FILED: NEW YORK COUNTY CLERK 06/14/2018 11:23 AM INDEX NO. 451130/2018

NYSCEF DOC. NO. 50

RECEIVED NYSCEF: 06/14/2018

EXHIBIT 4

INDEX NO. 451130/2018

		MENT TO FO	DAM 990-PF	1488	
		1			I
			CONTRIBUTIONS RECEIVED		
	PART I LIVE !				
	DONALD J. TRUMP				 -
	72) FIFTH AVENUE				
	NEW YORK NY 10022		551512		
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	P				<u> </u>
	PART I LINE 23		PRIOR YEARS		
	AMORTIZATION SCHEDULE	Cost	AMORTISATICA	AMORT, EXP	Acer
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	ORGANIZATION COSTS - 111/47	18563	3094	37.43	16
	TOTAL				
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	PART LINE 18				
	TAXES - NYS TAX	Anoust			
	IAXES - NTO TAX	2.5	-		
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	Part 1 Live 16	Payer		AMOUNT	
	LEGAL FEES	DREYER AN	D TRAUB.	5088	
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· •	THE FOUNDATION HAS ELECTED	#	╫━┿━╟━╟		<u></u>

INDEX NO. 451130/2018 NEW YORK COUNTY CLERK 06/14/2018 11:23 AM RECEIVED NYSCEF: 06/14/2018 NYSCEF DOC. NO. 50 THE DONALD J. TRUMP FOUNDATION INC.
ATTACHMENT TO FORM 990-PF 1989 CONTRIBUTIONS ECKIVED PART I LINE ! DONALD J TRUMP CLOTHE TRUME OLGANIZATION 125 FIFTH AVENUE NEW YORK, NY 10002 PART I LNEIL LEBAL FRES GOCOUNTING FRES PART I KINE 18 TAXES - NYS TAX 25 PART I LINE 23 KIDK KARS ADDRTIZATION SCHEDULK PECUPAL DECTAL DETIZATION DEGANIZATION COSTS 2/19/17 TOTAL COSTS OVER 5 XERE KYE RGW ZATION

INDEX NO. 451130/2018 YSCEF DOC. NO. RECEIVED NYSCEF: 06/14/2018 THE DONALD I TRUMP FOUNDATION, INC. ATTACHMENT TO FORM 990- PF 1990 CONTRIBUTION PARTI LINK 1 DONALD J TRUMP CO THE TRUMP DESANIZATION 725 FIFTH AVENUE NEW YORK, NY 10022 135000 PART I LINE 16 ACCOUNTING FRES PART I LINE 18 TAXES - NYS TAX PART I LINE 23 AMORTIZATION SCHROULE Cast ORGANIZATION COSTS 9/1/67 18563 10520 37/3 THE FOUNDATION HAS KLECTED TO AMOUTIZE DESANIZATION COSTS OVER 3 VALL LIFE.

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Attachment to Form 990-PF 1993

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INDEX NO. 451130/2018

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Part I Line 1	Pa	100			Amount	
Contributions Rece	ived Dans	115	rump		12500 -	
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	1421	12 Li	nited	1	20000 -	,
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Accounting Fees	South	Lace	er's Spe	de	1000-	
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Part I Line 18 Filing Fee - NY	Am	Dunt				
Filing Fee - NY.	5	50-				
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RECEIVED NYSCEF: 06/14/2018 NYSCEF DOC. NO. 50₺ The Oppald J. Trump Foundation

Attachment to Form 990 PF. 1995

ID# Prepared By Approved By ASH No. 7304 Part I Line | Contributions Received Part I Line 16b Accounting Fres ì Part I Line 18 Filing Fee -NYS į Amount : :

FILED: NEW YORK COUNTY CLERK 06/14/2018 11:23 AM INDEX NO. 451130/2018 NYSCEF DOC. NO. 50 RECEIVED NYSCEF: 06/14/2018 ACCOUNTANTS SUPPLY HOUSE ماليون اليوادية بدوون. مرحون إيرانه الرواد Prepared By Approved By THE DONALD J. TRUMP FOUNDATION
ATTRCHMENT TO FORM 990-PF-1996 10# LINE 1 AMOUNT CONTRIBUTIONS RECEIVED DUAD J. TRIMP 52500 PART I LINE PAYEE 160 AMOUNT im ACCIUTING FEES SPANA LACHER É BRERNER LLP AMOUNT NYS FILING FEE PART I LINE 23 AMOUNT BANK CHARGES :3 :3 34 : :: ::: :3

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THE DONALD J. TRUMP FOUNDATION

ATTACHMENT TO FORM 990-PF

1997

D#

PART I LINE 1	PAYOR PAYOR	AMOUNT
CONTRIBUTION RECEIVED	DONALD J. TRUMP	\$80,000
PART I LINE 16b	PAYEE	AMOUNT
ACCOUNTING FEES	SPAHR, LACHER & SPERBER, LLP	\$2,000
PART I LINE 18		AMOUNT
NYS FILING FEE		\$25

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FEDERAL STATEMENTS

PAGE

CLIENT 02910843

O6/15/00

THE DONALD J. TRUMP FOUNDATION INC.

01:57 P

STATEMENT 1 FORM 990-PF, PART I, LINE 1 CONTRIBUTIONS, GIFTS, AND GRANTS

DIRECT CONTRIBUTIONS:

CONTRIBUTOR'S NAME	CONTRIBUTOR'S ADDRESS OF CONT				
DONALD J. TRUMP	C/O TRUMP ORGANIZ 725 5TH AVE NEW YORK, NY 10022	\$ 161,480			
TOTAL DIRECT CONTRIBUTIONS		\$ 161,480			
TOTAL CONTRIBUTIONS		\$ 161,480			

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2000

FEDERAL STATEMENTS THE DONALD J. TRUMP FOUNDATION INC.

PAGE

CLIENT 07877

STATEMENT 1 FORM 990-PF, PART I, LINE 1 CONTRIBUTIONS, GIFTS, AND GRANTS

DIRECT CONTRIBUTIONS: CONTRIBUTOR'S NAME	CONTRIBUTOR'S ADDRESS	AMOUNT OF CONTR.
DONALD J. TRUMP	C/O TRUMP ORGANIZ 725 5TH AVE NEW YORK, NY 10022	\$ 168,000
TOTAL DIRECT CONTRIBUTIONS		\$ 168,000
TOTAL CONTRIBUTIONS		\$ 168,000

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Schedule B (Form 990, 990-EZ, 990-PF) (2001)

Page 1 to 1 of Part I

Name of Orga	B (Form 990, 990-EZ, 990-PF) (2001)	<u> </u>	Identification Number
-	NALD J. TRUMP FOUNDATION		
Ferm	Contributors (see instructions)		
(a) Number	(b) Name, address and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1		\$306,000.	Person X Payroll Noncash (Complete Part II if there is
(a) Number	NEW YORK, NY 10022 (b) Hame, address and ZIP+4	(c) Aggregate contributions	noncash contribution.) (d) Type of contribution
2	STARK CARPET CORP	\$5,000.	Person X Payroll Honcash (Complete Part II if there is
(a) Number	NEW YORK, NY 10022 (b) Name, address and ZIP+4	(c) Aggregate contributions	(d) Type of contribution
		S	Person Payroll Noncash (Complete Part II if there is noncash contribution.)
(a) Number	(b) Name, address and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		S	Person Payroll Noncash (Complete Part II if there is noncash contribution.)
(a) Number	(b) Name, address and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		- - - -	Person Payroll Noncash (Complete Part II if there is noncash contribution.)
(a) Number	(b) Name, address and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		_ _s	Person Payroli Noncash
		_	(Complete Part II if there is noncash contribution.)

