Form **990**

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

2016

Open to Public Inspection

Department of the Treasury

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

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

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Inter	rnal Reveni	ue Service	▶ Information about Form 990 and its instructions is at www.irs.gov/form99	0.	Inspection
Α	For the	2016 caler	ndar year, or tax year beginning 01/01 , 2016, and ending 13	2/31	, 20 16
В	Check if	applicable:	C Name of organization SYRIA FUND INC	D Employ	er identification number
$\bar{\Box}$	Address	· · · · · · · · · · · · · · · · · · ·	Doing business as The Syria Fund		47-4547136
П	Name ch	ĭ F	Number and street (or P.O. box if mail is not delivered to street address) Room/suite	E Telepho	ne number
H		Ŭ	`		
님	Initial retu	T T	424 E 117th Street Unit 4		914-420-7985
닏	Final retur	n/terminated	City or town, state or province, country, and ZIP or foreign postal code		
\sqcup	Amended		New York, NY, 10035	G Gross re	
Ш	Application	on pending	F Name and address of principal officer: Lexi Shereshewsky H(a) Is this a g	roup return for	subordinates? Yes No
			424 E 117th Street, Unit 4, New York, NY 10035 H(b) Are all	subordinate	s included? Yes No
ı	Tax-exen	npt status:	✓ 501(c)(3)	ach a list. (s	ee instructions)
J	Website:	: ► www	v.thesyriafund.org H(c) Group	exemption	number ▶
K	Form of o	organization:	Corporation ☐ Trust ☐ Association ☐ Other ► L Year of formation: 2015	M State	of legal domicile: NY
_	art I	Summa			
	_		scribe the organization's mission or most significant activities: Our mission is to r	octoro di	anity and onrich the
Ф	'				
Governance			rian refugees and other vulnerable families by providing critically-needed items and s		
шa	_		Our programs reach 100s of children and 1000s of families who have fled Syria due to		
Š	1		s box \blacktriangleright if the organization discontinued its operations or disposed of more than	1 1	its net assets.
Ğ	1		f voting members of the governing body (Part VI, line 1a)		6
∞ ∞	4	Number c	if independent voting members of the governing body (Part VI, line 1b) $\cdot\cdot\cdot$. \cdot	4	6
Activities &	5	Total num	ber of individuals employed in calendar year 2016 (Part V, line 2a)	5	0
ξį	6	Total num	ber of volunteers (estimate if necessary)	6	20
Ac	7a	Total unre	elated business revenue from Part VIII, column (C), line 12	7a	0
	1		ated business taxable income from Form 990-T, line 34	7b	0
			Prior Yo		Current Year
	8	Contributi	ons and grants (Part VIII, line 1h)	77,287	200 410
ne					209,618
/eu			service revenue (Part VIII, line 2g)	0	0
Revenue	1		nt income (Part VIII, column (A), lines 3, 4, and 7d)	0	0
_	11	Other reve	enue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	0	0
	12	Total reve	nue-add lines 8 through 11 (must equal Part VIII, column (A), line 12)	77,287	209,618
	13	Grants an	d similar amounts paid (Part IX, column (A), lines 1-3)	29,749	143,014
	14	Benefits p	paid to or for members (Part IX, column (A), line 4)	0	0
S	15	Salaries, c	ther compensation, employee benefits (Part IX, column (A), lines 5–10)	0	0
Expenses	16a		nal fundraising fees (Part IX, column (A), line 11e)	0	0
)er	b		Iraising expenses (Part IX, column (D), line 25) ► 5,393		J
Ä	17		enses (Part IX, column (A), lines 11a–11d, 11f–24e)	4,345	10.020
	1	-			18,029
	1		enses. Add lines 13–17 (must equal Part IX, column (A), line 25)	34,094	161,043
	1	Revenue	ess expenses. Subtract line 18 from line 12	43,193	48,575
Net Assets or Fund Balances		_	Beginning of Co	irrent Year	End of Year
set	20		ets (Part X, line 16)	40,387	88,962
nd Age	21	Total liabi	lities (Part X, line 26)	0	0
žē	22	Net asset	s or fund balances. Subtract line 21 from line 20	40,387	88,962
P	art II	Signat	ure Block		
Un	nder penal	Ities of perjur	y, I declare that I have examined this return, including accompanying schedules and statements, and to	he best of r	ny knowledge and belief, it is
tru	ie, correct	, and comple	te. Declaration of preparer (other than officer) is based on all information of which preparer has any know	edge.	
_					
Sig	an	Signa	ture of officer Da	te	
He		1 (
116	-1 C		Shereshewsky, Executive Director		
		1,	or print name and title		DTIN
Pa	nid	Print/Typ	e preparer's name Preparer's signature Date	Check [
	epare	r		self-emp	oloyed
	se Only		me ► Firr	n's EIN ▶	
J	,	Firm's ac	ldress ▶ Pho	ne no.	
Ma	y the IR		this return with the preparer shown above? (see instructions)		Yes No

