Form 990-PF

Department of the Treasury

Internal Revenue Service

Return of Private Foundation

or Section 4947(a)(1) Trust Treated as Private Foundation
▶ Do not enter social security numbers on this form as it may be made public.

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

OMB No. 1545-0052

For calendar year 2018 or tax year beginning 12/01/2017, and ending 11/30/2018 Name of foundation A Employer identification number J.PLUTZIK & L.GOLDWASSER FAMILY FOUNDATION 71-0927327 Number and street (or P.O. box number if mail is not delivered to street address) Room/suite B Telephone number (see instructions) 1440 OCEAN DRIVE (917) 414-8200 City or town, state or province, country, and ZIP or foreign postal code C If exemption application is pending, check here MIAMI BEACH, FL 33139 Check all that apply: Initial return Initial return of a former public charity D 1. Foreign organizations, check here Final return Amended return 2. Foreign organizations meeting the 85% test Address change Name change check here and attach computation Check type of organization: Section 501(c)(3) exempt private foundation E If private foundation status was terminated under Other taxable private foundation Section 4947(a)(1) nonexempt charitable trust section 507(b)(1)(A), check here Accounting method: X Cash Fair market value of all assets at Accrual F If the foundation is in a 60-month termination end of year (from Part II, col. (c), Other (specify) under section 507(b)(1)(B), check here . . . (Part I, column (d) must be on cash basis.) line 16) \triangleright \$ 345,889. (d) Disbursements Part I Analysis of Revenue and Expenses (The total of (a) Revenue and (b) Net investment (c) Adjusted net for charitable amounts in columns (b), (c), and (d) may not necessarily equal expenses per income income purposes books the amounts in column (a) (see instructions).) (cash basis only) 399,734 Contributions, gifts, grants, etc., received (attach schedule) Check ▶ if the foundation is **not** required to attach Sch. B Interest on savings and temporary cash investments Dividends and interest from securities **b** Net rental income or (loss) 6 a Net gain or (loss) from sale of assets not on line 10 b Gross sales price for all assets on line 6a Capital gain net income (from Part IV, line 2) 8 Net short-term capital gain Income modifications 10 a Gross sales less returns and allowances b Less: Cost of goods sold. c Gross profit or (loss) (attach schedule) 11 399,734 12 Total. Add lines 1 through 11 13 Compensation of officers, directors, trustees, etc. 14 52,000. 52,000 Other employee salaries and wages Expenses 15 Pension plans, employee benefits 16 a Legal fees (attach schedule) **b** Accounting fees (attach schedule) 15,000 15,000 c Other professional fees (attach schedule) **Operating and Administrative** Interest Taxes (attach schedule) (see instructions) 3,978 3,978 Depreciation (attach schedule) and depletion 20 21 Travel, conferences, and meetings 22 23 35,983 32,342 Other expenses (attach schedule) 24 Total operating and administrative expenses. 106,961 103,320 296,635 296,635 Total expenses and disbursements. Add lines 24 and 25 403,596 103,320 296,635. Subtract line 26 from line 12: a Excess of revenue over expenses and disbursements -3,862 b Net investment income (if negative, enter -0-) c Adjusted net income (if negative, enter -0-)

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

UYA

-286,718.

Form 990-PF (2018)