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STORY OF THE PROPERTY OF THE

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Schedule Name of	B (Form 900, 990-52, or 600-PF) (8002)		Page 1 to 1 o
			Employer Identification number
Part i	DONALD J. TRUMP FOUNDATION Contributors (See Specific Instructions.)		
(a)	(b)		
No.	Name, address, and ZIP + 4	(c) Aggregate contribut	(d)
1	DONALD J. TRUMP	_	Person X
	C/O THE TRUMP ORGANIZATION 725 5TH AV	E \$ 287.00	Payrolf
	NEW YORK, NY 10022		(Complete Part II if the
(a) No.	(b)	(c)	(d)
2	Name, address, and ZIP + 4	Aggregate contribution	Type of contribution
2	MAURICE R. POVICH C/O FLERMAN, BAREN AND COMPANY 9171	-	Person X
	WIIDRIKE BLVD, SUITE 530	\$5,00	O. Payroll
	BEVERLY HILLS, CA 90210		(Complete Part II if the is a noncesh contribut
(m) No.	(b) Name, address, and ZIP + 4	(c)	(d)
3	ALFONS J. SCHMITT	Aggregate contributio	ns Type of contribution
	125 PARC MONCEAU	.	Person X Payroll
j		\$30,000	O. Noncash
(7)	PALM BRACH, FL 33480		(Complete Part II if ther is a noncash contribution
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contribution	(d)
4	KINRAY INC.	- AB-aBais countribudion	220000000000000000000000000000000000000
	152-03 10TH AVE	\$ 25.000	Payroll
	WHITESTONE, NY 11357	\$25,000	(Complete Part II if there
a)	(b)		is a noncash contributio
io.	Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
_5	MR. WHITE LLC		Person X
	7966 BEVERLY BLVD 2ND FLOOR	\$10.000	Payroli
	LOS ANGELES, CA 90048		(Complete Part II if there is a noncash contribution
a) O.	(b) Name, address, and ZIP + 4	(c)	(d)
<u>6</u>	FRUMP PARK AVE LLC	Aggregate contributions	Type of contribution
- 1	725 FIFTH AVE		Person X Payroll
	NEW YORK, NY 10022	\$ 25,000.	Noncash (Complete Part II if there
01-23-01	20062		is a noncash contribution.

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

Department of the Treasury Internal Revenue Service

Schedule of Contributors

Supplementary Information for line 1 of Form 990, 990-EZ, and 990-PF (see instructions)

2005

Name of organization **Employer identification numb** THE DONALD J. TRUMP FOUNDATION Organization type (check one): Filers of: Section: Form 990 or 990-FZ 501(c)() (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization Form 990-PF X 501(c)(3) exempt private foundation 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 boxe for both the General Rule and a Special Rule-see instructions.) General Rule-X For organizations filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. (Complete Parts I and II.) Special Rules-____ For a section 501(c)(3) organization filing Form 990, or Form 990-EZ, that met the 33 1/3% support test under Regulations sections 1.509(a)-3/1.170A-9(e) and received from any one contributor, during the year, a contribution of the greater of \$5,000 or 2% of the amount on line 1 of these forms. (Complete Parts I and II.) For a section 501(c)(7), (8), or (10) organization filing Form 990, or Form 990-EZ, that received from any one contributor, during the year, aggregate contributions or bequests of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. (Complete Parts I, II, and III.) For a section 501(c)(7), (8), or (10) organization filing Form 990, or Form 990-EZ, that received from any one contributor, during the year,

Caution: Organizations that are not covered by the General Rule and/or the Special Rules do not file Schedule B (Form 990, 990-EZ, or 990-PF), but they must check the box in the heading of their Form 990, Form 990-EZ, or on line 2 of their Form 990-PF, to certify that they do not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year.)

some contributions for use exclusively for religious, charitable, etc., purposes, but these contributions did not aggregate to more than \$1,000. (If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Do not complete any of the Parts unless the General Rule applies to this organization because it received

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, Form 990-EZ, and Form 990-PF.

Schedule B (Form 990, 990-EZ, or 990-PF) (20

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Schedule B (Form 990, 990-EZ, or 990-PF) (2005) **Employer Identification number** Name of organization THE DONALD J. TRUMP FOUNDATION Part I Contributors (See Specific Instructions.) (c) (a) **(b)** Type of contribution No. Name, address, and ZIP + 4 Aggregate contributions 1 DONALD J. TRUMP Person **Payroll** C/O THE TRUMP ORGANIZATION 725 5TH AVE Noncash 622,000. (Complete Part II if there is a noncash contribution NEW YORK, NY 10022 (c) (a) Type of contribution No. Name, address, and ZIP + 4 Aggregate contributions 2 DANIEL & MARGARET CREMINS XPerson Payroll 5,000. Noncash 77 MOUNTAIN AVE. (Complete Part II if there is a noncash contributio LARCHMOUNT, NY 10538 (c) (d) (a) (b) No. Name, address, and ZIP + 4 Aggregate contributions Type of contribution 3 COOPER-HOROWITZ, INC. Person Payroll 5,225. Noncash 51 EAST 42ND ST. (Complete Part II if there NEW YORK, NY 10017 is a noncash contributio (d) (a) (c) Type of contribution No. Name, address, and ZIP + 4 **Aggregate contributions** 4 BTH CORP Person X Payroll 5,225. Noncash 46 SNAPDRAGON LN. (Complete Part II if there is a noncash contribution ROSLYN HEIGHTS, NY 11577 (d) (a) (b) (c) Type of contribution **Aggregate contributions** Name, address, and ZIP + 4 No. 5 X NCL AMERICA, INC. Person Payroll 7665 CORPORATE CENTER DR 100,000. Noncash (Complete Part II if ther is a noncash contribution MIAMI, FL 33126 (c) (a) (b) **Aggregate contributions** Type of contribution Name, address, and ZIP + 4 No. Person **Payroli** Noncash (Complete Part II if ther is a noncash contribution