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Dort	Ctotomout of Dyour	Comice Accomplishments	. age _
Part		am Service Accomplishments contains a response or note to any line in this Part III	
1	Briefly describe the organiza		<u> </u>
•	,	inity and enrich the lives of Syrian refugees and other vulnerable families	by providing critically-needed
	items and supporting educat		by providing critically-needed
	nems and supporting educat	ional programs.	
2	Did the organization underta	ake any significant program services during the year which were not	listed on the
	prior Form 990 or 990-EZ?		· · · · Ves 🗆 No
	If "Yes," describe these nev	v services on Schedule O.	
3	Did the organization cease	e conducting, or make significant changes in how it conducts, a	any program
	services?		· · · · 🗌 Yes 🗹 No
	If "Yes," describe these cha	inges on Schedule O.	
4		program service accomplishments for each of its three largest program	
		and 501(c)(4) organizations are required to report the amount of gra	ants and allocations to others,
	the total expenses, and reve	enue, if any, for each program service reported.	
4a	(Code:) (Expens	es \$including grants of \$0) (Revenu	ue \$
		ation enhancement program for Syrian refugee and other vulnerable yout	
	program provides remedial e	education (Arabic, Math, Science) and enhancement classes (English, Mus	sic, IT) for nearly 100
	students ages 5-14. The prog	gram additionally employs local part-time staff from the community includ	ing 5 teachers, 1 Janitor, 1
		ld Officer in Jordan. In 2016, The Syria Fund launched the Songs for Syria	
		with NY-based organization S'Cool Sounds, The Syria Fund set up a mus	
		school with instruction in instrument learning and music composition. The	
		rdanian organization, the South Azraq Women's Association, and another	
	Helping Refugees in Jordan	(HRJ). SAWA and HRJ contribute to additional running costs of this school	ol.
4b	(Code:) (Expens	es \$ 59,702 including grants of \$ 16,947) (Revenues	ue \$ 0)
TD		ian refugees education enhancement program was established in 2016 in	'
		harity in Jordan. The program was set up in a converted building in rural I	
		Before attending this program, students did not have access to education	
		ff including 6 teachers, a bus driver, two librarians and other support staff	
		n, Science and English. A small library and art room were set up to provide	
	programs in art, reading and		
4c	(Code:) (Expens	es \$ 48,811 including grants of \$ 0 (Revenu	ue \$0)
	The Syria Fund provides free	quent humanitarian aid support for vulnerable Jordanian and Syrian famili	es across Jordan. This
	includes regular food and hy	giene distributions. A massive winter program provides warm clothing, bl	lankets, gas canisters and
	more to families in need of th	nese basic needs items. All items are sourced and purchased within Jorda	an to support the local
	economy. Two individuals ar	e employed locally to manage all procurement and distribution.	
14	Other program continue (De	soribo in Schodulo (1) See Schodulo (2) Statement 1	
4d		scribe in Schedule O.) See Schedule O, Statement 1 including grants of \$ 10,000) (Revenue \$ 0	······
4e	Total program service expe		1
	i	170,104	

Part l	V Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	,	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	~	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If</i> "Yes," complete Schedule C, Part I	3		_
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i>	4		_
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		-
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		,
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>	7		,
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		,
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV </i>	9		,
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		,
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a		,
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		,
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII </i>	11c		,
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		~
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		~
	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If "Yes," complete Schedule D, Part X</i> .	11f		~
12 a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a		,
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		-
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		~
	Did the organization maintain an office, employees, or agents outside of the United States?	14a	1	
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV.	14b		
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15	,	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV.	16		,
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If</i> "Yes," <i>complete Schedule G, Part I</i> (see instructions)	17		,
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If</i> "Yes," <i>complete Schedule G, Part II</i>	18		,
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		,

Part	V Checklist of Required Schedules (continued)			
			Yes	No
20 a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		~
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? .	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		1
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			Ť
22				
		22		~
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23		~
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b			
	through 24d and complete Schedule K. If "No," go to line 25a	24a		1
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year	240		
·	to defease any tax-exempt bonds?	04-		
	·	24c		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		~
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior			
	year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?			
	If "Yes," complete Schedule L, Part I	25b		1
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any			
20	current or former officers, directors, trustees, key employees, highest compensated employees, or			
	disqualified persons? If "Yes," complete Schedule L, Part II	26		1
07		20		Ť
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,			
	substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			1
	entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		_
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		~
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete			
	Schedule L. Part IV	28b		1
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)	200		Ť
C	was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i>	000		1
	•	28c		
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	29		~
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
	conservation contributions? If "Yes," complete Schedule M	30		~
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			
	Part I	31		~
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"			
	complete Schedule N, Part II	32		~
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		1
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III,	-		
	or IV, and Part V, line 1	34		1
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		V
		SSA		-
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a			
00	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		-
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable			
	related organization? If "Yes," complete Schedule R, Part V, line 2	36		~
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,			
	Part VI	37		~
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and			
	19? Note. All Form 990 filers are required to complete Schedule O.	38	~	

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Part	· · · · · · · · · · · · · · · · · · ·			
	Check if Schedule O contains a response or note to any line in this Part V	<u></u>		
4.			Yes	N
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
С	reportable gaming (gambling) winnings to prize winners?	1c		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax	10		
	Statements, filed for the calendar year ending with or within the year covered by this return 0			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .	2b		
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		v
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority			
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		ر ا
b	If "Yes," enter the name of the foreign country: ▶	14		
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		V
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		V
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5с		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			
_	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		V
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or	۵.		
-	gifts were not tax deductible?	6b		
7 a	Organizations that may receive deductible contributions under section 170(c). Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			
-	and services provided to the payor?	7a		<u>ر</u>
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	7c		V

	reportable gaming (gambling) winnings to prize winners?	1c		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
	Statements, filed for the calendar year ending with or within the year covered by this return 0			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .	2b		
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		~
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority			
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial			/
	account)?	4a		_
b	If "Yes," enter the name of the foreign country: ►			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		v
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		~
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			
	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		~
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			
	and services provided to the payor?	7a		~
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7.		/
d	If "Yes," indicate the number of Forms 8282 filed during the year	7c		
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		v
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?.	7f		~
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		~
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		~
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
a	Initiation fees and capital contributions included on Part VIII, line 12			
ь 11	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . Section 501(c)(12) organizations. Enter:			
ıı a	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources			
	against amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note. See the instructions for additional information the organization must report on Schedule O.			
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
_				
C 140	Enter the amount of reserves on hand	145		
14a b	Did the organization receive any payments for indoor tanning services during the tax year?	14a 14b		<i>'</i>
ט	11 163, That it filed a 1 offit 720 to report these payments! If No, provide an explanation in Schedule O.		990	(2016
		. 01111		\~J : O

