

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

Name of foundation THE RITA AND ALEX HILLMAN FOUNDATION		A Employer identification number 13-2560546	
Number and street (or P.O. box number if mail is not delivered to street address) 200 PARK AVE SO		Room/suite	B Telephone number (see instructions) (212) 265-3115
City or town, state or province, country, and ZIP or foreign postal code NEW YORK, NY 10003		C If exemption application is pending, check here <input type="checkbox"/>	
G Check all that apply: <input type="checkbox"/> Initial return <input type="checkbox"/> Final return <input type="checkbox"/> Address change <input type="checkbox"/> Initial return of a former public charity <input type="checkbox"/> Amended return <input type="checkbox"/> Name change		D 1. Foreign organizations, check here..... <input type="checkbox"/> 2. Foreign organizations meeting the 85% test, check here and attach computation ... <input type="checkbox"/>	
H Check type of organization: <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		E If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/>	
I Fair market value of all assets at end of year (from Part II, col. (c), line 16) ▶ \$ 126,518,342	J Accounting method: <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> 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 <input type="checkbox"/>	

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)				
	2 Check <input checked="" type="checkbox"/> if the foundation is not required to attach Sch. B				
	3 Interest on savings and temporary cash investments	7,899	7,899		
	4 Dividends and interest from securities	2,162,639	2,162,639		
	5a Gross rents				
	b Net rental income or (loss) _____				
	6a Net gain or (loss) from sale of assets not on line 10 _____	4,567,549			
	b Gross sales price for all assets on line 6a _____				
	7 Capital gain net income (from Part IV, line 2)		4,567,549		
	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)	583,310	583,310		
	12 Total. Add lines 1 through 11	7,321,397	7,321,397		
	13 Compensation of officers, directors, trustees, etc.	575,250	48,763		526,487
	14 Other employee salaries and wages	92,375			92,375
	15 Pension plans, employee benefits	98,157	7,919		90,238
	16a Legal fees (attach schedule)				
	b Accounting fees (attach schedule)	67,500	13,500		54,000
	c Other professional fees (attach schedule)	764,467	599,820		164,647
	17 Interest				
	18 Taxes (attach schedule) (see instructions)	94,215	34,614		32,154
	19 Depreciation (attach schedule) and depletion	3,250			
	20 Occupancy	164,616	24,692		139,924
	21 Travel, conferences, and meetings				
	22 Printing and publications				
	23 Other expenses (attach schedule)	166,903	16,237		150,666
	24 Total operating and administrative expenses. Add lines 13 through 23	2,026,733	745,545		1,250,491
	25 Contributions, gifts, grants paid	4,291,900			4,291,900
	26 Total expenses and disbursements. Add lines 24 and 25 _____	6,318,633	745,545		5,542,391
	27 Subtract line 26 from line 12: _____				
	a Excess of revenue over expenses and disbursements _____	1,002,764			
	b Net investment income (if negative, enter -0-) _____		6,575,852		
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	End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value
Assets	1 Cash—non-interest-bearing	291,825	295,476	295,476
	2 Savings and temporary cash investments	4,672,540	2,994,160	2,994,160
	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	78,721	152,836	152,836
	10a Investments—U.S. and state government obligations (attach schedule)			
	b Investments—corporate stock (attach schedule)	14,687,704	6,359,499	8,681,774
	c Investments—corporate bonds (attach schedule)	12,493,248	10,895,383	11,069,447
	11 Investments—land, buildings, and equipment: basis ▶ _____ Less: accumulated depreciation (attach schedule) ▶ _____			
	12 Investments—mortgage loans			
	13 Investments—other (attach schedule)	48,693,598	61,392,948	74,820,054
	14 Land, buildings, and equipment: basis ▶ _____ 59,659 Less: accumulated depreciation (attach schedule) ▶ _____ 55,064	3,245	4,595	4,595
15 Other assets (describe ▶ _____)	17,260,900	17,260,900	28,500,000	
16 Total assets (to be completed by all filers—see the instructions. Also, see page 1, item I)	98,181,781	99,355,797	126,518,342	
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 ▶ _____)	89,440	98,158	
	23 Total liabilities (add lines 17 through 22)	89,440	98,158	
Net Assets or Fund Balances	Foundations that follow FASB ASC 958, check here ▶ <input type="checkbox"/> 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 ▶ <input checked="" type="checkbox"/> and complete lines 26 through 30.			
	26 Capital stock, trust principal, or current funds	98,092,341	99,257,639	
	27 Paid-in or capital surplus, or land, bldg., and equipment fund			
	28 Retained earnings, accumulated income, endowment, or other funds			
29 Total net assets or fund balances (see instructions)	98,092,341	99,257,639		
30 Total liabilities and net assets/fund balances (see instructions) .	98,181,781	99,355,797		

