

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

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

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

OMB No. 1545-0052

2019

Open to Public Inspection

For calendar year 2019, or tax year beginning 03-01-2019 , and ending 02-28-2020

Name of foundation Leopold Schepp Foundation		A Employer identification number 13-5562353	
% SUZANNECLAIR GUARD		B Telephone number (see instructions) (212) 692-0191	
Number and street (or P.O. box number if mail is not delivered to street address) 950 Third Avenue 31st Floor	Room/suite	C If exemption application is pending, check here <input type="checkbox"/>	
City or town, state or province, country, and ZIP or foreign postal code New York, NY 10022		D 1. Foreign organizations, check here..... <input type="checkbox"/> 2. Foreign organizations meeting the 85% test, check here and attach computation ... <input type="checkbox"/>	
G Check all that apply: <input type="checkbox"/> Initial return <input type="checkbox"/> Initial return of a former public charity <input type="checkbox"/> Final return <input type="checkbox"/> Amended return <input type="checkbox"/> Address change <input type="checkbox"/> Name change		E If private foundation status was terminated under section 507(b)(1)(A), check here <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		F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/>	
I Fair market value of all assets at end of year (from Part II, col. (c), line 16) ▶ \$ <u>10,593,751</u>		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.)	

Part I Analysis of Revenue and Expenses <small>(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions).)</small>		(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)	291,546			
	2 Check <input type="checkbox"/> if the foundation is not required to attach Sch. B				
	3 Interest on savings and temporary cash investments	89	89	89	
	4 Dividends and interest from securities	325,274	325,274	325,274	
	5a Gross rents				
	b Net rental income or (loss)				
	6a Net gain or (loss) from sale of assets not on line 10	591,486			
	b Gross sales price for all assets on line 6a	4,872,152			
	7 Capital gain net income (from Part IV, line 2)		591,486		
	8 Net short-term capital gain				
	9 Income modifications				
	10a Gross sales less returns and allowances				
b Less: Cost of goods sold					
c Gross profit or (loss) (attach schedule)					
11 Other income (attach schedule)					
12 Total. Add lines 1 through 11	1,208,395	916,849	325,363		
Operating and Administrative Expenses	13 Compensation of officers, directors, trustees, etc.	197,762	39,552		158,210
	14 Other employee salaries and wages	178,473			178,473
	15 Pension plans, employee benefits	85,363	8,224		77,139
	16a Legal fees (attach schedule)				
	b Accounting fees (attach schedule)	16,640	3,328		13,312
	c Other professional fees (attach schedule)	59,790	52,392		7,398
	17 Interest				
	18 Taxes (attach schedule) (see instructions)	35,793	3,026		21,832
	19 Depreciation (attach schedule) and depletion	913		913	
	20 Occupancy	154,248	7,712		146,536
	21 Travel, conferences, and meetings				
	22 Printing and publications				
	23 Other expenses (attach schedule)	31,718	1,497		30,221
	24 Total operating and administrative expenses. Add lines 13 through 23	760,700	115,731	913	633,121
	25 Contributions, gifts, grants paid	362,500			362,500
26 Total expenses and disbursements. Add lines 24 and 25	1,123,200	115,731	913	995,621	
27 Subtract line 26 from line 12:					
a Excess of revenue over expenses and disbursements	85,195				
b Net investment income (if negative, enter -0-)		801,118			
c Adjusted net income (if negative, enter -0-)			324,450		

