Change of Accounting Period Return of Private Foundation

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

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

Go to what its gov/Form990PF for instructions and the latest information.

OMB No. 1545-0052

			rs.gov/FormissoPF for insu		NOV 30, 2018	Open to I delle integerior
		undation	., 201.	,	A Employer identification	number
IVat	116 01 106	unuanon				
Ka	ıtz Am	sterdam Foundation			83-0748664	
Nun	ber and s	street (or P.O. box number if mail is not delivered to street	address)	Room/suite	B Telephone number	
22	255 Sh	neridan Boulevard		Unit C	303-284-4932	
City	or town	n, state or province, country, and ZIP or foreign p	ostal code		G if exemption application is pe	nding, check here
E	lgewat	cer, CO 80214				, [
G C	heck all	that apply: X Initial return	Initial return of a fo	rmer public charity	D 1. Foreign organizations.	, check here
		Final return	Amended return		Foreign organizations mee check here and attach cor	eting the 85% test,
		Address change	Name change		1	
H C		pe of organization: X Section 501(c)(3) ex		tion	E If private foundation stat under section 507(b)(1)	
<u></u>		on 4947(a)(1) nonexempt charitable trust et value of all assets at end of year J Accounti		Accrual	1	
			her (specify)	Accida	F If the foundation is in a 6 under section 507(b)(1)((B), check here
(II		52 435 (Part I, colun	nn (d) must be on cash basi	s.)	under because our (b)(1)	(4), 0
P	rt II A		(a) Revenue and	(b) Net investment	(c) Adjusted net	(d) Disbursements for charitable purposes
L. 4 0.4	(T	Analysis of Revenue and Expenses The total of amounts in columns (b), (c), and (d) may not ecessarily equal the amounts in column (a).)	expenses per books	income	income	(cash basis only)
		ontributions, gifts, grants, etc., received	100,000.	A CONTROL OF THE CONT		
	2 Ch	neck if the foundation is not required to attach Sch. B			A Company of the Comp	
	3 Inte	terest on savings and temporary ish investments	13.	13.	13.	
		vidends and interest from securities				
		ross rents				
		et rental income or (loss)				
ē	6a Ne' ⊾ Gro	et gain or (loss) from sale of assets not on line 10 oss sales price for all sets on line 6a			Control of the contro	
Revenue		sets on line 6a spital gain net income (from Part IV, line 2)		0.		
æ		et short-term capital gain			0.	
	10a Gro	come modifications cos sales less returns id allowances				
		ess: Cost of goods sold			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
	c Gr	ross profit or (loss)				
		ther income		13.	13.	
	_	otal, Add lines 1 through 11	100,013. 24,231.	0.	0.	24,231.
	1	ompensation of officers, directors, trustees, etc ther employee salaries and wages	24,231,			
		ension plans, employee benefits	1,947.	0.	0.	1,947.
es		egal fees Stmt 1	16,745.	0.	0.	16,745.
ens		counting fees				
Administrative Expenses		ther professional fees				
ķ		terest				
rati	L	axes				
nisi	i .	epreciation and depletion				
Ē		ccupancy	207.	0.	0.	207.
Ϋ́		ravel, conferences, and meetings	207.	0.		
and a		rinting and publications ther expenses Stmt 2	4,448.	13.	13.	4,435.
Operating		otal operating and administrative	-,			
era		xpenses. Add lines 13 through 23	47,578.	13.	. 13.	47,565.
Ö		ontributions, gifts, grants paid	0.			0,
	2	otal expenses and disbursements.				
		dd lines 24 and 25	47,578.	13.	. 13.	47,565.
	27 St	ubtract line 26 from line 12;				
		ccess of revenue over expenses and disbursements	52,435.	0		
		et investment income (if negative, enter -0-)			0.	
		DURANT BOLLDBOOK Site and the contex ()	 **** ********************************	 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -		- · · · · · · · · · · · · · · · · · · ·