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* * * * * * * * * * * * * * * * * * * *	s) of property sold (for example, real estate	1	(b) How acquired P - Purchase		e acquired	(d) Date sold (mo., day, yr.)
2-story brick warehouse; or co	ommon stock, 200 shs. MLC Co.)		D - Donation	(,,,,	, 423, 31.7	(110.1, 44.), 11.)
1a						
b	<u>,</u>				·	
<u> </u>						
d				-		
<u>e </u>		(-) 04			(h) O=:	
	(f) Depreciation allowed (or allowable)		or other basis ense of sale			n or (loss) (f) minus (g))
а						
b				-		
<u>c</u>					· · · · · · · · · · · · · · · · · · ·	
d						· · · · · · · · · · · · · · · · · · ·
e Complete only for assets showing gain in	a column (h) and owned by the foundat	ion on 12/31/6	30	<u> </u>		
			s of col. (i)			ol. (h) gain minus ot less than -0-) or
(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	• •	ol. (j), if any			(from col. (h))
a			·	ļ		
<u>b</u>				 		
C				ļ		
d						
e	on land (If agin ale	o enter in Par	t Lline 7			· · · · · · · · · · · · · · · · · · ·
2 Capital gain net income or (net capit	J	nter -0- in Par	,	2		
3 Net short-term capital gain or (loss)	as defined in sections 1222(5) and (6)					
	lumn (c). See instructions. If (loss), en)	•		
Part I, line 8				3		
Part V Qualification Under For optional use by domestic private found		d Tax on		3 Inco	me	
Part V Qualification Under or optional use by domestic private found section 4940(d)(2) applies, leave this part /as the foundation liable for the section 4940(d)	Section 4940(e) for Reduce dations subject to the section 4940(a) to the section 4940(b) to	d Tax on ax on net inve	stment income.)	3 L	me	∐ Yes 🎛 No
Part V Qualification Under or optional use by domestic private found section 4940(d)(2) applies, leave this part/as the foundation liable for the section 4 "Yes," the foundation doesn't qualify und	Section 4940(e) for Reduce dations subject to the section 4940(a) to the section 4940(a) to the section 4940(a). The section 4940(e) is a section 4940(e). Do not complete the section 4940(e).	d Tax on ax on net inve any year in the is part.	e base period?		me	☐ Yes 🛣 No
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Part \	VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 494	8 - :	see i	nstruc	tions)
1a	Exempt operating foundations described in section 4940(d)(2), check here ▶ ☐ and enter "N/A" on line 1.				
	Date of ruling or determination letter: (attach copy of letter if necessary - see instructions)				
. b	Domestic foundations that meet the section 4940(e) requirements in Part V, check	1			
	here ▶ ☐ and enter 1% of Part I, line 27b				
С	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations, enter 4% of				
	Part I, line 12, col. (b).				
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)	2			
3	Add lines 1 and 2	3			
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)	4			
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0	5			
6	Credit/Payments:				
а	2018 estimated tax payments and 2017 overpayment credited to 2018 6a				
b	Exempt foreign organizations - tax withheld at source 6b				
С	Tax paid with application for extension of time to file (Form 8868) 6c	100		turner or	
d	Backup withholding erroneously withheld				
7		7			National Action and
8		8			
9		9			0.
10		0			0.
11		1			0.
	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			Ye	s No
	intervene in 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		· · ·		
	definition			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.				
С	Did the foundation file Form 1120-POL for this year?		- 1	1c	x
ď	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:				
	(1) On the foundation. ▶ \$ (2) On foundation managers. ▶ \$				
