e i	ر فر		,   <u>/</u> :	•	Return of Private	e Foundation		OMB No 1545-0052
``			90-PF	or S	Section 4947(a)(1) Trust Trea er social security numbers or	ted as Private Foundatio		2018
	Interf	al Re	t of the Treasury	···	w.irs.gov/Form990PF for inst			Open to Public Inspection
			dar year 2018 or tax year	r beginning DE	C 1, 2018	, and ending	NOV 30, 2019 A Employer identification	
			foundation F <u>HUNT</u> ER CHA	ARITABLE TS	iф		A Employer Identificatio	n number
			RTIN JAFFE	WILWDIE, 19	•		13-7141718	3
			nd street (or P O box number i	If mail is not delivered to stre	eet address)	Room/suite	B Telephone number	
			5 BOSTON POS		,	11	914-630-73	106
			own, state or province, cou		n postal code	•	C If exemption application is	pending, check here
			CHMONT , NY all that apply:	10538 Initial return	Initial ceturn of a fe	ormer public charity	D 1 Foreign organization	is chack hara
	u o	IICCK	all triat apply.	Final return	Amended return	ormer public charty		, , , , , ,
				Address change	Name change		Foreign organizations m check here and attach or	eeting the 85% test, omputation
	H C	heck	type of organization:	X Section 501(c)(3)	exempt private foundation	NI.	E If private foundation st	atus was terminated
		] Se	ction 4947(a)(1) nonexem	npt charitable trust	Other taxable private found	ation UY	under section 507(b)(1	1
			arket value of all assets at	end of year J Accou	nting method: X Cash	Accrual	F If the foundation is in a	60-month termination
			Part II, col. (c), line 16)	. 155 / Dani	Other (specify)	10 /	under section 507(b)(1	)(B), check here
	Pa	s rt l	· · · · · · · · · · · · · · · · · · ·		umn (d) must be on cash bas		(-) Ad	(d) Disbursements
	_ra	r t 1	(The total of amounts in colunecessarily equal the amoun	mns (b), (c), and (d) may not	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	for charitable purposes (cash basis only)
-		1	Contributions, gifts, grant		18,853,741.		N/A	
\		2	Check If the foundatio	n is not required to attach Sch. B	,			
•		3	Interest on savings and tempo cash investments	orary	207,513.	46,855		STATEMENT 1.
		4	Dividends and interest fro	om securities	206,678.	62,607	•	STATEMENT 2
		5a	Gross rents				,	
		b	Net rental income or (loss)		•			
	g.	6a	Net gain or (loss) from sale of		112,330.			
	Revenue	b	Gross sales price for all assets on line 6a	<u>1,575,405.</u>	-			,;
	ě	7	Capital gain net income (from	Part IV, line 2)		112,330	•	
	-	8	Net short-term capital gai	ın				
		9	Income modifications Gross sales less returns	I				
			and allowances					
			Less Cost of goods sold				RE	CENTED
			Gross profit or (loss) Other income				<del>                                      </del>	
			Total Add lines 1 throug	ıh 11	19,380,262.	221,792	· Z FE	B 6 2023 131:
	$\dashv$	12 13	Compensation of officers, dire		10,162.	10,162		B 0 2023   S
		14	Other employee salaries a		10,102.	20,102	<del>                                     </del>	DEN IIT
			Pension plans, employee				1 0	DEN, UT
	ses		Legal fees	STMT 3	396.	0		0.
	èns		Accounting fees	STMT 4	5,500.	5,500		0.
	Exp		Other professional fees					
	<u>«</u>	17	Interest					
	Operating and Administrative Expenses	18	Taxes	STMT 5	1,232.	693	•	0.
	nis	19	Depreciation and depletio	on				
	흥		Occupancy		2,450.	0	•	0.
	ďρ	21	Travel, conferences, and		<u> </u>	<u> </u>		
	ā	22	Printing and publications		25 671	24 705		
	ting	23	Other expenses	STMT 6	25,671.	24,785	•	0.
	era	24	Total operating and adm		45,411.	41,140		0.
	ő	25	expenses Add lines 13 t Contributions, gifts, grant		220,500.	41,140	•	220,500.
			Total expenses and disb		220,300.			220,300.
		20	Add lines 24 and 25	arsomonts	265,911.	41,140		220,500.
		27	Subtract line 26 from line	e 12;			<del></del>	
							i .	

823501 12-11-18 LHA For Paperwork Reduction Act Notice, see instructions

 $\boldsymbol{a}\,$  Excess of revenue over expenses and disbursements

b Net investment income (if negative, enter -0-)

c Adjusted net income (if negative, enter -0-)

Form **990-PF** (2018)

