

For calendar year 2019, or tax year beginning 01-01-2019, and ending 12-31-2019

Name of foundation The Deerfield Partnership Foundation		A Employer identification number 05-0618950	
% DEERFIELD MANAGEMENT COMPANY			
Number and street (or P.O. box number if mail is not delivered to street address) 780 Third Avenue 37th Floor	Room/suite	B Telephone number (see instructions) (212) 551-1600	
City or town, state or province, country, and ZIP or foreign postal code New York, NY 10017		C If exemption application is pending, check here ☐	
G Check all that apply: ☐ Initial return ☐ Initial return of a former public charity ☐ Final return ☐ Amended return ☐ Address change ☐ Name change		D 1. Foreign organizations, check here..... ☐ 2. Foreign organizations meeting the 85% test, check here and attach computation ... ☐	
H Check type of organization: ☒ Section 501(c)(3) exempt private foundation ☐ Section 4947(a)(1) nonexempt charitable trust ☐ Other taxable private foundation		E If private foundation status was terminated under section 507(b)(1)(A), check here ☐	
I Fair market value of all assets at end of year (from Part II, col. (c), line 16) ▶ \$ 13,799,526	J Accounting method: ☒ Cash ☐ Accrual ☐ Other (specify) _____ (Part I, column (d) must be on cash basis.)		F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here ☐

Part I Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions).)		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
Revenue	1 Contributions, gifts, grants, etc., received (attach schedule)	1,429,148			
	2 Check ☐ if the foundation is not required to attach Sch. B				
	3 Interest on savings and temporary cash investments	26,382	26,382		
	4 Dividends and interest from securities				
	5a Gross rents				
	b Net rental income or (loss)				
	6a Net gain or (loss) from sale of assets not on line 10	1,144,761			
	b Gross sales price for all assets on line 6a 156,353				
	7 Capital gain net income (from Part IV, line 2)		1,265,176		
	8 Net short-term capital gain				
	9 Income modifications				
	10a Gross sales less returns and allowances				
Operating and Administrative Expenses	b Less: Cost of goods sold				
	c Gross profit or (loss) (attach schedule)				
	11 Other income (attach schedule)	390,781	400,638		
	12 Total. Add lines 1 through 11	2,991,072	1,692,196		
	13 Compensation of officers, directors, trustees, etc.	0			
	14 Other employee salaries and wages				
	15 Pension plans, employee benefits				
	16a Legal fees (attach schedule)				
	b Accounting fees (attach schedule)				
	c Other professional fees (attach schedule)	1,760			1,760
	17 Interest				
	18 Taxes (attach schedule) (see instructions)	197,955			
	19 Depreciation (attach schedule) and depletion				
	20 Occupancy				
	21 Travel, conferences, and meetings				
	22 Printing and publications				
	23 Other expenses (attach schedule)	176,140	138,738		37,402
	24 Total operating and administrative expenses. Add lines 13 through 23	375,855	138,738		39,162
	25 Contributions, gifts, grants paid	3,348,000			3,348,000
	26 Total expenses and disbursements. Add lines 24 and 25	3,723,855	138,738		3,387,162
	27 Subtract line 26 from line 12:				
	a Excess of revenue over expenses and disbursements	-732,783			
	b Net investment income (if negative, enter -0-)		1,553,458		
c Adjusted net income (if negative, enter -0-)					

Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of-year amounts only. (See instructions.)			
		Beginning of year (a) Book Value	End of year (b) Book Value (c) Fair Market Value		
Assets	1	Cash—non-interest-bearing			
	2	Savings and temporary cash investments	4,609,618	3,200,247	3,200,247
	3	Accounts receivable ▶ _____ Less: allowance for doubtful accounts ▶ _____			
	4	Pledges receivable ▶ _____ Less: allowance for doubtful accounts ▶ _____			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions)			
	7	Other notes and loans receivable (attach schedule) ▶ _____ Less: allowance for doubtful accounts ▶ _____			
	8	Inventories for sale or use			
	9	Prepaid expenses and deferred charges			
	10a	Investments—U.S. and state government obligations (attach schedule)			
	b	Investments—corporate stock (attach schedule)			
	c	Investments—corporate bonds (attach schedule)			
	11	Investments—land, buildings, and equipment: basis ▶ _____ Less: accumulated depreciation (attach schedule) ▶ _____			
	12	Investments—mortgage loans			
	13	Investments—other (attach schedule)	8,380,128	9,056,716	10,599,279
	14	Land, buildings, and equipment: basis ▶ _____ Less: accumulated depreciation (attach schedule) ▶ _____			
15	Other assets (describe ▶ _____)				
16	Total assets (to be completed by all filers—see the instructions. Also, see page 1, item I)	12,989,746	12,256,963	13,799,526	
Liabilities	17	Accounts payable and accrued expenses			
	18	Grants payable			
	19	Deferred revenue			
	20	Loans from officers, directors, trustees, and other disqualified persons			
	21	Mortgages and other notes payable (attach schedule).			
	22	Other liabilities (describe ▶ _____)			
	23	Total liabilities (add lines 17 through 22)	0	0	
Net Assets or Fund Balances	Foundations that follow FASB ASC 958, check here ▶ ☐ and complete lines 24, 25, 29 and 30.				
	24	Net assets without donor restrictions			
	25	Net assets with donor restrictions			
	Foundations that do not follow FASB ASC 958, check here ▶ ☒ and complete lines 26 through 30.				
	26	Capital stock, trust principal, or current funds			
	27	Paid-in or capital surplus, or land, bldg., and equipment fund			
	28	Retained earnings, accumulated income, endowment, or other funds	12,989,746	12,256,963	
	29	Total net assets or fund balances (see instructions)	12,989,746	12,256,963	
30	Total liabilities and net assets/fund balances (see instructions) .	12,989,746	12,256,963		

