Department of the Treasury Internal Revenue Service

Return of Private Foundation

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

▶ Do not enter social security numbers on this form as it may be made public.

▶ Go to www.irs.gov/Form990PF for instructions and the latest information.

OMB No 1545-0052

Fo	r calen	dar year 2018 or tax year beginning 12/1	9 , 2	018, and	ending	12/31/2018	, 20
Na	me of four	ndation			A Employe	er identification number	r
Th	e JESK	Foundation Inc				83-2892807	
		street (or P O box number if mail is not delivered to street address)	R	oom/suite	B Telephor	ne number (see instructi	ons)
31	Bisbee i	Ln				9174955845	
		state or province, country, and ZIP or foreign postal code			C If exempt	tion application is pend	ng, check here ▶ ✓
Be	dford Hi	lls, NY 10507-2205				non approach to pond	g, ender neite [v]
			of a former put	olic charity	D 1. Foreig	n organizations, check l	nere ►
		☐ Final return ☐ Amended			1		. —
		Address change Name char	nge			n organizations meeting here and attach compu	
H	Check	type of organization Section 501(c)(3) exempt p	<u> </u>	on /	E If private	foundation status was	
		n 4947(a)(1) nonexempt charitable trust Other tax			section 5	07(b)(1)(A), check here	▶□
ī		arket value of all assets at J Accounting method			1		
		year (from Part II, col. (c), Other (specify)	, <u> </u>	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		ndation is in a 60-mont ction 507(b)(1)(B), check	
	line 16		on cash basis.)			,	_
	Part I	Analysis of Revenue and Expenses (The total of		.	J		(d) Disbursements
,		amounts in columns (b), (c), and (d) may not necessarily equal	(a) Revenue and expenses per	(D) NE	t investment	(c) Adjusted net	for charitable
		the amounts in column (a) (see instructions).)	books	'	ncome	ıncome	purposes (cash basis only)
_	1	Contributions, gifts, grants, etc., received (attach schedule)	2,000.0	200 35:25	1987 W. Mari 442	EU WARMEN	DESCRIPTION OF THE PARTY.
	2	Check ► ☐ if the foundation is not required to attach Sch. B	Der Gala			R. S. C. L. B. Sen T.	
I	3	Interest on savings and temporary cash investments		.61	26.61		KANEE OF THE
$^{\prime}$	4	Dividends and interest from securities		0	20.01		SECURITY DE
•	5a	Gross rents		-			MERCHEN
	.b	Net rental income or (loss)	DE LANGE - WATER	300° 735.858	#19" ANTER 445%		Tayle Read
G:		Net gain or (loss) from sale of assets not on line 10	At 1 Days 1 of Sales also .			PARTY RESERVED THE	
Revenue	Ь	Gross sales price for all assets on line 6a	10 45 1 34 E 1				
Š	7	Capital gain net income (from Part IV, line 2)	E STATE TO			Man And WAR	
ğ	8	Net short-term capital gain	15 XO () () ()				PARTY IN CARD 6
	9	Income modifications	PARISTON A			0	EMERA-THA
	10a	Gross sales less returns and allowances	OFFERNALIS, I			SAL CARREST	
	Ь	Less: Cost of goods sold				A STATE OF THE STA	
	c	Gross profit or (loss) (attach schedule)			MANUTA OF THE PARTY OF THE PART		Service A
	11	Other income (attach schedule)	20	0.01 1.2.3.35	NA W. CERMANE		READ THORSES TO
	12	Total. Add lines 1 through 11	2,000,026	61	26.61		Part and
_	12	Compensation of officers, directors, trustees, etc.	2,000,020	0	20.01	 -	E MERINE ROMANIA. A
o d	14	Other employee salaries and wages CEIVED IN CO		0			0
S L	15	Pension plans, employee benefits	RRES	0	0		0
Expenses	16a	Legal fees (attach schedule)	9	0		0	0
-	1 0	·	<u> </u>	-0		0	
<u>ĕ</u> .	C	Accounting fees (attach schedule) • MAR 0 5 202 Other professional fees (attach schedule) • • • • • • • • • • • • • • • • • • •	u	0	0	0	0
, ,	17	Interest		0		0	0
<u> </u>	18	Taxes (attach schedule) (see instructions) DEN: UTA	A	0			0
Ξ.	19	Depreciation (attach schedule) and depletion		0	0	 	RANGE COMPAN
E	20	Occupancy		0			
Ă	21	Travel, conferences, and meetings		0	0	 	0
2	22	Printing and publications		0	0	 	<u>_</u>
7	23	Other expenses (attach schedule)		0			<u>-</u>
Onerating and Administrative	24	Total operating and administrative expenses.				0	0
7	! - '	Add lines 13 through 23					_
٥	25	Contributions, gifts, grants paid		0 535- 59	U STANKE STANKE	SOFT AND	0
Ĉ	26	Total expenses and disbursements. Add lines 24 and 25		O REGISTRO	ARE THE TOTAL	I Such and Profession of	0
_	27	Subtract line 26 from line 12:	-	U Cresia Nati	O CONTRACTOR		0 Hear of Table To England
	a a	Excess of revenue over expenses and disbursements	2 000 000			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	1. G. 454 N. G. 2024 A. S.
	b	Net investment income (if negative, enter -0-) .	2,000,026			LANCE MAN	
	6	Adjusted net income (if negative, enter -0-)	The Action				MSK2280EW
_			THE REPORT OF THE PROPERTY OF	UC 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	THE REAL PRINTERS	1 26.61	THE REPORT OF THE PARTY AND TH