P	art	Balance Sheets Atlached schedules and amounts in the description caluma should be for end of year amounts only	Beginning or year		or year
		Solomi should de la charanta only.	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing		52,435.	52,435.
	2				
	3				
		Less: allowance for doubtful accounts			
	4	Pledges receivable			
		Less; allowance for doubtful accounts			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
	_	disqualified persons			
	7	Other notes and loans receivable			
		Less: allowance for doubtful accounts			
ets	8	Inventories for sale or use			
Assets		Prepaid expenses and deferred charges			
•		Investments - U.S. and state government obligations			
		Investments - corporate stock		·	
		Investments - corporate bonds	Toger, plantone opport of trade or of particular to the form		
	11	Investments - łand, buildings, and equipment: basis			
		Less: accumulated depreciation			
		Investments - mortgage loans			
	13	Investments - other			
	14	Land, buildings, and equipment; basis			
		Less: accumulated depreciation			
		Other assets (describe			
	16	Total assets (to be completed by all filers - see the			
		instructions. Also, see page 1, item I)	0.	52,435.	52,435.
		Accounts payable and accrued expenses			
	18	Grants payable			
es		Deferred revenue			
Liabilities		Loans from officers, directors, trustees, and other disqualified persons			
9	21	Mortgages and other notes payable			
_	22	Other liabilities (describe)			
	00	T-A-1 19-1-198 7 1-1 19		0	
	23	Total liabilities (add lines 17 through 22)	0.	0.	
		Foundations that follow SFAS 117, check here			
es	0.4	and complete lines 24 through 26, and lines 30 and 31.			
uce.		Unrestricted			
_		Temporarily restricted			
d B	26	Permanently restricted			The state of the s
5		Foundations that do not follow SFAS 117, check here > X			
		and complete lines 27 through 31.			
şţ		Capital stock, trust principal, or current funds	0.	0.	
Net Assets or	28	Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.	
¥		Retained earnings, accumulated income, endowment, or other funds	0.	52,435.	
ž	30	Total net assets or fund balances	0.	52,435.	
		W. 19 1991		F0 40F	
	31	Total liabilities and net assets/fund balances	0.	52,435.	
P	art	Analysis of Changes in Net Assets or Fund B	alances		
1	otai	net assets or fund balances at beginning of year - Part II, column (a), line	30		
		t agree with end-of-year figure reported on prior year's return)		1	0.
		1.5 17 1.7 1.7			52,435.
					0.
					52,435.
		ines 1, 2, and 3eases not included in line 2 (itemize) >		5	0.
		net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	olumn (b), line 30		52,435.

Form 990-PF (2017)

The organization of the control of t		sses for Tax on Ir) of property sold (for exa			(b) 1	How acquired	(c) Date ac	quired	(d) Date sold
2-story brick warehouse; or common stock, 200 shs. MLC Co.)					Ь	- Purchase - Donation	(mo., day	/, yr.)	(mo., day, yr.)
1a									
b NON	1E								
<u> </u>									
<u>d</u>									
8	(4) [larvariation allowed	(a) Co	est or other basis	<u> </u>		/h) Cair	n or (loss)	
(e) Gross sales price	(1)	epreciation allowed (or allowable)		expense of sale			((e) plus (f) minus (g))
a									
<u>b</u>					-				
c d					\dashv				
9									
Complete only for assets showi	ng gain in c	column (h) and owned by	the foundatio	n on 12/31/69.			(1) Gains (Col	, (h) gain	minus
	-	i) Adjusted basis		xcess of col. (i)		C	ol. (k), but no	t less thar	1 -0-) or
(i) FMV as of 12/31/69		as of 12/31/69		r col. (j), if any			Losses (fi	rom col. (n))
ā									
b									
C									
d									
e						1			
		∫ If gain, also ente	r in Part I, line	7	λ	_			
Capital gain net income or (net ca	apital loss)	(lf (loss), enter -0	- in Part I, line	a 7	.]]	2			
Net short-term capital gain or (lo	ss) as defir	ied in sections 1222(5) ar	nd (6):		٦				
If gain, also enter in Part I, line 8,									
If (loss), enter -0- in Part I, line 8 Part V Qualification U	landar C	4040/-\	Dadwaa	J Toy on Not		3	100mo		
							ICOINC		N/A
For optional use by domestic privat	e toundatio	ns subject to the section	4940(a) tax o	n net investment ir	COHIL	i.)			N/A
section 4940(d)(2) applies, leave t	his part bla	nk,							
Vas the foundation liable for the sec	tion 4942 t	ay on the distributable an	nount of any v	ear in the hase per	riod?				Yes No
"Yes," the foundation doesn't quali									
Enter the appropriate amount in					ntries	3.			
Dana pariod years	Ī	(b)			(c)			Distrib	(d) ution ratio
Base periód years Calendar year (or tax year beginn	ing in)	Adjusted qualifying dis	tributions	Net value of no	ncha	ritable-use asse	ts (c		ided by col. (c))
2016									
2015									
2014									
2013									
2012									
Total of line 1, column (d)	********						2		
Average distribution ratio for the									
the foundation has been in existe	nce if less	than 5 years					3		
~		1 (0047 (D LV	1) F				4		
Enter the net value of noncharital	ble-use ass	ets for 2017 from Part X,	iine 5		. ,		··· *		
							5		
Multiply line 4 by line 3		***************************************		************					
Enter 1% of net investment incor	me (1% of F	Part I, line 27b)		,,		,,,,,	6		
	·								
Add lines 5 and 6		***************************************					7		
Enter qualifying distributions from							8		
If line 8 is equal to or greater that See the Part VI instructions.	n line 7, che	eck the box in Part VI, line	th, and com	plete that part usin	g a 1'	% tax rate.			