Part III Analysis of Changes in Net Assets or Fund Balances			
1	Total net assets or fund balances at beginning of year—Part II, column (a), line 29 (must agree with end-of-year figure reported on prior year's return)	1	12,989,746
2	Enter amount from Part I, line 27a	2	-732,783
3	Other increases not included in line 2 (itemize) ▶ _____	3	
4	Add lines 1, 2, and 3	4	12,256,963
5	Decreases not included in line 2 (itemize) ▶ _____	5	
6	Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 29 .	6	12,256,963

Part IV Capital Gains and Losses for Tax on Investment Income

(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.)	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1 a Publicly-traded Securities			
b Passthrough K1 Capital Gain/(Loss)			
c			
d			
e			

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
a 156,353		36,557	119,796
b			1,145,380
c			
d			
e			

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col.(h))
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any	
a			119,796
b			
c			
d			
e			

2 Capital gain net income or (net capital loss)	2	1,265,176
3 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) (see instructions). If (loss), enter -0- in Part I, line 8	3	

Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income.)

If section 4940(d)(2) applies, leave this part blank.

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period?

☐ Yes ☒ No

If "Yes," the foundation does not qualify under section 4940(e). Do not complete this part.

1 Enter the appropriate amount in each column for each year; see instructions before making any entries.

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col. (b) divided by col. (c))
2018	4,235,660	11,099,369	0.381613
2017	3,343,703	6,223,087	0.537306
2016	3,532,571	9,275,398	0.380854
2015	3,635,674	10,117,786	0.359335
2014	3,373,578	6,756,209	0.49933

2 Total of line 1, column (d)	2	2.158438
3 Average distribution ratio for the 5-year base period—divide the total on line 2 by 5.0, or by the number of years the foundation has been in existence if less than 5 years	3	0.431688
4 Enter the net value of noncharitable-use assets for 2019 from Part X, line 5	4	15,252,736
5 Multiply line 4 by line 3	5	6,584,423
6 Enter 1% of net investment income (1% of Part I, line 27b)	6	15,535
7 Add lines 5 and 6	7	6,599,958
8 Enter qualifying distributions from Part XII, line 4	8	3,387,162

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the Part VI instructions.

Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see instructions)

1a	Exempt operating foundations described in section 4940(d)(2), check here ☐ and enter "N/A" on line 1. Date of ruling or determination letter: _____ (attach copy of letter if necessary—see instructions)		
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here ☐ and enter 1% of Part I, line 27b	1	31,069
c	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b)		
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2	
3	Add lines 1 and 2.	3	31,069
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4	
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5	31,069
6	Credits/Payments:		
a	2019 estimated tax payments and 2018 overpayment credited to 2019	6a	115,505
b	Exempt foreign organizations—tax withheld at source	6b	
c	Tax paid with application for extension of time to file (Form 8868)	6c	
d	Backup withholding erroneously withheld	6d	
7	Total credits and payments. Add lines 6a through 6d.	7	115,505
8	Enter any penalty for underpayment of estimated tax. Check here ☒ if Form 2220 is attached.	8	
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9	
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10	84,436
11	Enter the amount of line 10 to be: Credited to 2020 estimated tax 31,100 Refunded	11	53,336

Part VII-A Statements Regarding Activities

	Yes	No
1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?		No
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? (see Instructions for definition). <i>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.</i>		No
c Did the foundation file Form 1120-POL for this year?		No
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: (1) On the foundation. ▶ \$ _____ (2) On foundation managers. ▶ \$ _____		
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. ▶ \$ _____		
2 Has the foundation engaged in any activities that have not previously been reported to the IRS? <i>If "Yes," attach a detailed description of the activities.</i>		No
3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? <i>If "Yes," attach a conformed copy of the changes</i>		No
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?	Yes	
b If "Yes," has it filed a tax return on Form 990-T for this year?	Yes	
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? <i>If "Yes," attach the statement required by General Instruction T.</i>	Yes	
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?	Yes	
7 Did the foundation have at least \$5,000 in assets at any time during the year? <i>If "Yes," complete Part II, col. (c), and Part XV.</i>	Yes	
8a Enter the states to which the foundation reports or with which it is registered (see instructions) ▶ NY		
b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? <i>If "No," attach explanation.</i>	Yes	
9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2019 or the taxable year beginning in 2019? See the instructions for Part XIV. <i>If "Yes," complete Part XIV</i>		No
10 Did any persons become substantial contributors during the tax year? <i>If "Yes," attach a schedule listing their names and addresses.</i>		No

Part VII-A Statements Regarding Activities (continued)

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		No
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		No
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ► _____	13	Yes	
14	The books are in care of ► <u>DEERFIELD MANAGEMENT COMPANY</u> Telephone no. ► <u>(212) 551-1600</u>			

Located at ► 780 Third Avenue 37th floor New York NY ZIP+4 ► 10017

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	► 15		
16	At any time during calendar year 2019, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country?	16	Yes	No
	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

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? ☐ Yes ☒ No		
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? ☐ Yes ☒ No		
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? ☐ Yes ☒ No		
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? ☐ Yes ☒ No		
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? ☐ Yes ☒ No		
	(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.) ☐ Yes ☒ No		
b	If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions	1b	
	Organizations relying on a current notice regarding disaster assistance check here. ► ☐		
c	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2019?	1c	No
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)):		
a	At the end of tax year 2019, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2019? ☐ Yes ☒ No		
	If "Yes," list the years ► 20____, 20____, 20____, 20____		
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement—see instructions.)	2b	
c	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here. ► 20____, 20____, 20____, 20____		
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? ☐ Yes ☒ No		
b	If "Yes," did it have excess business holdings in 2019 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 2019.)	3b	
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	No
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 2019?	4b	No

