HURRICANE SALLY FL-2020-03 **Return of Private Foundation**

Form **990-PF** Department of the Treasury Internal Revenue Service

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

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

FUI	Calei	dar year 2019 of tax year deginning		, and ending	<u> </u>		
Na	me of	foundation				A Employer identification	number
יי	ארי	KUNIS FAMILY FOUNDATION	N			22-6783081	
		nd street (or P O. box number if mail is not delivered to street a		Roor	m/suite	B Telephone number	· · · · · · · · · · · · · · · · · · ·
		WEST 17TH STREET	•			212-729-67	29
_		own, state or province, country, and ZIP or foreign p	nstal code			C if exemption application is pe	
		YORK, NY 10011-5347	OSIEB COUL			i exemplion application is pe	along, crieck nere
		all that apply: Initial return	Initial return of a fo	ormer public charit	v	D 1. Foreign organizations	check here
•	0110011	Final return	Amended return	ormar paono anari	· y	i i i i i i i i i i i i i i i i i i i	, onoun noro
		Address change	Name change			Foreign organizations me check here and attach cor	eting the 85% test,
н :	Check	type of organization: X Section 501(c)(3) ex		40.9	(E If private foundation stat	•
	_		Other taxable private founda	ation O	Q	under section 507(b)(1)	
J F		arket value of all assets at end of year J Accounti		Accrual		F If the foundation is in a	• •
			ther (specify)			under section 507(b)(1)	
	▶\$	567,891. (Part I, colum		is.)			(2), 3.113.11.11.11
P	art I	Analysis of Revenue and Expenses	(a) Revenue and	(b) Net investr	ment	(c) Adjusted net	(d) Disbursements
_		(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a).)	expenses per books	income		income	for charitable purposes (cash basis only)
	1	Contributions, gifts, grants, etc., received		. ••		ł	,
-	2	Check X of the foundation is not required to attach Sch. B		,			
	3	Interest on savings and temporary cash investments	13.	· · · · · · · · · · · · · · · · · · ·	13.	.,	STATEMENT 1
١	4	Dividends and interest from securities	14,087.	14,0	087.		STATEMENT 2
`	5a	Gross rents				-	
	1 .	Net rental income or (loss)					T0=
	6a	Net gain or (loss) from sale of assets not on line 10	-4.				ECEIVED
9	Ь	Gross sales price for all assets on line 6a 61.				31	70
Revenue	7	Capital gain net income (from Part IV, line 2)			0.	ISI JA	N 2 6 2004 100
å	8	Net short-term capital gain					2021 18
	9	Income modifications				CC	D-1
	10a	Gross sales less returns and allowances	ALC II				PLN, UT
	1 .	Less. Cost of goods sold	ty =6 47 4_	rvym m	•	+ 44 - 2	
٠.	6	Gross profit or (loss)					
2022	11	Other income					
	12	Total. Add lines 1 through 11	14,096.	14,:	100.	0.	
₹,1	13	Compensation of officers, directors, trustees, etc	0.		0.	0.	0.
- 1	14	Other employee salaries and wages					•
ď.	15	Pension plans, employee benefits					<u>-</u>
Zig	16a	Legal fees					
	d	Accounting fees					
ΠIS	c	Other professional fees					
	17	Interest					
ANNED	18	Taxes STMT 3	-350.		0.	0.	0.
	19	Depreciation and depletion					
275	20	Occupancy					
Admi		Travel, conferences, and meetings					
pue		Printing and publications					
<u>,</u>	23	Other expenses					
atin	24	Total operating and administrative					
Operating		expenses. Add lines 13 through 23	-350.		0.	0.	0.
Ō	25	Contributions, gifts, grants paid	25,442.				25,442.
	26	Total expenses and disbursements.					
_		Add lines 24 and 25	25,092.		0.	0.	25,442.
	27	Subtract line 26 from line 12:				-	
	a	Exccop of revenue over expenses and disbursements	10,996.				2 1
	b	Net investment income (if negative, enter -0-)		14,1	L00.		
		Adjusted net income (if negative, enter -0-)]	0.	

-	aŗt	Balance Sheets Attached schedules and amounts in the description	Beginning or year	Ena o	r year
_	aŗı	column should be for end-of-year amounts only.	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing	4,765.	2,863.	
				2,000.	2,003.
			- 	ust ,	
	3	Accounts receivable	/ · · · · · · · · · · · · · · · · · · ·		
		Less: allowance for doubtful accounts			
	4	Pledges receivable	Samuel Commence Commence		* "
		Less: allowance for doubtful accounts	łi		
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons	1	•	
	7		- 1		
	′	*** ***********************************	1100		- 12 U
	_	Less: allowance for doubtful accounts			
Assets		Inventories for sale or use			
986		Prepaid expenses and deferred charges			
⋖	10a	Investments - U.S. and state government obligations			
	Ь	Investments - corporate stock STMT 4	93,329.	87,776.	564,715.
	С	Investments - corporate bonds			
1	11	Investments - land, buildings, and equipment basis		•	. 4
1		Less accumulated depreciation			
1	12	Investments - mortgage loans			· · · · · · · · · · · · · · · · · · ·
		Investments - other			·
ı	13			· · · · · · · · · · · · · · · · · · ·	
	14	Land, buildings, and equipment: basis			,
		Less accumulated depreciation			
	15	Other assets (describe ACCRUED DIVIDENDS	0.	313.	313.
	16	Total assets (to be completed by all filers - see the	l i		
		instructions. Also, see page 1, item 1)	98,094.	90,952.	567,891.
	17	Accounts payable and accrued expenses			
		Grants payable		1,080.	
		Defermed assessed			
ies		Loans from officers, directors, trustees, and other disqualified persons			
Liabilities	i				
ᅙ		Mortgages and other notes payable			
-	22	Other liabilities (describe			
		\		4 444	
_	23	Total liabilities (add lines 17 through 22)	0.	1,080.	
		Foundations that follow FASB ASC 958, check here	l		
S		and complete lines 24, 25, 29, and 30.]	•	
nces	24	Net assets without donor restrictions			
ā		Not coasts with dancy restrictions		- · · · · · · · · · · · · · · · · · · ·	
8		Foundations that do not follow FASB ASC 958, check here			
밁					-
괴		and complete lines 26 through 30.	00 004	00 004	
ō		Capital stock, trust principal, or current funds	98,094.	98,094.	
됩		Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.	
Net Assets or Fund Bala	28	Retained earnings, accumulated income, endowment, or other funds	0.	-8,222.	
7	29	Total net assets or fund balances	98,094.	89,872.	
žį					
- 1	30	Total liabilities and net assets/fund balances	98,094.	90,952.	
=					· · · · · · · · · · · · · · · · · · ·
P	art	Analysis of Changes in Net Assets or Fund Ba	uances		
	Total	net assets or fund balances at beginning of year - Part II, column (a), line	29		
		the state of the s		11	98,094.
	•				-10,996.
				2	
		increases not included in line 2 (itemize)	<u>.</u>		2,774.
		ines 1, 2, and 3		4	89,872.
		eases not included in line 2 (itemize)		5	0.
<u>`</u>	Total	net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	olumn (b), line 29	6	89,872.
					202 05

