Form 990-PF

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

| De | Department of the Treasury Do not enter social security numbers on this form as it may be made public. | | | | | | | | |
|------------------------------------|---|---|------------------------------------|---------------------------|---|---|--|--|--|
| Int | Department of the Treasury Internal Revenue Service | | | | | | | | |
| | | of foundation | A Employer identification number | | | | | | |
| | | E G. UNGER VETLESEN FOU | A cuitioner insuringarion | nomper | | | | | |
| C/O FULTON VITTORIA LLP 13-1982695 | | | | | | | | | |
| N | umbei | r and street (or P.O. box number if mail is not delivered to stre | et address) | Room/suite | B Telephone number | | | | |
| | ONI | E ROCKEFELLER PLAZA | | 301 | 212-586-070 | 00 | | | |
| | | town, state or province, country, and ZIP or foreign V YORK, NY 10020–2002 | postal code | | C If exemption application is pe | nding, check here | | | |
| | | ck all that apply: Initial return | Initial return of a | former public charity | D 1. Foreign organizations, | check here | | | |
| _ | | Final return | Amended return | ionnoi puone onanty | | | | | |
| | | Address change | Name change | | Foreign organizations mee check here and attach com | ting the 85% test, | | | |
| Н | Chec | ck type of organization: X Section 501(c)(3) e | exempt private foundation | | E If private foundation statu | | | | |
| | | ection 4947(a)(1) nonexempt charitable trust | | Jation | under section 507(b)(1)(| | | | |
| | | narket value of all assets at end of year J Account | | Accrual | F If the foundation is in a 6 | 0-month termination | | | |
| | | | Other (specify) | | under section 507(b)(1)(| B), check here | | | |
| | ≻ \$ | 135,049,115. (Part I, colu | | | | /43 | | | |
| | art | Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a).) | (a) Revenue and expenses per books | (b) Net investment income | (c) Adjusted net income | (0) Disbursements for charitable purposes (cash basis only) | | | |
| | 1 | , 3, 3,,, | | | N/A | | | | |
| | 2 | | | 422-414 | | | | | |
| | 3 | Interest on savings and temporary cash investments | 125,141. | 125,141. | | STATEMENT 1 | | | |
| | 4 | Dividends and interest from securities | 2,715,292. | 2,715,292. | | STATEMENT 2 | | | |
| | 1 . | a Gross rents | | | | | | | |
| | . | Net rental income or (loss) Net gain or (loss) from sale of assets not on line 10 | 9,148,300. | <u> </u> | | | | | |
| ne | 1 | Gross sales price for all 22,046,500. | 3/110/300. | | | | | | |
| Revenue | 7 | Capital gain net income (from Part IV, line 2) | | 9,148,300. | | | | | |
| ď | 8 | Net short-term capital gain | | , | | | | | |
| | 9 | Income modifications | | | | | | | |
| | 10a | Gross sales less returns and allowances | | | | | | | |
| | b | Less: Cost of goods sold | | | | | | | |
| | C | Gross profit or (loss) | | | | | | | |
| | 11 | Other income | 11 000 722 | 11 000 700 | | | | | |
| | 12 | Total. Add lines 1 through 11 | 170,000. | 11,988,733. 85,000. | | OE AAA | | | |
| | 13 | Compensation of officers, directors, trustees, etc | 20,833. | 10,417. | | 85,000. 10,416. | | | |
| | 1 | Pension plans, employee benefits | 20,033. | 10,11, | | 10,410. | | | |
| Ses | 16a | Legal fees STMT 3 | 30,464. | 15,232. | <u> </u> | 15,232. | | | |
| ens | b | Accounting fees STMT 4 | 42,167. | 21,084. | | 21,083. | | | |
| Expenses | C | Other professional fees STMT 5 | 375,815. | 371,446. | | 4,369. | | | |
| š | 17 | Interest | | | | | | | |
| trat | 18 | Interest STMT 6 | 159,020. | 6,010. | <u></u> | 6,010. | | | |
| inis | 19 | Depreciation and depletion | | | | | | | |
| Ę, | 20 | Occupancy | | | | | | | |
| ΑÞ | 21 | Travel, conferences, and meetings | | | | | | | |
| a a | 22 | Printing and publications Other expenses STMT 7 | 25,304. | 12,653. | | 12,651. | | | |
| ting | | Total operating and administrative | 23,304. | 12,000. | | 12,031. | | | |
| Operating and Administrative | | expenses. Add lines 13 through 23 | 823,603. | 521,842. | | 154,761. | | | |
| Ö | | Contributions, gifts, grants paid | 6,802,500. | ,0.22 | | 6,802,500. | | | |
| | | Total expenses and disbursements. | | | | | | | |
| | | Add lines 24 and 25 | 7,626,103. | 521,842. | | 6,957,261. | | | |
| | | Subtract line 26 from line 12: | | | | | | | |
| | | Excess of revenue over expenses and disbursements | 4,362,630. | | | | | | |
| | | Net investment income (if negative, enter -0-) | | 11,466,891. | | | | | |
| | ε | Adjusted net income (if negative, enter -0-) | | | N/A | | | | |

823501 12-11-18 LHA For Paperwork Reduction Act Notice, see Instructions.

Form 990-PF (2018)

19004003 725234 THE G. UNGER VETLESEN FOUNDATION Form 990-PF (2018) C/O FULTON VITTORIA LLP 13-1982695 Page 2 Beginning of year Part II Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only. End of year (a) Book Value (b) Book Value (c) Fair Market Value Cash - non-interest-bearing 137,961. 128,894. 128,894. 2 Savings and temporary cash investments 1,033,626. 7,889,204. 7,889,204. 3 Accounts receivable Less: allowance for doubtful accounts 4 Pledges receivable Less: allowance for doubtful accounts 5 Grants receivable 6 Receivables due from officers, directors, trustees, and other disqualified persons 7 Other notes and loans receivable Less: allowance for doubtful accounts 8 Inventories for sale or use 9 Prepaid expenses and deferred charges 10a Investments - U.S. and state government obligations b Investments - corporate stock STMT 8 50,333,677. 47,849,796. 127,031,017. c Investments - corporate bonds 11 Investments - land, buildings, and equipment basis Less: accumulated depreciation 12 Investments - mortgage loans 13 Investments - other 14 Land, buildings, and equipment: basis Less: accumulated depreciation 15 Other assets (describe ► 16 Total assets (to be completed by all filers - see the 55,867,894. 135,049,115. 51,505,264. instructions. Also, see page 1, item I) 17 Accounts payable and accrued expenses 18 Grants payable 19 Deferred revenue Loans from officers, directors, trustees, and other disqualified persons Mortgages and other notes payable 21 22 Other liabilities (describe 23 Total liabilities (add lines 17 through 22) Foundations that follow SFAS 117, check here X and complete lines 24 through 26, and lines 30 and 31. 51,505,264. 24 Unrestricted 55,867,894. 25 Temporarily restricted 26 Permanently restricted _____ Foundations that do not follow SFAS 117, check here ___ \bigsilon \bigsilon \bigsilon and complete lines 27 through 31. 27 Capital stock, trust principal, or current funds 28 Paid-in or capital surplus, or land, bldg., and equipment fund 29 Retained earnings, accumulated income, endowment, or other funds 51,505,264. 55,867,894. 30 Total net assets or fund balances 51,505,264. 31 Total liabilities and net assets/fund balances 55,867,894. Part III Analysis of Changes in Net Assets or Fund Balances

| 1 | Total net assets or fund balances at beginning of year - Part II, column (a), line 30 | T | |
|---|---|---|-------------|
| | (must agree with end-of-year figure reported on prior year's return) | 1 | 51,505,264. |
| 2 | Enter amount from Part 1, line 27a | 2 | 4,362,630. |
| 3 | Other increases not included in line 2 (itemize) | 3 | 0. |
| 4 | Add lines 1, 2, and 3 | 4 | 55,867,894. |
| 5 | Decreases not included in line 2 (itemize) | 5 | 0. |
| 6 | Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30 | 6 | 55,867,894. |

Form 990-PF (2018)

Net Assets or Fund Balances

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13-1982695

Page 3

| | and Losses for Tax on Ir the kind(s) of property sold (for exa | | | (b) How | acquired | (c) Date | acquired | (d) Date sold |
|---|---|---|---|-------------|---|---|--|-----------------|
| 2-story brick warehouse; or common stock, 200 shs. MLC Co.) P - Purchase D - Donation | | | | | | (mo., | day, yr.) | (mo., day, yr.) |
| | E SCHEDULE) | | | | P | VAR: | IOUS | 12/31/18 |
| <u>b</u> | | | | | | | ······································ | |
| d | | ···· | | ····· | | | | |
| 8 | | | | | | | * | |
| (e) Gross sales price | (f) Depreciation allowed (or allowable) | plus | ost or other basis expense of sale | | | (h) (((e) piu | Gain or (loss us (f) minus |) (9)) |
| a 22,046,500. | |] | 2,898,200 | | | | | 9,148,300 |
| b | | | | | | | | |
| d d | | | | | | | | |
| e | *************************************** | | | | | | | |
| | gain in column (h) and owned by t | he foundatio | n on 12/31/69. | | (1 | Gains (| Col. (h) gain | minus |
| (i) FMV as of 12/31/69 | (j) Adjusted basis as of 12/31/69 | | xcess of col. (i) r col. (j), if any | | | (k), but | not less that (from col. (| 10 (-0- r |
| a | | | | | | | | 9,148,300. |
| <u>b</u> | | | | | | | | |
| 8 | | | | | | | | |
| d e | | | | | | | | |
| <u>C</u> | (6 | in Donald Con- | ., | _ | T | | | |
| 2 Capital gain net income or (net cap | ital loss) { If gain, also enter If (loss), enter -0- | in Part I, line in Part I, line | 7 7 | 2 | | | | 9,148,300. |
| 3 Net short-term capital gain or (loss if gain, also enter in Part I, line 8, cut I (loss), enter -0- in Part I, line 8 | | ` ' | | | | | N/A | |
| Part V Qualification Un | der Section 4940(e) for | Reduced | Tax on Net Ir | vestr | nent Inc | ome | IV/A | |
| If section 4940(d)(2) applies, leave this Was the foundation liable for the sectio If "Yes," the foundation doesn't qualify Enter the appropriate amount in ea | in 4942 tax on the distributable amo | plete this par | t . | | *************************************** | | | Yes X No |
| (a) Base period years | (b) | | | c) | | Т | | (d) |
| Calendar year (or tax year beginning | | ibutions | Net value of nonch | | use assets | (d) Distribution ratio (col. (b) divided by col. (c)) | | |
| 2017 | ~~~ | ,894. | | | 6,210 | • | | .046522 |
| 2016 | | ,063. | | | 9,516 | | · · · · · · · · · · · · · · · · · · · | .053950 |
| 2015 2014 | | ,365. | | | 4,658 5,843 | | | .051050 |
| 2013 | | ,911. | | | $\frac{3,043}{4,145}$ | | | .043363 |
| | | 7 1 | | 7,70 | -/ | | | .041004 |
| Total of line 1, column (d) | *************************************** | *************************************** | | | | 2 | | .236879 |
| Average distribution ratio for the 5-y | rear base period - divide the total on | line 2 by 5.0 |), or by the number o | f years | | | | |
| the foundation has been in existence | e if less than 5 years | | | | ••••• | 3 | | .047376 |
| Enter the net value of noncharitable-use assets for 2018 from Part X, line 5 | | | | | 4 | 149 | ,951,443. | |
| Multiply line 4 by line 3 | | | | | 5 | 7 | ,104,100. | |
| Enter 1% of net investment income (1% of Part I, line 27b) | | | | | 6 | | 114,669. | |
| Add lines 5 and 6 | | | | | 7 | 7 | ,218,769. | |
| Enter qualifying distributions from Part XII, line 4 | | | | | 8 | 6 | ,957,261. | |
| If line 8 is equal to or greater than lin See the Part VI instructions. | e 7, check the box in Part VI, line 1t | o, and compl | ete that part using a | 1% tax r | ate. | | | |
| COS THE FAIR STREET, | | | | | | | | |