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required (continued)

		Yes	No
5a	During the year did the foundation pay or incur any amount to:		
(1)	Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?	☐ Yes ☒ No	
(2)	Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, any voter registration drive?	☐ Yes ☒ No	
(3)	Provide a grant to an individual for travel, study, or other similar purposes?	☐ Yes ☒ No	
(4)	Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? See instructions.	☐ Yes ☒ No	
(5)	Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?	☐ Yes ☒ No	
b	If any answer is "Yes" to 5a(1)–(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance? See instructions.	5b	
	Organizations relying on a current notice regarding disaster assistance check here.	☐	
c	If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? If "Yes," attach the statement required by Regulations section 53.4945–5(d).	☐ Yes ☐ No	
6a	Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	☐ Yes ☒ No	
b	Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? If "Yes" to 6b, file Form 8870.	6b	No
7a	At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?	☐ Yes ☒ No	
b	If "Yes", did the foundation receive any proceeds or have any net income attributable to the transaction?	7b	
8	Is the foundation subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment during the year?	☐ Yes ☒ No	

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors

1 List all officers, directors, trustees, foundation managers and their compensation. See instructions

(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) Expense account, other allowances
See Additional Data Table				

2 Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, enter "NONE."

(a) Name 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	(e) Expense account, other allowances

Total number of other employees paid over \$50,000. ▶

Part VIII **Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors** *(continued)*

3 **Five highest-paid independent contractors for professional services (see instructions). If none, enter "NONE".**

(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
Total number of others receiving over \$50,000 for professional services. ►		

Part IX-A **Summary of Direct Charitable Activities**

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.

1	Expenses
2	
3	
4	

Part IX-B **Summary of Program-Related Investments** (see instructions)

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.	Amount
1	
2	
All other program-related investments. See instructions.	
3	
Total. Add lines 1 through 3 ►	

Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.)

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
a	Average monthly fair market value of securities.	1a	0
b	Average of monthly cash balances.	1b	4,885,732
c	Fair market value of all other assets (see instructions).	1c	10,599,279
d	Total (add lines 1a, b, and c).	1d	15,485,011
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation).	1e	
2	Acquisition indebtedness applicable to line 1 assets.	2	0
3	Subtract line 2 from line 1d.	3	15,485,011
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions).	4	232,275
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	15,252,736
6	Minimum investment return. Enter 5% of line 5.	6	762,637

Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here ☐ and do not complete this part.)

1	Minimum investment return from Part X, line 6.	1	762,637
2a	Tax on investment income for 2019 from Part VI, line 5.	2a	31,069
b	Income tax for 2019. (This does not include the tax from Part VI.).	2b	
c	Add lines 2a and 2b.	2c	31,069
3	Distributable amount before adjustments. Subtract line 2c from line 1.	3	731,568
4	Recoveries of amounts treated as qualifying distributions.	4	
5	Add lines 3 and 4.	5	731,568
6	Deduction from distributable amount (see instructions).	6	
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1.	7	731,568

Part XII 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	3,387,162
b	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	0
3	Amounts set aside for specific charitable projects that satisfy the:		
a	Suitability test (prior IRS approval required).	3a	0
b	Cash distribution test (attach the required schedule).	3b	0
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	3,387,162
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b. See instructions.	5	
6	Adjusted qualifying distributions. Subtract line 5 from line 4.	6	3,387,162

Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years.

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2018	(c) 2018	(d) 2019
1 Distributable amount for 2019 from Part XI, line 7				731,568
2 Undistributed income, if any, as of the end of 2019:				
a Enter amount for 2018 only.				
b Total for prior years: 2017, 2016, 2015				
3 Excess distributions carryover, if any, to 2019:				
a From 2014. 3,106,508				
b From 2015. 3,210,788				
c From 2016. 3,102,200				
d From 2017. 3,099,326				
e From 2018. 3,765,612				
f Total of lines 3a through e.	16,284,434			
4 Qualifying distributions for 2019 from Part XII, line 4: ► \$ 3,387,162				
a Applied to 2018, but not more than line 2a				
b Applied to undistributed income of prior years (Election required—see instructions).				
c Treated as distributions out of corpus (Election required—see instructions).				
d Applied to 2019 distributable amount.				731,568
e Remaining amount distributed out of corpus	2,655,594			
5 Excess distributions carryover applied to 2019. (If an amount appears in column (d), the same amount must be shown in column (a).)				
6 Enter the net total of each column as indicated below:				
a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	18,940,028			
b Prior years' undistributed income. Subtract line 4b from line 2b.				
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed.				
d Subtract line 6c from line 6b. Taxable amount—see instructions.				
e Undistributed income for 2018. Subtract line 4a from line 2a. Taxable amount—see instructions.				
f Undistributed income for 2019. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2020.				0
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions).				
8 Excess distributions carryover from 2014 not applied on line 5 or line 7 (see instructions).	3,106,508			
9 Excess distributions carryover to 2020. Subtract lines 7 and 8 from line 6a.	15,833,520			
10 Analysis of line 9:				
a Excess from 2015. 3,210,788				
b Excess from 2016. 3,102,200				
c Excess from 2017. 3,099,326				
d Excess from 2018. 3,765,612				
e Excess from 2019. 2,655,594				

Part XIV Private Operating Foundations (see instructions and Part VII-A, question 9)

1a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2019, enter the date of the ruling. ▶

b Check box to indicate whether the organization is a private operating foundation described in section ☐ 4942(j)(3) or ☐ 4942(j)(5)

2a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed

	Tax year	Prior 3 years			(e) Total
	(a) 2019	(b) 2018	(c) 2017	(d) 2016	
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					
3 Complete 3a, b, or c for the alternative test relied upon:					
a "Assets" alternative test—enter:					
(1) Value of all assets					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test— enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed.					
c "Support" alternative test—enter:					
(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii).					
(3) Largest amount of support from an exempt organization					
(4) Gross investment income					

Part XV Supplementary Information (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year—see instructions.)

