
		Net investment income (if negative, enter -0-)		9,232,082.	-			
=		Adjusted net income (If negative, enter -0-)		<u> </u>			Form 990-PF (2018)	
-								

Down II	Balanca Chasta	Attached schedules and amounts in the description column should be for end-of-year	Beginning of year	End o	of year **,	
Part II	Dalance Sneets	amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value	
1	Cash - non-interest-beari	ng				
2		cash investments	8,160,593.	934,380.	934,380.	
3	Accounts receivable		-			
		btful accounts >				
4			-		•	
		btful accounts >				
5	••••	• • • • • • • • • • • • • • • • • •				
6		officers, directors, trustees, and other				
ľ	•	ach schedule) (see instructions)				
7		eceivable (attach schedule)	+ u,	•		
		btful accounts ► NONE				
8 5		se				
Assets		eferred charges	11 757 252	11 412 452	11,584,163.	
		government obligations (attack statules	49,123,689.	49,494,302.	81,981,431.	
	•	stock (attach schedule) . STMT .5.	49,123,009.	49,494,302.	01,301,431.	
11°	Investments - corporate Investments - land, building and equipment basis Less accumulated deprecia (attach schedule)					
12	Investments - mortgage	loans				
13		ach schedule) STMT . 6	40,422,057.	41,943,894.	<u>56,355,737</u> .	
14	Land, buildings, and equipment basis Less accumulated deprecia	ation b				
15	(attach schedule) Other assets (describe					
16		completed by all filers - see the				
."		age 1, item I)	109.463.591.	103,785,029.	150,855,711.	
17		accrued expenses	20071007002			
18	• •	. ,				
			• • •		1	
E 20		ors, trustees, and other disqualified persons.				
21		otes payable (attach schedule)				
19 20 21 22 22 22 22 22 22 22 22 22 22 22 22		e ►)			1	
	Other habilities (describe	·				
23	Total liabilities (add line	es 17 through 22)		NONE		
	Foundations that follow	v SFAS 117, check here ▶ through 26, and lines 30 and 31				
24 25	Unrestricted					
25	Temporarily restricted					
26	Permanently restricted				!	
	Foundations that do no and complete lines 27	through 31. cipal, or current funds			<u>'</u>	
27	Capital stock, trust princ	cipal, or current funds	109,463,591.	103,785,029.		
28	Paid-in or capital surplus, or	r land, bldg , and equipment fund [)	
SS 29	Retained earnings, accumul	lated income, endowment, or other funds 🔒 🕻			نة.	
300	Total net assets or fund	d balances (see instructions) [109,463,591.	103,785,029.	1	
შ 3ეე	(Total liabilities and	net assets/fund balances (see			(
	mstructions)		109,463,591.	103,785,029.		
		nges in Net Assets or Fund Bala				
		balances at beginning of year - Part I		-		
		d on prior year's return)			109,463,591.	
2 Ent	er amount from Part I,	line 27a		2	-5,044,244.	
		ded in line 2 (itemıze) ▶				
4 Add	d lines 1, 2, and 3				104,419,347.	
		n line 2 (Itemize) ► COST BASIS ADJUST		5	634,318.	
6 Tot	al net assets or fund b	alances at end of year (line 4 minus li	ine 5) - Part II, column (I	b), line 30 6	103,785,029.	