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Schedule of Contributors

Schedule B (Form 990, 990-EZ, or 990-PF) Department of the Treasury

Internal Revenue Service

Supplementary Information for line 1 of Form 990, 990-EZ, and 990-PF (see instructions)

2006

Employer identification number Name of organization THE DONALD J. TRUMP FOUNDATION 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 Form 990-PF X 501(c)(3) exempt private foundation 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 organizations filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. (Complete Parts I and II.) Special Rules-For a section 501(c)(3) organization filing Form 990, or Form 990-EZ, that met the 33 1/3% support test of the regulations under sections 509(a)(1)/170(b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of the greater of \$5,000 or 2% of the amount on line 1 of these forms. (Complete Parts I and II.) For a section 501(c)(7), (8), or (10) organization filing Form 990, or Form 990-EZ, that received from any one contributor, during the year, aggregate contributions or bequests of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. (Complete Parts I, II, and III.) For a section 501(c)(7), (8), or (10) organization filing Form 990, or Form 990-EZ, that received from any one contributor, during the year, some contributions for use exclusively for religious, charitable, etc., purposes, but these contributions did not aggregate to more than \$1,000. (If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Do not complete any of the Parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year.) Caution: Organizations that are not covered by the General Rule and/or the Special Rules do not file Schedule B (Form 990, 990-EZ, or 990-PF), but they must check the box in the heading of their Form 990, Form 990-EZ, or on line 2 of their Form 990-PF, to certify that they do not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF). LHA For Paperwork Reduction Act Notice, see the Instructions Schedule B (Form 990, 990-EZ, or 990-PF) (2006)

for Form 990, Form 990-EZ, and Form 990-PF.

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	orm 990, 990-EZ, or 990-PF) (2006)		Page 1 of 1 of Part I
Name of or	ganization	Employe	er identification number
THE D	ONALD J. TRUMP FOUNDATION		
Part I	Contributors (See Specific Instructions.)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	DONALD J. TRUMP C/O THE TRUMP ORGANIZATION 725 5TH AVE NEW YORK, NY 10022	\$ <u>610,000</u> .	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
2	CORINNA JONES C/O RICHMASTERY PO BOX 97 832 SAMC AUKLAND, NEW ZEALAND	\$ <u>10,000</u> .	Person X Payroll
(a)	(b)	(c) Aggregate contributions	(d) Type of contribution
	Name, address, and ZIP + 4 STARK CARPET CORP. 979 THIRD AVE. NEW YORK, NY 10022-1276	\$10,000.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
4	PEOPLE MAGAZINE 1271 AVENUE OF THE AMERICAS NEW YORK, NY 10020	\$150,000.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)

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

Department of the Treasury Internal Revenue Service

Schedule of Contributors

Supplementary Information for line 1 of Form 990, 990-EZ, and 990-PF (see instructions)

2007

Name of organization		Employer identification number
	THE DONALD J. TRUMP FOUNDATION	
Organization type (chec	k 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	on
	527 political organization	
Form 990-PF	X 501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a private foundation	
	501(c)(3) taxable private foundation	
-	ns filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or mo	re (in money or property) from any one
contributor. (Co	emplete Parts I and II.)	
For a section 50 sections 509(a)	01(c)(3) organization filing Form 990, or Form 990-EZ, that met the 33 1/3% suppo (1)/170(b)(1)(A)(vi), and received from any one contributor, during the year, a cont on line 1 of these forms. (Complete Parts I and II.)	
aggregate cont	01(c)(7), (8), or (10) organization filing Form 990, or Form 990-EZ, that received from the received f	
some contribut \$1,000. (If this charitable, etc.	01(c)(7), (8), or (10) organization filing Form 990, or Form 990-EZ, that received fro ions for use exclusively for religious, charitable, etc., purposes, but these contributions is checked, enter here the total contributions that were received during the year, purpose. Do not complete any of the Parts unless the General Rule applies to the religious, charitable, etc., contributions of \$5,000 or more during the year.)	utions did not aggregate to more than ear for an <i>exclusively</i> religious, his organization because it received
they must check the bo	that are not covered by the General Rule and/or the Special Rules do not file Scho ix in the heading of their Form 990, Form 990-EZ, or on line 2 of their Form 990-Pf lle B (Form 990, 990-EZ, or 990-PF).	
•	eduction Act Notice, see the Instructions rm 990-EZ, and Form 990-PF.	Schedule B (Form 990, 990-EZ, or 990-PF) (2007)

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Schedule B (F	Form 990, 990-EZ, or 990-PF) (2007)		Page 1 of 1 or Parti
Name of or	rganization	Employ	er identification number
THE D	ONALD J. TRUMP FOUNDATION		
Part I	Contributors (See Specific Instructions.)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	DONALD J. TRUMP		Person X Payroll
	C/O THE TRUMP ORGANIZATION 725 5TH AVE	\$ 35,000.	Noncash (Complete Part II if there
	NEW YORK, NY 10022		is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
2	STARK CARPET CORP.		Person X
	979 THIRD AVE-11TH FLOOR	\$ 20,000.	Noncash (Complete Part II if there
	NEW YORK, NY 10022		is a noncash contribution.
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
3	WWE		Person X
	1241 EAST MAIN STREET	\$ 4,000,000.	Payroll Noncash
	STAMFORD, CT 06902		(Complete Part II if there is a noncash contribution.
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
4	ALFONS SCHMITT		Person X
	3505 SUMMIT BOULEVARD	\$ 25,000.	Payroll Noncash (Complete Boot II if there
	WEST PALM BEACH, FL 33406		(Complete Part II if there is a noncash contribution.
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
5	NBC ENTERTAINMENT		Person X
	30 ROCKEFELLER PLAZA	\$10,000.	Payroll Noncash (Complete Part II if there
	NEW YORK, NY 10112		is a noncash contribution
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
			Person
		\$	Payroll Noncash
			(Complete Part II if there is a noncash contribution
		Schedule B /Form	990 990-E7 or 990-DE1/2007

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

Department of the Treasury Internal Revenue Service

Schedule of Contributors

➤ Attach to Form 990, 990-EZ, and 990-PF.