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	155,062	131,178	131,178
	2 Savings and temporary cash investments	69,253	44,115	44,115
	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	46,423	60,103	60,103
	10a Investments—U.S. and state government obligations (attach schedule)			
	b Investments—corporate stock (attach schedule)	7,515,005	7,054,421	7,054,421
	c Investments—corporate bonds (attach schedule)	2,045,090	2,112,737	2,112,737
	11 Investments—land, buildings, and equipment: basis ▶ _____ 23,059 Less: accumulated depreciation (attach schedule) ▶ _____ 20,034	3,938	3,025	3,025
	12 Investments—mortgage loans			
	13 Investments—other (attach schedule)	1,139,131	1,188,172	1,188,172
	14 Land, buildings, and equipment: basis ▶ _____ Less: accumulated depreciation (attach schedule) ▶ _____			
15 Other assets (describe ▶ _____)				
16 Total assets (to be completed by all filers—see the instructions. Also, see page 1, item I)	10,973,902	10,593,751	10,593,751	
Liabilities	17 Accounts payable and accrued expenses	625	682	
	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 ▶ _____)	157,705	156,110	
	23 Total liabilities (add lines 17 through 22)	158,330	156,792	
Net Assets or Fund Balances	Foundations that follow FASB ASC 958, check here ▶ <input checked="" type="checkbox"/> and complete lines 24, 25, 29 and 30.			
	24 Net assets without donor restrictions	10,815,572	10,436,959	
	25 Net assets with donor restrictions			
	Foundations that do not follow FASB ASC 958, check here ▶ <input type="checkbox"/> and complete lines 26 through 30.			
	26 Capital stock, trust principal, or current funds			
	27 Paid-in or capital surplus, or land, bldg., and equipment fund			
	28 Retained earnings, accumulated income, endowment, or other funds			
29 Total net assets or fund balances (see instructions)	10,815,572	10,436,959		
30 Total liabilities and net assets/fund balances (see instructions) .	10,973,902	10,593,751		

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	10,815,572
2 Enter amount from Part I, line 27a	2	85,195
3 Other increases not included in line 2 (itemize) ▶ _____	3	
4 Add lines 1, 2, and 3	4	10,900,767
5 Decreases not included in line 2 (itemize) ▶ _____	5	463,808
6 Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 29 .	6	10,436,959

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 CHARLES SCHWAB - INFORMATION AVAILABLE UPON REQUEST			
b			
c			
d			
e			

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
a 4,872,152		4,280,666	591,486
b			
c			
d			
e			

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col.(h))
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any	
a			591,486
b			
c			
d			
e			

2 Capital gain net income or (net capital loss)	2	591,486
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 8, column (c) (see instructions). If (loss), enter -0- in Part I, line 8	3	

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

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

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

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? Yes No
 If "Yes," the foundation does not qualify under section 4940(e). Do not complete this part.

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

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col. (b) divided by col. (c))
2018	912,213	10,942,488	0.083364
2017	856,297	11,179,179	0.076597
2016	689,543	10,504,132	0.065645
2015	626,705	9,603,380	0.065259
2014	716,707	10,490,960	0.068317
2 Total of line 1, column (d)			0.359182
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			0.071836
4 Enter the net value of noncharitable-use assets for 2019 from Part X, line 5			10,837,437
5 Multiply line 4 by line 3			778,518
6 Enter 1% of net investment income (1% of Part I, line 27b)			8,011
7 Add lines 5 and 6			786,529
8 Enter qualifying distributions from Part XII, line 4			995,621

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)

Table with 11 rows for excise tax calculation. Includes questions about exempt foundations, tax under section 511, and tax due. Total amount owed is 333.

Part VII-A Statements Regarding Activities

Table with 10 rows for statements regarding activities. Includes questions about political campaigns, political expenditures, and state reporting. Includes Yes/No columns.

Part VII-A Statements Regarding Activities (continued)

Table with 3 columns: Question, Yes, No. Rows 11-14 regarding controlled entities, distributions, public inspection requirements, and books in care.

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Table with 3 columns: Question, Yes, No. Rows 15-16 regarding nonexempt charitable trusts and foreign accounts.

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.

Main table with 3 columns: Question, Yes, No. Rows 1a-4b regarding Form 4720 exceptions and requirements.