180,652

N/A

or	n 99	00-PF (2018) -MARTIN JAFFE	<del></del>	13-	7141718 Page 2
P	art	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year	End o	<u> </u>
<u>-</u>		Column shade be for end-or-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing .	9,696.	924,160.	<u>924,160.</u>
		Savings and temporary cash investments			
	3	Accounts receivable ►			
		Less: allowance for doubtful accounts			<del></del>
	4	Pledges receivable 🖢			
		Less: allowance for doubtful accounts			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons			
	7	Other notes and loans receivable		<del>-</del>	
		Less: allowance for doubtful accounts			
ţ	8	Inventories for sale or use			ü,
Assets	9	Prepaid expenses and deferred charges			
۷	10a	Investments - U.S. and state government obligations			
	b	Investments - corporate stock	64,860.	0.	0.
	C	Investments - corporate bonds	418,721.	0.	0.
	11	Investments - land, buildings, and equipment basis		. <u>.</u> .	
		Less accumulated depreciation	,		
	12	Investments - mortgage loans			
	13	Investments - other STMT 7	102,463.	19,417,017.	19,417,017.
	14	Land, buildings, and equipment basis ▶			
		Less accumulated depreciation			
	15	Other assets (describe ►)		,	
	16	Total assets (to be completed by all filers - see the	,		
		instructions. Also, see page 1, item I)	595,740.	20,341,177.	20,341,177.
	17	Accounts payable and accrued expenses			
	18	Grants payable			
S	19 20 21 22	Deferred revenue			
III		Loans from officers, directors, trustees, and other disqualified persons			
Liabilities		Mortgages and other notes payable		•	
_				,	
		· · · · · · · · · · · · · · · · · · ·			
	23	Total liabilities (add lines 17 through 22)	0.	0.	
		Foundations that follow SFAS 117, check here			
		and complete lines 24 through 26, and lines 30 and 31			
or Fund Balances	24	Unrestricted			
lan	25	Temporarily restricted			
Ba	26	Permanently restricted			
2		Foundations that do not follow SFAS 117, check here			
띤		and complete lines 27 through 31			
S	27	Capital stock, trust principal, or current funds	625,451.	625,451.	
set	28	Paid-in or capital surplus, or land, bldg, and equipment fund	0.	0.	
Stat Assets	29	Retained earnings, accumulated income, endowment, or other funds	-29,711.	19,715,726.	
Ä	30	Total net assets or fund balances	595,740.	20,341,177.	
	1				(
$\mathcal{Q}$	31	Total liabilities and net assets/fund balances	595,740.	20,341,177.	
	art	III Analysis of Changes in Net Assets or Fund B	Balances		
1	- - -	I net assets or fund balances at beginning of year - Part II, column (a), line	30		<del>-</del>
		st agree with end-of-year figure reported on prior year's return)		1	595,740.
		r amount from Part I, line 27a		<del>- 1</del>	19,114,351.
			CATNI ONI TARRESON	MENITIC 2	
		r increases not included in line 2 (itemize)  UNREALIZED	GHIN ON THAFPI		631,086.
		lines 1, 2, and 3		4	20,341,177.
		eases not included in line 2 (itemize)	olumn (h) line 20	5	0. 20,341,177.
0	Uld	I net assets or fund balances at end of year (line 4 minus line 5) - Part II, c	olumni (v), illie su		Form <b>990-PF</b> (2018)

Part IV Capital Gains and	Losses for Tax on In	vestmen	t Income						
	nd(s) of property sold (for example; or common stock, 200 shs		te,	( <b>b</b> ) D	How ac - Purc - Dona	cquired hase ation		acquired lay, yr.)	( <b>d)</b> Date sold (mo., day, yr)
1a '									
b SEE ATTACHED ST	ATEMENT								
C									
d									<u> </u>
e									
(e) Gross sales price	(f) Depreciation allowed (or allowable)		st or other basis expense of sale					aın or (loss s (f) mınus	
a									
b			<u> </u>						
C									
d									<u>-</u>
e 1,575,405.			1,579,75	7.					112,330.
Complete only for assets showing gair	ı ın column (h) and owned by	the foundation	on 12/31/69.					Col. (h) gain	
(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69		cess of col. (1) col. (j), if any			col		not less tha (from col. (	
a									
b .									
C									
d ·									
e									112,330.
	∫ If gain, also enter	ın Part I, line	7	1					
2 Capital gain net income or (net capital le	oss)	- ın Part İ, lıne	7	<i>]</i> [	2				112,330.
3 Net short-term capital gain or (loss) as	defined in sections 1222(5) an	ıd (6):							
If gain, also enter in Part I, line 8, colum				] [					
If (loss), enter -0- in Part I, line 8					3			N/A	
Part V   Qualification Unde	r Section 4940(e) for	Reduced	Tax on Net	Inv	estn	nent Inc	ome		
(For optional use by domestic private foun-	dations subject to the section 4	1940(a) tax on	ı net investment ir	icome	e.)				
If section 4940(d)(2) applies, leave this par	t blank								
11 Section 4540(u)(2) applies, leave this pai	t Dialik.								
Was the foundation liable for the section 4! If "Yes," the foundation doesn't qualify und			· ·	rıod?					Yes X No
1 Enter the appropriate amount in each of				ntries	S.				
(a)	(b)		, ,	(c)				•	(d)
Base periód years Calendar year (or tax year beginning in)	Adjusted qualifying dis	tributions	Net value of no			use assets	Ì		oùtion ratio rided by col. (c))
2017		8,500.			63	6,076		(001. (0) 010	.044806
2016		6,000.				0,067			.038802
2015		5,750.				6,644			.052065
2013		$\frac{3,730.}{4,719.}$				0,857			.049538
<del></del>		$\frac{4}{5},714.$				2,071			.050869
2013		J, /14.				4,011	•	· · · · · · ·	•030003
O Takil of line 4 nations (d)									226000
2 Total of line 1, column (d)		b O b 5	0				2		.236080
3 Average distribution ratio for the 5-year		on line 2 by 5.0	u, or by the numb	eror	years				047016
the foundation has been in existence if	less than 5 years						3	<del></del>	.047216
4 Enter the net value of noncharitable-use	e assets for 2018 from Part X.	line 5					4	1	4,100,183.
								_	
5 Multiply line 4 by line 3							5		665,754.
· manuply and i by and a									
6 Enter 1% of net investment income (1%	of Part I, line 27b)						6		1,807.
( )									
7 Add lines 5 and 6							7		667,561.
							<u>                                   </u>		,
8 Enter qualifying distributions from Part	XII, line 4						8		220,500.
If line 8 is equal to or greater than line 7 See the Part VI instructions	, check the box in Part VI, line	1b, and comp	olete that part usin	g a 1	% tax ı	rate			