| For | m 990-PF (2018) C/O FULTON VITTORIA LLP | 13- | -198 | 2695 | ì | Page |
|-----|--|----------|---------------------------------------|------------|------------|-------|
| P | art VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or | 4948 | - see | instru | uctio | ins) |
| 1: | a 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) | | | | | |
| ı | Domestic foundations that meet the section 4940(e) requirements in Part V, check here 🕨 🔲 and enter 1% | 1 | | 22 | 9,3 | 338. |
| | of Part I, line 27b | | | | | |
| (| All other domestic foundations enter 2% of line 27b. Exempt foreign organizations, enter 4% of Part I, line 12, col. (b). | | | | | |
| | Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-) | 2 | <u> </u> | | * | 0. |
| 3 | Add lines 1 and 2 | 3 | | 22 | <u>9,3</u> | 338. |
| 4 | Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-) | 4 | | | | 0. |
| 5 | Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0- | 5 | | <u>22</u> | 9,3 | 338. |
| 6 | Credits/Payments: | | | | | |
| | 2018 estimated tax payments and 2017 overpayment credited to 2018 | <u>.</u> | | | | |
| b | Exempt foreign organizations - tax withheld at source 6b | _ | | | | |
| | Tax paid with application for extension of time to file (Form 8868) | _ | | | | |
| d | Backup withholding erroneously withheld 0. | _ | | | | |
| 7 | Total credits and payments. Add lines 6a through 6d | 7 | | <u> 19</u> | 7,2 | 76. |
| 8 | Enter any penalty for underpayment of estimated tax. Check here X if Form 2220 is attached | 8 | | | | 0. |
| 9 | Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed | 9 | | 3 | 2,0 | 62. |
| 10 | Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid | 10 | | | | |
| 11 | Enter the amount of line 10 to be: Credited to 2019 estimated tax ▶ Refunded ▶ | 11 | | | | |
| Pa | rt 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 participate or intervene | in : | | | Yes | No |
| | any political campaign? | | · · · · · · · · · · · · · · · · · · · | 1a | | X |
| b | Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the defin | | | 1b | | X |
| | If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or | | | | | |
| | distributed by the foundation in connection with the activities. | | | | | |
| C | Did the foundation file Form 1120-POL for this year? | | | 10 | | Х |
| | Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: | | | | | |
| | (1) On the foundation. \triangleright \$ 0. (2) On foundation managers. \triangleright \$ 0. | | | | | |
| e | Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation | | | | | |
| | managers. ► \$0 . | | | | | |
| 2 | Has the foundation engaged in any activities that have not previously been reported to the IRS? | | ***** | 2 | | X |
| | If "Yes," attach a detailed description of the activities. | | | | | |
| 3 | Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or | r | | | | |
| | bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes | | | 3 | X | |
| 4a | Did the foundation have unrelated business gross income of \$1,000 or more during the year? | | | 4a | | X |
| b | If "Yes," has it filed a tax return on Form 990-T for this year? | N | /A | 4b | | |
| 5 | Was there a liquidation, termination, dissolution, or substantial contraction during the year? | | | 5 | | X |
| | 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 | X | |
| | 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 | Х | |
| | | | | | | |
| 8a | Enter the states to which the foundation reports or with which it is registered. See instructions. | | | | | |
| | NY | | | | | |
| b | If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) | | | | | |
| 1 | of each state as required by General Instruction G? If "No," attach explanation | | | 8b | X | |
| | s the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for cales | | | | | |
| | year 2018 or the tax year beginning in 2018? See the instructions for Part XIV. If "Yes," complete Part XIV | | | 9 | | X |
| | Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses | | | 10 | | X |
| | | | For | m 990. | PF/ | 2018) |

19004003 725234 42 THE G. UNGER VETLESEN FOUNDATION C/O FULTON VITTORIA LLP Form 990-PF (2018) 13-1982695 Page 5 Part VII-A Statements Regarding Activities (continued) Yes No 11 At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule. See instructions X 12 Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement. See instructions 12 Х 13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ► WWW.VETLESENFOUNDATION.ORG Located at NONE ROCKEFELLER PLAZA-SUITE 301

Section 4947(a)(1) nonexempt charitable trusts filling Form 900-PE in line of Face 400. 14 The books are in care of ► MAURIZIO J MORELLO 15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here N/A and enter the amount of tax-exempt interest received or accrued during the year _______ 15 16 At any time during calendar year 2018, did the foundation have an interest in or a signature or other authority over a bank, Yes No securities, or other financial account in a foreign country? 16 X See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the foreign country Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required File Form 4720 if any item is checked in the "Yes" column, unless an exception applies. Yes No 1a During the year, did the foundation (either directly or indirectly): (1) Engage in the sale or exchange, or leasing of property with a disqualified person? (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? Yes X No (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? ______ X Yes ____ No (5) Transfer any income or assets to a disqualified person (or make any of either available (6) Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.) b If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions X 1b Organizations relying on a current notice regarding disaster assistance, check here c Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2018? X 2 Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)): a At the end of tax year 2018, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2018? Yes X No If "Yes," list the years b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement - see instructions.) N/A c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here. 3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time

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4b

Х

Х

during the year? Yes X No

Form 4720, to determine if the foundation had excess business holdings in 2018.)

N/A

Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?

b If "Yes," did it have excess business holdings in 2018 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C,

b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2018?