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

Part VIII

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
Fiduciary Investment Advisors LLC 100 northfield drive WINDSOR, CT 06095	investment fees	52,392
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 PROVIDING FINANCIAL ASSISTANCE TO DESERVING INDIVIDUALS SEEKING UNDERGRADUATE AND GRADUATE EDUCATION.	626,471
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	10,847,106
b	Average of monthly cash balances.	1b	92,240
c	Fair market value of all other assets (see instructions).	1c	63,128
d	Total (add lines 1a, b, and c).	1d	11,002,474
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation).	1e	
2	Acquisition indebtedness applicable to line 1 assets.	2	0
3	Subtract line 2 from line 1d.	3	11,002,474
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions).	4	165,037
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	10,837,437
6	Minimum investment return. Enter 5% of line 5.	6	541,872

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

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	995,621
b	Program-related investments—total from Part IX-B.	1b	0
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes.	2	0
3	Amounts set aside for specific charitable projects that satisfy the:		
a	Suitability test (prior IRS approval required).	3a	0
b	Cash distribution test (attach the required schedule).	3b	0
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	995,621
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	8,011
6	Adjusted qualifying distributions. Subtract line 5 from line 4.	6	987,610

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				0
2 Undistributed income, if any, as of the end of 2019:				
a Enter amount for 2018 only.			0	
b Total for prior years: 2017, 2016, 2015				
3 Excess distributions carryover, if any, to 2019:				
a From 2014.	195,886			
b From 2015.	173,223			
c From 2016.				
d From 2017.				
e From 2018.	915,135			
f Total of lines 3a through e.	1,284,244			
4 Qualifying distributions for 2019 from Part XII, line 4: ▶ \$ <u>995,621</u>				
a Applied to 2018, but not more than line 2a			0	
b Applied to undistributed income of prior years (Election required—see instructions).				
c Treated as distributions out of corpus (Election required—see instructions).				
d Applied to 2019 distributable amount.				
e Remaining amount distributed out of corpus	995,621			
5 Excess distributions carryover applied to 2019. (If an amount appears in column (d), the same amount must be shown in column (a).)				
6 Enter the net total of each column as indicated below:				
a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	2,279,865			
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.			0	
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).	195,886			
9 Excess distributions carryover to 2020. Subtract lines 7 and 8 from line 6a.	2,083,979			
10 Analysis of line 9:				
a Excess from 2015.	173,223			
b Excess from 2016.				
c Excess from 2017.				
d Excess from 2018.	915,135			
e Excess from 2019.	995,621			

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. 2015-10-20

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

	Tax year				(e) Total
	(a) 2019	(b) 2018	(c) 2017	(d) 2016	
2a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed	324,450	387,554	558,959	393,371	1,664,334
b 85% of line 2a	275,783	329,421	475,115	334,365	1,414,684
c Qualifying distributions from Part XII, line 4 for each year listed	995,621	913,204	866,813	689,543	3,465,181
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	995,621	913,204	866,813	689,543	3,465,181
3 Complete 3a, b, or c for the alternative test relied upon:					
a "Assets" alternative test—enter:					
(1) Value of all assets	10,593,751				10,593,751
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					0
b "Endowment" alternative test— enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed.		364,749	372,639	350,138	1,087,526
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)					0
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii).					0
(3) Largest amount of support from an exempt organization					0
(4) Gross investment income					0

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).)
NONE

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.
NONE

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 e-mail address of the person to whom applications should be addressed:
Suzanneclair guard
551 5th avenue
new york, NY 10176
(212) 692-0191

b The form in which applications should be submitted and information and materials they should include:
EACH APPLICANT MUST SUBMIT A LETTER OF INQUIRY WHICH ADDRESSES THE 9 QUESTIONS PROVIDED ON THE WEBSITE.

c Any submission deadlines:
APPLICATION PROCESS CLOSSES WHEN A SUFFICIENT NUMBER OF APPLICATIONS HAVE BEEN RECEIVED FOR REVIEW.

