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**2020** 

OMB No. 1545-0052

## **Return of Private Foundation**

Department of the Treasury Internal Revenue Service

Form 990-PF

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 <u>www.irs.gov/Form990PF</u> for instructions and the latest information.

Open to Public Inspection

| or                                    | caler              | ndar year 2020, or tax year beginning 07-01-20   | )20 , aı              | nd ending 06-30-          | 2021   |                            |
|---------------------------------------|--------------------|--|-----------------------|---------------------------|--|----------------------------|
|                                       |                    | ındation<br>:ken Foundation Inc  |                       | A Employer id             | entification numbe                             | r                          |
|                                       | c Scriot           | inclini odnadam Inc  |                       | 13-6167181                |  |                            |
|                                       | ber and<br>D Box 2 | l street (or P.O. box number if mail is not delivered to street address)<br>80   | Room/suite            | <b>B</b> Telephone nu     | ımber (see instructior                         | ns)                        |
|                                       |                    |  |                       | (617) 947-8150            | )  |                            |
|                                       |                    | n, state or province, country, and ZIP or foreign postal code<br>RI 02806  |                       | <b>C</b> If exemption     | application is pending                         | g, check here              |
| G Cł                                  | neck al            | l that apply:   Initial return Initial return of a   | former public charity | <b>D 1.</b> Foreign or    | ganizations, check he                          | re                         |
|                                       |                    | ☐ Final return ☐ Amended return  |                       |                           | ganizations meeting                            |                            |
|                                       |                    | Address change Name change   |                       | ·                         | k here and attach cor                          | · _                        |
| 1 Ch                                  | neck ty            | pe of organization: $\square$ Section 501(c)(3) exempt private   | foundation            |                           | undation status was t<br>n 507(b)(1)(A), chec  |                            |
|                                       | Section            | 1 4947(a)(1) nonexempt charitable trust  Other taxabl  | e private foundation  |                           |  |                            |
| of '                                  | year (f            | xet value of all assets at end from Part II, col. (c),  ▶\$ 12,355,683  J Accounting method:  □ Other (specify) (Part I, column (d) must | Cash Accru            |                           | ation is in a 60-month<br>n 507(b)(1)(B), chec |                            |
| Pa                                    | rt I               | Analysis of Revenue and Expenses (The total  | (a) Revenue and       |                           |  | (d) Disbursements          |
|                                       |                    | of amounts in columns (b), (c), and (d) may not necessarily  | expenses per<br>books | (b) Net investment income | (c) Adjusted net income                        | for charitable<br>purposes |
|                                       |                    | equal the amounts in column (a) (see instructions).)   | BOOKS                 |                           |  | (cash basis only)          |
|                                       | 1                  | Contributions, gifts, grants, etc., received (attach schedule)   |                       |                           |  |                            |
|                                       | 2                  | Check ► ✓ if the foundation is <b>not</b> required to attach   |                       |                           |  |                            |
|                                       |                    | Sch. B   |                       |                           |  |                            |
|                                       | 3                  | Interest on savings and temporary cash investments   | 4,628                 |                           |  |                            |
|                                       | 4                  | Dividends and interest from securities   | 170,520               | 170,520                   |  |                            |
|                                       | 5a<br>b            | Net rental income or (loss)  |                       |                           |  |                            |
| e e                                   | 6a                 | Net gain or (loss) from sale of assets not on line 10  | 825,669               |                           |  |                            |
| Revenue                               | b                  | Gross sales price for all assets on line 6a  | ,                     |                           |  |                            |
| eve                                   |                    | 3,818,579  |                       |                           |  |                            |
| Œ                                     | 7                  | Capital gain net income (from Part IV, line 2)   |                       | 825,669                   |  |                            |
|                                       | 8                  | Net short-term capital gain  |                       |                           | 5,000  |                            |
|                                       | 10a                | Gross sales less returns and allowances  |                       |                           | 3,000  |                            |
|                                       | 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  | 1,000,817             | 1,000,817                 | 5,000  |                            |
|                                       | 13                 | Compensation of officers, directors, trustees, etc.  | 0                     | 0                         |  | (                          |
|                                       | 14                 | Other employee salaries and wages  |                       |                           |  |                            |
| es                                    | 15                 | Pension plans, employee benefits   |                       |                           |  |                            |
| ens                                   | 16a                | Legal fees (attach schedule)   | 339                   | 136                       |  | 203                        |
| ă<br>×                                | b                  | Accounting fees (attach schedule)  | 7,230                 | 2,892                     |  | 4,338                      |
| Je<br>F                               | С                  | Other professional fees (attach schedule)  | 139,279               | 97,323                    |  | 41,956                     |
| i<br>e                                | 17                 | Interest   | m.1 -:                |                           |  |                            |
| <u> </u>                              | 18                 | Taxes (attach schedule) (see instructions)   | 5,701                 | 12                        |  | 770                        |
| <u>=</u>                              | 19                 | Depreciation (attach schedule) and depletion   |                       |                           |  |                            |
| ΑG                                    | 20                 | Occupancy  |                       |                           |  |                            |
| ם                                     | 21                 | Travel, conferences, and meetings  |                       |                           |  |                            |
| 6<br>5                                | 23                 | Other expenses (attach schedule)   | 24,799                | 9,920                     |  | 14,879                     |
| Operating and Administrative Expenses | 24                 | Total operating and administrative expenses.   |                       | 1                         |  |                            |
| ě                                     | - '                | Add lines 13 through 23  | 177,348               | 110,283                   |  | 62,146                     |
| 5                                     | 25                 | Contributions, gifts, grants paid  | 609,500               |                           |  | 609,500                    |
|                                       | 26                 | Total expenses and disbursements. Add lines 24 and   |                       |                           |  |                            |
|                                       |                    | 25<br>Subtract line 26 form line 12  | 786,848               | 110,283                   |  | 671,646                    |
|                                       | 27                 | Subtract line 26 from line 12:  Excess of revenue over expenses and  |                       |                           |  |                            |
|                                       | a                  | disbursements  | 213,969               |                           |  |                            |
|                                       | b                  | Net investment income (if negative, enter -0-)   |                       | 890,534                   |  |                            |
|                                       | С                  | Adjusted net income (if negative, enter -0-)   |                       |                           | 5,000  |                            |

Page 2

12.355.683

|        | 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 ▶                             |           |                  |           |
| ţ      | 8   | Inventories for sale or use   |           |                  |           |
| Assets | 9   | Prepaid expenses and deferred charges                               |           |                  |           |
| As     | 10a | Investments—U.S. and state government obligations (attach schedule) | 383,996   | <b>9</b> 463,197 | 478,528   |
|        | b   | Investments—corporate stock (attach schedule)                       | 1,735,386 | 1,284,683        | 2,687,567 |
|        | C   | Investments—corporate bonds (attach schedule)                       | 1,565,816 | 1,726,447        | 1,777,365 |
|        | 11  | Investments—land, buildings, and equipment: basis ▶                 |           |                  |           |
|        |     | Less: accumulated depreciation (attach schedule) ▶                  |           |                  |           |
|        | 12  | Investments—mortgage loans  |           |                  |           |
|        | 13  | Investments—other (attach schedule)                                 | 4,608,203 | 5,236,056        | 7,084,187 |
|        | 14  | Land, buildings, and equipment: basis ▶                             |           |                  |           |
|        |     | Less: accumulated depreciation (attach schedule) ▶                  |           |                  |           |

8,819,450

8,819,450

8,819,450

8,819,450

9,038,419

9,038,419

9,038,419

9,038,419

8,819,450

9,038,419

9,038,419

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213,969

5,000

1

2

3

4

5

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15 16

17

18

19

20

21

22

23

24 25

26

27

28

29

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Part III

2

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Liabilities

Net Assets or Fund Balances

Form 990-PF (2020)

Accounts receivable ▶

Other assets (describe -

Other liabilities (describe -\_

Grants payable

instructions. Also, see page 1, item I)

Accounts payable and accrued expenses .

and complete lines 24, 25, 29 and 30. Net assets without donor restrictions . .