(a) List and describe	the kind(s) of property sold (for exar or common stock, 200 shs.	nple, real esta		(b) Ho	w acquired Purchase Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a WABTEC					"	P	02/26/19	02/26/19
b								
C								
d								
e								
(e) Gross sales price	(f)	Depreciation allowed (or allowable)		st or other basis expense of sale			(h) Gain or (lo: ((e) plus (f) minu	
a 61.				6	5.	•		-4.
b								
C								
<u>d</u>					_	· · · · · · · · · · · · · · · · · · ·		
e		· · · · · · · · · · · · · · · · · · ·					_,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
Complete only for assets showin	g gain in	column (h) and owned by t	he foundation	on 12/31/69.			l) Gains (Col. (h) ga	
(i) FMV as of 12/31/69		(j) Adjusted basis as of 12/31/69		cess of col. (1)		CO	L (k), but not less th Losses (from col	nan -0-) or . (h))
a								-4.
b								
С								
d								
e						•		
Capital gain net income or (net ca	pıtal loss	If gain, also enter If (loss), enter -0-			}	2		-4.
3 Net short-term capital gain or (los		ined in sections 1222(5) an	•		7			
If gain, also enter in Part I, line 8, If (loss), enter -0- in Part I, line 8	coınwı (c).			-	,	N/	Δ
Part V Qualification U	nder S	ection 4940(e) for	Reduced	Tax on Net	nves	ment Inc	ome	
If section 4940(d)(2) applies, leave the Was the foundation liable for the sect If "Yes," the foundation doesn't qualify. 1 Enter the appropriate amount in e	ion 4942 y under s	tax on the distributable ame ection 4940(e). Do not com	plete this part	<u>.</u>				Yes X No
1 Enter the appropriate amount in e	acii culu		ST actions dei	ore making any en		···	· 	(4)
Base period years Calendar year (or tax year beginnir	ng in)	(b) Adjusted qualifying dist		Net value of no			(col. (b) c	(d) ribution ratio livided by col. (c))
2018			5,619.			160,557		.055626
2017			5,619.	<u> </u>		160,557		.055626
2016			4,548.			163,402		.052973
2015			3,720.			138,067		.031319
2014		1.	1,820.			133,287	<u>·</u>	.027280
2 Total of line 1, column (d)							2	.222824
3 Average distribution ratio for the 5 the foundation has been in existen	-	than Evene	n line 2 by 5.0	•	r of yea	rs 	3	.044565
4 Enter the net value of noncharitable	le-use as	sets for 2019 from Part X, I	ne 5			-	4	535,835.
5 Multiply line 4 by line 3							5	23,879.
6 Enter 1% of net investment incom	e (1% of	Part I, line 27b)					6	141.
7 Add lines 5 and 6	-						7	24,020.
B Enter qualifying distributions from	Part YII	line 4	- ••	••			8	25,442.
If line 8 is equal to or greater than		*	 1b, and comp		 g a 1% t	ax rate.		
See the Part VI instructions.		<u> </u>					 	