Page	3
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Part IV	Capital Gains	and Losses for Tax on Inve	stment Income			
		scribe the kind(s) of property sold (for exrick warehouse, or common stock, 200	• •	(b) How acquired P - Purchase	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
1a PITRI	ICLY TRADED	<u> </u>		D - Donation		
b	ICEI IIIEE	BECONTIED				
C						
d				•		
e						
(e) Gro	ess sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		(h) Gain or (lo ((e) plus (f) minu	
a 4	0,571,006.		33,616,528.		6,	954,478.
ь					_	<u> </u>
<u>d</u>						~~~~~~
e						
Comple	ete only for assets sh	owing gain in column (h) and owned by			Gains (Col (h) ga	
(i) FMV :	as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any	COI	(k), but not less t Losses (from co	l (h))
a					6,	954,478.
<u> </u>			·			
C						
d						
е		15.	Death Garage			_
2 Capita	il gain net income	or (not conital loce)	on, also enter in Part I, line 7 sss), enter -0- in Part I, line 7	2	6,	954,478.
		ain or (loss) as defined in sections 1				
		art I, line 8, column (c) See inst				
				3		
Part V		Inder Section 4940(e) for Redu private foundations subject to the				
Was the fou	undation liable for	leave this part blank the section 4942 tax on the distrib 't qualify under section 4940(e) Do	- •	ase perio	d?	Yes X No
1 Enter	the appropriate an	nount in each column for each year	r; see the instructions before makir	ng any er		
Race	(a) period years	(b)	(c)		(d) Distribution ra	tio
	(or tax year beginning in)	Adjusted qualifying distributions	Net value of noncharitable-use assets		(col (b) divided by	col (c))
	2017	6,393,703.	151,130,661.			0.042306
	2016	7,379,811.	138,496,736.			0.053285
	2015	8,580,730.	138,235,586.			0.062073
	2014	7,593,631.	145,873,739. 143,343,954.	-		0.032036
	2013	7,020,225.	143,343,954.	<u> </u>	· · · · · · · · · · · · · · · · · · ·	0.040373
0 T-4-1	-£1 41 <i>(</i>			2		0.258695
		(d)				0.230033
	•	io for the 5-year base period - divid foundation has been in existence i		3		0.051739
4 Enter	the net value of no	oncharitable-use assets for 2018 fr	om Part X, line 5	4	146,	402,487.
5 Multip	oly line 4 by line 3			5	7,	574,718.
6 Enter	1% of net investm	ent income (1% of Part I, line 27b)		6		92,321.
				7	7,	667,039.
8 Enter	qualifying distribu	tions from Part XII. line 4		8		115,961.
	8 is equal to or q I instructions	greater than line 7, check the box	in Part VI, line 1b, and complete	tnat part	using a 1% ta:	k rate See the

b If "Yes," has it filed a tax return on Form 990-T for this year?..............

6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either

Enter the states to which the foundation reports or with which it is registered. See instructions.

• By state legislation that effectively amends the governing instrument so that no mandatory directions that

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

b if the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General

_ 1	0				X
Form	99	0-PF	(;	2018	3)

X

X

4a

4b

8ь

If "Yes," attach a detailed description of the activities

· By language in the governing instrument, or

ŊJ

If "Yes," attach the statement required by General Instruction T

			Yes	No
٠ 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		2
	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		7
	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	
•	Website address ► N/A			
14	The books are in care of ▶ <u>HSBC_BANK_USA</u> Telephone no ▶ (716) 841-	<u>-547</u>	1	
	Located at ▶ 1 WEST 39TH STREET, 5TH FLR, NEW YORK, NY ZIP+4 ▶ 10018			
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			T
16	At any time during calendar year 2018, did the foundation have an interest in or a signature or other authority		Yes	No
	over a bank, securities, or other financial account in a foreign country?	16		
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of			
	the foreign country ▶			
Part	VII-B Statements Regarding Activities for Which Form 4720 May Be Required			r
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies		Yes	No
1a	During the year, did the foundation (either directly or indirectly)	ļ		1
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes X No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a	ļ		
	disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X No	ľ		
	(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	ŀ		
	the benefit or use of a disqualified person)?	į		
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the			
	foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days).	li I		
	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations	1b		X
	section 53 4941(d)-3 or in a current notice regarding disaster assistance? See instructions	<u>' </u>		
	Organizations relying on a current notice regarding disaster assistance, check here			
	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that	1c		X
	were not corrected before the first day of the tax year beginning in 2018?	-:- <u>*</u> -		1
	and the second s	ļ K		ŀ
	operating foundation defined in section 4942(j)(3) or 4942(j)(5)) At the end of tax year 2018, did the foundation have any undistributed income (lines 6d and	ŀ		
	6e, Part XIII) for tax year(s) beginning before 2018?	:		
	If "Yes," list the years	ļ		
	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	<u>.</u>		
	all years listed, answer "No" and attach statement - see instructions)	2b		
	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here			
·	b			
3.0	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise		:	
	at any time during the year? Yes X No			
ь	If "Yes," did it have excess business holdings in 2018 as a result of (1) any purchase by the foundation or			
	disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the			
	Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of			
	the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the			
	foundation had excess business holdings in 2018)	3b		
	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		X
	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its			l X