1 Information Regarding Foundation Managers:

a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000). (See section 507(d)(2).)

b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest.

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

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

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

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

c Any submission deadlines:

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

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	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i> See Additional Data Table				
Total			3a	3,348,000
b <i>Approved for future payment</i>				
Total			3b	

Enter gross amounts unless otherwise indicated.

1	Program service revenue:	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	(See instructions.)
a	_____					
b	_____					
c	_____					
d	_____					
e	_____					
f	_____					
g	Fees and contracts from government agencies					
2	Membership dues and assessments. . . .					
3	Interest on savings and temporary cash investments			14	26,382	
4	Dividends and interest from securities. . . .					
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 property					
7	Other investment income.					
8	Gain or (loss) from sales of assets other than inventory			18	1,144,761	
9	Net income or (loss) from special events:					
10	Gross profit or (loss) from sales of inventory					
11	Other revenue:					
a	K-1 Inc/Loss _____	525990	-9,857	14	400,638	
b	_____					
c	_____					
d	_____					
e	_____					
12	Subtotal. Add columns (b), (d), and (e). .		-9,857		1,571,781	
13	Total. Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify calculations.)					1,561,924

[illegible]

Part XVII

		Yes	No
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--	--	--

1a(1)		No
1a(2)		No

--	--	--

1b(1)	No
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1b(2)		No
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1b(3)		No
--------------	--	-----------

1b(4)		No
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1b(5)		No
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1b(6)		No
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1c		No
----	--	----

value
ue

[illegible]

2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations

described in section 501(c) (other than section 501(c)(3)) or in section 527? ☐ Yes ☒ No

b If "Yes," complete the following schedule.

(a) Name of organization	(b) Type of organization	(c) Description of relationship

Sign Here 	*****	2020-11-11	*****	May the IRS discuss this return with the preparer shown below (see instr.) ☒ Yes ☐ No
	_____ Signature of officer or trustee	_____ Date	_____ Title	

Paid Preparer Use Only	Jeffrey D Haskell				
	Firm's name ► Foundation Source				Firm's EIN ►
	Firm's address ► One Hollow Ln Ste 212 Lake Success, NY 11042				Phone no. (800) 839-1754

May the IRS discuss this return with the preparer shown below

(see instr.) ☒ **Yes** ☐ **No**

Form 990PF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation				
(a) Name and address	Title, and average hours per week (b) devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	Expense account, (e) other allowances
Steven Bukowczyk 	VP 1.0	0	0	0
780 Third Avenue 37th Floor New York, NY 10017				
Alexis Caze 	PRESIDENT EMERITUS, CHARIMAN 1.0	0	0	0
780 Third Avenue 37th Floor New York, NY 10017				
David Clark 	Dir 1.0	0	0	0
780 Third Avenue 37th Floor New York, NY 10017				
David Dalton 	VP 1.0	0	0	0
780 Third Avenue 37th Floor New York, NY 10017				
Andrew ElBardissi 	Pres 1.0	0	0	0
780 Third Avenue 37th Floor New York, NY 10017				
James Flynn 	Dir 1.0	0	0	0
780 Third Avenue 37th Floor New York, NY 10017				
Mike Foley 	VP 1.0	0	0	0
780 Third Avenue 37th Floor New York, NY 10017				
Vicky Gaddy 	VP 1.0	0	0	0
780 Third Avenue 37th Floor New York, NY 10017				
Shumaila Irshad 	VP 1.0	0	0	0
780 Third Avenue 37th Floor New York, NY 10017				
Jonathan Isler 	Dir 1.0	0	0	0
780 Third Avenue 37th Floor New York, NY 10017				
Kelina Jones 	VP 1.0	0	0	0
780 Third Avenue 37th Floor New York, NY 10017				
Kerri Seacord 	Treas, VP 1.0	0	0	0
780 Third Avenue 37th Floor New York, NY 10017				
Charlotte Williamson 	Assistant Sec 1.0	0	0	0
780 Third Avenue 37th Floor New York, NY 10017				
Kathryn Wilson 	Sec 1.0	0	0	0
780 Third Avenue 37th Floor New York, NY 10017				
Emily Tavcar 	VP 1.0	0	0	0
780 Third Avenue 37th Floor New York, NY 10017				

Form 990PF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation				
(a) Name and address	Title, and average hours per week (b) devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	Expense account, (e) other allowances
Alexandra Truglio 	VP 1.0	0	0	0
780 Third Avenue 37th Floor New York, NY 10017				

Form 990PF Part XV Line 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	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
COALITION FOR THE HOMELESS INC 129 FULTON ST NEW YORK, NY 10038	N/A	PC	To support the Coalition's Child Advocate PROGRAM	80,000
FAMILY CENTER INC 493 NOSTRAND AVE STE 3 BROOKLYN, NY 11216	N/A	PC	For screening/assessing 100 Immigrant Children	85,000
GILDAS CLUB WESTCHESTER INC 80 MAPLE AVE WHITE PLAINS, NY 10601	N/A	PC	THE Children's, Teens, and Families Programs	110,000
Total ▶ 3a				3,348,000