	990-RF (2018) -MARTIN JAFFE 13-71 rt VI   Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - se	41718 Page 4
	Exempt operating foundations described in section 4940(d)(2), check here \to	ee mstructions/
		<u> </u>
	Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)  Domestic foundations that meet the section 4940(e) requirements in Part V, check here and enter 1%	3,613.
	of Part I, line 27b	3,013.
	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations, enter 4% of Part I, line 12, col. (b).	
	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)	
	Add lines 1 and 2	3,613.
	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)	9,013.
	Tax based on investment income Subtract line 4 from line 3. If zero or less, enter -0-	3,613.
	Credits/Payments:	<u> </u>
	2018 estimated tax payments and 2017 overpayment credited to 2018 6a 440.	
	Exempt foreign organizations - tax withheld at source  6b  0.	i
	Tax paid with application for extension of time to file (Form 8868)  6c  0.	
	Backup withholding erroneously withheld 6d 0.	
	Total credits and payments. Add lines 6a through 6d	440.
	Enter any <b>penalty</b> for underpayment of estimated tax. Check here if Form 2220 is attached 8	0.
	Tax due If the total of lines 5 and 8 is more than line 7, enter amount owed	3,173.
	Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	
	Enter the amount of line 10 to be: Credited to 2019 estimated tax	
	rt 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. $\triangleright$ \$ (2) On foundation managers. $\triangleright$ \$	
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation	1
	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.	•
	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
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a X
	If "Yes," has it filed a tax return on Form 990-T for this year?	
	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5 X
	If "Yes," attach the statement required by General Instruction T	
	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:	1
	By language in the governing instrument, or      District leads to the first such as a second of the country of the second of the country of the second of the country of the second of the secon	
	By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law  and the process of the process	
	remain in the governing instrument?	6 X 7 X
,	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
0.	Enter the states to which the foundation reports or with which it is registered. See instructions	t l
04	Enter the states to which the foundation reports or with which it is registered. See instructions  NY	
, .	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)	—
		8b X
	of each state as required by General Instruction G? If "No," attach explanation  Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar	8b X
	year 2018 or the tax year beginning in 2018? See the instructions for Part XIV. If "Yes," complete Part XIV	9 X
	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses	10 X
	End and position of the state o	Form <b>990-PF</b> (2018)

	990-RF (2018) - MARTIN JAFFE 13-7141	<u>718</u>		Page 8
Pa	rt VII-A Statements Regarding Activities (continued)			
•			Yes	No
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of			
	section 512(b)(13)? If "Yes," attach schedule. See instructions	11		X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges?			
	If "Yes," attach statement. See instructions	12		X
13	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 ► MARTIN JAFFE Telephone no. ► 914 – 63		<u> 106</u>	
	Located at ► 1415 BOSTON POST RD, STE 11, LARCHMONT, NY ZIP+4 ►10	<u>538</u>		
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	N	/A	
16	At any time during calendar year 2018, did the foundation have an interest in or a signature or other authority over a bank,		Yes	No
	securities, or other financial account in a foreign country?	16		X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the			
	foreign country			
Pa	rt VII-B   Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 If any Item is checked in the "Yes" column, unless an exception applies.		Yes	No
1a	During the year, did the foundation (either directly or indirectly):			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?			
	(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)?			
	(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.)			
h	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations			
٠	section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions  N/A	1b		
	Organizations relying on a current notice regarding disaster assistance, check here	<u> </u>		
	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected			
٠	before the first day of the tax year beginning in 2018?	1c	•	Х
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation	!-		Α.
2				
	defined in section 4942(j)(3) or 4942(j)(5)).  At the end of tay year 2018, did the foundation have any undistributed income (lines 6d and 6e. Part XIII) for tay year(c) beginning			
d	At the end of tax year 2018, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2018?  Yes X No			
L	If "Yes," list the years \( \bigs_{\text{\tinx}\text{\tinx}\text{\tik}}}}\text{\texi}\text{\texit{\text{\text{\text{\tinte\tintet{\text{\text{\t			
D				
	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach			
	statement - see instructions )  N/A	2b		
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			
	<u> </u>			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise 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 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.) $N/A$	3b		
	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

4b X Form **990-PF** (2018)

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Part VII-B	Statements Regarding Activities for Whic	h Form 4720 May Be F	Required (continu	ued)		
	year, did the foundation pay or incur any amount to:	•			Ye	s No
	on propaganda, or otherwise attempt to influence legislation (sec			es X No		
(2) Influer	nce the outcome of any specific public election (see section 4955	5); or to carry on, directly or indire		C		
•	ter registration drive?			s X No		1 1
	le a grant to an individual for travel, study, or other similar purpo		, Ye	s X No		
, ,	e a grant to an organization other than a charitable, etc., organization	ation described in section	П.,	[ <del>]</del>		
	d)(4)(A)? See instructions			s X No	ĺ	
	le for any purpose other than religious, charitable, scientific, litera	ary, or educational purposes, or i		s X No		
	evention of cruelty to children or animals? ver is "Yes" to 5a(1)-(5), did <b>any</b> of the transactions fail to qualify	under the exceptions described		S LAJ NO		
	4945 or in a current notice regarding disaster assistance? See in		in negulations	N/A	5b	
	ons relying on a current notice regarding disaster assistance. Che				,	<del>                                     </del>
	er is "Yes" to question 5a(4), does the foundation claim exemption		ined			-   :
	e responsibility for the grant?		I/A □ Y€	s No		
=	ach the statement required by Regulations section 53.4945-5(d).		-,			
•	ndation, during the year, receive any funds, directly or indirectly,					:
	benefit contract?		Y6	es X No	_	
<b>b</b> Did the fou	ndation, during the year, pay premiums, directly or indirectly, on	a personal benefit contract?			6b	x
	Sb, file Form 8870.					
7a At any time	e during the tax year, was the foundation a party to a prohibited to	ax shelter transaction?	Y6	es 🗶 No 📙		
<b>b</b> If "Yes," did	the foundation receive any proceeds or have any net income att	tributable to the transaction?		N/A	7b	
8 Is the found	dation subject to the section 4960 tax on payment(s) of more that	an \$1,000,000 in remuneration o				
	achute payment(s) during the year?	···		s X No		1
Part VIII	Information About Officers, Directors, Tru Paid Employees, and Contractors		nagers, Highly	/		
1 List all office	cers, directors, trustees, and foundation managers an		T O	(at) a	1 -	
	(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) 8 accou allo	xpense nt, other wances
MARTIN 1	B. JAFFE	TRUSTEE				
106 SUN	SET_BAY DRIVE					
PALM BE	ACH GARDENS, FL 33418	2.00	5,081.	0.		0.
DIANNE .		TRUSTEE				
	SET BAY DRIVE			_		_
PALM BE	ACH GARDENS, FL 33418	2.00	5,081.	0.	1	<u>0.</u>
		_ <del>_</del>			1	
					i	
·		<u>-</u>			-	
		_ <del>_</del>			,	
2 Compensa	tion of five highest-paid employees (other than those	included on line 1). If none.	enter "NONE."		.L	
	me and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	l accor	xpense int, other wances
N	ONE	devotes to position		componation	<del> </del>	
	ONE					
				,		
	<del>-</del>					
				*		
					ĺ	
					<u> </u>	
Total number o	of other employees paid over \$50,000			<b>&gt;</b>		0
				Form	990-P	<b>F</b> (2018)