d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors:
CRITERIA: PERMANENT RESIDENT OR US CITIZEN; COMPLETED ONE YEAR OF COLLEGE; MINIMUM GPA OF 3.0; UNDERGRADUATES CANNOT BE OVER 30 YEARS OF AGE WHEN THE SCHOLARSHIP IS FIRST RECEIVED; GRADUATE STUDENTS CANNOT BE OVER 40 YEARS OF AGE WHEN SCHOLARSHIP IS FIRST RECEIVED; NO AGE LIMIT FOR POST-DOCTORAL STUDIES; SCHOLARSHIPS ARE NOT AWARDED FOR A SECOND DEGREE AT THE SAME LEVEL OF DEGREE ALREADY ACHIEVED; APPLICANTS MUST HAVE FINANCIAL NEED; APPLICANTS MUST BE ENROLLED FULL TIME IN AN ACCREDITED DEGREE GRANTING INSTITUTION.

Part XV Supplementary Information (continued)**3 Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i> See Additional Data Table				
Total			▶ 3a	362,500
b <i>Approved for future payment</i>				
Total			▶ 3b	

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
Barbara Mclendon 950 Third Avenue 31st Floor New York, NY 10022	president 1.5	0	0	0
William L D Barrett 950 Third Avenue 31st Floor New York, NY 10022	Vice President 1.25	0	0	0
Kathryn Cashman 950 Third Avenue 31st Floor New York, NY 10022	Vice PResident 1.25	0	0	0
Linda B McKean 950 Third Avenue 31st Floor New York, NY 10022	Secretary 1.25	0	0	0
Frank C Poli 950 Third Avenue 31st Floor New York, NY 10022	Treasurer 1.0	0	0	0
Susan Brenner 950 Third Avenue 31st Floor New York, NY 10022	Trustee 1.0	0	0	0
emily crawford 950 Third Avenue 31st Floor New York, NY 10022	trustee 1.0	0	0	0
nancy grossman 950 Third Avenue 31st Floor New York, NY 10022	trustee 1.0	0	0	0
Mr Martin Tandler 950 Third Avenue 31st Floor New York, NY 10022	trustee 1.0	0	0	0
Dean Lewallen 950 Third Avenue 31st Floor New York, NY 10022	trustee 1.0	0	0	0
michele paige 950 Third Avenue 31st Floor New York, NY 10022	trustee 1.0	0	0	0
Mr James G Turino 950 Third Avenue 31st Floor New York, NY 10022	trustee 1.0	0	0	0
bruno quinson 950 Third Avenue 31st Floor New York, NY 10022	trustee 1.0	0	0	0
robert reder 950 Third Avenue 31st Floor New York, NY 10022	trustee 1.0	0	0	0
banning repplier 950 Third Avenue 31st Floor New York, NY 10022	trustee 1.0	0	0	0

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
Aquila Management Corporation 950 Third Avenue 31st Floor New York, NY 10022	Trustee 1.0	0	0	0
SUZANNECLAIR GUARD 950 Third Avenue 31st Floor New York, NY 10022	EXECUTIVE DIRECTOR 40.0	197,762	29,664	0

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>				
Ms Antara Afrin 221 Trowbridge Street NE Grand Rapids, MI 49503	none		scholarship	8,500
Ms Arianna Ahiagbe 1418 Dickinson Street Philadelphia, PA 19146	none		scholarship	9,000
Ms Alison Altemose 2303 Birch Court Warrington, PA 18976	none		scholarship	5,000
Total ▶ 3a				362,500

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>				
Mr Patrick Altemose 2303 Birch Court 1200 S Washington Street Robinson Warrington, PA 18976	none		scholarship	3,500
Ms Onycha Banton 14 East 96th Street Apartment 9G Brooklyn, NY 11212	none		scholarship	7,000
Mr Mike Berrios 159 S Lexington Avenue White Plains, NY 10601	none		scholarship	4,250
Total ▶ 3a				362,500

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>				
Ms Amanda C Biavati PO Box 32 Pine Island, NY 10969	none		scholarship	7,000
Ms Abbie G Bowman 1530 Wash Lever Road Little Mountain, SC 29075	none		scholarship	6,500
Ms Madison A Broers 1560 NE Brandi Way Pullman, WA 99163	none		scholarship	7,500
Total				362,500