Form 990PF Part XV Line 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	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
HEALTH EQUITY INTERNATIONAL 40 GLEN AVE NEWTON, MA 02459	N/A	PC	To advance access to and provision of high quality services for women and children in southern Haiti	110,000
INTEGRATE HEALTH INCPO BOX 605 MEDWAY, MA 02053	N/A	PC	General & Unrestricted	70,000
JACARANDA HEALTHPO BOX 3862 DURHAM, NC 27702	N/A	PC	Jacaranda's nurse mentor training center	70,000
Total ▶ 3a				3,348,000

Form 990PF Part XV Line 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	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
LAST MILE HEALTHPO BOX 130122 BOSTON, MA 02113	N/A	PC	Establish LMH operations in Malawi and provide community Health Services Section systems support and training resources	130,000
LITTLE SISTERS OF THE ASSUMPTION FAMILY HEALTH SER 333 E 115TH ST NEW YORK, NY 10029	N/A	PC	Environmental Services & Maternity Outreach Program	173,000
LWALA COMMUNITY ALLIANCE INC PO BOX 60688 NASHVILLE, TN 37206	N/A	PC	Obstetric hemorrhage treatment and research	260,000
Total ▶ 3a				3,348,000

Form 990PF Part XV Line 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	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
MANJUSHREE CHARITABLE SOCIETY MANJUSHREE VIDYAPITH SCHOOL LOHIT VALLEY ITTANAGAR, TAWANG 790104 IN	N/A	PC	General & Unrestricted	50,000
MANY HOPES INC85 PKWY RD 2 BRONXVILLE, NY 10708	N/A	PC	Healthcare for children at home and school in our rescue homes and school in Kenya	80,000
MEDIC MOBILE INC3254 19TH ST SAN FRANCISCO, CA 94110	N/A	PC	To deploy an open source smartphone app to support community health workers in Nepal	115,000
Total ▶ 3a				3,348,000

Form 990PF Part XV Line 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	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
MOTT HAVEN ACADEMY CHARTER SCHOOL 170 BROWN PL BRONX, NY 10454	N/A	PC	Mott Haven Academy's adolescent and mental health programming	145,000
MUSO INC3254 19TH ST SAN FRANCISCO, CA 94110	N/A	PC	Delivering Muso's evidence based Proactive Community Case Management model to save lives in Peri-urban Mali	195,000
MYASWAN INC1448 TWELVE OAKS CT ALAMO, CA 94507	N/A	PC	General & Unrestricted	200,000
Total ▶ 3a				3,348,000

Form 990PF Part XV Line 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	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
NORTHSIDE CENTER FOR CHILD DEVELOPMENT INC 1301 5TH AVE 1ST FL NEW YORK, NY 10029	N/A	PC	Northside's Early Childhood Metal Health initiative	125,000
NYAYA HEALTH A NONPROFIT CORPORATION - POSSIBLE 26 BROADWAY 3RD FL OFC 363 NEW YORK, NY 10004	N/A	PC	Public Healthcare in Chaurpati, Nepal	400,000
PARTNERS IN HEALTH A NONPROFIT CORPORATION PO BOX 996 FREDERICK, MD 21705	N/A	PC	Pediatric Emergency Care in Sierra Leone	125,000
Total ▶ 3a				3,348,000

Form 990PF Part XV Line 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	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
THE CHILDRENS HEALTH FUND 215 W 125TH ST STE 301 NEW YORK, NY 10027	N/A	PC	Support New York Program's mission for the homeless	250,000
THE WATER TRUST INC75942 NEW YORK, NY 10163	N/A	PC	Sustainable clean water in Uganda	300,000
UNDER 21550 10TH AVE NEW YORK, NY 10018	N/A	PC	Support for the unreimbursed costs of drugs, medical supplies and lab tests for youth CHNY's Electronic Health Record;and for the Food and Nutrition program	165,000
Total ▶ 3a				3,348,000

Form 990PF Part XV Line 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	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
VILLAGE HEALTH WORKS 45 W 36TH ST 8TH FL NEW YORK, NY 10018	N/A	PC	Kigutu Hospital and Women's Health Pavilion	110,000
Total  3a				3,348,000

TY 2019 Compensation Explanation**Name:** The Deerfield Partnership Foundation**EIN:** 05-0618950

Person Name	Explanation
Steven Bukowczyk	* Removed in 2019
Kelina Jones	** Removed in 2019