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Cat No 11289X

Form **990-PF** (2018)

Рa	rt II	Balance Sheets Attached schedules and amounts in the description column	Beginning of year	End o	of year
		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	0		0
	2	Savings and temporary cash investments	0	2,000,026.61	2,000,026.61
	3	Accounts receivable ▶0			
		Less ⁻ allowance for doubtful accounts ▶ 0	0	0	0
	4				
		Less. allowance for doubtful accounts ▶ 0	0	0	0
	5	Grants receivable	0	0	0
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons (attach schedule) (see instructions)	o	0	О
	7	Other notes and loans receivable (attach schedule) ▶0			
ı		Less: allowance for doubtful accounts ▶ 0	0	0	0
ţ	8	Inventories for sale or use	0	0	0
Assets	9	Prepaid expenses and deferred charges	0	0	0
As	10a	Investments—U.S. and state government obligations (attach schedule)	0	0	0
	ь	Investments—corporate stock (attach schedule)	O	0	0
	С	Investments—corporate bonds (attach schedule)	0		0
	11	Investments—land, buildings, and equipment: basis ▶0		-	İ
		Less accumulated depreciation (attach schedule) ▶ 0	0	0	0
	12	Investments—mortgage loans	0	0	o o
	13	Investments—other (attach schedule)	0		0
	14	Land, buildings, and equipment basis ▶ 0			i
		Less: accumulated depreciation (attach schedule) ▶ 0	0	0	0
	15	Other assets (describe ▶	0	0	0
	16	Total assets (to be completed by all filers—see the			· ·
		ınstructions. Also, see page 1, item l)	o	2,000,026.61	2,000,026.61
	17	Accounts payable and accrued expenses	0	0	1
S	18	Grants payable	0		
Liabilities	19	Deferred revenue	0		
ΞĮ	20	Loans from officers, directors, trustees, and other disqualified persons	0		
iak	21	Mortgages and other notes payable (attach schedule)	0		
_	22	Other liabilities (describe ►	0		
	23	Total liabilities (add lines 17 through 22)	0		
,		Foundations that follow SFAS 117, check here ▶ □			
Balances		and complete lines 24 through 26, and lines 30 and 31.			
ă	24	Unrestricted			
ğ	25	Temporarily restricted		<u> </u>	
핗	26	Permanently restricted			
Fund		Foundations that do not follow SFAS 117, check here ▶ ☑			
Ē		and complete lines 27 through 31.			İ
ō	27	Capital stock, trust principal, or current funds			
ets	28	Paid-ın or capıtal surplus, or land, bldg., and equipment fund			
Net Assets	29	Retained earnings, accumulated income, endowment, or other funds	0	2,000,026.61	
7	307	Total net assets or fund balances (see instructions)	0	2,000,026.61	
Š	31/)	otal liabilities and net assets/fund balances (see			
	<u> </u>	Instructions)			
Pa	rt III	Analysis of Changes in Net Assets or Fund Balances			
1	Tota	al net assets or fund balances at beginning of year-Part II, colu	mn (a), line 30 (mus	t agree with	
	end-	-of-year figure reported on prior year's return)		1	0
2	Ente	er amount from Part I, line 27a		2	2,000,026.61
3	Othe	er increases not included in line 2 (itemize) ▶		3	0
4	Add	lines 1, 2, and 3		4	2,000,026.61
5					0
6	Tota	reases not included in line 2 (itemize) ► il net assets or fund balances at end of year (line 4 minus line 5)—	Part II, column (b), Iı	ne 30 6	2,000,026.61
				_	Form 990-PF (2018)

