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Form 990-PF

Department of the Treasury

Internal Revenue Service

As Filed Data -

DLN: 93491319019809

OMB No 1545-0052

2018

## **Return of Private Foundation**

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

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

Open to Public Inspection

| For                         | caler     | ndar year 2018, or tax year beginning 01-01-20   | )18 , aı                           | nd ei    | nding 12-31-          | 2018  |   |
|-----------------------------|-----------|--|------------------------------------|----------|-----------------------|---|---|
|                             |           | Indation<br>INDATION INC   |                                    |          |                       | entification numbe                            | r   |
|                             |           |  |                                    |          | 47-4498674            |   |   |
|                             |           | d street (or P O box number if mail is not delivered to street address)<br>RFOLK AVENUE STE 210                | Room/suite                         |          | <b>B</b> Telephone nu | mber (see instructio                          | ns)                                       |
|                             |           |  |                                    |          | (240) 449-3900        | ı   |   |
|                             |           | n, state or province, country, and ZIP or foreign postal code<br>MD 20814                                      |                                    |          | C If exemption        | application is pendin                         | g, check here                             |
|                             | neck al   |  | former public charity              |          | D 1 Foreign or        | ganizations, check he                         | Pro                                       |
| G CI                        | ieck ai   | Final return Amended return  | Torrier public charity             |          |                       | ganizations, check no                         | ▶ □                                       |
|                             |           | Address change Name change   |                                    |          |                       | k here and attach co                          |   |
| H C                         | neck ty   | /pe of organization ✓ Section 501(c)(3) exempt private   | foundation                         |          |                       | undation status was t<br>n 507(b)(1)(A), chec |   |
|                             | Section   | n 4947(a)(1) nonexempt charitable trust  |                                    |          | under section         | 11 307 (1)(1)(1), cliec                       | in Here                                   |
|                             |           |  | ☑ Cash ☐ Accru                     | ıal      |                       | ition is in a 60-mont                         |   |
|                             |           | from Part II, col (c),<br>▶\$ 9,914,431 ☐ Other (specify)<br>(Part I, column (d) must                          | be on cash basis )                 |          | under sectio          | n 507(b)(1)(B), chec                          | k here                                    |
| Pa                          | rt I      | Analysis of Revenue and Expenses (The total  | 1                                  |          |                       |   | (d) Disbursements                         |
|                             |           | of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions) | (a) Revenue and expenses per books | (ь)      | Net investment income | (c) Adjusted net income                       | for charitable purposes (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  | 42.005                             |          | 13.005                |   |   |
|                             | 3         | Interest on savings and temporary cash investments  Dividends and interest from securities                     | 76,655                             | <b>.</b> | 13,885<br>76,655      |   |   |
|                             | 5a        | Gross rents  | 70,033                             | ,<br>    | 70,033                |   |   |
|                             | ь         | Net rental income or (loss)  |                                    |          |                       |   |   |
| <u>e</u>                    | 6a        | Net gain or (loss) from sale of assets not on line 10  | 304,698                            | 3        |                       |   |   |
| Revenue                     | ь         | Gross sales price for all assets on line 6a  |                                    |          |                       |   |   |
| Se∨                         | _         | 2,911,660  |                                    |          | 304,698               |   |   |
| _                           | 7<br>8    | Capital gain net income (from Part IV, line 2)   |                                    |          | 304,030               |   |   |
|                             | 9         | Income modifications   |                                    |          |                       |   |   |
|                             | 10a       | Gross sales less returns and allowances  |                                    |          |                       |   |   |
|                             | ь         | Less Cost of goods sold  |                                    |          |                       |   |   |
|                             | C         | Gross profit or (loss) (attach schedule)   |                                    |          |                       |   |   |
|                             | 11        | Other income (attach schedule)   | 36,144                             | ŀ        |                       |   |   |
|                             | 12        | Total. Add lines 1 through 11  | 431,382                            | 2        | 395,238               |   |   |
|                             | 13        | Compensation of officers, directors, trustees, etc   |                                    |          |                       |   |   |
| _                           | 14        | Other employee salaries and wages  | 286,134                            | <b>.</b> |                       |   | 286,134                                   |
| ses                         | 15<br>16a | Pension plans, employee benefits   | 68,248<br><b>9</b> 3,825           | 1        |                       |   | 68,248<br>3,825                           |
| en Se                       | b         | Accounting fees (attach schedule)  | 1,450                              |          |                       |   | 1,450                                     |
| and Administrative Expenses | C         | Other professional fees (attach schedule)  | 99,131                             |          | 27,586                |   | 71,545                                    |
| ΙΛe                         | 17        | Interest   | 25 15,115                          |          |                       |   |   |
| trat                        | 18        | Taxes (attach schedule) (see instructions)   | 4,000                              | )        |                       |   |   |
| Z II                        | 19        | Depreciation (attach schedule) and depletion   | 21,418                             | 3        |                       |   |   |
| Ē                           | 20        | Occupancy  | 60,007                             | ,        |                       |   | 60,007                                    |
| Ā                           | 21        | Travel, conferences, and meetings  | 31,320                             |          |                       |   | 31,320                                    |
| anc                         | 22        | Printing and publications  |                                    |          |                       |   |   |
|                             | 23        | Other expenses (attach schedule)   | 35,558                             | 3        |                       |   | 35,558                                    |
| Operating                   | 24        | Total operating and administrative expenses.   |                                    |          |                       |   |   |
| <u>6</u>                    |           | Add lines 13 through 23  | 611,091                            | <b>.</b> | 27,586                |   | 558,087                                   |
| _                           | 25        | Contributions, gifts, grants paid  | 7,109,994                          | 1        |                       |   | 7,109,994                                 |
|                             | 26        | <b>Total expenses and disbursements.</b> Add lines 24 and 25   | 7,721,085                          | 5        | 27,586                |   | 7,668,081                                 |
|                             | 27        | Subtract line 26 from line 12  |                                    |          |                       |   |   |
|                             | а         | Excess of revenue over expenses and disbursements  | -7,289,703                         | 3        |                       |   |   |
|                             | ь         | Net investment income (if negative, enter -0-)   |                                    |          | 367,652               |   |   |
|                             | С         | Adjusted net income (If negative, enter -0-)   |                                    |          |                       |   |   |
| For                         | Paper     | work Reduction Act Notice, see instructions.   |                                    | •        | Cat No 11289>         | ( For   | m <b>990-PF</b> (2018)                    |

Form 990-PF (2018) Page 2 Attached schedules and amounts in the description column Beginning of year End of year Part II Balance Sheets should be for end-of-year amounts only (See instructions ) (a) Book Value (b) Book Value (c) Fair Market Value 1 Cash-non-interest-bearing 2 Savings and temporary cash investments 5,922,117 2,339,685 2,339,685 3 Accounts receivable ▶ Less allowance for doubtful accounts ▶ Pledges receivable 4 Less allowance for doubtful accounts ▶ Grants receivable . . . . . . . . . 5 6 Receivables due from officers, directors, trustees, and other

19,668

1,434,080

1,242,819

37,482

166.592

5,240,326

100,304

100,304

5,140,022

5,140,022 5,240,326

2

3

4

5

6

12,429,725

-7,289,703

5,140,022

5,140,022 Form 990-PF (2018)

1,240,546

6,334,200

9,914,431

2,510,201

3,943,040

58,900

10,162

12,444,940

15,215

15,215

12,429,725

12,429,725

12,444,940

disqualified persons (attach schedule) (see instructions) . . . . .

Investments—U S and state government obligations (attach schedule)

Investments—corporate stock (attach schedule) . . . . . . . Investments—corporate bonds (attach schedule) . . . . . . .

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

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

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

Other notes and loans receivable (attach schedule)

Prepaid expenses and deferred charges . . . . . .

Investments—land, buildings, and equipment basis ▶

Investments—other (attach schedule) . . . . . .

Less accumulated depreciation (attach schedule) ▶ 26,773

Less accumulated depreciation (attach schedule) ▶

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

Foundations that follow SFAS 117, check here ▶ □

and complete lines 24 through 26 and lines 30 and 31.

Foundations that do not follow SFAS 117, check here ▶

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

Capital stock, trust principal, or current funds . . . . . . . . .

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 30 (must agree with end-

Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30

Land, buildings, and equipment basis ▶ \_

instructions Also, see page 1, item I)

Other assets (describe > \_

Other liabilities (describe ▶\_

Grants payable

Unrestricted

Temporarily restricted

Permanently restricted . .

and complete lines 27 through 31.

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

Decreases not included in line 2 (itemize) ▶

Enter amount from Part I, line 27a . . . . . . .

Other increases not included in line 2 (itemize) > \_\_\_\_

Less allowance for doubtful accounts

| Assets |  |
|--------|--|
|        |  |

7

8

9

10a

h

С

11

12

13 14

15

16

17

18

19

20

21 22

23

24

25

28 29

31 Part III

Liabilities

Balances

Fund 26

ŏ

Assets 27

Net 30

2

|  | e the kınd(s) of property sold (e g ,<br>arehouse, or common stock, 200 shs                                      |                                  | (b) How acquired P—Purchase D—Donation     | (mo day yr )                                      | (d)<br>Date sold<br>(mo , day, yr )                          |
|--|--|----------------------------------|--|---|--|
| 1 a PUBLICLY TRADED SECU   | RITIES   |                                  | D  |   |  |
| ь  |  |                                  |  |   |  |
| С  |  |                                  |  |   |  |
| d  |  |                                  |  |   |  |
| e  |  |                                  |  |   |  |
| (e)<br>Gross sales price   | (f) Depreciation allowed   | Cost or                          | (g)<br>other basis                         | Gain d  | h)<br>or (loss)  |
| <u> </u>   | (or allowable)   | plus exp                         | ense of sale                               |   | f) minus (g)   |
| · · · · · · · · · · · · · · · · · · ·                                | 1,660  |                                  | 2,606,9                                    | 962   | 304,698  |
| b  |  |                                  |  |   |  |
| C  |  |                                  |  |   |  |
| d  |  |                                  |  |   |  |
| e  |  |                                  |  |   |  |
| Complete only for assets   | s showing gain in column (h) and ow  | ned by the foundation            | on 12/31/69                                |   | (I)  |
| (i)<br>F M V as of 12/31/69  | (j)<br>Adjusted basis<br>as of 12/31/69  | Excess                           | ( <b>k)</b><br>of col (ı)<br>l (յ), ıf any | col (k), but not                                  | (h) gain minus<br>: less than -0-) <b>or</b><br>·om col (h)) |
| a  |  |                                  |  |   | 304,698  |
| b  |  |                                  |  |   | ·  |
| С  |  |                                  |  |   |  |
| d  |  |                                  |  |   |  |
| e  |  |                                  |  |   |  |
| ·  | gain or (loss) s defined in sections :   |                                  | Part İ, line 7                             | } 2   | 304,698<br>304,698   |
|  | Jnder Section 4940(e) for Reprivate foundations subject to the sec   |                                  |  |   |  |
| f section 4940(d)(2) applies, le<br>Vas the foundation liable for th | •  | ble amount of any year           | · in the base peri                         | ,<br>   | es 🔽 No  |
| 1 Enter the appropriate an   | nount in each column for each year,  | see instructions before          | making any ent                             | ries  |  |
| (a) Base period years Calendar year (or tax year beginning in)       | <b>(b)</b><br>Adjusted qualifying distributions  | (c)<br>Net value of noncharitab  | lle-use assets                             | <b>(d)</b> Distribution rat (col (b) divided by o |  |
| 2017   | 3,351,225  |                                  | 2,541,750                                  |   | 1 318472   |
| 2016   | 1,626,995  |                                  | 10,068,575                                 |   | 0 161591   |
| 2015   | 90,000   |                                  | 76,450                                     |   | 1 177240   |
| 2014   |  |                                  |  |   |  |
| 2013   |  |                                  |  |   |  |
| 2 Total of line 1, column (  | d)   |                                  |  | 2   | 2 657303   |
| number of years the four <b>4</b> Enter the net value of no          | o for the 5-year base period—divide indation has been in existence if less incharitable-use assets for 2018 from | than 5 years<br>n Part X, line 5 |  | 3   | 0 885768<br>3,801,012  |
| 5 Multiply line 4 by line 3  |  |                                  |  | 5   | 3,366,815  |
|  | ent income (1% of Part I, line 27b)  |                                  | <b>├</b>                                   | 6   | 3,677  |
|  |  |                                  |  | 7   | 3,370,492  |
|  | ons from Part XII, line 4 ,<br>eater than line 7, check the box in Pa  |                                  |  |   |  |
|  |  |                                  |  | E.  | orm QQQ-DE (2018)  |