Net assets with donor restrictions . .

and complete lines 26 through 30.

of-year figure reported on prior year's return)

Add lines 1, 2, and 3 . . . . . . .

Decreases not included in line 2 (itemize) ▶

Other increases not included in line 2 (itemize)

Enter amount from Part I, line 27a

Total assets (to be completed by all filers—see the

Foundations that follow FASB ASC 958, check here

Loans from officers, directors, trustees, and other disqualified persons

Mortgages and other notes payable (attach schedule). . . . . .

Total liabilities(add lines 17 through 22) . . . . . . . . .

Foundations that do not follow FASB ASC 958, check here 🕨 🗹

Retained earnings, accumulated income, endowment, or other funds

Total net assets or fund balances (see instructions) . . . . .

Total liabilities and net assets/fund balances (see instructions) .

Analysis of Changes in Net Assets or Fund Balances

Total net assets or fund balances at beginning of year—Part II, column (a), line 29 (must agree with end-

Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 29

Paid-in or capital surplus, or land, bldg., and equipment fund

Less: allowance for doubtful accounts ▶

3

|                                   | pe the kind(s) of property sold (e.g.,<br>arehouse; or common stock, 200 sha                            |                         | (b) How acquired P—Purchase D—Donation      | (c) Date acquired (mo., day, yr.)  | (d)<br>Date sold<br>(mo., day, yr.)                      |
|-----------------------------------|---|-------------------------|---|------------------------------------|--|
| <b>1a</b> See Additional Data Tab | le  |                         |   |                                    |  |
| b                                 |   |                         |   |                                    |  |
| c                                 |   |                         |   |                                    |  |
| d                                 |   |                         |   |                                    |  |
| e                                 |   |                         |   |                                    |  |
| <b>(e)</b><br>Gross sales price   | <b>(f)</b><br>Depreciation allowed<br>(or allowable)  | Cost or                 | (g)<br>other basis<br>ense of sale          | Gain o                             | <b>h)</b><br>r (loss)<br>) minus (g)                     |
| a See Additional Data Tab         | le  |                         |   |                                    |  |
| b                                 |   |                         |   |                                    |  |
| c                                 |   |                         |   |                                    |  |
| d                                 |   |                         |   |                                    |  |
| e                                 |   |                         |   |                                    |  |
|                                   | ·   |                         |   | •                                  |  |
| Complete only for assets          | s showing gain in column (h) and ow   | ned by the foundation o | on 12/31/69                                 |                                    | 1)   |
| (i)<br>F.M.V. as of 12/31/69      | (j)   | Excess                  | ( <b>k)</b><br>of col. (i)<br>. (j), if any | Gains (Col. (<br>col. (k), but not | h) gain minus<br>less than -0-) <b>or</b><br>om col.(h)) |
| a See Additional Data Tab         |   |                         |   |                                    |  |
| b                                 |   |                         |   |                                    |  |
| c                                 |   |                         |   |                                    |  |
| d                                 |   |                         |   |                                    |  |
| e                                 |   |                         |   |                                    |  |
|                                   |   |                         |   | 1                                  |  |
| If gain, also enter in Pa         | e or (net capital loss)  gain or (loss) as defined in sections art I, line 8, column (c) (see instructi |                         | Part I, line 7                              | 2                                  | 825,669  |
| in Part I, line 8                 |   |                         | }   | 3                                  |  |
| Part V Qualification              | Under Section 4940(e) for Re  | educed Tax on Net       | Investment In                               | come                               |  |
| SECTION 4940(e) REPEA             | ALED ON DECEMBER 20, 2019   | - DO NOT COMPLI         | ETE   |                                    |  |
| 1 Reserved                        |   |                         |   |                                    |  |
| (a)<br>Reserved                   | (b)<br>Reserved   | (c)<br>Reserved         |   | <b>(d)</b><br>Reserved             |  |
|                                   |   |                         |   |                                    |  |
|                                   |   |                         |   |                                    |  |
|                                   |   |                         |   |                                    |  |
|                                   |   |                         |   |                                    |  |
| 2 Reserved                        |   |                         | 2   |                                    |  |
|                                   |   |                         | -   | <del> </del>                       |  |
|                                   |   |                         | <u> </u>                                    | 1                                  |  |
|                                   |   |                         | <u> </u>                                    | <u> </u>                           |  |
|                                   |   |                         | <u> </u>                                    |                                    |  |
| <b>6</b> Reserved                 |   |                         | 6   | <u>[</u>                           |  |
| <b>7</b> Reserved                 |   |                         | 7   |                                    |  |
| <b>8</b> Reserved ,               |   |                         | 8   |                                    |  |
|                                   |   |                         |   |                                    |  |