| (2) Influence the outcome of any specific public election (see section 4945(e))? Yes X No (2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, any order registration drive? Yes X No (3) Provide a grant to an individual for travel, study, or other similar purposes? Yes X No (4) Provide a grant to an organization other than a chariable, etc., organization described in section 4945(d/4)/N)? See instructions Yes X No (5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals? Yes X No bit any answer is "yes" to Sq.1/1-(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance, check here I the answer is "yes" to question 54(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? If "yes," attach the statement required by Regulations section 53.4945-5(d). Ba Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? If "Yes X No bit "yes," did the foundation during the year, pay premiums, directly or indirectly, to pay premiums on a personal benefit contract? If "Yes," did the foundation during the year, pay promiums, directly or indirectly, to pay premiums on a personal benefit contract? If "Yes," did the foundation experience and the foundation aparty to a prohibited tax shelter transaction? At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? If "Yes," did the foundation experience and the foundation or access parachule payment(s) during the year? Part Yill I Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors List all officers, directors, rustees, and foundation managers and their compensation. (a) Na | 6- Duis-Manuality Country (Country Activities 101 Will | ich Form 4720 May be | Required (con | Unued) | MANAGE - |
|---|---|---|------------------|--|---------------------------------------|
| (2) Influence the outcome of any specific public section (see section 4955); or to carry on, directly, any outer registration driver. (3) Provide a grant to an individual for travel, study, or other similar purposes? (4) Provide a grant to an individual for travel, study, or other similar purposes? (5) Provide for any purpose other than resignes, charitable, scientific, iterary, or educational purposes, or for the prevention of cruelty to children or animals? (5) Provide for any purpose other than resignes, charitable, scientific, iterary, or educational purposes, or for the prevention of cruelty to children or animals? (6) Provide for any purpose other than resignes, charitable, scientific, iterary, or educational purposes, or for the prevention of cruely to children or animals? (7) It is any answer is "Yes" to \$(1)**(3), did any of the transactions fall to qualify under the exceptions described in Regulations section \$3.495.5(a). (8) It is any answer is "Yes" to question 540, does the foundation called an examplion from the tax brease it neithered expenditure responsibility for the grant? (9) It is the statement required by Regulations section \$3.495.5(a). (9) But the foundation, during the year, cave, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? (1) Yes Sa No (2) But the foundation, during the year, cave, was the foundation called the transaction? (3) It is the foundation subject to the section 450 tax on payment(s) of more than \$1,000,000 in semuneation or excess paraching the sax year, was the foundation managers and their compensation. (4) Name and address of the section 450 tax on payment(s) of more than \$1,000,000 in semuneation or excess paraching be payment(s) dumine the year? (a) Name and address of each employees (other than those included on line 1), if none, enter "NOR." (b) Warms and address of each employees (other than those included on line 1), if none, enter "NOR." (c) Compensation of tive highest-tpaid employees (other than those | 5a During the year, did the foundation pay or incur any amount to: | | | | Yes N |
| any voter registration drive? Provide a grant to an individual for travel, study, or other similar purposes? | (1) Carry on propaganda, or otherwise attempt to influence legislation (s | section 4945(e))? | | Yes X No | |
| (3) Provides a grant to an individual for traval, study, or other similar purposes? (4) Provides a grant to an individual on their than a chandable, etc., organization described in section 4945(0)(4)(A)? See instructions (5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruety to children or animals? It if any answer is "set" to \$51(1-15), old any of the transactions fail to qualify under the exceptions described in Regulations section 53.4955 or in a current notice reparding disaster assistance? See instructions Organizations relying on a current notice reparding disaster assistance, check here If the answer is "set to question 634() does the foundation claim examption from the tax bicause it maintained expenditure responsibility for the grant? If "Yes," statisch the statement required by Regulations section 53.4945-5(0). 6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? If "Yes," 16 de, file Form 8870. 7 At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? A to it "Yes," 4dit the foundation mecive any precedes or have any net income attributable to the transaction? A to it "Yes," 4dit the foundation mecive any precedes or have any net income attributable to the transaction? A to it "Yes," 4dit the foundation mecive any precedes or have any net income attributable to the transaction? A to it "Yes," 4dit the foundation on receive any precedes or have any net income attributable to the transaction? A to it it is the foundation on receive any precedes or have any net income attributable to the transaction? B it I'ves," 4dit the foundation mecive any precedes or have any net income attributable to the transaction? A to it if the foundation of the section of the foundation mecive any precedes or the precedes of the foundation of the foundation of the foundation mecive any precedes or the p | (2) influence the outcome of any specific public election (see section 49) | 55); or to carry on, directly or inc | lirectly, | | |
| (4) Provides a grant to an organization other than a charitable, etc., organization described in section 9455(9/4)/97 See instructions (5) Provide for any purpose other than religious, charitable, scientific, filerary, or educational purposes, or for the prevention of cruelty to children or animate? It may answer is "set to 63(1)-(5) did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance, check here If the answer is "set" to question 53.494, does the foundation claim exemption from the tax because it maintained sependiture responsibility for the grant? If "Yes," attach the statement required by Regulations section 53.4945-5(d). But the foundation, during the year, receive any hunds, directly or indirectly, to pay premiums on a personal benefit contract? If "Yes I No If "Yes," attach the statement required by Regulations section 33.4945-5(d). But the foundation, during the year, receive any hunds, directly or indirectly, to pay premiums on a personal benefit contract? If "Yes I No If I | any voter registration drive? | | | Yes X No | |
| 4445(0)(4)(A) Se instructions (S) Provide for any purpose either than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals? It is may answer is "set to \$54(1)(5), clid any of the transactions fail to qualify under the exceptions described in Regulations section \$3.495 or in a current notice reparting disaster assistance? See instructions Organizations relying on a current notice reparting disaster assistance, check here It the answer is "set to question \$3.64(), does the foundation claim exemption from the tax because it maintained expanditure responsibility for the grant? If 'se,' attach the statement required by Regulations section \$3.4945-5(d). If 'se,' attach the statement required by Regulations section \$3.4945-5(d). If 'se,' attach the statement required by Regulations section \$3.4945-5(d). If 'se,' attach the statement required by Regulations section \$3.4945-5(d). If 'se,' attach the statement required by Regulations section \$3.4945-5(d). If 'se,' attach the statement required by Regulations section \$3.4945-5(d). If 'se,' attach the statement required by Regulations section \$3.4945-5(d). If 'se,' attach the statement required by Regulations section \$3.4945-5(d). If 'se,' attach the statement required by Regulations section \$3.4945-5(d). If 'se,' attach the statement required by Regulations section \$3.4945-5(d). If 'se,' attach the statement required by Regulations section \$3.4945-5(d). Is be the foundation received any proceeds or have any net income attributable to the tensaction? It is belief to be section \$450 tax on payment(s) of more than \$1,000,000 in remunention or excess parachelic payment(s) under the exception of the tensaction subject to the section \$450 tax on payment(s) of more than \$1,000,000 in remunention or excess parachelic payment(s) under the exception of the section \$450 tax on payment(s) of more than \$1,000,000 in remunention or excess parachelic payment(s) under the exception of the section \$450 | (3) Provide a grant to an individual for travel, study, or other similar purp | poses? | | Yes X No | |
| (6) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of crusity to different or aimstell purposes. The purpose of the purpo | | | | | |
| the prevention of cruelty to children or animals? If than sanews is "Yes" to \$(11)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance? See instructions N/A Disability of the grant? If the answer is "Yes" to question \$64(), does the foundation claim exception from the tax because it maintained expenditure responsibility for the grant? If "Yes," states the statement required by Regulations section \$3.4945-5(d). 6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? If "Yes a state the statement required by Regulations section \$3.4945-5(d). 6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? If "Yes to 8b, the Form 8870. 7a At any time during the tax, year, was the foundation a party to a prohibited tax shelter transaction? At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? At a tax time during the text year. B is the foundation subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or access parachetic payment(s) during the year. Pair Vill Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (a) Name and address (b) Tile, and average to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or access parachetic payment(s) during the year. Pair Vill Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (b) Tile, and average to the payment of th | 4945(0)(4)(A)? See instructions | | | Yes X No | |
| h If any answer is "Yes" to \$2(1)-(5), did any of the transactions fall to qualify under the exceptions described in Regulations section \$3.494-5 or in a current notice regarding disaster assistance, check here ### If the answer is "Yes" to question \$4(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? ### If Yes, attach the statement required by Regulations section \$3.494-5-(d). ### Both the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? ### If Yes, attach the statement required by Regulations section \$3.494-5-(d). ### Both the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? ### Both the foundation of the foundation receive any proceeds or have any not income attributable to the transaction? ### If Yes, if did the foundation seeke any proceeds or have any not income attributable to the transaction? ### Both Yes And The Part YIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors List all officers, directors, trustees, and foundation managers and their compensation. ### Add The Part YIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors ### BOOK Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors ### About Paid Empl | | | | | |
| section 53.4945 or in a current notice regarding disaster assistance? See instructions Organizations relying on a current notice regarding disaster assistance, check here c. If the answer is "Yes" to question 53.4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? if "Yes, "Statch the statement required by Regulations section 53.4945-5(d). 6a Dot the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? b Did the foundation, during the year, pay premiums, directly or indirectly, to pay premiums on a personal benefit contract? 7 Yes X No b If Yes, "Idd the foundation, during the year, was the foundation a party to a prohibited tax shelter transaction? 7 Yes X No 8 Is the foundation subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachule payment(s) during the year? Part Will: Information About Officers, Directors, Trustees, Foundation Managers, Highly Pald Employees, and Contractors List all officers, directors, trustees, and foundation managers and their compensation. (a) Name and address (b) Tills, and average hours per week devided grant of the position of the position of the North Contractors INE ROCKEFELLER PLAZA—SUITE 301 EW YORK, NY 100202002 10.00 | the prevention of cruelty to children or animals? | | · | Yes X No | |
| Organizations relying on a current notice regarding dissater assistance, check here If the answers '8''s 'o question 54(*), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? If Yes,' attach the statement required by Regulations section 53.4945-5(d). Sea Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? A lary time during the tax year, was the foundation a party to a prohibbled at a select transaction? A lary time during the tax year, was the foundation a party to a prohibbled at a select transaction? A lary time during the tax year, was the foundation a party to a prohibbled at a select transaction? A lary time during the tax year, was the foundation a party to a prohibbled at a select transaction? A lary time during the tax year, was the foundation of the real and the foundation subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess prachule payment(s) during the year? B is the foundation subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess prachule payment(s) during the year? B is the foundation subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess prachule payment(s) during the year? B is the foundation and address of the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess prachule payment(s) during the year? B is the foundation and the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess prachule payment(s) during the year? B is the foundation and tax section and the section of the payment of the p | b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualif | fy under the exceptions described | d in Regulations | | |
| to the answer is "yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure seponsibility for the grant? If "Yes," attach the statement required by Regulations section 53,4945-5(d). 6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? b Did the foundation, during the year, pay premiums, directly or indirectly, to pay premiums on a personal benefit contract? b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? c If "Yes" to B, file Form 8870. 7 At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? b If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction? c Is the foundation subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or secess parachula payment(s) during the year? Part Will Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (a) Name and address (b) Title, and average hours great execution of the paid of the paid (in the paid) of the paid (in the paid) of the paid of the paid the | section 53.4945 or in a current notice regarding disaster assistance? See | instructions | ••••• | N/A | 5b |
| expenditure responsibility for the grant? If Yas, 2 station the statement required by Regulations section 53.4945-5(d) 5a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? If Yes To Sb, file Form 8870. 7 at At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? If Yes To Sb, file Form 8870. 7 at At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? If Yes To Sb, file Form 8870. 7 at At any time during the foundation receive any proceeds or have any net income attributable to the transaction? If Yes To Sb, file Form 8870. 7 at At any time during the foundation receive any proceeds or have any net income attributable to the transaction? If Yes To Sb, file Form 8870. 7 at At any time during the foundation receive any proceeds or have any net income attributable to the transaction? If Yes To Sb, file Form 8870. 7 at any time during the foundation receive any proceeds or have any net income attributable to the transaction? If Yes To Sb, file Form 8870. 8 is the foundation subject to the section 4860 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachatic flowing the year? Part VIIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (a) Name and address (b) Title, and average hours per week devoid enter-0-1 and time part which the part week form of the pa | Organizations relying on a current notice regarding disaster assistance, ch | neck here | | ▶□ | |
| If Yes, a tlatch the statement required by Regulations section 53.445-5(d). Bo bid the foundation, during the year, readve any funds, directly or indirectly, to pay premiums on a personal benefit contract? Jo bid the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? If Yes to Sh, fine Form 870. 7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? 7b If Yes's to Sh, fine Form 870. 7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? 7b If Yes's did the foundation receive any proceeds or have any net income attributable to the transaction? 7b If Yes's did the foundation subject to the section 4950 tix on payment(s) or more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors List all officers, directors, trustees, and foundation managers and their compensation. All the first and address (a) Name and address (b) Title, and average hours per week devoled to position (fill not paid. (fill not paid | | | | | |
| 5a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 5b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 6b X If Yes' to 6b, file Form 8870. 7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? 7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? 8 Is the foundation subject to the section 4900 tax on payment(s) or more than \$1,000,000 in remuneration or excess parachule payment(s) during the year? Part VIII. Part VIII. Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors List all officers, directors, trustees, and foundation managers and their compensation. (a) Name and address (b) Titls, and everage hours per week devayed to position (c) Compensation (d) Compensation (f) Comp | | | N/A | /es 🔲 No 🛙 | |
| a personal benefit contract? b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? if Yes' to 65, file form 8870. 7a At any time during the lax year, was the foundation a party to a prohibited tax sheller transaction? 8 Is the foundation subject to the section 4900 tax on payment(s) of more than \$1,000,000 in remuneration or access parechute payment(s) during the year? Part VIII. Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors List all officers, directors, trustees, and foundation managers and their compensation. (a) Name and address (b) Tille, and average hours per week devolved in palid, enter 1-0. PRES IDENT/TREASURER MBROSE K MONELL PRES IDENT/TREASURER MBROSE K MONELL PRES IDENT/TREASURER MBROSE K MONELL PRES IDENT/TREASURER MBROSE K BEAUCHAMP NE ROCKEFELLER PLAZA-SUITE 301 IEW YORK, NY 100202002 10.00 0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0 | | | | | |
| b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? If Yes 16 6b, file Form 8870. 7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? 7b if Yes, did the foundation receive any proceeds or have any net income attributable to the transaction? 8b is the foundation subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachule payment(s) during the year? Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (a) Name and address (b) Tille, and average holds to the section 4960 tax on payment(s) or more than \$1,000,000 in remuneration or excess parachule payment(s) during the year? Paid Employees, and Contractors (a) Name and address (b) Tille, and average holds the state of the position of the position of the position of the party of the position of the position of the past description of the position of the position of the past description of the past | | | | | |
| If Yes' to 6b, file Form 8870. At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? If Yes' to 6b, file Form 8870. At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? If Yes' to 6b, file Form 8870. At any time during the tax year, was the foundation aparty to a prohibited tax shelter transaction? If Yes' to 6b, file Form 8870. At any time during the tax year, was the foundation aparty to a prohibited tax shelter transaction? If Yes' to 6b, file Form 8700. At any time during the tax year, was the foundation aparty to a prohibited tax shelter transaction? If Yes' to 6b, file Form 8700. At any time during the tax year, was the foundation aparty to a prohibited to the transaction? If Yes' to 6b, file form 8700. At any time during the tax year, was the foundation aparty to a prohibited to the transaction? If Yes' to 6b, file form 8700. At any time during the tax year, was the foundation and year any entire transaction? If Yes' to 6b, file form 9700. At any time during the tax year, was the foundation and year any entire transaction? If Yes' to 6b, file form 9700. At any time during the tax year, was the foundation and year any entire transaction? If Yes' to 6b, file for file file for fi | a personal benefit contract? | ••••• | | res 🗶 No 🖟 | |
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| 8 is the foundation subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachule payment(s) during the year? Pair VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors List all officers, directors, trustees, and foundation managers and their compensation. (a) Name and address (a) Name and address (b) Title, and average hours per week devoled to position (III not paid enter "0") account, other allowances of the compensation of the paid of the compensation of the compensation of the compensation of the compensation of the highest-paid employees (other than those included on line 1). If none, enter "NONE." (a) Name and address of each employee paid more than \$50,000 (b) Title, and average hours per week devoled to position (III not paid enter "0") account, other allowances of the compensation of the highest-paid employees (other than those included on line 1). If none, enter "NONE." (b) Title, and average hours per week devoled to position (C) Compensation (C) Compensation of the highest-paid employees (other than those included on line 1). If none, enter "NONE." (c) Compensation of the highest-paid employees (other than those included on line 1). If none, enter "NONE." (b) Title, and average hours per week devoled to position (C) Compensation (C) Compen | | | | | |
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| List all officers, directors, trustees, and foundation managers and their compensation. (a) Name and address (b) Title, and average hours per week devoided four position of the highest-paid employees (other than those included on line 1). If none, enter "NONE." (b) Title, and average hours per week devoided four position of the highest-paid employees (other than those included on line 1). If none, enter "NONE." (c) Compensation (II not paid, enter -0) operation account, other accounts account, other accounts account, other account, other accounts account, other accounts account, other accounts account, other accounts account account accounts account accou | excess parachute payment(s) during the year? | | 🔲 ү | es X No | |
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| MBROSE K MONELL PRESIDENT/TREASURER NE ROCKEFELLER PLAZA-SUITE 301 IEW YORK, NY 100202002 10.00 0.0.0 0 0.0.0 0 0.0.0 0 0.0.0 0 | List all officers, directors, trustees, and foundation managers ar | | | | |
| DNE ROCKEFELLER PLAZA—SUITE 301 IEW YORK, NY 100202002 R. GARY K. BEAUCHAMP DIRECTOR/VP INE ROCKEFELLER PLAZA—SUITE 301 IEW YORK, NY 100202002 IAURIZIO J MORELLO SECRETARY & EXEC V.P. NE ROCKEFELLER PLAZA—SUITE 301 EW YORK, NY 100202002 10.00 170,000. 0. Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE." (a) Name and address of each employee paid more than \$50,000 NONE (b) Title, and average hours per week devoted to position (c) Compensation (c) Compensation (d) Combustors be included to position (e) Expense address of each employee paid more than \$50,000 NONE | · , | hours per week devoted | (If not paid, | (d) Contributions to employee benefit plans and deferred compensation | (e) Expense account, othe allowances |
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| OR. GARY K. BEAUCHAMP INE ROCKEFELLER PLAZA—SUITE 301 IEW YORK, NY 100202002 ILOU INE ROCKEFELLER PLAZA—SUITE 301 INE ROCKEFELLER PLAZA—SUITE 301 INE ROCKEFELLER PLAZA—SUITE 301 INE YORK, NY 100202002 Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE." (a) Name and address of each employee paid more than \$50,000 NONE (b) Title, and average hours per week devoted to position NONE (c) Compensation (d) Continuous is recovered to position (d) Continuous is recovered to position (e) Expense account, other allowances | | | | | |
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| AURIZIO J MORELLO NE ROCKEFELLER PLAZA—SUITE 301 EW YORK, NY 100202002 Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE." (a) Name and address of each employee paid more than \$50,000 (b) Title, and average hours per week devoted to position (c) Compensation (d) Combutoos to employee paid more than \$50,000 NONE (e) Expense account, other allowances | | | | | |
| AURIZIO J MORELLO NE ROCKEFELLER PLAZA-SUITE 301 EW YORK, NY 100202002 Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE." (a) Name and address of each employee paid more than \$50,000 NONE (b) Title, and average hours per week devoted to position (c) Compensation (c) Compensation (d) Combustors beinglust and othered compensation (e) Expense account, other allowances | | 1.00 | 0. | 0. | 0. |
| Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE." (a) Name and address of each employee paid more than \$50,000 NONE (b) Title, and average hours per week devoted to position (c) Compensation (d) Combutbosis employee beefings and deterred compensation (e) Expense account, other allowances | AURIZIO J MORELLO | SECRETARY & F | XEC V.P. | | |
| Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE." (a) Name and address of each employee paid more than \$50,000 (b) Title, and average hours per week devoted to position (c) Compensation (d) Combutors be employee territaries account, other allowances | | | | | |
| Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE." (a) Name and address of each employee paid more than \$50,000 NONE (b) Title, and average hours per week devoted to position (c) Compensation (d) Combination (e) Expense account, other allowances | EW YORK, NY 100202002 | 10.00 | 170,000. | 0. | 0. |
| (a) Name and address of each employee paid more than \$50,000 NONE (b) Title, and average hours per week devoted to position (c) Compensation (d) Contributions to employee paid more than \$50,000 (e) Expense account, other allowances | | | | | |
| (a) Name and address of each employee paid more than \$50,000 NONE (b) Title, and average hours per week devoted to position (c) Compensation (d) Contributions to employee paid more than \$50,000 (e) Expense account, other allowances | | | | | |
| (a) Name and address of each employee paid more than \$50,000 NONE (b) Title, and average hours per week devoted to position (c) Compensation (d) Contributions to employee paid more than \$50,000 (e) Expense account, other allowances | | | | | |
| (a) Name and address of each employee paid more than \$50,000 NONE (c) Compensation employee paid more than \$50,000 NONE (c) Compensation employee paid more than \$50,000 Account, other allowances | Compensation of five highest-paid employees (other than those | included on line 1). If none, | enter "NONE." | | |
| NONE | (a) Name and address of each employee paid more than \$50,000 | (b) Title, and average hours per week devoted to position | (c) Compensation | employee benefit plans and deterred | (e) Expense account, other allowances |
| tal number of other employees paid over \$50,000 | NONE | | ***** | | |
| tal number of other employees paid over \$50,000 | | | | | |
| tal number of other employees paid over \$50,000 | | * | | | |
| tal number of other employees paid over \$50 000 | | | | | |
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| tal number of other employees paid over \$50,000 | | | | | |
| | tal number of other employees paid over \$50 000 | | | | |