Dar	VII-B Statements Regarding Activities for	or Which Form 4	720 May Be Rec	uired (continued)		•	
_	During the year, did the foundation pay or incur any amo		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	anda (oommada)		Yes	No
5a	(1) Carry on propaganda, or otherwise attempt to influer		n 4945(e))?	Yes X No		1.03	7
	(2) Influence the outcome of any specific public ele			• —	·	l	
	directly or indirectly, any voter registration drive?.			· H H		ĺ	
	(3) Provide a grant to an individual for travel, study, or of				'		
	(4) Provide a grant to an organization other than a			Yes X No			
	section 4945(d)(4)(A)? See instructions			• — —	'		
	(5) Provide for any purpose other than religious, ch			••			
	purposes, or for the prevention of cruelty to children				1		
þ	If any answer is "Yes" to 5a(1)-(5), did any of the						
	Regulations section 53 4945 or in a current notice regard			_	<u>5b</u>		
	Organizations relying on a current notice regarding disas				\square		
C	If the answer is "Yes" to question 5a(4), does the			F	Į		
	because it maintained expenditure responsibility for the g			Yes No	'		
	If "Yes," attach the statement required by Regulations sec]	
6a	Did the foundation, during the year, receive any fun			1 1			
	on a personal benefit contract?			. Yes X No	'		
Ь	Did the foundation, during the year, pay premiums, direct	ly or indirectly, on a	personal benefit contr	act?	6b		X
	If "Yes" to 6b, file Form 8870						
7a	At any time during the tax year, was the foundation a par	ty to a prohibited tax	shelter transaction?.	. Yes X No	·		
b	If "Yes," did the foundation receive any proceeds or have	=		ion?	7b		
8	is the foundation subject to the section 4960 tax on pays	ment(s) of more than	\$1,000,000 in				
	remuneration or excess parachute payment(s) during the						1
Par	Information About Officers, Director and Contractors	rs, Trustees, Fou	indation Manage	rs, Highly Paid Emp	oloyees,		
1	List all officers, directors, trustees, and foundation	n managers and th	heir compensation.	See instructions.		•	
	(a) Name and address	(b) Title, and average hours per week	(c) Compensation (if not paid,	(d) Contributions to employee benefit plans	(e) Expen		
	(a) Notice and address	devoted to position_	enter -0-)	and deferred compensation	other all	owance	es
ISBC	BANK_USA	TRUSTEB					
. W 3	9TH ST, 5TH FLR, NEW YORK, NY 10018		855,696.	-0-			-0-
				•			
					1		
				<u> </u>			
2	Compensation of five highest-paid employees "NONE."	(other than thos	se included on lin	e 1 - see instruction	ons). If n	one,	enter
	NOINE.	(b) Title, and average		(d) Contributions to			
(a)	Name and address of each employee paid more than \$50,000	hours per week	(c) Compensation	employee benefit plans and deferred	(e) Expension		
		devoted to position		compensation			
NON	<u> </u>		NONE	NONE	<u>N</u>	ONE	
		1					

				•			
ota	number of other employees paid over \$50,000					ONE	

3 Five highest-paid independent contractors for professional services. See ins	tructions. If none, enter "NONI	."
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
0.17		37037
ONE		NONE
otal number of others receiving over \$50,000 for professional services	<u> </u>	NONE
Part IX-A Summary of Direct Charitable Activities List the foundation's four largest direct charitable activities during the tax year include relevant statistic	and information such as the number of	· ·
organizations and other beneficiaries served, conferences convened, research papers produced, etc	a mornation such as the number of	Expenses
1 NONE		
		,
2		
3		
*		
art IX-B Summary of Program-Related Investments (see instructions)		Amount
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 NONE	1 and 2	Amount
INONE		
2		
		<u> </u>
All other program-related investments. See instructions		