art IV	Capital Gains and	d Losses for Tax on Invest	nent income			
		ind(s) of property sold (for example, real use, or common stock, 200 shs. MLC Co		(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr.)	(d) Date sold (mo , day, yr.)
1a						
b						
<u>c</u>				-		
<u>d</u>						
е		(f) Depreciation allowed	(a) Cost or	other basis	(b) Gau	n or (loss)
(e	e) Gross sales price	(or allowable)		ense of sale		f) minus (g))
a b			ļ			
C						
d						
e						
Co	omplete only for assets sho	owing gain in column (h) and owned	by the foundation	on 12/31/69.	(I) Gains (Co	I. (h) gain minus
(1)	FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69		ss of col. (i)	col (k), but no	t less than -0-) or rom col (h))
a						
b						
С						
d						•
е			<u> </u>		<u> </u>	
2 C	apital gain net income o	or mer cabillatiossi 7	, also enter in Pa s), enter -0- in Pa	3	2	
lf		iin or (loss) as defined in sectior t I, line 8, column (c). See instr				
			aonono. II (1000)	,, cinci o iii }	! _ !	
art V or option	Qualification Unconal use by domestic pr	der Section 4940(e) for Recrivate foundations subject to the	luced Tax on N	Net Investment		
art V or option ection as the	Qualification Undonal use by domestic properties of 4940(d)(2) applies, leaving foundation liable for the	der Section 4940(e) for Recrivate foundations subject to the	luced Tax on Ne section 4940(a)	Net Investment tax on net invest	t Income tment income.)	☐ Yes ☑
art V or option section as the Yes,"	Qualification Undonal use by domestic properties of 4940(d)(2) applies, leaving foundation liable for the the foundation doesn't	der Section 4940(e) for Recrivate foundations subject to the ve this part blank.	luced Tax on Ne section 4940(a) utable amount of not complete to	Net Investment tax on net invest f any year in the this part.	t Income tment income.) base period?	☐ Yes ☑
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Pane	4

Part \	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see	nstru	ctior	s)
1a	Exempt operating foundations described in section 4940(d)(2), check here ▶ ☐ and enter "N/A" on line 1.			
	Date of ruling or determination letter (attach copy of letter if necessary—see instructions)]
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check		0	<u>53</u>
	here ► and enter 1% of Part I, line 27b		1	
C	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations, enter 4% of			
	Part I, line 12, col. (b).		[
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)		0	00
3	Add lines 1 and 2		0	53
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)		0	00
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-		0	53
6	Credits/Payments:		1	- 1
а	2018 estimated tax payments and 2017 overpayment credited to 2018 6a 6a			
þ	Exempt foreign organizations—tax withheld at source 6b			
C	Tax paid with application for extension of time to file (Form 8868) . 6c		İ	
d	Backup withholding erroneously withheld			
7	Total credits and payments. Add lines 6a through 6d	_	0	00
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached			
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed		0	53
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			
11	Enter the amount of line 10 to be. Credited to 2019 estimated tax ▶ Refunded ▶ 11			
Part '	VII-A Statements Regarding Activities			
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it		Yes	No
	participate or intervene in any political campaign?	1a		✓
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the		. 1	
	instructions for the definition	1b		✓
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials			- 1
	published or distributed by the foundation in connection with the activities.			
C	Did the foundation file Form 1120-POL for this year?	1c		✓_
q	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:			
	(1) On the foundation. ▶ \$ 0 (2) On foundation managers. ▶ \$ 0			
6	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed			- 1
	on foundation managers. ▶ \$0			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		✓
	If "Yes," attach a detailed description of the activities.			- 1
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles			
	of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes .	3		√
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		✓_
Ь	If "Yes," has it filed a tax return on Form 990-T for this year?	4b		✓
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		✓
	If "Yes," attach the statement required by General Instruction T.			
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either			
	By language in the governing instrument, or			
	• By state legislation that effectively amends the governing instrument so that no mandatory directions that			
	conflict with the state law remain in the governing instrument?	6	✓	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV	7	1	
8a	Enter the states to which the foundation reports or with which it is registered. See instructions. ▶			
	New York		1	
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General		.	
	(or designate) of each state as required by General Instruction G? If "No," attach explanation	8b	<u> </u>	✓
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or			
	4942(j)(5) for calendar year 2018 or the tax year beginning in 2018? See the instructions for Part XIV. If "Yes,"			
	complete Part XIV	9	1	<u> </u>
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their		1	
	names and addresses	10	_ ✓	