Total. Add lines 1 through 3

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Form 990-PF (2018) C/O FULTON VITTORIA LLP Page 7 Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued) 3 Five highest-paid independent contractors for professional services. If none, enter "NONE." (a) Name and address of each person paid more than \$50,000 (c) Compensation (b) Type of service DEUTSCHE BANK 280 PARK AVENUE, NEW YORK, NY 10017 CUSTODIAL FEES 367,077. FULTON, VITTORIA LLP ONE ROCKEFELLER PLAZA, NEW YORK, NY 10020 30,464. LEGAL GRANT THORNTON LLP 757 THIRD AVE, NEW YORK, NY 10017 29,362. AUDIT FEE Total number of others receiving over \$50,000 for professional services.... Part IX-A Summary of Direct Charitable Activities List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the **Expenses** number of organizations and other beneficiaries served, conferences convened, research papers produced, etc. N/A Part IX-B Summary of Program-Related Investments Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2. **Amount** N/A All other program-related investments. See instructions.

Form 990-PF (2018)

0.

Form 990-PF (2018) C/O FULTON VITTORIA LLP

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Page 8

| F | art X Minimum Investment Return (All domestic foundations | s must | complete | this part | . Foreign fo | oundations | s, see instructions.) |
|-----|--|------------|---|---------------|---|---------------|--------------------------|
| 1 | Fair market value of assets not used (or held for use) directly in carrying out charits | able, etc | Durnose: | s: | | | |
| а | Average monthly fair market value of securities | , | | | | 1a | 144.117.729 |
| | b Average of monthly cash balances | | | | | | 144,117,729 8,117,239 |
| E | c Fair market value of all other assets | | | | | | 0/22//233 |
| d | Total (add lines 1a, b, and c) | | ****************** | *********** | | 1c 1d | 152,234,968 |
| е | Reduction claimed for blockage or other factors reported on lines 1a and | | | ••••• | •••••• | | 202/202/300 |
| | 1c (attach detailed explanation) | 1e | | | 0 | | |
| 2 | Acquisition indebtedness applicable to line 1 assets | L | | W.1.W | | 2 | 0 |
| 3 | Subtract line 2 from line 1d | | ************* | * | | 3 | 152,234,968 |
| 4 | Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount | nt. see i | nstructions | :1 | •••••• | 4 | 2,283,525 |
| 5 | Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and | on Part | V. line 4 | 7 | | 5 | 149,951,443 |
| 6 | Minimum investment return. Enter 5% of line 5 | | | | | 6 | 7,497,572 |
| P | Distributable Amount (see instructions) (Section 4942(j)(3) foreign organizations, check here | and (i)(| 5) private o | perating f | oundations : | and certain | |
| 1 | Minimum investment return from Part X, line 6 | | | | | 1 | 7,497,572 |
| 2a | Tax on investment income for 2018 from Part VI, line 5 | 2a | | | 9,338 | | |
| b | Income tax for 2018. (This does not include the tax from Part VI.) | 2b | | | | 1 | |
| £ | Add lines 2a and 2b | | *************************************** | ******* | | 20 | 229,338. |
| 3 | Distributable amount before adjustments. Subtract line 2c from line 1 | | ••••••• | | ••••••• | 3 | 7,268,234. |
| 4 | Recoveries of amounts treated as qualifying distributions | | | ************* | ************* | 4 | 0. |
| 5 | Add lines 3 and 4 | | | | | 5 | 7,268,234. |
| 6 | Deduction from distributable amount (see instructions) | | | | | 6 | 0. |
| 7 | Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Par | t XIII, li | ne 1 | | | | 7,268,234. |
| Pá | rt XII Qualifying Distributions (see instructions) | | | | | | |
| 1 | Amounts paid (including administrative expenses) to accomplish charitable, etc., pu | rposes: | | ********** | | | |
| a | Expenses, contributions, gifts, etc total from Part I, column (d), line 26 | | | | | 1a | 6,957,261. |
| Þ | 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 | | | | | | |
| 3 . | Amounts set aside for specific charitable projects that satisfy the: | • | | | | 2 | |
| | Suitability test (prior IRS approval required) | | | | | 3a | |
| b (| Cash distribution test (attach the required schedule) | | | | | 3b | |
| | Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8; a | nd Part | XIII, line 4 | | •••••• | 4 | 6,957,261. |
| 1 | oundations that qualify under section 4940(e) for the reduced rate of tax on net inve | stment | • | | | | |
| | ncome. Enter 1% of Part I, line 27b | | | | | 5 | 0. |
| 1 | djusted qualifying distributions. Subtract line 5 from line 4 | | | | | 6 | 6,957,261. |
| 1 | lote: The amount on line 6 will be used in Part V, column (b), in subsequent years v 4940(e) reduction of tax in those years. | vhen ca | culating wi | hether the | foundation | qualifies for | |