Par	Minimum Investment Return (All domestic foundations must complete this part. Fore see instructions.)	ign foun	dations,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes.		
а	Average monthly fair market value of securities	1a	147,370,577.
b	Average of monthly cash balances	1b	1,261,389.
С	Fair market value of all other assets (see instructions)	1c	NONE
	Total (add lines 1a, b, and c)	1d	148,631,966.
e	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	<u>N</u> ONE
3	Subtract line 2 from line 1d	3	148,631,966.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see		
	instructions)	4	2,229,479.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	146,402,487.
6	Minimum investment return. Enter 5% of line 5	6	7,320,124.
Par	Distributable Amount (see Instructions) (Section 4942(j)(3) and (j)(5) private operating four and certain foreign organizations, check here ▶ and do not complete this part)	dations	
1	Minimum investment return from Part X, line 6	1	7,320,124.
' 2а	Tax on investment income for 2018 from Part VI, line 5 2a 92,321.		.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
Z a b	Income tax for 2018. (This does not include the tax from Part VI).	i	
C	Add lines 2a and 2b	2c	92,321.
3	Distributable amount before adjustments Subtract line 2c from line 1	3	7,227,803.
4	Recoveries of amounts treated as qualifying distributions	4	NONE
5	Add lines 3 and 4	5	7,227,803.
6	Deduction from distributable amount (see instructions)	6	NONE
7	Distributable amount as adjusted. Subtract line 6 from line 5 Enter here and on Part XIII,		
•	line 1	7	7,227,803.
Par	Qualifying Distributions (see instructions)		.,
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes.		
' a	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	14,115,961.
b	Program-related investments - total from Part IX-B	1b	14,113,501.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,	10	
2	purposes,	2	NONE
3	Amounts set aside for specific charitable projects that satisfy the.		
	Suitability test (prior IRS approval required)	3a	NONE
b	Cash distribution test (attach the required schedule)	3b	NONE
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	14,115,961.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income		17,113,301.
J	Enter 1% of Part I, line 27b See instructions	5	92,321.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	14,023,640.
U	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when ca		
	qualifies for the section 4940(e) reduction of tax in those years	nculating	whether the localdation

	rt XIII Undistributed Income (see instru	ections)			Page 9
		(a)	(b)	(c)	(d)
1	Distributable amount for 2018 from Part XI,	Corpus	Years prior to 2017	2017	²⁰¹⁸ 7,227,803.
2	Undistributed income, if any, as of the end of 2018				1,221,003.
	Enter amount for 2017 only.			NONE	
	Total for prior years 20,20		NONE	110112	
	Excess distributions carryover, if any, to 2018		110112		
	From 2013 NONE				
	From 2014 NONE				
	From 2015 1,153,446.				
	From 2016 624,044.				
-	From 2017 NONE				
	Total of lines 3a through e	1,777,490.			
4	Qualifying distributions for 2018 from Part XII,				
	line 4 ▶ \$ 14,115,961.				
а	Applied to 2017, but not more than line 2a			NONE	
	Applied to undistributed income of prior years				
•	(Election required - see instructions)		NONE		
_	Treated as distributions out of corpus (Election				
٠	required - see instructions)	NONB			
d	Applied to 2018 distributable amount				7,227,803.
	Remaining amount distributed out of corpus	6,888,158.			
5	Excess distributions carryover applied to 2018				
	(If an amount appears in column (d), the same amount must be shown in column (a))	NONE			NONE
6	Enter the net total of each column as indicated below:				
а	Corpus Add lines 3f, 4c, and 4e Subtract line 5	8,665,648.			
	Prior years' undistributed income Subtract				
•	line 4b from line 2b.		NONE		
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		NONE		
d	Subtract line 6c from line 6b Taxable				
	amount - see instructions		NONE		
е	Undistributed income for 2017 Subtract line 4a from line 2a Taxable amount - see				
	instructions			NONE	
f	Undistributed income for 2018 Subtract lines				
•	4d and 5 from line 1. This amount must be				
	distributed in 2019				NONE
7	Amounts treated as distributions out of corpus				
	to satisfy requirements imposed by section				
	170(b)(1)(F) or 4942(g)(3) (Election may be	270277			
	required - see instructions)	NONB			
8	Excess distributions carryover from 2013 not applied on line 5 or line 7 (see instructions)	NONE			<u>-</u>
9	Excess distributions carryover to 2019.				
	Subtract lines 7 and 8 from line 6a	8,665,648.			
10	Analysis of line 9				
а	Excess from 2014 NONE				
b	Excess from 2015 1,153,446.		- ,		
c	Excess from 2016 624, 044.	}			
d	Excess from 2017 NONE				
e	Excess from 2018 6,888,158.		-		
					Form 990-PF (2018