14 Security Constraints of the Control of the Cont		n 990-PF (2019) THE KUNIS FAMILY FOUNDATION Int VI Excise Tax Based on Investment Income (Section 4940))(a), 4	940(b), 49			783081 e instruc		Page 4 S)	
Dates of ruling or determination letter: (attach copy of letter if necessary-see instructions) 1 141. 14	1a	Exempt operating foundations described in section 4940(d)(2), check here and e	nter "N/	A" on line 1.)				1	
b Domestic foundations that meet the section 4947(e) requirements in Part V, check here					ons)				1	
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 40-) 3 Add lines 1 and 2 3 Jul 1. 4 Sublité A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter 40-) 5 Tax based on investment income. Subtract line 4 from line 3. If zero or tes, enter 40- 6 Credistrayments. 2 Jul 1 settlements and 2018 overpayment credited to 2019 6 Jul 1. 6 Credistrayments. 2 Jul 1 settlements. 2 Jul 1 settlements. 2 Jul 2 settlements. 4 Jul 1 settlements. 5 Jul 1. 6 Credistrayments. 6 Jul 1. 6 Lempt foreign organizations. 2 xwithheld at source 7 Tax pad with application for extension of this to life (form 886s) 6 Lat 1. 6 Lat 1. 6 Jul 1. 7 Jul 1. 8 Enter any penalty for underspyment of estimated tax. Check here of 1 form 2220 is attached 7 Tax disc. If the total of lines 5 and 8 is more than line 7, enter amount overed 7 Tax disc. If the total of lines 5 and 8 is more than line 7, enter amount overed 7 Tax disc. If the line is more than line 7 is more than line 7, enter amount overed 9 Jul 2 Statements Regarding Activities 1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any policial campaign? 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 policial campaign? 1a During the tax year, did the foundation of the vest (either directly for political purposes? See the instructions for the definition if the amount of the 10 by the Condition of the part 1120-90. For this year? 1a Letter the reminister of the State and adelated description of the activities. 1b Life the amount of the 10 by the Condition of the activities and condition of the form 1120-90. For this year? 1c Letter the reminister method of the part	b					1		1	41.	
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-) Add lines 1 and 2 3 141. 4 Subhtile A (mcome) tax (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-) 5 Tax based on investment income. Subhratal time 4 from line 3.1 zero or less, enter -0- 5 Tax based on investment income. Subhratal time 4 from line 3.1 zero or less, enter -0- 5 Exempt foreign organizations - 1 saw withheld a source 6 0 0. 6 0 0. 6 0 0. 7 Tax gad with application for extension of time to file (Form 8868) 6 0 0. 8 Exempt foreign organizations - 1 saw withheld a source 7 Total credits and payments. Add lines 6st through 64 8 Exited any penalty for underpayment of estimated tax. Check here		of Part I, line 27b								
3 141. 4 Subhtle A (mozen) tax (domestor section 4947(a)(1) trusts and taxable foundations only, others, enter -0-) 5 Tax based on investment incems. Subtract lain 4 from line 3. If zero or less, enter -0-) 5 Tax based on investment incems. Subtract lain 4 from line 3. If zero or less, enter -0-) 5 Tax based on investment incems. Subtract lain 4 from line 3. If zero or less, enter -0-) 5 Tax based on investment incems. Subtract lain 4 from line 3. If zero or less, enter -0-) 5 Lempt foreign organizations - tax withheld at source 6 D CedistPayments. 6 D Lain 4 D La	c	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations, enter 4%	6 of Part	I, line 12, col	L(b) J					
A Substile A (microme) tax (domestic section 4947(a)(1) trusts and baselle foundations only; others, enter -0-) 5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0- 5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0- 5 Cedistrigaryments: a 2019 estimated tax payments and 2018 overpayment credited to 2019 5 Exempt foreign organizations - staw withheld at source 6 0 0. 6 0 0. 7 Tax dec. If the total or lines 5 and 8 the rough 50 8 Enter any penalty for underpayment of estimated tax. Check here ☐ if Form 2220 is attached 8 Total credits and payments. Add lines 5s at through 50 8 Enter any penalty for underpayment of estimated tax. Check here ☐ if Form 2220 is attached 9 0. 10 Overpayment, Il line 7 is more than the total or lines 5 and 8, enter the amount overegial 10 Total credits and layer or cedited to 2019 10 Overpayment, Il line 7 is more than the total of lines 5 and 8, enter the amount overpaid 11 Enter the amount of line 10 to the Cedited to 2019 estimated tax. 12 Dirting the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any pothesic campaign? 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 pothesic campaign? 1b Did it spend more than 5100 during the year (either directly or indirectly) for potical epislation or did it participate or intervene in distributed by the foundation with the activities. 1c Did the foundation the Form 1120-POL for this year? 1d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year. 1) On the foundation hie Form 1120-POL for this year? 1 If Yes, statich a detailed description of the activities. 1 Has the foundation engaged in any activities that have not previously been reported to the IRS? 1 If Yes, attach a detailed description of the activities. 1 Has the	2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only, of	hers, en	ter -0-)		2				
Tax based on investment income. Subtract lare 4 from line 3. If zero or less, enter -0- C Credits/Payments. 2019 estimated but payments and 2018 overpayment credited to 2019 B Exempt foreign organizations - tax withheld at source Tax pad with application for extension of time to the (Form 8668) B	3	Add lines 1 and 2			_	3		<u> </u>	41.	
6 Credits/Payments: 2 019 estimated tax payments and 2018 overpayment credited to 2019	4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; of	thers, er	nter -0-)		4				
a 2019 estimated tax payments and 2016 overpayment credited to 2019 b Exempt foreign organizations - Tax withheld at source c Tax paid with application for extension of brine to file (Form 8666) d Backup withholding erroneously withheld d Backup withholding erroneously withheld d Backup withholding erroneously withheld f Todal credits and payments. Add lines 6a through 6d 8 Enter any penalty for underpayment of estimated tax. Check here ☐ if Form 2220 is attached 8 D. 9 Tax dae. If the total of lines 5 and 8 is more than line 7, enter amount owed 9 D. 10 Terroneously withholding erroneously withheld 11 Part VIII-A The 7 is more than the total of lines 5 and 8, enter the amount owed 10 Terroneously in the 10 to be: Credited to 2020 estimated tax ► ☐ It enter the amount of line 10 to be: Credited to 2020 estimated tax ► ☐ It enter the amount of line 10 to be: Credited to 2020 estimated tax ► ☐ It enter the amount of line 10 to be: Credited to 2020 estimated tax ► ☐ It enter the amount of line 10 to be: Credited to 2020 estimated tax ► ☐ It enter the amount of line 10 to be: Credited to 2020 estimated tax ► ☐ It enter the amount of line 10 to be: Credited to 2020 estimated tax ► ☐ It enter the amount of line 10 to be: Credited to 2020 estimated tax ► ☐ It enter the amount of line 10 to be: Credited to 2020 estimated tax ► ☐ It enter the amount of line 10 to be: Credited tax December 11 It enter the amount of line 10 to be: Credited tax December 11 It enter the amount of line 10 to be: Credited tax December 11 It enter the amount of line 10 to be: Credited tax December 11 It enter the amount of line 10 to be: Credited to 2020 estimated tax Check the amount of line 10 to be: Credited to 2020 estimated tax December 11 It enter the amount of line 10 to be: Credited to 2020 estimated tax December 11 It enter the amount of line 10 to be: Credited to 2020 estimated tax December 11 It enter the amount of line 10 to be: Credited tax December 11 It enter the 10 to be: Credited tax December 11 It enter the 10 to be: C	5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-				5		<u> </u>	<u>41.</u>	
b Exempt foreign organizations - tax withheld at source 1 a paid with application for extension of time to file (Form 8866) 8	6	Credits/Payments:	,	1				•		
Tax pard with application for extension of time to file (Form 8868) d Backup withholding erroneously withholding f Total credits and payments. Add lines 6a through 6d Total credits and payments. Add lines 6a through 6d Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed D Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount ower amount ower and the file of the control of lines 5 and 8, enter the amount overpaid The file the amount of line 10 to be: Oredited to 2020 estimated tax Refunded Total Credits Regarding Activities Tax due is 1 to the control of the control of lines 5 and 8, enter the amount overpaid The file the amount of line 10 to be: Oredited to 2020 estimated tax Refunded Total Credits Regarding Activities Tax point the tax year, dot the foundation attempt to influence any nabonal, state, or local legislation or did it participate or intervene in any political campaign? Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition If the answer is Yes' to 1a or 16, attach a detailed description of the activities. Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition If the answer is Yes' to 1a or 16, attach a detailed description of the activities. Did the foundation in connection with the activities. Did the foundation in connection with the activities. Did the foundation in Credits and provide the activities of the foundation in connection with the activities. Did the foundation in the same of the activities of the IRS? If Yes, attach a detailed description of the activities. Did the foundation and any activities that have not previously been reported to the IRS? If Yes, attach a detailed description of the activities. Bas the foundation made any changes, not previously reported to								•		
d Backup withholding erroneously withheld 7 Total credits and payments. Add lines 6s through 6d 7 1141. 8 Enter any penalty for underpayment of estimated tax. Check here								•	1	
7 Total credits and payments. Add lines 6a through 6d 8 Enter any penalty for underpayment of estimated tax. Check here ☐ if Form 2220 is attached ☐ 8 ☐ 0. 9 Tax due. If the total of lines 5 and 6 is more than the 10-7, enter amount owed ☐ 0. 10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount owerpaid ☐ 10. 11 Enter the amount of line 10 to be: Credited to 2020 estimated tax ▶ ☐ 10. 12 Faire the amount of line 10 to be: Credited to 2020 estimated tax ▶ ☐ 10. 13 Faire the tax year, did the foundation attempt to influence any nabonal, state, or local legislation or did it participate or intervene in any political campaign? 1a During the tax year, did the foundation attempt to influence any nabonal, state, or local legislation or did it participate or intervene in any political campaign? b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition ☐ 11 X 10 X 10 the spend more than \$100 during the year (either directly or undirectly) for political purposes? See the instructions for the definition ☐ 11 X 10 X 10 the spend more than \$100 during the year (either directly or undirectly) for political purposes? See the instructions for the definition ☐ 11 X 10									- 1	
8 Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached 9 1 3 0. 9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed 9 0. 10 Everyament. If line 7 is more than the total of lines 5 and 8, inter the amount overpaid 10 1. 11 Enter the amount of line 30 to be: Credited to 2020 estimated tax 10 1. 12 Part VII-A Statements Regarding Activities 1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? 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? 1b Did it spend more than \$100 during the year (either directly) or indirectly) for political purposes? See the instructions for the definition II the answer is 'Yes' to a 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. 1c Did the foundation the Form 1220-P01. for this year? 1c Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year. 1c) On the foundation. In \$5 or 1120-P01. for this year? 1c Enter the amount (if any) pad by the foundation during the year for political expenditure tax imposed on foundation managers. \$ 0. 2 Has the foundation engaged in any activities that have not previously been reported to the IRS? 2 X X If 'Yes,' attach a detailed description of the activities. 3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If 'Yes,' attach a conformed copy of the changes 3 X X 4a Did the foundation have unrelated business gross income of \$1,000 or more during the year? N/A 4b Did Yes, 'attach he statement required by General Instruction 7. for this year? N/A 5 X 4a Did the foundation have at least \$			<u>6d</u>	<u> </u>	0.				41	
9 Tax due. If the total of lines 5 and 8 is more than the 7, enter amount owed 10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 10 In the text amount of line 10 to be. Credited to 2002 estimated tax ▶ Refunded ▶ 11 Part VII-A Statements Regarding Activities 1a During the tax year, did the foundation attempt to influence any nahonal, state, or local legislation or did it participate or intervene in any political campaign? 1a During the tax year, did the foundation attempt to influence any nahonal, state, or local legislation or did it participate or intervene in any political campaign? 1b Did it spend more than \$100 during the year (either directly) for political purposes? See the instructions for the definition 1a	7			-						
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	8		iched							
11 Eiter the amount of time 10 to be: Credited to 2020 estimated tax ▶ Refunded ▶ 11 Part VII-A Statements Regarding Activities 1 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? 5 Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition of the activities and copies of any materials published or distributed by the foundation in connection with the activities. 6 Did the foundation file Form 1120-POL for this year? 6 Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. ▶ \$ 0. 20 On foundation during the year for political expenditure tax imposed on foundation managers. ▶ \$ 0. 20 On foundation found the activities. 8 If Yes, attach a detailed description of the activities. 9 If Yes, attach a detailed description of the activities. 10 On the foundation made any changes, not previously been reported to the IRS? 11 Yes, attach a detailed description of the activities. 12 On the foundation made any changes, not previously reported to the IRS? 13 On the foundation have unrelated business gross income of \$1,000 or more during the year? 14 On the foundation have unrelated business gross income of \$1,000 or more during the year? 15 Was there a liquidation, termination, dissolution, or substantial contraction during the year? 16 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: 17 On	9	· · · · · · · · · · · · · · · · · · ·							<u> </u>	
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7 Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV 8a Enter the states to which the foundation reports or with which it is registered. See instructions. NJ 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? If "No," attach explanation 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 tax year beginning in 2019? See the instructions for Part XIV. If "Yes," complete Part XIV 10 Did any persons become substantial contributors during the tax year? if "Yes," attach a schedule listing their names and addresses 10 X			y airection	ons that confi	ict with the state	iaw				
8a Enter the states to which the foundation reports or with which it is registered. See instructions. NJ 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? If "No," attach explanation 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 tax year beginning in 2019? See the instructions for Part XIV. If "Yes," complete Part XIV 10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses 10 X	7			 t.ll. aal. (a). a						
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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? If "No," attach explanation 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 tax year beginning in 2019? See the instructions for Part XIV. If "Yes," complete Part XIV 10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses 10 X	Q.	Enter the states to which the foundation reports or with which it is requetered. See instruction	ne 🕨							
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? If "No," attach explanation 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 tax year beginning in 2019? See the instructions for Part XIV. If "Yes," complete Part XIV 10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses 10 X	Va		113.						! !	
of each state as required by General Instruction G? If "No," attach explanation 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 tax year beginning in 2019? See the instructions for Part XIV. If "Yes," complete Part XIV 10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses 10 X	h		ttarnev f	General (or de	sionate)		-		1 1	
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 tax year beginning in 2019? See the instructions for Part XIV. If "Yes," complete Part XIV 10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses 10 X	J			aanaraa (ur uc	~.y.iu.t/		- Rb	X	ļ'	
year 2019 or the tax year beginning in 2019? See the instructions for Part XIV. If "Yes," complete Part XIV 10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses 10 X	9		 ction 49	42(1)(3) or 49		 ıdar	.		<u> </u>	า
10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses	-				(7)(2) 22.01	-	9		X	L
	10		-		addresses .					,
		,					Form 99 0)-PF	(2019)	