RECEIVED NYSCEF: 06/14/2018

OMB No. 1545-0047

2008

Name of the organization		Employer identification number
	THE DONALD J. TRUMP FOUNDATION	
Organization type (chec		•
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	
Form 990-PF	X 501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a private foundation	
	501(c)(3) taxable private foundation	
***	ons filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in mo	ney or property) from any one
Special Rules		
509(a)(1)/170(501(c)(3) organization filing Form 990, or Form 990-EZ, that met the 33 1/3% support test o b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of the gre rm 990, Part VIII, line 1h or 2% of the amount on Form 990-EZ, line 1. Complete Parts I and	eater of (1) \$5,000 or (2) 2% of the
aggregate cor	501(c)(7), (8), or (10) organization filing Form 990, or Form 990-EZ, that received from any or ntributions or bequests of more than \$1,000 for use <i>exclusively</i> for religious, charitable, sci the prevention of cruelty to children or animals. Complete Parts I, II, and III.	ne contributor, during the year, entific, literary, or educational
some contribu \$1,000. (If this etc., purpose.	501(c)(7), (8), or (10) organization filing Form 990, or Form 990-EZ, that received from any or tions for use <i>exclusively</i> for religious, charitable, etc., purposes, but these contributions did s box is checked, enter here the total contributions that were received during the year for an Do not complete any of the parts unless the General Rule applies to this organization becitable, etc., contributions of \$5,000 or more during the year.)	d not aggregate to more than n exclusively religious, charitable, ause it received nonexclusively
Caution. Organization they must answer "No	s that are not covered by the General Rule and/or the Special Rules do not file Schedule B " on Part IV, line 2 of their Form 990, or check the box in the heading of their Form 990-EZ,	(Form 990, 990-EZ, or 990-PF), but or on line 2 of their Form 990-PF, to

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. These instructions will be issued separately.

certify that they do not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Schedule B (Form 990, 990-EZ, or 990-PF) (2008)

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Schedule 8 (Fo	orm 990, 990-EZ, or 990-PF) (2008)			Page 1 of 1 of Part I
Name of org	ganization	[Employer 	identification number
	ONALD J. TRUMP FOUNDATION			
Part I	Contributors (see instructions)			(d)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributi	ons	Type of contribution
1	DONALD J. TRUMP C/O THE TRUMP ORGANIZATION 725 5TH AVE NEW YORK, NY 10022	\$30,00		Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributi	ions	(d) Type of contribution
2	DAVID FOSTER FOUNDATION 212 HENRY STREET VICTORIA, BC CANADA V9Z 3H9	\$45,00		Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contribut	ions	(d) Type of contribution
3	GLENN MOSS 30 BRANCH RD. BREWSTER, NY 10509	\$10,0		Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contribut	tions	(d) Type of contribution
4	THE WILLARD TC JOHNSON FOUNDATION 630 FIFTH AVE. SUITE 1510 NEW YORK, NY 10111	\$ 250,0	00.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contribu	tions	(d) Type of contribution
5	STARK CARPET CORP. 979 THIRD AVE-11TH FLOOR NEW YORK, NY 10022	\$ 17,5	500.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contribu	ıtions	(d) Type of contribution
6	CELEBRITY FIGHT NIGHT FOUNDATION 2111 E. HIGHLAND AVE. SUITE 135 PHEONIX, AZ 85016	\$\$150,0	000.	Person X Payroll
		Schedule	B (Form	990, 990-EZ, or 990-PF) (200

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Schedule of Contributors

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

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

2009 OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number

Т	HE DONALD J. TRUMP FOUNDATION
Organization type (check	
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
Form 990-PF	X 501(c)(3) exempt private foundation
	4947(a)(1) nonexempt charitable trust treated as a private foundation
	501(c)(3) taxable private foundation
	is covered by the General Rule or a Special Rule.)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.
For an organization contributor. Comp	n filing Form 990, 990 EZ, or 990 PF that received, during the year, \$5,000 or more (in money or property) from any one plete Parts I and II.
Special Rules	
509(a)(1) and 170	(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections (b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% (I) Form 990, Part VIII, line 1h or (ii) Form 990-EZ, line 1. Complete Parts I and II.
aggregate contrib	c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, utions of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or cruelty to children or animals. Complete Parts I, II, and III.
contributions for u If this box is check purpose. Do not c	c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, use exclusively for religious, charitable, etc., purposes, but these contributions did not aggregate to more than \$1,000. Red, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., complete any of the parts unless the General Rule applies to this organization because it received nonexclusively le, etc., contributions of \$5,000 or more during the year.
but it must answer "No" or	hat is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), in Part IV, line 2 of its Form 990, or check the box on line H of its Form 990-EZ, or on line 2 of its Form 990-PF, to certify ing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF.

Schedule B (Form 990, 990-EZ, or 990-PF) (2009)

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Schedule B (Form 990, 990-EZ, or 990-PF) (2009) 1 of 1 of Part I Page Name of organization **Employer identification number** THE DONALD J. TRUMP FOUNDATION Part I Contributors (see instructions) (a) (b) (d) (c) No. Name, address, and ZIP + 4 Aggregate contributions Type of contribution 1 THE CHARLES EVANS FOUNDATION X Person Payroll 116 VILLAGE BLVD. SUITE 200 50,000. Noncash (Complete Part II if there PRINCETON, NJ 08540 is a noncash contribution.) (a) (c) No. Name, address, and ZIP + 4 Aggregate contributions Type of contribution 2 WORLD WRESTLING ENTERTAINMENT Person Payroll 1241 EAST MAIN ST. P.O. BOX 3857 Noncash 1,000,000. (Complete Part II if there STAMFORD, CT 06902 is a noncash contribution.) (a) (c) (d) No. Name, address, and ZIP + 4 Aggregate contributions Type of contribution 3 STARK CARPET CORP. Person Payroll 979 THIRD AVE - 11TH FLOOR 4,000. Noncash (Complete Part II if there NEW YORK, NY 10022 is a noncash contribution.) (a) (b) (c) (d) No. Name, address, and ZIP + 4 Aggregate contributions Type of contribution 4 CHARLES EVANS JOEL PASHCOW Person X Payrol! 116 VILLAGE BLVD. SUITE 200 Noncash 50,000. (Complete Part II if there PRINCETON , NJ 08540 is a noncash contribution.) (a) (b) (c) (d) No. Name, address, and ZIP + 4 Aggregate contributions Type of contribution Person **Payroll** Noncash (Complete Part II if there is a noncash contribution.) (a) (b) (c) (d) No. Name, address, and ZIP + 4 **Aggregate contributions** Type of contribution Person **Payroll** Noncash \$ (Complete Part II if there is a noncash contribution.)