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Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a

response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Section A. Governing Body and Management Nο 1a Enter the number of voting members of the governing body at the end of the tax year . . . If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O. Enter the number of voting members included in line 1a, above, who are independent 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with 2 1 3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person? 3 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 4 Did the organization become aware during the year of a significant diversion of the organization's assets? . 5 5 6 6 Did the organization have members, stockholders, or other persons who had the power to elect or appoint 7a Are any governance decisions of the organization reserved to (or subject to approval by) members, 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: 8a ~ 8b Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O. 9 Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Nο **10a** Did the organization have local chapters, branches, or affiliates? 10a If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10b 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a b Describe in Schedule O the process, if any, used by the organization to review this Form 990. **12a** Did the organization have a written conflict of interest policy? *If "No," go to line 13* 12a Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b 1 Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," 12c 13 Did the organization have a written whistleblower policy? 13 14 14 Did the organization have a written document retention and destruction policy? 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official 1 15a 15b If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement 16a / b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed ▶ 17 CA, CT, NY Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) 18 available for public inspection. Indicate how you made these available. Check all that apply. Own website Another's website ✓ Upon request Other (explain in Schedule O) Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and 19 financial statements available to the public during the tax year. 20 State the name, address, and telephone number of the person who possesses the organization's books and records: Lexi Shereshewsky, (914)420-7985

Part VI

Page 7

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

 Check this box if neither the organization no 		d org	aniz	atio	n c	ompe	nsa	ted any curren	t officer, directo	r, or trustee.
				(0	C)					
(A) Name and Title	(B) Average hours per	Position (do not check more than one box, unless person is both an officer and a director/trustee)					n an	(D) Reportable compensation from	(E) Reportable compensation from related	(F) Estimated amount of other
	week (list any hours for related organizations below dotted line)		Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
Lexi Shereshewsky	30									
Executive Director	0	~		~				0	0	0
Demetri Blaisdell	15.00									
Chief of Business Affairs	0	~		~				0	C	0
Nora Barre	10									
Donor Relations Director	0	~						0	0	0
Ken Bernhard	5									
Board Member	0	~						0	0	0
Yasir Dhannoon	5									
Board Member	0	~						0	0	0
Jerry Shereshewsky	5									
Board Member	0	'						0	0	0
		1								

Part	VII Section A. Officers, Directors, Trus	tees, Key E	mploy	yees			lighe	st C	ompensated E	mployees (conti	nued)	•
	(A) Name and title	(B) Average hours per	box,	unles	Pos neck ss pe	rson	e than of is both or/trus	n an	(D) Reportable compensation	(E) Reportable compensation from	Esti	(F) mated ount of
		week (list any hours for related organizations below dotted line)	Individua or directo	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	comp froi orgai and	ther ensation m the nization related izations
			_									
			-									
1b c	Sub-total							>	0	0		0
d	Takal /add Basa Ale and Ash				:	· ·	· ·	<u> </u>	0	0		0
2	Total number of individuals (including bu reportable compensation from the organ		d to th	ose	e list	ed	above	e) w	ho received mo	ore than \$100,00	00 of	
3	Did the organization list any former of	fficer, direc						-	-			Yes No
4	employee on line 1a? If "Yes," complete For any individual listed on line 1a, is the organization and related organizations	e sum of re	portal	ble	con	nper	nsatio	n a	and other comp			
5	individual										ual 4	V
Section	for services rendered to the organization on B. Independent Contractors	? If "Yes," c	compl	ete	Sch	nedu	ıle J 1	for s	such person		5	V
1	Complete this table for your five highest compensation from the organization. Repyear.											
	(A) Name and business add	dress							(B) Description of s	ervices	(C) Compens	ation
None												
2	Total number of independent contractor	ors (includir	ng bu	ıt n	ot	limit	ed to	th	nose listed abo	ove) who		

received more than \$100,000 of compensation from the organization ▶

0

1 01111 000 (2011	∽ ,
Part VIII	Statement of Revenue
	Check if Schedule O contains a response or note to any line in this Part V

311		Check if Schedule C	contains a	resp	onse or note to	any line in this	Part VIII		🗆
						(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
nts nts	1a	Federated campaigns	3	1a	0				
Contributions, Gifts, Grants and Other Similar Amounts	b	Membership dues .	[1b	0				
ğ,	С	Fundraising events .		1c	4,771				
ar /	d	Related organizations		1d	0				
a, G	е	Government grants (con	<u> </u>	1e	0				
Sij	f	All other contributions, g							
돌		and similar amounts not inc		1f	204,847				
호텔	g	Noncash contributions include	_		0				
ig g	9 h	Total. Add lines 1a–1				209,618			
	- "	Total: //dd ii/ic5 Ta T	· · · · ·		Business Code	207,010			
Program Service Revenue	2a			-					
چ	b								
9	C								
Ĭ.	d								
Š									
<u>ra</u>	e	All atlant museum and							
jo G	f	All other program ser							
<u>п</u>	<u>g</u> 3	Total. Add lines 2a–2 Investment income	T		.	0			
	3	and other similar amo			nus, interest,				
			,		I	0	0	0	0
	4	Income from investmen				0	0	0	0
	5	Royalties	(i) Real		(ii) Personal	0	0	0	0
	C -	Overe wente	(i) Heal		.,,				
	6a	Gross rents		0	0				
	b	Less: rental expenses		0	0				
	C	Rental income or (loss)	(1)	0	0				
	d	Net rental income or	(IOSS) (i) Securitie		(ii) Other	0	0	0	0
	7a	Gross amount from sales of	(i) Securitie		.,				
		assets other than inventory		0	0				
	b	Less: cost or other basis and sales expenses .		_	_				
		•		0	0				
	C	Gain or (loss)		0	0				
	d	Net gain or (loss) .		. ц		0	0	0	0
nue	8a	Gross income from fu	_						
Other Revenu		events (not including \$	4,771						
Ř		of contributions reporte							
Je		See Part IV, line 18 .		· · ·	0				
ŏ		Less: direct expenses			0				
		Net income or (loss) f		~ ~	vents . ►	0		0	0
	9a	Gross income from ga							
	_	See Part IV, line 19 .		-	0				
	b	Less: direct expenses			0				
	C	Net income or (loss) f			ities ▶	0	0	0	0
	10a	Gross sales of in							
	_	returns and allowance		· · ·	0				
		Less: cost of goods s			0				
	С	Net income or (loss) f		rinver	-	0	0	0	0
	4.4	Miscellaneous F	evenue		Business Code				
	11a								
	b			-					
	C	Λ II - 41							
	d	All other revenue .		_					
	e	Total. Add lines 11a-				0			
	12	Total revenue. See in	nstructions.		🕨	209,618	0	0	0