Pai	rt XIV Private Op	erating Foundations	(see instructions ar	nd Part VII-A, question	on 9)	NOT APPLICABL
1 a	If the foundation has	received a ruling or d	etermination letter that	it is a private opera	iting	
	foundation, and the ruling	is effective for 2018, en	ter the date of the ruling		▶∟	· · · · · · · · · · · · · · · · · · ·
b	Check box to indicate v	whether the foundation	is a private operating f	foundation described in	section 4942(j)	(3)-or 4942(j)(5)
2 a	Enter the lesser of the ad-	Tax year		Prior 3 years		(e) Total
	justed net income from Part I or the minimum investment	(a) 2018	(b) 2017	(c) 2016	(d) 2015	
	return from Part X for each		!			
	year listed					··
b	85% of line 2a					
c	Qualifying distributions from Part					
	XII, line 4 for each year listed .					
d	Amounts included in line 2c not used directly for active conduct of exempt activities					
e	Qualifying distributions made					
	directly for active conduct of exempt activities Subtract line					
_	2d from line 2c			<u> </u>		
3	Complete 3a, b, or c for the alternative test relied upon					
а	"Assets" elternative test - enter					
	(1) Value of all assets					
	(2) Value of assets qualifying under section					
	4942(j)(3)(B)(i)					
b	"Endowment" alternative test-]				
	enter 2/3 of minimum invest ment return shown in Pert X,					
	line 6 for each year listed					
C	"Support" alternative test - enter				ļ	
	(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)(fii)					
	(3) Largest amount of sup- port from an exempt organization					
	(4) Gross investment income .					
Pa		ntary Information (C		only if the founda	tion had \$5,000 or	more in assets at
	any time d	uring the year - see	instructions.)			
	Information Regarding	•				
а	List any managers of		and the second s			ed by the foundation
	before the close of any	rtax year (but only if th	iey nave contributed n	nore than \$5,000) (St	se section 507(u)(2))	
	N/A		400/			
þ	List any managers of ownership of a partner					large portion of the
	Ownership of a partile	ship of other entity, or	William the loanaation	nas a 10/8 or greater	micresi	
	37 / B					
2	N/A Information Regarding	Contribution Grant	Gift Loan Scholarchi	n etc Programs:		
_				•	A-E1	
	Check here ► X if t unsolicited requests f	ne toundation only i	makes contributions ation makes diffs dra	to preselected charl	table organizations a	nd does not accept
	complete items 2a, b,			ints, etc., to intarvidua	iis or organizations an	der other conditions,
a	The name, address, an			nerson to whom anni	ications should be add	ressed
a	The name, address, an	a telephone number o	i cinali addiess of the	person to whom appr	ications should be add	16336u.
b	The form in which app	lications should be suf	mitted and information	on and materials they	should include.	
_						
С	Any submission deadli	nes.				
ď	Any restrictions or la	mitations on awards,	, such as by geogra	phical areas, charita	ble fields, kinds of	institutions, or other
	factors [,]					

Page **11**

Part XV Supplementary Information (continued)

3 Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, show any relationship to any foundation manager or substantial contributor Purpose of grant or contribution Amount Am							
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount			
Name and address (home or business)	or substantial contributor	recipient	contribution				
a Paid during the year							
SEE STATEMENT 13				13,944,822.			
				20/511/028.			
		İ					
		1					
Total			▶ 3a	13,944,822.			
b Approved for future payment							
Total			▶ 3b	_			

JSA 8E1491 1 000

Part XVI-A					510 510 511	(e) ·
	ounts unless otherwise indicated	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income
				Exclusion code		(See instructions)
		-		 		
fg Fees and	d contracts from government agencies	-				
•	p dues and assessments					
	avings and temporary cash investments •				2 262 224	
4 Dividends a	and interest from securities	<u> </u>		14	3,063,924.	
	ncome or (loss) from real estate					·
	anced property					
	come or (loss) from personal property					
	stment income					
) from sales of assets other than inventory			18	6,954,478.	
9 Net income	or (loss) from special events · · ·					
-	t or (loss) from sales of inventory					
11 Other rever	ERRED INCOME			14	-22,079.	
	JARD TREOME			••	22/0/5/	
е						
	dd columns (b), (d), and (e)				9,996,323.	
	line 12, columns (b), (d), and (e)			• • • • • • •	13	9,996,323
Part XVI-B	Relationship of Activities		complishment of	Evennt Bur	nacac	
	Explain below how each activit accomplishment of the foundation	-				
						