Form **990-PF** (2018)

All other program-related investments. See instructions

Total. Add lines 1 through 3

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P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign fou	ndations,	see instructions)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
-	Average monthly fair market value of securities	1a	13,230,493.
b	Average of monthly cash balances	1b	13,230,493. 1,084,414.
C	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	14,314,907.
	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	14,314,907.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	214,724.
5	Net value of noncharitable-use assets Subtract line 4 from line 3. Enter here and on Part V, line 4	5	14,100,183.
6	Minimum investment return Enter 5% of line 5	6	705,009.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations are	nd certain	
	foreign organizations, check here  and do not complete this part.)		
1	Minimum investment return from Part X, line 6	1	705,009.
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	3,613.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	701,396.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	701,396.
6	Deduction from distributable amount (see instructions)	6	0.
7_	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	701,396.
=	art XII Qualifying Distributions (see instructions)	<del>, ,</del>	
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		000 500
_	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	220,500.
þ	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	
þ	Cash distribution test (attach the required schedule)	3b	000 500
4	Qualifying distributions Add lines 1a through 3b. Enter here and on Part V, line 8; and Part XIII, line 4	4	220,500.
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	0.
6	Adjusted qualifying distributions Subtract line 5 from line 4	6	220,500.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation 4940(e) reduction of tax in those years.	qualifies fo	r the section

Form 990-PF (2018)

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,				701 206
line 7				701,396.
2 Undistributed income, if any, as of the end of 2018			20 (22	
a Enter amount for 2017 only			28,622.	
b Total for prior years:				
3 Excess distributions carryover, if any, to 2018:		0.		
a From 2013	,			
<b>b</b> From 2014				
c From 2015				
d From 2016				
e From 2017				
<del></del>	0.			<del> </del>
f Total of lines 3a through e				
4 Qualifying distributions for 2018 from				
Part XII, line 4: ► \$ 220,500.			20 (22	
a Applied to 2017, but not more than line 2a			28,622.	
<b>b</b> Applied to undistributed income of prior				
years (Election required - see instructions)		0.		· <del></del>
c Treated as distributions out of corpus				
(Election required - see instructions)	0.			
d Applied to 2018 distributable amount				191,878.
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.			0.
6 Enter the net total of each column as indicated below:				
a 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.	
f Undistributed income for 2018. Subtract			•	
lines 4d and 5 from line 1. This amount must				i
be distributed in 2019				509,518.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3) (Election				
may be required - see instructions)	0.			
8 Excess distributions carryover from 2013				****
	0.			
not applied on line 5 or line 7				<del></del>
9 Excess distributions carryover to 2019. Subtract lines 7 and 8 from line 6a	0.			
0 Analysis of line 9:				_ <del></del>
a Excess from 2014				
b Excess from 2015				
c Excess from 2016				
d Excess from 2017				
e Excess from 2018				

### JEFF HUNTER CHARÍTABLE TST

©orm 990-PF (2018) -MARTIN				13-71	41718 Page 10
Part XIV Private Operating F	<b>Foundations</b> (see in	structions and Part V	II-A, question 9)	N/A	
1 a If the foundation has received a ruling of	or determination letter that	t it is a private operating			
foundation, and the ruling is effective fo	or 2018, enter the date of	the ruling	<b>•</b>		
b Check box to indicate whether the foun	dation is a private operatii	ng foundation described	in section	4942(j)(3) or 49	942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year	<u> </u>	Prior 3 years		
income from Part I or the minimum	(a) 2018	<b>(b)</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					1-111-111-11
used directly for active conduct of				•	
exempt activities					
e Qualifying distributions made directly					
for active conduct of exempt activities.					
Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the					
alternative test relied upon					_
a "Assets" alternative test - enter (1) Value of all assets				•	
• •					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test - enter					
2/3 of minimum investment return shown in Part X, line 6 for each year					
listed					
c "Support" alternative test - enter:					
(1) Total support other than gross					
investment income (interest,					
dividends, rents, payments on					
securities Ioans (section 512(a)(5)), or royalties)					
(2) Support from general public					
and 5 or more exempt					
organizations as provided in section 4942(j)(3)(B)(III)					
(3) Largest amount of support from					
an exempt organization					
(A) Gross investment income					
Part XV Supplementary Info	rmation (Comple	te this part only	if the foundatio	n had \$5,000 or me	ore in assets
at any time during					•
1 Information Regarding Foundation	on Managers:		-		
a List any managers of the foundation wh	no have contributed more	than 2% of the total cor	tributions received by th	e foundation before the clo	se of any tax
year (but only if they have contributed i	more than \$5,000) (See s	ection 507(d)(2).)			
NONE					
b List any managers of the foundation wh			(or an equally large por	tion of the ownership of a p	artnership or
other entity) of which the foundation ha	is a 10% or greater interes	st.			
NONE					
2 Information Regarding Contribut	tion, Grant, Gıft, Loan,	Scholarship, etc., F	rograms:		
Check here <b>X</b> If the foundation	only makes contributions	to preselected charitable	e organizations and does	not accept unsolicited requ	ests for funds. If
the foundation makes gifts, grants, etc.	, to individuals or organiza	ations under other cond	itions, complete items 2a	a, b, c, and d.	
a The name, address, and telephone num	nber or email address of th	ne person to whom appl	ications should be addre	ssed;	
b The form in which applications should	be submitted and informa	tion and materials they s	should include.		
c Any submission deadlines:		-			
d Any restrictions or limitations on award	le euch ac hy geographic	al areas charitable fields	kinds of institutions of	other factors	
a Any resulctions of illimitations of dwalt	is, sacii as by yeograpilic	ai ai cas, ciiai ilabic ilelus	, and or modulions, or	other lactors	