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	98,092,341
2 Enter amount from Part I, line 27a	2	1,002,764
3 Other increases not included in line 2 (itemize) ▶ _____	3	162,534
4 Add lines 1, 2, and 3	4	99,257,639
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	99,257,639

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 S/T CAP GAINS FROM PS ALT INV	P	2019-01-01	2019-12-31
b L/T CAP GAINS FROM PS ALT INV	P	2014-01-01	2019-12-31
c VOLUMINOUS - DETAILS AVAIL UPON REQUEST	P	2019-01-01	2019-12-31
d VOLUMINOUS - DETAILS AVAIL UPON REQUEST	P	2014-01-01	2019-12-31
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		30,667	-30,667
b		573,240	-573,240
c 248,266			248,266
d 4,923,190			4,923,190
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			-30,667
b			-573,240
c			248,266
d			4,923,190
e			

2 Capital gain net income or (net capital loss)	2	4,567,549
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	217,599

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	5,814,813	97,708,236	0.05951
2017	4,678,537	97,462,303	0.04800
2016	2,407,441	91,141,245	0.02641
2015	5,715,996	96,687,185	0.05912
2014	3,973,231	98,477,458	0.04035

2 Total of line 1, column (d)	2	0.233395
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	0.046679
4 Enter the net value of noncharitable-use assets for 2019 from Part X, line 5	4	94,737,899
5 Multiply line 4 by line 3	5	4,422,270
6 Enter 1% of net investment income (1% of Part I, line 27b)	6	65,759
7 Add lines 5 and 6	7	4,488,029
8 Enter qualifying distributions from Part XII, line 4	8	5,542,391

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 <input type="checkbox"/> 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 <input checked="" type="checkbox"/> and enter 1% of Part I, line 27b	1	65,759
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	65,759
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	65,759
6	Credits/Payments:		
a	2019 estimated tax payments and 2018 overpayment credited to 2019	6a	100,219
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	100,219
8	Enter any penalty for underpayment of estimated tax. Check here <input checked="" type="checkbox"/> 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	34,460
11	Enter the amount of line 10 to be: Credited to 2020 estimated tax ▶ 34,460 Refunded ▶	11	

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?		No
b If "Yes," has it filed a tax return on Form 990-T for this year?		
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>		No
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 ► <u>www.rahf.org</u>	13	Yes	
14	The books are in care of ► <u>LINDA LE</u> Telephone no. ► <u>(212) 265-3115</u>			

Located at ► 200 PARK AVENUE SO SUITE 1705 NEW YORK NYZIP+4 ► 10003

15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 —check here	<input type="checkbox"/>		
	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? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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.) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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	No
	Organizations relying on a current notice regarding disaster assistance check here. ► <input type="checkbox"/>		
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? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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)

5a During the year did the foundation pay or incur any amount to:			Yes	No
(1)	Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(2)	Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, any voter registration drive?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(3)	Provide a grant to an individual for travel, study, or other similar purposes?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(4)	Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? See instructions.	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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.	<input checked="" type="checkbox"/>		
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).	<input type="checkbox"/> Yes <input type="checkbox"/> No		
6a	Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	6b	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.			
7a	At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		7b	
b	If "Yes", did the foundation receive any proceeds or have any net income attributable to the transaction?			
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?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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
RACHAEL A WATMAN 3170 DUKE ROAD POWHATAN, VA 23139	VP PROGRAMS 40.00	92,375	12,933	
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
DAVIS WARD & HOCHMAN LLP 150 E 58 STREET NEW YORK, NY 10155	AUDIT AND TAX ACCTNG	67,500
MORGAN STANLEY 399 PARK AVE NEW YORK, NY 10022	INVESTMENT ADVISORY	190,303
OFFIT CAPITAL ADVISERS 485 LEXINGTON AVENUE NE YORK, NY 10017	INVESTMENT ADVISORY	317,889

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.

