

Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)			Beginning of year	End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value			
Assets	1	Cash—non-interest-bearing	297,638	85,592	85,592		
	2	Savings and temporary cash investments	1,191,937	2,308,205	2,308,205		
	3	Accounts receivable ▶ <u>1,426</u>					
		Less allowance for doubtful accounts ▶ _____	68	1,426	1,426		
	4	Pledges receivable ▶ _____					
		Less allowance for doubtful accounts ▶ _____					
	5	Grants receivable	17,636	13,500	13,500		
	6	Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions)					
	7	Other notes and loans receivable (attach schedule) ▶ _____					
		Less allowance for doubtful accounts ▶ _____					
	8	Inventories for sale or use					
	9	Prepaid expenses and deferred charges	11,350	16,423	16,423		
	10a	Investments—U S and state government obligations (attach schedule)					
	b	Investments—corporate stock (attach schedule)					
	c	Investments—corporate bonds (attach schedule)					
	11	Investments—land, buildings, and equipment basis ▶ _____					
	Less accumulated depreciation (attach schedule) ▶ _____						
12	Investments—mortgage loans						
13	Investments—other (attach schedule)	103,987,647	110,754,459	110,754,459			
14	Land, buildings, and equipment basis ▶ <u>22,254,787</u>						
	Less accumulated depreciation (attach schedule) ▶ <u>4,479,723</u>	17,991,398	17,775,064	17,775,064			
15	Other assets (describe ▶ _____)	2,646,980	2,646,980	2,646,980			
16	Total assets (to be completed by all filers—see the instructions Also, see page 1, item I)	126,144,654	133,601,649	133,601,649			
Liabilities	17	Accounts payable and accrued expenses	537,362	789,815			
	18	Grants payable					
	19	Deferred revenue	2,485,783	2,599,212			
	20	Loans from officers, directors, trustees, and other disqualified persons					
	21	Mortgages and other notes payable (attach schedule)					
	22	Other liabilities (describe ▶ _____)	640	0			
	23	Total liabilities (add lines 17 through 22)	3,023,785	3,389,027			
Net Assets or Fund Balances	Foundations that follow SFAS 117, check here ▶ <input checked="" type="checkbox"/> and complete lines 24 through 26 and lines 30 and 31.						
	24	Unrestricted	58,837,699	61,783,678			
	25	Temporarily restricted	42,385,520	46,531,294			
	26	Permanently restricted	21,897,650	21,897,650			
	Foundations that do not follow SFAS 117, check here ▶ <input type="checkbox"/> and complete lines 27 through 31.						
	27	Capital stock, trust principal, or current funds					
	28	Paid-in or capital surplus, or land, bldg , and equipment fund					
	29	Retained earnings, accumulated income, endowment, or other funds					
	30	Total net assets or fund balances (see instructions)	123,120,869	130,212,622			
	31	Total liabilities and net assets/fund balances (see instructions) .	126,144,654	133,601,649			

Part III Analysis of Changes in Net Assets or Fund Balances		
1	Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)	123,120,869
2	Enter amount from Part I, line 27a	377,774
3	Other increases not included in line 2 (itemize) ▶ _____	6,713,979
4	Add lines 1, 2, and 3	130,212,622
5	Decreases not included in line 2 (itemize) ▶ _____	0
6	Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30 .	130,212,622

Part IV Capital Gains and Losses for Tax on Investment Income

(a) List and describe the kind(s) of property sold (e g , real estate, 2-story brick warehouse, or common stock, 200 shs MLC Co)	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
1a			

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
a			
b			
c			
d			
e			

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

2 Capital gain net income or (net capital loss) { If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 }	2	
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6) If gain, also enter in Part I, line 8, column (c) (see instructions) If (loss), enter -0- in Part I, line 8	3	

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

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

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

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? ☐ Yes ☒ No

If "Yes," the foundation does not qualify under section 4940(e) Do not complete this part

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

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col (b) divided by col (c))
2015	5,697,452	105,739,032	0 053882
2014	5,900,257	109,329,567	0 053968
2013	5,211,178	103,050,131	0 050569
2012	5,619,896	94,509,928	0 059464
2011	5,740,491	92,760,503	0 061885
2 Total of line 1, column (d)			2 0 279768
3 Average distribution ratio for the 5-year base period—divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years			3 0 055954
4 Enter the net value of noncharitable-use assets for 2016 from Part X, line 5			4 108,863,296
5 Multiply line 4 by line 3			5 6,091,337
6 Enter 1% of net investment income (1% of Part I, line 27b)			6 54,113
7 Add lines 5 and 6			7 6,145,450
8 Enter qualifying distributions from Part XII, line 4			8 5,810,432

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate See the Part VI instructions

Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see instructions)

1a	Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter "N/A" on line 1 Date of ruling or determination letter _____ (attach copy of letter if necessary—see instructions)		
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here <input type="checkbox"/> and enter 1% of Part I, line 27b	1	108,226
c	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col (b)		
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2	0
3	Add lines 1 and 2.	3	108,226
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4	0
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5	108,226
6	Credits/Payments		
a	2016 estimated tax payments and 2015 overpayment credited to 2016	6a	116,000
b	Exempt foreign organizations—tax withheld at source	6b	
c	Tax paid with application for extension of time to file (Form 8868)	6c	60,000
d	Backup withholding erroneously withheld	6d	
7	Total credits and payments. Add lines 6a through 6d.	7	176,000
8	Enter any penalty for underpayment of estimated tax. Check here <input type="checkbox"/> if Form 2220 is attached	8	
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed ▶	9	
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid ▶	10	67,774
11	Enter the amount of line 10 to be Credited to 2017 estimated tax ▶ 67,774 Refunded ▶	11	0