Part IX Statement of Functional Expenses

Sectio	n 501(c)(3) and 501(c)(4) organizations must com										
Check if Schedule O contains a response or note to any line in this Part IX											
Do no 8b, 9b	t include amounts reported on lines 6b, 7b, , and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses						
1	Grants and other assistance to domestic organizations										
	and domestic governments. See Part IV, line 21	0	0								
2	Grants and other assistance to domestic individuals. See Part IV, line 22	0	0								
3	Grants and other assistance to foreign										
	organizations, foreign governments, and foreign										
	individuals. See Part IV, lines 15 and 16	143,014	143,014								
4	Benefits paid to or for members	0	0								
5	Compensation of current officers, directors,										
	trustees, and key employees	0	0	0	0						
6	Compensation not included above, to disqualified										
	persons (as defined under section 4958(f)(1)) and										
	persons described in section 4958(c)(3)(B)	0	0	0	0						
7	Other salaries and wages	0	0	0	0						
8	Pension plan accruals and contributions (include section 401/k) and 403/k) amployer contributions)										
_	section 401(k) and 403(b) employer contributions)	0	0	0	0						
9	Other employee benefits	0	0	0	0						
10	Payroll taxes	0	0	0	0						
11	Fees for services (non-employees):				0						
a	Management	0	0	0	0						
b	Accounting	275	0	275	0						
d	Lobbying	0	0	0	0						
e	Professional fundraising services. See Part IV, line 17	0	U	0	0						
f	Investment management fees	0	0	0	0						
g	Other. (If line 11g amount exceeds 10% of line 25, column	•	•								
Ū	(A) amount, list line 11g expenses on Schedule O.)	3,031	0	2,000	1,031						
12	Advertising and promotion	457	0	166	291						
13	Office expenses	0	0	0	0						
14	Information technology	0	0	0	0						
15	Royalties	0	0	0	0						
16	Occupancy	0	0	0	0						
17	Travel	5,203	5,170	33	0						
18	Payments of travel or entertainment expenses										
	for any federal, state, or local public officials	0	0	0	0						
19	Conferences, conventions, and meetings .	0	0	0	0						
20	Interest	0	0	0	0						
21	Payments to affiliates	0	0	0	0						
22	Depreciation, depletion, and amortization .	0	0	0	0						
23	Insurance	0	0	0	0						
24	Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If										
	line 24e amount exceeds 10% of line 25, column										
	(A) amount, list line 24e expenses on Schedule O.)										
а	Web/bank fees, dues/subscriptions, marketing m	4,992	0	4,992	0						
b	Fundraising including gifts/materials for donor s	4,071	0	0	4,071						
C	siong modern grant and to do not s	4,071			4,071						
d											
e	All other expenses	0	0	0	0						
25	Total functional expenses. Add lines 1 through 24e	161,043	148,184	7,466	5,393						
26	Joint costs. Complete this line only if the	,,,,,,	,	,	-7						
	organization reported in column (B) joint costs from a combined educational campaign and										
	fundraising solicitation. Check here										
	following SOP 98-2 (ASC 958-720)										

Part X Balance Sheet

		Check if Schedule O contains a response or note to any line in this Pal	rt X		
			(A) Beginning of year		(B) End of year
	1	Cash-non-interest-bearing	40,387	1	88,962
	2	Savings and temporary cash investments	0	2	0
	3	Pledges and grants receivable, net	0	3	0
	4	Accounts receivable, net	0	4	0
	5	Loans and other receivables from current and former officers, directors,			
		trustees, key employees, and highest compensated employees.			
		Complete Part II of Schedule L	0	5	0
ts	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L	0	6	0
Assets	7	Notes and loans receivable, net	0	7	0
Ř	8	Inventories for sale or use	0	8	0
	9	Prepaid expenses and deferred charges	0	9	0
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D			
	b	Less: accumulated depreciation 10b	0	10c	
	11	Investments—publicly traded securities	0		0
	12	Investments—other securities. See Part IV, line 11	0	12	0
	13	Investments – program-related. See Part IV, line 11	0	13	0
	14	Intangible assets	0	14	0
	15	Other assets. See Part IV, line 11	0	15	0
	16	Total assets. Add lines 1 through 15 (must equal line 34)	40,387	16	88,962
	17	Accounts payable and accrued expenses	0	17	0
	18	Grants payable	0	18	0
	19	Deferred revenue	0	19	0
	20	Tax-exempt bond liabilities	0	20	0
	21	Escrow or custodial account liability. Complete Part IV of Schedule D .	0	21	0
Se	22	Loans and other payables to current and former officers, directors,			
≝		trustees, key employees, highest compensated employees, and			
Liabilities		disqualified persons. Complete Part II of Schedule L	0	22	0
⊐	23	Secured mortgages and notes payable to unrelated third parties	0	23	0
	24	Unsecured notes and loans payable to unrelated third parties	0	24	0
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X			
		of Schedule D	0		
	26	Total liabilities. Add lines 17 through 25	0	26	0
seo		Organizations that follow SFAS 117 (ASC 958), check here ▶ ✓ and complete lines 27 through 29, and lines 33 and 34.			
an	27	Unrestricted net assets	40,387	27	80,058
Ва	28	Temporarily restricted net assets	0	28	8,904
ρ	29	Permanently restricted net assets	0	29	0
Net Assets or Fund Balances		Organizations that do not follow SFAS 117 (ASC 958), check here ▶ □ and complete lines 30 through 34.			
ts (30	Capital stock or trust principal, or current funds		30	
sse	31	Paid-in or capital surplus, or land, building, or equipment fund	<u> </u>	31	
Ă	32	Retained earnings, endowment, accumulated income, or other funds .		32	
Ne.	33	Total net assets or fund balances	40,387	33	88,962
	34	Total liabilities and net assets/fund balances	40,387	34	88,962
					000