Page **6** 

| 5a            | During the year did the foundation p  | pay o        | r incur any amount to          |                             |  |           |          |        |        | Yes              | No   |
|---------------|---|--------------|--------------------------------|-----------------------------|--|-----------|----------|--------|--------|------------------|------|
|               | (1) Carry on propaganda, or otherw  |              | · -                            |                             | ļ  | Yes       | <b>✓</b> | No     |        |                  |      |
|               | (2) Influence the outcome of any sp   |              | •                              |                             |  |           |          |        |        |                  |      |
|               | on, directly or indirectly, any vo  |              | -                              |                             | • •  | Yes       | <b>✓</b> | No     |        |                  |      |
|               | (3) Provide a grant to an individual  |              | • • • •                        |                             |  | Yes       | <b>✓</b> | No     |        |                  |      |
|               | (4) Provide a grant to an organizati  |              |                                |                             |  |           |          |        |        |                  |      |
|               | in section 4945(d)(4)(A)? See in  |              |                                |                             | • •  | Yes       | <b>✓</b> | No     |        |                  |      |
|               | (5) Provide for any purpose other the   |              |                                |                             |  |           |          |        |        |                  |      |
|               | educational purposes, or for the  |              | · ·                            |                             |  | Yes       | ✓        | No     |        |                  |      |
| b             | If any answer is "Yes" to 5a(1)-(5),  |              |                                |                             |  | bed in    |          |        |        |                  |      |
|               | Regulations section 53 4945 or in a   |              |                                |                             |  |           |          | F      | 5b     |                  |      |
| _             | Organizations relying on a current n  |              |                                |                             |  | . –       | Ш        |        |        |                  |      |
| С             | If the answer is "Yes" to question 5  |              |                                | ·                           | ·  | _         | _        |        |        |                  |      |
|               | tax because it maintained expenditu<br>If "Yes," attach the statement require |              |                                |                             | • •  | Yes       | Ш        | No     |        |                  |      |
| <b>-</b> -    | •   |              | · -                            |                             |  |           |          |        |        |                  |      |
| <b>6</b> a    | Did the foundation, during the year,  |              |                                |                             | ıms on                                     | _         | _        |        |        |                  |      |
| <b>L</b>      | a personal benefit contract?<br>Did the foundation, during the year,          |              |                                |                             | •<br>• • • • • • • • • • • • • • • • • • • | Yes       | ✓        | No     | 6b     |                  | NI.  |
| b             | If "Yes" to 6b, file Form 8870  | рау          | premiums, directly or ind      | irrectly, on a personal be  | nent contract?                             |           | •        | F      | OD     |                  | No   |
| 7a            | At any time during the tax year, wa   | c tha        | foundation a party to a r      | archibited tay chalter tran | acaction?                                  | _         |          |        |        |                  |      |
|               | If yes, did the foundation receive ar   |              |                                |                             |  | Yes       | ✓        | No     | 7b     |                  |      |
| 8             | Is the foundation subject to the sect   |              | •                              |                             |  | n or      |          | F      | 70     |                  |      |
| •             | excess parachute payment during th  |              |                                |                             | I  | _         |          |        |        |                  |      |
|               | Information About (   |              |                                |                             | His  | Yes       |          |        |        |                  |      |
| Pai           | and Contractors   | JIIIC        | ers, Directors, Trust          | lees, roundation Ma         | illagers, nig                              | illy Pai  | IU EII   | іріоу  | ees,   |                  |      |
| 1             | List all officers, directors, trusted   | oc f         | oundation managers ar          | nd their compensation       | Saa instructi                              | onc       |          |        |        |                  |      |
| <u> </u>      | List all officers, unectors, trustee  |              | ( <b>b)</b> Title, and average | (c) Compensation (If        | (d) Contri                                 |           |          | Γ,     |        |                  |      |
|               | (a) Name and address  | ļ .          | hours per week                 | not paid, enter             | employee ben                               | efıt plan | s and    |        |        | se acc<br>lowanc |      |
|               |   | L            | devoted to position            | -0-)                        | deferred co                                | mpensat   | ion      |        |        |                  |      |
|               | I LAUFER  | PRES<br>10 0 | SIDENT<br>0                    | 0                           |  |           | 0        |        |        |                  | 0    |
| 7920<br>STE 2 | NORFOLK AVENUE<br>10  |              |                                |                             |  |           |          |        |        |                  |      |
|               | ESDA, MD 20814  |              |                                |                             |  |           |          |        |        |                  |      |
|               | EN LAUFER   | TREA<br>1 00 | ASURER, S                      | 0                           |  |           | 0        |        |        |                  | 0    |
| 7920<br>STE 2 | NORFOLK AVENUE<br>10  | "            |                                |                             |  |           |          |        |        |                  |      |
| BETH          | ESDA, MD 20814  |              |                                |                             |  |           |          |        |        |                  |      |
|               | Compensation of five highest-pa   | id er        | nployees (other than tl        | hose included on line 1     |  |           |          | ne, en | ter "l | NONE.            |      |
| (a) l         | Name and address of each employee   | naid         | (b) Title, and average         |                             | (d) Contri                                 |           |          | (a) F  | vnens  | se acco          | unt  |
| (4)           | more than \$50,000  | paid         | nours per week                 | (c) Compensation            | plans and                                  |           |          |        |        | owance           |      |
|               |   |              | devoted to position            |                             | compe                                      | nsation   |          |        |        |                  |      |
| ADAN          | 1 SIMON   |              | EXECUTIVE DI                   | 200,37                      | '5   | 10,       | .019     |        |        |                  |      |
|               | NORFOLK AVENUE  |              | 40 00                          |                             |  |           |          |        |        |                  |      |
| STE 2         | 210<br>ESDA, MD 20814   |              |                                |                             |  |           |          |        |        |                  |      |
|               |   |              |                                |                             |  |           |          |        |        |                  |      |
|               |   |              | 1                              |                             |  |           |          |        |        |                  |      |
|               |   |              |                                |                             |  |           |          |        |        |                  |      |
|               |   |              | 1                              |                             |  |           |          |        |        |                  |      |
|               |   |              |                                |                             |  |           | _        |        |        |                  |      |
|               |   |              | 1                              |                             |  |           |          |        |        |                  |      |
| -             |   |              |                                |                             |  |           | -        |        |        |                  |      |
|               |   |              | 1                              |                             |  |           |          |        |        |                  |      |
| Tota          | number of other employees paid ov   | er \$5       | 0,000                          | <del>.</del>                |  | <b>•</b>  |          |        |        |                  |      |
|               | . , , ,   |              |                                |                             |  |           |          | Form   | 990    | D-PF (           | 2018 |
|               |   |              |                                |                             |  |           |          |        |        |                  |      |

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

| Form 990-PF (2018)   |  | Page <b>7</b>             |
|--|--|---------------------------|
| Part VIII Information About Officers, Directors, Trust and Contractors (continued)   | ees, Foundation Managers, Highly I                     | Paid Employees,           |
| 3 Five highest-paid independent contractors for professional s   | services (see instructions). If none, ente             | er "NONE".                |
| (a) Name and address of each person paid more than \$50,000  | (b) Type of service                                    | (c) Compensation          |
| NONE   |  |                           |
|  |  |                           |
|  |  |                           |
|  |  |                           |
|  |  |                           |
|  |  |                           |
|  |  |                           |
|  |  |                           |
|  |  |                           |
| Total number of others receiving over \$50,000 for professional services.  |  | <u> </u>                  |
| Part IX-A Summary of Direct Charitable Activities  | de velevent statistical information such as the number | of                        |
| List the foundation's four largest direct charitable activities during the tax year Inclu<br>organizations and other beneficiaries served, conferences convened, research papers | s produced, etc  | Expenses                  |
| 1  |  |                           |
|  |  |                           |
|  |  |                           |
| 2  |  |                           |
|  |  |                           |
| 3  |  |                           |
|  |  |                           |
|  |  |                           |
| 4  |  |                           |
|  |  |                           |
|  |  |                           |
| Part IX-B Summary of Program-Related Investments   | •  | A                         |
| Describe the two largest program-related investments made by the foundation du<br>1 N/A  | uring the tax year on lines 1 and 2                    | Amount                    |
| 2  |  |                           |
|  |  |                           |
|  |  |                           |
| All other program-related investments See instructions   |  |                           |
| 3  |  |                           |
|  |  |                           |
| Total. Add lines 1 through 3   |  | . •                       |
|  |  | Form <b>990-PF</b> (2018) |

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

3a 3b

4

5

7,668,081

7.664.404

Form 990-PF (2018)

3.677

Amounts set aside for specific charitable projects that satisfy the

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

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

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

3

4

5

2018

Page 9

186,374

186,374

Form **990-PF** (2018)

| _ | _ | • | ٠. | ١, | _ | _ | _ | • |
|---|---|---|----|----|---|---|---|---|
| 1 | X | П | П  | ī  |   | Г |   |   |

| 9 | O-PF | (2 | 201 | .8) |
|---|------|----|-----|-----|
| 7 | YII  | T  |     | П   |

**b** Total for prior years

d From 2016. . . .

a From 2013. . . . . **b** From 2014. . . . c From 2015. .

e From 2017. . . . .

1 Distributable amount for 2018 from Part XI, line 7

2 Undistributed income, if any, as of the end of 2018 a Enter amount for 2017 only. . . . . .

Excess distributions carryover, if any, to 2018

f Total of lines 3a through e. . . . . . . .