INDEX NO. 451130/2018 FILED: CLERK 06/14/2018 RECEIVED NYSCEF: 06/14/2018 NYSCEF DOC. **EAPHIC print - DO NOT PROCESS** As Filed Data -DLN: 93491319004111 OMB No 1545-0047 lule B Schedule of Contributors 0, 990-EZ. ٠) ► Attach to Form 990, 990-EZ, or 990-PF. 2010 f the Treasury nue Service Employer identification number organization .D J TRUMP FOUNDATION ation type (check one) Section: 501(c)(or 990-EZ) (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization -PF 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation /our organization is covered by the General Rule or a Special Rule. ly a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See instructions Ruleor an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or roperty) from any one contributor Complete Parts I and II Rules or a section 501(c)(3) organization filing Form 990 or 990-EZ, that met the 331/3% support test of the regulations nder sections 509(a)(1) and 170(b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of the reater 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 or a section 501(c)(7), (8), or (10) organization filing Form 990, or 990-EZ, that received from any one contributor, uring the year, aggregate contributions of more than \$1,000 for use exclusively for religious, charitable, cientific, literary, or educational purposes, or the prevention of cruelty to children or animals Complete Parts I, II, and or a section 501(c)(7), (8), or (10) organization filing Form 990, or 990-EZ, that received from any one contributor, uring the year, contributions for use exclusively for religious, charitable, etc., purposes, but these contributions did ot aggregate to more than \$1,000. If this box is checked, enter here the total contributions that were received during ne year for an exclusively religious, charitable, etc., purpose. Do not complete any of the parts unless the General Rule

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

pplies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more

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Schedule B (Form 990, 990-EZ, or 990-PF) (2010)

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Page 1 of 1 of Part I

Employer identification number

Name of organization
THE DONALD 1 TRUMP FOUNDATION Part I Contributors (see Instructions) (a) (b) (d) (c) Type of contribution No. Name, address, and ZIP + 4 Aggregate contributions 1 Person 🔽 ayroll | Noncash | STARK CARPET CORP 979 THIRD AVE 11TH FLOOR 7,500 (Complete Part II if there is NEWYORK, NY 10022 a noncash contribution) (a) (d) (b) (c) Name, address, and ZIP + 4 Aggregate contributions Type of contribution No. 2 Person **₩** KINRAYINC Payroll 725 FIFTH AVE 24TH FLOOR Noncash T 25,000 (Complete Part II if there is NEW YORK, NY 10022 a noncash contribution) (d) (a) (b) (c) Name, address, and ZIP + 4 Type of contribution No. Aggregate contributions Person Payroli Noncash [(Complete Part II if there is a noncash contribution) (d) (a) (c) Name, address, and ZIP + 4 Aggregate contributions Type of contribution No. Person Payroll Noncash [(Complete Part II if there is a noncash contribution) (d) (a) (b) (c) Name, address, and ZIP + 4 Aggregate contributions Type of contribution No. Person Payroli Noncash [(Complete Part II if there is a noncash contribution) (c) (d) (a) Name, address, and ZIP + 4 Aggregate contributions Type of contribution Person Payroll Noncash [" (Complete Part II if there is a noncash contribution)

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organization D J TRUMP FOUNDATION	En	nployer identification number
Noncash Property (see Instructions)		
(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	 \$	
(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	\$	
(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
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(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	s	
(b) Description of noncash property given	(C) FMV (or estimate) (see instructions)	(d) Date received
	s	

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WASLEAD DAR EX NO. 227-201 (SOIO)

organization
D J TRUMP FOUNDATION

Employer identification number

Exclusively religious, charitable, etc. aggregating more than \$1,000 for the For organizations completing Part III, enter	year. (Complete c	olumns (a) through (e vely religious, charitat) and the following line entry) ble, etc.,
contributions of \$1,000 or less for the year	ear (Enter this infoi	mation once See insti	ructions) 🟲 \$
(b) Purpose of gift	U	(c) se of gift	(d) Description of how gift is held
Mark 1880 (1980 (1			
	<u> </u>	(e)	
Transferee's name, address, a		ansfer of gift	nship of transferor to transferee
(b) Purpose of gift	U	(c) se of gift	(d) Description of how gift is held
		A=3.47	
	.1	(e)	
		ansfer of gift	
Transferee's name, address, a	ina ZIP + 4	Relatio	nship of transferor to transferee

	<u> </u>		1
(b) Purpose of gift	1	(c) Ise of gift	(d) Description of how gift is held
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		(0)	
	Tr	(e) ansfer of gift	
Transferee's name, address, a			onship of transferor to transferee
(b)		(c)	(d)
Purpose of gift	l	Jse of gift	Description of how gift is held
		-	
		(e)	
		ransfer of gift	
Transferee's name, address,	and ZIP + 4	Relatio	onship of transferor to transferee

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Schedule of Contributors

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

OMB No. 1545-0047

(Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service

Schedule B

Employer identification number Name of the organization

	THE DONALD J. TRUMP FOUNDATION				
Organization type (che	ck one):				
Filers of:	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				
Form 990-PF	501(c)(3) exempt private foundation				
	4947(a)(1) nonexempt charitable trust treated as a private foundation				
	501(c)(3) taxable private foundation				
• •	ion is covered by the General Rule or a Special Rule. 01(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.				
General Rule					
=	eation filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one omplete Parts I and II.				
Special Rules					
509(a)(1) and	501(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 170(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.				
total contribut	501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, ions of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or no foruelty to children or animals. Complete Parts I, II, and III.				
contributions of this box is contributed by the purpose. Do n	501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, for use exclusively for religious, charitable, etc., purposes, but these contributions did not total to more than \$1,000. hecked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively itable, etc., contributions of \$5,000 or more during the year.				
	ion that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), or Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on Part I, line 2 of its Form 990-PF, to				

certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2011)

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Schedule (3 (Form 990, 990-EZ, or 990-PF) (2011)			Page 2
Name of organization			Employ	er identification number
THE DONALD J. TRUMP FOUNDATION				
Part I	-Contributors (see instructions). Use duplicate copies of Part I if additional	space is needed.		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributio	ns	(d) Type of contribution
1	PRESTIGE MILLS INC.			Person X
	34-01 38TH AVE.	\$14,0	00.	Payroll Noncash (Complete Part II if there
	LONG ISLAND CITY, NY 11101-2227			is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributio	ns	(d) Type of contribution
2	THE CHARLES EVANS FOUNDATION			Person X
	116 VILLAGE BLVD. STE 200	\$50,0	000.	Payroli Noncash (Complete Part II if there
	PRINCETON, NJ 08540-5700			is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributio	ons	(d) Type of contribution
3	COMEDY CENTRAL			Person X
	345 HUDSON ST	\$\$	000.	Payroll Noncash (Complete Part II if there
	NEW YORK, NY 10014			is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contribution	ons	(d) Type of contribution
4	RICHARD EBERS INSIDE SPORT AND ENTERTAINMENT GROUP			Person X
	33 EAST 33RD STREET SUITE 1107	\$ 450,9	960.	Payroll Noncash
	NEW YORK, NY 10016			(Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contribution	ons	(d) Type of contribution
				Person Payroll
		\$		Noncash (Complete Part II if there
				is a noncash contribution.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contribution	ons	(d) Type of contribution
				Person Powell
		\$		Payroll Noncash (Complete Part II if there
		Cahadula	D (Fare	is a noncash contribution.
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Schedule B (Form 990, 990-EZ, or 990-PF) (2011)