Form 990-PF (2017) Katz Amsterdam Foundation 83-0748664 Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see instructions) 1a Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1. Date of ruling or determination letter: (attach copy of letter if necessary-see instructions) b Domestic foundations that meet the section 4940(e) requirements in Part V, check here 🕨 🔲 and enter 1% 1 of Part I, line 27b c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations, enter 4% of Part I, line 12, col. (b). 2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-) 0. 0. 3 Add lines 1 and 2 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-) 4 0. 5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-Ο, 6 Credits/Payments: a 2017 estimated tax payments and 2016 overpayment credited to 2017 b Exempt foreign organizations - tax withheld at source 0. c Tax paid with application for extension of time to file (Form 8868) 0. d Backup withholding erroneously withheld 6d 7 Total credits and payments. Add lines 6a through 6d
8 Enter any penalty for underpayment of estimated tax. Check here _____ if Form 2220 is attached 0. 9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed 0. 10 Overpayment. If fine 7 is more than the total of lines 5 and 8, enter the amount overpaid 10 11 Enter the amount of line 10 to be: Credited to 2018 estimated tax 11 Part VII-A Statements Regarding Activities Yes No 1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in 1a Х any political campaign? 1b b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities. c Did the foundation file Form 1120-POL for this year? X 10 d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year. (1) On the foundation. ▶ \$ 0. (2) On foundation managers. ▶ \$ e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. > \$ 0. 2 2 Has the foundation engaged in any activities that have not previously been reported to the IRS? If "Yes," attach a detailed description of the activities. Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes Stmt 5 3 4a Did the foundation have unrelated business gross income of \$1,000 or more during the year? 4b b If "Yes," has it filed a tax return on Form 990-T for this year?

N/A Х 5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? If "Yes." attach the statement required by General Instruction T. Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: . By language in the governing instrument, or By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument? 7 Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV X

8a Enter the states to which the foundation reports or with which it is registered. See instructions.

b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)

of each state as required by General Instruction G? If "No," attach explanation Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar

year 2017 or the tax year beginning in 2017? See the instructions for Part XIV. If "Yes," complete Part XIV

10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses Stmt. 3 Form 990-PF (2017)