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Part	t XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1		20	9,618
2	Total expenses (must equal Part IX, column (A), line 25)	2		16	51,043
3	Revenue less expenses. Subtract line 2 from line 1	3		4	18,575
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		4	10,387
5	Net unrealized gains (losses) on investments	5			0
6	Donated services and use of facilities	6			0
7	Investment expenses	7			0
8	Prior period adjustments	8			0
9	Other changes in net assets or fund balances (explain in Schedule O)	9			0
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line				
	33, column (B))	10		8	38,962
Part	XII Financial Statements and Reporting				_
	Check if Schedule O contains a response or note to any line in this Part XII			<u> </u>	$\perp \sqcup$
				Yes	No
1	Accounting method used to prepare the Form 990: Cash Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," ex Schedule O.	piain	in		
•					
2a				_	~
	If "Yes," check a box below to indicate whether the financial statements for the year were comreviewed on a separate basis, consolidated basis, or both:	pilea	or		
L	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis Were the organization's financial statements audited by an independent accountant?		. 2b		V
b	If "Yes," check a box below to indicate whether the financial statements for the year were audit	 od on			
	separate basis, consolidated basis, or both:	eu on	a		
	Separate basis Consolidated basis Both consolidated and separate basis				
	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for o	versia	ht		
C	of the audit, review, or compilation of its financial statements and selection of an independent account				
	If the organization changed either its oversight process or selection process during the tax year, ex				
	Schedule O.	(piaiii			
За	As a result of a federal award, was the organization required to undergo an audit or audits as set	forth	in		
Ju	the Single Audit Act and OMB Circular A-133?		3a		V
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo	ergo th		+	
-	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such a		3b		
			Fr.	rm 99 0	(2016)

Form **990** (2016)

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

OMB No. 1545-0047 2016

Open to Public

Department of the Treasury Internal Revenue Service Name of the organization Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust. ► Attach to Form 990 or Form 990-EZ.

▶ Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Inspection

Employer identification number

	A FUND INC					47-45	
Pa							ns.
The o	organization is not a private founda				•	•	
1	A church, convention of churc	,				. , . , . , . ,	
2	A school described in section		,			, ,	
3	A hospital or a cooperative ho						
4	A medical research organization	•	onjunction with a hosp	oital desc	ribed in s	section 170(b)(1)(A)(III). Enter the
-	hospital's name, city, and state						
5	An organization operated for section 170(b)(1)(A)(iv). (Com	olete Part II.)			•		ai unit described in
6	A federal, state, or local gover						
7	An organization that normally described in section 170(b)(1)			port from	a gover	nmental unit or from	the general public
8	☐ A community trust described i	n section 170(b)	(1)(A)(vi). (Complete	Part II.)			
9	An agricultural research organ or university or a non-land-grauniversity:						
10	An organization that normally receipts from activities related support from gross investmen acquired by the organization a	to its exempt full income and uni	nctions—subject to c related business taxal	ertain exc ble incom	ceptions, ne (less se	and (2) no more that ection 511 tax) from	n 33¹/₃% of its
11	☐ An organization organized and						
12	☐ An organization organized and	operated exclus	ively for the benefit o	f, to perfo	orm the fu	unctions of, or to car	ry out the purposes
	of one or more publicly support						
	Check the box in lines 12a thro	•	• • • • •		•	•	• •
а	_ ;;						
	the supported organization supporting organization.	ou must comple	ete Part IV, Sections	A and B	•		
b	Type II. A supporting orgal control or management of organization(s). You must	the supporting o	rganization vested in	the same			
С	Type III functionally integ its supported organization(ally integrated with,
d	Type III non-functionally integrated that is not functionally integrequirement (see instruction	grated. The orga	nization generally mu	st satisfy	a distribu	ıtion requirement an	
е	☐ Check this box if the organ functionally integrated, or ☐						e II, Type III
f	Enter the number of supported of						
g	Provide the following information	n about the supp					
	(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1–10 above (see instructions))	listed in you	organization ur governing ment?	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
				Yes	No		
(A)							
(B)							
(C)							
(D)							
(E)							
Toto							