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

TY 2019 Depreciation Schedule

Name: The Deerfield Partnership Foundation

EIN: 05-0618950

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

TY 2019 Expenditure Responsibility Statement

Name: The Deerfield Partnership Foundation

EIN: 05-0618950

Grantee's Name	Grantee's Address	Grant Date	Grant Amount	Grant Purpose	Amount Expended By Grantee	Any Diversion By Grantee?	Dates of Reports By Grantee	Date of Verification	Results of Verification
RESEAU DES ENTREPRENEURS SOLIDAIRES	CHEMIN DU JURA 3 MIES CH-1295 SZ	2015-08-17	50,000	TO PROVIDE MEDICAL SUPPORT TO PEOPLE IN NEED ACROSS MADAGASCAR	50,000	NO	5/23/16, 7/11/17, 7/18/19		NONE NECESSARY
MIFAN MAMA	1533 HUQINGPING ROAD HOUSE NO 28 SHANGHAI, QINGPU DISTRICT CH	2017-12-06	50,000	TO SUPPORT THE ENHANCED OUTREACH EYE CARE PROJECT	50,000	NO	10/3/18, 7/23/19		none necessary
RESEAU DES ENTREPRENEURS SOLIDAIRES	CHEMIN DU JURA 3 MIES CH-1295 SZ	2017-12-06	50,000	TO PROVIDE MEDICAL SUPPORT TO PEOPLE IN NEED ACROSS MADAGASCAR	50,000	NO	7/18/19, 6/11/20		NONE NECESSARY
RESEAU DES ENTREPRENEURS SOLIDAIRES	CHEMIN DU JURA 3 MIES CH-1295 SZ	2018-12-14	50,000	TO PROVIDE MEDICAL SUPPORT TO PEOPLE IN NEED ACROSS MADAGASCAR	50,000	NO	7/18/19, 6/11/20		none necessary
MIFAN MAMA	1533 HUQINGPING ROAD HOUSE NO 28 SHANGHAI, QINGPU DISTRICT CH	2018-12-04	25,000	TO SUPPORT THE ENHANCED OUTREACH EYE CARE PROJECT	9,021	NO	7/23/19		NONE NECESSARY

TY 2019 Investments - Other Schedule**Name:** The Deerfield Partnership Foundation**EIN:** 05-0618950**Investments Other Schedule 2**

Category/ Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value
DEERFIELD EMPLOYEES DP LLC		2,569,325	3,182,698
DEERFIELD EMPLOYEES DSS LLC		427,987	396,235
DEERFIELD MGMT III LP		1,280,883	1,542,952
DEERFIELD MGMT IV LP			24
DEERFIELD MGMT LP		4,778,521	5,477,370

TY 2019 LiquidationExplanationStmnt

Name: The Deerfield Partnership Foundation

EIN: 05-0618950

Statement: As explained below, the Foundation has no plans for dissolution. This statement is submitted to report the distribution of certain assets during the year. The distributions resulted in a substantial contraction of assets. The following information is submitted in accordance with Treasury Regulation Section 1.6043-3(a)(1) and the Form 990-PF instructions: During the taxable year ending December 31, 2019, the Foundation made distributions from assets from sources other than current income. Collectively, the distributions in excess of current income totaled \$3,348,000. This amount represents 25% or more of the Foundation's net assets of \$12,587,400 (as measured by fair market value) at the beginning of the Foundation's taxable year ending December 31, 2019. Although the Foundation technically experienced a substantial contraction, it will continue in existence and has no plans for dissolution. The Foundation made distributions of cash to the grantees listed in the attachment to Part XV, Line 3a; each such grant was made solely for the charitable purpose specified therein.

TY 2019 Other Expenses Schedule**Name:** The Deerfield Partnership Foundation**EIN:** 05-0618950**Other Expenses Schedule**

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
Administrative Fees	36,652			36,652
Bank Charges	30	30		
K-1 Exp DEERFIELD EMPLOYEES DS	3,813	3,813		
K-1 Exp DEERFIELD MGMT III LP	54,470	54,470		
K-1 Exp DEERFIELD MGMT LP	80,425	80,425		
State or Local Filing Fees	750			750

TY 2019 Other Income Schedule**Name:** The Deerfield Partnership Foundation**EIN:** 05-0618950**Other Income Schedule**

Description	Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income
K-1 Inc/Loss DEERFIELD EMPLOYEES DP LLC	52,821	52,821	
K-1 Inc/Loss DEERFIELD EMPLOYEES DSS LLC	12,876	12,876	
K-1 Inc/Loss DEERFIELD MGMT III LP	166,091	170,423	
K-1 Inc/Loss DEERFIELD MGMT LP	158,993	164,518	

TY 2019 Other Professional Fees Schedule**Name:** The Deerfield Partnership Foundation**EIN:** 05-0618950

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
EQUIVALENCY DETERMINATION	1,760			1,760

TY 2019 Taxes Schedule**Name:** The Deerfield Partnership Foundation**EIN:** 05-0618950

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
990-PF Estimated Tax for 2018	97,600			
990-PF Estimated Tax for 2019	15,900			
990-PF Extension for 2018	84,455			

Schedule B (Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service	Schedule of Contributors ▶ Attach to Form 990, 990-EZ, or 990-PF. ▶ Go to <u>www.irs.gov/Form990</u> for the latest information.	OMB No. 1545-0047
		2019
Name of the organization The Deerfield Partnership Foundation		Employer identification number 05-0618950

Organization type (check one):

Filers of:	Section:
Form 990 or 990-EZ	☐ 501(c)() (enter number) organization
	☐ 4947(a)(1) nonexempt charitable trust not treated as a private foundation
	☐ 527 political organization
Form 990-PF	☒ 501(c)(3) exempt private foundation
	☐ 4947(a)(1) nonexempt charitable trust treated as a private foundation
	☐ 501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.
Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

- ☒ For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or other property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

- ☐ For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33¹/₃% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of **(1)** \$5,000 or **(2)** 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.
- ☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.
- ☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year ▶ \$ _____

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

Name of organization The Deerfield Partnership Foundation	Employer identification number 05-0618950
--	--

Part I **Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
—	See Additional Data Table _____ _____	\$ _____	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contribution.)
—	_____ _____ _____	\$ _____	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contribution.)
—	_____ _____ _____	\$ _____	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contribution.)
—	_____ _____ _____	\$ _____	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contribution.)
—	_____ _____ _____	\$ _____	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contribution.)
—	_____ _____ _____	\$ _____	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contribution.)
—	_____ _____ _____	\$ _____	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contribution.)
—	_____ _____ _____	\$ _____	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contribution.)