|      |   |  |                                      |  |               |                 | <u>'</u> | age v    |
|------|---|--|--------------------------------------|--|---------------|-----------------|----------|----------|
| Par  |   | ling Activities for Which                  | Form 4720 May Be                     | Required (continued                            | 1)            |                 |          |          |
| ia   | During the year did the foundation      |  |                                      |  |               |                 | Yes      | No       |
|      | (1) Carry on propaganda, or otherv      | vise attempt to influence legisl           | ation (section 4945(e))?             | Yes  | ✓ No          | ,               |          |          |
|      | (2) Influence the outcome of any s      | pecific public election (see sec           | tion 4955); or to carry              |  |               |                 |          |          |
|      | on, directly or indirectly, any vo      | ter registration drive?                    |                                      | · · · Yes                                      | ✓ No          | ,               |          |          |
|      | (3) Provide a grant to an individual    | for travel, study, or other sim            | ilar purposes?                       |  | ✓ No          |                 |          |          |
|      | (4) Provide a grant to an organization  | ion other than a charitable, etc           | c., organization described           |  |               |                 |          |          |
|      | in section 4945(d)(4)(A)? See i         | nstructions                                |                                      | · · 🗌 Yes                                      | ✓ No          | ,               |          |          |
|      | (5) Provide for any purpose other t     | han religious, charitable, scien           | tific, literary, or                  |  |               |                 |          |          |
|      | educational purposes, or for the        | prevention of cruelty to child             | ren or animals?                      | · ·  | ✓ N           |                 |          |          |
| b    | If any answer is "Yes" to $5a(1)-(5)$ , | did <b>any</b> of the transactions fa      | ail to qualify under the ex          | ceptions described in                          |               | <b>´</b>        |          |          |
|      | Regulations section 53.4945 or in a     | current notice regarding disas             | ter assistance? See instr            | ructions                                       |               | 5b              |          |          |
|      | Organizations relying on a current r    | otice regarding disaster assist            | ance check here                      |  |               |                 |          |          |
| C    | If the answer is "Yes" to question 5    | a(4), does the foundation clair            | n exemption from the                 |  |               |                 |          |          |
|      | tax because it maintained expenditu     | ure responsibility for the grant           | ?                                    | · · 🔲 Yes                                      | □ No          |                 |          |          |
|      | If "Yes," attach the statement requi    | red by Regulations section 53.             | 4945-5(d).                           | □ 1es  |               | '               |          |          |
| a    | Did the foundation, during the year,    | , receive any funds, directly or           | indirectly, to pay premi             | ums on   |               |                 |          |          |
|      |   |  |                                      |  |               |                 |          |          |
| b    | Did the foundation, during the year,    | , pay premiums, directly or inc            | lirectly, on a personal be           |  | . <b>✓</b> No | 6b              |          | No       |
|      | If "Yes" to 6b, file Form 8870.         | , , ,                                      | ,, 1                                 |  |               |                 |          |          |
| 'a   | At any time during the tax year, wa     | s the foundation a party to a r            | prohibited tax shelter tra           | nsaction?                                      |               |                 |          |          |
|      | If "Yes", did the foundation receive    |  |                                      | ∟ res  | ✓ No          | 7b              |          |          |
|      | Is the foundation subject to the sec    |  |                                      |  | •             | 1.5             |          |          |
|      | excess parachute payment during the     | , , , ,                                    |                                      |  |               |                 |          |          |
|      |   | <u> </u>                                   |                                      |  | ✓ No          |                 | <u> </u> | <u> </u> |
| Par  | and Contractors                         | Officers, Directors, Trust                 | tees, Foundation Ma                  | anagers, Hignly Paid                           | I Emp         | ioyees,         |          |          |
|      |   |  |                                      |  |               |                 |          |          |
| 1    | List all officers, directors, truste    |  |                                      |  |               |                 |          |          |
|      | (a) Name and address                    | (b) Title, and average hours per week      | (c) Compensation (If not paid, enter | (d) Contributions to<br>employee benefit plans |               | <b>e)</b> Expen |          |          |
|      | . ,                                     | devoted to position                        | · -0-)                               | deferred compensatio                           |               | other al        | llowand  | ces      |
| ee A | Additional Data Table                   |  |                                      |  |               |                 |          |          |
|      |   | ]  |                                      |  |               |                 |          |          |
|      |   |  |                                      |  |               |                 |          |          |
|      |   | 1  |                                      |  |               |                 |          |          |
|      |   |  |                                      |  |               |                 |          |          |
|      |   | 1  |                                      |  |               |                 |          |          |
|      |   |  |                                      |  |               |                 |          |          |
|      |   | 1  |                                      |  |               |                 |          |          |
| 2    | Compensation of five highest-pa         | id employees (other than t                 | hose included on line :              | 1—see instructions). If                        | none,         | enter "         | NONE     | ."       |
|      |   |  |                                      | (d) Contributions to                           |               |                 |          |          |
| a) [ | Name and address of each employee       | paid (b) Title, and average hours per week | (c) Compensation                     | employee benefit                               |               | ) Expens        |          |          |
|      | more than \$50,000                      | devoted to position                        | (c) compensation                     | plans and deferred compensation                |               | other all       | owanc    | es       |
| ONE  | =                                       |  |                                      | Compensation                                   |               |                 |          |          |
| ONE  | =                                       |  |                                      |  |               |                 |          |          |
|      |   |  |                                      |  |               |                 |          |          |
|      |   |  |                                      |  |               |                 |          |          |
|      |   |  |                                      |  |               |                 |          |          |
|      |   |  |                                      |  |               |                 |          |          |
|      |   |  |                                      |  |               |                 |          |          |
|      |   |  |                                      |  |               |                 |          |          |
|      |   |  |                                      |  |               |                 |          |          |
|      |   |  |                                      |  |               |                 |          |          |
|      |   |  |                                      |  |               |                 |          |          |
| ota  | I number of other employees paid ov     | er \$50,000 <b></b>                        | <del></del>                          |  |               |                 |          | - (      |
|      |   |  |                                      |  |               | orm <b>99</b> 0 | N-DE     | (2020    |

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|---|--|---------------------------|
| Part VIII Information About Officers, Directors, Trus and Contractors (continued)   | stees, Foundation Managers, Highly Paid          | d Employees,              |
| 3 Five highest-paid independent contractors for professiona   | l services (see instructions). If none, enter "I | NONE".                    |
| (a) Name and address of each person paid more than \$50,000   | (b) Type of service                              | (c) Compensation          |
| Lilli Stern   | Professional grant administration                | 63,927                    |
| 141 Hadkalim Street<br>Pardes Hanna 37021<br>IS   |  |                           |
|   |  |                           |
| <b>Total</b> number of others receiving over \$50,000 for professional service  | es   | 0                         |
| Part IX-A Summary of Direct Charitable Activities   |  |                           |
| List the foundation's four largest direct charitable activities during the tax year. Incorganizations and other beneficiaries served, conferences convened, research pape   |  | Expenses                  |
| 2   |  |                           |
| 3   |  |                           |
| 4   |  | _                         |
| Part IX-B Summary of Program-Related Investments  | s (see instructions)                             |                           |
| Describe the two largest program-related investments made by the foundation $\begin{tabular}{ll} \bf 1 & & \\ \hline \\ \hline$ | during the tax year on lines 1 and 2.            | Amount                    |
| 2   |  |                           |
| All other program-related investments. See instructions.  |  |                           |
|   |  |                           |
| Total. Add lines 1 through 3  |  | Form <b>990-PF</b> (2020) |

5

6

7

1a

1b

2

3a 3b

4

5

562.159

562.159

671,646

671,646

671,646

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Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1. . .

Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26. . . . . . . . . . . .

Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4

income. Enter 1% of Part I, line 27b. See instructions.

Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for

Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:

Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,

Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment

Qualifying Distributions (see instructions)

Amounts set aside for specific charitable projects that satisfy the:

the section 4940(e) reduction of tax in those years.

5

6

1

2

3

4

5

b

Part XII

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562,159

562,159

Form **990-PF** (2020)

| Forn | n 990-PF (20 | 020)                                      |         |
|------|--------------|---|---------|
| P    | art XIII     | Undistributed Income (see instruc         | ctions) |
|      |              |   |         |
| 1    | Distributab  | le amount for 2020 from Part XI, line 7   |         |
| 2    |              | ed income, if any, as of the end of 2020: |         |

- ount for 2020 from Part XI, line 7 come, if any, as of the end of 2020: Enter amount for 2019 only. . . . . .
- Excess distributions carryover, if any, to 2020: From 2015. . . . .
- **b** From 2016. . . . .
- c From 2017. . .

c Treated as distributions out of corpus (Election required—see instructions). . . . . . . . . .

**5** Excess distributions carryover applied to 2020. (If an amount appears in column (d), the

a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5

applied on line 5 or line 7 (see instructions) . . .

Subtract lines 7 and 8 from line 6a . . . .

9 Excess distributions carryover to 2021.

10 Analysis of line 9: a Excess from 2016. . .

**b** Excess from 2017. .

c Excess from 2018. . . . d Excess from 2019. . . e Excess from 2020. . .

6 Enter the net total of each column as

**b** Prior years' undistributed income. Subtract 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 2019. Subtract line 4a from line 2a. Taxable amount—see instructions . . . . . . . . f Undistributed income for 2021. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2020 . . . . . . 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 2015 not

indicated below:

**d** Applied to 2020 distributable amount. . . . e Remaining amount distributed out of corpus

same amount must be shown in column (a).)

- 231.086 d From 2018. . . . .
- 101 879 100.028 e From 2019. . . . . f Total of lines 3a through e. . . . . . . . 4 Qualifying distributions for 2020 from Part
  - XII, line 4: ▶ \$
- a Applied to 2019, but not more than line 2a
- **b** Applied to undistributed income of prior years
  - (Election required—see instructions). . . . .