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(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.) Section A. Public Support Calendar year (or fiscal year beginning in) ▶ (a) 2012 **(b)** 2013 (c) 2014 (d) 2015 (e) 2016 (f) Total grants, contributions, 1 membership fees received. (Do not include any "unusual grants.") . . . 0 0 0 77,287 209,618 286,905 2 revenues levied organization's benefit and either paid to or expended on its behalf . . . 0 0 0 0 0 0 The value of services or facilities furnished by a governmental unit to the organization without charge 0 0 0 Total. Add lines 1 through 3. . . . 209,618 4 O 0 0 77.287 286,905 5 The portion of total contributions by each person (other than governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) Public support. Subtract line 5 from line 4 286,905 Section B. Total Support Calendar year (or fiscal year beginning in) ▶ (a) 2012 **(b)** 2013 (c) 2014 (d) 2015 (e) 2016 (f) Total 7 Amounts from line 4 0 0 0 77,287 209,618 286,905 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources 0 0 0 0 0 9 Net income from unrelated business activities, whether or not the business is regularly carried on 0 0 0 0 0 0 10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) 0 0 0 0 **Total support.** Add lines 7 through 10 11 286,905 12 0 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) 13 Section C. Computation of Public Support Percentage Public support percentage for 2016 (line 6, column (f) divided by line 11, column (f) 14 % Public support percentage from 2015 Schedule A, Part II, line 14 15 331/3% support test - 2016. If the organization did not check the box on line 13, and line 14 is 331/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization 331/3% support test - 2015. If the organization did not check a box on line 13 or 16a, and line 15 is 331/3% or more, check 17a 10%-facts-and-circumstances test - 2016. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported 10%-facts-and-circumstances test - 2015. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly

Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II.)

	if the organization falls to qualify	under the te	sts listed bei	ow, please co	implete Fart	11.)	
	on A. Public Support						
Calen	dar year (or fiscal year beginning in) ▶	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
1	Gifts, grants, contributions, and membership fees						
•	received. (Do not include any "unusual grants.")						
2	Gross receipts from admissions, merchandise sold or services performed, or facilities						
	furnished in any activity that is related to the						
	organization's tax-exempt purpose						
3	Gross receipts from activities that are not an						
	unrelated trade or business under section 513						
4	Tax revenues levied for the						
	organization's benefit and either paid						
	to or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to the						
	organization without charge						
6	Total. Add lines 1 through 5						
	Amounts included on lines 1, 2, and 3						
-	received from disqualified persons .						
b	Amounts included on lines 2 and 3						
2	received from other than disqualified						
	persons that exceed the greater of \$5,000						
	or 1% of the amount on line 13 for the year						
c	Add lines 7a and 7b						
8	Public support. (Subtract line 7c from						
_	line 6.)						
Secti	on B. Total Support						_
	dar year (or fiscal year beginning in) ▶	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
9	Amounts from line 6	(a) 2012	(2) 2010	(6) 2011	(4) 2010	(6) 2010	(i) rotar
10a	Gross income from interest, dividends,						
IVa	payments received on securities loans, rents,						
	royalties and income from similar sources .						
h	Unrelated business taxable income (less						
D	section 511 taxes) from businesses						
	acquired after June 30, 1975						
•	Add lines 10a and 10b						
11	Net income from unrelated business activities not included in line 10b, whether						
	or not the business is regularly carried on						
40							
12	Other income. Do not include gain or loss from the sale of capital assets						
	(Explain in Part VI.)						
10	Total support. (Add lines 9, 10c, 11,						
13	and 12.)						
14	First five years. If the Form 990 is for the	o organization	a's first socon	d third fourth	or fifth tax w	or as a soctio	D 501(a)(3)
14	organization, check this box and stop he	•					` ' : '
Sacti	on C. Computation of Public Suppor			<u> </u>			
15	Public support percentage for 2016 (line 8			3 column (fl)		15	%
16	Public support percentage from 2015 Sch		-			16	
	on D. Computation of Investment Inc					10	70
17	Investment income percentage for 2016 (I			v line 13 colu	mn (f))	17	%
18	Investment income percentage from 2015			-		18	——————————————————————————————————————
19a	33 ¹ / ₃ % support tests—2016. If the organi						
isa	17 is not more than 33 ¹ / ₃ %, check this box						
b	33 ¹ / ₃ % support tests—2015. If the organiz	_	=	-		_	
D	line 18 is not more than 331/3%, check this b						
20	Private foundation If the organization di	_		•			_

Part IV Supporting Organizations

(Complete only if you checked a box in line 12 on Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

			Yes	Na
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by		res	No
2	class or purpose, describe the designation. If historic and continuing relationship, explain. Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported	1		
	organization was described in section 509(a)(1) or (2).	2		
3а	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.	3a		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.	3b		
С	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.	3c		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.	4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.	4b		
С	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B)			
_	purposes.	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI , including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action			
	was accomplished (such as by amendment to the organizing document).	5a		
b	Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	5b		
С	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5с		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? <i>If "Yes," provide detail in Part VI.</i>	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with			
8	regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ). Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7?	7		
Ū	If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).	8		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.	00		
b	Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI.	9a 9b		
С	Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.	9b 9c		
10a	Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated	30		
L	supporting organizations)? If "Yes," answer 10b below.	10a		
D	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to	406		

Part I	V Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)			
	below, the governing body of a supported organization?	11a		<u> </u>
	A family member of a person described in (a) above?	11b		<u> </u>
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI .	11c		
Section	on B. Type I Supporting Organizations			I
_			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to			
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or			
	controlled the organization's activities. If the organization had more than one supported organization,			
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported			
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the approximation approach fourth a homeful of any approximation at how there the approached	-		
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? <i>If "Yes," explain in Part</i>			
	VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Section	on C. Type II Supporting Organizations			<u> </u>
Occur	on or Type in Supporting Organizations		Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors		163	140
•	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1		
Section	on D. All Type III Supporting Organizations			·
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		
Section	on E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see i	nstru	ctions	s).
а	☐ The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. <i>Complete line 3 below.</i>			
С	☐ The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see in	struct	ions).
•	Activities Test Anguar (a) and (b) below		Vaa	Na
2	Activities Test. Answer (a) and (b) below.		Yes	NO
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	2a		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more	a		
J	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the			
	reasons for the organization's position that its supported organization(s) would have engaged in these			
	activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. <i>Answer (a) and (b) below.</i>			
	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
-	trustees of each of the supported organizations? <i>Provide details in Part VI.</i>	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b		

instructions).