Part VII-A Statements Regarding Activities

	Yes	No
1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?	1a	No
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for definition)? If the answer is "Yes" to 1a or 1b , attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities	1b	No
c Did the foundation file Form 1120-POL for this year?	1c	No
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year (1) On the foundation ▶ \$ _____ 0 (2) On foundation managers ▶ \$ _____ 0		
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers ▶ \$ _____ 0		
2 Has the foundation engaged in any activities that have not previously been reported to the IRS? If "Yes," attach a detailed description of the activities	2	No
3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3	No
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a	No
b If "Yes," has it filed a tax return on Form 990-T for this year?	4b	
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? If "Yes," attach the statement required by General Instruction T	5	No
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?	6	No
7 Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV	7	Yes
8a Enter the states to which the foundation reports or with which it is registered (see instructions) ▶ NY _____		
b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? If "No," attach explanation .	8b	Yes
9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2016 or the taxable year beginning in 2016 (see instructions for Part XIV)? If "Yes," complete Part XIV	9	Yes
10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses	10	No

Part VII-A Statements Regarding Activities (continued)

11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions).	11		No
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement (see instructions)	12		No
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address WWW ROCKARCH ORG	13	Yes	
14	The books are in care of CAMELIA MURESAN Telephone no (914) 366-6370			

Located at **15 DAYTON AVENUE SLEEPY HOLLOW NY** ZIP+4 **10591**

15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 —Check here <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the year 15			
16	At any time during calendar year 2016, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? See instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). If "Yes," enter the name of the foreign country ▶	16	Yes	No

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required

File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.

1a	During the year did the foundation (either directly or indirectly)		Yes	No
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days). <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
b	If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)? <input type="checkbox"/> 1b			
c	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2016? <input type="checkbox"/> 1c			No
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5))			
a	At the end of tax year 2016, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2016? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "Yes," list the years ▶ 20____, 20____, 20____, 20____			
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement—see instructions). <input type="checkbox"/> 2b			
c	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here ▶ 20____, 20____, 20____, 20____			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
b	If "Yes," did it have excess business holdings in 2016 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2016). <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No 3b			
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? 4a			No
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2016? 4b			No

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required (Continued)

5a During the year did the foundation pay or incur any amount to				
(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
(2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
(3) Provide a grant to an individual for travel, study, or other similar purposes?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
(4) Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? (see instructions).	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
b If any answer is "Yes" to 5a(1)–(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	5b		
Organizations relying on a current notice regarding disaster assistance check here.	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
If "Yes," attach the statement required by Regulations section 53.4945–5(d)				
6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	6b		No
If "Yes" to 6b, file Form 8870				
7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
b If yes, did the foundation receive any proceeds or have any net income attributable to the transaction?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	7b		

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors

1 List all officers, directors, trustees, foundation managers and their compensation (see instructions).				
(a) Name and address	Title, and average hours per week (b) devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	Expense account, (e) other allowances
See Additional Data Table				
2 Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, enter "NONE."				
(a) Name and address of each employee paid more than \$50,000	Title, and average hours per week (b) devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	Expense account, (e) other allowances
ROBERT W CLARK 15 DAYTON AVENUE SLEEPY HOLLOW, NY 10591	DIRECTOR OF ARCHIVES 35 00	154,500	27,321	0
LEE R HILTZIK 15 DAYTON AVENUE SLEEPY HOLLOW, NY 10591	ASSISTANT DIRECTOR 35 00	101,690	48,782	0
MICHELE J BECKERMAN 15 DAYTON AVENUE SLEEPY HOLLOW, NY 10591	ASSISTANT DIRECTOR 35 00	97,878	35,860	0
CAMELIA MURESAN 15 DAYTON AVENUE SLEEPY HOLLOW, NY 10591	ACCOUNTING MANAGER 35 00	93,584	39,490	0
ROBERT BATTALY 15 DAYTON AVENUE SLEEPY HOLLOW, NY 10591	ASSISTANT DIRECTOR 35 00	97,878	19,634	0
Total number of other employees paid over \$50,000.				23

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)**3 Five highest-paid independent contractors for professional services (see instructions). If none, enter "NONE".**

(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
THE ROCKEFELLER UNIVERSITY 1230 YORK AVENUE NEW YORK, NY 10065	FINANCIAL SERVICES	543,361
Total number of others receiving over \$50,000 for professional services.		0

Part IX-A Summary of Direct Charitable Activities

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.

	Expenses
1 ARCHIVAL PROGRAM - THE ROCKEFELLER ARCHIVE CENTER IS AN INDEPENDENT OPERATING FOUNDATION THAT PRESERVES AND MAKES AVAILABLE FOR RESEARCH THE ARCHIVAL COLLECTIONS OF MEMBERS OF THE ROCKEFELLER FAMILY, INSTITUTIONS AND ORGANIZATIONS FOUNDED BY ROCKEFELLER FAMILY MEMBERS (INCLUDING THE ROCKEFELLER FOUNDATION, ROCKEFELLER BROTHERS FUND, WINTHROP ROCKEFELLER FOUNDATION, GENERAL EDUCATION BOARD, ROCKEFELLER UNIVERSITY, POPULATION COUNCIL, ASIA SOCIETY, AND MANY OTHER ORGANIZATIONS) AND THE RECORDS OF OTHER PHILANTHROPIC AND SERVICE ORGANIZATIONS SUCH AS THE FORD FOUNDATION, THE COMMONWEALTH FUND, RUSSELL SAGE FOUNDATION, W T GRANT FOUNDATION, MARKLE FOUNDATION, THE SOCIAL SCIENCE RESEARCH COUNCIL AND THE FOUNDATION CENTER THE CENTER ALSO HOLDS EXTENSIVE COLLECTIONS OF THE PERSONAL PAPERS OF TRUSTEES, OFFICERS, FACULTY AND ASSOCIATES WHO WERE AFFILIATED WITH THESE INSTITUTIONS CONTINUED - SEE SCHEDULE ATTACHED	5,635,565
2 RESEARCH & EDUCATION - THE RESEARCH AND EDUCATION DEPARTMENT OVERSEES MANY OF THE EXTERNAL PROGRAMS OF THE ROCKEFELLER ARCHIVE CENTER IT ADMINISTERS A COMPETITIVE PROGRAM THAT AWARDS 40 TO 50 TRAVEL REIMBURSEMENT EACH YEAR TO GRADUATE STUDENTS, FACULTY MEMBERS, AND INDEPENDENT SCHOLARS IT ORGANIZES AND HOSTS SEVERAL WORKSHOPS AND CONFERENCES EACH YEAR STAFF MEMBERS ON THE RESEARCH AND EDUCATION TEAM EDIT AND PUBLISH A SERIES OF RESEARCH REPORTS DESCRIBING SCHOLARLY WORK AT THE RAC, A PUBLISHING PROGRAM THAT IS NOW PRIMARILY ELECTRONIC AND WEB-BASED CONTINUED - SEE SCHEDULE ATTACHED	543,134
3	
4	

Part IX-B Summary of Program-Related Investments (see instructions)

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1	
2	
All other program-related investments See instructions	
3	
Total. Add lines 1 through 3	0

Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.)