	Expenses
1 N/A	0
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	95,196,382
b	Average of monthly cash balances.	1b	984,226
c	Fair market value of all other assets (see instructions).	1c	0
d	Total (add lines 1a, b, and c).	1d	96,180,608
e	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	
3	Subtract line 2 from line 1d.	3	96,180,608
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions).	4	1,442,709
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	94,737,899
6	Minimum investment return. Enter 5% of line 5.	6	4,736,895

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	4,736,895
2a	Tax on investment income for 2019 from Part VI, line 5.	2a	65,759
b	Income tax for 2019. (This does not include the tax from Part VI.).	2b	
c	Add lines 2a and 2b.	2c	65,759
3	Distributable amount before adjustments. Subtract line 2c from line 1.	3	4,671,136
4	Recoveries of amounts treated as qualifying distributions.	4	
5	Add lines 3 and 4.	5	4,671,136
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	4,671,136

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	5,542,391
b	Program-related investments—total from Part IX-B.	1b	
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:		
a	Suitability test (prior IRS approval required).	3a	
b	Cash distribution test (attach the required schedule).	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	5,542,391
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	65,759
6	Adjusted qualifying distributions. Subtract line 5 from line 4.	6	5,476,632

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				4,671,136
2 Undistributed income, if any, as of the end of 2019:				
a Enter amount for 2018 only.			221,459	
b Total for prior years: 20____, 20____, 20____				
3 Excess distributions carryover, if any, to 2019:				
a From 2014.				
b From 2015.				
c From 2016.				
d From 2017.				
e From 2018.				
f Total of lines 3a through e.				
4 Qualifying distributions for 2019 from Part XII, line 4: ► \$ <u>5,542,391</u>				
a Applied to 2018, but not more than line 2a			221,459	
b Applied to undistributed income of prior years (Election required—see instructions).				
c Treated as distributions out of corpus (Election required—see instructions).	0			
d Applied to 2019 distributable amount.				4,671,136
e Remaining amount distributed out of corpus	649,796			
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:	649,796			
a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5				
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).				
9 Excess distributions carryover to 2020. Subtract lines 7 and 8 from line 6a.	649,796			
10 Analysis of line 9:				
a Excess from 2015.				
b Excess from 2016.				
c Excess from 2017.				
d Excess from 2018.				
e Excess from 2019.	649,796			

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 Name and address (home or business)	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
a <i>Paid during the year</i> See Additional Data Table				
Total			▶ 3a	4,291,900
b <i>Approved for future payment</i>				
Total			▶ 3b	

Enter gross amounts unless otherwise indicated.

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

Line No. the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes). (See instructions.)

Form **990-PF** (2019)

Part XVII

	Yes	No
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1a(1)	No
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1a(2)	No
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1b(1)	No
--------------	-----------

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

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

1b(4)		No
--------------	--	-----------

1b(5)		No
--------------	--	-----------

1b(6)		No
--------------	--	-----------

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 	*****	2020-11-16	*****	<div style="border: 1px solid black; padding: 5px;"> May the IRS discuss this return with the preparer shown below (see instr.) <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No </div>
	_____ Signature of officer or trustee	_____ Date	_____ Title	

Paid Preparer Use Only	DAVID H WARD				
	Firm's name ► Davis Ward & Hochman LLP				Firm's EIN ► 20-0494412
	Firm's address ► 150 E 58th St 20TH Flr New York, NY 10155				Phone no. (212) 230-2600