**d** Applied to 2018 distributable amount. . . . e Remaining amount distributed out of corpus

same amount must be shown in column (a) )

5 Excess distributions carryover applied to 2018 (If an amount appears in column (d), the

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

6 Enter the net total of each column as

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 e Undistributed income for 2017 Subtract line 4a from line 2a Taxable amount—see instructions . . . . . . f Undistributed income for 2018 Subtract lines 4d and 5 from line 1. This amount must be distributed in 2019 . . . . . 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 2013 not applied on line 5 or line 7 (see instructions) . . .

9 Excess distributions carryover to 2019.

10 Analysis of line 9

a Excess from 2014. . . **b** Excess from 2015. .

c Excess from 2016. . . .

d Excess from 2017. . .

e Excess from 2018. . .

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

indicated below:

4 Qualifying distributions for 2018 from Part XII, line 4 > \$ 7,668,081 a Applied to 2017, 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 

86 177

1.316.896 3,253,315 (a)

Corpus

4.656.388

7,481,707

12,138,095

12,138,095

86,177 1,316,896

3,253,315

7.481.707

(b)

Years prior to 2017

(c)

2017

| Form 990-PF (20 | 018)                 |                    |
|-----------------|----------------------|--------------------|
| Part XIII       | Undistributed Income | (see instructions) |

factors



|              | XVI-A Analysis of Income-Producing  | Activities           |                      |                       |                      | ruge <b>L</b> i                        |
|--------------|---|----------------------|----------------------|-----------------------|----------------------|--|
| Enter g      | ross amounts unless otherwise indicated   |                      | usiness income       | Excluded by sectio    |                      | (e)<br>Related or exempt               |
| 1 Prog       | iram service revenue  | (a)<br>Business code | <b>(b)</b><br>Amount | (c)<br>Exclusion code | <b>(d)</b><br>Amount | function income<br>(See instructions ) |
|              |   |                      |                      |                       |                      |  |
|              |   |                      |                      |                       |                      |  |
|              |   |                      |                      |                       |                      |  |
|              |   |                      |                      |                       |                      |  |
|              |   |                      |                      |                       |                      |  |
| g Fe         | ees and contracts from government agencies  |                      |                      |                       |                      |  |
| <b>2</b> Mer | mbership dues and assessments   |                      |                      |                       |                      |  |
|              | erest on savings and temporary cash   |                      |                      |                       |                      |  |
|              |   |                      |                      | 14                    | 13,885               |  |
|              | dends and interest from securities rental income or (loss) from real estate                       |                      |                      | 14                    | 76,655               |  |
|              | ebt-financed property   |                      |                      |                       |                      |  |
|              | ot debt-financed property.  |                      |                      |                       |                      |  |
|              | rental income or (loss) from personal property  |                      |                      |                       |                      |  |
|              | er investment income  |                      |                      |                       |                      |  |
|              | n or (loss) from sales of assets other than entory  |                      |                      |                       | 204.520              |  |
|              | income or (loss) from special events  |                      |                      | 18                    | 304,698              |  |
|              | uss profit or (loss) from sales of inventory  |                      |                      |                       |                      |  |
|              | er revenue  |                      |                      |                       |                      |  |
| <b>a</b> 0   | /ERHEAD REIMBURSEMENT   |                      |                      |                       |                      | 36,144                                 |
|              |   |                      |                      |                       |                      |  |
|              |   |                      |                      |                       |                      |  |
| d _          |   |                      |                      |                       |                      |  |
|              | ototal Add columns (b), (d), and (e).   |                      |                      |                       | 395,238              | 36,144                                 |
|              | <b>cal.</b> Add line 12, columns (b), (d), and (e).   |                      |                      | 1                     | .3                   | 431,382                                |
| (Se          | e worksheet in line 13 instructions to verify calcu   | ulations )           |                      |                       |                      | ·                                      |
| Part )       | XVI-B Relationship of Activities to the   |                      |                      | <u> </u>              |                      |  |
| Line N<br>▼  | Explain below how each activity for which the accomplishment of the foundation's e instructions ) |                      |                      |                       |                      |  |
|              |   |                      |                      |                       |                      |  |
|              |   |                      |                      |                       |                      |  |
|              |   |                      |                      |                       |                      |  |
|              |   |                      |                      |                       |                      |  |
|              |   |                      |                      |                       |                      |  |
|              | +   |                      |                      |                       |                      |  |
|              |   |                      |                      |                       |                      |  |
|              |   |                      |                      |                       |                      |  |
|              |   |                      |                      |                       |                      |  |
|              |   |                      |                      |                       |                      |  |
|              |   |                      |                      |                       |                      |  |
|              |   |                      |                      |                       |                      |  |
|              | _   |                      |                      |                       |                      |  |
|              |   |                      |                      |                       |                      |  |
|              |   |                      |                      |                       |                      |  |
|              |   |                      |                      |                       |                      |  |
|              |   |                      |                      |                       |                      |  |
|              |   |                      |                      |                       |                      |  |
|              |   |                      |                      |                       |                      |  |
|              |   |                      |                      |                       |                      |  |
|              |   |                      |                      |                       |                      |  |
|              |   |                      |                      |                       | Fo                   | rm <b>990-PF</b> (2018                 |

| Information Regarding Transfers To and Transactions and Relationships With Noncharitable |   | /  |
|--|---|--|
| Exempt Organizations   | Ή | Information Regarding Transfers To and Transactions and Relationships With Noncharitable<br>Exempt Organizations |

| Part XVII                  | Exempt Organia                                      | zations                        |                                 |   |  |  |  |         |          |
|----------------------------|---|--------------------------------|---------------------------------|---|--|--|--|---------|----------|
| L Did the or<br>(c) (other |   | directly enga                  | ge in any of th                 | ne following with an<br>i 527, relating to po | y other organizat<br>ditical organizatio | ion described in section 5<br>ns?  | 01                                     | Yes     | No       |
| a Transfers                | from the reporting foun                             | dation to a no                 | oncharitable e:                 | xempt organization                            | of                                       |  |  |         |          |
| ( <b>1</b> ) Cash          |   |                                |                                 |   |  |  | 1a(1)                                  |         | No       |
| <b>(2)</b> Other           | r assets  |                                |                                 |   |  |  | 1a(2)                                  |         | No       |
| <b>b</b> Other tran        | sactions  |                                |                                 |   |  |  |  |         |          |
|                            | of assets to a nonchari                             |                                | -                               |   |  |  | 1b(1)                                  |         | No       |
|                            | nases of assets from a n                            |                                |                                 |   |  |  | 1b(2)                                  |         | No       |
|                            | al of facilities, equipmen                          | •                              |                                 |   |  |  | 1b(3)                                  |         | No       |
|                            | bursement arrangemen                                |                                |                                 |   |  |  | 1b(4)                                  |         | No       |
|                            | s or loan guarantees.<br>mance of services or m     |                                |                                 |   |  |  | 1b(5)                                  |         | No<br>No |
|                            | flance of services of m<br>facilities, equipment, n |                                |                                 |   |  |  | 1b(6)<br>1c                            |         | No       |
| -                          |   |                                | •                               |   |  | · · · · · · · · · · · · · · · · · · ·  |  |         | 140      |
| of the goo                 | ds, other assets, or serv                           | vices given by<br>ngement, sho | the reporting<br>ow in column ( | foundation If the                             | foundation receive goods, other ass      | red less than fair market<br>lets, or services received<br>of transfers, transactions, and | /alue                                  | naomon  | te       |
| a) Lille No                | (b) Amount involved                                 | (C) Name of                    | nonchantable ex                 | empt organization                             | (d) Description (                        | n transfers, transactions, and   | Silaring arra                          | ngemen  | LS       |
|                            |   |                                |                                 |   |  |  |  |         |          |
|                            |   |                                |                                 |   |  |  |  |         |          |
|                            |   |                                |                                 |   |  |  |  |         |          |
|                            |   |                                |                                 |   |  |  |  |         |          |
|                            |   |                                |                                 |   |  |  |  |         |          |
|                            |   |                                |                                 |   |  |  |  |         |          |
|                            |   |                                |                                 |   |  |  |  |         |          |
|                            |   |                                |                                 |   |  |  |  |         |          |
|                            |   |                                |                                 |   |  |  |  |         |          |
|                            |   |                                |                                 |   |  |  |  |         |          |
|                            |   |                                |                                 |   |  |  |  |         |          |
|                            |   |                                |                                 |   |  |  |  |         |          |
|                            |   |                                |                                 |   |  |  |  |         |          |
| <b>2a</b> Is the four      | ndation directly or indire                          | ectly affiliated               | with, or relat                  | ed to, one or more                            | tax-exempt orga                          | nızatıons  |  |         |          |
|                            | in section 501(c) (other                            |                                |                                 |   |  |  | ✓ No                                   |         |          |
|                            | omplete the following so                            |                                |                                 |   |  |  |  |         |          |
|                            | (a) Name of organization                            |                                |                                 | (b) Type of organizati                        | on                                       | (c) Description of re  | elationship                            |         |          |
|                            |   |                                |                                 |   |  |  |  |         |          |
|                            |   |                                |                                 |   |  |  |  |         |          |
|                            |   |                                |                                 |   |  |  |  |         |          |
|                            |   |                                |                                 |   |  |  |  |         |          |
| of m                       |   | , it is true, co               |                                 |   |  | ying schedules and stater<br>r than taxpayer) is based                                     |  |         |          |
| Sign<br>Here               | ****  | -                              |                                 | 2019-11-15                                    | *****                                    | re   | ay the IRS di<br>turn<br>ith the prepa |         |          |
|                            | Signature of officer or ti                          | rustee                         |                                 | Date  | Title                                    | b  | elow<br>ee instr )?                    | _       |          |
|                            | Print/Type preparer's                               | name                           | Preparer's Sig                  | gnature                                       | Date                                     | Check if selfPTIN  |  | 1560    |          |
| Paid                       | STEVEN GIBISER C                                    | CPA                            |                                 |   | 2019-11-15                               | employed ▶ □   | P01308                                 | 000     |          |
| Preparer<br>Jse Only       | Transmitter CIDI                                    | SER & GIBIS                    | ER CPA'S PC                     |   |  | Firm   | 's EIN ▶11                             | -26376  | 25       |
| -                          | Firm's address ► 41                                 |                                | S MEMORIAL F                    |   |  | Phor   | ne no (631                             | ) 285-6 | 5290     |
|                            | i   |                                |                                 |   |  | 1  |  |         |          |