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Part XIII Undistributed Income (see instructions)

| | (a) Corpus | (b) Years prior to 2017 | (c) 2017 | (d) 2018 |
|--|---------------|----------------------------|-------------|-------------|
| 1 Distributable amount for 2018 from Part XI, line 7 | | | | 7,268,234 |
| 2 Undistributed income, if any, as of the end of 2018; | | | | |
| a Enter amount for 2017 only | | | 6,602,118. | |
| b Total for prior years: | | 0. | | |
| 3 Excess distributions carryover, if any, to 2018: | | | | |
| a From 2013 | | | | |
| b From 2014 | _ | | | |
| c From 2015 | | | | |
| d From 2016 | | | | |
| e From 2017 | | | | |
| f Total of lines 3a through e | 0. | | | |
| 4 Qualifying distributions for 2018 from Part XII, line 4: ►\$ 6,957,261. | | | | |
| a Applied to 2017, but not more than line 2a | | | 6,602,118. | |
| b Applied to undistributed income of prior | | | | |
| years (Election required - see instructions) | | 0. | | |
| c Treated as distributions out of corpus | | | | |
| (Election required - see instructions) | 0. | | | |
| d Applied to 2018 distributable amount | | | | 355,143. |
| e Remaining amount distributed out of corpus | 0. | | | |
| 5 Excess distributions carryover applied to 2018 (If an amount appears in column (d), the same amount must be shown in column (a).) | 0. | | | 0. |
| 6 Enter the net total of each column as indicated below: | | | | |
| a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5 | 0. | | | |
| b Prior years' undistributed income. Subtract | | | | |
| line 4b from line 2b | | 0. | | |
| 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 | | 0. | | |
| d Subtract line 6c from line 6b. Taxable | | | | |
| amount - see instructions | | 0. | | |
| e Undistributed income for 2017. Subtract line | | | | |
| 4a from line 2a. Taxable amount - see instr. | | | 0. | |
| f Undistributed income for 2018. Subtract | | | | |
| lines 4d and 5 from line 1. This amount must | | | | |
| be distributed in 2019 | | | | 6,913,091. |
| 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) | 0. | | | |
| 8 Excess distributions carryover from 2013 | i | | | |
| not applied on line 5 or line 7 | 0. | | | |
| 9 Excess distributions carryover to 2019. | | | | |
| Subtract lines 7 and 8 from line 6a | 0. | | | |
| 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 | | | | |

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| | TON VITTOR | | | 13-19 | 82695 Page |
|---|---------------------------------------|--|------------------------------|-------------------------------|---------------------------------------|
| Part XIV Private Operating Fo | | | | N/A | |
| 1 a If the foundation has received a ruling or | | | , | | |
| foundation, and the ruling is effective for | | | · | 1 | - 1/- 1/- 1 |
| b Check box to indicate whether the found | | ting toundation described | | 4942(j)(3) or 49 | 42(j)(5) |
| 2 a Enter the lesser of the adjusted net | Tax year (a) 2018 | (h) 2017 | Prior 3 years | (4) 0045 | (a) Tatal |
| income from Part I or the minimum | (4) 2010 | (b) 2017 | (c) 2016 | (d) 2015 | (e) Total |
| investment return from Part X for | | | | | |
| each year listed | | | | | |
| b 85% of line 2a | | | | | |
| c Qualifying distributions from Part XII, | | | | | |
| line 4 for each year listed | | | | | |
| d Amounts included in line 2c not | | | | | |
| used directly for active conduct of | | | | | |
| exempt activities | · · · · · · · · · · · · · · · · · · · | | | | |
| e Qualifying distributions made directly | | | | | |
| for active conduct of exempt activities. | | | | | |
| Subtract line 2d from line 2c | | <u> </u> | | | |
| alternative test relied upon: | | | | | |
| a "Assets" alternative test - enter: | | | | | |
| (1) Value of all assets | | | | | |
| (2) Value of assets qualifying under section 4942(j)(3)(B)(i) | | | | | |
| b "Endowment" alternative test - enter | | | | | |
| 2/3 of minimum investment return shown in Part X, line 6 for each year listed | | | | | |
| c "Support" alternative test - enter: | | | | | |
| (1) Total support other than gross | | | | | |
| investment income (interest, | | | | | |
| dividends, rents, payments on securities loans (section | | | | | |
| 512(a)(5)), or royalties) | | | | | |
| (2) Support from general public | | | | | |
| and 5 or more exempt organizations as provided in | | | | | |
| section 4942(j)(3)(B)(iii) | | | | | |
| (3) Largest amount of support from | | | | | |
| an exempt organization | | | | | |
| (4) Gross investment income | | <u> </u> | | | <u>-</u> |
| Part XV Supplementary Inform at any time during the | | | if the foundation | had \$5,000 or mor | e in assets |
| | | delions.) | | | |
| Information Regarding Foundation List any managers of the foundation who had | • | than 20/ of the total cant | tributions received by the | foundation before the class | ad any tave |
| year (but only if they have contributed mor | | | mountains received by the | ionination penote the close | or any tax |
| NONE | | | | | |
| b List any managers of the foundation who o | wn 10% or more of th | e stock of a cornoration | (or an equally large portio | n of the ownership of a part | toprehin or |
| other entity) of which the foundation has a | 10% or greater interes | st. | tot an educity large portio | ii oi tiic omicionip oi a pan | meramp or |
| IONE | | | | | |
| 2 Information Regarding Contribution | . Grant. Gift. Loan. | Scholarship, etc., Pr | ograms: | | |
| Check here ▶ ☐ if the foundation only | | • • • • | | ot accept unsplicited reques | ds for funds. If |
| the foundation makes gifts, grants, etc., to | | | | | |
| a The name, address, and telephone number | or email address of th | e person to whom applic | ations should be address | ed: | · · · · · · · · · · · · · · · · · · · |
| MAURIZIO J MORELLO, 2 | | | | | |
| NE ROCKEFELLER PLAZA | | | | | |
| b The form in which applications should be s | | | rould include: | | |
| c Any submission deadlines: | | | | | |
| IONE | | | | | |
| d Any restrictions or limitations on awards, si | uch as by geographica | l areas, charitable fields. | kinds of institutions. or ot | her factors: | |
| ONE | g g - mp - 110u | , | | | |
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| 23601 12-11-18 | | ······································ | | F | orm 990-PF (2018 |

Form 990-PF (2018) C/O FULTON VITTORIA LLP

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| 3 Grants and Contributions Paid During th | if engine the act of the | rayment | T | |
|--|--|--------------------------------------|----------------------------------|---|
| Recipient Name and address (home or business) | If recipient is an individual, show any relationship to any foundation manager or substantial contributor | Foundation status of recipient | Purpose of grant or contribution | Amount |
| | or substantial contributor | recipient | | |
| a Paid during the year | | | | |
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| SEE ATTACHED SCHEDULE | | | | |
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| Total | | L | > 3a | 6,802,500 |
| b Approved for future payment | | | | |
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| EE ATTACHED SCHEDULE | | | | |
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| Total | | | ▶ 3b | 1,000,000 |
| | | | For | 1 ,000 ,000 m 990-PF (2018 |

Notes to Financial Statements

December 31, 2018

4. GRANTS

Grants paid in 2018 were as follows:

| Organization | Purpose | Amount |
|---|---|-----------|
| 12 Metre Yacht Club | | |
| | 2019 Twelve Metre World Championship | \$ 50,000 |
| American-Scandinavian Foundation | General purposes | 25,000 |
| Atlantic Salmon Federation | General purposes | 50,000 |
| Atlantic Salmon Trust | General purposes | 50,000 |
| BIOS - Bermuda Institute for Ocean Sciences (formerly Bermuda | General purposes | 150,000 |
| Biological Station for Research) | | |
| Bigelow Laboratories for Ocean Sciences | General purposes | 100,000 |
| Black Rock Consortium | General purposes | 50,000 |
| Bonefish & Tarpon Trust | General purposes | 25,000 |
| Catholic Charities USA | Disaster relief | 50,000 |
| Cape Eleuthera School | General purposes | 50,000 |
| Chesapeake Bay Foundation | \$25,000 for general purposes and \$50,000 for oyster restoration project | 75,000 |
| Colorado State University, Department of Atmospheric Science | Research on Global Temperature and Atlantic Hurricanes | 100,000 |
| Columbia University, Lamont-Doherty Earth Observatory | \$400,000 for general purposes and \$100,000 for the programs of the Climate Center | 500,000 |
| Connecticut Fund for the Environment | Save the Sound Program | 50,000 |
| Doctors Without Borders | International medical relief programs | 50,000 |
| Foundation Center | Membership | 2,500 |
| Gulf of Maine Research Institute | Collaborative research efforts between GMRI scientists and commercial fishermen, recreational anglers and aquaculture farms | 100,000 |
| International Yacht Restoration School | General purposes | 25,000 |
| Marine Biological Laboratories | \$350,000 for general purposes of the Josephine Bay Paul Center and \$250,000 for recruitment at the Josephine Bay Paul Center | 600,000 |
| Massachusetts Institute of Technology | Joint Program on the Science and Policy of Global Change | 100,000 |
| National Parks Conservation Association | General purposes | 25,000 |