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes		
a	Average monthly fair market value of securities.	1a	107,885,911
b	Average of monthly cash balances.	1b	2,635,202
c	Fair market value of all other assets (see instructions).	1c	0
d	Total (add lines 1a, b, and c).	1d	110,521,113
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation).	1e	0
2	Acquisition indebtedness applicable to line 1 assets.	2	0
3	Subtract line 2 from line 1d.	3	110,521,113
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions).	4	1,657,817
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4.	5	108,863,296
6	Minimum investment return. Enter 5% of line 5.	6	5,443,165

Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here ☒ and do not complete this part.)

1	Minimum investment return from Part X, line 6.	1	
2a	Tax on investment income for 2016 from Part VI, line 5.	2a	
b	Income tax for 2016 (This does not include the tax from Part VI).	2b	
c	Add lines 2a and 2b.	2c	
3	Distributable amount before adjustments. Subtract line 2c from line 1.	3	
4	Recoveries of amounts treated as qualifying distributions.	4	
5	Add lines 3 and 4.	5	
6	Deduction from distributable amount (see instructions).	6	
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1.	7	

Part XII Qualifying Distributions (see instructions)

1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
a	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26.	1a	5,426,565
b	Program-related investments—total from Part IX-B.	1b	0
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes.	2	383,867
3	Amounts set aside for specific charitable projects that satisfy the		
a	Suitability test (prior IRS approval required).	3a	
b	Cash distribution test (attach the required schedule).	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4.	4	5,810,432
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b (see instructions).	5	0
6	Adjusted qualifying distributions. Subtract line 5 from line 4.	6	5,810,432

Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years.

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2015	(c) 2015	(d) 2016
1 Distributable amount for 2016 from Part XI, line 7				
2 Undistributed income, if any, as of the end of 2016				
a Enter amount for 2015 only.				
b Total for prior years 20____, 20____, 20____				
3 Excess distributions carryover, if any, to 2016				
a From 2011.				
b From 2012.				
c From 2013.				
d From 2014.				
e From 2015.				
f Total of lines 3a through e.				
4 Qualifying distributions for 2016 from Part XII, line 4 ▶ \$ _____				
a Applied to 2015, but not more than line 2a				
b Applied to undistributed income of prior years (Election required—see instructions).				
c Treated as distributions out of corpus (Election required—see instructions).				
d Applied to 2016 distributable amount.				
e Remaining amount distributed out of corpus				
5 Excess distributions carryover applied to 2016 (If an amount appears in column (d), the same amount must be shown in column (a))				
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5				
b Prior years' undistributed income Subtract line 4b from line 2b				
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed.				
d Subtract line 6c from line 6b Taxable amount—see instructions				
e Undistributed income for 2015 Subtract line 4a from line 2a Taxable amount—see instructions				
f Undistributed income for 2016 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2017				
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 2011 not applied on line 5 or line 7 (see instructions).				
9 Excess distributions carryover to 2017. Subtract lines 7 and 8 from line 6a				
10 Analysis of line 9				
a Excess from 2012.				
b Excess from 2013.				
c Excess from 2014.				
d Excess from 2015.				
e Excess from 2016.				

Part XIV Private Operating Foundations (see instructions and Part VII-A, question 9)

1a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2016, enter the date of the ruling. 2006-06-20

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

	Tax year	Prior 3 years			(e) Total
	(a) 2016	(b) 2015	(c) 2014	(d) 2013	
2a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed	5,312,224	5,286,952	5,204,580	5,027,525	20,831,281
b 85% of line 2a	4,515,390	4,493,909	4,423,893	4,273,396	17,706,589
c Qualifying distributions from Part XII, line 4 for each year listed	5,810,432	5,697,452	5,900,257	5,211,178	22,619,319
d Amounts included in line 2c not used directly for active conduct of exempt activities	0	0	0	0	0
e Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c	5,810,432	5,697,452	5,900,257	5,211,178	22,619,319
3 Complete 3a, b, or c for the alternative test relied upon					
a "Assets" alternative test—enter					
(1) Value of all assets					0
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					0
b "Endowment" alternative test— enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed.	3,628,777	3,524,635	3,644,319	3,435,004	14,232,735
c "Support" alternative test—enter					
(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					0
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii).					0
(3) Largest amount of support from an exempt organization					0
(4) Gross investment income					0

Part XV Supplementary Information (Complete this part only if the organization had \$5,000 or more in assets at any time during the year—see instructions.)

1 Information Regarding Foundation Managers:

a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000) (See section 507(d)(2))

b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest

2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:

Check here ☐ if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d.

a The name, address, and telephone number or e-mail address of the person to whom applications should be addressed

NORINE HOCHMAN ADMINISTRATOR
15 DAYTON AVENUE
SLEEPY HOLLOW, NY 10591
(914) 366-6309
RACGRANTS@ROCKARCH.ORG

b The form in which applications should be submitted and information and materials they should include

APPLICANTS COMPLETE A FOUR-PAGE FORM AND MAIL IT TO THE ADDRESS PROVIDED ABOVE. APPLICANTS MAY ALSO E-MAIL AN APPLICATION TO RACGRANTS@ROCKARCH.ORG

c Any submission deadlines

NOVEMBER 15TH OF EACH CALENDAR YEAR

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

AWARDS ARE MADE TO INDIVIDUALS. INSTITUTIONS ARE NOT ELIGIBLE TO APPLY. THE REIMBURSEMENT DOES NOT SUPPORT RESEARCH AT OTHER INSTITUTIONS, AND IT DOES NOT PROVIDE GENERAL TUITION SUPPORT. APPLICATION TO THE PROGRAM IS OPEN TO U.S. CITIZENS AND CITIZENS OF FOREIGN COUNTRIES. CERTAIN U.S. GOVERNMENT REQUIREMENTS WILL APPLY TO NON-U.S. CITIZENS.