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-MARTIN JAFFE

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Supplementary Information (continued) Part XV 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient show any relationship to Foundation Purpose of grant or Amount status of , any foundation manager contribution Name and address (home or business) or substantial contributor recipient a Paid during the year PUBLIC CHARITY TO SUPPORT THE CHARITY AMERICAN CANCER SOCIETY N/A 132 W 32ND ST NEW YORK, NY 10101-0909 TO SUPPORT THE CHARITY 5,500. AMERICAN MUSEUM OF NATURAL HISTORY N/A PUBLIC CHARITY CENTRAL PARK WEST AT 79TH ST. NEW YORK, NY 10024 TO SUPPORT THE CHARITY 1,000. PUBLIC CHARITY TO SUPPORT THE CHARITY AMERICAN RED CROSS N/A 520 WEST 49TH ST NEW YORK, NY 10019 1 000. PUBLIC CHARITY TO SUPPORT THE CHARITY ASPCA N/A 600 PENN AVE SE #450 WASHINGTON DC 20003 3,500. CHRISTOPHER & DANA REEVES FDN N/A PUBLIC CHARITY TO SUPPORT THE CHARITY 636 MORRIS TURNPIKE SUITE 3A 3 500. SHORT HILLS NJ 07078 SEE CONTINUATION SHEET(S) ➤ 3a Total 220,500, b Approved for future payment NONE **▶** 3b Total

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-MARTIN JAFFE

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Part XVI-A	Analysis of Income-Producing A	<b>Activities</b>

Enter gross amounts unless otherwise indicated	Unrelated	Unrelated business income		ded by section 512, 513, or 514	(e)	
1 Program service revenue	(a) Business code	( <b>b</b> ) Amount	(C) Exclu- sion code	(d) Amount	Related or exempt function income	
•	0000					
a	-					
b					· <del></del>	
<u> </u>						
d	1			,	<del></del>	
e						
g Fees and contracts from government agencies	-					
2 Membership dues and assessments	+					
3 Interest on savings and temporary cash			1 1	207 512		
investments			14			
4 Dividends and interest from securities	-		1 14	200,078.	=-	
5 Net rental income or (loss) from real estate:	-					
a Debt-financed property	+					
b Not debt-financed property	-					
6 Net rental income or (loss) from personal			1			
property			<u> </u>			
7 Other investment income	-		<u> </u>			
8 Gain or (loss) from sales of assets other		•				
than inventory			18	112,330.		
9 Net income or (loss) from special events			ļ			
10 Gross profit or (loss) from sales of inventory				<u> </u>		
11 Other revenue:						
a	_					
b	_					
C						
d		-				
e						
12 Subtotal. Add columns (b), (d), and (e)		0.		526,521.	0.	
13 Total Add line 12, columns (b), (d), and (e)				13	526,521.	
(See worksheet in line 13 instructions to verify calculations.)	)					

#### Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes

Line No	Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes).
	. ,

Form **990-PF** (2018)

JEFF HUNTER CHA -MARTIN JAFFE -MARTIN JAFFE	RITABLE TST		ge 13
Part XVII Information Regarding Transf	ers to and Transactions a	nd Relationships With Noncharitable	
Did the organization directly or indirectly engage in any of (other than section 501(c)(3) organizations) or in section 5	• • • •	in described in section 501(c)	No
<ul> <li>a Transfers from the reporting foundation to a noncharitable</li> <li>(1) Cash</li> <li>(2) Other assets</li> </ul>	e exempt organization of	1a(1) 1a(2)	X
<ul> <li>b Other transactions:</li> <li>(1) Sales of assets to a noncharitable exempt organization</li> <li>(2) Purchases of assets from a noncharitable exempt org</li> <li>(3) Rental of facilities, equipment, or other assets</li> <li>(4) Reimbursement arrangements</li> </ul>		1b(1) 1b(2) 1b(3) 1b(4)	X X X
<ul> <li>(5) Loans or loan guarantees</li> <li>(6) Performance of services or membership or fundraisin</li> <li>c Sharing of facilities, equipment, mailing lists, other assets,</li> <li>d If the answer to any of the above is "Yes," complete the follow or services given by the reporting foundation. If the foundation</li> </ul>	or paid employees lowing schedule. Column (b) should alv		X X X
column (d) the value of the goods, other assets, or service	es received oncharitable exempt organization	(d) Description of transfers, transactions, and sharing arrangemen	nts
		The second described	
2a Is the foundation directly or indirectly affiliated with, or relation section 501(c) (other than section 501(c)(3)) or in section b. If "Yes," complete the following schedule.  (a) Name of organization			No
N/A	1-1 - >		

Signature of officer or trustee Title Check X If PTIN Print/Type preparer's name Date Preparer's signature self- employed Paid P00189632 CHRISTOPHER BARTL 01/29/20 Preparer Firm's EIN ▶ 05-0479760 BARTLETT & PIERONI, LLP Firm's name **Use Only** 

Under penalties of perjury, I declare that Thave examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief of style, correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge

Firm's address ▶ 1275 WAMPANOAG TRAIL EAST PROVIDENCE, RI 02915

401-272-9100 Form **990-PF** (2018)

Sign Here May the IRS discuss this return with the preparer shown below? See instr