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation	1			
	managers. ▶ \$		ĺ		
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 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?		[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	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part II	 XV	· ·	7 X	
8a	Enter the states to which the foundation reports or with which it is registered. See instructions.			, 2	
	NY				
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)) of	[
	each state as required by General Instruction G? If "No," attach explanation		ľ	8b 🗶	-
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for				
-	calendar year 2018 or the tax year beginning in 2018? See the instructions for Part XIV. If "Yes," complete Part XIV.			9	x
10	Did any persons become substantial contributors during the tax year?	• •			-
-	If "Yes," attach a schedule listing their names and addresses		.	10	x
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					. (=0.0)

Form 99	0-PF (2018)	J. PLUTZIK	& L.GOI	DWASSER 1	PAMILY	FOUNDATION	7	71-092	27327	Page	5
		Statements Reg									_
11	At any time of	during the year, did th	e foundation,	directly or indirectly	, own a con	trolled entity within the n	neaning		Y	es No	-
							•		11	×	
12					1	foundation or a disqualif					_
		privileges? If "Yes,"			i		•		12	x	
13	•					al returns and exemption			200000000000000000000000000000000000000	X	
		ress ▶ JPLUTZ			TOT ILO GENTA	arretarno ana exemptio	ii application:		10	<u> </u>	-
14		re in care of ▶ JON			-	Talan	hone no.▶ (91	71/11/	1-820	^	
• •					EACH	FL 33139			2 020	<u> </u>	
15						orm 1041 - check here				. .	-
.5							1	ı		👺 [
46						ar		15		 	
16	-	-				r a signature or other au	•			es No	
							• • • • • • • • • •		16	X	
		ructions for exceptions		uirements for FinC	EN Form 1	14. It "Yes,"			1111		ä
Dort		ne of the foreign cour		41	hiob For	4700 Mari Da D	· · · · · · · · · · · · · · · · · · ·		100		
rait						m 4720 May Be R	<u>kequirea</u>				
		720 if any item is ch			iless an ex	ception applies.			Y	res No	
1a		ear, did the foundation	•	•			·				
					1	person?	· · · · L Yes	X No			
		money from, lend mor	•			•	ļ <u>-</u>				Ĭ
	-	*			1		= =				
					4.7	d person?					
					i	person?	∐Yes	X No			
		any income or assets			1-						ë
					i.		∐Yes	X No			Ö
	(6) Agree to	pay money or proper	ty to a governr	nent official? (Exc	eption. Ch	eck "No" if the					Ø
		on agreed to make a g		· · ·							
						· · · · · · · · · · · · · · ·		X No			
b						exceptions described in	_				
					i	instructions			1b		रहत
			_	= '	1	here	•	• 🔲 ,			
			-		1	er than excepted acts, t					
					I .				1c	X	
2					for years the	ne foundation was a priv	vate				
		indation defined in se									
		tax year 2018, did the									å
			ing before 20	18?			· · · · Yes	X No			
	If "Yes," list t										
						ovisions of section 4942					
					,	applying section 4942(a	/ /				
									2b	X	
C	If the provision	ons of section 4942(a)	(2) are being	applied to any of th	ie years list	ed in 2a, list the years he	ere.				
	<u> </u>			·							
		lation hold more than									200
								X No			
						rchase by the foundation					Commercial
						onger period approved b					200000
	Commissione	er under section 4943	(c)(7)) to disp	ose of holdings acc	uired by gif	t or bequest; or (3) the i	apse of				×
	the 10-, 15-,	or 20-year first phase	holding period	l? (Use Schedule	C, Form 47	20, to determine if the					Š
	foundation ha	ad excess business h	oldings in 201	8.)					3b		
						opardize its charitable p			4a	Х	-
						1969) that could jeopar					F0000
					L	v of the tax year beginni			4h	anaryona niisiinii ka	ž.