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i> See Additional Data Table				
Total			3a	148,470
b <i>Approved for future payment</i>				
Total			3b	0

Enter gross amounts unless otherwise indicated		Unrelated business income		Excluded by section 512, 513, or 514		(e) Related or exempt function income (See instructions)
	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount		
1 Program service revenue						
a COPY SERVICE FOR RESEARCH						18,557
b _____						
c _____						
d _____						
e _____						
f _____						
g Fees and contracts from government agencies						
2 Membership dues and assessments.						
3 Interest on savings and temporary cash investments			14	14,820		
4 Dividends and interest from securities.			14	5,939,855		
5 Net rental income or (loss) from real estate						
a Debt-financed property.						
b Not debt-financed property.						
6 Net rental income or (loss) from personal property						
7 Other investment income.						
8 Gain or (loss) from sales of assets other than inventory						
9 Net income or (loss) from special events						
10 Gross profit or (loss) from sales of inventory						
11 Other revenue a _____						
b _____						
c _____						
d _____						
e _____						
12 Subtotal Add columns (b), (d), and (e).		0		5,954,675		18,557
13 Total. Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify calculations.)						5,973,232

[illegible]

Part XVII

- | | Yes | No |
|-------|-----|----|
| 1a(1) | | No |
| 1a(2) | | No |
| 1b(1) | | No |
| 1b(2) | | No |
| 1b(3) | | No |
| 1b(4) | | No |
| 1b(5) | | No |
| 1b(6) | | No |
| 1c | | No |

[illegible]

- 2a** Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? ☐ Yes ☒ No
- b** If "Yes," complete the following schedule

(a) Name of organization	(b) Type of organization	(c) Description of relationship

**Sign
Here**

* * * * *

Title

May the IRS discuss this return with the preparer shown below (see instr)? ☒ Yes ☐ No

**Paid
Preparer
Use Only**

Form 990PF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation				
(a) Name and address	Title, and average hours per week (b) devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	Expense account, (e) other allowances
JACK MEYERS	PRESIDENT/TRUSTEE 35 00	265,749	81,367	0
15 DAYTON AVENUE SLEEPY HOLLOW, NY 10591				
JAMES A SMITH	VICE-PRESIDENT 35 00	145,670	37,074	0
15 DAYTON AVENUE SLEEPY HOLLOW, NY 10591				
NEIL RUDENSTINE	CHAIR 1 00	0	0	0
15 DAYTON AVENUE SLEEPY HOLLOW, NY 10591				
STEPHEN HEINTZ	TRUSTEE 1 00	0	0	0
15 DAYTON AVENUE SLEEPY HOLLOW, NY 10591				
IRA KATZNELSON	TRUSTEE 1 00	0	0	0
15 DAYTON AVENUE SLEEPY HOLLOW, NY 10591				
RICHARD LIFTON	TRUSTEE 1 00	0	0	0
15 DAYTON AVENUE SLEEPY HOLLOW, NY 10591				
DAVID ROCKEFELLER JR	TRUSTEE 1 00	0	0	0
15 DAYTON AVENUE SLEEPY HOLLOW, NY 10591				
RAJIV SHAH	TRUSTEE 1 00	0	0	0
15 DAYTON AVENUE SLEEPY HOLLOW, NY 10591				
MEGAN SNIFFIN-MARINOFF	TRUSTEE 1 00	0	0	0
15 DAYTON AVENUE SLEEPY HOLLOW, NY 10591				

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
DANIEL R HUEBNER 415 NORTRIDGE ST GREENSBORO, NC 27403	NONE	NONE	REIMBURSEMENT OF TRAVEL	2,244
JOHN KIRK 5209 KAVANAUGH BOULEVARD LITTLE ROCK, AR 72207	NONE	NONE	REIMBURSEMENT OF TRAVEL	2,500
KIRK HALLAHAN 3230 PEPPERWOOD LANE FORT COLLINS, CO 80525	NONE	NONE	REIMBURSEMENT OF TRAVEL	1,478
CHARLOTTE LYDIA RILEY 15A DACRE ROAD LONDON E OPT UK	NONE	NONE	REIMBURSEMENT OF TRAVEL	3,981
SARA CLARE HARTLEY 56 SPEIRS ROAD BEARSDEN GLASGOW C LU UK	NONE	NONE	REIMBURSEMENT OF TRAVEL	4,000
Total ► 3a				148,470

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
ESTELLE BLASCHKE ANTHROPOLE 3093 1015 LAUSANNE SZ	NONE	NONE	REIMBURSEMENT OF TRAVEL	3,205
ARO VELMET INSTITUTE OF FRENCH STUDIES 15 WASHINGTON MEWS NEW YORK, NY 10003	NONE	NONE	REIMBURSEMENT OF TRAVEL	3,966
AARON EDDENS 3440 18TH AVENUE APT 4 MINNEAPOLIS, MN 55407	NONE	NONE	REIMBURSEMENT OF TRAVEL	2,658
ADRIAN JAMES BROWNE 12 OVER MILL DRIVE BIRMINGHAM B JL UK	NONE	NONE	REIMBURSEMENT OF TRAVEL	1,996
PENG XIAO 557 SOMERVILLE AVENUE SOMERVILLE, MA 02143	NONE	NONE	REIMBURSEMENT OF TRAVEL	1,686
Total ► 3a				148,470