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Org	gani	zations	
1 Check here if the organization satisfied the Integral Part Test as a qualifying instructions. All other Type III non-functionally integrated supporting organ			
Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1 Net short-term capital gain	1		
2 Recoveries of prior-year distributions	2		
3 Other gross income (see instructions)	3		
4 Add lines 1 through 3.	4		
5 Depreciation and depletion	5		
6 Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7 Other expenses (see instructions)	7		
8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4).	8		
Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1 Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):			
a Average monthly value of securities	1a		
b Average monthly cash balances	1b		
c Fair market value of other non-exempt-use assets	1c		
d Total (add lines 1a, 1b, and 1c)	1d		
e Discount claimed for blockage or other factors (explain in detail in Part VI):			
2 Acquisition indebtedness applicable to non-exempt-use assets	2		
3 Subtract line 2 from line 1d.	3		
4 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).	4		
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6 Multiply line 5 by .035.	6		
7 Recoveries of prior-year distributions	7		
8 Minimum Asset Amount (add line 7 to line 6)	8		
Section C - Distributable Amount			Current Year
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2 Enter 85% of line 1.	2		
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4 Enter greater of line 2 or line 3.	4		
5 Income tax imposed in prior year	5		
6 Distributable Amount. Subtract line 5 from line 4, unless subject to			
emergency temporary reduction (see instructions).	6		
7 Check here if the current year is the organization's first as a non-functional	ly int	egrated Type III support	ng organization (see

Part	V Type III Non-Functionally Integrated 509(a)(3	3) Supporting Organi	zations (continued)	
Secti	on D - Distributions	,	,	Current Year
1	Amounts paid to supported organizations to accomplish	exempt purposes		
2	Amounts paid to perform activity that directly furthers exe	empt purposes of suppo	rted	
	organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purp	oses of supported orga	nizations	
4	Amounts paid to acquire exempt-use assets			
5	Qualified set-aside amounts (prior IRS approval required)			
6	Other distributions (describe in Part VI). See instructions.			
7	Total annual distributions. Add lines 1 through 6.			
8	Distributions to attentive supported organizations to whic	h the organization is res	ponsive	
	(provide details in Part VI). See instructions.			
9_	Distributable amount for 2016 from Section C, line 6			
10	Line 8 amount divided by Line 9 amount	<u> </u>		/
S	ection E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2016	(iii) Distributable Amount for 2016
1	Distributable amount for 2016 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2016 (reasonable cause required – explain in Part VI). See instructions.			
3	Excess distributions carryover, if any, to 2016:			
a				
b				
c	From 2013			
d	From 2014			
e	From 2015			
f	Total of lines 3a through e			
<u>g</u>	Applied to underdistributions of prior years			
<u>h</u>	Applied to 2016 distributable amount			
_ <u>i</u>	Carryover from 2011 not applied (see instructions)			
j_	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2016 from Section D, line 7: \$			
a	Applied to underdistributions of prior years			
b	Applied to 2016 distributable amount			
c	Remainder. Subtract lines 4a and 4b from 4.			
5	Remaining underdistributions for years prior to 2016, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions.			
6	Remaining underdistributions for 2016. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.			
7	Excess distributions carryover to 2017 . Add lines 3j and 4c.			
8	Breakdown of line 7:			
a	5 (0040			
b	Excess from 2013			
C	Excess from 2014			
d	Excess from 2015			
е	Excess from 2016			

Part VI	III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

SCHEDULE F (Form 990)

Statement of Activities Outside the United States

OMB No. 1545-0047

2016

Open to Public Inspection

Department of the Treasury Internal Revenue Service

► Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16. ► Attach to Form 990. ▶ Information about Schedule F (Form 990) and its instructions is at www.irs.gov/form990.

Name of the organization Employer identification number **SYRIA FUND INC** 47-4547136

Pari	General Information Form 990, Part IV, line		es Outside	the United States. Comp	plete if the organization ans	swered "Yes" on
1	For grantmakers. Does the assistance, the grantees' eli	organization gibility for the	e grants or as	sistance, and the selection	criteria used to award the	
	grants or assistance?					✓Yes □No
2	For grantmakers. Describe assistance outside the Unite		he organizati	on's procedures for monit	oring the use of its gran	ts and other
3	Activities per Region. (The fo	ollowing Part I	l, line 3 table o	can be duplicated if addition	nal space is needed.)	
	(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in the region	(d) Activities conducted in the region (by type) (such as, fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in the region	(f) Total expenditures for and investments in the region
(1)	Sch F, Stmt 1					
(2)	Serri, Serri					
(3)						
(4)						
(5)						
(6)						
(7)						
(8)						
(9)						
(10)						
(11)						
(12)						
(13)						
(14)						
(15)						
(16)						
(17)						
3a	Sub-total					
b	Total from continuation sheets to Part I					
С	Totals (add lines 3a and 3b)	0	10			148,184

Par				anizations or Entitieceived more than \$				nization answered "Ye	es" on Form 990,
1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)			Sch F, Stmt 2						
(2)									
(3)									
(4)									
(5)									
(6)									
(7)									
(8)									
(9)									
(10)									
(11)									
(12)									
(13)									
(14)									
(15)									
(16)									
2	by the IRS, or	for which the		ed above that are rec as provided a section ties	501(c)(3) equivale				1

Schedule F (Form 990) 2016

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 16. Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of noncash assistance	(g) Description of noncash assistance	(h) Method of valuation (book, FMV, appraisal, other)
(1)							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							
(13)							
(14)							
(15)							
(16)							
(17)							
(18)							

Schedule F (Form 990) 2016 Page 4

Part IV **Foreign Forms** Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign ✓ No ☐ Yes Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to separately file Form 3520, Annual Return To Report Transactions With Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; do not file with Form 990) . . . Yes ✓ No Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect To ✓ No Yes Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing ☐ Yes ✓ No Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships (see Instructions for Form 8865) Yes **✓** No Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see

✓ No

Yes

Schedule F (Form 990) 2016 Page **5**

Part V Supplemental Information

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information. See instructions.