▶ 3a

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>				
Mr Alexander Bujaj 25 Highland Avenue Apartment 2B Eastchester, NY 10709	none		scholarship	6,000
Ms Angela Bujaj 25 Highland Avenue Eastchester, NY 10709	none		scholarship	8,500
Ms Amanda Comisari 374 Raindance Street Thousand Oaks, CA 91360	none		scholarship	8,500
Total ▶ 3a				362,500

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>				
Mr Joseph Copeli 45 Stuart Street Boston, MA 02116	none		scholarship	9,000
Mr Jose Luis Cortez 6263 Garfield Street Chino, CA 91710	none		scholarship	9,000
Ms Jayla Crawford 711 Sandy Hill Road Glenside, PA 19038	none		scholarship	7,500
Total ▶ 3a				362,500

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>				
Ms Corinne A DeBellis 2400 Laurel Drive Cinnaminson, NJ 08077	none		scholarship	5,000
Ms Dora Duru 11438 Birch Street Unit 101 Lynwood, CA 90262	none		scholarship	8,500
Mr John T Hanson Jr PO Box 375 Botsford, CT 06404	none		scholarship	5,000
Total ▶ 3a				362,500

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>				
Ms Sarena Hayer 52 Valley Street Providence, RI 02909	none		scholarship	8,500
Ms Monica Hunter-Hart 507 West 139th Street New York, NY 10031	none		scholarship	8,500
Mr Jesse James Jamery 141 Maple Street Rochester, PA 15074	none		scholarship	5,000
Total ▶ 3a				362,500

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>				
Ms Alix Kashdan 2001 Barnwood Terrace Vienna, VA 22181	none		scholarship	8,000
Ms Christina Marie Kay 1902 Lochmore Drive Longmont, CO 80504	none		scholarship	8,500
Ms Jacqueline Schon Kegel 60 Ironwood Road Guilford, CT 06437	none		scholarship	8,500
Total ▶ 3a				362,500

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>				
Ms Anastasia Kinigopoulo 5407 Diana Drive Apartment 9 Wilmington, DE 19808	none		scholarship	8,500
Mr Colin Korst791 Jeffrey Court Apartment 235 Wheaton, IL 60189	none		scholarship	8,000
Ms Sarah Lamade488 Winthrop Street South Williamsport, PA 17702	none		scholarship	7,000
Total ▶ 3a				362,500

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>				
Ms Olivia Lane 4 Bartlett Street Apartment 9L Dover, NH 03820	none		scholarship	8,500
Mr Jesse Laniak 498 Orange Street New Haven, CT 06511	none		scholarship	8,000
Ms Sun Young Lim 11861 Bailey Street Garden Grove, CA 92845	none		scholarship	8,000
Total ▶ 3a				362,500

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>				
Ms Mary Catherine McCord 1301 Rittenhouse Street Apartment 4B Lynchburg, VA 24502	none		scholarship	2,800
Mr Noah R McNair PO Box 2674 Unit 2 Lakeland, FL 33806	none		scholarship	7,500
Mr Michael A McNamara 4540 East Via Los Caballos Apartment 2A Phoenix, AZ 85028	none		scholarship	8,500
Total			▶ 3a	362,500

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>				
Ms Laura McNulty 501 Clara Avenue St Louis, MO 63112	none		scholarship	8,500
Mr Llorenz Meliton 6052 N Claremont Avenue Apartment 1 Chicago, IL 60659	none		scholarship	3,700
Ms Margalit Mitzner 14 Wessex Road Newton, MA 02459	none		scholarship	2,000
Total ▶ 3a				362,500

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>				
Mr Sang Nguyen 14917 Ragus Street La Puente, CA 91744	none		scholarship	8,500
Ms Sarah Delphine Nocquet 126 St Marks Place New York, NY 10009	none		scholarship	8,500
Ms Oyesola Faith Popoola 2615 Dutch Grove Circle Raleigh, NC 27610	none		scholarship	5,000
Total ▶ 3a				362,500