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
LIZANNE FONTAINE	Director 1.00	0		
91 COLUMBIA HEIGHTS BROOKLYN, NY 11201				
KRISTEN CHOI	Director 1.00	0		
11616 CHENAULT STREET 1 LOS ANGELES, CA 90049				
AHRIN MISHAN	VP/Sec/Ex Dir 40.00	375,250	56,000	
200 PARK AVENUE SO STE1705 NEW YORK, NY 10003				
DAVID GOULD	Director 1.00	0		
496 EAST 17TH STREET BROOKLYN, NY 11226				
DORI JAFFE	ASST TREAS 20.00	40,000	6,825	
200 PARK AVENUE SO STE 1705 NEW YORK, NY 10003				
PAUL GARFINKLE	Director 1.00	0		
2001 SO E SAILFISH PT BLVD STUART, FL 34996				
LINDA LE	ASST SEC/VP OPS 40.00	160,000	22,400	
200 PARK AVENUE SO STE 1705 NEW YORK, NY 10003				
RAYMOND J MCGUIRE	Director 1.00	0		
388 GREENWICH ST - 39 FLOOR NEW YORK, NY 10013				
ADAM E MAX	President/Treas 1.00	0		
200 PARK AVENUE SO STE1705 NEW YORK, NY 10003				
DR JENNIFER MIERES	Director 1.00	0		
1725 YORK AVE NEW YORK, NY 10128				
MEGAN MONAHAN	Director 1.00	0		
1201 HUDSON ST HOBOKEN, NJ 07030				

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>				
BROOKLYN ACADEMY OF MUSIC 30 LAFAYETTE AVE BROOKLYN, NY 11217	NONE	PC	ADVANCE VISUAL ARTS	389,000
INTERNATIONAL CENTER FOR PHOTOGRAPH 1114 AVENUE OF AMERICAS NEW YORK, NY 10036	NONE	PC	SUPPORT ART OF PHOTOGRAPHY	183,700
NYU SCHOOL OF NURSING 726 BROADWAY 10TH FLOOR NEW YORK, NY 10003	NONE	PC	NURSING EDUCATION	50,000
Total ▶ 3a				4,291,900

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>				
UNIVERSITY OF PENN SCHOOL OF NURSIN 418 CURIE BLVD ROOM 430 PHILADELPHIA, PA 19104	NONE	PC	SUPPORT NURSING EDUCATION	423,637
METROPOLITAN MUSEUM OF ART 1000 FIFTH AVENUE NEW YORK, NY 10028	NONE	PC	SUPPORT VISUAL ARTS	10,000
AMERICAN NURSES FOUNDATION 8515 GEORGIA AVENUE SIVER SPRING, MD 20910	NONE	PC	SUPPORT NURSING EDUCATION	97,151
Total ▶ 3a				4,291,900

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>				
UNC CHAPEL HILL250 E FRANKLIN ST CHAPEL HILL, NC 27516	NONE	PC	SUPPORT NURSING EDUCATION	569,170
NLN FOUNDATION 2600 VIRGINIA AVE NW 8TH FL WASHINGTON, DC 20037	NONE	PC	SUPPORT NURSING EDUCATION	10,000
UNIVERSITY OF KENTUCKY 172 FUNKHOUSER DR KINKEAD HALL 207 LEXINGTON, KY 40508	NONE	PC	HEALTH OF VULNERABLE POPULATION	205,025
Total ▶ 3a				4,291,900

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>				
TRUSTEES OF UNIVERSITY ILLINOIS 845 S DAMEN AVENUE MC 802 CHICAGO, IL 60612	NONE	PC	HEALTH OF VULNERABLE POPULATION	47,543
NATIONAL PROGRAM OFFICE UNIV OF PEN 418 CURIE BLVD PHILADELPHIA, PA 19104	NONE	PC	SUPPORT NURSING EDUCATION	159,378
HOFSTRA UNIVERSITY 500 HOFSTRA UNIVERSITY HEMPSTEAD, NY 11549	NONE	PC	SUPPORT PERFORMING ARTS	2,500
Total ▶ 3a				4,291,900