_Part	rt VII-A Statements Regarding Activities (c	ontinued)			
				Yes	No
11	At any time during the year, did the foundation, meaning of section 512(b)(13)? If "Yes," attach sche	directly or indirectly, own a controlled entity within the dule. See instructions	11		/ _
12		advised fund over which the foundation or a disqualified ement. See instructions	12		1
13		equirements for its annual returns and exemption application?	13	1	
	Website address ► None				
14	The books are in care of ► John L Oram	Telephone no. ► 917	7 495	5845	
	Located at ► 31 Bisbee Lane	ZIP+4 ▶ 10	507-2	205	<u></u>
15		Form 990-PF in lieu of Form 1041 — check here		. 1	▶ □
	and enter the amount of tax-exempt interest receive			 1	 -
16		dation have an interest in or a signature or other authority	46	Yes	No_
		a foreign country?	16		-/ -
	the foreign country	erients for thocky form 114. If Tes, enter the hame of			
Part		r Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the "Yes			Yes	No
1a					
	(1) Engage in the sale or exchange, or leasing of pro-	operty with a disqualified person? Yes No			
	(2) Borrow money from, lend money to, or otherw				
	disqualified person?				
	(3) Furnish goods, services, or facilities to (or accept			1	
	(4) Pay compensation to, or pay or reimburse the extension(5) Transfer any income or assets to a disqualified page 4.				
		· · · · · · · · · · · · · · · · · · ·			
	(6) Agree to pay money or property to a governme				
	foundation agreed to make a grant to or to				
		within 90 days.) Yes 🗹 No			
b		e acts fail to qualify under the exceptions described in			
	Regulations section 53.4941(d)-3 or in a current not		1b		
	Organizations relying on a current notice regarding				
С	 Did the foundation engage in a prior year in any of were not corrected before the first day of the tax ye 	the acts described in 1a, other than excepted acts, that ar beginning in 2018?	1c		
2		2) (does not apply for years the foundation was a private			
_	operating foundation defined in section 4942(j)(3) or At the end of tax year 2018, did the foundation have	•			
а	6e, Part XIII) for tax year(s) beginning before 2018?	· ·			
	If "Yes," list the years ► 20 , 20 , 20	, 20			
ь		dation is not applying the provisions of section 4942(a)(2)	:		
	(relating to incorrect valuation of assets) to the year	's undistributed income? (If applying section 4942(a)(2) to			
	all years listed, answer "No" and attach statement-	•	2b		
С	If the provisions of section 4942(a)(2) are being app ▶ 20 , 20 , 20 , 20	lied to any of the years listed in 2a, list the years here.			
За		ndirect interest in any business enterorise			
		· · · · · · · · · · · · · · · · · · ·			
ь	If "Yes." did it have excess business holdings in 2	018 as a result of (1) any purchase by the foundation or			
-		se of the 5-year period (or longer period approved by the			
		of holdings acquired by gift or bequest; or (3) the lapse of			
		od? (Use Schedule C, Form 4720, to determine if the			
_	foundation had excess business holdings in 2018.)		3b		
4a		in a manner that would jeopardize its charitable purposes?	4a	<u> </u>	/
Ь		ear (but after December 31, 1969) that could jeopardize its opardy before the first day of the tax year beginning in 2018?			
	The state of the s	The state of the mot day of the tax year beginning in 2010:	4b	ı	. ✓