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	n 990-PF (2019) THE KUNIS FAMILY FOUNDATION 22-678	3081		Page 5
Pa	art VII-A Statements Regarding Activities (continued)			
			Yes	No
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of			
	section 512(b)(13)? If "Yes," attach schedule. See instructions	11		Х
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges?			
	If "Yes," attach statement. See instructions	12] !	x
13		13	Х	
10	Website address > N/A		1 22	
44	The books are in care of ► CHERYL KUNIS Telephone no. ► 212729	672	<u> </u>	
14	Located at > 214 WEST 17TH ST, NEW YORK, NY ZIP+4 >10			
45		1011		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here		/3	ـــا
	and enter the amount of tax-exempt interest received or accrued during the year	1//	/A Yes	N.
16	At any time during calendar year 2019, did the foundation have an interest in or a signature or other authority over a bank,		res	
	securities, or other financial account in a foreign country?	16		X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the	1		
(De	foreign country	<u> </u>		
Pa	art VII-B Statements Regarding Activities for Which Form 4720 May Be Required	1	I	
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1a	a 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 X No	'	1 1	
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
	a disqualified person?		1 1	
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	İ		
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes X No	1		
	(5) Transfer any income or assets to a disqualified person (or make any of either available	1		
	for the benefit or use of a disqualified person)?			
	(6) Agree to pay money or property to a government official? (Exception. Check "No"			!
	if the foundation agreed to make a grant to or to employ the official for a period after		1 1	•
	termination of government service, if terminating within 90 days.)			
b	of any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations	ŀ		
	section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions N/A	1b		
	Organizations relying on a current notice regarding disaster assistance, check here			
c	E Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected	١.		
	before the first day of the tax year beginning in 2019?	1c	~	X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation	<u> </u>		
_	defined in section 4942(j)(3) or 4942(j)(5)):	ì	l J	
а	At the end of tax year 2019, did the foundation have any undistributed income (Part XIII, lines	Į.		
	6d and 6e) for tax year(s) beginning before 2019?	}		
	If Wee ! let the weers	ļ		
h	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect	1		
_	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach	1		
	statement - see instructions.) N/A	2b		
	of the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.	120		
		}	1	į
2-	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time		1	
Sa	Type of the very service o			
	· · · · · · · · · · · · · · · · · · ·	1		
D	of "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 Form 4720,			
_	Schedule C, to determine if the foundation had excess business holdings in 2019.) N/A	3b	 	
	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	 	<u> </u>
þ	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		X
	Fo	rm 99 0)-PF ((2019)

