				a0 44		**p.		2939	314	451	3012	9		
		١ _		08 11					i		_	-		
	990-T Exempt Organization Business Income Tax Return (and proxy tax under section 6033(e))									OMB No 1545-0687				
Form 🖣	(and proxy tax under section 6033(e))										2017			
		For cale	ndar year 2017 or other tax y	rear beginning July	<u>y 1</u> , 2	2017, and ending	June	e 30 , 20	18 .	Œ				
	ent of the Treasury		► Go to www.irs.gov/l							Doen to	Public Inspect	on for		
	Revenue Service	▶ Do i	not enter SSN numbers on t					on is a 501	(c)(3).	(3). Open to Public Inspection for 501(c)(3) Organizations Only				
	Check box if address changed		Name of organization (Check box if name ch	anged a	ind see instruction	ıs.)				ntification nur			
	pt under section	(Cmpio	mployees' trust, see instructions)											
	01(c) (O3)	or	Number, street, and room or	rsuite no If a PO box	, see ≀ns	structions		1	E Unrela	13-6146854				
,	08(e)	Туре	1109 Fifth Avenue							Inrelated business activity codes See instructions)				
F3	08A L 530(a)		City or town, state or province	ce, country, and ZIP or	toreign	postal code					;			
	29(a) yalue of all assets d of year		New York, NY 10128 oup exemption number	(See instructions	1				···					
at en	d of year \$136,634,367		neck organization type			n [] 501	(c) trus	st 🗇	401(a)	trust	Other	trust (
H De		<u></u>	n's primary unrelated bu				(0) (100	<u> </u>	το τ(α)					
			e corporation a subsidiary			parent-subsidi	ary cor	ntrolled ar	oup?	>	☐Yes ☐	No		
	-		and identifying number	-		•	u. y cc.	onou g.	cap					
	e books are in o						ephone	e numbe	>					
			e or Business Incon	ne		(A) Income			penses	\Box	(C) Net			
1a	Gross receipts	or sale	es									1		
b	Less returns and a	allowance	es	c Balance ►	1c									
2	Cost of goods	sold (S	Schedule A, line 7)		2							1		
3	Gross profit. S	ubtract	t line 2 from line 1c		3									
4a	Capital gain net income (attach Schedule D) 4a													
b														
C	•		n for trusts	4c										
5	Income (loss) from partnerships and S corporations (attach statement) 5													
2019 7			lle C)	6										
_	Unrelated debt-financed income (Schedule E)													
က 8 က 9		-	•	•	8 9									
			ction 501(c)(7), (9), or (17) orga ivity income (Schedule I		10									
二10 二11	•		Schedule J)		11					_				
_ 12	_	•	ructions; attach schedule		12	54,721	00			-	54,721	00		
13	•		3 through 12	•	13	54,721		······································		\vdash	54,721	00		
Z Part			Taken Elsewhere (Se					is.) (Exce	pt for c	ontrib				
¥			be directly connected											
C 14	Compensation	of offic	cers, directors, and trus	tees (Schedule K)					. 14	4				
(P ₁₅		-							. 1	5				
16	Repairs and m	aıntena	ince	DE051/55		2			. 10					
17			<u>.</u>) <u>.</u> .;				. 1					
18	Interest (attach	sched	ule)	· · · · · · · ·	. (6)		• •		. 11					
19	Chartable and	nses.	ns (See instructions) for	MAY 0 9 2019	1 9	F .			. 19					
20 21	Chantable con	tributio	orm 4563)	ilmitation rules) .	30	. 21	• •		. 20					
22	l ace depreciati	nacii r	orm 4562)	CARONEAL A	turn	. 22a			22	<u>-</u>				
23	Denletion	ion ciai	· · · · · · · · ·	o-elge wilet evêt ime	cutti .	1. [224]								
24			red compensation plan											
25			grams						·					
26			nses (Schedule I)											
27		•	sts (Schedule J)							7		·····		
28		•	ach schedule)						· · · · · · · · · · · · · · · · · · ·	3				
29	Total deduction	ons. Ad	ld lines 14 through 28						. 29	9				
30			xable income before net							3	54,721	00		
31			duction (limited to the a	•						1				
32			xable income before sp							2	54,721	00		
33			enerally \$1,000, but see							3	1,000	0		
34	Unrelated bus	iness t	taxable income. Subtra	act line 33 from lir	ne 32.	If line 33 is gr	eater t	than line	32,					
			ero or line 32		<u></u>				98 3		53,721	00		
For Pa	perwork Reducti	on Act	Notice, see instructions.			Cat No. 1129	1J			F	om 990-T	(2017)		