Pan	Statements Regarding Activities	tor W	hich Form	4/20 F	иау ве к	equire	a (contir	nuea)			
5a	During the year, did the foundation pay or incur a	ny amo	ount to:							Yes	No
	(1) Carry on propaganda, or otherwise attempt to	influe	nce legislatio	n (secti	on 4945(e))? .	☐ Yes	✓ No			
	(2) Influence the outcome of any specific public	election	on (see secti	on 495	5); or to ca	rry on,					ľ
	directly or indirectly, any voter registration driv	ve?					☐ Yes	✓ No			
	(3) Provide a grant to an individual for travel, stud	dv. or c	ther similar t	ourpose	s?		Yes	☑ No	1	.	ļ.
	(4) Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? See instructions										
	(5) Provide for any purpose other than religious, purposes, or for the prevention of cruelty to cl	charita	able, scientifi	c, litera	ry, or educ	ational	_	☑ No			
b	If any answer is "Yes" to 5a(1)–(5), did any of the in Regulations section 53.4945 or in a current not							cribed	5b		
С	Organizations relying on a current notice regarding disaster assistance, check here										
	If "Yes," attach the statement required by Regula								i .		1
6a	Did the foundation, during the year, receive any f	unds,	directly or inc	directly,	to pay pre	miums			1		į
	on a personal benefit contract?						Yes	✓ No			
b	Did the foundation, during the year, pay premium If "Yes" to 6b, file Form 8870.	s, dire	ctly or indired	tly, on	a personal	benefit	contract	? .	6b		<u> </u>
7a	At any time during the tax year, was the foundation a	party t	o a prohibited	tax she	elter transac	tion?	☐ Yes	✓ No			
b	If "Yes," did the foundation receive any proceeds	or hav	e any net inc	come at	tributable t	o the to	ransactioi	ղ? .	7b		
8	Is the foundation subject to the section 4960 tax										1
	remuneration or excess parachute payment(s) du	ring th	e year?		<u></u>		☐ Yes	✓ No	<u> </u>		
Par	VIII Information About Officers, Direct	ors, 1	rustees, F	ounda	tion Mana	gers,	Highly F	Paid E	mploy	ees,	
	and Contractors						_				
1	List all officers, directors, trustees, and found	ation r	nanagers an	d their	compens	ation. S	See instru	uctions	•		
	(a) Name and address	hou	e, and average rs per week ed to position	(If n	npensation ot paid, ter -0-)	emplo	Contribution byee benefit erred compe	plans	(e) Expe	nse ace allowan	count, ces
John I	_ Oram										
31 Bis	bee Lane, Bedford Hills, NY 10507-2205	1			0			0			0
Elspet	h Oram										
31 Bis	bee Lane, Bedford Hills, NY 10507-2205	1			. 0			0			_0
Kathry	n Oram										
152 Ca	alumet Street, Boston, MA 02120-3303	1			0			0			0
2	Compensation of five highest-paid employee "NONE."	s (oth	er than thos	se inclu	ıded on li	ne 1—	see instr	uctions	s). If n	one,	enter
	(a) Name and address of each employee paid more than \$50,000	0	(b) Title, and a hours per v devoted to p	veek _	(c) Compe	nsation	(d) Contrib employee plans and compen	benefit deferred	(e) Expe	ense ac allowar	
NONE	_										
							<u> </u>				
						_					
							L				
	•••••••••••••••••••••••••••••••••••••••						1				
			L		l		<u> </u>				
Total	number of other employees paid over \$50,000 .		<u></u>	<u> . . </u>	<u>.</u>	<u> </u>	<u> </u>	. ▶			

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid		oloyees,
and Contractors (continued) 3 Five highest-paid independent contractors for professional services. See instructions. If none, enter "N	IONE	"
(a) Name and address of each person paid more than \$50,000 (b) Type of service		(c) Compensation
ONE		
	- 1	
	ightharpoonup	.
	1	
	\longrightarrow	
	ŀ	
	$\overline{}$	
otal number of others receiving over \$50,000 for professional services	>	
Part IX-A Summary of Direct Charitable Activities	. . T	
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number organizations and other beneficiaries served, conferences convened, research papers produced, etc.	r of	Expenses
	\longrightarrow	
1 NONE		
	·	
2		
3		
4		
Part IX-B Summary of Program-Related Investments (see instructions)		
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2		Amount
1 NONE		
2		
All other program-related investments. See instructions		
3		
J		
otal. Add lines 1 through 3	•	
		Form 990-PF (20