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>				
NEW YORKERS FOR CHILDREN 450 SEVENTH AVENUE SUITE 403 NEW YORK, NY 10123	NONE	PC	SUPPORT NEEDY POPULATION	5,000
JOHNS HOPKINS UNIVERSITY CAPABLE 525 North Wolfe Street 424 BALTIMORE, MD 21205	NONE	PC	HEALTH OFVULNERABLEPOPULATON	589,167
HENRY FORD HEALTH SYSTEM 1 Ford Place 5A DETROIT, MI 48202	NONE	PC	HEALTH OFVULNERABLEPOPULATION	200,002
Total ► 3a				4,291,900

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>				
OHIO STATE UNIVERSITY 1585 Neil Avenue Columbus, OH 43210	NONE	PC	EDUCATION	50,000
UNIVERSITY OF UTAH 75 South 2000 East Salt Lake City, UT 84112	NONE	PC	EDUCATION	202,418
GRANTMAKERS IN AGING 2001 Jefferson Davis Hwy STE 1011 ARLINGTON, VA 22202	NONE	PC	HEALTH OFVULNERABLEPOPULATION	15,000
Total ► 3a				4,291,900

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 Paid during the year				
BROOKLYN MUSEUM 200 Eastern Parkway Brooklyn, NY 11238	NONE	PC	EDUCATION & ARTS	30,000
IFP FISCAL SPONSORSHIP 30 John Street BROOKLYN, NY 11201	NONE	PC	SUPPORT OF FILMMAKING PROJECTS	10,000
UNITED HOSPITAL FUND 1411 Broadway 12th Floor NEW YORK, NY 10018	NONE	PC	HEALTH OFVULNERABLEPOPULATON	1,000
Total ▶ 3a				4,291,900

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>				
PRIMARY CARE DEVELOPMENT CORPORATION 45 Broadway Suite 530 NEW YORK, NY 10006	NONE	PC	SUPPORT NEEDY POPULATION	10,000
ACADEMY HEALTH 160 W 100TH ST NEW YORK, NY 10025	NONE	PC	SUPPORT HEALTH RESEARCH	500
ADV ILLNESS CARE PROGRAM 610 Valley Health Plaza PARAMUS, NJ 07652	NONE	PC	SUPPORT HEALTH RESEARCH	50,000
Total ▶ 3a				4,291,900

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 Paid during the year				
AMERICAN ACADEMY OF NURSING 1000 VERMONT AVE NW SUITE 910 WASHINGTON, DC 20005	NONE	PC	SUPPORT HEALTH RESEARCH	10,000
AMERICAN LABS THE ARTS AND EXPECTIN 401 PARK DR 3RD FLOOR BOSTON, MA 02215	NONE	PC	SUPPORT NEEDY	50,000
BROOKLYN HOSPITAL FOUNDATION 121 DEKALB AVE BROOKLYN, NY 11201	NONE	PC	SUPPORT HEALTH	5,000
Total ▶ 3a				4,291,900

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>				
CARE DIMENSIONS INC STE B-102 75 SYLVAN ST DANVERS, MA 01923	NONE	PC	SUPPORT HEALTH	50,000
CAREOREGON315 SW 5TH AVE PORTLAND, OR 97204	NONE	PC	SUPPORT HEALTH	100,000
CLEVELAND CLINIC MARTIN HEALTH FOUN 2135 SE OCEAN BLVA STUART, FL 34996	NONE	PC	SUPPORT HEALTH	10,000
Total ▶ 3a				4,291,900

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>				
DARTMOUTH COLLEGE 10 W WHEELLOCK ST HANOVER, NH 03755	NONE	PC	SUPPORT THE COLLEGE	5,000
EAST CAROLINA UNIVERSITY 101 HEART DR GREENVILLE, NC 27834	NONE	PC	SUPPORT SCHOOL	50,000
GATEWAYS HOSPITAL MENTAL HEALTH CEN 3 HOSPITAL DR COLUMBIA, MO 65201	NONE	PC	SUPPORT HEALTH CARE	10,000
Total ▶ 3a				4,291,900