Part I	П Т.	ax Computation								
35		izations Taxable as Corporations. See instructions for tax computation ers (sections 1561 and 1563) check here ▶ ☐ See instructions and	. Controlled gro	up						
а		our share of the \$50,000, \$25,000, and \$9,925,000 taxable income bracket	s (in that order):							
_	(1) \$	(2) \$ (3) \$								
b		organization's share of: (1) Additional 5% tax (not more than \$11,750)								
		ditional 3% tax (not more than \$100,000)								
С		e tax on the amount on line 34		▲	35c		11,281	00		
36	Trusts	Taxable at Trust Rates. See instructions for tax computation.	Income tax	on ,						
	the am	iount on line 34 from. Tax rate schedule or Schedule D (Form 1041)		▶	36					
37	Proxy 1	tax. See instructions		▶	37					
		ative minimum tax			38					
39	Tax on Non-Compliant Facility Income. See instructions									
40	Total.	Add lines 37, 38 and 39 to line 35c or 36, whichever applies	<u> </u>	44	40		11,281	00		
Part I	V T	ax and Payments								
41a	Foreign	tax credit (corporations attach Form 1118; trusts attach Form 1116) .								
b	Other o	credits (see instructions)								
C	Genera	al business credit. Attach Form 3800 (see instructions) 4								
		for prior year minimum tax (attach Form 8801 or 8827) 4								
		credits. Add lines 41a through 41d			41e					
		ct line 41e from line 40			42		11,281	00		
		ixes Check if from 🔲 Form 4255 🔲 Form 8611 🔲 Form 8697 🔲 Form 8866 🔲 Othe	er (attach schedule)	ເທ	43					
		ax. Add lines 42 and 43		48	44		11,281	00		
45a	Payme	ents: A 2016 overpayment credited to 2017								
		stimated tax payments	b 11,281	00						
		posited with Form 8868								
	-	n organizations. Tax paid or withheld at source (see instructions) . 45								
	-	p withholding (see instructions)								
		for small employer health insurance premiums (Attach Form 8941) .	5t							
_	Other of	credits and payments: ☐ Form 2439 Total ► Total ►	ia							
		payments. Add lines 45a through 45g		51	46		11,281	00		
		ted tax penalty (see instructions). Check if Form 2220 is attached			47		,			
		ie. If line 46 is less than the total of lines 44 and 47, enter amount owed .		<u> </u>	48		0	00		
		ayment. If line 46 is larger than the total of lines 44 and 47, enter amount of		•	49					
	-	e amount of line 49 you want	Refunded	▶	50					
Part \	y s	tatements Regarding Certain Activities and Other Information (s	see instructions)							
<u></u>	At any	time during the 2017 calendar year, did the organization have an interest in	or a signature o	or ot	her au	thority	Yes	No		
	over a	financial account (bank, securities, or other) in a foreign country? If YES,	the organization	may	/ have	to file				
	FINCEN	N Form 114, Report of Foreign Bank and Financial Accounts. If YES, enter	the name of the	e for	eign c	ountry				
	here >	•						✓		
52	During t	the tax year, did the organization receive a distribution from, or was it the grantor of	, or transferor to, a	a fore	ign trus	st?.	i	✓		
	If YES,	see instructions for other forms the organization may have to file.								
53		he amount of tax-exempt interest received or accrued during the tax year								
Λ·		penalties of penury, I declare that I have examined this return, including accompanying schedules and correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which p			t of my k	knowledge	and beli	ief, it is		
Sign	 				,	e IRS disci				
Here			- Finance & Admi	in.		e preparer tructions)?				
	Signat	ture of officer Date Title	· •	, .						
Paid	'∣	Print/Type preparer's name Preparer's signature	Date	Che	eck 🗆	ıf P1	ΓIN			
Prepa	arer		<u> </u>		-employ					
Use C		Firm's name ▶		Firm	n's EIN ▶	<u> </u>				
	···· <i>y</i>	Firm's address ▶	Phone no							

_	2
Page	: 3

Sche	dule A-Cost of Goods S	old. Er	iter method o	of invent	ory va	aluation >						
1	1 Inventory at beginning of year 1					Inventory	at end of year 6					
2	Purchases	. [2		7	Cost of	goods sold. Subtract					
3	Cost of labor	. [3			line 6 fron	n line 5. Enter here and	<u> </u>				
4a	Additional section 263A co	osts 🗀			1	ın Part I, III	ne 2	7		-		
	(attach schedule)	. .	4a		8	Do the ru	o the rules of section 263A (with respect to Ye					
	Other costs (attach schedule	_	4b]	property p	property produced or acquired for resale) apply to the organization?					
5	Total. Add lines 1 through 4		5	<u> </u>								
	dule C—Rent Income (From instructions)	om He	ai Property a	ana Per	sona	Property	Leased With Real Pro	perty				
1. Desc	nption of property											
(1)												
(2)										_		
(3)												
(4)												
	2. Re	ent receiv	ed or accrued									
for personal property is more than 10% but not percentage				rent for per	sonal pr	perty (if the operty exceeds ofit or income)	1 ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' '	3(a) Deductions directly connected with the income in columns 2(a) and 2(b) (attach schedule)				
(1)												
(2)												
(3)												
(4)												
Total			Total		•		(h) Tatal daduations					
here ar	al income. Add totals of columns ad on page 1, Part I, line 6, colum	n (A) .	▶				(b) Total deductions. Enter here and on page Part I, line 6, column (B)					
<u>Sche</u>	dule E—Unrelated Debt-F	inanc	ed Income (s	see instru	uctions	s)	I 0 Dadinahasa dinadhi asa		Ab as allocabil			
	Description of debt-finar	nced prop	erty			come from or debt-financed	Deductions directly connected with or allocable to debt-financed property					
			property			(a) Straight line depreciation (b) Other deduc (attach schedule) (attach schedule)						
(1)												
(2)												
(3)												
(4)	· · · · · · · · · · · · · · · · · · ·											
4. Amount of average acquisition debt on or allocable to debt-financed property (attach schedule) 5. Average adjusted b of or allocable to debt-financed prope (attach schedule)			allocable to anced property		4 divided 7. Gross income reportable (column 6 x t			locable deduc n 6 × total of c 3(a) and 3(b))				
(1)						%						
(2)						%						
(3)						%						
(4)						%						
							Enter here and on page 1, Part I, line 7, column (A)		nere and on p line 7, colun			
Totals Total c	lividends-received deductions			•	•							