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

| a raid during the year   |                |                 |        |
|--|----------------|-----------------|--------|
| AMERICAN FRIENDS OF BAT MELECH<br>INC<br>5511 11TH AVE APT 517<br>BROOKLYN, NY 11219 | PUBLIC CHARITY | GENERAL SUPPORT | 18,000 |
| AMERICAN FRIENDS OF BEIT MIDRASH   | PUBLIC CHARITY | GENERAL SUPPORT | 15,000 |

| 5511 11TH AVE APT 517<br>BROOKLYN, NY 11219                                  |                |                 |        |
|--|----------------|-----------------|--------|
| AMERICAN FRIENDS OF BEIT MIDRASH<br>HAREL66 CHERRY LANE<br>TEANECK, NJ 07666 | PUBLIC CHARITY | GENERAL SUPPORT | 15,000 |
| AMERICAN FRIENDS OF ITIM INC<br>247 WEST 36TH 5TH FLOOR                      | PUBLIC CHARITY | GENERAL SUPPORT | 75,000 |

| HAREL66 CHERRY LANE<br>TEANECK, NJ 07666   |                |                 |        |
|--|----------------|-----------------|--------|
| AMERICAN FRIENDS OF ITIM INC<br>247 WEST 36TH 5TH FLOOR<br>C/O KJ TECHNOLOGY<br>NEW YORK, NY 10018 | PUBLIC CHARITY | GENERAL SUPPORT | 75,000 |

|                        |   | • |   |
|------------------------|---|---|---|
| IEW YORK, NY 10018     |   |   |   |
| C/O KJ TECHNOLOGY      | 1 |   |   |
| 17 WEST SOTT STITTEOUN |   |   | i |

| EW YORK, NY 10018 |          | <u> </u>  |
|-------------------|----------|-----------|
| Total             | <br>▶ 3a | 7,109,994 |

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

| AMERICAN FRIENDS OF LEKET ISRAEL<br>INCPO BOX 2090<br>TEANECK, NJ 07666 | PUBLIC CHARITY | GENERAL SUPPORT | 25,000 |
|---|----------------|-----------------|--------|
| AMERICAN FRIENDS OF SHALVA-   | PUBLIC CHARITY | GENERAL SUPPORT | 10,000 |

| EANECK, NJ 07000   |                |                 |  |
|--|----------------|-----------------|--|
| MERICAN FRIENDS OF SHALVA-<br>GRAEL<br>15 FIFTH AVENUE 6TH FL<br>EW YORK, NY 10016 | PUBLIC CHARITY | GENERAL SUPPORT |  |
|  |                |                 |  |

| ISRAEL<br>315 FIFTH AVENUE 6TH FL<br>NEW YORK, NY 10016 |                |                   |    |
|---|----------------|-------------------|----|
| BARUCH COLLEGE<br>ONE BERNARD BARUCH WAY                | PUBLIC CHARITY | KATZEN FELLOWSHIP | 47 |

| 315 FIFTH AVENUE 6TH FL<br>NEW YORK, NY 10016      |                |                   |      |
|--|----------------|-------------------|------|
| BARUCH COLLEGE ONE BERNARD BARUCH WAY BOX 4 - 1603 | PUBLIC CHARITY | KATZEN FELLOWSHIP | 47,2 |

| NEW YORK, NY 10016  |                |                   |        |
|---|----------------|-------------------|--------|
| BARUCH COLLEGE<br>ONE BERNARD BARUCH WAY<br>BOX A - 1603<br>NEW YORK NY 10010 | PUBLIC CHARITY | KATZEN FELLOWSHIP | 47,250 |

| Total                                  |                | <br>▶ 3a          | 7,109,994 |
|--|----------------|-------------------|-----------|
| OX A - 1603<br>EW YORK, NY 10010       |                |                   |           |
| ARUCH COLLEGE<br>NE BERNARD BARUCH WAY | PUBLIC CHARITY | KATZEN FELLOWSHIP | 47,2      |

| NEW YORK, NY 10010         |  |  |
|----------------------------|--|--|
| BOX A - 1603               |  |  |
| OIL DERIVING BUILDER 11711 |  |  |

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

| BIKUR CHOLIM OF GREATER<br>WASHINGTON<br>INC12320 PARKLAWN DRIVE<br>ROCKVILLE, MD 20852 | PUBLIC CHARITY | GENERAL SUPPORT | 20,000  |
|---|----------------|-----------------|---------|
| BLINKNOW FOUNDATION A NJ  | PUBLIC CHARITY | GENERAL SUPPORT | 100,000 |

| ROCKVILLE, MD 20852   |                |                 |      |
|---|----------------|-----------------|------|
| BLINKNOW FOUNDATION A NJ<br>NONPROFIT<br>CORPORATIONPO BOX 453<br>MENDHAM, NJ 07945 | PUBLIC CHARITY | GENERAL SUPPORT | 100, |
|   |                |                 |      |

| NONPROFIT CORPORATIONPO BOX 453 MENDHAM, NJ 07945 | POBLIC CHARTT  | GLINENAL JOFFORT | 100,000 |
|---|----------------|------------------|---------|
| BREAD FOR THE CITY                                | PUBLIC CHARITY | GENERAL SUPPORT  | 10,000  |

| CORPORATIONPO BOX 453<br>MENDHAM, NJ 07945 |                |                 |        |
|--|----------------|-----------------|--------|
| BREAD FOR THE CITY                         | PUBLIC CHARITY | GENERAL SUPPORT | 10,000 |

| MENDHAM, NJ 07945                        |                |                 |        |
|--|----------------|-----------------|--------|
| BREAD FOR THE CITY<br>L525 SEVENTH ST NW | PUBLIC CHARITY | GENERAL SUPPORT | 10,000 |
| MASHINGTON DC DC 20001                   |                |                 |        |

▶ 3a

7,109,994

| BREAD FOR THE CITY      | PUBLIC CHARITY | GENERAL SUPPORT | 10,00 |
|-------------------------|----------------|-----------------|-------|
| 1525 SEVENTH ST NW      |                |                 | •     |
| WASHINGTON DC, DC 20001 |                |                 |       |

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

| BREM FOUNDATION TO DEFEAT BREAST<br>CANCER8121 GEORGIA AVENUE<br>STE 600<br>SILVER SPRING, MD 20910 | PUBLIC CHARITY | GENERAL SUPPORT | 10,000 |
|---|----------------|-----------------|--------|
|   | I .            |                 |        |

| C A R EPO BOX 1870<br>MERRIFIELD, VA 22116                        | PUBLICE CHARITY | GENERAL SUPPORT | 10,000 |
|---|-----------------|-----------------|--------|
| CENTER FOR MODERN TORAH<br>LEADERSHIP<br>63 SOUTH PLEASANT STREET | PUBLIC CHARITY  | GENERAL SUPPORT | 40,000 |

| MERRIFIELD, VA 22116  |                |  |                 |        |  |
|---|----------------|--|-----------------|--------|--|
| CENTER FOR MODERN TORAH<br>LEADERSHIP<br>63 SOUTH PLEASANT STREET<br>SHARON, MA 02067 | PUBLIC CHARITY |  | GENERAL SUPPORT | 40,000 |  |
|   |                |  |                 |        |  |

Total .

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

| CHAILIEELINE INC  | DUBLIC CHARITY | CENERAL CURRORT | 10.000 |
|---|----------------|-----------------|--------|
| CHAI 4EVER INC<br>1221 MADISON AVENUE<br>LAKEWOOD, NJ 08701 | PUBLIC CHARITY | GENERAL SUPPORT | 50,000 |
| ,   |                |                 |        |

| BINEWOOD, NO GOTOT  |                |                 |        |
|---|----------------|-----------------|--------|
| CHAI LIFELINE INC<br>151 WEST 30TH STREET<br>NEW YORK, NY 10001 | PUBLIC CHARITY | GENERAL SUPPORT | 10,000 |
| CHARLES E SMITH JEWISH DAY<br>SCHOOL                            | PUBLIC CHARITY | GENERAL SUPPORT | 10,000 |

| CHARLES E SMITH JEWISH DAY SCHOOL 1901 E JEFFERSON ST ROCKVILLE, MD 20852  PUBLIC CHARITY GENERAL SUPPORT 10,000 | NEW YORK, NY 10001            |                |                 |        |
|--|-------------------------------|----------------|-----------------|--------|
|  | SCHOOL<br>1901 E JEFFERSON ST | PUBLIC CHARITY | GENERAL SUPPORT | 10,000 |

Total .

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 CHILDREN INTERNATIONAL PUBLIC CHARITY GENERAL SUPPORT 150 000

| 2000 E RED BRIDGE ROAD<br>KANSAS CITY, MO 64131  | TOBLE CHARTT   | GENERAL SOLI ORT | 130,000 |
|--|----------------|------------------|---------|
| CITYBRIDGE EDUCATION<br>600 NEW HAMPSHIRE AVE NW | PUBLIC CHARITY | GENERAL SUPPORT  | 100,000 |

| TYBRIDGE EDUCATION<br>10 NEW HAMPSHIRE AVE NW<br>JITE 9<br>ASHINGTON, DC 20037 | PUBLIC CHARITY | GENERAL SUPPORT |
|--|----------------|-----------------|
| DNGPEGATION BETH JOSHUA  | DUBLIC CHARITY | CENERAL SUPPORT |

| SUITE 9<br>WASHINGTON, DC 20037                 |                |                 |    |
|---|----------------|-----------------|----|
| CONGREGATION BETH JOSHUA<br>13300 ARCTIC AVENUE | PUBLIC CHARITY | GENERAL SUPPORT | 5, |

| WASHINGTON, DC 20037  |                |                 |     |
|---|----------------|-----------------|-----|
| CONGREGATION BETH JOSHUA<br>13300 ARCTIC AVENUE<br>ROCKVILLE MD 20853 | PUBLIC CHARITY | GENERAL SUPPORT | 5,0 |

| CONGREGATION BETH JOSHUA<br>13300 ARCTIC AVENUE<br>ROCKVILLE, MD 20853 | PUBLIC CHARITY | GENERAL SUPPORT | 5,000     |
|--|----------------|-----------------|-----------|
| Total  |                | <br>▶ 3a        | 7,109,994 |

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient

| a Paid during the year   |                                       |                 |        |
|--|---------------------------------------|-----------------|--------|
| DC CENTRAL KITCHEN<br>425 SECOND STREET NW<br>WASHINGTON, DC 20001 | PUBLIC CHARITY                        | GENERAL SUPPORT | 10,000 |
|  | · · · · · · · · · · · · · · · · · · · | <br>I           |        |

| DISABLED AMERICAN VETERANS<br>3725 ALEXANDRIA PIKE<br>COLD SPRING, KY 41076 | PUBLIC CHARITY | GENERAL SUPPORT |  |
|---|----------------|-----------------|--|
| DOCTORS WITHOUT BORDERS   | PUBLIC CHARITY | GENERAL SUPPORT |  |

or substantial contributor

Name and address (home or business)

Total .

| DISABLED AMERICAN VETERANS<br>3725 ALEXANDRIA PIKE<br>COLD SPRING, KY 41076 | PUBLIC CHARITY | GENERAL SUPPORT | 10,000 |
|---|----------------|-----------------|--------|
| DOCTORS WITHOUT BORDERS<br>40 RECTOR STREET 16TH FL<br>NEW YORK, NY 10006   | PUBLIC CHARITY | GENERAL SUPPORT | 10,000 |

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  |                |                 |       |
|---|----------------|-----------------|-------|
| EAST VALLEYS PALS INC<br>COMMANDER JORGE RODRIGUEZ<br>7870 NORTH NOLLAN PLACE | PUBLIC CHARITY | GENERAL SUPPORT | 7,500 |

| PANORAMA CITY, CA 91403                               |                |                 |  |
|---|----------------|-----------------|--|
| FEEDING AMERICA<br>35 EAST WACKER DRIVE<br>SUITE 2000 | PUBLIC CHARITY | GENERAL SUPPORT |  |