	990-PF (2018) J. PLUTZIK & L. GOLDWA T VII-B Statements Regarding Activiti	SSER FA	MILY	FOUNDATIO	N 71	-0927327 Page 6
	During the year, did the foundation pay or incur any am		CH I OH	II 4/20 IVIAY DE	Required (continu	uea)
ou						Yes No
	(1) Carry on propaganda, or otherwise attempt to influ				· · · · · . [] Yes [2	K No
	(2) Influence the outcome of any specific public election				P******	_
	directly or indirectly, any voter registration drive?				Yes 🖸	K No
	(3) Provide a grant to an individual for travel, study, or				Yes 2	K No
	(4) Provide a grant to an organization other than a cha					
	section 4945(d)(4)(A)? See instructions				Yes	K No
	(5) Provide for any purpose other than religious, charit					
	purposes, or for the prevention of cruelty to children				Ves 5	K No
b	If any answer is "Yes" to 5a(1)-(5), did any of the trans	actions fail to	ualify und	ler the exceptions de	escribed in	E 100
	Regulations section 53.4945 or in a current notice rega	rding disaster	assistance	22 See instructions	occided in	5b
	Organizations relying on a current notice regarding disa	eter secietano	e check	oro		· · · 50
c	If the answer is "Yes" to question 5a(4), does the found					-
_	because it maintained expenditure responsibility for the					¬
					· · · L Yes L	_l No
6a	If "Yes," attach the statement required by Regulations s					
Ua.	Did the foundation, during the year, receive any funds,					
ı.	on a personal benefit contract?					∑ No
b	Did the foundation, during the year, pay premiums, dire	ctly or indirectl	y, on a pe	rsonal benefit contra	ct?	6b
	If "Yes" to 6b, file Form 8870.					
7a	At any time during the tax year, was the foundation a pa	rty to a prohibi	ted tax sh	elter transaction?	Yes 💈	ΣNo
b	If "Yes," did the foundation receive any proceeds or have	e any net inco	ne attribu	table to the transacti	on?	7b
8	Is the foundation subject to the section 4960 tax on pay					
	remuneration or excess parachute payment(s) during the	ie year?		.	Yes 🕽	₹ No
Pa	rt VIII Information About Officers, Di	rectors, Tr	ustees	Foundation M	anagers, Highly I	Paid Employees.
	and Contractors					
_1	List all officers, directors, trustees, and foundation	managers ar	d their c	ompensation. See	nstructions.	
	(a) Name and address	(b) Title, and hours pe devoted to	average r week	(c) Compensation (if not paid, enter -0-)	(d) Contributions to employee benefit plar and deferred compensa	
JON	ATHAN PLUTZIK	PRESID		Cited -0-7	and deterred compensa	
	RYE ROAD RYE, NY 10580	I	1			
பயல்	RYE ROAD RYE, NY 10580 LEY G PLUTZIK		05.00			
	LEY G PLUTZIK	DIRECT	05.00 OR			NOTE TO SERVICE TO SER
96 1	LEY G PLUTZIK RYE ROAD RYE, NY	DIRECT	05.00 OR 05.00			
96 I	LEY G PLUTZIK RYE ROAD RYE, NY ORAH P BRIGGS	DIRECT	05.00 OR 05.00 OR	·		
96 I	LEY G PLUTZIK RYE ROAD RYE, NY	DIRECT	05.00 OR 05.00	·		
96 I	LEY G PLUTZIK RYE ROAD RYE, NY ORAH P BRIGGS	DIRECT	05.00 OR 05.00 OR	·		
96 I DEBC 25 MC	LEY G PLUTZIK RYE ROAD RYE, NY ORAH P BRIGGS ONTVIEW COURT COCKEYSVILLE, MD 21030	DIRECT	05.00 OR 05.00 OR 10.00			
96 I	LEY G PLUTZIK RYE ROAD RYE, NY ORAH P BRIGGS	DIRECT	05.00 OR 05.00 OR 10.00			
96 I DEBC 25 MC	LEY G PLUTZIK RYE ROAD RYE, NY ORAH P BRIGGS ONTVIEW COURT COCKEYSVILLE, MD 21030 Compensation of five highest-paid employees (other	DIRECTO DIRECT	05.00 OR 05.00 OR 10.00 included		ructions). If none, ente	Or Emerge coccurt
96 I DEBC 25 MC	LEY G PLUTZIK RYE ROAD RYE, NY ORAH P BRIGGS ONTVIEW COURT COCKEYSVILLE, MD 21030 Compensation of five highest-paid employees (otherwork)	DIRECT	05.00 07 05.00 0R 10.00 included	on line 1 - see inst	ructions). If none, ento	(e) Expense account, other allowances
96 I DEBC 25 MC	LEY G PLUTZIK RYE ROAD RYE, NY ORAH P BRIGGS ONTVIEW COURT COCKEYSVILLE, MD 21030 Compensation of five highest-paid employees (otherwork)	DIRECT DIRECT er than those (b) Title, and hours pe	05.00 07 05.00 0R 10.00 included	on line 1 - see inst	ructions). If none, ente	(e) Expense account, other allowances
96 I DEBC 25 MC	LEY G PLUTZIK RYE ROAD RYE, NY ORAH P BRIGGS ONTVIEW COURT COCKEYSVILLE, MD 21030 Compensation of five highest-paid employees (otherwork) "NONE." lame and address of each employee paid more than \$50,000	DIRECT DIRECT er than those (b) Title, and hours pe	05.00 07 05.00 0R 10.00 included	on line 1 - see inst	ructions). If none, ento	(e) Expense account, other allowances