orm 990-PF (2019) THE KUNIS FAMILY FOUNDAT	ION		22-67830	81	F	Page (
Part VII-B Statements Regarding Activities for Which F	orm 4720 May Be R	equired (contin	ued)			
5a During the year, did the foundation pay or incur any amount to:				Y	es	No
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	n 4945(e))?	, 🔲 Ye	es X No	• .		
(2) Influence the outcome of any specific public election (see section 4955); (or to carry on, directly or indire	ectly,	İ	- 1		
any voter registration drive?			es X No	,],		`.
(3) Provide a grant to an individual for travel, study, or other similar purposes	37	Y	es 🗶 No 📗			
(4) Provide a grant to an organization other than a charitable, etc., organization	n described in section			* :	.	ι,.
4945(d)(4)(A)? See instructions		Yo	es 🗶 No 📙			, ,
(5) Provide for any purpose other than religious, charitable, scientific, literary	, or educational purposes, or f			×		÷
		—	es X No			
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify un	· · · · · · · · · · · · · · · · · · ·	n Regulations		_		
section 53.4945 or in a current notice regarding disaster assistance? See instr			N/A	5b	_	
Organizations relying on a current notice regarding disaster assistance, check	•	_		ŀ	Į	
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption to	••			` ^.	.	77
expenditure responsibility for the grant?	N	//À □ Y	es No	-1	1	
If "Yes," attach the statement required by Regulations section 53.4945-5(d).				·	,	•
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums on		es X No		.	-
a personal benefit contract? b Did the foundation, during the year, pay premiums, directly or indirectly, on a j		— 1		6b	┷	$\overline{\mathbf{x}}$
If "Yes" to 6b, file Form 8870.	Dei Soliai Deneni Contract*		·	00		
7a At any time during the tax year, was the foundation a party to a prohibited tax:	shetter transaction?		es X No	ļ		
b if "Yes," did the foundation receive any proceeds or have any net income attribu	,		·· ——.	7b	_	
8 is the foundation subject to the section 4960 tax on payment(s) of more than \$					\dashv	
			es X No	- 1	- [
Part VIII Information About Officers, Directors, Trusto	ees, Foundation Mar	agers, Highly				
Paid Employees, and Contractors			· · · · · · · · · · · · · · · · · · ·			
1 List all officers, directors, trustees, and foundation managers and t	1		I (-1)			
(a) Name and address	(b) Title, and average hours per week devoted	(c) Compensation (If not paid,	(d) Contributions to employee benefit plans	(e)	Expe	ense other
	to position	`enter -0-) '	and deferred compensation	alle	owan	ces
CHERYL KUNIS	TRUSTEE			1		
214 WEST 17TH STREET				}		_
NEW YORK, NY 10011	2.00	0.	0.	<u> </u>		0.
RICHARD KUNIS	TRUSTEE					
214 WEST 17TH STREET	1		,			^
NEW YORK, NY 10011	2.00	0.	0.	 		0.
,	4					
	-			1		
				 		
	1	1		1		
	1	!				
Compensation of five highest-paid employees (other than those inc	luded on line 1). If none, c	enter "NONE."	<u> </u>			
	(b) Title, and average		(d) Contributions to employee benefit plans	(e)	Ехре	ense other
(a) Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	employee benefit plans and deferred compensation	acco alic	unt, owan	otner .ces
NONE						
				<u> </u>		
]		
	ì			l		

Form **990-PF** (2019)

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

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.