Total .

| FEEDING AMERICA<br>35 EAST WACKER DRIVE<br>SUITE 2000<br>CHICAGO, IL 60601 | PUBLIC CHARITY |   | GENERAL SUPPORT | 10,000 |
|--|----------------|---|-----------------|--------|
| FOSTER YOUTH IN ACTION   | PUBLIC CHARITY | · | GENERAL SUPPORT | 75 000 |

| CHICAGO,IL 60601  |                |                 |        |
|---|----------------|-----------------|--------|
| FOSTER YOUTH IN ACTION<br>2140 SHATTUCK AVENUE<br>SUITE 504<br>BERKELEY. CA 94704 | PUBLIC CHARITY | GENERAL SUPPORT | 75,000 |

| ,   |                |                 |      |
|---|----------------|-----------------|------|
| FOSTER YOUTH IN ACTION<br>2140 SHATTUCK AVENUE<br>SUITE 504<br>BERKELEY, CA 94704 | PUBLIC CHARITY | GENERAL SUPPORT | 75,0 |
|   |                |                 |      |

| OSTER YOUTH IN ACTION<br>1140 SHATTUCK AVENUE<br>SUITE 504<br>BERKELEY, CA 94704 | PUBLIC CHARITY | GENERAL SUPPORT | /5,00 |
|--|----------------|-----------------|-------|
| <u> </u>   |                |                 |       |

Recipient Foundation Purpose of grant or If recipient is an individual, 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 FOUNDATION FOR JEWISH CAMP PUBLIC CHARITY GENERAL SUPPORT 20,000

252 WEST 25TH ST ATH FI

Total .

| NEW YORK, NY 10001                                    |                |                 |       |
|---|----------------|-----------------|-------|
| FOUNDATION FOR LETTERS INC<br>902 BROADWAY<br>FLOOR 6 | PUBLIC CHARITY | GENERAL SUPPORT | 5,000 |

| 902 BROADWAY<br>FLOOR 6<br>NEW YORK, NY 10010 | TODLEC CHANNET | SERENCE SOLI OIN | 3,000  |
|---|----------------|------------------|--------|
| GEORGE WASHINGTON UNIVERSITY<br>PO BOX 829896 | PUBLIC CHARITY | MAYBERG CENTER   | 40,000 |

| NEW YORK, NY 10010  |                |                |        |
|---|----------------|----------------|--------|
| GEORGE WASHINGTON UNIVERSITY<br>PO BOX 829896<br>PHILADELPHIA, PA 191829896 | PUBLIC CHARITY | MAYBERG CENTER | 40,000 |
|   |                |                |        |

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

| HADAR INSTITUTE<br>190 AMSTERDAM AVENUE<br>SUITE 1700<br>NEW YORK, NY 10023 | PUBLIC CHARITY | GENEARL SUPPORT | 150,000 |
|---|----------------|-----------------|---------|
| HEBREW FREE LOAN ASSOCIATION OF   | PUBLIC CHARITY | GENERAL SUPPORT | 10,000  |

| GREATER WASHINGTON<br>10421 MOTOR CITY DRIVE<br>NO 342044<br>BETHESDA, MD 208179996 | POBLIC CHARITY | GENERAL SUPPORT | 10,000 |
|---|----------------|-----------------|--------|
| HEBREW INSTITUTE OF RIVERDALE   | PUBLIC CHARITY | GENERAL SUPPORT | 20,000 |

| NO 342044<br>BETHESDA, MD 208179996  |                |                 |        |
|--|----------------|-----------------|--------|
| HEBREW INSTITUTE OF RIVERDALE<br>3700 HENRY HUDSON PKWY<br>BRONX, NY 10463 | PUBLIC CHARITY | GENERAL SUPPORT | 20,000 |

7,109,994

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   |                |                 |        |
|--|----------------|-----------------|--------|
| HOMELESS CHILDRENS PLAYTIME<br>PROJECT<br>INC1525 NEWTON ST NW | PUBLIC CHARITY | GENERAL SUPPORT | 50,000 |
| WASHINGTON DC 20010  |                |                 |        |

| INC1525 NEWTON ST NW<br>WASHINGTON, DC 20010                                       |                |               |         |
|--|----------------|---------------|---------|
| JERUSALEM FOUNDATION INC<br>420 LEXINGTON AVENUE<br>STE 1645<br>NEW YORK, NY 10170 | PUBLIC CHARITY | TALKING PEACE | 250,000 |

| JERUSALEM FOUNDATION INC<br>420 LEXINGTON AVENUE<br>STE 1645<br>NEW YORK, NY 10170 | PUBLIC CHARITY | TALKING PEACE   | 250,000 |
|--|----------------|-----------------|---------|
| JEWISH COMMUNAL FUND<br>575 MADISON AVENUE   | PUBLIC CHARITY | GENERAL SUPPORT | 50,000  |

| NEW YORK, NY 10170  |                |                 |        |
|---|----------------|-----------------|--------|
| JEWISH COMMUNAL FUND<br>575 MADISON AVENUE<br>SUITE 703<br>NEW YORK, NY 10022 | PUBLIC CHARITY | GENERAL SUPPORT | 50,000 |
|   |                |                 |        |

| JEWISH COMMUNAL FUND<br>575 MADISON AVENUE<br>SUITE 703<br>NEW YORK, NY 10022 | PUBLIC CHARITY | GENERAL SUPPORT | 50,000    |
|---|----------------|-----------------|-----------|
| Total   |                | <br>▶ 3a        | 7,109,994 |

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 000

| JEWISH FOUNDATION FOR GROUP<br>HOMES<br>1500 EAST JEFFERSON STREE<br>ROCKVILLE, MD 20852 | PUBLIC CHARITY | GENERAL SUPPORT | 5,00  |
|--|----------------|-----------------|-------|
| JEWISH FUNDERS NETWORK   | DUBLIC CHARITY | GENERAL SUPPORT | 10.24 |

| ROCKVILLE, MD 20852   |                |                 |        |
|---|----------------|-----------------|--------|
| JEWISH FUNDERS NETWORK<br>150 WEST 30TH STREET<br>SUITE 900<br>NEW YORK, NY 10001 | PUBLIC CHARITY | GENERAL SUPPORT | 19,244 |
|   |                |                 |        |

| SUITE 900<br>NEW YORK, NY 10001           |                |                 |        |
|---|----------------|-----------------|--------|
| JEWISH NATIONAL FUND<br>78 RANDALL AVENUE | PUBLIC CHARITY | ARAVA INSTITUTE | 45,000 |

| JEWISH NATIONAL FUND PUBLIC CHARITY ARAVA INSTITUTE 45,000 78 RANDALL AVENUE ROCKVILLE CENTRE, NY 11570 |                   |                |                 |        |
|---|-------------------|----------------|-----------------|--------|
|   | 78 RANDALL AVENUE | PUBLIC CHARITY | ARAVA INSTITUTE | 45,000 |

Total .

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

| JEWISH ORTHODOX FEMINIST<br>ALLIANCE<br>INC205 E 42ND STREET<br>20TH FLOOR<br>NEW YORK, NY 10017 | PUBLIC CHARITY | GENERAL SUPPORT | 10,000 |
|--|----------------|-----------------|--------|
| JEWISH SOCIAL SERVICE AGENCY   | PUBLIC CHARITY | GENERAL SUPPORT | 15,000 |

| NEW TORK, NT 10017  |                |                 |        |
|---|----------------|-----------------|--------|
| JEWISH SOCIAL SERVICE AGENCY<br>6123 MONTROSE ROAD<br>ROCKVILLE, MD 20852 | PUBLIC CHARITY | GENERAL SUPPORT | 15,000 |
| JEWISH WOMEN INTERNATIONAL<br>1129 20TH ST NW STE 801                     | PUBLIC CHARITY | GENERAL SUPPORT | 3,000  |

| JEWISH WOMEN INTERNATIONAL 1129 20TH ST NW STE 801 WASHINGTON, DC 200363425 PUBLIC CHARITY GENERAL SUPPORT 3,000 | ROCKVILLE, MD 20852     |                |                 |       |
|--|-------------------------|----------------|-----------------|-------|
|  | 1129 20TH ST NW STE 801 | PUBLIC CHARITY | GENERAL SUPPORT | 3,000 |

7,109,994

| JEWISH WOMEN INTERNATIONAL | PUBLIC CHARITY | GENERAL SUPPORT | 3,0 |
|----------------------------|----------------|-----------------|-----|
| 1129 20TH ST NW STE 801    |                |                 |     |
| WASHINGTON, DC 200363425   |                |                 |     |

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

| KIDS4PEACE INTERNATIONAL INC<br>110 MARYLAND AVE<br>SUITE 205<br>WASHINGTON, DC 20002 | PUBLIC CHARITY | GENERAL SUPPORT | 120,000 |
|---|----------------|-----------------|---------|
| LAWYERS FOR CHILDREN  | PUBLIC CHARITY | GENERAL SUPPORT | 100,000 |

| WASHINGTON, DC 20002   |                |                        |         |
|--|----------------|------------------------|---------|
| LAWYERS FOR CHILDREN<br>110 LAFAYETTE STREET<br>8TH FL<br>NEW YORK, NY 10013 | PUBLIC CHARITY | GENERAL SUPPORT        | 100,000 |
| LETS GET READY INC   | PUBLIC CHARITY | SALESFORCE INTEGRATION | 30,500  |

| 8TH FL<br>NEW YORK, NY 10013                                       |                |                        |        |
|--|----------------|------------------------|--------|
| LETS GET READY INC<br>50 BROADWAY 25TH FLOOR<br>NEW YORK, NY 10004 | PUBLIC CHARITY | SALESFORCE INTEGRATION | 30,500 |

▶ 3a

7,109,994

| NEW TORK, NT 10013  |                |                        |      |
|---|----------------|------------------------|------|
| ETS GET READY INC<br>50 BROADWAY 25TH FLOOR<br>NEW YORK, NY 10004 | PUBLIC CHARITY | SALESFORCE INTEGRATION | 30,5 |

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

| - ·   |                |                 |       |
|---|----------------|-----------------|-------|
| LIMMUD NA2001 WILSHIRE BLVD<br>STE 4000<br>SANTA MONICA, CA 90403 | PUBLIC CHARITY | GENERAL SUPPORT | 3,000 |
|   |                |                 |       |

| SANTA MONICA, CA 90403  |                |                 |        |
|---|----------------|-----------------|--------|
| MARCH OF DIMES1550 CRYSTAL DRIVE<br>STE 1300<br>ARLINGTON, VA 22202 | PUBLIC CHARITY | GENERAL SUPPORT | 10,000 |

| STE 1300<br>ARLINGTON, VA 22202                |                |                 |        |
|--|----------------|-----------------|--------|
| MARTHA'S TABLEPO BOX 97260 WASHINGTON DC 20090 | PUBLIC CHARITY | GENERAL SUPPORT | 10,000 |

| MARTHA'S TABLEPO BOX 97260<br>WASHINGTON, DC 20090 | PUBLIC CHARITY | GENERAL SUPPORT | 10,000    |
|--|----------------|-----------------|-----------|
| Total  |                | <br>▶ 3a        | 7,109,994 |