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Page 3

Name of organization **Employer identification number** THE DONALD J. TRUMP FOUNDATION Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed. (a) (c) No. (b) (d) FMV (or estimate) from Description of noncash property given **Date received** (see instructions) Part I (a) (c) No. (b) (d) FMV (or estimate) from Description of noncash property given **Date received** (see instructions) Part I (a) (c) No. (b) (d) FMV (or estimate) from Description of noncash property given **Date received** (see instructions) Part I (a) (c) No. (d) (b) FMV (or estimate) from Description of noncash property given **Date received** (see instructions) Part I (a) (c) No. (b) (d) FMV (or estimate) from Description of noncash property given **Date received** (see instructions) Part I (a) (c) No. (b) (d) FMV (or estimate) from Description of noncash property given **Date received** (see instructions) Part I

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	(Form 990, 990-EZ, or 990-PF) (2011)		Page 4
Name of orga	anization	Employer identification number	
סת אאיי	NALD J. TRUMP FOUNDATE	LOM	
Part III	Exclusively religious, charitable, etc., ind year. Complete columns (a) through (e) and the total of exclusively religious, charitable, eduplicate copies of Part III if addition	ividual contributions to section 501(c); the following line entry. For organization tc., contributions of \$1,000 or less for t	7), (8), or (10) organizations that total more than \$1,000 for the is completing Part III, enter he year. (Enter this information once.)
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-		(e) Transfer of gift	
	Transferee's name, address, i	and ZIP + 4	Relationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
		(e) Transfer of gift	
	Transferee's name, address,	and ZIP + 4	Relationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
		(e) Transfer of gift	
	Transferee's name, address,	Relationship of transferor to transferee	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
		(e) Transfer of gift	
	Transferee's name, address,	and ZIP + 4	Relationship of transferor to transferee

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Schedule of Contributors

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

OMB Na. 1545-0047

RECEIVED NYSCEF: 06/14/2018

2012

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule B

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

Employer identification number

	THE DONALD J. TRUMP FOUNDATION
Organization type (che	ck 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
Form 990-PF	X 501(c)(3) exempt private foundation
	4947(a)(1) nonexempt charitable trust treated as a private foundation
	501(c)(3) taxable private foundation
=	ration filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one omplete Parts I and II.
Special Rules	
509(a)(1) and	501(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 170(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.
total contribut	501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, closs of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or not cruelty to children or animals. Complete Parts I, II, and III.
contributions If this box is c purpose. Do n	501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, for use exclusively for religious, charitable, etc., purposes, but these contributions did not total to more than \$1,000. hecked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively itable, etc., contributions of \$5,000 or more during the year
	ion that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), or on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on Part I, line 2 of its Form 990-PF, to

certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

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Schedule B (Form 990, 990-EZ, or 990-PF) (2012) Page 2 Name of organization Employer identification number THE DONALD J. TRUMP FOUNDATION Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed. (a) (b) (d) Type of contribution No. Name, address, and ZIP + 4 **Total contributions** 1 THE CHARLES EVANS FOUNDATION X Person **Payroll** 50,000. 116 VILLAGE BLVD. STE 200 Noncash (Complete Part II if there PRINCETON, NJ 08540-5700 is a noncash contribution.) (a) (b) (c) (d) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution 2 NBC UNIVERSAL MEDIA LLC Person **Payroll** 100 UNIVERSAL CITY PLAZA 500,000. Noncash (Complete Part II if there UNIVERSAL CITY , CA 91608 is a noncash contribution.) (a) (b) (c) (d) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution RICHARD EBERS INSIDE SPORT AND 3 ENTERTAINMENT GROUP XPerson Payroli 33 EAST 33RD STREET SUITE 1107 522,828. Noncash (Complete Part II if there NEW YORK, NY 10016 is a noncash contribution.) (a) (b) (c) (d) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution 4 NY REAL ESTATE INSTITUTE Person Payroll 132 WEST 36TH ST. 2ND FLOOR 10,000. Noncash (Complete Part II if there NEW YORK, NY 10018 is a noncash contribution.) (a) (b) (c) (d) **Total contributions** No. Name, address, and ZIP + 4 Type of contribution 5 KRUPP KOMMUNICATIONS \mathbf{X} Person Payroll 5,000. 636 AVENUE OF THE AMERICAS 4TH FLOOR Noncash (Complete Part II if there NEW YORK, NY 10011 is a noncash contribution.) (a) (b) (c) (d) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution 6 STEVEN SHAPIRO X Person **Payroll** 157,250. 3017 SPANISH RIVER ROAD Noncash (Complete Part II if there BOCA RATON, FL 33432 is a noncash contribution.) Schedule B (Form 990, 990-EZ, or 990-PF) (2012)

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Page 3 Schedule B (Form 990, 990-EZ, or 990-PF) (2012) **Employer identification number** Name of organization THE DONALD J. TRUMP FOUNDATION Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed. (a) (c) (d) No. (b) FMV (or estimate) from Description of noncash property given **Date received** (see instructions) Part I (a) (c) No. (d) (b) FMV (or estimate) **Date received** from Description of noncash property given (see instructions) Part I (a) (c) (d) No. (b) FMV (or estimate) **Date received** from Description of noncash property given (see instructions) Part I (a) (c) No. (d) (b) FMV (or estimate) from **Date received** Description of noncash property given (see instructions) Part I (a) (c) No. (d) (b) FMV (or estimate) **Date received** from Description of noncash property given (see instructions) Part I (a) (c) (d) No. (b) FMV (or estimate) Date received from Description of noncash property given (see instructions) Part I

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Schedule B	(Form 990, 990-EZ, or 990-PF) (2012)		Page 4			
Name of orga			Employer identification number			
	NALD J. TRUMP FOUNDATION)N	7) (9) or (40) expansions that you make the s. (bill for the			
Part III	year. Complete columns (a) through (e) and the	aual contributions to section by I(c)(of following line entry. For organization	7), (8), or (10) organizations that total more than \$1,000 for the s completing Part III, enter the year. (Enter this information once.)			
	the total of exclusively religious, charitable, etc.	, contributions of \$1,000 or less for t	he year. (Enter this information once.)			
(a) No.	Use duplicate copies of Part III if additiona	I space is needed.				
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held			
Parti						
'						
		(e) Transfer of gift				
<u> </u>	Transferee's name, address, an	<u>d ZIP + 4</u>	Relationship of transferor to transferee			
•						
(a) No. from	(ta) Dawa and of oith	(-) ((4 - i4)	(d) Description of how gift is held			
Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of now girt is need			
-		(e) Transfer of gift				
	(a) transies of Aur					
<u>_</u>	Transferee's name, address, an	d ZIP + 4	Relationship of transferor to transferee			
(a) No.						
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held			
-		(e) Transfer of gift				
	(a) transier of Auc					
	Transferee's name, address, ar	id ZIP + 4	Relationship of transferor to transferee			
(a) No. from	· ·					
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held			
	(a) Tanadar of site					
	(e) Transfer of gift					
	Transferee's name, address, a	Relationship of transferor to transferee				
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Schedule of Contributors

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

Department of the Treasury Internal Revenue Service ➤ Attach to Form 990, Form 990-EZ, or Form 990-PF.

Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at www.irs.gov/form990 ·

OMB No. 1545-0047

Name of the organization

Employer identification number

	THE DONALD J. TRUMP FOUNDATION
Organization type (chec	k 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
Form 990-PF	S01(c)(3) exempt private foundation
	4947(a)(1) nonexempt charitable trust treated as a private foundation
	501(c)(3) taxable private foundation
	on is covered by the General Rule or a Special Rule. 1(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.
-	ation filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one implete Parts I and II.
Special Rules	
509(a)(1) and 1	01(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 70(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.
total contribution	01(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, ons of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or of cruelty to children or animals. Complete Parts I, II, and III.
contributions for If this box is ch purpose. Do no	101(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, or use exclusively for religious, charitable, etc., purposes, but these contributions did not total to more than \$1,000. necked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., ot complete any of the parts unless the General Rule applies to this organization because it received nonexclusively table, etc., contributions of \$5,000 or more during the year
but it must answer "No	on that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), " 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 neet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2013)

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Schedule B (Form 990, 990-EZ, or 990-PF) (2013)

Schedule B (Form 990, 990-EZ, or 990-PF) (2013)

Name of organization

THE DONALD J. TRUMP FOUNDATION

Page 2

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional	space is needed.	
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
1	RICHARD EBERS INSIDE SPORT AND ENTERTAINMENT GROUP 33 EAST 33RD STREET SUITE 1107	\$ 435,832.	Person X Payroll Noncash
	NEW YORK, NY 10016		(Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	THE CLANCY LAW FIRM P.C.		Person X Payroll
	40 WALL STREET SUITE 6100	\$ <u>100,000.</u>	Noncash (Complete Part II for
	NEW YORK, NY 10005-1315		noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3	RICHARD LEVINE		Person X
	170 EAST 78TH STREET APT E6A	\$	Noncash (Complete Part II for
	NEW YORK, NY 10128-2215		noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4	TWENTIETH CENTURY FOX FILM CORPORATION		Person X
	1211 AVENUE OF THE AMERICAS	\$10,000.	Noncash (Complete Part II for
	NEW YORK, NY 10036		noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5	THE JOHN F SCARPA FOUNDATION		Person X
	1676 S OCEAN BLVD	s5,000.	Payroll Noncash
	PALM BEACH, FL 33480		(Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
6	ROBERT MORROW C/O KENILWORTH EQUITIES		Person X Payroll
	825 THIRD AVE, SUITE 3315	\$5,000.	Noncash (Complete Part II for
	NEW YORK, NY 10022		noncash contributions.)

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	3 (Form 990, 990-EZ, or 990-PF) (2013)		Page 3
Name of org	panization	Employe	r identification number
THE DO	ONALD J. TRUMP FOUNDATION		
Part II	Noncash Property (see instructions). Use duplicate copies of Part	t II if additional space is needed.	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		s	-
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
323453 10-2		\$\$	990, 990-EZ, or 990-PF) (2013)

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Schedule B	(Form 990, 990-EZ, or 990-PF) (2013)		Page 4	
Name of organization			Employer Identification number	
mii	NATE T MELINE HOLDS MIC	NAT.		
Part III	Exclusively religious, charitable, etc., indivi year. Complete columns (a) through (e) and the the total of exclusively religious, charitable, etc.	dual contributions to section 501(c)(e following line entry. For organization ., contributions of \$1,000 or less for t	7), (8), or (10) organizations that total more than \$1,000 for the s completing Part III, enter ne year. (Enter this information once.)	
(a) No. 1	Use duplicate copies of Part III if additiona	I space is needed.		
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held	
				
-		(e) Transfer of gift		
-	Transferee's name, address, an		Relationship of transferor to transferee	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held	
-		(e) Transfer of gift		
		(e) Hansier of gift		
-	Transferee's name, address, ar	nd ZIP + 4	Relationship of transferor to transferee	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held	
		(e) Transfer of gift	pift .	
-	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held	
-		(e) Transfer of gift		
	Transferee's name, address, a		Relationship of transferor to transferee	

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Schedule of Contributors

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

Department of the Treasury Internal Revenue Service ▶ Attach to Form 990, Form 990-EZ, or Form 990-PF.
 ▶ Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at www.irs.gov/torm990.

2014

Name of the organization

Employer identification number

TH	HE DONALD J. TRUMP FOUNDATION			
Organization type (check o	ne):			
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			
Form 990-PF	X 501(c)(3) exempt private foundation			
	4947(a)(1) nonexempt charitable trust treated as a private foundation			
	501(c)(3) taxable private foundation			
• •	s covered by the General Rule or a Special Rule. (7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.			
	n filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or 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 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.				
For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.				
For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year > \$				
Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).				

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2014)

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Schedule	B (Form 990, 990-EZ, or 990-PF) (2014)		Page 2
Name of or	ganization	Emplo	yer identification number
THE D	ONALD J. TRUMP FOUNDATION	,	, http://www.parcelege.com/
Part I	Contributors (see instructions). Use duplicate copies of Part I if ad	ditional space is needed.	
(a) No.	(b) Name, address, and ZIP + 4 RICHARD EBERS INSIDE SPORTS AND	(c) Total contributions	(d) Type of contribution
1	ENTERTAINMENT GROUP 33 EAST 33RD STREET SUITE 1107 NEW YORK, NY 10016	\$ 477,400.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	PRESTIGE MILLS 3401 38TH AVE #2 LONG ISLAND CITY, NY 11101	\$20,000.	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
	·	\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	•		Person Payroll Noncash (Complete Part II for noncash contributions.)
423452 11-	05-14	Schedule B (Forr	n 990, 990-EZ, or 990-PF) (2014)

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Name of orga	i (Form 990, 990-EZ, or 990-PF) (2014) anization	Em	Pag ployer identification number
THE DO	NALD J. TRUMP FOUNDATION		
Part II	Noncash Property (see instructions). Use duplicate copies of Part	II if additional space is needed.	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		 s	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		s	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		 \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		 \$	orm 990, 990-EZ, or 990-PF) (20

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INDEX NO. 451130/2018 RECEIVED NYSCEF: 06/14/2018 Schedule B (Form 990, 990-EZ, or 990-PF) (2014) Page 4 Name of organization Employer identification number THE DONALD J. TRUMP FOUNDATION Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this Info. ence.) Part III Use duplicate copies of Part III if additional space is needed. (a) No. from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Relationship of transferor to transferee Transferee's name, address, and ZIP + 4 (a) No. from Part I (b) Purpose of gift · (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from Part I

(b) Purpose of gift (d) Description of how gift is held (c) Use of gift

(e) Transfer of gift

Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

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Schedule of Contributors

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

Department of the Treasury Internal Revenue Service ▶ Attach to Form 990, Form 990-EZ, or Form 990-PF.
 ▶ Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at www.irs.gov/form990 .