Schedule F, Part I, Line 1 - TSF maintains records of grants throughout the full term of the grant from initial submission through final reporting. Periodic financial reports and updates are submitted as required per our letter of agreement and a final report is submitted upon
completion of the grant.
Schedule F, Part I, Line 2 - The Syria Fund (TSF) employs Field Officers to monitor projects on a weekly basis. Letters of Agreement are created with each of our local partners outlining the requirements of our partnerships and the reporting requirements. Receipts are provided for any purchases and frequent updates including success stories and photographs are provided. TSF team members based in the United States make frequent trips to Jordan to provide an additional layer of monitoring and evaluation. Local Jordanian charities have been
previously vetted by major aid organizations including Mercy Corps International to confirm that they do not engage in any political
activities. If The Syria Fund learns that an international partner has failed to comply or align with The Syria Fund's mission or procedures,
The Syria Fund will terminate the relationship.
······································

Schedule F, Part V, Statement 1 SYRIA FUND INC

Form: **Schedule F (2016)** EIN: **47-4547136**

Page: 1 Part I, Line 3

Accounts and Activities Outside the United States

		Offices	Employees	Total
Region	Middle East and North Africa	0	10	148,184
Activities	Program Services			
Services	Expenditures include TSF program services including: education programs and			
	humanitarian support. Individuals supported through contractual roles by The Syria Fund			
	Jordan include teachers, Field Officers and Program Administrators.			
	Total:	0	10	148,184

Schedule F, Part V, Statement 2 **SYRIA FUND INC**

Form: Schedule F (2016) EIN: 47-4547136 Part II, Line 1

Page: **2 Grants To Organization Outside US**

	Cash Grant	Non-Cash Assistance
Middle East and North Africa	10,000	0
The Middle East Children's Institute (MECI) is a 501(c)(3) registered		
organization in the United States and an International Non-Profit registered in		
Jordan. Grants provided to MECI Jordan branch were for their remedial		
education program for Syrian refugees and other vulnerable youth in Jordan.		
Funds were specifically allocated towards life skills trainings, community		
initiatives (hygiene days, garden days), education materials and salaries for two		
school counselors for 6 months each.		
Wire Transfer, Cash Disbursement		
	The Middle East Children's Institute (MECI) is a 501(c)(3) registered organization in the United States and an International Non-Profit registered in Jordan. Grants provided to MECI Jordan branch were for their remedial education program for Syrian refugees and other vulnerable youth in Jordan. Funds were specifically allocated towards life skills trainings, community initiatives (hygiene days, garden days), education materials and salaries for two school counselors for 6 months each.	Middle East and North Africa The Middle East Children's Institute (MECI) is a 501(c)(3) registered organization in the United States and an International Non-Profit registered in Jordan. Grants provided to MECI Jordan branch were for their remedial education program for Syrian refugees and other vulnerable youth in Jordan. Funds were specifically allocated towards life skills trainings, community initiatives (hygiene days, garden days), education materials and salaries for two school counselors for 6 months each.

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

OMB No. 1545-0047 2016

Department of the Treasury Internal Revenue Service

► Attach to Form 990 or 990-EZ.

Open to Public ▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990. Inspection

Employer identification number Name of the organization **SYRIA FUND INC** 47-4547136 Form 990, Part III, Line 2 - In 2016, The Syria Fund partnered with the White Hands Association and the Annenberg Foundation to create a new school for 110 students. This involved converting an existing villa into a school, purchasing all necessary supplies, hiring fulltime teachers and running academic programs including remedial education (Arabic, English, Math, Science) and extracurricular activities like music and art. The Syria Fund also launched a music program, Songs for Syrians, in 2016. We partnered with NY-based non-profit S'Cool Sounds to create an instrument-based curriculum to teach recorder, percussion and music composition to students at our Azraq School This program expanded to over 200 students in 2016. Form 990, Part VI, Section A, Line 2 - One board member of The Syria Fund is the father of the Executive Director of The Syria Fund. Two members of the board are in a domestic partnership. Form 990, Part VI, Section B, Line 11b - The Syria Fund provided its Board of Directors with copies of organization's 2016 financial statements, descriptions of program activities, and a draft 990 submission. After discussion of these documents and an opportunity to ask questions, the Board of Directors voted to approve the contents of the Form 990 prior to its submission. Form 990, Part VI, Section B, Line 12c - All board members were required to review and sign a Conflict of Interest policy. Board members are reminded to disclose any conflicts as they arise. In 2016, there were no transactions or decisions in which a board member was conflicted. Form 990, Part VI, Section B, Line 15 - The Syria Fund does not currently pay any governing members of the organization. The Executive Director and other administrative employees are all volunteers and do not accept any financial compensation Form 990, Part VI, Section C, Line 19 - The Syria Fund's governing documents and form 990 are available upon request and the form 990 is available on major websites such as Guidestar.

Schedule O, Statement 1

SYRIA FUND INC Form: Form 990 (2016) EIN: 47-4547136

Page: 2

Other Program Services Accomplishments

Part III, Line 4d

Activity Code	Description	Expense	Grants	Revenue
	The Syria Fund provided support to the Middle East Children's Institute (MECI) to enhance their academic program for Syrian refugee children and other vulnerable youth in Jordan. This support included providing academic supplies, hosting programs like hygiene days and like skills trainings, and providing salaries for two school counselors for 6 months.	10,000	10,000	0
	Travel for Program Implementation included US-based TSF team members traveling to Jordan to implement programs and provide monitoring and evaluation. Costs include airfare, hotel and other travel costs.	5,171	0	0
Total:		15,171	10,000	0