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>				
HABITAT FOR HUMANITY INTERNATIONAL 1420 CREEK TRAIL DR JEFFERSON CITY, MO 65109	NONE	PC	SUPPORT NEEDY	50,000
HIC GRANTEE ARIADNE LABS AUDIT 401 PARK DR 3RD FLOOR BOSTON, MA 02215	NONE	PC	SUPPORT NEEDY	200,001
HSNI PROGRAM ENHANCEMENTS 3800 SPRUCE ST PHILDAELPHIA, PA 19104	NONE	PC	SUPPORT NURSING	50,000
Total ▶ 3a				4,291,900

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>				
LATINO COMMISSION ON AIDS 24 W 25TH ST 9 TH FLOOR NEW YORK, NY 10010	NONE	PC	SUPPORT NEEDY	700
LIBERATION PROGRAMS INC 129 GLOVER AVE NORWALK, CT 06850	NONE	PC	SUPPORT HEALTH	25,000
MINDS MATTER NYC1120 6TH AVE NEW YORK, NY 10036	NONE	PC	SUPPORT HEALTH	2,500
Total ▶ 3a				4,291,900

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>				
NATIONAL ASSOCIATION OF HISPANIC NU 1216 5TH AVE NEW YORK, NY 10029	NONE	PC	SUPPORT HEALTH	5,000
NATIONAL HISPANIC COUNCIL ON AGING 2201 12TH ST NW SUITE 101 WASHINGTON, DC 20009	NONE	PC	SUPPORT HEALTH	2,000
NYU LANGONE HEALTH550 1ST AVENUE NEW YORK, NY 10016	NONE	PC	SUPPORT HEALTH	2,000
Total ▶ 3a				4,291,900

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>				
OREGON HEALTH SCIENCE UNIVERSITY 3181 SW SAM JACKSON PARK RD PORTLAND, OR 97239	NONE	PC	SUPPORT HEALTH	50,000
PATHWAYS INC33 DENISON PKWY W CORNING, NY 14830	NONE	PC	SUPPORT NEEDY	25,000
SIGMA FOUNDATION550 W NORTH ST INDIANAPOLIS, IN 46202	NONE	PC	SUPPORT HEALTH	10,000
Total ▶ 3a				4,291,900

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>				
SOUTHERN CALIFORNIA INSTITUTE FOR R 5901 E 7TH ST 151 LONG BEACH, CA 90822	NONE	PC	SUPPORT HEALTH RESEARCH	49,508
SPENCE SCHOOL22 E 91 ST NEW YORK, NY 10128	NONE	PC	SUPPORT SCHOOL	20,000
THE GEORGE WASHINGTON UNIVERSITY 2121 I ST NW WASHINGTON, DC 20052	NONE	PC	SUPPORT SCHOOL	50,000
Total ▶ 3a				4,291,900

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 Paid during the year				
THE UNIVERSITY OF TEXAS AT DALLAS 800 W CAMPBELL RD RICHARDSON, TX 75080	NONE	PC	SUPPORT SCHOOL	50,000
UNIVERSITY OF MASSACHUSETTS FOUNDAT 66 N LAKE AVE WORCESTER, MA 01605	NONE	PC	SUPPORT SCHOOL	50,000
UNIVERSITY OF PORTLAND 5000 N WILLAMETTE BLVD PORTLAND, OR 97203	NONE	PC	SUPPORT SCHOOL	50,000
Total ▶ 3a				4,291,900

TY 2019 Accounting Fees Schedule**Name:** THE RITA AND ALEX HILLMAN FOUNDATION**EIN:** 13-2560546**Software ID:** 19009920**Software Version:** 2019v5.0

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
AUDIT AND TAX COMPLIANCE	67,500	13,500	0	54,000

TY 2019 General Explanation Attachment**Name:** THE RITA AND ALEX HILLMAN FOUNDATION**EIN:** 13-2560546**Software ID:** 19009920**Software Version:** 2019v5.0**General Explanation Attachment**