59,721

- 492.714

(a)

Corpus

109.487

602,201

231.086

371,115

59.721 101,879

100.028

109.487

(b)

Years prior to 2019

(c)

2019

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

c Any submission deadlines:

factors:

|  |  | _ |
|--|--|---|

| Form 990-PF (2020)  |   | -                       |                     | Page <b>11</b> |
|---|---|-------------------------|---------------------|----------------|
| Part XV Supplementary Informa                                     | ition (continued)                                       |                         |                     |                |
| 3 Grants and Contributions Paid                                   | d During the Year or Appro                              | oved for Futur          | e Payment           |                |
| Recipient   | If recipient is an individual, show any relationship to | Foundation<br>status of | Purpose of grant or | Amount         |
| Name and address (home or business)                               | any foundation manager or substantial contributor       | recipient               | contribution        | Amount         |
| <b>a</b> <i>Paid during the year</i><br>See Additional Data Table |   |                         |                     |                |
| Total   |   |                         | ▶ 3a                | 609,500        |
| <b>b</b> Approved for future payment                              |   |                         |                     |                |
|   |   |                         |                     |                |
|   |   | 1                       |                     |                |
|   |   | 1                       |                     |                |
|   |   | 1                       |                     |                |
|   |   | 1                       |                     |                |
| Total   |   |                         | ▶ 3b                | 0              |

|                                      |   | Activities           |                      |                       |                      | ı                                     |
|--------------------------------------|---|----------------------|----------------------|-----------------------|----------------------|---------------------------------------|
| Enter gross                          | amounts unless otherwise indicated.   |                      | usiness income       |                       | n 512, 513, or 514   | (e) Related or exempt function income |
| <b>1</b> Progran                     | n service revenue:  | (a)<br>Business code | <b>(b)</b><br>Amount | (c)<br>Exclusion code | <b>(d)</b><br>Amount | (See instructions.)                   |
|                                      |   |                      |                      |                       |                      |                                       |
|                                      |   |                      |                      |                       |                      |                                       |
|                                      |   |                      |                      |                       |                      |                                       |
|                                      |   |                      |                      |                       |                      |                                       |
|                                      | and contracts from government agencies  |                      |                      |                       |                      |                                       |
|                                      | ership dues and assessments   |                      |                      |                       |                      |                                       |
| 3 Interes                            | t on savings and temporary cash   |                      |                      | 14                    | 4,628                |                                       |
| 4 Divider                            | nds and interest from securities  |                      |                      | 14                    | 170,520              |                                       |
|                                      | ntal income or (loss) from real estate:   |                      |                      |                       |                      |                                       |
|                                      | financed property   |                      |                      |                       |                      |                                       |
| 6 Net rer                            | ntal income or (loss) from personal property  |                      |                      |                       |                      |                                       |
|                                      | nvestment income  |                      |                      |                       |                      |                                       |
| invento                              |   |                      |                      | 18                    | 825,669              |                                       |
|                                      | ome or (loss) from special events:  |                      |                      |                       |                      |                                       |
| <b>10</b> Gross  <br><b>11</b> Other | profit or (loss) from sales of inventory revenue: a   |                      |                      |                       |                      |                                       |
|                                      |   |                      |                      |                       |                      |                                       |
|                                      | <u> </u>  |                      |                      |                       |                      |                                       |
|                                      |   |                      |                      |                       |                      |                                       |
|                                      | al. Add columns (b), (d), and (e).  |                      | 0                    |                       | 1,000,817            | 0                                     |
|                                      | Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu           |                      |                      | 1                     | .3                   | 1,000,817                             |
|                                      |   |                      |                      |                       |                      |                                       |
| Part XV                              | Relationship of Activities to th  | e Accomplisi         |                      |                       | utad impartantly to  |                                       |
| Part XV. Line No. ▼                  | Explain below how each activity for which the accomplishment of the foundation's exinstructions.) | e Accomplisi         | ed in column (e) of  | F Part XVI-A contrib  |                      |                                       |
| Line No.                             | Explain below how each activity for which the accomplishment of the foundation's ex               | e Accomplisi         | ed in column (e) of  | F Part XVI-A contrib  |                      |                                       |
| Line No.                             | Explain below how each activity for which the accomplishment of the foundation's ex               | e Accomplisi         | ed in column (e) of  | F Part XVI-A contrib  |                      |                                       |
| Line No.                             | Explain below how each activity for which the accomplishment of the foundation's ex               | e Accomplisi         | ed in column (e) of  | F Part XVI-A contrib  |                      |                                       |
| Line No.                             | Explain below how each activity for which the accomplishment of the foundation's ex               | e Accomplisi         | ed in column (e) of  | F Part XVI-A contrib  |                      |                                       |
| Line No.                             | Explain below how each activity for which the accomplishment of the foundation's ex               | e Accomplisi         | ed in column (e) of  | F Part XVI-A contrib  |                      |                                       |
| Line No.                             | Explain below how each activity for which the accomplishment of the foundation's ex               | e Accomplisi         | ed in column (e) of  | F Part XVI-A contrib  |                      |                                       |
| Line No.                             | Explain below how each activity for which the accomplishment of the foundation's ex               | e Accomplisi         | ed in column (e) of  | F Part XVI-A contrib  |                      |                                       |
| Line No.                             | Explain below how each activity for which the accomplishment of the foundation's ex               | e Accomplisi         | ed in column (e) of  | F Part XVI-A contrib  |                      |                                       |
| Line No.                             | Explain below how each activity for which the accomplishment of the foundation's ex               | e Accomplisi         | ed in column (e) of  | F Part XVI-A contrib  |                      |                                       |
| Line No.                             | Explain below how each activity for which the accomplishment of the foundation's ex               | e Accomplisi         | ed in column (e) of  | F Part XVI-A contrib  |                      |                                       |
| Line No.                             | Explain below how each activity for which the accomplishment of the foundation's ex               | e Accomplisi         | ed in column (e) of  | F Part XVI-A contrib  |                      |                                       |
| Line No.                             | Explain below how each activity for which the accomplishment of the foundation's ex               | e Accomplisi         | ed in column (e) of  | F Part XVI-A contrib  |                      |                                       |
| Line No.                             | Explain below how each activity for which the accomplishment of the foundation's ex               | e Accomplisi         | ed in column (e) of  | F Part XVI-A contrib  |                      |                                       |
| Line No.                             | Explain below how each activity for which the accomplishment of the foundation's ex               | e Accomplisi         | ed in column (e) of  | F Part XVI-A contrib  |                      |                                       |
| Line No.                             | Explain below how each activity for which the accomplishment of the foundation's ex               | e Accomplisi         | ed in column (e) of  | F Part XVI-A contrib  |                      |                                       |
| Line No.                             | Explain below how each activity for which the accomplishment of the foundation's ex               | e Accomplisi         | ed in column (e) of  | F Part XVI-A contrib  |                      |                                       |
| Line No.                             | Explain below how each activity for which the accomplishment of the foundation's ex               | e Accomplisi         | ed in column (e) of  | F Part XVI-A contrib  |                      |                                       |
| Line No.                             | Explain below how each activity for which the accomplishment of the foundation's ex               | e Accomplisi         | ed in column (e) of  | F Part XVI-A contrib  |                      |                                       |