Notes to Financial Statements

December 31, 2018

| Organization | Purpose | Amount |
|---|---|-----------|
| Nature Conservancy of Idaho | Ganaral purposas | e 25.000 |
| North Atlantic Salmon Fund | General purposes | \$ 25,000 |
| | Nature conservation society "Laxinn liff" (the Salmon Forever) | 25,000 |
| Oregon State University, College of Oceanic & Atmospheric Sciences | General purposes | 300,000 |
| Organization for Tropical Studies | General purposes | 75,000 |
| Peregrine Fund | General purposes | 100,000 |
| Resources for the Future | Climate Economics and Policy Program | 50,000 |
| Rutgers University, Institute of Marine and Coastal Sciences | General purposes | 100,000 |
| Salvation Army | Disaster relief programs | 50,000 |
| Scenic Hudson | Riverfront Communities Program and/or Ecological Restoration Initiatives | 75,000 |
| Texas A&M University, Geochemical and Environmental Group | General purposes | 50,000 |
| University of British Columbia | \$50,000 for research on oceanic dead zones and \$50,000 for research on impact of climate change and fisheries on Salmon | 100,000 |
| University of California, Scripps Institution of Oceanography | Global Change Program | 600,000 |
| University of Florida, Whitney Laboratory | General purposes | 100,000 |
| University of Maryland, Institute of Marine and Environmental Technology | General purposes | 100,000 |
| University of Miami, Rosenstiel School of Marine and Atmospheric Science | Climate studies at the Rosenstiel School of Marine and Atmospheric Sciences | 300,000 |
| University of Rhode Island, Graduate School of Oceanography | General purposes | 300,000 |
| University of Texas, Institute for Geophysics | Antarctic aerogeophysical research project | 300,000 |
| University of Virginia, Department of Environmental and Civil Engineering | Research on wastewater treatment and cultivation | 50,000 |
| University of Washington, College of the Environment | \$300,000 for the general purposes of the School of Oceanography and \$25,000 for Dr. Laidre's work on whales in Greenland | 325,000 |
| Webb Institute | General purposes | 50,000 |

Notes to Financial Statements

December 31, 2018

| Organization | Purpose | Amount | | |
|--|---|-------------------|--|--|
| Wildlife Conservation Society | \$50,000 for Wildlife Health Program, \$50,000 for Marine Program, \$100,000 for general purposes, and \$500,000 for Bridge Fund | \$ 700,000 | | |
| Woods Hole Oceanographic Institution Yellowstone Park Foundation | General purposes General purposes | 750,000 50,000 | | |
| Total grants | | \$ 6,802,500 | | |

At December 31, 2018, the Foundation had commitments to make future grants, aggregating \$1,000,000 as follows:

| Organization | Purpose | Amount |
|---|--|--------------|
| 2019 | | |
| Chesapeake Bay Foundation | Oyster restoration project | \$ 50,000 |
| Marine Biological Laboratories | Recruitment at the Josephine Bay Paul Center | 250,000 |
| University of Florida, Whitney Laboratory | General purposes | 100,000 |
| Wildlife Conservation Society | Bridge Fund | 500,000 |
| 2020 | | |
| University of Florida, Whitney Laboratory | General purposes | 100,000 |
| Total future grants | | \$ 1,000,000 |

5. RELATED PARTY TRANSACTIONS

Individual members of the Foundation's Board of Directors serve on the boards of directors or similar boards of a number of its grantees, including the Wildlife Conservation Society and the Peregrine Fund. None of the directors receive any compensation for their services as such.

THE G. UNGER VETLESEN FOUNDATION

Form 990-PF (2018)

C/O FULTON VITTORIA LLP

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| Part XVI-A | Analysis of Income-Producing Activities |
|------------|---|
|------------|---|

| Enter gross amounts unless otherwise indicated. | 1 | d business income | | ided by section 512, 513, or 514 | (e) |
|--|-----------------------|---|--|---|-----------------------------------|
| 1 Program service revenue: | (a) Business | (b) Amount | Exclu- sion | (d) Amount | Related or exempt function income |
| | code | | code | 71110011 | Indicate in Config |
| b | | | | | |
| C | 1 7 | | 1 | | |
| d | | | | | |
| e | 1 1 | | | | |
| 1 | | | | | |
| g Fees and contracts from government agencies | | | | | |
| 2 Membership dues and assessments | | | | | |
| 3 Interest on savings and temporary cash | | | | | |
| investments | | | 14 | 125,141. 2,715,292. | |
| 4 Dividends and interest from securities | | | 14 | 2,715,292. | |
| 5 Net rental income or (loss) from real estate: | | | | | |
| a Debt-financed property | | | | | |
| b Not debt-financed property | | | | | |
| 6 Net rental income or (loss) from personal | | | | | |
| 7 Other investment income | | 1,000 | + | | |
| 8 Gain or (loss) from sales of assets other | | | ++ | | |
| than inventory | | | 18 | 9,148,300. | |
| 9 Net income or (loss) from special events | | ······ | + - 9 | 3/140/300. | |
| O Gross profit or (loss) from sales of inventory | | | 1 | | |
| 1 Other revenue: | | | 1 1 | | |
| a | | | | | |
| b | | | | | |
| C | | | | | |
| d | 1 1 | | | | |
| e | | | | | |
| 2 Subtotal. Add columns (b), (d), and (e) | | | | 11,988,733. | 0. |
| 3 Total. Add line 12, columns (b), (d), and (e) | | *************************************** | | 13 | 11,988,733. |
| See worksheet in line 13 instructions to verify calculations | | | | | |
| Part XVI-B Relationship of Activitie | s to the Accor | nplishment of Ex | cempt | Purposes | |
| Line No. Explain below how each activity for which i | income is reported in | actume (a) of Dart VI/I.A | contribu | stad impadantly to the second | - Violence & od |
| the foundation's exempt purposes (other the | han by providing fund | s for such purposes). | COIRMUL | лео пиронанну то ше ассот | pusiament or |
| | 7, | | | *************************************** | |
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THE G. UNGER VETLESEN FOUNDATION
Supplemental Schedule of Marketable Securities
As of December 31, 2018 and 2017 and for the year ended December 31, 2018

| • | lield at December 31, 2017 | ber 31, 2017 | Additions/ | Additions/Subtractions | | O bute soles | Salve and Other Dismosisions | | | | | |
|-----------------------------------|----------------------------|--------------------|---------------------|------------------------|---------------------|--------------|------------------------------|--------------|------------------------|---------------------------|-------------------|--------------------------|
| | Sharesor | | Shares or | | Shares or | | | | | Held at December 31, 2018 | nber 31, 2018 | |
| Consmon Stock | Principal Amount | Book Basis | Principal Amount | Book Basis | Principal Amount | Book Basis | Proceeds | Cain (Loca) | Shares or Principal | | Market | Dividends or Interest |
| Align Techaology | 6.500 | \$ 174.841 | , | Ü | | | | | THE COUNTY | BOOK BASIS | December 11, 2018 | 1 |
| Allergan | 000'6 | 2.060.056 | . , | | • | | ٠ د | ٠, | 905'9 | 5 1.124,843 | 5 1,361,295 | |
| American Tower Corp. CL.A.REIT | 10,000 | 14 969 1 | | | | • | • | • | 9,000 | 2,060,056 | 1,202,940 | 25.920 |
| Ametek Inc | 118.125 | 1 608 107 | | • | | • | • | | 10,000 | 1,696,177 | 6,327,500 | 128 400 |
| BP Amoco PLC ADR | 22,800 | 119 273 | | | • | | • | | 118,125 | 1.608.102 | 7,997,063 | 051 99 |
| Bank of America Corp. | 52,060 | 1970 800 | | • | • | • | • | | 22.800 | 319,273 | 864,576 | 55.062 |
| Bis Techne Corp | | | . 07 | | • | • | ٠ | , | 52,000 | 1,970,800 | 1.281.280 | 15.080 |
| Bioveratin | 1 559 | 217 PT | 007.07 | 3,001,900 | . : | | • | • | 20,200 | 3,061,966 | 2,923,344 | 17.152 |
| Beeing Company | 15 000 | 1053.898 | | | 1,550 | 79,735 | 160,449 | 80,714 | , | , | • | |
| Biomarin Pharmaceutical Inc. | 25.000 | 174 (193 | | , | , | | • | • | 15,000 | 2,053,898 | 4.837.500 | 102 600 |
| Celgene Corp. | 105.000 | 090 310 | • , | • | • | • | | • | 25.000 | 2,174,093 | 2,128,750 | |
| Citigroup Inc. | 2 410 | 128 509 | • | | • | | • | • | 105,000 | 990,310 | 6,729,450 | |
| Conagra Brands Inc. | | | 31.016 | , 00 330 | | • | • | • | 2,410 | 609.854 | 125,465 | 117.1 |
| Cooper Co | 16,000 | 2 175 750 | 870. | 0.65,558 | - | 50 | 38 | • | 24,027 | 855,961 | 513,217 | |
| Deltic Timber Corp. | 52 285 | 157.190 | • | | . ; | * | | • | 16.000 | 2,135,750 | 4.072,000 | 096 |
| Envision Healthcare Com | 30.00 | 1005001 | • | | 52.285 | 357.190 | • | • | | | | ; |
| EOG Res fre | 20,000 | 105,501 | | • | 30.000 | 2.085,981 | 1,338,196 | (747,785) | • | • | | . , |
| Exxon Mobil Corn | 100.001 | 14.647 | r | • | | • | • | • | 20,000 | 974.847 | 00C FFC 1 | 91.31 |
| Gilead Sciences Inc | 000 37 | 010,150 TE 6.00 | • | • | • | | • | | 100,000 | 381 310 | 000 618 9 | 11: 000 |
| Global Payments Inc | 000.00 | 630.873 | . : | | 30,000 | 392,711 | 2,214,252 | 1,821,541 | 35,000 | 158 162 | 050,015,000 € | 04.000 |
| lideve Corn | 10.300 | /55,010,1 | 13,500 | 1,554,723 | • | • | | | 24.000 | 080895 6 | 3 675 136 | 90.900 |
| International States & Co. | 900'4 | 1.004.186 | | • | ·. | • | • | | 6.030 | 1 00.8 186 | 971.67+.2 | 377 |
| 10 Membronal Flavors & Fragrances | 13,559 | 7,642 | | | | | , | | 13 559 | 177 | 071'011'1 | |
| Jr. Morgan Chase & Co. | 88,680 | 1.909,796 | i | | ٠ | | • | | 66.51 | 740' | 1.820.567 | 37,965 |
| Merch & Co. Inc. | 140,000 | 172,993 | | | | • | • | • | 98,680 | 1,969,796 | 8,656,941 | 219.927 |
| Microsoft Corp. | 29.000 | 757,190 | 11.000 | 1,109,075 | | | | | 140,000 | 172.993 | 10,697,400 | 268.800 |
| Monsanto Ce | 000'09 | 1.208,438 | • | • | A3 000 | 921 906 1 | 200,000,0 | | 10,000 | 1.866.265 | 4,062,800 | 59,560 |
| Murphy Oil Corp. | 355,000 | 1,173,137 | | • | 36.000 | 177 211 | ann'neo'r | 795,171,0 | | , | | 64,800 |
| Nvidía Carp | 3,600 | 193,281 | | , | 0.00**/ | 38.03 | 1,013,442 | 927.561 | 120,000 | 1,057,476 | 7,484,800 | 328,750 |
| Occanics | 15,000 | ٠ | | | | • | • | | 3.600 | 163,281 | 180,600 | 2,196 |
| Parker Hanniin Corp | 25,000 | 2,488,518 | , | | | • | • | • | 15,000 | • | • | • |
| Pfizer Inc. | 104,408 | 3,600,262 | | | 101 108 | 135.093.5 | 770 607 6 | | 25,000 | 2,488,518 | 3.728.500 | 73.500 |
| Pinnacle Foods | 37,000 | 1.856.549 | | • | 17,000 | 202,000,5 | 20977007 | \$2.603 | | • | | 35.499 |
| PodatchDeltic Corp | | • | [00 472 | 199 355 | 000'11 | (#c.0co.1 | 650,154,2 | 294,510 | • | | • | 18.100 |
| Roper Industries Inc | 34.000 | 4,243,219 | | | - | 2 | 17. | 91 | 100,471 | 455,649 | 3,178,902 | 349.951 |
| Sage Therapeuties Inc | • | | 0 890 | 580 217 ; | • | | • | | 34,000 | 4,243,219 | 9.061,650 | 96.100 |
| Shire Plarmaceuticals Group | 12,000 | 2,243,869 | | | , 600 11 | , . | . : | | 9,800 | 1,417,085 | 938,742 | ٠ |
| Stericycle Inc. | 25.000 | 386 F.E. | | • | 12,000 | 2,243,869 | 1.909.700 | _ | • | • | ٠ | 10.724 |
| Supernus Pharmaceuticals Inc | 15 000 | 091 717 | 92. 3 | | 25,600 | 1,114,985 | 1,536,732 | 221.747 | | | | |
| TE Connectivity LTD | | | 20.000 | 108,199 | • | • | • | | 20,750 | 687,410,1 | 689,315 | • |
| Thermo Fisher Scientific, Inc | 40,000 | 3,360,203 | 000.07 | 7.000.047 | • | • | • | | 20,000 | 2,008,842 | 1.512,600 | 32,400 |
| Union Pacific Corp. | 80,000 | 1,276,070 | • | • • | . , | | | | 10,000 | 3,360,203 | 8.951,600 | 26,400 |
| Total common stock | | 229111 05 3 | | 3 112 97 | | | | | 90.00 | 0/0 9/2 | 11.058,399 | 214.800 |
| | | 1 | | 11.77.75.1 | | 17,755,427 | 5 22.046,530 | \$ 9,148,300 | 91 | 17,849,796 | \$ 127,031,017 | \$ 2,715,292 |