			NOT APPLICAB	LE		
	·					
						
						
	<u> </u>				<u> </u>	
	· · · · · · ·					
	-					
 -	·					
					_	

Form 99							13-6309307				ge 13
Part'	XVII	Information F Exempt Orga	Regarding T	ransfers to a	and Transac	tions ar	nd Relationships	With None	charit	able	
1 [old the			engage in an	y of the follow	ving with a	any other organizati	on described	T	Yes	No
ir	n sect						ction 527, relating				
		rs from the reportin	ia foundation t	a a nanaharitah	la avament ara	anization d	~f				
									20/21		v
							· · · · · · · · · · · · · · ·				X
		ansactions.				• • • • •	• • • • • • • • • • •		10(2)		
			ncharitable exe	mpt organizatio	on				16(1)		X
											X
											X
											Х
(!	5) Loai	ns or Ioan guarante	es						1b(5)		Х
											X
											X
v	alue o	f the goods, other	assets, or serv	vices given by	the reporting	foundatio	Column (b) should n If the foundation e of the goods, oth	received less	than	fair m	arke
(a) Line	e no	(b) Amount involved	(c) Name of	noncharitable exer	npt organization	(d) De	escription of transfers, tra	nsactions, and sha	ring arra	ngeme	nts
		·-·		- -		}					
			 								
											
	_										
	+										
	-+		 								

***************************************				** ************************************						•	

		,,,,,,									
d	escribe	ed in section 501(c complete the follow) (other than se wing schedule	ection 501(c)(3))) or in section		ore tax-exempt orga			es X	 No
		(a) Name of organization	on	(B) Iy	pe of organization		(c) Des	cription of relation	snip	•	
										•	
		penalties of perjury, I deci- and complete Declaration of					nd statements, and to the b sany knowledge	est of my knowledg	je and b	elief, it	is true
Sign Here	K	Juagne 1	M. Dzan	ا ر 02/1		VP	· · · · · · · · · · · · · · · · · · ·		S discus	hown _t	return below?
	1	nture of officer or trustee	TC 3	Date		Title		See instruction	ns X	Yes	No
	l POP	R HSBC BANK U Print/Type preparer's na		Ptanakar's au	onature		Date	(hand)	PTIN		
Paid		KELLY NEUGEE		والمقال	Meurl	DV	02/10/2020	Cecv ''	P012	<u>8559</u>	1
Prepa	L		LOITTE TA		ں ر		Firm's	EIN ► 86-	1065	772	
Use C	Only	Firm's address ► 18	B EAST BRO	AD ST, 14T	H FLOOR						

312-486-9399 Form **990-PF** (2018)

COLUMBUS, OH

43215-3611

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

DESCRIPTION	REVENUE AND EXPENSES PER BOOKS	NET INVESTMENT INCOME
USGI REPORTED AS NONQUALIFIED DIVIDENDS FOREIGN DIVIDENDS NONDIVIDEND DISTRIBUTIONS DOMESTIC DIVIDENDS OTHER INTEREST CORPORATE INTEREST FOREIGN INTEREST EXEMPT INTEREST NOT SUBJECT TO AMT - STA U.S. GOVERNMENT INTEREST (FEDERAL TAXABLE U.S. GOVERNMENT INTEREST - FEDERAL & STA FEDERALLY TAXABLE MUNICIPAL INTEREST OID INCOME OID INCOME OID INCOME ON USGI US GOVERNMENT INTEREST REPORTED AS QUALI NONQUALIFIED FOREIGN DIVIDENDS NONQUALIFIED DOMESTIC DIVIDENDS SECTION 199A DIVIDENDS	25,547. 59,642. 220,243. 42,619. 13,795. 68. 16,948. 1,122. 363,986.	279,057. 1,467,703. 80,496 423,200. 25,547. 220,243. 42,619. 13,795. 68 16,948.
TOTAL	3,063,924.	2,993,936.