| orm        | 1 990-PF          | ` '  |                                |        |                   |                     |                |              |                                |  | Pa     | ge <b>13</b> |
|------------|-------------------|--|--------------------------------|--------|-------------------|---------------------|----------------|--------------|--------------------------------|--|--------|--------------|
|            | rt XVII           | Exempt Organi  | zations                        |        |                   |                     |                |              | nships With Nond               |  |        |              |
|            |                   | ganization directly or ir<br>than section 501(c)(3)                              |                                |        |                   |                     |                |              |                                | 501  | Yes    | No           |
| а          | Transfers         | from the reporting four  | dation to a n                  | oncha  | ritable exe       | mpt organization    | n of:          |              |                                |  |        |              |
| (          | ( <b>1)</b> Cash  |  |                                |        |                   |                     |                |              |                                | 1a(1)                                      |        | No           |
| (          | ( <b>2)</b> Othe  | rassets  |                                |        |                   |                     |                |              |                                | . 1a(2)                                    |        | No           |
| b          | Other tran        | nsactions:   |                                |        |                   |                     |                |              |                                |  |        |              |
| (          | ( <b>1)</b> Sales | s of assets to a nonchar   | itable exempt                  | orga   | nization <b>.</b> |                     |                |              |                                | . 1b(1)                                    |        | No           |
| (          | ( <b>2)</b> Purcl | hases of assets from a r   | noncharitable                  | exem   | pt organiza       | ation               |                |              |                                | . 1b(2)                                    |        | No           |
| (          | ( <b>3)</b> Rent  | al of facilities, equipme  | nt, or other as                | sets.  |                   |                     |                |              |                                | . 1b(3)                                    |        | No           |
| (          | ( <b>4)</b> Reim  | bursement arrangemer   | its                            |        |                   |                     |                |              |                                | 1b(4)                                      |        | No           |
|            |                   | s or loan guarantees.  |                                |        |                   |                     |                |              |                                | . 1b(5)                                    |        | No           |
|            |                   | rmance of services or m  | •                              |        | _                 |                     |                |              |                                | 1b(6)                                      |        | No           |
|            | -                 | f facilities, equipment, r   |                                |        |                   |                     |                |              |                                |  |        | No           |
| c          | of the goo        | wer to any of the above<br>ods, other assets, or ser<br>nsaction or sharing arra | vices given b                  | y the  | reporting f       | oundation. If the   | e foundatio    | n receive    | ed less than fair marke        | et value                                   |        |              |
| (a) l      | ine No.           | (b) Amount involved  | (c) Name of                    | noncha | aritable exen     | npt organization    | <b>(d)</b> Des | scription of | transfers, transactions, a     | nd sharing arra                            | ngemen | its          |
|            |                   |  |                                |        |                   |                     |                |              |                                |  |        |              |
|            |                   |  |                                |        |                   |                     |                |              |                                |  |        |              |
|            |                   |  |                                |        |                   |                     |                |              |                                |  |        |              |
|            |                   |  |                                |        |                   |                     |                |              |                                |  |        |              |
|            |                   |  |                                |        |                   |                     |                |              |                                |  |        |              |
|            |                   |  |                                |        |                   |                     |                |              |                                |  |        |              |
|            |                   |  |                                |        |                   |                     |                |              |                                |  |        |              |
|            |                   |  |                                |        |                   |                     |                |              |                                |  |        |              |
|            |                   |  |                                |        |                   |                     |                |              |                                |  |        |              |
|            |                   |  |                                |        |                   |                     |                |              |                                |  |        |              |
|            |                   |  |                                |        |                   |                     |                |              |                                |  |        |              |
|            |                   |  |                                |        |                   |                     |                |              |                                |  |        |              |
|            |                   |  |                                |        |                   |                     |                |              |                                |  |        |              |
|            |                   | ndation directly or indir  | •                              |        | '                 | •                   |                |              | _                              |  |        |              |
|            |                   | in section 501(c) (othe  |                                | 501(   | c)(3)) or ii      | n section 527? .    |                |              | Ц Yes                          | ✓ No                                       |        |              |
| b I        | f "Yes," c        | complete the following s   |                                |        |                   |                     |                |              |                                |  |        |              |
|            |                   | (a) Name of organization   | on                             |        | (b                | ) Type of organizat | ion            | 1            | (c) Description o              | f relationship                             |        |              |
|            |                   |  |                                |        |                   |                     |                |              |                                |  |        |              |
|            |                   |  |                                |        |                   |                     |                |              |                                |  |        |              |
|            |                   |  |                                |        |                   |                     |                |              |                                |  |        |              |
|            |                   |  |                                |        |                   |                     |                |              |                                |  |        |              |
|            | of m              | er penalties of perjury,<br>ny knowledge and beliet<br>ch preparer has any kno   | , it is true, co               |        |                   |                     |                |              |                                |  |        |              |
| Sig<br>He  |                   | *****  |                                |        |                   | 2021-10-20          |                | *****        |                                | May the IRS di<br>return<br>with the prepa |        |              |
|            |                   | Signature of officer or t  | rustee                         |        |                   | Date                | 7.             | Title        |                                | below<br>(see instr.)                      | Yes [  | □No          |
|            | 1                 | Print/Type preparer's  | name                           | Prepa  | arer's Sign       | ature               | Date           |              |                                | IN   |        |              |
|            |                   | Olesya Kurnosova   |                                |        |                   |                     | 2021           | -10-20       | Check if self-<br>employed ▶ □ | P00567                                     | 7869   |              |
| Pai<br>Pr€ | id<br>eparer      |  | gwick & Comp                   | any.   |                   |                     |                |              |                                |  |        |              |
|            | e Only            | <i>'</i>   |                                |        | ward Coit-        | 500                 |                |              | Fi                             | rm's EIN ▶95                               | -40514 | 110          |
|            |                   |  | .601 Wilshire<br>s Angeles, CA |        |                   | 500                 |                |              | Pt                             | none no. (310                              | ) 395- | 8655         |
|            |                   |  |                                |        |                   | 1                   |                |              |                                |  |        |              |

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d List and describe the kind(s) of property sold (e.g., real estate, (d) (b) (c) How acquired (a) 2-story brick warehouse; or common stock, 200 shs. MLC Co.) Date acquired Date sold P-Purchase (mo., day, yr.) (mo., day, yr.) D-Donation Р 2015-01-01 2020-12-31 Fidelity Investment (656-372541)-sales of publicly traded securities Uniform MBS Pool Ρ 2015-01-01 2020-08-11 General Motors Finl Co Inc Note Р 2016-01-01 2020-08-12 Ρ 2019-06-30 2020-12-03 Waste Management Inc Del Note State Pub Sch Bldg Auth Pa Rev Ρ 2019-06-30 2021-01-15 Ρ CVS Health Corp Note 2019-06-30 2021-03-09 Ρ International Bank for Rec&Dev 2019-06-30 2021-03-09 Р Manulife Finl Corp Note 2021-01-31 2021-03-15 International Bank for Rec&Dev Ρ 2019-07-01 2021-03-17 Ρ 2021-01-31 2021-03-18 Cigna Corp New Ser B Note Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h (e) Gross sales price Depreciation allowed Cost or other basis Gain or (loss) (f) (or allowable) (g) plus expense of sale (h) (e) plus (f) minus (g) 2,362,090 1,742,520 619,570 43,488 42,452 1,036 28,391 28,283 108 25,000 25.105 -105 60,880 52,970 7,910 27,000 0 27,000 45,000 44,227 773 16,553 16,426 127 15,463 14,516 947 11,845 11,730 115 Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - I Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 Gains (Col. (h) gain minus col. (k), but not less than -0-) or (i) F.M.V. as of 12/31/69 Adjusted basis Excess of col. (i) **(I)** Losses (from col.(h)) (j) as of 12/31/69 (k) over col. (j), if any 619,570 1,036 108 -105 7,910 0 773 127 947 115

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d List and describe the kind(s) of property sold (e.g., real estate, (d) (b) (c) (a) 2-story brick warehouse; or common stock, 200 shs. MLC Co.) How acquired Date acquired Date sold P-Purchase (mo., day, yr.) (mo., day, yr.) D-Donation Ρ 2019-07-01 2021-04-23 US Bancorp Mtn Parnassus Mid Cap Advisor Directed-451.354 shares Ρ 2019-07-01 2020-12-16 PAX MSCI EAFE ESG Leaders Index Instl-3,000 shares Р 2019-06-30 2020-12-16 PAX World Small Cap Fund Instl-1,115.242 shares Ρ 2019-06-30 2020-12-16 RBC Emerging Markets Equity Fd-1,256.106 shares Ρ 2019-06-30 2020-12-16 Ρ Ishares Tr MSCI KLD400 Soc-500 shares 2019-06-30 2020-12-17 Ρ Nushares ETF Tr Nuveen Esg Mmlcp-394 shares 2019-06-30 2020-12-17 Р Templeton Global Bond Advisor-22,912.222 shares 2019-06-30 2021-01-20 Ρ Vanguard Short Term Federal Admiral Fund-9,074.41 shares 2018-01-01 2021-02-02 Ρ 2018-01-01 2021-03-29 PAX MSCI EAFE ESG Leaders Index Instl-1,335.878 shares Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h (e) Gross sales price Depreciation allowed Cost or other basis Gain or (loss) (f) (or allowable) (g) plus expense of sale (h) (e) plus (f) minus (g) 25.000 25.041 -41 18,000 14,355 3,645 29,980 23,126 6,854 17,980 14.957 3,023 18,000 13,812 4,188 17,488 17,519 35,007 14,966 11,072 3,894 221,770 267,537 -45,767 99,980 98,278 1,702 13,980 10,298 3,682 Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - I Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 Gains (Col. (h) gain minus col. (k), but not less than -0-) or (i) F.M.V. as of 12/31/69 Adjusted basis Excess of col. (i) **(I)** Losses (from col.(h)) (j) as of 12/31/69 (k) over col. (j), if any -41 3,645 6,854 3,023 4,188 17,519 3,894 -45,767 1,702 3,682