96 1 DEBC 25 MC 2	LEY G PLUTZIK RYE ROAD RYE, NY ORAH P BRIGGS ONTVIEW COURT COCKEYSVILLE, MD 21030 Compensation of five highest-paid employees (otherwork) "NONE." lame and address of each employee paid more than \$50,000	DIRECT DIRECT er than those (b) Title, and hours pe	05.00 07 05.00 0R 10.00 included	on line 1 - see inst	ructions). If none, ento	(e) Expense account, other allowances
96 1 DEBC 25 MC 2	LEY G PLUTZIK RYE ROAD RYE, NY ORAH P BRIGGS ONTVIEW COURT COCKEYSVILLE, MD 21030 Compensation of five highest-paid employees (oth "NONE." lame and address of each employee paid more than \$50,000	DIRECT DIRECT er than those (b) Title, and hours pe	05.00 07 05.00 0R 10.00 included	on line 1 - see inst	ructions). If none, ento	(e) Expense account, other allowances
96 1 DEBG 25 MG 2 (a) NONE	LEY G PLUTZIK RYE ROAD RYE, NY ORAH P BRIGGS ONTVIEW COURT COCKEYSVILLE, MD 21030 Compensation of five highest-paid employees (oth "NONE." lame and address of each employee paid more than \$50,000	DIRECT DIRECT er than those (b) Title, and hours pe	05.00 07 05.00 0R 10.00 included	on line 1 - see inst	ructions). If none, ento	(e) Expense account, other allowances
96 1 DEBG 25 MG 2 (a) N	LEY G PLUTZIK RYE ROAD RYE, NY ORAH P BRIGGS ONTVIEW COURT COCKEYSVILLE, MD 21030 Compensation of five highest-paid employees (otherwork) "NONE." Idea and address of each employee paid more than \$50,000 E	DIRECT DIRECT er than those (b) Title, and hours pe	05.00 07 05.00 0R 10.00 included	on line 1 - see inst	ructions). If none, ento	(e) Expense account, other allowances
96 1 DEBG 25 MG 2 (a) N	LEY G PLUTZIK RYE ROAD RYE, NY ORAH P BRIGGS ONTVIEW COURT COCKEYSVILLE, MD 21030 Compensation of five highest-paid employees (otherwork) "NONE." Idea and address of each employee paid more than \$50,000 E	DIRECT DIRECT er than those (b) Title, and hours pe	05.00 07 05.00 0R 10.00 included	on line 1 - see inst	ructions). If none, ento	(e) Expense account, other allowances
96 I DEBG 25 MG 2 (a) N NONE	LEY G PLUTZIK RYE ROAD RYE, NY ORAH P BRIGGS ONTVIEW COURT COCKEYSVILLE, MD 21030 Compensation of five highest-paid employees (otherwork) "NONE." Idea and address of each employee paid more than \$50,000 E	DIRECT DIRECT er than those (b) Title, and hours pe	05.00 07 05.00 0R 10.00 included	on line 1 - see inst	ructions). If none, ento	(e) Expense account, other allowances
96 1 DEBG 25 MG 2 (a) N	LEY G PLUTZIK RYE ROAD RYE, NY ORAH P BRIGGS ONTVIEW COURT COCKEYSVILLE, MD 21030 Compensation of five highest-paid employees (otherwork) "NONE." Idea and address of each employee paid more than \$50,000 E	DIRECT DIRECT er than those (b) Title, and hours pe	05.00 07 05.00 0R 10.00 included	on line 1 - see inst	ructions). If none, ento	(e) Expense account, other allowances
96 1 DEBG 25 MG 2 (a) N NONE NONE	LEY G PLUTZIK RYE ROAD RYE, NY ORAH P BRIGGS ONTVIEW COURT COCKEYSVILLE, MD 21030 Compensation of five highest-paid employees (otherwork) "NONE." lame and address of each employee paid more than \$50,000 E	DIRECT DIRECT er than those (b) Title, and hours pe	05.00 07 05.00 0R 10.00 included	on line 1 - see inst	ructions). If none, ento	(e) Expense account, other allowances
96 I DEBG 25 MG 2 (a) N NONE	LEY G PLUTZIK RYE ROAD RYE, NY ORAH P BRIGGS ONTVIEW COURT COCKEYSVILLE, MD 21030 Compensation of five highest-paid employees (otherwork) "NONE." lame and address of each employee paid more than \$50,000 E	DIRECT DIRECT er than those (b) Title, and hours pe	05.00 07 05.00 0R 10.00 included	on line 1 - see inst	ructions). If none, ento	(e) Expense account, other allowances
2 (a) NONE NONE NONE NONE	LEY G PLUTZIK RYE ROAD RYE, NY ORAH P BRIGGS ONTVIEW COURT COCKEYSVILLE, MD 21030 Compensation of five highest-paid employees (otherwork) "NONE." lame and address of each employee paid more than \$50,000 E	DIRECT DIRECT er than those (b) Title, and hours pe	05.00 07 05.00 0R 10.00 included	on line 1 - see inst	ructions). If none, ento	(e) Expense account, other allowances
2 (a) NONE NONE NONE NONE	LEY G PLUTZIK RYE ROAD RYE, NY ORAH P BRIGGS ONTVIEW COURT COCKEYSVILLE, MD 21030 Compensation of five highest-paid employees (otherwork) "NONE." lame and address of each employee paid more than \$50,000 E	DIRECT DIRECT er than those (b) Title, and hours pe	05.00 07 05.00 0R 10.00 included	on line 1 - see inst	ructions). If none, enter (d) Contributions to employee benefit plan and deferred compensa	(e) Expense account, other allowances