13-6309307

FORM 990PF, PART I - OTHER INCOME

> REVENUE AND **EXPENSES** PER BOOKS

DESCRIPTION _____

DEFERRED REVENUE

-22,079. -----

TOTALS

-22,079. =========

FORM 990PF, PART I - TAXES

	REVENUE	
	AND	NET
	EXPENSES	INVESTMENT
DESCRIPTION	PER BOOKS	INCOME
FEDERAL TAX PAYMENT - PRIOR YE	48,274.	
FEDERAL ESTIMATES - INCOME	160,000.	
FOREIGN TAXES ON QUALIFIED FOR	30,653.	30,653.
FOREIGN TAXES ON NONQUALIFIED	1,122.	1,122.
TOTALS	240,049.	31,775

U/A FOR HELENE FULD HEALTH TRUST 10-205620

13-6309307

FORM 990PF, PART II - U.S. AND STATE OBLIGATIONS

DESCRIPTION		BEGINNING BOOK VALUE	ENDING BOOK VALUE	ENDING FMV
SEE ATTACHED STATEMENTS		11,757,252.	11,412,453.	11,584,163.
	TOTALS	11,757,252.	11,412,453.	11,584,163.

DR5075 L736 02/10/2020 14:52:39 . 10⁴-205620

STATEMENT 4

• U/A'FOR HELENE FULD HEALTH TRUST 10-205620

13-6309307

FORM 990PF, PART II - CORPORATE STOCK

DESCRIPTION		BEGINNING BOOK VALUE	ENDING BOOK VALUE	ENDING FMV
SEE ATTACHED STATEMENTS		49,123,689.	49,494,302	81,981,431
	TOTALS	49,123,689	49,494,302	81,981,431.

U/A FOR HELENE FULD HEALTH TRUST 10-205620

13-6309307

FORM 990PF, PART II - OTHER INVESTMENTS

DESCRIPTION

COST/

C OR F BOOK VALUE BOOK VALUE FMV

SEE ATTACHED STATEMENTS

40,422,057.

41,943,894. 56,355,737.

TOTALS

40,422,057. 41,943,894. 56,355,737.

DR5075 L736 02/10/2020 14:52:39 10=205620

STATEMENT 6

U/A FOR HELENE FULD HEALTH TRUST 10-205620 13-6309307 FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID RECIPIENT NAME: UNIVERSITY OF ROCHESTER SCHOOL OF NURSING ADDRESS: 601 ELMWOOD AVENUE ROCHESTER, NY 14642-8404 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL CHARITABLE PURPOSES FOUNDATION STATUS OF RECIPIENT: PC AMOUNT OF GRANT PAID 450,000. RECIPIENT NAME: UNIVERSITY OF CINCINNATI ADDRESS: P.O. BOX 19970 CINCINNATI, OH 45219-0970 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL CHARITABLE PURPOSES FOUNDATION STATUS OF RECIPIENT: PC RECIPIENT NAME: RUTGERS, THE STATE UNIVERSITY OF NJ ADDRESS: 180 UNIVERSITY AVENUE, STE. 102 NEWARK, NJ 07102 **RELATIONSHIP:** NONE PURPOSE OF GRANT: GENERAL CHARITABLE PURPOSES FOUNDATION STATUS OF RECIPIENT: PC AMOUNT OF GRANT PAID2,917,027. U/A FOR HELENE FULD HEALTH TRUST 10-205620 13-6309307 FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID _____ RECIPIENT NAME: PACE UNIVERSITY SCHOOL OF NURSING ADDRESS: 861 BEDFORD ROAD PLEASANTVILLE, NY 10570 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL CHARITABLE PURPOSES FOUNDATION STATUS OF RECIPIENT: AMOUNT OF GRANT PAID 450,000. RECIPIENT NAME: DUKE UNIVERSITY ADDRESS: 2106 CAMPUS DR DURHAM, NC 27708 **RELATIONSHIP:** NONE PURPOSE OF GRANT: GENERAL CHARITABLE PURPOSES FOUNDATION STATUS OF RECIPIENT: PC AMOUNT OF GRANT PAID 450,000. RECIPIENT NAME: UNIVERSITY OF FLORIDA COLLEGE OF NURSING ADDRESS: P.O. BOX 100197 GAINESVILLE, FL 33610 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL CHARITABLE PURPOSES FOUNDATION STATUS OF RECIPIENT:

AMOUNT OF GRANT PAID 600,000.