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year				
VIVEK NEELAKANTAN 13 ADI SANKARAR STREET SRINAGAR COLONY THIRUMULL IN	NONE	NONE	REIMBURSEMENT OF TRAVEL	4,000
SILVIA BRASLAVSKY MUEHLENSTRASSE 50 MULHEIM AN DER RUHR GM	NONE	NONE	REIMBURSEMENT OF TRAVEL	3,315
IOANA CIRSTOCEA 2 AVENUE PAUL SIGNAC MONTREUIL FR	NONE	NONE	REIMBURSEMENT OF TRAVEL	1,030
KATHLEEN BERRIN 225-N AVENIDA MAJORCA LAGUNA WOODS, CA 92637	NONE	NONE	REIMBURSEMENT OF TRAVEL	3,760
CATHERINE BAYLIN 1933 SUSSEX ROAD BLACKSBURG, VA 24060	NONE	NONE	REIMBURSEMENT OF TRAVEL	2,000
Total ▶ 3a				148,470


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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year				
WEI-HUA LEE 8140 BOUNTY INDIANAPOLIS, IN 46236	NONE	NONE	REIMBURSEMENT OF TRAVEL	2,500
PAULA JOHANNA SAARI KYOSTI KALLION TIE B HELSINKI FI	NONE	NONE	REIMBURSEMENT OF TRAVEL	3,000
CAROLA OSSMER SCHLOSS 9 ROTTWEIL GM	NONE	NONE	REIMBURSEMENT OF TRAVEL	3,437
ALEX CAMERON SMITH 2 COOK ST ROZELLE NEW SOUTH WALES AS	NONE	NONE	REIMBURSEMENT OF TRAVEL	3,500
KARINA INES RAMACCIOTTI LAPRIDA 924 4 A BUENOS AIRES AR	NONE	NONE	REIMBURSEMENT OF TRAVEL	4,000
Total ▶ 3a				148,470


Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
GWYNETH MELLINGER 1969 SMITHLAND RD ROCKINGHAM, VA 22802	NONE	NONE	REIMBURSEMENT OF TRAVEL	1,553
TINA IRVINE 2743 E BUTTONWOOD LN BLOOMINGTON, IN 47401	NONE	NONE	REIMBURSEMENT OF TRAVEL	2,878
LESLIE HARRIS 4919 N ELKHART AVE WHITEFISH BAY, WI 53217	NONE	NONE	REIMBURSEMENT OF TRAVEL	1,500
MICHAEL A OSBORNE 1634 NW CREST PLACE CORVALLIS, OR 97330	NONE	NONE	REIMBURSEMENT OF TRAVEL	3,411
ROLV PETTER STORVIK AMDAM DRAMMENSVEIEN 52D 0271 OSLO NO	NONE	NONE	REIMBURSEMENT OF TRAVEL	3,000
Total ▶ 3a				148,470

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
JAN STOCKMANN OTTO-APPEL STREET 24 101495 BERLIN GM	NONE	NONE	REIMBURSEMENT OF TRAVEL	2,089
CHRISTINE PERALTA 603 W NEVADA ST APT1 URBANA, IL 61801	NONE	NONE	REIMBURSEMENT OF TRAVEL	3,117
MATTHIAS DULLER KRENNGASSE 5 8010 GRAZ AU	NONE	NONE	REIMBURSEMENT OF TRAVEL	2,988
EGLANTINE PASQUIER 13 RUE PIERRE NICOLE 75005 PARIS FR	NONE	NONE	REIMBURSEMENT OF TRAVEL	2,617
DEREK LEININGER 5114 IROQUOIS STREET COLLEGE OARK, MD 20740	NONE	NONE	REIMBURSEMENT OF TRAVEL	588
Total ▶ 3a				148,470

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
JESSICA BARNES DEPARTMENT OF GEOGRAPHY 709 BULL STREET COLUMBIA, SC 29208	NONE	NONE	REIMBURSEMENT OF TRAVEL	1,408
JULIA FOULKES 202 ST MARKS AVENUE 3 BROOKLYN, NY 11238	NONE	NONE	REIMBURSEMENT OF TRAVEL	2,000
NICOLAS GUILHOT 343 GOLD STREET 2802 BROOKLYN, NY 11201	NONE	NONE	REIMBURSEMENT OF TRAVEL	2,000
DAVID HAMMACK 14206 SOUTH WOODLAND ROAD SHAKER HEIGHTS, OH 44120	NONE	NONE	REIMBURSEMENT OF TRAVEL	2,000
RAEHEL LUTZ 206 WEST OAKLAND AVENUE OAKLAND, NJ 07436	NONE	NONE	REIMBURSEMENT OF TRAVEL	243
Total 				148,470
3a				


Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
ANDRES JIMENEZ ANGEL CALLE 128 A 18-35 APT 502 BOGOTA CO	NONE	NONE	REIMBURSEMENT OF TRAVEL	2,191
DAVID JAMES YEE 325 BELLVALE LAKES ROAD WARWICK, NY 10990	NONE	NONE	REIMBURSEMENT OF TRAVEL	52
DAVID HAMMACK 14206 SOUTH WOODLAND ROAD SHAKER HEIGHTS, OH 44120	NONE	NONE	REIMBURSEMENT OF TRAVEL	675
REIKO KANAZAWA 163 HORNBEAM CLOSE BRISTOL BS32 8FE UK	NONE	NONE	REIMBURSEMENT OF TRAVEL	3,118
AMANDA NIEDFELDT PO BOX 116 STOUGHTON, WI 53589	NONE	NONE	REIMBURSEMENT OF TRAVEL	2,842
Total ► 3a				148,470

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
TRACY NEUMANN 231 LAPRAIRIE STREET FERNDALE, MI 48220	NONE	NONE	REIMBURSEMENT OF TRAVEL	2,977
SHAWN MOURA 1420 W ABINGDON DR APT 409 ALEXANDRIA, VA 22314	NONE	NONE	BLANE - 05/04/18 02 44PM WORKSHEET PRIVATE FOUNDATION	1,207
MARIA CATALINA ZAPATA CALLE 30A 6-75 PISO 1 TORRE SUR BOGOTA CO	NONE	NONE	REIMBURSEMENT OF TRAVEL	2,535
MATTHEW KLINGLE 10 IROQUOIS CIRCLE BRUNSWICK, ME 04011	NONE	NONE	REIMBURSEMENT OF TRAVEL	1,599
SRIA CHATTERJEE 105 MCCORMICK HALL PRINCETON, NJ 08544	NONE	NONE	REIMBURSEMENT OF TRAVEL	1,000
Total 				148,470
3a				