Form 990-PF (2018) J.PLUTZIK & L.GOLDWASSEI	R FAMILY FOU	NDATION 71-0	927327 Page 7
Part VIII Information About Officers, Directo and Contractors (continued)	rs, Trustees, Fou	ndation Managers, Highly Pa	id Employees,
3 Five highest-paid independent contractors for profession	nal services. See instru	ictions. If none, enter "NONE."	
(a) Name and address of each person paid more than \$50,000		(b) Type of service	(c) Compensation
NONE			
Total number of others receiving over \$50,000 for professional service	es		
Part IX-A Summary of Direct Charitable Activ	ities		
List the foundation's four largest direct charitable activities during the tax yeorganizations and other beneficiaries served, conferences convened, resear	ar. Include relevant statistic rch papers produced, etc.	cal information such as the number of	Expenses
1			
		<u> </u>	
2			
			
3			
4			
Part IX-B Summary of Program-Related Inves			T
Describe the two largest program-related investments made by the foundation	on during the tax year on it	ries i and 2.	Amount
2			
All other program-related investments. See instructions.			
3			

Total. Add lines 1 through 3			·

UYA

Form **990-PF**(2018)

	see instructions.)		
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
а	Average monthly fair market value of securities	1a	
b	Average of monthly cash balances	1b	306,539.
C	Fair market value of all other assets (see instructions)	1c	
d	Total (add lines 1a, b, and c)	1d	306,539.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	306,539.
4	Cash deemed held for charitable activities. Enter 11/2% of line 3 (for greater amount, see instructions)	4	4,598.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	301,941.
6	Minimum investment return. Enter 5% of line 5	6	15,097.
Part	XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating	g found	dations
	and certain foreign organizations, check here ▶ □ and do not complete this part.)		
1	Minimum investment return from Part X, line 6	1	15,097.
2a	Tax on investment income for 2018 from Part VI, line 5		
b	Income tax for 2018. (This does not include the tax from Part VI.)		
C	Add lines 2a and 2b	2c	0.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	15,097.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	15,097.
6	Deduction from distributable amount (see instructions)	6	0.
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	15,097.
Part	Qualifying Distributions (see instructions)		
	damying Prompation (000 mondono)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
а	Expenses, contributions, gifts, etc. – total from Part I, column (d), line 26	1a	<u> 296,635.</u>
b	Program-related investments – total from Part IX-B	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	<u> 296,635.</u>
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of		
	Part I, line 27b. See instructions	5	
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	<u>296,635.</u>
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundal section (1010(c)) reduction of the in these approximations (1010(c)) reduction of the interest approximation (1010(c)) reduction of the interest approximation (1010(c)) reduction (1010(c	tion qual	ifies for the

Part XIII Undistributed Income (see instructions) (a) (b) (d) (c) Years prior to 2017 Distributable amount for 2018 from Part XI. Corpus 2017 2018 15,097. 2 Undistributed income, if any, as of the end of 2018: 9,680 Enter amount for 2017 only Total for prior years: 3 Excess distributions carryover, if any, to 2018: a From 2013 253,617 From 2014 187,443 106,443. From 2015 70,805 From 2016 97,445 From 2017 715,753. Qualifying distributions for 2018 from Part XII. line 4: > \$ 296,635. a Applied to 2017, but not more than line 2a. Applied to undistributed income of prior years (Election required - see instructions) Treated as distributions out of corpus (Election Applied to 2018 distributable amount 296,635 Remaining amount distributed out of corpus Excess distributions carryover applied to 2018 (If an amount appears in column (d), the same amount must be shown in column (a).) Enter the net total of each column as indicated below: 1,012,388 Corpus. Add lines 3f, 4c, and 4e. Subtract line 5. . . Prior years' undistributed income. Subtract line 4b from line 2b 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 Subtract line 6c from line 6b. Taxable amount - see instructions Undistributed income for 2017. Subtract line 4a from line 2a. Taxable amount - see 9,680 instructions Undistributed income for 2018. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2019. 15,097. 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)...... Excess distributions carryover from 2013 not 253,617 applied on line 5 or line 7 (see instructions) . Excess distributions carryover to 2019. 758,771 Subtract lines 7 and 8 from line 6a 10 Analysis of line 9: 187,443 Excess from 2014 106,443. Excess from 2015. 70,805. Excess from 2016. 97,445. Excess from 2017. Excess from 2018. 296,635

1a	XIV Private Operating Foundation If the foundation has received a ruling or deter					***************************************
	the ruling is effective for 2018, enter the date of			•		
b	Check box to indicate whether the foundation i	s a private operatir	na foundation describe	ed in section	4942(j)(3)	or 4942(j)(5
2a	Enter the lesser of the adjusted net income	Tax year		Prior 3 years	1012()(0)	or +0+2(j)(0
	from Part I or the minimum investment	(a) 2018	(b) 2017	(c) 2016	(d) 2015	(e) Total
	return from Part X for each year listed	(,	(-,/	(0) 2010	(4) 2010	
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					***************************************
е	Qualifying distributions made directly for			·		
	active conduct of exempt activities.					
	Subtract line 2d from line 2c					
	Complete 3a, b, or c for the alternative					
	test relied upon:	•				
а	"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		•			
С	"Support" alternative test - enter:					
	(1) Total support other than gross invest-					
	ment 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					
rŧ	XV Supplementary Information	Complete this	s nart only if the	foundation ha	d \$5 000 or mo	o in coocto
	any time during the year– se			o iouiidation na	iu \$5,000 01 11101	e iii asseis
ī	nformation Regarding Foundation Managers		2.)			
	ist any managers of the foundation who have co		n 20% of the total centr	ibutions resolved by	bo formalation before	U1
	ax year (but only if they have contributed more the			ibulions received by	ine roundation before	ne close of any
	ATHAN PLUTZIK LESLEY G.		section 507(d)(2).)			
	ist any managers of the foundation who own 10		tack of a corporation (or on oqually losse no	rtion of the summarking	-£ l l- :
	r other entity) of which the foundation has a 10%			or air equally large po	ruon or the ownership	or a parmership
٠	Today of Whot the foundation has a 107	o or greater interes				
	nformation Regarding Contribution, Grant, (Giff Loan Schola	robin etc. Program			
	check here if the foundation only makes					
f	unds. If the foundation makes gifts, grants, etc.,	to individuals or or	ranizatione under eth	or conditions, comple	to items 25 h s seed	a requests for
•	and the real real real real real real real rea	to individuals of O	gariizations under oth	er conditions, comple	te items za, b, c, and	a. See instructio
a T	he name, address, and telephone number or en	nail address of the	nerson to whom applie	nationa aboutd he ada	Jana and	
- '	ne name, address, and telephone number of en	ian address or the	person to whom applic	calions should be add	iressea:	
. T	he form in which applications should be submit	ed and information	and materials they sh	sould include:		
•	ne form in which applications should be submitted	led and imorniation	and materials triey sr	iodia include:		
			·····			
 ;	ny submission deadlines:					
	ny submission deadlines: ny restrictions or limitations on awards, such as					