This supplemental schedule should be read in conjunction with the accompanying financial statement and notes thereto.

Form 990-PF (2018)

C/O FULTON VITTORIA LLP

13-1982695

Page 13

| Part 3 | Information F Exempt Orga | Regarding To | ransfers to | and Transactions | and Relation | onships With No | oncharitable |) | 90 1 |
|--------------|--|---|--|---|--|---|---|-----------------------|---------|
| 1 Did | the organization directly or inc | | any of the follow | ving with any other organiz | zation described in | section 501(c) | | Yes | No |
| | er than section 501(c)(3) org | | | | | , | | | |
| | nsfers from the reporting foun | | | | | | | | |
| (1) | Cash | | | *************************************** | | | 1a(1) | | X |
| (2) | Other assets | | *************************************** | | | | 1a(2) | | X |
| b Oth | er transactions: | | | | | | | | |
| (1) | Sales of assets to a noncharit | lable exempt orga | nization | | | *************************************** | 15(1) | | X |
| (2) | Purchases of assets from a n | oncharitable exem | npt organization | *************************************** | | ************************* | 1b(2) | | X |
| (3) | Rental of facilities, equipment | , or other assets | ······ | | • | | 1b(3) | | X |
| (4) | Reimbursement arrangement | s | ······································ | | | | 1b(4) | | X |
| (5) | Loans or loan guarantees | | | • | | | 1 <u>b(5)</u> | | X |
| (D) | Performance of services or m | embership or tun | draising solicitat | ions | | | 1b(6) | | X |
| d Ifth | ring of facilities, equipment, m | anny lists, other a | issets, or paid e | mpioyees | | | 16 | | X |
| or se | e answer to any of the above is ervices given by the reporting mn (d) the value of the goods, | foundation. If the | foundation recei | ved less than fair market v | always snow the value in any transa | tair market value of the ction or sharing arrang | goods, other ass ement, show in | ets, | |
| (a) Line no. | | ~ ~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~ | | le exempt organization | (d) Descr | iption of transfers, transact | iana and shadan am | | |
| | | 1 | N/A | io oxompt organization | (a) Desci | ipuon oi transiers, transact | ions, and snanng arr | angemei | 105 |
| | | † | | | | | *************************************** | | |
| | | | | | | | | | |
| | | | | · · · · · · · · · · · · · · · · · · · | | | | | |
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| | | | | | | | · · · · · · · · · · · · · · · · · · · | | |
| | | | | | | · | | | |
| in sec | foundation directly or indirect tion 501(c) (other than section s," complete the following sche (a) Name of org | n 501(c)(3)) or in edule. | | | | | | X | No |
| | N/A | anization | | (b) Type of organization | - | (c) Description of re | elationship | | |
| | IV/A | | | | | | | | |
| | | | | | | | | | |
| | | | | | • | | | | |
| | | | | | | | | | ······ |
| Sign a' | nder penalties of perjury, I declare to ad belief, it is true, correct, and com | hat I have examined iplete. Declaration of | this return, includin preparer (other tha | g accompanying schedules and n taxpayer) is based on all infor | d statements, and to mation of which prep | the best of my knowledge arer has any knowledge. | May the IRS dis return with the shown below? X | oreparer See Instr | s No |
| | Signature of officer or trustee | | | Date | Title | | | | |
| | Print/Type preparer's nar | me | Preparer's si | gnature / | Date | Check X if | PTIN | | |
| | 10 | _ | 111 | 11/1/11 | 7/12/219 | self- employed | | | |
| Paid | POPERTU JORI | ozella | Katot 1 | fortwee | | | P013870 | 83 | |
| Prepare | 1 | N TAX A | nd acgo | UNTING SERVI | CES | Firm's EIN ▶ | | | |
| Use On | | | /_ | | · | | | | |
| | Firm's address ► 38 | | | | | | | | |
| | l WII | LTON, CT | 06897 | | | Phone no. (20 | 03)762 <u>-5</u> | | |
| | | | | | | | Form 990- | PF (2 | 018) |

Form **2220**

Department of the Treasury

Internal Revenue Service

Underpayment of Estimated Tax by Corporations

FORM 990-PF Attach to the corporation's tax return.

► Go to www.irs.gov/Form2220 for instructions and the latest information.

2018

OMB No. 1545-0123

THE G. UNGER VETLESEN FOUNDATION C/O FULTON VITTORIA LLP

Employer identification number 13-1982695

Note: Generally, the corporation is not required to file Form 2220 (see Part II below for exceptions) because the IRS will figure any penalty owed and bill the corporation. However, the corporation may still use Form 2220 to figure the penalty. If so, enter the amount from page 2, line 38, on the estimated tax penalty line of the corporation's income tax return, but do not attach Form 2220.

| | Part I Required Annual Payment | | | On LEE | Y | | ···· | |
|------|--|-------|-----------------------------|---------------------------------------|---------------------------------------|---|-------|---------------------------------------|
| 1 | Total tax (see instructions) | | | | | | 1 | 229,338 |
| 2 | a Personal holding company tax (Schedule PH (Form 1120), I | ine 2 | 6) included on line 1 | | 2a | | | |
| | b Look-back interest included on line 1 under section 460(b)(| | | ************* | | ***** | 1 | |
| | contracts or section 167(g) for depreciation under the incon | • | | | 2b | | | · |
| | | | | | | | 1 | |
| | c Credit for federal tax paid on fuels (see instructions) | •••• | | | 2c | | | |
| | d Total. Add lines 2a through 2c | | | | | | 2d | |
| 3 | Subtract line 2d from line 1. If the result is less than \$500, d | o not | complete or file this form | . The corpo | ration | | | |
| | does not owe the penalty | | | | | *************************************** | 3 | 229,338. |
| 4 | | | | | | | | |
| | or the tax year was for less than 12 months, skip this line | and e | inter the amount from line | e 3 on line | 5 | | 4 | 94,779. |
| | | | | | | | | |
| 5 | the first and th | | | | | | | |
| 88 | enter the amount from line 3 | | | | | | 5 | 94,779. |
| | Part II Reasons for Filing - Check the boxes bel even if it does not owe a penalty. See instructions. | | iat apply. If any boxes are | checked, ti | ne corporatio | on must file Form 22 | 220 | |
| - 6 | The corporation is using the adjusted seasonal instal | | t mothed | | | | | · · · · · · · · · · · · · · · · · · · |
| 7 | The corporation is using the adjusted seasonal listal | | | | | | | |
| 8 | The corporation is a "large corporation" figuring its fir | | | n the erier | vanria tav | | | |
| _ | Part III Figuring the Underpayment | 21 16 | danea uizramient nazea r | n the phor | year S tax. | | ····· | |
| Essa | i igamig ino onacipajmon | | (a) | | (b) | (c) | | (d) |
| 9 | installment due dates. Enter in columns (a) through | | (4) | | 751 | 1 | | , u |
| _ | installment due dates. Enter in columns (a) through (d) the 15th day of the 4th (Form 990-PF filers: Use 5th month), 6th, 9th, and 12th months of the | | | | | | | |
| | corporation's tax year | g | 05/15/18 | 06/ | 15/18 | 09/15/ | 18 | 12/15/18 |
| 10 | Required installments. If the box on line 6 and/or line 7 | Ť | | • | | | | |
| | above is checked, enter the amounts from Sch A, line 38. If | | | | | | | |
| | the box on line 8 (but not 6 or 7) is checked, see instructions | | | | | | | |
| | for the amounts to enter. If none of these boxes are checked, | | | | | | | |
| | enter 25% (0.25) of line 5 above in each column | 10 | 23,695. | 2 | 3,695. | 23,6 | 94. | 23,695. |
| 11 | Estimated tax paid or credited for each period. For | | | | | | | |
| | column (a) only, enter the amount from line 11 on line 15. | | | | | | ĺ | |
| | See instructions | 11 | 129,276. | | | 68,0 | 00. | |
| | Complete lines 12 through 18 of one column | | | | | | | |
| | before going to the next column. | | | | · · · · · · · · · · · · · · · · · · · | | | |
| | Enter amount, if any, from line 18 of the preceding column | 12 | | 10. | 5,581. | | | 126,192. |
| | Add lines 11 and 12 | 13 | | 10 | 5,581. | 149,8 | 86. | 126,192. |
| 14 | Add amounts on lines 16 and 17 of the preceding column | 14 | | | | | | |
| 15 | Subtract line 14 from line 13. If zero or less, enter -0- | 15 | 129,276. | 10 | 5,581. | 149,8 | 86. | 126,192. |
| 16 | If the amount on line 15 is zero, subtract line 13 from line | | | | _ | | | |
| | 14. Otherwise, enter -0- | 16 | | | 0. | | 0. | |
| 17 | Underpayment. If line 15 is less than or equal to line 10, | | | | | | | |
| | subtract line 15 from line 10. Then go to line 12 of the next | | | | | | | |
| | column. Otherwise, go to line 18 | 17 | | · · · · · · · · · · · · · · · · · · · | | | | |
| | Overpayment. If line 10 is less than line 15, subtract line 10 | | 105 501 | _ | | | | |
| | from line 15. Then go to line 12 of the next column | 18 | 105,581. | 8. | 1,886. | 126,19 | 12. | |