X Yes

TRUSTEE

Part IV. Capital Gains and Losses for Tax on Investment Income (b) How acquired P - Purchase D - Donation (mo., day, yr.) (a) List and describe the kind(s) of property sold, e.g., real estate, (d) Date sold (mo, day, yr) 2-story brick warehouse; or common stock, 200 shs. MLC Co. 16202 -NEW YORK ST URBAN P 01/27/1803/15/19 1a ML P 03/12/1404/01/19 16202 -NEW YORK STMGT AGY b **ML** P 01/27/1805/01/19 MGT AGY c ML 16202 -NEW YORK STd ML 16202 -NEW YORK NY CITY TFA P |01/27/18|05/01/19 16202 -NY ST DORM ATRV P |01/27/18|08/15/19 e ML f ML 16202 -PORT AUTH NY & NJ P 01/27/18|10/15/19 P g BOA - ATTACHMENT P h BOA - ATTACHMENT P BOA -UST NT BOA - ATTACHMENT P k JP MORGAN - ATTACHMENT JP MORGAN - ATTACHMENT D m n 0 (h) Gain or (loss) (f) Depreciation allowed (g) Cost or other basis (e) Gross sales price (e) plus (f) minus (g) (or allowable) plus expense of sale 0. 100,000. 100,000 а 0. 5,000. 5,000. b -949. 40,949 40,000. С 45,000. 0. 45,000. d 100,000. 0. 100,000. е 0. 100,000. 100,000. -196. 138,650. 138,846. g -186. 382,669 382,855. h 7,832 122. 7,954 1 656,132 659,275 -3,143. -1,786. k 118,468. m n 0 Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 (I) Losses (from col (h)) Gains (excess of col. (h) gain over col. (k), (j) Adjusted basis (k) Excess of col. (1) but not less than "-0-") (i) F M.V. as of 12/31/69 as of 12/31/69 over col. (j), if any 0. a 0. b -949. C 0. ď 0. е 0. f -196. 9 -186. h 122. -3,143. -1,786. k 118,468. m n 0 If gain, also enter in Part I, line 7 2 Capital gain net income or (net capital loss) 112,330. If (loss), enter "-0-" in Part I, line 7 2 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 8, column (c).

N/A

If (loss), enter "-0-" in Part I, line 8

Part XV Supplementary Informatio	n			
3 Grants and Contributions Paid During the		1		
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient	CONTIDUION	
, in the second	_			
CITY HARVEST	N/A	PUBLIC CHARITY	TO SUPPORT THE CHARITY	
6 EAST 32ND ST., 5THFLOOR NEW YORK, NY 10016				500
CITY MEALS ON WHEELS	N/A	PUBLIC CHARITY	TO SUPPORT THE CHARITY	
355 LEXINGTON AVE				1 500
NEW YORK, NY 10017	· · · · · · · · · · · · · · · · · · ·			1,500
COALITION FOR THE HOMELESS	N/A	PUBLIC CHARITY	TO SUPPORT THE CHARITY	
129 FULTON ST				
NEW YORK, NY 10038	•			1,000
	,			
GOD'S LOVE WE DELIVER 166 6TH AVE	N/A	PUBLIC CHARITY	TO SUPPORT THE CHARITY	
NEW YORK, NY 10013			,	3,000
HABITAT FOR HUMANITY	N/A	PUBLIC CHARITY	TO SUPPORT THE CHARITY	
111 JOHN STREET 23 FLOOR				
NEW YORK, NY 10038				1,000
MANHATTAN THEATRE CLUB 311 WEST 43RD ST.	N/A	PUBLIC CHARITY	TO SUPPORT THE CHARIY	
NEW YORK, NY 10036				3,500
MEMORIAL SLOAN KETTERING CANCER CTR	N/A	PUBLIC CHARITY	TO SUPPORT THE CHARITY	
1275 YORK AVE NEW YORK, NY 10065				1,500
METROPOLITAN MUSEUM OF ART	N/A	PUBLIC CHARITY	TO SUPPORT THE CHARITY	
1000 FIFTH AVE				
NEW YORK, NY 10028-1098		•		1,500
MUSEUM OF MODERN ART 11 WEST 53RD STREET	N/A	PUBLIC CHARITY	TO SUPPORT THE CHARITY	
NEW YORK, NY 10019	-			1,500
NATIONAL PARK FOUNDATION	N/A	PUBLIC CHARITY	TO SUPPORT THE CHARITY	
1110 VERMONT AVE , NW, SUITE 200 WASHINGTON DC 20005				1,000
Total from continuation sheets			-	206,000

Part XV Supplementary Informa	tion	<u>.                                    </u>		
3 Grants and Contributions Paid During				
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient	33.11.12.13.11	
NEW YORK PUBLIC LIBRARY	N/A	PUBLIC CHARITY	TO SUPPORT THE CHARITY	•
476 FIFTH AVE				
NEW YORK, NY 10018				500.
	•			
NEW YORK PUBLIC RADIO	N/A	PUBLIC CHARTTY	TO SUPPORT THE CHARITY	
PO BOX 1550				
NEW YORK, NY 10116-1550				3,000.
PUBLIC THEATER	N/A	PUBLIC CHARITY		
425 LAFAYETTE ST	N/A	PUBLIC CHARITI		
NEW YORK, NY 10003			TO SUPPORT THE CHARITY	6,000.
				*
		L		
THE ACTORS FUND OF AMERICA	N/A	PUBLIC CHARITY	TO SUPPORT THE CHARITY	
729 SEVENTH AVE, 10TH FLOOR NEW YORK, NY 10019			TO SOFFORT THE CHARTTI	3,000.
THE JULLIARD SCHOOL	N/A	PUBLIC CHARITY	TO SUPPORT THE CHARITY	
60 LINCOLN CENTER PLAZA NEW YORK, NY 10023				15,000.
NEW TORK, NT 10025				<u> </u>
THE SALVATION ARMY	N/A	PUBLIC CHARITY	TO SUPPORT THE CHARITY	
120 WEST 14TH ST NEW YORK, NY 10011-7393				1,000.
NEW TORK, NY 10011-7393				
v				
THIRTEEN	N/A	PUBLIC CHARITY	TO SUPPORT THE CHARITY	
PO BOX 1313				3 500
NEW YORK, NY 10019				3,500.
WILDLIFE CONSERVATION SOCIETY	N/A	PUBLIC CHARITY	TO SUPPORT THE CHARITY	
2300 SOUTHERN BLVD				
BRONX, NY 10460				3,500.
•				
WORLD WILDLIFE FUND	N/A	PUBLIC CHARITY	TO SUPPORT THE CHARITY	
1250 TWENTY-FOURTH ST, NW				
WASHINGTON, DC 20037				1,000.
25 BOND ARTS CENTER	N/A	PUBLIC CHARITY	TO SUPPORT THE CHARITY	
25 BOND ST				
NEW YORK, NY 10012				77,000.
Total from continuation sheets				