· fe

Schedule F-Interest, Anni	uities	s, Royalties,			Controlled Org	ganizations (se	ee instrud	ctions)		
		2. Employer Ification number	3. Net unrel	lated income	T	5. Part of column included in the organization's gr	controlling	conn	6. Deductions directly connected with income in column 5	
(1)										
(2)								 		
(3)										
(4)								 		
Nonexempt Controlled Organiz	ation	S								
7. Taxable Income		3. Net unrelated ind (loss) (see instruct			otal of specified yments made	10. Part of column included in the organization's gr	controlling	connected with income in		
(1)		-						1		
(2)								+		
(3)						+		1		
(4)									•	
Totals			1			Add columns 5 Enter here and 6 Part 1, line 8, co	on page 1,	Enter	columns 6 and 11 here and on page 1, , line 8, column (B)	
Schedule G-Investment I	ncon	ne of a Sect	ion 501/	· · · · ·	or (17) Organi	zation /see ups	tructions	2)	-	
1. Description of income		2. Amount of		3. dire	Deductions ctly connected ach schedule)	4. Set-aside (attach sched	es	5. Total deductions and set-asides (col 3 plus col 4)		
(1)				,					<u> </u>	
(2)									·	
(3)							1			
(4)										
Totals Schedule I—Exploited Exe	•	Enter here and Part I, line 9, c	olumn (A).		Advertising Ir	oome (see inst	tructions	Part I, I	re and on page 1, ne 9, column (B).	
Schedule I—Exploited Exe	прс				Ï	Come (see ms	T	·)	T	
Description of exploited activity		2. Gross unrelated business incor from trade o business	connected with production of		Net income (loss) from unrelated trade or business (column 2 minus column 3). If a qain, compute cols 5 through 7	5. Gross income from activity that is not unrelated business income	6. Expenses attributable to column 5		7. Excess exempt expenses (column 6 minus column 5, but not more than column 4) -	
(1)							†			
(2)					-		İ			
(3)							Ì		1	
(4)		1							 	
Totals		Enter here and page 1, Part line 10, col (A	tl, page 1, Partl,				1		Enter here and on page 1, Part II, line 26	
Schedule J-Advertising In	ncom	ne (see instruc	tions)						<u> </u>	
Part I Income From Po	eriod	licals Repor	ted on a	Consoli	dated Basis					
		1			4. Advertising				7. Excess readership	
1. Name of penodical		2. Gross advertising income		Direct tising costs	gain or (loss) (col 2 minus col 3) If a gain, compute cols 5 through 7	5. Circulation 6. R		dership ests	costs (column 6 minus column 5, but not more than column 4)	
(1)										
(2)]	
(3)					j					
(4)										
Totals (carry to Part II, line (5))	>									

Part II Income From Periodi	cals Reported	l on a Separat	e Basis (For ea	ach periodical li	sted in Part II	, fill in columns
2 through 7 on a line-b	y-line basis.)					
Name of periodical ,	2. Gross advertising income	3. Direct advertising costs	4. Advertising gain or (loss) (col 2 minus col. 3) If a gain, compute cols 5 through 7	5. Circulation income	6. Readership costs	7. Excess readership costs (column 6 minus column 5, but not more than column 4)
(1)					•	
(2)						
(3)						
(4)						
Totals from Part I ▶			-	-	-	
	Enter here and on page 1, Part I, line 11, col (A)	Enter here and on page 1, Part I, line 11, col (B)				Enter here and on page 1, Part II, line 27
Totals, Part II (lines 1 – 5) ▶						_
Schedule K—Compensation of	Officers, Direc	tors, and Trus	stees (see instru	uctions)		
1. Name	2	?. Title	3. Percent of time devoted to business		tion attributable to ed business	
(1)				%	,	_
(2)				%	,	
(3)				%	,	
(4)				%		
Total Estar hara and an page 1. Dort II. lie	- 11	·				

Form **990-T** (2017)