Go to Part IV on page 2 to figure the penalty. Do not go to Part IV if there are no entries on line 17 - no penalty is owed.

For Paperwork Reduction Act Notice, see separate instructions. LHA

Form 2220 (2018)

Form 2220 (2018)

725234

52 THE G. UNGER VETLESEN FOUNDATION

C/O FULTON VITTORIA LLP

13-1982695

Page 2

Part IV Figuring the Penalty

| | | L | (a) | (b) | (c) | (d) |
|----|---|-------|------------------------|--------------------------|-------------|----------|
| 7 | 3 Enter the date of payment or the 15th day of the 4th month after the close of the tax year, whichever is earlier. | | | | | |
| | (C corporations with tax years ending June 30 | | | | | |
| | and S corporations: Use 3rd month instead of 4th month. Form 990-PF and Form 990-T filers: Use 5th month | | | | | |
| | instead of 4th month.) See instructions | 19 | 1 | | | |
| 20 | Number of days from due date of installment on line 9 to the | | | | | |
| | date shown on line 19 | 20 |) | | | |
| 21 | Number of days on line 20 after 4/15/2018 and before 7/1/2018 | 2- | | | | |
| | Number of days on line 20 after 4/13/2016 and perore //1/2018 | 21 | | | | |
| 22 | Underpayment on line 17 x Number of days on line 21 x 5% (0.05) | 22 | \$ | s | s | s |
| | 365 | | | | | |
| 23 | Number of days on line 20 after 06/30/2018 and before 10/1/2018 | 23 | | | | |
| 24 | Underpayment on line 17 x Number of days on line 23 x 5% (0.05) | 24 | \$ | \$ | | |
| | 365 | 2.4 | | 9 | \$ | \$ |
| 25 | Number of days on line 20 after 9/30/2018 and before 1/1/2019 | 25 | | | | |
| | | | | | | |
| 26 | Underpayment on line 17 x Number of days on line 25 x 5% (0.05) 365 | 26 | \$ | \$ | \$ | \$ |
| 27 | Number of days on line 20 after 12/31/2018 and before 4/1/2019 | 27 | | | | |
| | | | | | | |
| 28 | Underpayment on line 17 x Number of days on line 27 x 6% (0.06) | 28 | \$ | \$ | \$ | \$ |
| 20 | | | | | | |
| 29 | Number of days on line 20 after 3/31/2019 and before 7/1/2019 | 29 | | | | <u> </u> |
| 30 | Underpayment on line 17 x Number of days on line 29 x *% | 30 | \$ | s | \$ | s |
| | 365 | | | | | |
| 31 | Number of days on line 20 after 6/30/2019 and before 10/1/2019 | 31 | | | | |
| 22 | Made and the Control of the Control | | | | | |
| JŁ | Underpayment on line 17 x Number of days on line 31 x *% | 32 | 3 | \$ | \$ | \$ |
| 33 | Number of days on line 20 after 9/30/2019 and before 1/1/2020 | 33 | | | | |
| | | | | | | |
| 34 | Underpayment on line 17 x Number of days on line 33 x *% | 34 | \$ | \$ | \$ | \$ |
| 35 | Number of days on line 20 after 12/31/2019 and before 3/16/2020 | 35 | | | | |
| • | indifficer of days of time 20 after 12/31/2019 and before 3/16/2020 | 33 | | | | |
| 36 | Underpayment on line 17 x Number of days on line 35 x *% | 36 | \$ | \$ | \$ | \$ |
| | 366 | | | | | |
| 37 | Add lines 22, 24, 26, 28, 30, 32, 34, and 36 | 37 | \$ | \$ | <u> </u> \$ | \$ |
| 38 | Penalty. Add columns (a) through (d) of line 37. Enter the tot | al ha | re and on Form 1120 li | na 34: or the comparable | | |
| | line for other income tax returns | | | • | l ' | \$ 0. |
| | a the negative interest rate for each calendar suprior, which the | | | F 4 4 7 41 | | 1.7 |

^{*} Use the penalty interest rate for each calendar quarter, which the IRS will determine during the first month in the preceding quarter. These rates are published quarterly in an IRS News Release and in a revenue ruling in the Internal Revenue Bulletin. To obtain this information on the Internet, access the IRS website at www.irs.gov. You can also call 1-800-829-4933 to get interest rate information.

Form 2220 (2018)

| FORM 990-PF INTER | EST ON SAV | VINGS | AND TE | MPORA | RY CASH | INVESTM | ENTS S | TATEMENT |
|---------------------|-----------------|--------|-----------------------------|--|----------------------------|--------------------------|--------------------------|---|
| SOURCE | | | REVI | A) ENUE BOOKS | NET | (B) INVESTM INCOME | | (C) ADJUSTED NET INCOME |
| DEUTSCHE BANK MM AC | CCOUNT | | 12 | 25,14 | 1. | 125,1 | 41. | *************************************** |
| TOTAL TO PART I, L | INE 3 | and a | 12 | 25,14 | 1. | 125,14 | 41. | |
| FORM 990-PF | DIVIDEN | IDS AN | D INTER | REST : | FROM SEC | CURITIES | S | TATEMENT |
| SOURCE | GROSS AMOUNT | | CAPITAI GAINS IVIDEND | | (A) REVENUE PER BOOK | NET] | (B) INVEST- INCOME | (C) ADJUSTED NET INCOM |
| COMMON STOCK | 2,715,29 | 2. | | 0. | 2,715,29 | 2. 2,71 | 15,292. | ************************************** |
| TO PART I, LINE 4 | 2,715,29 | 2. | | 0. | 2,715,29 | 2. 2,71 | 5,292. | |
| FORM 990, PF | | | LEGAL | FEES | 3 | | St | PATEMENT |
| DESCRIPTION | | EXP | (A) ENSES BOOKS | | (B) INVEST- | |) STED NCOME | (D) CHARITABLI PURPOSES |
| FULTON, VITTORIA LL | P | | 30,464. | | 15,232 | • | | 15,232 |
| ro FM 990-PF, PG 1, | LN 16A | | 30,464. | Management of the second | 15,232 | • | | 15,232 |
| FORM 990-PF | | AC | CCOUNTI | NG FE | ES | | SI | PATEMENT 4 |
| DESCRIPTION | | EXPE | (A) ENSES BOOKS | | (B) INVEST- INCOME | (C ADJU NET I | STED | (D) CHARITABLI PURPOSES |
| RECORDKEEPING & TAX | | | 2,805. | Market Commence and Commence an | 6,403 14,681 | | | 6,402. 14,681. |
| O FORM 990-PF, PG | l, LN 16B | 4 | 2,167. | *************************************** | 21,084 | | | 21,083. |

| FORM 990-PF | OTHER PROFES | SSIONAL FEES | S | TATEMENT ! |
|--|------------------------------|-----------------------------------|-------------------------------|-------------------------------|
| DESCRIPTION | (A) EXPENSES PER BOOKS | (B) NET INVEST- MENT INCOME | (C) ADJUSTED NET INCOME | (D) CHARITABLI PURPOSES |
| CUSTODIAL SERVICES COMPUTER CONSULTING | 367,077. 8,738. | | | 0. 4,369. |
| TO FORM 990-PF, PG 1, LN 16C | 375,815. | 371,446. | | 4,369. |
| FORM 990-PF | TAX | ES | S | TATEMENT 6 |
| DESCRIPTION | (A) EXPENSES PER BOOKS | (B) NET INVEST- MENT INCOME | (C) ADJUSTED NET INCOME | (D) CHARITABLE PURPOSES |
| PAYROLL TAXES EXCISE TAXES PAID | 12,020. 147,000. | 6,010. | | 6,010. |
| TO FORM 990-PF, PG 1, LN 18 | 159,020. | 6,010. | | 6,010. |
| FORM 990-PF | OTHER E | XPENSES | S | ratement 7 |
| DESCRIPTION | (A) EXPENSES PER BOOKS | (B) NET INVEST- MENT INCOME | (C) ADJUSTED NET INCOME | (D) CHARITABLE PURPOSES |
| PAYROLL SERVICE DIRECTORS & OFFICERS | 1,863. | 932. | | 931. |
| LIABILITY INSURANCE NYS FILING FEES BANK CHARGES | 21,442. 1,525. 474. | 10,721. 763. 237. | | 10,721. 762. 237. |
| O FORM 990-PF, PG 1, LN 23 | 25,304. | 12,653. | | 12,651. |

| FORM 990-PF | CORPORATE STOCK | | STATEMENT 8 |
|--------------------------------|-----------------|-------------|----------------------|
| DESCRIPTION | | BOOK VALUE | FAIR MARKET VALUE |
| SEE SCHEDULE | | 47,849,796. | 127,031,017. |
| TOTAL TO FORM 990-PF, PART II, | LINE 10B | 47,849,796. | 127,031,017. |