-MARTIN JAFFE

Part XV Supplementary Information	Part XV Supplementary Information							
3 Grants and Contributions Paid During the Y	ear (Continuation)							
. 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)	any foundation manager or substantial contributor	recipient	Contribution					
PLANNED PARENTHOOD FEDERATION OF	N/A	PUBLIC CHARITY	TO SUPPORT THE CHARITY					
AMERICA								
123 WILLIAM ST 10TH FLOOR								
NEW YORK, NY 10038				16,000.				
ST JUDE CHILDREN'S RESEARCH HOSPITAL	N/A	PUBLIC CHARITY	TO SUPPORT THE CAHRITY					
501 ST JUDE PLACE								
MEMPHIS, TN 38105				25,000.				
MANHATTAN ANIMAL CARE CENTER	N/A	PUBLIC CHARITY	TO SUPPORT THE CHARITY					
326 EAST 110TH ST								
NEW YORK, NY 10029				500.				
	<b>)</b>							
BAFTA NEW YORK	N/A	PUBLIC CHARITY	TO SUPPORT THE CHARITY					
2 PARK AVE STE 2015	,,,,							
NEW YORK, NY 10016				5,000.				
•								
JAFCO	N/A	DIDITO CUARTOV	TO SUPPORT THE CHARITY					
4200 N UNIVERSITY DR	N/A	TOBBIC CHARTIT	TO SOFFORT THE CHARTIT					
SUNRISE, FL 33351				15,000.				
ING.	AT / 2	DUDI TO CUARTMY	mo cuppopm mur cuantmy					
WMC 100 WOODS RD	N/A	POBLIC CHARITI	TO SUPPORT THE CHARITY					
VALHALLA, NY 10595	,			15,000.				
,								
		· ·						
,								
		,						
			.					
•								
Total from continuation sheets	1		<u> </u>					
Total from continuation sheets								

-MARTIN JAFFE	13-7141718
Part XV Supplementary Information	
3a Grants and Contributions Paid During the Year Continuation of Purpose of Grant or Contribution	
<u> NAME OF RECIPIENT - AMERICAN MUSEUM OF NATURAL HISTORY</u>	7
,	
TO SUPPORT THE CHARITY	
	•
•	
•	
<u> </u>	
	·
·	
•	,
	,
•	
	· · · · · · · · · · · · · · · · · · ·
· ·	
, to	
<i>"</i>	

# Schedule B

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Name of the organization

## **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

Employer identification number

	JEFF HUNTER CHARITABLE TST -MARTIN JAFFE	13-7141718
Organization type (chec		13 /11/10
Filers of:	Section:	
Form 990 or 990-EZ	501(c)( ) (enter number) organization	
	4947(a)(1) nonexempt charitable trust not treated as a private found	dation
	527 political organization	
Form 990-PF	501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a private foundation	n
	501(c)(3) taxable private foundation	
Note: Only a section 50°	on is covered by the General Rule or a Special Rule.  1(c)(7), (8), or (10) organization can check boxes for both the General Rule and	a Special Rule See instructions
General Rule		
	ttion filing Form 990, 990-EZ, or 990-PF that received, during the year, contribut any one contributor. Complete Parts I and II. See instructions for determining a	
Special Rules		,
sections 509(a) any one contrib	tion described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, butor, during the year, total contributions of the greater of (1) \$5,000, or (2) 2% EZ, line 1 Complete Parts I and II	line 13, 16a, or 16b, and that received from
year, total conti	ution described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that relable the relations of more than \$1,000 exclusively for religious, charitable, scientific, literarule to children or animals. Complete Parts I (entering "N/A" in column (b) inst	rary, or educational purposes, or for the
year, contribution is checked, ent purpose Don't	tion described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that recons exclusively for religious, charitable, etc., purposes, but no such contribution er here the total contributions that were received during the year for an exclusive complete any of the parts unless the <b>General Rule</b> applies to this organization able, etc., contributions totaling \$5,000 or more during the year	ns totaled more than \$1,000 If this box vely religious, charitable, etc ,
Caution: An organization	n that isn't covered by the General Rule and/or the Special Rules doesn't file Si	chedule B (Form 990, 990-EZ, or 990-PF),
	on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-E et the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)	Z or on its Form 990-PF, Part I, line 2, to
LHA For Paperwork Red	uction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF.	Schedule B (Form 990, 990-EZ, or 990-PF) (2018)

Name of organization

Employer identification number

<u>-MART</u>	IN JAFFE	<u> </u>	-/141/18
Part I	Contributors (see instructions) Use duplicate copies of Part I if add	ditional space is needed	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>1</u> :	JEFF HUNTER ESTATE  1415 BOSTON POST RD STS 11  LARCHMNOT, NY 10538	\$ <u>18,853,741.</u>	Person Payroll Complete Part II for noncash contributions )
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$,	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	-	\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	-	\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person Payroll Noncash (Complete Part II for noncash contributions)

Name of organization

Employer identification number

JEFF HUNTER CHARITABLE TST

-MARTIN JAFFE

13-7141718

art II	Noncash Property (see instructions) Use duplicate copies of F	art II if additional space is needed.		
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received	
1	CASH & INVESTMENTS		,	
		\$ <u>18,853,741.</u>		
(a) No. from	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions )	(d) Date received	
Part I	·	(Oce managinary)		
		s		
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received	
•		\$		
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received	
(a)				
No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received	
		   \$		
4->				
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received	
			_	