Amount

All other program-related investments. See instructions.

Form **990-PF** (2019)

Total. Add lines 1 through 3 ...

P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign four	ndations, se	e instructions.)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
а	Average monthly fair market value of securities	1a	538,928.
b	Average of monthly cash balances	1b	538,928. 5,067.
C	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	543,995.
e	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	543,995.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	8,160.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	535,835.
6	Minimum investment return. Enter 5% of line 5	6	26,792.
P	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations an foreign organizations, check here and do not complete this part.)	d certain	
1	Minimum investment return from Part X, line 6	1	26,792.
2a	Tax on investment income for 2019 from Part VI, line 5		40,752.
ь	Income tax for 2019. (This does not include the tax from Part VI.)		
C	Add lines 2a and 2b	2c	141.
3	Distributable amount before adjustments. Subtract line 3e from time 1	3	26,651.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	26,651.
6	Deduction from distributable amount (see instructions)	6	0.
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	26,651.
P	art XII Qualifying Distributions (see instructions)	1	20,031.
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		····
а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	25,442.
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	<u></u>
3	Amounts set aside for specific charitable projects that satisfy the:		
а	Suitability test (prior IRS approval required)	3a	
ь	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	25,442.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		
-	income. Enter 1% of Part I, line 27b	5	141.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	25,301.
-	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation questions are subsequent to the column of the c		
	4940(e) reduction of tax in those years.		

Form **990-PF** (2019)

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				26,651.
2 Undistributed income, if any, as of the end of 2019.				
a Enter amount for 2018 only			0.	
b Total for prior years:				
, ,		0.		İ
3 Excess distributions carryover, if any, to 2019:				
a From 2014			,	
b From 2015	* 4	•	ga s ru e	· 10
c From 2016 1,626.				
d From 2017				
e From 2018				
f Total of lines 3a through e	1,626.			-
4 Qualifying distributions for 2019 from				
Part XII, line 4: ► \$ 25,442.				
a Applied to 2018, but not more than line 2a			0.	
b Applied to undistributed income of prior				
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus				
(Election required - see instructions)	0.			
d Applied to 2019 distributable amount				25,442.
e Remaining amount distributed out of corpus	0.			
5 Excess distributions carryover applied to 2019				
(If an amount appears in column (d), the same amount must be shown in column (a))	1,209.			1,209.
6 Enter the net total of each column as			_	- 3' 0'
indicated below:	417.		, , , , , , , , , , , , , , , , , , ,	
8 Curpus. Add titles 31, 4c, and 4e. Subtract line 5	417-	, 4	· · · · · · · · · · · · · · · · · · ·	
b Prior years' undistributed income. Subtract		0.		
line 4b from line 2b		U.		
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		0.		
assessed d Subtract line 6c from line 6b. Taxable		0.		
		0.		
amount - see instructions e. Undistributed income for 2018. Subtract line		U •		
0 01101001001101101101101101101101101101			0.	
4a from line 2a. Taxable amount - see instr f Undistributed income for 2019. Subtract			0.	1
lines 4d and 5 from line 1. This amount must				
be distributed in 2020				0.
7 Amounts treated as distributions out of				<u></u>
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3) (Election				
may be required - see instructions)	0.	in the second	3 4 4 1156	k 0
8 Excess distributions carryover from 2014		 		1
not applied on line 5 or line 7	0.	v ad v Por	10.4	م، ندا نے رہ
9 Excess distributions carryover to 2020.			49 '	777
Subtract lines 7 and 8 from line 6a	417.		-	
10 Analysis of line 9:	<u> </u>			
a Excess from 2015	١			
b Excess from 2016 417.				j
c Excess from 2017			1	,
d Excess from 2018	-	· ·	·	ĺ
e Excess from 2019	ر پهرو د			, •
			<u> </u>	

Form 990-PF (2019) THE KUN	IS FAMILY FO	OUNDATION			83081 Page 10
Part XIV Private Operating F	······		A, question 9)	N/A	
1 a If the foundation has received a ruling of					
foundation, and the ruling is effective fo	r 2019, enter the date of t	he ruling .	▶ 🛌		,
b Check box to indicate whether the found	lation is a private operatin	ig foundation described in		4942(j)(3) or 4	942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years		
income from Part I or the minimum	(a) 2019	(b) 2018	(c) 2017	(d) 2016	(e) Total
investment return from Part X for					
each year listed	1				
b 85% of line 2a					
c Qualifying distributions from Part XII,					
line 4, for each year listed	1				
d Amounts included in line 2c not					
					1
used directly for active conduct of	l				
exempt activities				, ,	
e Qualifying distributions made directly					j
for active conduct of exempt activities.					
Subtract line 2d from line 2c			<u>. </u>		
3 Complete 3a, b, or c for the alternative test relied upon:	<u>}</u>	/			1
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					<u> </u>
2/3 of minimum investment return				İ	
shown in Part X, line 6, for each year listed	<u> </u>				
c "Support" alternative test - enter:		/			
	1				
(1) Total support other than gross investment income (interest,					•
dividends, rents, payments on					1
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)	/				ł
(3) Largest amount of support from					
an exempt organization					
(4) Gross investment income					
Part XV Supplementary Info	rmation (Complet	e this part only if	the foundation	had \$5,000 or mo	re in assets
at any time during t					0 200000
 					