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
ELIZABETH KATZ 770 5TH STREET NW APT 1101 WASHINGTON, DC 20001	NONE	NONE	REIMBURSEMENT OF TRAVEL	562
JOANIE E MEHARRY JESUS COLLEGE CAMBRIDGE CB BL UK	NONE	NONE	REIMBURSEMENT OF TRAVEL	2,972
RAFAEL R IORIS 10340 EAST JEWELL AVENUE 79 DENVER, CO 80247	NONE	NONE	REIMBURSEMENT OF TRAVEL	2,403
JUSTINA LICATA 7 STONEHOUSE CT GREENSBORO, NC 27455	NONE	NONE	REIMBURSEMENT OF TRAVEL	1,474
DANIEL FRANKEN 1340 N CURSON AVENUE 202 LOS ANGELES, CA 90046	NONE	NONE	REIMBURSEMENT OF TRAVEL	3,806
Total ▶ 3a				148,470

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
GIUSEPPE BIANCO 4 RUE AFFRE C/O LUCA PALTRINIERI PARIS 75018 FR	NONE	NONE	REIMBURSEMENT OF TRAVEL	2,173
EVAN R WARD DEPT OF HISTORY BRIGHAM YOUNG UNIV BOX 2155 PROVO, UT 84602	NONE	NONE	REIMBURSEMENT OF TRAVEL	5,000
FELIPE BARRADAS CORREIA CASTRO BAST 1425 RUA TERRA ROXA CASCABEL 85816 BR	NONE	NONE	REIMBURSEMENT OF TRAVEL	2,029
ARNAB CHAKRABORTY WENTWORTH COLLEGE/ROOM 007 BLOCK D1 YORK YO DD UK	NONE	NONE	REIMBURSEMENT OF TRAVEL	3,901
VANESSA DAVIES 2403 MILVIA STREET BERKELEY, CA 94704	NONE	NONE	REIMBURSEMENT OF TRAVEL	2,523
Total ▶ 3a				148,470

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
DEBORAH COHN 2525 E ROCK CREEK DRIVE BLOOMINGTON, IN 47401	NONE	NONE	REIMBURSEMENT OF TRAVEL	1,500
ELENA HRISTOVA 224 CHURCH STREET SE / 225 FORD HALL MINNEAPOLIS, MN 55455	NONE	NONE	REIMBURSEMENT OF TRAVEL	3,063
APRAJITA SARCAR 454 FRONTENAC STREET KINGSTON ONTARIO KLT CA	NONE	NONE	REIMBURSEMENT OF TRAVEL	2,923
GREGORY F DOMBER 1 GRAND AVENUE SAN LUIS OBISPO, CA 93407	NONE	NONE	REIMBURSEMENT OF TRAVEL	1,922
BEGUM ADALET 102 FIRST STREET APT 3 ITHACA, NY 14850	NONE	NONE	REIMBURSEMENT OF TRAVEL	500
Total ► 3a				148,470

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
ANDREW J FALK 110 TIGER PAW PATH YORKTOWN, VA 23693	NONE	NONE	REIMBURSEMENT OF TRAVEL	2,500
BRANDON KIRK WILLIAMS 150 HAIGHT STREET 402 SAN FRANCISCO, CA 94102	NONE	NONE	REIMBURSEMENT OF TRAVEL	1,375
Total 				148,470
3a				

TY 2016 Accounting Fees Schedule**Name:** ROCKEFELLER ARCHIVE CENTER**EIN:** 20-8030810

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
ACCOUNTING & AUDITING	43,306	0	0	0
TAX PREPARATION	14,600	0	0	0

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

TY 2016 Depreciation Schedule

Name: ROCKEFELLER ARCHIVE CENTER

EIN: 20-8030810

Description of Property	Date Acquired	Cost or Other Basis	Prior Years' Depreciation	Computation Method	Rate / Life (# of years)	Current Year's Depreciation Expense	Net Investment Income	Adjusted Net Income	Cost of Goods Sold Not Included
BUILDING AND EQUIPMENT		17,416,787	3,857,592	NC	0 %	622,131	0	0	
LAND		4,838,000		L		0	0	0	