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

| MELVIN J BERMAN HEBREW ACADEMY<br>13300 ARCTIC AVE<br>ROCKVILLE, MD 20853 | PUBLIC CHARITY | GENERAL SUPPORT | 20,000 |
|---|----------------|-----------------|--------|
| a Paid during the year  |                |                 |        |

| ·  |                |                 |         |
|--|----------------|-----------------|---------|
| MIDVALLEY COMMUNITY POLICE<br>COUNCIL<br>INC7870 NORTH NOLLAN PLACE<br>PANORAMA CITY, CA 91403 | PUBLIC CHARITY | GENERAL SUPPORT | 13,750  |
| MILTON GOTTESMAN JEWISH DAY  | PUBLIC CHARITY | GENERAL SUPPORT | 100,000 |

| INC7870 NORTH NOLLAN PLACE<br>PANORAMA CITY, CA 91403   |                |                 |         |
|---|----------------|-----------------|---------|
| MILTON GOTTESMAN JEWISH DAY<br>SCHOOL<br>OF THE NATION'S CAPITAL<br>6045 16TH STREET NW<br>WASHINGTON, DC 20011 | PUBLIC CHARITY | GENERAL SUPPORT | 100,000 |

| 171110101111111111111111111111111111111   |                |                 |           |
|---|----------------|-----------------|-----------|
| MILTON GOTTESMAN JEWISH DAY<br>SCHOOL<br>OF THE NATION'S CAPITAL<br>6045 16TH STREET NW<br>WASHINGTON, DC 20011 | PUBLIC CHARITY | GENERAL SUPPORT | 100,000   |
| Total   |                | <br>▶ 3a        | 7,109,994 |

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient Purpose of grant or If recipient is an individual, Foundation 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 MISSION COMMUNITY POLICE COUNCIL PUBLIC CHARITY GENERAL SUPPORT 13,750 INC7870 NORTH NOLLAN PLACE

| PANORAMA CITY, CA 91403  |                |                       |         |
|--|----------------|-----------------------|---------|
| N AMERICAN COUNCIL ON ADOPTABLE<br>CHILDREN970 RAYMOND AVE STE 106<br>ST PAUL, MN 55114          | PUBLIC CHARITY | CHAMPS                | 150,000 |
| NATIONAL CENTER FOR FAMILY<br>PHILIANTHROPY<br>1667 K STREET NW STE 550<br>FRIENDS OF THE FAMILY | PUBLIC CHARITY | FRIENDS OF THE FAMILY | 1,000   |

▶ 3a

7,109,994

| ST PAUL, MN 55114  |                |                       |      |
|--|----------------|-----------------------|------|
| NATIONAL CENTER FOR FAMILY PHILIANTHROPY 1667 K STREET NW STE 550 FRIENDS OF THE FAMILY WASHINGTON. DC 20006 | PUBLIC CHARITY | FRIENDS OF THE FAMILY | 1,00 |

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  |                |                 |         |
|---|----------------|-----------------|---------|
| NEW POLITICS LEADERSHIP ACADEMY<br>INC9 EAST STREET<br>NO 2<br>BOSTON, MA 02111 | PUBLIC CHARITY | GENERAL SUPPORT | 150,000 |

| NO 2<br>BOSTON, MA 02111   |                |                                    |         |
|--|----------------|------------------------------------|---------|
| NEW VENTURE FUND<br>1201 CONNECTICUT AVE NW<br>STE 300<br>WASHINGTON, DC 20036 | PUBLIC CHARITY | SAFETY RESPECT EQUITY<br>COALITION | 100,000 |

| NEW VENTORE FUND<br>1201 CONNECTICUT AVE NW<br>STE 300<br>WASHINGTON, DC 20036 | POBLIC CHARITY | COALITION       | 100,000 |
|--|----------------|-----------------|---------|
| NEW VENTURE FUND<br>1201 CONNECTICUT AVE NW<br>STE 300                         | PUBLIC CHARITY | GENERAL SUPPORT | 150,000 |

| NEW VENTURE FUND 1201 CONNECTICUT AVE NW STE 300 WASHINGTON, DC 20036  PUBLIC CHARITY  GENERAL SUPPORT  150,000 | WASHINGTON, DC 20036               |                |                 |         |
|---|------------------------------------|----------------|-----------------|---------|
|   | 1201 CONNECTICUT AVE NW<br>STE 300 | PUBLIC CHARITY | GENERAL SUPPORT | 150,000 |

7,109,994

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

| a raid during the year   |                |                          |         |
|--|----------------|--------------------------|---------|
| NEW VENTURE FUND<br>1201 CONNECTICUT AVE NW<br>STE 300<br>WASHINGTON, DC 20036 | PUBLIC CHARITY | PURPOSE VOTING RIGHT LAB | 125,000 |
|  |                |                          |         |

| WASHINGTON, DC 20036  |                |                 |        |
|---|----------------|-----------------|--------|
| NORTH AMERICAN FRIENDS OF MOED<br>INC<br>897 LAKESIDE DRIVE<br>WOODMERE, NY 11598 | PUBLIC CHARITY | GENERAL SUPPORT | 5,000  |
| OHEV SHOLOM-THE NATIONAL<br>SYNAGOGUE   | PUBLIC CHARITY | GENERAL SUPPORT | 85,000 |

| INC<br>897 LAKESIDE DRIVE<br>WOODMERE, NY 11598                                     |                |                 |           |
|---|----------------|-----------------|-----------|
| OHEV SHOLOM-THE NATIONAL<br>SYNAGOGUE<br>1600 JONQUIL ST NW<br>WASHINGTON, DC 20012 | PUBLIC CHARITY | GENERAL SUPPORT | 85,000    |
| Total   |                | <br>▶ 3a        | 7,109,994 |

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

| ONE FAMILY FUNDPO BOX 822732<br>PHILADELPHIA, PA 19182                   | PUBLIC CHARITY | GENERAL SUPPORT   | 10,000 |
|--|----------------|-------------------|--------|
| ORGANIZATION FOR THE RESOLUTION<br>OF<br>AGUNOT INC551 WEST 181ST STREET | PUBLIC CHARITY | CAMPUS FELLOWSHIP | 75,000 |

| ORGANIZATION FOR THE RESOLUTION<br>OF<br>AGUNOT INC551 WEST 181ST STREET<br>UNIT 123<br>NEW YORK, NY 10033 | PUBLIC CHARITY | CAMPUS FELLOWSHIP | 75,000 |
|--|----------------|-------------------|--------|
| OXFAM226 CAUSEWAY STREET<br>5TH FL   | PUBLIC CHARITY | GENERAL SUPPORT   | 10,000 |

| AGUNOT INC551 WEST 181ST STREET<br>UNIT 123<br>NEW YORK, NY 10033 |                |                 |        |
|---|----------------|-----------------|--------|
| OXFAM226 CAUSEWAY STREET<br>5TH FL<br>BOSTON, MA 02114            | PUBLIC CHARITY | GENERAL SUPPORT | 10,000 |

| NEW TORK, NT 10055                                     |                |                 |           |
|--|----------------|-----------------|-----------|
| OXFAM226 CAUSEWAY STREET<br>5TH FL<br>BOSTON, MA 02114 | PUBLIC CHARITY | GENERAL SUPPORT | 10,000    |
| Total  |                | <br>▶ 3a        | 7,109,994 |

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 PARDES INSTITUTE OF JEWISH PUBLIC CHARITY GENERAL SUPPORT 50,000 ST

| STUDIES NORTH AMERICA INC 404 5TH AVE 3RD FL NEW YORK, NY 10018 |                |                        |
|---|----------------|------------------------|
| PEF ISRAEL ENDOWMENT FUNDS INC                                  | PUBLIC CHARITY | CENTER FOR EDUCATIONAL |

Total .

| NEW YORK, NY 10018   |                |                                   |         |
|--|----------------|-----------------------------------|---------|
| PEF ISRAEL ENDOWMENT FUNDS INC<br>630 THIRD AVENUE<br>15TH FLOOR<br>NEW YORK, NY 10017 | PUBLIC CHARITY | CENTER FOR EDUCATIONAL TECHNOLOGY | 100,000 |
| PEF ISRAEL ENDOWMENT FUNDS INC   | PUBLIC CHARITY | KOLECH - RELIGIOUS WOMEN'S        | 10,000  |

| PEF ISRAEL ENDOWMENT FUNDS INC<br>630 THIRD AVENUE<br>15TH FLOOR<br>NEW YORK, NY 10017 | PUBLIC CHARITY | CENTER FOR EDUCATIONAL<br>TECHNOLOGY | 100,0 |
|--|----------------|--------------------------------------|-------|
| PEF ISRAEL ENDOWMENT FUNDS INC<br>630 THIRD AVENUE<br>15TH FLOOR                       | PUBLIC CHARITY | KOLECH - RELIGIOUS WOMEN'S<br>FORUM  | 10,0  |

| NEW YORK, NY 10017   |                |                                     |        |
|--|----------------|-------------------------------------|--------|
| PEF ISRAEL ENDOWMENT FUNDS INC<br>630 THIRD AVENUE<br>15TH FLOOR<br>NEW YORK, NY 10017 | PUBLIC CHARITY | KOLECH - RELIGIOUS WOMEN'S<br>FORUM | 10,000 |

| PEF ISRAEL ENDOWMENT FUNDS INC | PUBLIC CHARITY | KOLECH - RELIGIOUS WOMEN'S | 10,00 |
|--------------------------------|----------------|----------------------------|-------|
| 630 THIRD AVENUE               |                | FORUM                      |       |
| 15TH FLOOR                     |                |                            |       |
| NEW YORK, NY 10017             |                |                            |       |

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

65,000

10.000

7,109,994

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

| 1 | DEE TODAEL ENDOUGHENT ELINDS INS | BUDITS SUABITA | TTOUAR   |  |
|---|----------------------------------|----------------|----------|--|
| ı | NEW YORK, NY 10017               |                |          |  |
| ı | 15TH FLOOR                       |                |          |  |
| ı | 630 THIRD AVENUE                 |                |          |  |
| ı | PEF ISRAEL ENDOWMENT FUNDS INC   | PUBLIC CHARITY | SHAHARIT |  |

| NEW YORK, NY 10017   |                |        |  |
|--|----------------|--------|--|
| PEF ISRAEL ENDOWMENT FUNDS INC<br>630 THIRD AVENUE<br>15TH FLOOR<br>NEW YORK, NY 10017 | PUBLIC CHARITY | TZOHAR |  |

| 630 THIRD AVENUE<br>15TH FLOOR<br>NEW YORK, NY 10017             |                |                                   | 23,555  |
|--|----------------|-----------------------------------|---------|
| PEF ISRAEL ENDOWMENT FUNDS INC<br>630 THIRD AVENUE<br>15TH FLOOR | PUBLIC CHARITY | BEIT MIDRASH YISRAELI-EIN<br>PRAT | 250,000 |

| NEW YORK, NY 10017   |                |                                   |         |
|--|----------------|-----------------------------------|---------|
| PEF ISRAEL ENDOWMENT FUNDS INC<br>630 THIRD AVENUE<br>15TH FLOOR<br>NEW YORK, NY 10017 | PUBLIC CHARITY | BEIT MIDRASH YISRAELI-EIN<br>PRAT | 250,000 |

| PEF ISRAEL ENDOWMENT FUNDS INC | PUBLIC CHARITY | BEIT MIDRASH YISRAELI-EIN | 250,0 |
|--------------------------------|----------------|---------------------------|-------|
| 630 THIRD AVENUE               |                | PRAT                      |       |
| 15TH FLOOR                     |                |                           |       |
| NEW YORK, NY 10017             |                |                           | 1     |