Identifier	Return Reference	Explanation	
1		General Explanation Supplemental Information for Form 990-PF	STATEMENT A TAXPAYER HAS EXTENSIVE HOLDINGS OF EQUITY AND FIXED INCOME SECURITIES AND HAS REALIZED CAPITAL GAINS AND LOSSES FROM NUMEROUS SECURITY TRANSACTIONS, DISPOSITION OF INVESTMENT PARTNERSHIPS AND PASS THROUGH FROM INVESTMENT PARTNERSHIPS. THE HOLDINGS AND TRANSACTIONS ARE AVAILABLE FROM BOOKS AND RECORDS MAINTAINED BY THE TAXPAYER. SCHEDULE OF INVESTMENT HOLDINGS ARE HELD IN CUSTODY ACCOUNTS AND ARE MANAGED BY LICENSED INVESTMENT ADVISORS AS FOLLOWS (FAIR MARKET VALUE): SECURITY OFFIT CAP ADVISERS POLK-MORGAN STANLEY TOTAL EQUITIES 8,681,774 0 8,681,774 BONDS 7,158,989 3,910,458 11,069,447 OTHER EXCHANGE TRADED FUNDS 1,727,996 24,100,590 MUTUAL FUNDS 17,840,334 5,459,917 ALTERNATIVE INVESTMENTS 15,009,690 10,681,527 34,578,020 40,242,034 74,820,054 TOTAL OTHER 74,820,054

General Explanation Attachment

Identifier	Return Reference	Explanation	
2		General Explanation Supplemental Information for Form 990-PF	STATEMENT BTHE FOUNDATION IS REPORTING \$32,334 UNRELATED BUSINESS INCOME IN FORM 990T FOR THE CURRENT YEAR. THIS INCOME ALL ORIGINATES FROM K-1 FORMS PROVIDED BY INVESTMENT PARTNERSHIPS. THE K-1 FORMS DO NOT INCLUDE ANY INFORMATION ABOUT THE SOURCE OF THE INCOME AND ACCORDINGLY THERE ARE NO DOLLAR AMOUNTS INCLUDED ON THIS SCHEDULE

General Explanation Attachment

Identifier	Return Reference	Explanation	
3		General Explanation Supplemental Information for Form 990-PF	STATEMENT CINSURANCE EXPENSE INCLUDES PREMIUMS PAID FOR EMPLOYEE MEDICAL, FIRE AND THEFT AND LIABILITY COVERAGE

**TY 2019 Land, Etc.
Schedule****Name:** THE RITA AND ALEX HILLMAN FOUNDATION**EIN:** 13-2560546**Software ID:** 19009920**Software Version:** 2019v5.0

Category / Item	Cost / Other Basis	Accumulated Depreciation	Book Value	End of Year Fair Market Value
Furniture and Fixtures	59,659	55,064	4,595	4,595

TY 2019 Other Assets Schedule**Name:** THE RITA AND ALEX HILLMAN FOUNDATION**EIN:** 13-2560546**Software ID:** 19009920**Software Version:** 2019v5.0**Other Assets Schedule**

Description	Beginning of Year - Book Value	End of Year - Book Value	End of Year - Fair Market Value
ARTWORK EXHIBITED	17,260,900	17,260,900	28,500,000

TY 2019 Other Expenses Schedule**Name:** THE RITA AND ALEX HILLMAN FOUNDATION**EIN:** 13-2560546**Software ID:** 19009920**Software Version:** 2019v5.0**Other Expenses Schedule**

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
ADMINISTRATIVE EXPENSE	15,038	2,256		12,782
INSURANCE (NOTE C)	125,527	10,030		115,497
OFFICE EXPENSE	26,338	3,951		22,387

TY 2019 Other Income Schedule**Name:** THE RITA AND ALEX HILLMAN FOUNDATION**EIN:** 13-2560546**Software ID:** 19009920**Software Version:** 2019v5.0**Other Income Schedule**

Description	Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income
PARTNERSHIP INCOME	583,310	583,310	

TY 2019 Other Increases Schedule**Name:** THE RITA AND ALEX HILLMAN FOUNDATION**EIN:** 13-2560546**Software ID:** 19009920**Software Version:** 2019v5.0