OMB No. 1545-0047

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

certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2015)

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

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Schedule	B (Form 990, 990-EZ, or 990-PF) (2015)		·	Page 2
Näme of or	ganization		Employe	r identification number
THE D	ONALD J. TRUMP FOUNDATION			
Part I	Contributors (see instructions). Use duplicate copies of Part I if additional	space is needed.		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contribution	ns	(d) Type of contribution
1	THE TRUMP CORPORATION 725 5TH AVENUE NEW YORK, NY 10022	\$ <u>566,3</u>	70.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contribution	ns	(d) Type of contribution
2	LAWRENCE ROMAN 30 NORTH MACQUESTEN PARKWAY MOUNT VERNON, NY 10550	\$5,0	00.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contribution	ns	(d) Type of contribution
3	TRUMP PRODUCTIONS LLC 725 5TH AVENUE NEW YORK, NY 10022	s50,0	00.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contribution	ns	(d) Type of contribution
4	NYREI 132 W 36TH ST, 2ND FL NEW YORK, NY 10018	\$10,0	00.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributio	ns	(d) Type of contribution
5	UK OFFICE OF VICTOR PINCHUK FOUNDATION 10 QUEEN ST PLACE, LONDON, EC4R 1BE, ENGLAND, UNITED KINGDOM	\$150,0	00.	Person X Payroli Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributio	ns	(d) Type of contribution
		\$		Person Payroll Oncash Occash (Complete Part II for noncash contributions.)

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Schedule B (Form 990, 990-EZ, or 990-PF) (2015) Page 3 Employer identification number Name of organization THE DONALD J. TRUMP FOUNDATION Part II Noncash Property (see instructions), Use duplicate copies of Part II if additional space is needed. (a) (c) No. (d) (b) FMV (or estimate) from Date received Description of noncash property given (see instructions) Part I (a) (c) No. (d) FMV (or estimate) Date received from Description of noncash property given (see instructions) Part I (a) (c) No. (d) FMV (or estimate) from Description of noncash property given Date received (see instructions) Part I (a) (c) No. (d) FMV (or estimate) Date received from Description of noncash property given (see instructions) Part I (a) (c) No. (d) (b) FMV (or estimate) from Description of noncash property given Date received (see instructions) Part 1 (a) (c) (d) No. (b) FMV (or estimate) Description of noncash property given Date received from (see instructions) Part I

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Schedule B	3 (Form 990, 990-EZ, or 990-PF) (2015)		Page 4
Name of org	anization		Employer Identification number
THE DO	NALD J. TRUMP FOUNDATIO	N	
Part III	Exclusively religious, charitable, etc., contr the year from any one contributor. Complete c completing Part III, enter the total of exclusively religious. Use duplicate copies of Part III if additions	butions to organizations described in olumns (a) through (e) and the follow charitable, etc., contributions of \$1,000 or les	section 501(c)(7), (8), or (10) that total more than \$1,000 for ing line entry. For organizations as for the year. [Enter this info. once.] \$
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	Touristance	(e) Transfer of gift	Detailement of the section of the se
	Transferee's name, address, ar	a zir + 4	Relationship of transferor to transferee
(a) No.	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
Part I			
-		(e) Transfer of gift	
	Transferee's name, address, an	d ZIP + 4	Relationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-		(e) Transfer of gift	
-	Transferee's name, address, ar	d ZIP + 4	Relationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-		(e) Transfer of gift	
-	Transferee's name, address, an	d ZIP + 4	Relationship of transferor to transferee

CLERK

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Schedule of Contributors

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

Schedule B

Department of the Treasury Internal Revenue Service

► Attach to Form 990, Form 990-EZ, or Form 990-PF. Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at www.irs.gov/form990

OMB No. 1545-0047

Employer identification number Name of the organization THE DONALD J. TRUMP FOUNDATION Organization type (check one): Filers of: Section: 501(c)() (enter number) organization Form 990 or 990-EZ 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 X 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 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on ii) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year Caution: An organization that 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).

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2015)

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Schedule	B (Form 990, 990-EZ, or 990-PF) (2016)		Page 2
Name of or	ganization	Employ	rer identification number
THE D	ONALD J. TRUMP FOUNDATION		
Part I	Contributors (See instructions). Use duplicate copies of Part I if ac	dditional space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	TVANKA TRUMP 725 5TH AVENUE NEW YORK, NY 10022	\$\$.	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
2	PHIL RUFFIN 3300 LAS VEGAS BLVD S LAS VEGAS, NV 89109	\$\$.	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
3	LAURA PERLMUTTER PO BOX 1028 LAKE WORTH, FL 33460	s1,000,000.	Person X Payroll Noncash (Complete Part il for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4	DARYL & STEVEN ROTH FOUNDATION 888 SEVENTH AVENUE NEW YORK, NY 10016	\$\$.	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
5	JOHN J CAFARO 6874 STRIMBU DRIVE BROOKFIELD, OH 44403	\$\$	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
6		\$	Person X Payroll Noncash (Complete Part II for noncash contributions.)

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chedule B (Form 990, 990-EZ, or 990-PF) (2016)			Page
ime of organization			Employer identification number
HE DONALD J. TRUMP FOUNDAT	TION		
art II Noncash Property (See instruction		art II if additional space is needed	
(a) No. (b)		(c)	(d)
rom Description of nonca	sh property given	FMV (or estimate (See instructions) Date received
		\$	
(a) No. (b) rom Description of nonca	sh property given	(c) FMV (or estimate (See instructions	
		\$	
(a) No. (b) rom Description of nonca		(c) FMV (or estimate (See instructions	
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(a) No. (b) from Description of nonce		(c) FMV (or estimate (See instructions	
		\$	
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		_{\$}	
53 10-18-18			B (Form 990, 990-EZ, or 990-PF) (2

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Schedule B	(Form 990, 990-EZ, or 990-PF) (2016)		Page 4
Name of orga	nization	Employer identification number	
ייש איייי	NALD J. TRUMP FOUNDATIO	N	
Part III	Exclusively religious, charitable, etc., contributer the year from any one contributor. Complete completing Part III, enter the total of exclusively religious, Use duplicate copies of Part III if additional	butions to organizations described in se olumns (a) through (e) and the following charitable, etc., contributions of \$1,000 or loss to	ction 501(c)(7), (8), or (10) that total more than \$1,000 for line entry. For expanizations or the year. {Enter this infe, once.}
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
		(e) Transfer of gift	
	Transferee's name, address, ar	nd ZIP + 4	Relationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
		(e) Transfer of gift	
-	Transferee's name, address, at	nd ZIP + 4	Relationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-		(e) Transfer of gift	
	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-		(e) Transfer of gift	
	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee
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