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>				
Ms Ishani Premaratne 420 E 70th Street New York, NY 10021	none		scholarship	8,500
Mr John Dale Roney 5196 Newanga Avenue Santa Rosa, CA 95405	none		scholarship	3,500
Ms Deborah Rose 17 Lafayette Street West Orange, NJ 07052	none		scholarship	9,000
Total ▶ 3a				362,500

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>				
Mr Kevin Schneider 1029 Barton Road Ann Arbor, MI 48105	none		scholarship	8,500
Ms Molly Smith 900 Eastwood Drive Frankfort, IN 46041	none		scholarship	8,500
Ms Kaitlyn Sprague 3924 Wyoming Street St Louis, MO 63116	none		scholarship	8,500
Total ▶ 3a				362,500

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>				
Mr John Szigety 284 Franklin Turnpike Ridgewood, NJ 07450	none		scholarship	8,500
Ms Tereza Trieshi 45 Sherman Avenue Yonkers, NY 10705	none		scholarship	3,500
Mr Omit Shams Uddin 4059 Jefferson Drive Sterling Heights, MI 48310	none		scholarship	3,750
Total ▶ 3a				362,500

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>				
Mr Nicholas Vernice 166 New Hyde Park Road Garden City, NY 11530	none		scholarship	8,000
Ms Niki Vora8176 Gordon Green Buena Park, CA 90621	none		scholarship	8,500
Ms Alexandra Wilson157 N Lamon Chicago, IL 60644	none		scholarship	8,500
Total ▶ 3a				362,500

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

TY 2019 Depreciation Schedule

Name: Leopold Schepp Foundation

EIN: 13-5562353

TY 2019 Investments Corporate Bonds Schedule**Name:** Leopold Schepp Foundation**EIN:** 13-5562353**Investments Corporate Bonds Schedule**

Name of Bond	End of Year Book Value	End of Year Fair Market Value
BLACKROCK STRAT INCM	807,460	807,460
METROPOLITAN WEST TOTAL	1,305,277	1,305,277

TY 2019 Investments Corporate Stock Schedule**Name:** Leopold Schepp Foundation**EIN:** 13-5562353**Investments Corporation Stock Schedule**

Name of Stock	End of Year Book Value	End of Year Fair Market Value
BARON EMRG MKTS FD INST	310,610	310,610
BOSTON PARTNERS SMALL	255,432	255,432
DIAMOND HILL ALL CAP	597,939	597,939
DODGE & COX INTL STOCK	641,873	641,873
EATON VANCE ATLANTA CAP	281,550	281,550
MFS INSTL INTL EQUITY	698,694	698,694
MORGAN STANLEY GLOBAL	405,949	405,949
PRINCIPAL DIVERSIFIED	423,807	423,807
SCHWAB S&P 500 INDEX FD	2,562,215	2,562,215
TEMPLETON INST FOREIGN	230,791	230,791
VANGUARD TOTAL INTL STK	645,561	645,561

TY 2019 Investments - Other Schedule**Name:** Leopold Schepp Foundation**EIN:** 13-5562353**Investments Other Schedule 2**

Category/ Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value
AETOS CAPITAL MULTISTRATEGY	FMV	360,072	360,072
AETOS CAPITAL DISTRESSED INVES	FMV	228,534	228,534
AETOS CAPITAL LONG/SHORT STRAT	FMV	599,566	599,566

TY 2019 Other Decreases Schedule**Name:** Leopold Schepp Foundation**EIN:** 13-5562353

Description	Amount
UNREALIZED LOSSES	463,808

TY 2019 Other Expenses Schedule**Name:** Leopold Schepp Foundation**EIN:** 13-5562353**Other Expenses Schedule**

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
TELEPHONE, INTERNET	2,788	139		2,649
STATIONARY, PRINTING, POSTAGE	7,873			7,873
INSURANCE	3,566	713		2,853
COMMITTEE MEETINGS	812	406		406
CATERING	11,894			11,894
MISCELLANEOUS	4,785	239		4,546