Name of organization The Deerfield Partnership Foundation	Employer identification number 05-0618950
--	--

Part II **Noncash Property** (see Instructions). Use duplicate copies of Part 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
—	See Additional Data Table	\$	
(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
—		\$	
(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
—		\$	

Name of organization The Deerfield Partnership Foundation	Employer identification number 05-0618950
--	--

Part III

Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of *exclusively* religious, charitable, etc., contributions of **\$1,000 or less for the year. (Enter this information once. See instructions.) ► \$ _____**

Use duplicate copies of Part III if additional space is needed.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4		Relationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4		Relationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4		Relationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4		Relationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4		Relationship of transferor to transferee

Additional Data

Software ID:
Software Version:
EIN: 05-0618950
Name: The Deerfield Partnership Foundation

Form 990 Schedule B, Part I - Contributors (see Instructions) Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>1</u>	Anderson Sumner	\$ 10,000	Person ☒
	14 East 90th Street Apt 7C		Payroll ☐
	New York, NY 10128		Noncash ☐ (Complete Part II for noncash contribution.)
<u>2</u>	Atinsky Lawrence	\$ 10,000	Person ☒
	122 E 82nd Street Apt 3A		Payroll ☐
	New York, NY 10028		Noncash ☐ (Complete Part II for noncash contribution.)
<u>3</u>	Barriocanal Nelson	\$ 5,000	Person ☒
	185 Cedar Ave		Payroll ☐
	Rockville Centre, NY 11570		Noncash ☐ (Complete Part II for noncash contribution.)
<u>4</u>	Berg Kevin	\$ 10,143	Person ☐
	79 Fairway Ave		Payroll ☐
	Rye, NY 10580		Noncash ☒ (Complete Part II for noncash contribution.)
<u>5</u>	Bernstein Brent	\$ 7,000	Person ☒
	43-25 Hunter Street Apt 338E		Payroll ☐
	Forrest Hills, NY 11101		Noncash ☐ (Complete Part II for noncash contribution.)
<u>6</u>	Bishop Nicholas	\$ 10,000	Person ☒
	217 W 110th St Apt 9		Payroll ☐
	New York, NY 10026		Noncash ☐ (Complete Part II for noncash contribution.)

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>7</u>	Bizoza Brian	\$ 35,000	Person ☒
	357 Henry St		Payroll ☐
	Brooklyn, NY 11201		Noncash ☐ (Complete Part II for noncash contribution.)
<u>8</u>	Brancaccio Marian	\$ 37,500	Person ☒
	350 W 57th St 11F		Payroll ☐
	New York, NY 10019		Noncash ☐ (Complete Part II for noncash contribution.)
<u>9</u>	Caze Alexis	\$ 40,000	Person ☒
	1079 Orienta Avenue		Payroll ☐
	Mamoroneck, NY 10543		Noncash ☐ (Complete Part II for noncash contribution.)
<u>10</u>	Clark David	\$ 50,000	Person ☒
	336 East 53rd Steet 5th Floor		Payroll ☐
	New York, NY 10022		Noncash ☐ (Complete Part II for noncash contribution.)
<u>11</u>	Deerfield Management Company LP	\$ 390,800	Person ☒
	780 Third Avenue 37th floor		Payroll ☐
	New York, NY 10017		Noncash ☐ (Complete Part II for noncash contribution.)
<u>12</u>	ElBardissi Andrew	\$ 25,000	Person ☒
	290 Third Avenue Apt 23B		Payroll ☐
	New York, NY 10010		Noncash ☐ (Complete Part II for noncash contribution.)

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>13</u>	Farrell Michael	\$ 10,000	Person ☒
	106 Connelly Avenue		Payroll ☐
	Budd Lake, NJ 07828		Noncash ☐ (Complete Part II for noncash contribution.)
<u>14</u>	Furst Howie	\$ 50,000	Person ☒
	7 Luckenbach Lane		Payroll ☐
	Port Washington, NY 11050		Noncash ☐ (Complete Part II for noncash contribution.)
<u>15</u>	Gaddy Vicky	\$ 10,000	Person ☒
	56 Gansett Court		Payroll ☐
	Long Branch, NJ 07740		Noncash ☐ (Complete Part II for noncash contribution.)
<u>16</u>	Ganesan Bharath	\$ 7,500	Person ☒
	780 Third Avenue 37th Floor		Payroll ☐
	New York, NY 10017		Noncash ☐ (Complete Part II for noncash contribution.)
<u>17</u>	Greene Adam	\$ 20,000	Person ☒
	19 Oak Ave		Payroll ☐
	Larchmont, NY 10538		Noncash ☐ (Complete Part II for noncash contribution.)
<u>18</u>	Grossman Adam	\$ 15,000	Person ☒
	7609 Rossdhu Ct		Payroll ☐
	Chevy Chase, MD 20815		Noncash ☐ (Complete Part II for noncash contribution.)

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
19	Harris Julian	\$ 5,000	Person ☒
	15 Beechtree Drive		Payroll ☐
	Larchmont, NY 10538		Noncash ☐ (Complete Part II for noncash contribution.)
20	Heidelberger Retzler Karen	\$ 20,000	Person ☒
	315 East 83rd Street PH2		Payroll ☐
	New York, NY 10028		Noncash ☐ (Complete Part II for noncash contribution.)
21	Henshaw Leslie	\$ 94,987	Person ☐
	22 Garden Place		Payroll ☐
	Brooklyn, NY 11201		Noncash ☒ (Complete Part II for noncash contribution.)
22	Hochberg Steven	\$ 12,500	Person ☒
	428 Columbus Ave Apt 4F		Payroll ☐
	New York, NY 10024		Noncash ☐ (Complete Part II for noncash contribution.)
23	Huber Ted	\$ 20,000	Person ☒
	5 Woodland Dr		Payroll ☐
	Westport, CT 06880		Noncash ☐ (Complete Part II for noncash contribution.)
24	Isler Jonathan	\$ 5,104	Person ☐
	780 Third Avenue Floor 37		Payroll ☐
	New York, NY 10017		Noncash ☒ (Complete Part II for noncash contribution.)