1 Information Regarding Foundatio	•				
a List any managers of the foundation wh			butions received by the	e foundation before the clos	e of any tax
year (but only if they have contributed in	iore maii \$5,000). (See Se	scuon 507(u)(2).)			
NONE					***
b List any managers of the foundation wh			or an equally large porti	on of the ownership of a pa	ırtnership or
other entity) of which the foundation ha	s a 10% or greater interes	t.			
NONE					
2 Information Regarding Contributi	on, Grant, Gift, Loan.	Scholarship, etc., Pro	orams:		
Check here 🕨 🗓 if the foundation of				not accept uncolicited requi	acte for funde If
the foundation makes gifts, grants, etc.,	to individuals or organiza	tions under other condition	ons, complete items 2a:	b. c. and d:	20 101 101103 II
a The name, address, and telephone num	 				
a The hame, address, and telephone hum	ter or citian address or the	e person to whom applica	HOUS SHOULD DE AUDIES	seu.	
			·		
b The form in which applications should b	e submitted and informati	ion and materials they sho	ould include:		
					
c Any submission deadlines:					
	·				
d Any restrictions or limitations on awards	s, such as by geographica	l areas, charitable fields, k	ands of institutions, or	other factors:	

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Form 990-PF (2019) THE KUNIS FAMILY FOUNDATION

Part XV Supplementary Information (continued)

3 Grants and Contributions Paid During the Y		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 Paid during the year				
MT. SINAI SCHOOL OF MEDICINE 1 GUSTAVE L. LEVY PL NEW YORK, NY 10029		501(C)(3)	GENERAL PURPOSE	300
MIT ALUMNI ASSOCIATION 600 MEMORIAL DRIVE, W98-2ND FLOOR CAMBRIDGE, MA 02139	NONE	501(C)(3)	GENERAL PURPOSE	1,500
GLOBAL BIOETHICS INITIATIVE 777 UN PLAZA, 5TH PLOOR NEW YORK, NY 10017	NONE	501(C)(3)	GENERAL PURPOSE	300
COMMUNITY ACCESS NY, NY 17 BATTERY PLACE NEW YORK, NY 10004	NONE	501(C)(3)	SENERAL PURPOSE	1,520
GILDA'S CLUB 195 WEST HOUSTON ST NEW YORK, NY 10014	NONE	501(C)(3)	GENERAL PURPOSE	300
Total SEE CO	NTINUATION SHEE	T(S)	. ▶ 3a	25,442
• Approved for future payment NONE				·
	1	1	į į	

Part XV Supplementary Informatio	n			
3 Grants and Contributions Paid During the	Year (Continuation)			
Recipient	If recipient is an individual, show any relationship to	Foundation	Purpose of grant or	Amount
Name and address (home or business)	any foundation manager or substantial contributor	status of recipient	contribution	Amount
UNIVERSITY OF PENNSYLVANIA	NONE	501(C)(3)	GENERAL PURPOSE	
3451 WALNUT STREET		1		
PHILADELPHIA, PA 19104				1,000
,				
PHILADELPHIA THEATER COMPANY	NONE	501(C)(3)	GENERAL PURPOSE	
215 SOUTH BROAD STREET, 304 PHILADELPHIA, PA 19107				500
PHILABUNDANCE PHILADELPHIA PA	NONE	501(C)(3)	GENERAL PURPOSE	
3616 S GALLOWAY ST PHILADELPHIA, PA 19148				1,000
PHYSICIANS FOR A NATIONAL HEALTH	NONE	501(C)(3)	GENERAL PURPOSE	
PROGRAM				
2840 BROADWAY				
NEW YORK, NY 10025				2,750
NY PUBLIC INTEREST RESEARCH GROUP	NONE	501(C)(3)	GENERAL PURPOSE	
9 MURRAY STREET, LOWER LEVEL	HOME		BUNDAND TOTALOOD	
NEW YORK, NY 10007				200
PGA REACH PHILADELPHIA	NONE	501(C)(3)	GENERAL PURPOSE	
1009 PENLLYN PIKE LOWER GWYNEDD, PA 19002				250
300111 3002				250
METROPOLITAN MUSEUM OF ART, NY, NY	NONB	501(C)(3)	GENERAL PURPOSE	!
1000 5TH AVE				280
NEW YORK, NY 10028				
ENERGY VISION	NONE	501(C)(3)	GENERAL PURPOSE	:
138 EAST 13TH STREET				
NEW YORK, NY 10028				855
COMMUNITY IMPACT AT COLUMBIA	NONE	501(C)(3)	GENERAL PURPOSE	
JNIVERSITY 105 Padi Cyrry				
105 EARL STREET NEW YORK, NY 10027				7,047
· 				-
J, WOOD PLATT SCHOLARSHIP TRUST	NONE	501(C)(3)	GENERAL PURPOSE	
1974 SPROUL ROAD, SUITE 400 BROOMALL, PA 19008				250,
Total from continuation sheets	<u> </u>	<u> </u>		21,522.

Part XV Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Foundation Purpose of grant or show any relationship to status of Amount contribution any foundation manager Name and address (home or business) recipient or substantial contributor WHYY PUBLIC TELEVISION NONE 501(C)(3) GENERAL PURPOSE 1500 NORTH 6TH ST PHILADELPHIA, PA 19106 500. FUND FOR SUSTAINABLE TOMORROWS NONE 501(C)(3) GENERAL PURPOSE 2800 LOBITOS CREEK RD HALF MOON BAY, CA 94019 2,500. HABITAT FOR HUMANITY NONE 501(C)(3) GENERAL PURPOSE 111 JOHN ST 23RD FLOOR NEW YORK, NY 10038 150. GEORGETOWN UNIVERSITY NONE 501(C)(3) GENERAL PURPOSE 370 O STREET WASHINGTON DC, DC 20057 250. GENERAL PURPOSE WNYC PUBLIC RADIO NONE 501(C)(3) 160 VARICK STREET NEW YORK, NY 10013 250. SANDY HOOK PROMISE FOUNDATION GENERAL PURPOSE NONE 501(C)(3) PO BOX 3489 NEWTOWN, CT 06470 500. ALBERT EINSTEIN COLLEGE OF MEDICINE NONE 501(C)(3) GENERAL PURPOSE 1300 MORRIS PARK AVE THE BRONX, NY 10461 1,004. PLANNED PARENTHOOD NONE 501(C)(3) GENERAL PURPOSE 26 BLEECKER ST NEW YORK, NY 10012 2,236.