Part	·	gn fou	ndations,
	see instructions.)		
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
а	Average monthly fair market value of securities	1a	0
b	Average of monthly cash balances	1b	0
C	Fair market value of all other assets (see instructions)	1c	0
d	Total (add lines 1a, b, and c)	1d	
e	Reduction claimed for blockage or other factors reported on lines 1a and		<u> </u>
C	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	0
3	Subtract line 2 from line 1d	3	0
4	Cash deemed held for charitable activities. Enter 1½% of line 3 (for greater amount, see		
7	instructions)	4	0
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	0
6	Minimum investment return. Enter 5% of line 5	6	
Part		-	
rait	and certain foreign organizations, check here ► and do not complete this part.)	ounda	liono
1	Minimum investment return from Part X, line 6	1	
2a	Tax on investment income for 2018 from Part VI, line 5		<u>_</u>
b	Income tax for 2018. (This does not include the tax from Part VI.)		
C	Add lines 2a and 2b	2c	0
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	<u>v</u>
4	Recoveries of amounts treated as qualifying distributions	4	0
5	Add lines 3 and 4	5	0
6	Deduction from distributable amount (see instructions)	6	0
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII,	 +	
•	line 1	7	0
Part	XII Qualifying Distributions (see instructions)	<u> </u>	
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		· · · · · · · · · · · · · · · · · · ·
a	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26	1a	0
b	Program-related investments—total from Part IX-B	1b	0
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
	purposes	2	0
3	Amounts set aside for specific charitable projects that satisfy the:		
a	Suitability test (prior IRS approval required)	За	0
b	Cash distribution test (attach the required schedule)	3b	0
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8; and Part XIII, line 4	4	0
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income.		<u>~</u>
	Enter 1% of Part I, line 27b. See instructions	5	0
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	0
-	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating qualifies for the section 4940(e) reduction of tax in those years.	g whet	her the foundation
			- 000 DE

Part .	XIII Undistributed Income (see instruction	ons)			
		(a) Corpus	(b) Years prior to 2017	(c) 2017	(d) 2018
1	Distributable amount for 2018 from Part XI, line 7				0
2	Undistributed income, if any, as of the end of 2018.				
a	Enter amount for 2017 only				
b	Total for prior years: 20, 20, 20				
3	Excess distributions carryover, if any, to 2018:	1			
а	From 2013				
b	From 2014		1		
C	From 2015				
d	From 2016				
e f	From 2017				
4	Qualifying distributions for 2018 from Part XII,				
а	line 4: ► \$				
ь	Applied to undistributed income of prior years				
	(Election required—see instructions)	1			<u></u>
С	Treated as distributions out of corpus (Election required—see instructions)				
d	Applied to 2018 distributable amount				
e	Remaining amount distributed out of corpus				
5	Excess distributions carryover applied to 2018 (If an amount appears in column (d), the same amount must be shown in column (a).)		<u> </u>		
6	Enter the net total of each column as indicated below:				
а	Corpus. Add lines 3f, 4c, and 4e. Subtract line 5				
b	Prior years' undistributed income. Subtract line 4b from line 2b				
С	Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed				
d	Subtract line 6c from line 6b. Taxable amount—see instructions				
е	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. Subtract lines 7 and 8 from line 6a				
10	Analysis of line 9.				
а	Excess from 2014				
b	Excess from 2015	_			
C	Excess from 2016	-			'
d	Excess from 2017	4			
e	Excess from 2018	1	i .	1	1

a The name, address, and telephone number or email address of the person to whom applications should be addressed.
 b The form in which applications should be submitted and information and materials they should include:
 c Any submission deadlines:
 d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors:

Supplementary Information (continued) Part XV Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, show any relationship to any foundation manager or substantial contributor Recipient Foundation Purpose of grant or status of Amount contribution Name and address (home or business) recipient a Paid during the year За Approved for future payment