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d List and describe the kind(s) of property sold (e.g., real estate, (d) (b) (c) How acquired (a) 2-story brick warehouse; or common stock, 200 shs. MLC Co.) Date acquired Date sold P-Purchase (mo., day, yr.) (mo., day, yr.) D-Donation Ρ 2018-06-30 PAX World Small GLB Envir Markets Instl Fund-806.813 shares 2021-03-29 Ishares Tr MSCI KLD400 Soc-970 shares Ρ 2018-06-30 2021-03-30 Nushares ETF Tr Nuveen Esg Mmlcp-235 shares Р 2018-06-30 2021-03-30 Parnassus Mid Cap Fd Institutional-560.79 shares Р 2018-06-30 2021-06-15 PAX Intl Sustainable Economy Instl Fund-2,880.288 shares Ρ 2018-06-30 2021-06-15 Ρ PAX World Small Cap Fund Instl-805.234 shares 2018-06-30 2021-06-15 Ρ Ishares Tr MSCI KLD400 Soc-1,164 shares 2018-06-30 2021-06-16 Р Uniform MBS Pool 2016-01-01 2020-07-20 Ρ 2021-01-31 Healthpeak Properties Inc. Notes 2021-06-14 Ρ 2018-07-01 2021-06-14 Toronto Dominion Bank NOte Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h (e) Gross sales price Depreciation allowed Cost or other basis Gain or (loss) (f) (or allowable) (g) plus expense of sale (h) (e) plus (f) minus (g) 17,980 10,952 7,028 73,055 33,926 39,129 9,965 6,604 3,361 24,980 17,891 7,089 31,980 22,203 9,777 10,799 15,980 5,181 95,063 40,712 54,351 46,285 45,982 303 13,380 13,581 201 40,086 38,526 1,560 Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - I Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 Gains (Col. (h) gain minus col. (k), but not less than -0-) or (i) F.M.V. as of 12/31/69 Adjusted basis Excess of col. (i) **(I)** Losses (from col.(h)) (j) as of 12/31/69 (k) over col. (j), if any 7,028 39,129 3,361 7,089 9,777 5,181 54,351 303 201 1,560

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d List and describe the kind(s) of property sold (e.g., real estate, (b) (d) (a) 2-story brick warehouse; or common stock, 200 shs. MLC Co.) How acquired Date acquired Date sold P-Purchase (mo., day, yr.) (mo., day, yr.) D-Donation Р Comcast Corp New Note 2021-01-31 2021-06-24 Parnassus Mid Cap-2,079.236 shares Р 2018-07-01 2020-09-18 Pax World GLB Envir Markets-1,440.768 shares Ρ 2018-07-01 2020-09-18 RBC Emerging Markets Equity Fd-2,795.527 shares Р 2018-07-01 2020-09-18 Ishares Tr MSCI KLD400 Soc-730 shares Ρ 2018-07-01 2020-09-21 NuShares ETF Tr Nuveen Esg Mmlcp-372 shares Ρ 2018-07-01 2020-09-21 Р Calvert Social Invt Fndtn Ser 2004 2018-06-30 2021-03-15 Р Capital Gains Dividends Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h Depreciation allowed Cost or other basis (e) Gross sales price Gain or (loss) (f) (or allowable) (q) plus expense of sale (h) (e) plus (f) minus (g) 30.805 30.800 5 74,000 66,127 7,873 26,980 19,557 7,423 35.000 30.740 4,260 93,574 51,064 42,510 11,033 10,454 579 42,000 42,000 5,859 5,859 Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - I Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 Gains (Col. (h) gain minus col. (k), but not less than -0-) or (i) F.M.V. as of 12/31/69 Adjusted basis Excess of col. (i) **(I)** Losses (from col.(h)) (j) as of 12/31/69 (k) over col. (j), if any 5 7,873 7,423 4,260 42,510 579 5,859

Form 990PF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation (a) Name and address Title, and average (c) Compensation (If (d) Expense account, hours per week not paid, enter Contributions to (e) other allowances

|                 | (b) devoted to position | -0-) | and deferred<br>compensation |   |
|-----------------|-------------------------|------|------------------------------|---|
| Shimon Schocken | President, Secretary    | 0    | 0                            | 0 |
| PO Box 280      | 1.00                    |      |                              |   |

| PO Box 280<br>Barrington, RI 02806 |           |   |   |   |
|------------------------------------|-----------|---|---|---|
| Judah Rome                         | Treasurer | 0 | 0 | 0 |
| PO Box 280<br>Barrington, RI 02806 | 1.00      |   |   |   |

| Barrington, RI 02806               |           |   |   |   |
|------------------------------------|-----------|---|---|---|
| Judah Rome                         | Treasurer | 0 | 0 | 0 |
| PO Box 280<br>Barrington, RI 02806 | 1.00      |   |   |   |
| David Landau                       | Director  | 0 | 0 | 0 |
| PO Box 280<br>Barrington, RI 02806 | 1.00      |   |   |   |

| Judah Rome                         | Treasurer<br>1.00 | 0 | 0 | 0 |
|------------------------------------|-------------------|---|---|---|
| PO Box 280<br>Barrington, RI 02806 |                   |   |   |   |
| David Landau                       | Director          | 0 | 0 | 0 |
| PO Box 280<br>Barrington, RI 02806 | 1.00              |   |   |   |
| Hillel Schocken                    | Director          | 0 | 0 | 0 |

| Barrington, RI 02806               |          |   |   |   |
|------------------------------------|----------|---|---|---|
| David Landau                       | Director | 0 | 0 | 0 |
| PO Box 280<br>Barrington, RI 02806 | 1.00     |   |   |   |
| Hillel Schocken                    | Director | 0 | 0 | 0 |
| DO D 200                           | ] 1.00   |   |   | 1 |

| PO Box 280<br>Barrington, RI 02806 | 1.00     |   |   |   |
|------------------------------------|----------|---|---|---|
| Hillel Schocken                    | Director | 0 | 0 | 0 |
| PO Box 280                         | 1.00     |   |   |   |

| Hillel Schocken                    | Director | 0 | 0 | 0 |
|------------------------------------|----------|---|---|---|
| PO Box 280<br>Barrington, RI 02806 | 1.00     |   |   |   |
|                                    |          |   |   |   |

| PO Box 280<br>Barrington, RI 02806 | 1.00     |   |   |  |
|------------------------------------|----------|---|---|--|
| Noa Mendels                        | Director | 0 | 0 |  |

1.00

PO Box 280 Barrington, RI 02806

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager recipient Name and address (home or business) or substantial contributor

| a Paid during the year   |                |                                     |         |
|--|----------------|-------------------------------------|---------|
| American Friends of Hand in Hand<br>PO Box 80102<br>Portland, OR 97280 | Public charity | To support Israeli-Arab coeducation | 100,000 |

| ,  |                |  |        |
|--|----------------|--|--------|
| American Friends of IDC Herzliya<br>142 W 57th St 11th Floor<br>New York, NY 10019 | ,              | To help to provide an exceptional learning vehicle for the future leaders of the world | 40,000 |
| American Friends of the Hebrew   | Public charity | To help to connect the passions  | 20,000 |

| New York, NY 10019  |                | leaders of the world   |        |
|---|----------------|--|--------|
| American Friends of the Hebrew<br>University<br>199 Water St 11th Floor<br>New York, NY 10038 | Public charity | To help to connect the passions of Americans to the talent at the Hebrew University of Jerusalem | 20,000 |

3a

609,500

| New York, NY 10019  |                | leaders of the world   |      |
|---|----------------|--|------|
| American Friends of the Hebrew<br>University<br>199 Water St 11th Floor<br>New York, NY 10038 | Public charity | To help to connect the passions of Americans to the talent at the Hebrew University of Jerusalem | 20,0 |

Total .