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

Total .

| PEF ISRAEL ENDOWMENT FUNDS INC<br>630 THIRD AVENUE<br>15TH FLOOR<br>NEW YORK, NY 10017 | PUBLIC CHARITY | NEEMANEI TORAH VAAVODAH |  |
|--|----------------|-------------------------|--|
|  |                |                         |  |

25,000

7,109,994

▶ 3a

| PEF ISRAEL ENDOWMENT FUNDS INC<br>630 THIRD AVENUE<br>15TH FLOOR<br>NEW YORK, NY 10017 | PUBLIC CHARITY | DERECHIM EDUCATIONAL<br>CENTER FOR | 30,000 |
|--|----------------|------------------------------------|--------|
| NEW TORK, NT 10017   |                |                                    |        |

| 15TH FLOOR<br>NEW YORK, NY 10017                     |                |   | CENTERTOR                      |       |
|--|----------------|---|--------------------------------|-------|
| PHILANTHROPY NORTHWEST<br>2101 FOURTH AVE<br>STE 650 | PUBLIC CHARITY | l | CHILD WELFARE<br>COLLABORATIVE | 5,000 |

| NEW YORK, NY 10017  |                |                                |       |
|---|----------------|--------------------------------|-------|
| PHILANTHROPY NORTHWEST<br>2101 FOURTH AVE<br>STE 650<br>SEATTLE, WA 98121 | PUBLIC CHARITY | CHILD WELFARE<br>COLLABORATIVE | 5,000 |
|   |                |                                |       |

| PHILANTHROPY NORTHWEST | PUBLIC CHARITY | CHILD WELFARE | 5 |
|------------------------|----------------|---------------|---|
| 2101 FOURTH AVE        |                | COLLABORATIVE |   |
| STE 650                |                |               |   |
| SEATTLE, WA 98121      |                |               |   |

Recipient If recipient is an individual, Purpose of grant or Foundation Amount show any relationship to status of contribution any foundation manager recipient

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

or substantial contributor

Name and address (home or business)

NEW YORK, NY 10038

Total .

|   | or substantial contributor |                 |        |
|---|----------------------------|-----------------|--------|
| a Paid during the year                                    |                            |                 |        |
| PLANNED PARENTHOOD FEDERATION<br>OF AMERICA123 WILLIAM ST | PUBLIC CHARITY             | GENERAL SUPPORT | 10,000 |

| PRIZMAH CENTER FOR JEWISH DAY<br>SCHOOLS INC254 W 54TH STREET<br>NEW YORK, NY 10019 | PUBLIC CHARITY | GENERAL SUPPORT |  |
|---|----------------|-----------------|--|
|   |                |                 |  |

| SCHOOLS INC254 W 54TH STREET<br>NEW YORK, NY 10019 |                |                 |      |
|--|----------------|-----------------|------|
| PROJECT HOPE255 CARTER HALL LANE<br>PO BOX 250     | PUBLIC CHARITY | GENERAL SUPPORT | 10,0 |

| SCHOOLS INC254 W 54TH STREET<br>NEW YORK, NY 10019 |                |                 |     |
|--|----------------|-----------------|-----|
| PROJECT HOPE255 CARTER HALL LANE<br>PO BOX 250     | PUBLIC CHARITY | GENERAL SUPPORT | 10, |

| NEW YORK, NY 10019                             |                |                 |        |
|--|----------------|-----------------|--------|
| PROJECT HOPE255 CARTER HALL LANE<br>PO BOX 250 | PUBLIC CHARITY | GENERAL SUPPORT | 10,000 |
| MILLWOOD, VA 22646                             |                |                 |        |

| PROJECT HOPEZSS CARTER HALL LANE | PUBLIC CHARITY | GENERAL SUPPORT | 10,00 |
|----------------------------------|----------------|-----------------|-------|
| PO BOX 250                       |                |                 |       |
| MILLWOOD, VA 22646               |                |                 |       |

100,000

7,109,994

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

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

|   | SHALOM HARTMAN INSTITUTE OF<br>NORTH<br>AMERICA475 RIVERSIDE DRIVE<br>STE 1450<br>NEW YORK, NY 10115 | PUBLIC CHARITY | YOSSI KLEIN BOOK SUPPORT | 30,000 |
|---|--|----------------|--------------------------|--------|
| t |  |                |                          |        |

| NEW YORK, NY 10115                                      |                |                 |        |
|---|----------------|-----------------|--------|
| SMILE TRAIN41 MADISON AVE 28TH FL<br>NEW YORK, NY 10010 | PUBLIC CHARITY | GENERAL SUPPORT | 10,000 |
| SO OTHERS MIGHT EAT                                     | PUBLIC CHARITY | GENERAL SUPPORT | 10,000 |

| NEW YORK, NY 10010  | PUBLIC CHARITY | GENERAL SUPPORT | 10,000 |
|---|----------------|-----------------|--------|
| SO OTHERS MIGHT EAT<br>71 O STREET NW<br>WASHINGTON, DC 20001 | PUBLIC CHARITY | GENERAL SUPPORT | 10,000 |

Total .

7,109,994

Recipient If recipient is an individual, show any relationship to status of recontribution Spaid During the Year or Approved for Future Payment

Recipient If recipient is an individual, show any relationship to status of contribution

Purpose of grant or contribution

recipient

7,109,994

any foundation manager

or cubetantial contributor

Name and address (home or business)

GAITHERSBURG, MD 208774107

Total .

|   | or substantial contributor |                 |        |
|---|----------------------------|-----------------|--------|
| a Paid during the year  |                            |                 |        |
| START-UP SHUL<br>ROTHWELL FIGG ERNST & MANBECK PC<br>607 14TH ST NW STE 800<br>ATTN STEVE LEIBERMAN<br>WASHINGTON, DC 20005 | PUBLIC CHARITY             | GENERAL SUPPORT | 75,000 |
| SULAM INC13300 ARCTIC AVE<br>ROCKVILLE, MD 20853  | PUBLIC CHARITY             | GENERAL SUPPORT | 50,000 |
| SUNFLOWER BAKERY8507 ZIGGY LANE   | PUBLIC CHARITY             | GENERAL SUPPORT | 10,000 |

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or 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 JEWISH EDUCATION PROJECT PUBLIC CHARITY 2018 BENEFIT 5,000 520 8TH AVENUE 15TH FL NEW YORK, NY 10018

| THE JEWISH FEDERATION OF GREATER<br>WASHINGTON INC<br>6101 EXECUTIVE BLVD<br>SUITE 100<br>NORTH BETHESDA, MD 20852 | PUBLIC CHARITY | SUPPORT OF JCADA  | 140,000 |
|--|----------------|-------------------|---------|
| THE JEWISH FEDERATION OF GREATER WASHINGTON INC 6101 EXECUTIVE BLVD SUITE 100 NORTH BETHESDA, MD 20852             | PUBLIC CHARITY | SUPPORT OF GESHER | 60,000  |

7,109,994

Total . .

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

| THE JEWISH FEDERATION OF NORTH<br>AMERICA INC25 BROADWAY<br>SUITE 1700<br>NEW YORK, NY 100041010 | PUBLIC CHARITY | GENERAL SUPPORT | 35,000  |
|--|----------------|-----------------|---------|
| LIDSTREAM LISA INCA26 17TH STREET  | PUBLIC CHARITY | GENERAL SUPPORT | 100 000 |

| NEW YORK, NY 100041010  |                |                 |         |
|---|----------------|-----------------|---------|
| UPSTREAM USA INC426 17TH STREET<br>SUITE 200<br>OAKLAND, CA 94612 | PUBLIC CHARITY | GENERAL SUPPORT | 100,000 |
| VOTEORG4096 PIEDMONT AVE<br>368<br>OAKLAND CA 94611               | PUBLIC CHARITY | GENERAL SUPPORT | 50,000  |

| SUITE 200<br>OAKLAND, CA 94612                       |                |                 |           |
|--|----------------|-----------------|-----------|
| VOTEORG4096 PIEDMONT AVE<br>368<br>OAKLAND, CA 94611 | PUBLIC CHARITY | GENERAL SUPPORT | 50,000    |
| Total  |                | <br>▶ 3a        | 7,109,994 |

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient

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

Name and address (home or business)

Total .

| ,   | or substantial contributor |                 |         |
|---|----------------------------|-----------------|---------|
| a Paid during the year                          |                            |                 |         |
| VOTO LATINOPO BOX 35608<br>WASHINGTON, DC 20033 | PUBLIC CHARITY             | GENERAL SUPPORT | 100,000 |

10,000

7,109,994

| WAMU 8854401 CONNECTICUT AVE NW<br>ATTN LAUREN CENTRELLA<br>WASHINGTON, DC 20008 | PUBLIC CHARITY | GENERAL SUPPORT |  |
|--|----------------|-----------------|--|
| YAD YEHUDA OF GREATER  | PUBLIC CHARITY | GENERAL SUPPORT |  |

| ATTN LAUREN CENTRELLA<br>WASHINGTON, DC 20008      |                |                 |   |
|--|----------------|-----------------|---|
| YAD YEHUDA OF GREATER<br>WASHINGTON<br>812 HYDE CT | PUBLIC CHARITY | GENERAL SUPPORT | 2 |

| WASHINGTON, DC 20008                         |                |                 |      |
|--|----------------|-----------------|------|
| YAD YEHUDA OF GREATER WASHINGTON 812 HYDE CT | PUBLIC CHARITY | GENERAL SUPPORT | 2,50 |

| WASHINGTON, DC 20008  |                |                 |       |
|---|----------------|-----------------|-------|
| YAD YEHUDA OF GREATER<br>WASHINGTON<br>812 HYDE CT<br>SILVER SPRING, MD 20902 | PUBLIC CHARITY | GENERAL SUPPORT | 2,500 |

| SILVER SPRING, MD 20902 |  |  |
|-------------------------|--|--|
| 812 HYDE CT             |  |  |
| WASHINGTON              |  |  |
|                         |  |  |