Description	Amount
ADJUSTMENTS NOT REFLECTED IN PARTNERSHIP COST BASIS	162,534

TY 2019 Other Liabilities Schedule**Name:** THE RITA AND ALEX HILLMAN FOUNDATION**EIN:** 13-2560546**Software ID:** 19009920**Software Version:** 2019v5.0

Description	Beginning of Year - Book Value	End of Year - Book Value
RETIREMENT PLAN OBLIGATION	89,440	98,158

TY 2019 Other Professional Fees Schedule**Name:** THE RITA AND ALEX HILLMAN FOUNDATION**EIN:** 13-2560546**Software ID:** 19009920**Software Version:** 2019v5.0

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
CONSULTING FEES-NURSING SERVICES	134,647	0	0	134,647
CURATORIAL SERVICES	30,000	0	0	30,000
INVESTMENT ADVISORY FEES	599,820	599,820	0	0

TY 2019 Taxes Schedule**Name:** THE RITA AND ALEX HILLMAN FOUNDATION**EIN:** 13-2560546**Software ID:** 19009920**Software Version:** 2019v5.0

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
EXCISE TAX	27,447			
FOREIGN TAX WITHHELD	32,081	32,081		
PAYROLL TAXES	34,687	2,533		32,154

R&A Hillman Foundation

Depreciation Schedule: Anything <\$500 treat as expense, anything >\$500 treat as capitalized - fixed asset (if has life of over 1 year)

12/31/2019

As of 09/22/2020

PBC

PY

Net Book Value 12/31/2019

Accum Dep 12/31/2019

Disposals

2019 Current Yr Depreciation

Cost Balance 12/31/2019

2019 Disposals, Impairment

Purchases

Cost Balance 12/31/2018

Life(yrs)

Method

Date Acquired

Description

FURNITURE & OFFICE EQUIPMENT

Midway Investors-Patio Furniture

07/14/11

SL

1,250.00

1,250.00

0.00

0.00

0.00

0.00

0.00

0.00

0.00

0.00

0.00

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STATEMENT A

TAXPAYER HAS EXTENSIVE HOLDINGS OF EQUITY AND FIXED INCOME SECURITIES AND HAS REALIZED CAPITAL GAINS AND LOSSES FROM NUMEROUS SECURITY TRANSACTIONS, DISPOSITION OF INVESTMENT PARTNERSHIPS AND PASS THROUGH FROM INVESTMENT PARTNERSHIPS. THE HOLDINGS AND TRANSACTIONS ARE AVAILABLE FROM BOOKS AND RECORDS MAINTAINED BY THE TAXPAYER.

SCHEDULE OF INVESTMENTS

HOLDINGS ARE HELD IN CUSTODY ACCOUNTS AND ARE MANAGED BY LICENSED INVESTMENT ADVISORS AS FOLLOWS (FAIR MARKET VALUE):

SECURITY	OFFIT CAP ADVISERS	POLK-MORGAN STANLEY	TOTAL
EQUITIES	8,681,774	0	8,681,774
BONDS	7,158,989	3,910,458	11,069,447
OTHER			
EXCHANGE TRADED FUNDS	1,727,996	24,100,590	
MUTUAL FUNDS	17,840,334	5,459,917	
ALTERNATIVE INVESTMENTS	15,009,690	10,681,527	
	34,578,020	40,242,034	74,820,054
TOTAL OTHER			74,820,054

STATEMENT B

THE FOUNDATION IS REPORTING \$32,334 UNRELATED BUSINESS INCOME IN FORM 990T FOR THE CURRENT YEAR. THIS INCOME ALL ORIGINATES FROM K-1 FORMS PROVIDED BY INVESTMENT PARTNERSHIPS. THE K-1 FORMS DO NOT INCLUDE ANY INFORMATION ABOUT THE SOURCE OF THE INCOME AND ACCORDINGLY THERE ARE NO DOLLAR AMOUNTS INCLUDED ON THIS SCHEDULE.

STATEMENT C

INSURANCE EXPENSE INCLUDES PREMIUMS PAID FOR EMPLOYEE MEDICAL, FIRE AND THEFT AND LIABILITY COVERAGE.