TY 2016 General Explanation Attachment

Name: ROCKEFELLER ARCHIVE CENTER
EIN: 20-8030810

General Explanation Attachment

Identifier	Return Reference	Explanation	
1	SUMMARY OF DIRECT CHARITABLE ACTIVITIES	FORM 990-PF, PART IX-A, LINES 1 & 2	<p>ARCHIVAL PROGRAM (CONTINUED) THE ARCHIVE CENTER IS LOCATED IN HILLCREST, A HOME OF WESTCHESTER COUNTY FIELD STONE BUILT FOR MARTHA BAIRD ROCKEFELLER (1895-1971), THE SECOND WIFE OF JOHN D ROCKEFELLER, JR (1874-1960) THE HOUSE WAS DESIGNED BY MOTT B SCHMIDT AND WAS COMPLETED IN 1963 MRS ROCKEFELLER PERSONALLY PLANNED THE FURNISHINGS OF THE HOUSE, BUT ADVANCING AGE AND ILLNESS PREVENTED HER FROM LIVING IN IT AFTER HER DEATH, THE HOUSE WAS GIVEN TO THE ROCKEFELLER BROTHERS FUND AS PART OF HER RESIDUAL ESTATE IN MARCH 1974 THE ROCKEFELLER BROTHERS FUND GAVE THE HOUSE AND THE SURROUNDING 24 ACRES OF GROUNDS FOR USE AS THE ROCKEFELLER ARCHIVE CENTER THE HOUSE PROVIDES WORK SPACE FOR BOTH RESEARCHERS AND STAFF AND INCLUDES A FEW ROOMS WHERE ROCKEFELLER MEMORABILIA ARE ON DISPLAY RESEARCHERS WHO VISIT THE RAC WORK IN THE READING ROOM ON THE SECOND FLOOR OF THE HOUSE AND MAY USE THE RESEARCHERS' LOUNGE ON THE FIRST FLOOR THE CENTER'S READING ROOM IS OPEN TO RESEARCHERS ON WEEKDAYS FROM 9 00AM UNTIL 5 15PM RESEARCH APPOINTMENTS ARE REQUIRED APPOINTMENTS MUST BE MADE WITH, AND CONFIRMED BY, A STAFF MEMBER IN ADVANCE OF A RESEARCH VISIT PHOTO IDENTIFICATION IS REQUIRED RESEARCHERS ARE ADVISED TO CONTACT THE CENTER TO MAKE AN APPOINTMENT BEFORE MAKING TRAVEL PLANS DRIVING DIRECTORS, A LISTING OF THE CENTER'S HOLIDAY CLOSINGS AND LOCAL ACCOMMODATION INFORMATION IS AVAILABLE AT THE RESEARCHER INFORMATION SECTION OF THIS WEBSITE RESEARCHERS ARE INVITED TO WRITE TO THE CENTER, DESCRIBING THEIR PROJECTS IN SPECIFIC TERMS THE STAFF WILL RESPOND WITH A DESCRIPTION OF THE SCOPE AND CONTENT OF RELEVANT MATERIALS IN THE COLLECTIONS RESEARCH & EDUCATION (CONTINUED) THE EDUCATIONAL PROGRAMS ENGAGE A NUMBER OF AREA COLLEGES AND UNIVERSITIES THE RAC BRINGS UNIVERSITY FACULTY AND THEIR GRADUATE OR UNDERGRADUATE STUDENTS TO THE ARCHIVE CENTER FOR COURSE-RELATED LECTURES AND SEMINARS, ADVISES STUDENTS ON PAPERS AND THESES, AND HELPS FACULTY TO FIND PRIMARY MATERIALS FOR THEIR TEACHING THE STAFF ALSO PARTICIPATES IN MEETINGS OF VARIOUS PROFESSIONAL ASSOCIATIONS, DELIVERING PAPERS AND ORGANIZING PANELS FOR RAC RESEARCHERS A NEW EDUCATIONAL PROGRAM HAS BEEN DEVELOPED IN COLLABORATION WITH TWO ELEMENTARY SCHOOLS IN TARRY TOWN AND POCANTICO HILLS ITS AIM IS TO TEACH YOUNG STUDENTS ABOUT THE USE OF PRIMARY SOURCES IN THEIR HISTORY CLASSES THERE ARE SEVERAL PUBLIC OUTREACH INITIATIVES OF THE RESEARCH AND EDUCATION PROGRAM THE RAC OCCASIONALLY INVITES MEMBERS OF LOCAL HISTORICAL SOCIETIES TO TOUR THE ARCHIVES IT ORGANIZES EXHIBITS AND PRESENTATIONS ABOUT ARCHIVAL HOLDINGS FOR BOARD AND STAFF MEMBERS OF DONOR ORGANIZATIONS THE RESEARCH AND EDUCATION STAFF ALSO WORKS WITH OTHER POCANTICO-BASED ORGANIZATIONS ON PUBLIC PROGRAMS, SHOWING FILMS AND ORGANIZING EXHIBITIONS AND LECTURES FOR THE LOCAL COMMUNITY</p>

TY 2016 Investments - Other Schedule

Name: ROCKEFELLER ARCHIVE CENTER

EIN: 20-8030810

Category/ Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value
ENDOWMENT FUNDS	AT COST	110,754,459	110,754,459

**TY 2016 Land, Etc.
Schedule****Name:** ROCKEFELLER ARCHIVE CENTER**EIN:** 20-8030810

Category / Item	Cost / Other Basis	Accumulated Depreciation	Book Value	End of Year Fair Market Value
BUILDING AND EQUIPMENT	17,416,787	4,479,723	12,937,064	
LAND	4,838,000	0	4,838,000	

TY 2016 Legal Fees Schedule**Name:** ROCKEFELLER ARCHIVE CENTER**EIN:** 20-8030810

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
LEGAL FEES	572	0	0	0

TY 2016 Other Assets Schedule

Name: ROCKEFELLER ARCHIVE CENTER

EIN: 20-8030810

Other Assets Schedule

Description	Beginning of Year - Book Value	End of Year - Book Value	End of Year - Fair Market Value
EXHIBITION AND ARCHIVAL ART	2,646,980	2,646,980	2,646,980

TY 2016 Other Expenses Schedule**Name:** ROCKEFELLER ARCHIVE CENTER**EIN:** 20-8030810**Other Expenses Schedule**

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
BANK CHARGES	7,089	0	0	6,026
COMPUTER, SOFTWARE & LICENSING	67,175	0	0	47,986
DIGITIZATION AND MICROFILMING	151,726	0	0	98,763
MEMBERSHIPS	21,101	0	0	23,409
POSTAGE AND SUPPLIES	135,544	0	0	123,989

TY 2016 Other Income Schedule

Name: ROCKEFELLER ARCHIVE CENTER

EIN: 20-8030810

Other Income Schedule

Description	Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income
COPY SERVICE FOR RESEARCH	18,557		18,557

TY 2016 Other Increases Schedule

Name: ROCKEFELLER ARCHIVE CENTER

EIN: 20-8030810

Description	Amount
NET UNREALIZED GAIN ON INVESTMENTS	6,713,979

TY 2016 Other Liabilities Schedule**Name:** ROCKEFELLER ARCHIVE CENTER**EIN:** 20-8030810

Description	Beginning of Year - Book Value	End of Year - Book Value
DUE TO UNIVERSITY FOR INVESTMENT SERVICE	640	0

TY 2016 Other Professional Fees Schedule**Name:** ROCKEFELLER ARCHIVE CENTER**EIN:** 20-8030810

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
INVESTMENT FEES	543,361	543,361	543,361	0
ADVISORY & PROFESSIONAL SUPPORT	86,703	0	0	65,882
IT CONSULTANTS	20,400	0	0	20,400

TY 2016 Taxes Schedule**Name:** ROCKEFELLER ARCHIVE CENTER**EIN:** 20-8030810

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
FEDERAL EXCISE TAX	117,647	0	117,647	0