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or 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 YESHIVAT CHOVEVEI TORAH PUBLIC CHARITY COACHING SUPPORT 510,500 RABBINICAL

| SCHOOL LTD<br>3700 HENRY HUDSON PKWY<br>2ND FLOOR<br>RIVERDALE, NY 10463  |                |                 |   |
|---|----------------|-----------------|---|
| YESHIVAT MAALE GILBOA USA INC<br>C/O DR GIL KAHN<br>27 WEST 86TH ST 11 FL | PUBLIC CHARITY | GENERAL SUPPORT | 4 |

| YESHIVAT MAALE GILBOA USA INC<br>C/O DR GIL KAHN<br>27 WEST 86TH ST 11 FL<br>NEW YORK, NY 10024 | PUBLIC CHARITY | GENERAL SUPPORT          | 40,000  |
|---|----------------|--------------------------|---------|
| YESHIVAT MAHARAT INC  | PUBLIC CHARITY | SEMIKHA CEREMONY PROGRAM | 405,000 |

| 27 WEST 86TH ST 11 FL<br>NEW YORK, NY 10024    |                |                          |        |
|--|----------------|--------------------------|--------|
| YESHIVAT MAHARAT INC<br>3700 HENRY HUDSON PKWY | PUBLIC CHARITY | SEMIKHA CEREMONY PROGRAM | 405,00 |
| DIVEDDALE NV 10462                             |                |                          | İ      |

| ÆSHIVAT MAHARAT INC<br>8700 HENRY HUDSON PKWY<br>RIVERDALE, NY 10463 | PUBLIC CHARITY | SEMIKHA CEREMONY PROGRAM | 405,000 |
|--|----------------|--------------------------|---------|
|  |                |                          |         |

7,109,994

| TESHIVAT MAHAKAT INC   | PUBLIC CHARITY | SEMIKHA CEREMONT PROGRAM | 405, |
|------------------------|----------------|--------------------------|------|
| 3700 HENRY HUDSON PKWY |                |                          |      |
| RIVERDALE, NY 10463    |                |                          |      |

Total .

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount contribution show any relationship to status of

recipient

| Name and address (home or business) | or substantial contributor | recipient |                 |           |
|-------------------------------------|----------------------------|-----------|-----------------|-----------|
| a Paid during the year              |                            |           |                 |           |
| BLUE MERIDIAN415 MADISON AVENUE     | PUBLIC CHARITY             |           | GENERAL SUPPORT | 2,000,000 |

any foundation manager

| NEW YORK, NY 10017 |                |                | <b>▶ 3a</b> 7,109,994 |
|--------------------|----------------|----------------|-----------------------|
| 10TH FL            | PUBLIC CHARITY | GENERAL SUPPOR | 2,000,                |

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|--------------------------------|--|--------------------------|------------------------|---|--|--|--|
| TY 2018 Accounting Fe          | TY 2018 Accounting Fees Schedule         |                          |                        |   |  |  |  |
| _                              |  |                          |                        |   |  |  |  |
|                                | <b>Name:</b> AVIV FO <b>EIN:</b> 47-4498 |                          |                        |   |  |  |  |
| Category                       | Amount                                   | Net Investment<br>Income | Adjusted Net<br>Income | Disbursements<br>for Charitable<br>Purposes |  |  |  |
|                                | 1,450                                    | ס                        |                        | 1,450                                       |  |  |  |

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| Note: To capture the full content of this | document, please | select landscape mode (11" x 8.5") when printing. |
| TY 2018 Depreciation Schedule             | <b>:</b>         |   |
|   |                  |   |
| Name:                                     | AVIV FOUNDATIO   | N INC   |
| ETM:                                      | 17 1109671       |   |

|                            |                  | <b>EIN:</b> 4          | 7-4498674                    |                    |                             |   |                          |                        |                                       |
|----------------------------|------------------|------------------------|------------------------------|--------------------|-----------------------------|---|--------------------------|------------------------|---------------------------------------|
|                            | Depreci          | ation Schedule         |                              |                    |                             |   |                          |                        |                                       |
| Description of<br>Property | Date<br>Acquired | Cost or Other<br>Basis | Prior Years'<br>Depreciation | Computation Method | Rate /<br>Life (# of years) | Current Year's<br>Depreciation<br>Expense | Net Investment<br>Income | Adjusted Net<br>Income | Cost of Goods<br>Sold Not<br>Included |
| OFFICE FURNITURE           | 2017-10-06       | 52,116                 | 4,343                        | S/L                | 3 0000                      | 17,372                                    |                          |                        |                                       |
| GREEK ALABASTER<br>PENDANT | 2017-10-06       | 5,936                  | 495                          | S/L                | 3 0000                      | 1,978                                     |                          |                        |                                       |
| ROUND CONFERENCE           | 2017-10-06       | 6,203                  | 517                          | S/L                | 3 0000                      | 2,068                                     |                          |                        |                                       |

| efile GRAPHIC print - DO NOT PROCESS | As Filed Data - | DLN: 93491319019809 |
|--------------------------------------|-----------------|---------------------|
| TY 2018 Investments Corporat         | te Stock Sche   | edule               |
| Name: /                              | AVIV FOUNDATIO  | ON INC              |
| FTN:                                 | 17-4498674      |                     |

621,247

718,187

| <b>EIN:</b> 47-4498674                 |                           |                                  |
|--|---------------------------|----------------------------------|
| Investments Corporation Stock Schedule |                           |                                  |
| Name of Stock                          | End of Year Book<br>Value | End of Year Fair<br>Market Value |
| BLACKROCK TOTAL RETURN CL INST         | 715,893                   | 619,299                          |

JP MORGAN CORE BOND FUND

| efile GRAPHIC print - DO NOT PROCESS | As Filed Data - | DLN: 93491319019809 |
|--------------------------------------|-----------------|---------------------|
| TY 2018 Investments - Other 5        | Schodulo        |                     |
| 14 2018 Investments - Other s        | schedule        |                     |
|                                      |                 |                     |
| Name: /                              | AVIV FOUNDATIO  | ON INC              |
| FTN: 4                               | 17-4498674      |                     |

| <b>LIN:</b> 47 449007         | 4                     |            |                                  |
|-------------------------------|-----------------------|------------|----------------------------------|
| Investments Other Schedule 2  |                       |            |                                  |
| Category/ Item                | Listed at Cost or FMV | Book Value | End of Year Fair<br>Market Value |
| MEDALLION CAPITAL INVESTMENTS |                       | 1,242,819  | 6,334,200                        |

DLN: 93491319019809

37,482

## Name: AVIV FOUNDATION INC.

64,255

ETN: 47 4400674

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|                 | EIN: 47-4490074       |                          |            |                                  |
|-----------------|-----------------------|--------------------------|------------|----------------------------------|
| Category / Item | Cost / Other<br>Basis | Accumulated Depreciation | Book Value | End of Year Fair<br>Market Value |
|                 |                       |                          |            | _                                |

26,773

| efile GRAPHIC print - DO NOT PROCE | ESS As Filed Data      | -                        | DLI                    | N: 93491319019809                           |
|------------------------------------|------------------------|--------------------------|------------------------|---|
| TY 2018 Legal Fees Sched           | ule                    |                          |                        | _   |
|                                    |                        |                          |                        |   |
| Na                                 | me: AVIV FOUND         | DATION INC               |                        |   |
| E                                  | <b>EIN:</b> 47-4498674 |                          |                        |   |
| Category                           | Amount                 | Net Investment<br>Income | Adjusted Net<br>Income | Disbursements<br>for Charitable<br>Purposes |
| LEGAL FEES                         | 3,825                  |                          |                        | 3,825                                       |

Name: AVIV FOUNDATION INC

**EIN:** 47-4498674

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Other Assets Schedule

SECURITY DEPOSIT

| le          |                                   |                             |                                    |  |  |  |
|-------------|-----------------------------------|-----------------------------|------------------------------------|--|--|--|
| Description | Beginning of Year -<br>Book Value | End of Year - Book<br>Value | End of Year - Fair<br>Market Value |  |  |  |
|             | 10,162                            | 12,162                      |                                    |  |  |  |
|             |                                   | 154,430                     |                                    |  |  |  |

DLN: 93491319019809

| efile GRAPHIC print - DO NOT PROCESS | As Filed Data -                      |                          | DLN                    | l: 93491319019809                           |
|--------------------------------------|--------------------------------------|--------------------------|------------------------|---|
| TY 2018 Other Expenses Sche          | dule                                 |                          |                        |   |
| Name:                                | AVIV FOUNDAT                         | ION INC                  |                        |   |
| EIN:                                 | 47-4498674                           |                          |                        |   |
| Other Expenses Schedule              |                                      |                          |                        |   |
| Description                          | Revenue and<br>Expenses per<br>Books | Net Investment<br>Income | Adjusted Net<br>Income | Disbursements for<br>Charitable<br>Purposes |
| EXPENSES                             |                                      |                          |                        |   |

164

3,376

10,391

1,895

1,490

2,372

3,202

12,442

226

164

3,376

10,391

1,895

1,490

2,372

3,202

12,442

226

BANK CHARGES

OFFICE EXPENSE & SUPPLIES

**REPAIRS & MAINTENANCE** 

SMALL EQUIPMENT PURCHASE

TELECOMMUNICATIONS

**DUES & SUBSCRIPTIONS** 

**INSURANCE** 

PAYROLL FEES

**POSTAGE** 

DLN: 93491319019809

Name: AVIV FOUNDATION INC

As Filed Data -

**ETN.** 47 4400674

**EIN:** 47-4498674

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 Other Income Schedule

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

 OVERHEAD REIMBURSEMENT
 36.144

| efile GRAPHIC print - DO NOT PROCES      | SS As Filed Data | -                        | DLI                    | N: 93491319019809            |  |
|--|------------------|--------------------------|------------------------|------------------------------|--|
| TY 2018 Other Professional Fees Schedule |                  |                          |                        |                              |  |
|  |                  |                          |                        |                              |  |
| Name: AVIV FOUNDATION INC                |                  |                          |                        |                              |  |
| <b>EIN:</b> 47-4498674                   |                  |                          |                        |                              |  |
|  |                  |                          |                        | 1                            |  |
| Category                                 | Amount           | Net Investment<br>Income | Adjusted Net<br>Income | Disbursements for Charitable |  |

12,000

26,601

17,495

15,307

27,586

27,586

142

ADMINISTRATION OF FOUNDATION

GENERAL OFFICE CONSULTING

BOOKKEEPING / ADMINISTRATIVE FEE

LEADERSHIP COACHING/CONSULTING

INFORMATION TECHNOLOGY SERVICES

INVESTMENT MANAGEMENT SERVICES

**Purposes** 

12,000

26,601

17,495 15,307

142

| efile GRAPHIC print - DO NOT PROCESS | As Filed Data | -                        | DLI                    | N: 93491319019809                           |
|--------------------------------------|---------------|--------------------------|------------------------|---|
| TY 2018 Taxes Schedule               |               |                          |                        |   |
| Name                                 | : AVIV FOUND  | DATION INC               |                        |   |
| <b>EIN:</b> 47-4498674               |               |                          |                        |   |
| Category                             | Amount        | Net Investment<br>Income | Adjusted Net<br>Income | Disbursements<br>for Charitable<br>Purposes |
| 990-PF ESTIMATED TAXES FOR 2018      | 4,000         |                          |                        |   |