		Analysis of Income-Producing Ad			1 		·
Ente	r gross	s amounts unless otherwise indicated.	(a) Business code	(b) Amount	(c) Excluded by secti	on 512, 513, or 514 (d) Amount	Related or exempt function income
1	Progr	ram service revenue:	Business code	7 inount	LX0Iddioi1 00d0		(See instructions.)
	а						
	b _						
	c _						
	d _						
	е —					-	
	f -						
	a F	ees and contracts from government agencies			<u> </u>	······································	
2	-	bership dues and assessments					-
3		est on savings and temporary cash investments					
4		ends and interest from securities			 		
_		ental income or (loss) from real estate			 		
5							
		ebt-financed property			· - · - · - · - · · · · · · · · · · · ·		
_		ot debt-financed property	<u> </u>		ļ		
_		ental income or (loss) from personal property					
7		r investment income					
8		or (loss) from sales of assets other than inventory			<u> </u>		
9		ncome or (loss) from special events					
10		s profit or (loss) from sales of inventory	-				
11	Othe	r revenue: a					
	b _						
	c _						
	d _				<u> </u>		
	е						
				1			
12	Subte	otal. Add columns (b), (d), and (e)					
12 13	Subto Total	otal. Add columns (b), (d), and (e)		<i>.</i>		13	
13	Total	otal. Add columns (b), (d), and (e) I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation				13	
13 See	Total works	I. Add line 12, columns (b), (d), and (e)	 ns.)			13	
13 See Pa	Total works	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation		ent of Exemp	ot Purposes		mportantly to the
13 See Pa	Total works rt XV e No.	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation Relationship of Activities to the A		ent of Exemp	ot Purposes		mportantly to the
13 See Pa	Total works rt XV e No.	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation Relationship of Activities to the A		ent of Exemp	ot Purposes		mportantly to the
13 See Pa	Total works rt XV e No.	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation Relationship of Activities to the A		ent of Exemp	ot Purposes		mportantly to the
13 See Pa	Total works rt XV e No.	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation Relationship of Activities to the A		ent of Exemp	ot Purposes		mportantly to the
13 See Pa	Total works rt XV e No.	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation Relationship of Activities to the A		ent of Exemp	ot Purposes		mportantly to the ctions.)
13 See Pa	Total works rt XV e No.	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation Relationship of Activities to the A		ent of Exemp	ot Purposes		mportantly to the ctions.)
13 See Pa	Total works rt XV e No.	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation Relationship of Activities to the A		ent of Exemp	ot Purposes		mportantly to the
13 See Pa	Total works rt XV e No.	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation Relationship of Activities to the A		ent of Exemp	ot Purposes		mportantly to the
13 See Pa	Total works rt XV e No.	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation Relationship of Activities to the A		ent of Exemp	ot Purposes		mportantly to the
13 See Pa	Total works rt XV e No.	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation Relationship of Activities to the A		ent of Exemp	ot Purposes		mportantly to the
13 See Pa	Total works rt XV e No.	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation Relationship of Activities to the A		ent of Exemp	ot Purposes		mportantly to the
13 See Pa	Total works rt XV e No.	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation Relationship of Activities to the A		ent of Exemp	ot Purposes		mportantly to the
13 See Pa	Total works rt XV e No.	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation Relationship of Activities to the A		ent of Exemp	ot Purposes		mportantly to the
13 See Pa	Total works rt XV e No.	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation Relationship of Activities to the A		ent of Exemp	ot Purposes		mportantly to the ctions.)
13 See Pa	Total works rt XV e No.	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation Relationship of Activities to the A		ent of Exemp	ot Purposes		mportantly to the ctions.)
13 See Pa	Total works rt XV e No.	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation Relationship of Activities to the A		ent of Exemp	ot Purposes		mportantly to the ctions.)
13 See Pa	Total works rt XV e No.	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation Relationship of Activities to the A		ent of Exemp	ot Purposes		mportantly to the ctions.)
13 See Pa	Total works rt XV e No.	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation Relationship of Activities to the A		ent of Exemp	ot Purposes		mportantly to the ctions.)
13 See Pa	Total works rt XV e No.	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation Relationship of Activities to the A		ent of Exemp	ot Purposes		mportantly to the ctions.)
13 See Pa	Total works rt XV e No.	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation Relationship of Activities to the A		ent of Exemp	ot Purposes		mportantly to the ctions.)
13 See Pa	Total works rt XV e No.	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation Relationship of Activities to the A		ent of Exemp	ot Purposes		mportantly to the ctions.)
13 See Pa	Total works rt XV e No.	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation Relationship of Activities to the A		ent of Exemp	ot Purposes		mportantly to the ctions.)
13 See Pa	Total works rt XV e No.	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation Relationship of Activities to the A		ent of Exemp	ot Purposes		mportantly to the ctions.)
13 See Pa	Total works rt XV e No.	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation Relationship of Activities to the A		ent of Exemp	ot Purposes		mportantly to the ctions.)