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year

10,000

609,500

▶ 3a

| ArtisPO Box 979<br>New York, NY 10013    | Public charity | To support contemporary artists from Israel whose work addresses aesthetic, social and political questions that inspire reflection and debate |  |
|--|----------------|---|--|
| International Refugee Assistance Project | Public charity | To help to develop and enforce a  |  |

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

|  |                | Terrection and debate  |  |
|--|----------------|--|--|
| International Refugee Assistance Project<br>One Battery Park Plaza 4th Floor<br>New York, NY 10004 | Public charity | To help to develop and enforce a<br>set of legal and human rights for<br>refugees and displaced persons  |  |
| New Israel Fund<br>6 East 39th Street Ste 301<br>New York, NY 10016                                | Public charity | To support the integration of Arab-Israeli teachers in Jewish schools, to support Arab-Israeli children with disabilities, to support the ideal of a shared society in Israel between Arabs and Jews |  |

Total .

| International Refugee Assistance Project<br>One Battery Park Plaza 4th Floor<br>New York, NY 10004 | Public charity | To help to develop and enforce a<br>set of legal and human rights for<br>refugees and displaced persons  | 25,000 |
|--|----------------|--|--------|
| New Israel Fund<br>6 East 39th Street Ste 301<br>New York, NY 10016                                | Public charity | To support the integration of Arab-Israeli teachers in Jewish schools, to support Arab-Israeli children with disabilities, to support the ideal of a shared specific in Israel between Araba | 84,500 |

| New York, NY 10004  |                | refugees and displaced persons  |        |
|---|----------------|---|--------|
| New Israel Fund<br>6 East 39th Street Ste 301<br>New York, NY 10016 | Public charity | To support the integration of Arab-Israeli teachers in Jewish schools, to support Arab-Israeli children with disabilities, to support the ideal of a shared society in Israel between Arabs | 84,500 |

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year PE 63 185,000

| PEF Israel Endowment Funds Inc<br>530 Third Avenue 15th Floor<br>New York, NY 10017 | Public charity | To support music education for children of Ethiopian descent, to support therapy for families that have had a victim of sexual abuse, to support Israeli Arabs with disabilities, to support an education system in Israel that promotes a shared society between Jews and Arabs | 1 |
|---|----------------|--|---|
| Silent Spring Institute320 Nevada St302<br>Newton, MA 02460                         | Public charity | To support uncovering the links<br>between chemicals in our<br>everyday environment and  |   |

| Silent Spring Institute320 Nevada St302<br>Newton, MA 02460 | ,              | To support uncovering the links between chemicals in our everyday environment and women's health, with a focus on breast cancer prevention. | 10,000 |
|---|----------------|---|--------|
| HaTikva Project(The Hope Project)                           | Public charity | To care and support needy   | 10,000 |

| Newton, MA 02460                  | , asiis siiaiis, | between chemicals in our<br>everyday environment and<br>women's health, with a focus on<br>breast cancer prevention. | 20/0 |
|-----------------------------------|------------------|--|------|
| HaTikva Project(The Hope Project) | Public charity   | To care and support needy  | 10,0 |

|  |                | women's health, with a focus on breast cancer prevention. |       |
|--|----------------|---|-------|
| HaTikva Project(The Hope Project)<br>9218 Metcalf Ave Ste277 | Public charity | To care and support needy<br>Israeli believers in God     | 10,00 |

|  |                | breast cancer prevention.                             |     |
|--|----------------|---|-----|
| HaTikva Project(The Hope Project)<br>9218 Metcalf Ave Ste277 | Public charity | To care and support needy<br>Israeli believers in God | 10, |

| Overland Park, KS 66212 |          |         |
|-------------------------|----------|---------|
| Total                   | <br>▶ 3a | 609,500 |

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year

| - · - · - · - · · · · · · · · · · · · ·  |                |   |        |
|--|----------------|---|--------|
| Givat Haviva Education Foundation<br>(GHEF)<br>500 7th Ave 8th floor<br>New York, NY 10018 | Public charity | To strengthen relations between<br>Jewish and Arab citizens | 25,000 |
| American Friends of Latet Humanitarian   | Public charity | To provide home repairs for                                 | 10.000 |

| New York, NY 10018   |                |  |        |
|--|----------------|--|--------|
| American Friends of Latet Humanitarian<br>Aid Inc<br>29 Merrill Rd<br>Newton, MA 02459 | Public charity | To provide home repairs for<br>Holocaust survivors | 10,000 |
| Intercambio Uniting Communities  | Bublic charity | To support the communication of                    | 25,000 |

| Aid Inc<br>29 Merrill Rd<br>Newton, MA 02459                                 | ,,             | Holocaust survivors  | ,      |
|--|----------------|--|--------|
| Intercambio Uniting Communities<br>4735 Walnut St Ste B<br>Boulder, CO 80301 | Public charity | To support the communication of people from different cultural backgrounds | 25,000 |
|  |                |  |        |

| Newton, MA 02459   |                |  |         |
|--|----------------|--|---------|
| Intercambio Uniting Communities<br>4735 Walnut St Ste B<br>Boulder, CO 80301 | Public charity | To support the communication of people from different cultural backgrounds | 25,000  |
| Total  | <br>           | ▶ 3a   | 609,500 |

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year

| J Street Education FundPO Box 66073<br>Washington, DC 20035 | , | To promote US policies that embody the Jewish and democratic values | 15,000 |
|---|---|---|--------|
| Jewish Federations of North America                         |   | To support Jewish Federations                                       | 10,000 |

| -   |                | democratic values  |        |
|---|----------------|--|--------|
| Jewish Federations of North America<br>Wall St Station PO Box 157<br>New York, NY 10268 | Public charity | To support Jewish Federations that change and save lives around the world by providing the full range of social services | 10,000 |
| RI Community Food Bank<br>200 Niantic Ave   | Public charity | To improve the quality of life of all Rhode Islanders by fighting  | 20,000 |

| Total   |                | ▶ 3a   | 609,500 |
|---|----------------|--|---------|
| RI Community Food Bank<br>200 Niantic Ave<br>Providence, RI 02907 | Public charity | To improve the quality of life of all Rhode Islanders by fighting hunger | 20,000  |
| New York, NY 10268  |                | around the world by providing the full range of social services          |         |