U/A FOR HELENE FULD HEALTH TRUST 10-205620 13-6309307 FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID _______ RECIPIENT NAME: UNIVERSITY OF MIAMI ADDRESS: PO BOX 248106 CORAL GABLES, FL 33146 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL CHARITABLE PURPOSES FOUNDATION STATUS OF RECIPIENT: PC RECIPIENT NAME: OHIO ST UNIVERSITY FDN SCHOOL OF NURSING ADDRESS: 281 W. LANDE AVE COLUMBUS, OH 43210 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL CHARITABLE PURPOSES FOUNDATION STATUS OF RECIPIENT: PC AMOUNT OF GRANT PAID2,700,000. RECIPIENT NAME: FLORIDA INTL UNIVERSITY ADDRESS: 1120 SW 8TH ST MARC 531 MIAMI, FL 33199 **RELATIONSHIP:** NONE PURPOSE OF GRANT: GENERAL CHARITABLE PURPOSES FOUNDATION STATUS OF RECIPIENT:

9

U/A FOR HELENE FULD HEALTH TRUST 10-205620 13-6309307 FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID

RECIPIENT NAME:

INDIANA UNIVERSITY

ADDRESS:

P.O. BOX 500

BLOOMINGTON, IN 47402

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

GENERAL CHARITABLE PURPOSES

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID 450,000.

RECIPIENT NAME:

REGIS COLLEGE

ADDRESS:

235 WELLESLEY ST.

WESTON, MA 02493

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

GENERAL CHARITABLE PURPOSES

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID 450,000.

RECIPIENT NAME:

UNIVERSITY OF CALIFORNIA

ADDRESS:

1111 FRANKLIN ST.

OAKLAND, CA 94607

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

GENERAL CHARITABLE PURPOSES

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID 600,000.

U/A FOR HELENE FULD HEALTH TRUST 10-205620 13-6309307 FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID RECIPIENT NAME: THE UNIVERSITY OF ALABAMA ADDRESS: 801 UNIVERSITY BOULEVARD TUSCALOOSA, AL 35487 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL CHARITABLE PURPOSES FOUNDATION STATUS OF RECIPIENT: PC RECIPIENT NAME: UNIVERSITY OF ALABAMA AT BIRMINGHAM ADDRESS: 1720 2ND AVE S BIRMINGHAM, AL 35294 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL CHARITABLE PURPOSES FOUNDATION STATUS OF RECIPIENT: RECIPIENT NAME: GRAND VALLEY STATE UNIVERSITY ADDRESS: 1 CAMPUS DR. ALLENDALE CHARTER TWP, MI 49401 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL CHARITABLE PURPOSES FOUNDATION STATUS OF RECIPIENT: PC

AMOUNT OF GRANT PAID 450,000.

U/A FOR HELENE FULD HEALTH TRUST 10-205620 13-6309307 FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID RECIPIENT NAME: FAIRLEIGH DICKINSON UNIVERSITY ADDRESS: 1000 RIVER RD TEANECK, NJ 07666 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL CHARITABLE PURPOSES FOUNDATION STATUS OF RECIPIENT: AMOUNT OF GRANT PAID 600,000. RECIPIENT NAME: SIGMA THETA TAU INTERNATIONAL ADDRESS: 550 W. NORTH ST. INDIANAPOLIS, IN 46202 **RELATIONSHIP:** NONE PURPOSE OF GRANT: GENERAL CHARITABLE PURPOSES FOUNDATION STATUS OF RECIPIENT: AMOUNT OF GRANT PAID 263,000. RECIPIENT NAME: UNIVERSITY OF NEW ENGLAND ADDRESS: 11 HILLS BEACH RD BIDDEFORD, ME 04005 RELATIONSHIP: NONE

STATEMENT 12

PURPOSE OF GRANT:

PC

GENERAL CHARITABLE PURPOSES FOUNDATION STATUS OF RECIPIENT:

U/A FOR HELENE FULD HEALTH TRUST 10-205620 13-6309307 FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID RECIPIENT NAME: BLACKBAUD INC. ADDRESS: 65 FAIRCHILD STREET CHARLESTON, SC 29492 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL CHARITABLE PURPOSES FOUNDATION STATUS OF RECIPIENT: PC AMOUNT OF GRANT PAID 4,795. TOTAL GRANTS PAID: 13,944,822.