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>25</u>	Jackson Robert	\$ 50,000	Person ☒
	12 Phillips Lane		Payroll ☐
	Rye, NY 10580		Noncash ☐ (Complete Part II for noncash contribution.)
<u>26</u>	Jensen Jana	\$ 9,200	Person ☒
	363 Irving Ave		Payroll ☐
	South Orange, NJ 07079		Noncash ☐ (Complete Part II for noncash contribution.)
<u>27</u>	Kaplan Jeffrey	\$ 75,000	Person ☒
	195 Meadowview Avenue		Payroll ☐
	Hewlett, NY 11557		Noncash ☐ (Complete Part II for noncash contribution.)
<u>28</u>	Karnal Alexander	\$ 25,000	Person ☒
	1061 Esplanade		Payroll ☐
	Pelham, NY 10803		Noncash ☐ (Complete Part II for noncash contribution.)
<u>29</u>	Karnal Terence	\$ 20,000	Person ☒
	604 Madison St		Payroll ☐
	Hoboken, NJ 07030		Noncash ☐ (Complete Part II for noncash contribution.)
<u>30</u>	Kometz Avi	\$ 40,000	Person ☒
	205 East 92nd Street Apt 30E		Payroll ☐
	New York, NY 10128		Noncash ☐ (Complete Part II for noncash contribution.)

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>31</u>	Leff Jonathan	\$ 31,778	Person ☐
	102 Cliff Avenue		Payroll ☐
	Pelham, NY 10803		Noncash ☒ (Complete Part II for noncash contribution.)
<u>32</u>	Mellet Vincent	\$ 24,961	Person ☒
	24 Locust Lane		Payroll ☐
	Rye, NY 10580		Noncash ☒ (Complete Part II for noncash contribution.)
<u>33</u>	Nayak Narendra	\$ 10,001	Person ☒
	505 E 79th St Apt 3K		Payroll ☐
	New York, NY 10075		Noncash ☐ (Complete Part II for noncash contribution.)
<u>34</u>	Pearson Jennifer	\$ 5,000	Person ☒
	65 Nelson Road		Payroll ☐
	Scarsdale, NY 10583		Noncash ☐ (Complete Part II for noncash contribution.)
<u>35</u>	Ramos Jonathan	\$ 5,000	Person ☒
	26 Manor Road		Payroll ☐
	Wyckoff, NJ 07481		Noncash ☐ (Complete Part II for noncash contribution.)
<u>36</u>	Sendrowski Bryan	\$ 20,000	Person ☒
	5 Stony Point Rd		Payroll ☐
	Oakland, NJ 07436		Noncash ☐ (Complete Part II for noncash contribution.)

Form 990 Schedule B, Part I - Contributors (see Instructions) Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>37</u>	Slattery William	\$ 75,000	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II for noncash contribution.)
	780 Third Avenue 37th Floor		
	New York, NY 10017		
<u>38</u>	Steelman Peter	\$ 5,000	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II for noncash contribution.)
	8226 Bar Harbor Lane		
	Charlotte, NC 28210		
<u>39</u>	Su Zheng	\$ 20,000	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II for noncash contribution.)
	1450 Washington St Apt PH1		
	Hoboken, NJ 07030		
<u>40</u>	Takats Paul	\$ 30,000	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II for noncash contribution.)
	695 Washington St 2A		
	New York, NY 10014		
<u>41</u>	Wheeler Cameron	\$ 45,000	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II for noncash contribution.)
	114 W 73rd St Apt A		
	New York, NY 10023		

Form 990 Schedule B, Part II - Noncash Property (see Instructions) Use duplicate copies of Part 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
<u>4</u>	INSTRUCTURE INC INST, 211 sh.	<u>\$ 10,143</u>	<u>2019-12-16</u>
<u>21</u>	THE CHEMOURS CO CC, 15 sh.	<u>\$ 278</u>	<u>2019-12-24</u>
<u>21</u>	CORTEVA INC CTVA, 32 sh.	<u>\$ 919</u>	<u>2019-12-24</u>
<u>21</u>	DOW INC DOW, 32 sh.	<u>\$ 1,758</u>	<u>2019-12-24</u>
<u>21</u>	DU PONT DE NEMOURS DD, 32 sh.	<u>\$ 2,037</u>	<u>2019-12-24</u>
<u>21</u>	TEVA PHARMACEUTICAL INDUSTRIES SP ADR TEVA, 750 sh.	<u>\$ 7,496</u>	<u>2019-12-24</u>
<u>21</u>	UNIV HEALTH REAL EST UHT, 720 sh.	<u>\$ 82,498</u>	<u>2019-12-24</u>
<u>24</u>	VISA INC V, 28 sh.	<u>\$ 5,104</u>	<u>2019-12-09</u>
<u>31</u>	ARCH CAPITAL GROUP LTD ACGL, 750 sh.	<u>\$ 31,778</u>	<u>2019-12-23</u>
<u>32</u>	ALIBABA GROUP HOLDING LTD BABA, 52 sh.	<u>\$ 10,808</u>	<u>2019-12-17</u>

Form 990 Schedule B, Part II - Noncash Property (see Instructions) Use duplicate copies of Part 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
<u>32</u>	INSTRUCTURE INC INST, 86 sh.	<u>\$ 4,153</u>	<u>2019-12-17</u>