Recipient Foundation Purpose of grant or If recipient is an individual, Amount contribution show any relationship to status of any foundation manager recipient Name and address (home or business) or substantial contributor

| a Paid during the year   |                |  |       |
|--|----------------|--|-------|
| The American Jewish Joint Distribution<br>Committee<br>PO Box 4124<br>New York, NY 10163 | Public charity | To help provide a high-impact disaster relief around the world | 5,000 |

| PO Box 4124<br>New York, NY 10163                 |   |  |        |
|---|---|--|--------|
| Voyageur Outward Bound School<br>1650 Carroll Ave | , | To support the school that changes lives through challenge | 15,000 |

| New York, NY 10163                                |   |  |        |
|---|---|--|--------|
| Voyageur Outward Bound School<br>1650 Carroll Ave | , | To support the school that changes lives through challenge | 15,000 |
| St Paul, MN 55104                                 |   | and discovery  |        |

| Voyageur Outward Bound School | P | Public charity | To support the school that      | 15,0 |
|-------------------------------|---|----------------|---------------------------------|------|
| 1650 Carroll Ave              |   |                | changes lives through challenge |      |
| St Paul, MN 55104             |   |                | and discovery                   |      |

| St Paul, MN 55104             |                | and discovery                   |       |
|-------------------------------|----------------|---------------------------------|-------|
| 1650 Carroll Ave              |                | changes lives through challenge |       |
| voyageur Outward bound School | Public Charity | To support the school that      | 15,00 |

| St Paul, MN 55104 | and discovery |         |
|-------------------|---------------|---------|
| Total             | <br>          | 609,500 |

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|----------------------------------|--------|----------------------|--------------------------|------------------------|---|--|
| TY 2020 Accounting Fees Schedule |        |                      |                          |                        |   |  |
| J                                |        |                      |                          |                        |   |  |
|                                  |        | The School 13-616718 | ken Foundation Ir<br>1   | nc                     |   |  |
| Category                         | Amo    | ount                 | Net Investment<br>Income | Adjusted Net<br>Income | Disbursements<br>for Charitable<br>Purposes |  |

2,892

7,230

Accounting fees

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|--------------------------------------|-----------------------------|---------------------|
| TY 2020 Investments Corpora          | te Bonds Schedule           |                     |
| Name:                                | The Schocken Foundation Inc |                     |
| EIN:                                 | 13-6167181                  |                     |

| Investments Corporate Bonds Schedule |                           |                                  |
|--------------------------------------|---------------------------|----------------------------------|
| Name of Bond                         | End of Year Book<br>Value | End of Year Fair<br>Market Value |

1,726,447

1,777,365

Corporate Bonds

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|--------------------------------------|-----------------|--------------|---------------------|
| TY 2020 Investments Corporat         | te Stock Sche   | dule         |                     |
| •                                    |                 |              |                     |
| Name:                                | The Schocken Fo | undation Inc |                     |
| EIN:                                 | 13-6167181      |              |                     |

| <b>EIN.</b> 15-010/181                 |                           |                                  |
|--|---------------------------|----------------------------------|
| Investments Corporation Stock Schedule |                           |                                  |
| Name of Stock                          | End of Year Book<br>Value | End of Year Fair<br>Market Value |
| Corporate Stocks                       | 1,284,683                 | 2,687,567                        |

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|--|-----------------|----------------|---------------------|--|--|
| TY 2020 Investments Government Obligations Schedule                        |                 |                |                     |  |  |
|  |                 |                |                     |  |  |
| Name:  | The Schocken    | Foundation Inc |                     |  |  |
| EIN:   | 13-6167181      |                |                     |  |  |
| US Government Securities - End of Year Book Value:                         |                 | 463,197        |                     |  |  |
| US Government Securities - End of Year Fair Market Value:                  |                 | 478,528        |                     |  |  |
| State & Local Government<br>Securities - End of Year Book<br>Value:        |                 | 0              |                     |  |  |
| State & Local Government<br>Securities - End of Year Fair<br>Market Value: |                 | 0              |                     |  |  |

| efile GRAPHIC print - DO NOT PROCESS | As Filed Data - | DLN: 93491306001001 |
|--------------------------------------|-----------------|---------------------|
| TY 2020 Investments - Other S        | Schedule        |                     |
| Name: T                              | The Schocken Fo | aundation Inc       |

158,310

150,947

THE SCHOCKETT FOUNDATION THE

**EIN:** 13-6167181

Other Interest Bearing Obligations

| Investments Other Schedule 2 |                       |            |                                  |  |  |
|------------------------------|-----------------------|------------|----------------------------------|--|--|
| Category/ Item               | Listed at Cost or FMV | Book Value | End of Year Fair<br>Market Value |  |  |
| Mutual Funds,ETFs            | AT COST               | 5,085,109  | 6,925,877                        |  |  |

AT COST

| efile GRAPHIC print - DO NOT PROCESS              | S As Filed Data | -                        | DLI                    | N: 93491306001001                           |
|---|-----------------|--------------------------|------------------------|---|
| TY 2020 Legal Fees Schedul                        | е               |                          |                        |   |
|   |                 |                          |                        |   |
| Name: The Schocken Foundation Inc EIN: 13-6167181 |                 |                          |                        |   |
| Category  | Amount          | Net Investment<br>Income | Adjusted Net<br>Income | Disbursements<br>for Charitable<br>Purposes |
| Legal fees  | 339             | 136                      |                        | 203   |

| efile GRAPHIC print - DO NOT PROCESS | As Filed Data -                      |                          | DLN:                   | 93491306001001                              |  |  |
|--------------------------------------|--------------------------------------|--------------------------|------------------------|---|--|--|
| TY 2020 Other Expenses Schedule      |                                      |                          |                        |   |  |  |
|                                      | The Schocken F<br>13-6167181         | oundation Inc            |                        |   |  |  |
| Other Expenses Schedule              |                                      | 1                        |                        | 4   |  |  |
| Description                          | Revenue and<br>Expenses per<br>Books | Net Investment<br>Income | Adjusted Net<br>Income | Disbursements for<br>Charitable<br>Purposes |  |  |

199

600

24,000

80

9,600

240

119

360

14,400

Office supplies and expenses

Public relations and marketing expense

Web site development and support

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|--------------------------------------|-----------------|----------------|---------------------|--|--|--|
| TY 2020 Other Increases Schedule     |                 |                |                     |  |  |  |
| Name:                                | The Schocken    | Foundation Inc |                     |  |  |  |
| EIN:                                 | 13-6167181      |                |                     |  |  |  |
| Other Increases Schedule             |                 |                | 4                   |  |  |  |
| De                                   | escription      |                | Amount              |  |  |  |
| Returned grant (uncashed check)      |                 |                | 5,000               |  |  |  |

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|--|-------------------|--------------------------|------------------------|------------------------------|--|
| TY 2020 Other Professional Fees Schedule |                   |                          |                        |                              |  |
|  |                   |                          |                        |                              |  |
| Name: The Schocken Foundation Inc        |                   |                          |                        |                              |  |
| <b>EIN:</b> 13-6167181                   |                   |                          |                        |                              |  |
|  |                   |                          |                        |                              |  |
| Category                                 | Amount            | Net Investment<br>Income | Adjusted Net<br>Income | Disbursements for Charitable |  |

| Category                  | Amount | Net Investment<br>Income | Adjusted Net<br>Income | Disbursements<br>for Charitable<br>Purposes |
|---------------------------|--------|--------------------------|------------------------|---|
| Administrative assistance | 69,927 | 27,971                   |                        | 41,956                                      |

69,352

69,352

Investment advisory fees

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|-----------------------------------|--------------------------------------|--------------------------|------------------------|---|--|
| TY 2020 Taxes Schedule            |                                      |                          |                        |   |  |
|                                   | lame: The Schocke<br>EIN: 13-6167181 |                          |                        |   |  |
| Category                          | Amount                               | Net Investment<br>Income | Adjusted Net<br>Income | Disbursements<br>for Charitable<br>Purposes |  |
| State filing fees                 | 770                                  | 0                        |                        | 770   |  |
| Federal excise tax                | 4,919                                | 0                        |                        | 0   |  |

Foreign tax paid