Part XV Supplementary Information (continued) Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual. Foundation show any relationship to Purpose of grant or status of Amount any foundation manager contribution recipient Name and address (home or business) or substantial contributor a Paid during the year UJA FEDERATION PC CHARITY CONTRIBUTION 55,000. ZARA TRUST CHARITY CONTRIBUTION 170,000. PC PLANET WORD PC CHARITY CONTRIBUTION 10,000. ST. ANNE'S WAREHOUSE PC 5,000. CHARITY CONTRIBUTION ONE TABLE PC CHARITY CONTRIBUTION 10,000. APOLLO THEATRE PC CHARITY CONTRIBUTION 5,000. METROPOLITAN OPERA PC CHARITY CONTRIBUTION 5,500. LALELA PROJECT PC CHARITY CONTRIBUTION 5,000. 3a 296,635. **b** Approved for future payment

Total.

Part XV Supplementary Information (continued) Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, show any relationship to Foundation Purpose of grant or status of Amount any foundation manager or substantial contributor contribution recipient Name and address (home or business) a Paid during the year STEPHEN WISE FREE SYNAGOUGE PC 5,000. CHARITY CONTRIBUTION BRANDEIS UNIVERSITY PC 5,000. CHARITY CONTRIBUTION **MISCELLANEOUS** CHARITY CONTRIBUTION PC 21,135. 3a Approved for future payment Total

	gross amounts unless otherwise indicated.	Unrelated bu	siness income	Excluded by sect	on 512, 513, or 514	(e)
1	Program service revenue:	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exemple function income (See instructions
	a					
	b					
	c					
	d					
	e					
	f					
	g Fees and contracts from government agencies					
2	Membership dues and assessments					
3	Interest on savings and temporary cash investments					
4	Dividends and interest from securities					
5	Net rental income or (loss) from real estate:		94.00			
	a Debt-financed property					
	b Not debt-financed property					
6	Net rental income or (loss) from personal property					
7	Other investment income					
8	Gain or (loss) from sales of assets other than inventory					
9	Net income or (loss) from special events					
10	Gross profit or (loss) from sales of inventory					
11	Other revenue: a					
	b					
	c					
	d					
	e					
12	Subtotal. Add columns (b), (d), and (e)			41.0		
13	Total. Add line 12, columns (b), (d), and (e)				13	
(See	worksheet in line 13 instructions to verify calculations.)				<u></u>	
Par	t XVI-B Relationship of Activities to the A	Accomplishm	ent of Exem	pt Purposes		
1:		reported in colu	mn (a) of Dart VIII			
	of the foundation's exempt purposes (other than by				-	omplishment
	W 1				-	omplishment
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	W 1				-	omplishment

Part XVII Information Regarding Transfers to and Transactions and Relationships With Noncharitable Exempt Organizations 71-0927327 Page 13