TY 2019 Other Income Schedule**Name:** Leopold Schepp Foundation**EIN:** 13-5562353**Other Income Schedule**

Description	Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income
miscellaneous			

TY 2019 Other Liabilities Schedule**Name:** Leopold Schepp Foundation**EIN:** 13-5562353

Description	Beginning of Year - Book Value	End of Year - Book Value
DEFERRED RENT	157,705	156,110

TY 2019 Other Professional Fees Schedule**Name:** Leopold Schepp Foundation**EIN:** 13-5562353

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
PROFESSIONAL FEES	7,398			7,398
INVESTMENT MANAGEMENT FEES	52,392	52,392		

TY 2019 Taxes Schedule**Name:** Leopold Schepp Foundation**EIN:** 13-5562353

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
PAYROLL TAXES	24,858	3,026		21,832
EXCISE TAX	10,935			

Schedule B
(Form 990, 990-EZ,
or 990-PF)
Department of the Treasury
Internal Revenue Service

Schedule of Contributors
▶ Attach to Form 990, 990-EZ, or 990-PF.
▶ Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047
2019

Name of the organization
Leopold Schepp Foundation

Employer identification number
13-5562353

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

501(c)() (enter number) organization

4947(a)(1) nonexempt charitable trust **not** treated as a private foundation

527 political organization

Form 990-PF

501(c)(3) exempt private foundation

4947(a)(1) nonexempt charitable trust treated as a private foundation

501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.

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

General Rule

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

Special Rules

For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33¹/₃% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year ▶ \$ _____

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

Name of organization
Leopold Schepp Foundation

Employer identification number
13-5562353

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

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

Name of organization
Leopold Schepp Foundation

Employer identification number

13-5562353

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

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

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

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

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

Additional Data**Software ID:****Software Version:****EIN:** 13-5562353**Name:** Leopold Schepp Foundation

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

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	James Graham Johnston Foundation 4367 24th St San Francisco, CA 94114	\$ 25,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contribution.)
2	Herbert and Patricia Lessow Charita 40 EAST 88TH STREET NEW YORK, NY 10128	\$ 15,000	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contribution.)
3	Linda McKean 70 West River Road RUMSON, NJ 07760	\$ 10,317	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contribution.)
4	Raymond Fong MD 157 EAST 63RD STREET NEW YORK, NY 10065	\$ 10,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contribution.)
5	Bruno Quinson 1115 FIFTH AVENUE APT 14C NEW YORK, NY 10128	\$ 10,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contribution.)
6	Patricia Cornwell 71 Commercial Street Boston, MA 02109	\$ 10,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contribution.)

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

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7	Fidelity Charitable PO Box 770001 <hr/> Cincinnati, OH 45277	<hr/> \$ 10,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contribution.)
8	The GoGo Foundation 38 Fountain Square - 1090HC <hr/> Cincinnati, OH 45253	<hr/> \$ 6,500	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contribution.)
9	AllianceBernstein Matching Gift Pro PO BOX 3542 <hr/> Princeton, NJ 06543	<hr/> \$ 5,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contribution.)
10	Pfizer Foundation Matching Gift Pro 6111 W Plano Parkway Ste 1000YC <hr/> Plano, TX 75093	<hr/> \$ 5,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contribution.)
11	Ian Graham 720 Park Avenue <hr/> New York, NY 10021	<hr/> \$ 5,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contribution.)
12	Perry Henderson MD 5888 Schumann Drive <hr/> Madison, WI 53711	<hr/> \$ 5,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contribution.)

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

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>13</u>	<p>Nancy Grossman</p> <hr/> <p>160 West 66th Street APT 57C</p> <hr/> <p>NEW YORK, NY 10023</p>	<hr/> <p>\$ 5,000</p> <hr/>	<p>Person <input checked="" type="checkbox"/></p> <p>Payroll <input type="checkbox"/></p> <p>Noncash <input type="checkbox"/></p> <p>(Complete Part II for noncash contribution.)</p>