		Organization	ons										
1	in se		directly or indirectly eather than section									Yes	No
а	_		porting foundation to	a noncha	aritable exempt	organization	of:						
_											1a(1)		1
		Other assets .									1a(2)		<u> </u>
b		r transactions:						• •		• •	10(2)		
-			a noncharitable exe	mot organ	nization						1b(1)		1
			ets from a noncharita					• •	• •	• •	1b(2)		\
			, equipment, or other		-			• •		• •	1b(3)	_	'
			rrangements					• •		• •	1b(4)		1
		oans or loan gua						• •			1b(5)	_	<u> </u>
		•	ervices or membersh						•		1b(6)		-
С			quipment, mailing lis		_				•	• •	1c	<u> </u>	7
			of the above is "Yes		•							fair m	<u></u>
_			ther assets, or service										
			on or sharing arrange										
(a) Line		(b) Amount involved	(c) Name of nonch		· · · · · · · · · · · · · · · · · · ·	<u> </u>	ption of transfe			-			
					··-	<u> </u>	<u> </u>						
		-											
						-							
											-		
											-		
											-		
			-										
						-							
2a	Is th	e foundation dire	ectly or indirectly af	filiated w	th, or related	to, one or m	ore tax-exer	mpt o	rganiz	zations			
			501(c) (other than sec		c)(3)) or in secti	on 527? .					□ Y	es 🗹] No
b	If "Ye	es," complete the	e following schedule.										
		(a) Name of organ	nization	((b) Type of organiza	ition		(c) Des	cription	of relati	onship		
				/	<u></u>								
Si~~	Und	er penalties of perjury, I ect. and complete. Deaf	declare that I have examine aration of preparer (other tha	d this return,	including accompany	ring schedules and	statements, and	to the b	pest of r	ny knowl	edge and	belief, i	t is true,
Sign			aranon or proparor (orner the	in taxpayer,	1/08/		1/-	wieuge			IRS disc		
Here			m	l.		Director &	YE			with the See instr	preparer uctions	shown t	
	Sigi	nature of officer or trus		,	Date /	Title				JJJ 11.011			
Paid		Print/Type preparer	r's name	Preparer's	s signature		Date	\neg	Check		PTIN		
Prepa	arer									nployed			
Use (Firm's name ▶						Fırm's	EIN >				
		Firm's address ▶						Phone	no e				

Schedule B

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

► Attach to Form 990, Form 990-EZ, or Form 990-PF. ► Go to www.irs.gov/Form990 for the latest information. OMB No 1545-0047

2018

Employer identification number

The JESK Foundation Inc. 83-2892807 Organization type (check one): Filers of: Section: Form 990 or 990-EZ 501(c)() (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation RECEIVED IN CORRES IRS - OSC - 20 527 political organization MAR 0 5 2020 Form 990-PF 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation OGDEN, UTAH ☐ 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. **General Rule** For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions. **Special Rules** For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 331/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address). II, and III. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990,

990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization Employer identification number 83-2892807

Part I	Contributors (see instructions). Use duplicate copie	es of Part I if additional space is i	needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(c) (d) Type of contribution Person Payroll Noncash (Complete Part II for noncash contributions.)	
1	John L Oram 31 Bisbee Ln Bedford Hills, NY 10507-2205	\$\$		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
		· c	Person	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
		\$	Person	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
		\$	Person	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
		\$	Person	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
		\$	Person	

Name of organization

Employer identification number The JESK Foundation Inc 83-2892807

Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received	
		\$		
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received	
		\$		
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received	
		\$, 	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received	
		\$		
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received	
		\$		
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received	
		\$		

Vame of org	anization	-		Employ	er identification number		
	oundation Inc				83-2892807		
Part III	Exclusively religious, charitable, etc. (10) that total more than \$1,000 for the following line entry. For organization contributions of \$1,000 or less for the	he year from any one one one completing Part III, one year. (Enter this information)	contributor. Coenter the total o	omplete columns of <i>exclusively</i> reli	s (a) through (e) and gious, charitable, etc.,		
	Use duplicate copies of Part III if additi	ional space is needed.					
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	t	(d) Description	n of how gift is held		
] -							
	(e) Transfer of gift						
1	Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee						
-	Transferee 3 fiame, address, and 211 + 4						
				·····			
(a) No. from	(h) Burnasa of gift	(a) Use of gif	•	(d) Description	n of how gift is held		
Part I	(b) Purpose of gift (c) Use of gift		`	(d) Description			
]							
<u> </u>							
	(e) Transfer of gift						
l	Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee						
			•				
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held			
					······································		
_							
	(e) Transfer of gift						
	Transferee's name, address, and	hip of transferor	to transferee				
Ī							
					•••••		
(a) No. from Part I	(b) Purpose of gift	(c) Use of git	ft	(d) Descriptio	n of how gift is held		
					•••••		
	(e) Transfer of gift						
	Transferee's name, address, and ZIP + 4 Rela			ship of transferor	to transferee ,		
							
[

· The JESK Foundation Inc

EIN 83-2892807

Attachment to From 990-PF 2018

PART VII-A 10

Substantial Contributor

John L Oram 31 Bisbee Lane Bedford Hills, NY 10507