	1	Did th	ne organization directl	ly or indirectly	engage in	any of the fo	ollowing with	any oth	er organizat	ion described	d in section	501(c)		Yes	No
		(othe	r than section 501(c)((3) organizatio	ons) or in s	ection 527, r	relating to po	litical or	ganizations	?			10000		
									•						
	a	Trans	sfers from the reportin	ng foundation	to a nonch	naritable exer	npt organiza	ition of:							
		(1)	Cash										1a(1)	*************	X
		(2)	Other assets										1a(2)		X
	b	Othe	r transactions:												
		(1) 8	Sales of assets to a no	oncharitable e	exempt org	anization .				<i>.</i>			1b(1)		X
			Purchases of assets fr										1b(2)		X
			Rental of facilities, equ					•					1b(3)		X
		(4) F	Reimbursement arrang	gements									1b(4)		X
		(5) L	oans or loan guarante.	ees									1b(5)		X
		(6) F	Performance of service	es or membe	rship or fu	ndraising sol	icitations						1b(6)		X
			ng of facilities, equipr										1c		X
	d	If the	answer to any of the	above is "Yes	s," complet	e the following	ng schedule.	Column	n (b) should	always show	the fair mar	ket value of	the go	ods,	· · · · · · · · · · · · · · · · · · ·
			assets, or services gi							-			-		
			gement, show in colu											•	
(a)	Line		(b) Amount involved			ritable exemp				iption of transf	ers, transacti	ons, and sha	ring arra	angem	ents
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		\Box													
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		_				 -									
							•••								
2			foundation directly or	•								tion 501(c)		_	
			than section 501(c)(,									Yes	X	10
	b	f "Ye	s," complete the follow	-	e.			1 24							
			(a) Name of organ	nization		(D)	Type of org	anization	<u> </u>	(C)	Description	of relations	nip		
						· · · · · · · · · · · · · · · · · · ·									
							·····								
		U	nder penalties of perjury, I o	declare that I hav	e examined the	nis return, includ	ling accompany	ina sched	ules and stater	nents, and to the	best of my kno	wledge and be	lief it is	true	
Sig	n	r cc	prect, and complete. Decla	ration of prepare	r (other than t	axpayer) is base	ed on all informa	ation of wh	nich preparer ha	as any knowledg	e.	May the IRS			m with
lei												the preparer instructions.	shown b	elow? S	ee
161	٠	7 8	ignature of officer or true	stee	1	Dat	te	Title		1-1- A		in iou delibris.	₩ .		,
.			Print/Type preparer's			Preparer's si		.,,,,	·	Date	12.	<u> </u>	X Ye	<u> </u>	No
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	par		Matthew J Firm's name M.			ai a + a -	T	· · · · · ·		07/20/					<u> </u>
JSE	e O	ııy	Firm's address > P	Brodie			Inc.					<u>▶11-3</u>	U43	/JI	
			Larchmont,			J					Phone no.)	00		
		-	marchmont,	MI IU	226		****				(031)2	<u> 65–75</u>	<u>89</u>		

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

Department of the Treasury Internal Revenue Service Name of the organization

J.PLUTZIK & L.GOLDWASSER FAMILY FOUNDATION

Schedule of Contributors

► Attach to Form 990, Form 990-EZ, or Form 990-PF.

Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

Employer identification number

71-0927327

2018

Organization type (check one): Filers of: Section: Form 990 or 990-EZ 501(c)() (enter number) organization 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation 527 political organization **▼** 501(c)(3) exempt private foundation Form 990-PF 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. General Rule For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions. Special Rules For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 ½ % support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or(2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address). II. and III. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions

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

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

Name of organization

J.PLUTZIK & L.GOLDWASSER FAMILY FOUNDATION

T1-0927327

Part I	Contributors (see instructions). Use duplicate copies	s of Part I if additional space is	needed.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	LESLEY G PLUTZIK 1440 OCEAN DRIVE MIAMI BEACH, FL 10580	\$80,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	TANJA GOLDWASSER 1965 BROADWAY Ste. 11E NEW YORK, NY 10023	\$75,000.	Person Payroll Noncash Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3	LEWIS GVC TRUST 4000 PONCE DE LEON BLVD MIAMI, FL 33146	\$	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4	SAPIRE 2002 REVOCABLE TRUST 1258 AMALFI DRIVE PACIFIC PALISADES, CA 90272	\$50,000. 	Person X Payroll Concash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5	JOSEPH & DIANE STEINBERG TRUST 84 REMSEN STREET BROOKLYN, NY 11201	\$\$10,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
6	THOMAS FREIDMAN 1112 BRADLEY BLVD BETHESDA, MD	_ \$5,000. _	Person X Payroll Noncash (Complete Part II for noncash contributions.)

Part XV Supplementary Information (continued) Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, show any relationship to any foundation manager Foundation Purpose of grant or status of Amount contribution recipient Name and address (home or business) or substantial contributor a Paid during the year STEPHEN WISE FREE SYNAGOUGE PC CHARITY CONTRIBUTION 5,000. BRANDEIS UNIVERSITY PC CHARITY CONTRIBUTION 5,000. **MISCELLANEOUS** PC CHARITY CONTRIBUTION 16,135. **b** Approved for future payment Total.