Schedule B (Form 990, 990-EZ, or 990-PF) <small>Department of the Treasury Internal Revenue Service</small>	Schedule of Contributors ▶ Attach to Form 990, 990-EZ, or 990-PF ▶ Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at www.irs.gov/form990	OMB No 1545-0047 2016
	Name of the organization ROCKEFELLER ARCHIVE CENTER	Employer identification number 20-8030810

Organization type (check one)

Filers of:	Section:
Form 990 or 990-EZ	<input type="checkbox"/> 501(c)() (enter number) organization
	<input type="checkbox"/> 4947(a)(1) nonexempt charitable trust not treated as a private foundation
	<input type="checkbox"/> 527 political organization
Form 990-PF	<input checked="" type="checkbox"/> 501(c)(3) exempt private foundation
	<input type="checkbox"/> 4947(a)(1) nonexempt charitable trust treated as a private foundation
	<input type="checkbox"/> 501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.
Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

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

Special Rules

- ☐ For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33¹/₃% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.
- ☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.
- ☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Do not complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year. . . . ▶ \$ _____

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

Name of organization ROCKEFELLER ARCHIVE CENTER	Employer identification number 20-8030810
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Part I Contributors (see instructions) Use duplicate copies of Part I if additional space is needed

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

Employer identification number

20-8030810

Part II	Noncash Property
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Schedule B (Form 990, 990-EZ, or 990-PF) (2016)

Name of organization ROCKEFELLER ARCHIVE CENTER	Employer identification number 20-8030810
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Part III *Exclusively* religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of *exclusively* religious, charitable, etc., contributions of **\$1,000 or less** for the year. (Enter this information once. See instructions.) ► \$ _____

Use duplicate copies of Part III if additional space is needed

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

Additional Data

Software ID:
Software Version:
EIN: 20-8030810
Name: ROCKEFELLER ARCHIVE CENTER

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

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>1</u>	LAURENCE S ROCKEFELLER FUND	\$ 51,315	Person <input checked="" type="checkbox"/>
	30 ROCKEFELLER PLAZA ROOM 5600		Payroll <input type="checkbox"/>
	NEW YORK, NY10112		Noncash <input type="checkbox"/> (Complete Part II for noncash contribution)
<u>2</u>	THE FORD FOUNDATION	\$ 600,364	Person <input checked="" type="checkbox"/>
	320 EAST 43RD STREET		Payroll <input type="checkbox"/>
	NEW YORK, NY10017		Noncash <input type="checkbox"/> (Complete Part II for noncash contribution)
<u>3</u>	MEMORIAL SLOAN-KETTERING CANCER CENTER	\$ 29,260	Person <input checked="" type="checkbox"/>
	1275 YORK AVENUE		Payroll <input type="checkbox"/>
	NEW YORK, NY10021		Noncash <input type="checkbox"/> (Complete Part II for noncash contribution)
<u>4</u>	THE NEAR EAST FOUNDATION	\$ 5,000	Person <input checked="" type="checkbox"/>
	1275 YORK AVENUE		Payroll <input type="checkbox"/>
	NEW YORK, NY10021		Noncash <input type="checkbox"/> (Complete Part II for noncash contribution)
<u>5</u>	THE ROCKEFELLER FOUNDATION	\$ 135,660	Person <input checked="" type="checkbox"/>
	420 FIFTH AVENUE		Payroll <input type="checkbox"/>
	NEW YORK, NY10018		Noncash <input type="checkbox"/> (Complete Part II for noncash contribution)
<u>6</u>	THE ROCKEFELLER UNIVERSITY	\$ 500,000	Person <input checked="" type="checkbox"/>
	1230 YORK AVENUE		Payroll <input type="checkbox"/>
	NEW YORK, NY10065		Noncash <input type="checkbox"/> (Complete Part II for noncash contribution)

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>7</u>	RUSSELL SAGE FOUNDATION	\$ 10,000	Person <input checked="" type="checkbox"/>
	112 EAST 64TH STREET		Payroll <input type="checkbox"/>
	NEW YORK, NY10065		Noncash <input type="checkbox"/> (Complete Part II for noncash contribution)
<u>8</u>	SOCIAL SCIENCE RESEARCH COUNCIL	\$ 74,333	Person <input checked="" type="checkbox"/>
	ONE PIERREPOINT PLAZA 15TH FL		Payroll <input type="checkbox"/>
	BROOKLYN, NY11201		Noncash <input type="checkbox"/> (Complete Part II for noncash contribution)
<u>9</u>	THE COMMONWEALTH FUND	\$ 140,000	Person <input checked="" type="checkbox"/>
	ONE EAST 75TH STREET		Payroll <input type="checkbox"/>
	NEW YORK, NY10021		Noncash <input type="checkbox"/> (Complete Part II for noncash contribution)
<u>10</u>	THE JOHN HARTFORD FOUNDATION	\$ 100,000	Person <input checked="" type="checkbox"/>
	55 EAST 59TH STREET		Payroll <input type="checkbox"/>
	NEW YORK, NY10022		Noncash <input type="checkbox"/> (Complete Part II for noncash contribution)
<u>11</u>	NATIONAL COMMITTEE ON USCHINA RELATIONS	\$ 51,250	Person <input checked="" type="checkbox"/>
	71 WEST 23RD STREET		Payroll <input type="checkbox"/>
	NEW YORK, NY10010		Noncash <input type="checkbox"/> (Complete Part II for noncash contribution)
<u>12</u>	BLANCHETTE ROCKEFELLERCHARITABLE TRUST	\$ 37,320	Person <input checked="" type="checkbox"/>
	1200 CROWN COLONY DRIVE		Payroll <input type="checkbox"/>
	QUNICY, MA02169		Noncash <input type="checkbox"/> (Complete Part II for noncash contribution)

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

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>13</u>	INSTITUTE OF INTERNATIONAL EDUCATION		Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contribution)
	809 UNITED NATIONS PLAZA	\$ 36,556	
	NEW YORK, NY10017		
<u>14</u>	ASIA SOCIETY		Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contribution)
	725 PARK AVENUE	\$ 86,900	
	NEW YORK, NY10021		