Name of organization

Employer identification number

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-MARTI	IN JAFFE				13-7141718				
Part III	Exclusively religious, charitable, etc., contributi	ons to organizations described	in section 501(	c)(7), (8), or (10) th	at total more than \$1,000 for the year				
/	from any one contributor. Complete columns (a) completing Part III, enter the total of exclusively religious, or	through (e) and the following line charitable, etc., contributions of \$1,00	e entry For orga O or less for the ye	rnzations ear (Enterthis info once)	<b>\$</b>				
	Use duplicate copies of Part III if additional	space is needed							
(a) No.	41. B	(.) 11 ( - 4		(a) D	internal francisco and the body				
from Part I	(b) Purpose of gift	(c) Use of gift		(a) Descri	iption of how gift is held				
			_						
		(e) Transfer of	f gift						
	Transferee's name, address, ar	nd ZIP + 4	Rela	tionship of trans	sferor to transferee				
(a) No. from	(h) Diverse a of set	(a) I lan as aist	•	(d) Dogger	ption of how gift is held				
Part I	(b) Purpose of gift	(c) Use of gift		(d) Descri	iption of now gift is neid				
			_						
			_						
<u> </u>									
		(e) Transfer of	f gıft						
L	Transferee's name, address, ar	nd ZIP + 4	Rela	tionship of tran	sferor to transferee				
(a) Na	· · · · · · · · · · · · · · · · · · ·								
(a) No. from	(b) Purpose of gift	(c) Use of gift		(d) Descri	ption of how gift is held				
Part I					·				
ĺ			-		<del></del>				
}									
-		(a) Tues of an ad							
		(e) Transfer of	rgiπ						
1	Transferenia nama addresa as	ad <b>7</b> 1D + 4	Polo	tionship of tran	sferor to transferee				
-	Transferee's name, address, ar	10 ZIP + 4	neia	tionship of trans	steror to transferee				
(a) No. from			T		,				
from Part I	(b) Purpose of gift	(c) Use of gift		(d) Descri	iption of how gift is held				
ľ		(e) Transfer of	f gift						
	, (5)								
	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee						
ſ									

FORM 990-PF INTERE	ST ON	N SAVIN	GS AI	ND TEM	IPOR.	ARY	CASH	IN	VESTMENTS	ST	ATEMENT	1
SOURCE				(A REVE PER E	NUE		NET	IN	(B) VESTMENT COME		(C) ADJUSTED ET INCOMI	3
COLUMBIA MGMT (BOA) DUETSCHE BANK 7163 MERRILL LYNCH MERRILL LYNCH - TAX ML BANK DEPOSIT		ИРТ			8,2 2,9 5,6 0,6	61. 31.			8,255. 2,961. 35,631. 0. 8.			
TOTAL TO PART I, LI	NE 3			20	7,5	13.			46,855.			
FORM 990-PF	DIV	/IDENDS	AND	INTER	EST	FRO	M SEC	UR	ITIES	ST	'ATEMENT	2
SOURCE		ROSS MOUNT	(	APITAL GAINS VIDEND			(A) VENUI BOOM		(B) NET INVES MENT INCO		(C) ADJUSTI NET INCO	
GOLUB INTL JPM SEC MERRILL LYNCH		24,096. 79,377. 3,205.			0. 0. 0.		24,09 79,37 3,20	77.	24,09 35,30 3,20	6.		
TO PART I, LINE 4	20	06,678.			0.	2	06,67	78.	62,60	7.		
FORM 990-PF				LEGAL	FE:	ES .				ST	'ATEMENT	3
DESCRIPTION			EXPE	A) NSES BOOKS			) VEST- NCOME		(C) ADJUSTED NET INCOM		(D) CHARITAI PURPOSI	
LEGAL FEES		<u></u>		396.			(	).				0.
TO FM 990-PF, PG 1,	LN 1	L6A		396.			(	).				0.

FORM 990-PF	ACCOUNTI	NG FEES	S'	STATEMENT 4		
DESCRIPTION	(A) EXPENSES PER BOOKS	NET INVEST-		(D) CHARITABLE PURPOSES		
ACCOUNTING/BOOKEEPING	5,500.	5,500.		0.		
TO FORM 990-PF, PG 1, LN 16B	5,500.	5,500.		0.		
FORM 990-PF	TAX	ES	S'	TATEMENT 5		
DESCRIPTION ,		(B) NET INVEST- MENT INCOME		(D) CHARITABLE PURPOSES		
NY STATE TAX FEDERAL TAX FOREIGN TAX	100. 439. 693.	0. 0. 693.		0. 0. 0.		
TO FORM 990-PF, PG 1, LN 18 =	1,232.	693.		0.		
FORM 990-PF	OTHER E	XPENSES	S'	TATEMENT 6		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME		(D) CHARITABLE PURPOSES		
BANK FEES INVESTMENT FEES SUPPLIES/OTHER	161. 24,785. 725.	24,785.		0. 0. 0.		
TO FORM 990-PF, PG 1, LN 23	25,671.	24,785.		0.		

FORM 990-PF	OTHER	INVESTMENTS		STATEMENT 7
DESCRIPTION		VALUATION METHOD	BOOK VALUE	FAIR MARKET VALUE
COLUMBIA MANAGEMENT - US TRUST		COST	3,510,307.	3,510,307.
JP MORGAN SEC - MANAGED	-	COST	3,709,910.	3,709,910.
JP MORGAN SEC - NON-MANAGED		COST	5,382,263.	5,382,263.
MERRILL LYNCH SECURIITIES		COST	5,914,537.	5,914,537.
GOLUB PARTNERS BDC		COST	900,000.	900,000.
TOTAL TO FORM 990-PF, PART II,	LÍNE :	13	19,417,017.	19,417,017.