Total from continuation sheets

Enter gross amounts unless otherwise indicated.	Unrelate	d business income	Exclud	ed by section 512, 513, or 514	(0)
•	(a) Business	(b) Amount	(C) Exclu- sion	(d) Amount	(e) Related or exempt function income
1 Program service revenue:	code		code	Anount	Tanodon moone
	 		+ +		
b	ļ		++		
c	ļ			<u> </u>	
d	ļ				
e	<u> </u>		\rightarrow		
f			$\perp \perp \perp$		
g Fees and contracts from government agencies					
Membership dues and assessments					
Interest on savings and temporary cash	1			"	
investments			14	13.	
Dividends and interest from securities			14	14,087.	
Net rental income or (loss) from real estate:				1	
a Debt-financed property					
b Not debt-financed property					
Net rental income or (loss) from personal	Ī				-
property			1 1	İ	
Other investment income					
Gain or (loss) from sales of assets other			\top	· · · · · · · · · · · · · · · · · · ·	
than inventory]]		18	-4.	
Net income or (loss) from special events	Ī				
Gross profit or (loss) from sales of inventory					
Other revenue:					
a	1		1 1		
b			1 1		
c	1				
d					
e					
Subtotal. Add columns (b), (d), and (e)		0		14,096.	· · · · · · · · · · · · · · · · · · ·
Total. Add line 12, columns (b), (d), and (e)	·			 	14,09
ee worksheet in line 13 instructions to verify calculations.)	•••••				
Part XVI-B Relationship of Activities to ine No. Explain below how each activity for which incom	ne is reported in	column (e) of Part XVI-			lishment of
▼ the foundation's exempt purposes (other than b	y providing fun	ds for such purposes).			
	 				
	···				

				·····	
1					

Form 990-PF (2	2019) THE K	UNIS FAMI	LY FOU	NDATION		22-6783	081	Pa	ige 13
Part XVII	Information Re Exempt Organ		sfers to a	nd Transactions a	nd Relationsh	nips With Noncharit	able		
1 Did the or	rganization directly or indi	rectly engage in any	of the following	ng with any other organizati	on described in sec	ton 501(c)		Yes	No
				g to political organizations?		. ,	1		
	from the reporting founds						1		
(1) Cash				_			1a(1)		X
	r assets		••••	• • • • • • • • • • • • • • • • • • • •			1a(2)		Х
b Other tran	-				• •				
	of assets to a noncharita	ble exempt organiza	tion				1b(1)		X
• •	hases of assets from a no					•	15(2)	<u> </u>	Х
• •	al of facilities, equipment,		=				1b(3)	 -	X
	bursement arrangements						$\overline{}$	 	X
	• • • • •	1b(4)		X					
							1b(5)		X
• •	ormance of services or me	•	•				1b(6)	-	
-	f facilities, equipment, ma	•					<u> 1c</u>	ببا	X
						market value of the goods, o		ets,	
				ed less than tair market vali	ue in any transactioi	n or sharing arrangement, sh	ow in		
	d) the value of the goods,			·····	1				
(a) Line no (b) Amount involved (c) Name of noncharitable				e exempt organization (d) Description of transfers, transactions, a			naring arr	angemen	its
			N/A						
			·- 						
	·								
				i _		····			
	· · · · · · · · · · · · · · · · · · ·			*****					
		1					·		
						· · · · · · · · · · · · · · · · · · ·			
	****	 		· · · · · · · · · · · · · · · · · · · 		······································			
			-		+				
		<u> </u>							
	<u> </u>	<u> </u>	·			·			
	ndation directly or indirect 501(c) (other than sectio	•		or more tax-exempt organ	izations described] Yes	X] No
b If "Yes," co	omplete the following sch				- 				
	(a) Name of org	janization		(b) Type of organization		(c) Description of relationsh	ıφ		
	N/A								
			·						
Sign and be				accompanying schedules and staxpayer) is based on all information	ation of which preparer t	nas any knowledge. May retu sho	the IRS on with the	orepare	y .
Here	1 margara	, cent		1/2/28/30	TRUST	BR []	Yes		No
Sign	nature of officer or trustee			Date	Title				
	Print/Type preparer's na	me	Preparer's s	ignature	Date	Check if PTIN			
	NORM A PRO	VVIDENZA,	1			self- employed			
Paid	CPA	•	NORM A	PROVVIDENZ	12/14/20	P00	627	361	
Preparer		TMARSH. C		AND AND GUND	<u> </u>	Firm's EIN ► 59-29			
Use Only							_		
_	Firm's address ▶ 90	0 NORTH 1	2TH AV	RNUE					
		NSACOLA,				Phone no. 850-43	5-8	300	
				<u> </u>			rm 99 ((2010)
						ru	1111 937		(2013)

TOTAL TO FORM 990-PF, PART II, LINE 10B

FORM 990-PF INTERE	ST ON SAVI	NGS AND TEM	PORARY	CASH IN	VESTMENTS	STATEMENT 1	
SOURCE	REVE	(A) REVENUE N PER BOOKS 13.		(B) VESTMENT COME	(C) ADJUSTED NET INCOME		
CHARLES SCHWAB #692	- 			13.			
TOTAL TO PART I, LI		13.		13.	13.		
FORM 990-PF	DIVIDEND	S AND INTER	EST FRO	M SECUR	ITIES	STATEMENT 2	
SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDEND	RE'	(A) VENUE BOOKS	(B) NET INVES MENT INCO		
CHARLES SCHWAB #6923 DIVIDENDS	14,087	•	0.	14,087.	14,08	7. 14,087.	
TO PART I, LINE 4	14,087	•	0.	14,087.	14,08	14,087.	
FORM 990-PF		TAX	es	·		STATEMENT 3	
DESCRIPTION		(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME		(C) ADJUSTED NET INCOM		
TAX REFUND	_	-350.	-	0.		0.	
TO FORM 990-PF, PG	1, LN 18 =	-350.	0.			0. 0.	
FORM 990-PF	CORPORAT	E STOCK			STATEMENT 4		
DESCRIPTION			BOOF		K VALUE	FAIR MARKET VALUE	
VARIOUS				87,776.	564,715.		

87,776. 564,715.