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Pá	Int VII-A Statements Regarding Activities (continued)			
		1000	Yes	No
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of	l		۱.,
	section 512(b)(13)? If "Yes," attach schedule. See instructions	11		X X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges?			۱
	If "Yes," attach statement. See instructions	12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Х	
	Website address N/A			
14	The books are in care of ► The Foundation Telephone no. ►303-284-			
	Located at ▶ 2255 Sheridan Boulevard, No. Unit C, Edgewater, CO ZIP+4 ▶80			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here			ـــــا ٬
	and enter the amount of tax-exempt interest received or accrued during the year 15	N	/A	
16	At any time during calendar year 2017, did the foundation have an interest in or a signature or other authority over a bank,	<u> </u>	Yes	
	securities, or other financial account in a foreign country?	16		Х
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the	2000 A.A.		
	foreign country	Attraction.		
Pa	rt VII-B Statements Regarding Activities for Which Form 4720 May Be Required	1344.37	W	NI-
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1a	During the year, did the foundation (either directly or indirectly):			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)	2 (2 (2 (2 (2 (2 (2 (2 (2 (2 (2 (2 (2 (2		
	a disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?			
	(5) Transfer any income or assets to a disqualified person (or make any of either available	New York		
	for the benefit or use of a disqualified person)?			
	(6) Agree to pay money or property to a government official? (Exception. Check "No"	100 A 750		
	if the foundation agreed to make a grant to or to employ the official for a period after	1000000		
	termination of government service, if terminating within 90 days.)	100 Maria		
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations	40000	9899EE	
	section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions	1b	1 (Table 80)	X
	Organizations relying on a current notice regarding disaster assistance, check here			
C	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected	100 Ch (100 Ch)		
	before the first day of the tax year beginning in 2017?	10	2550 23.550	X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation			
	defined in section 4942(j)(3) or 4942(j)(5)):			
а	At the end of tax year 2017, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning			
	before 2017? Yes X No			
	If "Yes," list the years , , , , ,			100000000000000000000000000000000000000
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect	3846578457		
	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach	O.L		
	statement - see instructions.) N/A	2b		vi site 1: i.i.
C	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			
	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			
3a				
	during the job :			
b	If "Yes," did it have excess business holdings in 2017 as a result of (1) any purchase by the foundation or disqualified persons after			
	May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose			
	of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C,	9h		The state of
	Form 4720, to determine if the foundation had excess business holdings in 2017.) N/A	3b 4a		x
4 a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	44		
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that	4b	1-44-4:0	x
	had not been removed from jeopardy before the first day of the tax year beginning in 2017?	1 40		<u> </u>

Pan VIEB Statements Regarding Activities for Which i	orm 4/20 May be h	sequirea (contini	uea)	<u> </u>	\	<u> </u>	
5a During the year, did the foundation pay or incur any amount to:					Yes	<u>No</u>	
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	ı 4945(e))?		s X No				
(2) Influence the outcome of any specific public election (see section 4955); o			<u> </u>				
any voter registration drive?			s X No				
(3) Provide a grant to an individual for travel, study, or other similar purposes?							
(4) Provide a grant to an organization other than a charitable, etc., organization	n described in section						
4945(d)(4)(A)? See instructions	.,,,,,	∠ Υε	es 🗶 No				
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or fo	or					
the prevention of cruelty to children or animals?		Ye	es 🗶 No				
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und						465.64	
section 53.4945 or in a current notice regarding disaster assistance? See instru	uctions		N/A	5b	223 2 102 00300	January or or	
Organizations relying on a current notice regarding disaster assistance, check I	nere		▶□□				
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption for	om the tax because it maintai	ned			Est Mais		
expenditure responsibility for the grant?	N,	/A Ye	es L No				
If "Yes," attach the statement required by Regulations section 53.4945-5(d).						2455451 2455451	
6a Did the foundation, during the year, receive any funds, directly or indirectly, to							
a personal benefit contract?		Ye	es 🗓 No 📗	This	Three Are		
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal benefit contract?			6b		X	
If "Yes" to 6b, file Form 8870.							
7a At any time during the tax year, was the foundation a party to a prohibited tax s	helter transaction?	\ Ye	s X No			90000000	
b If "Yes," did the foundation receive any proceeds or have any net income attribu	rtable to the transaction?		N/A	7b			
Part VIII Information About Officers, Directors, Trust Paid Employees, and Contractors	ees, Foundation Ma	nagers, Highly	<i>,</i>				
l List all officers, directors, trustees, and foundation managers and t	heir compensation.						
(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	a	(e) Expo ecount, allowar	ense other ices	
Robert Katz	President and Treas	rer		T			
255 Sheridan Blvd., Unit C							
Edgewater, CO 80214	3.00	0.	0			0.	
lana Amsterdam	Secretary						
255 Sheridan Blvd., Unit C							
Odgewater, CO 80214	1.00	0.	0			0.	
Seth Ganz	Executive Director						
255 Sheridan Blvd., Unit C							
dgewater, CO 80214	40.00	24,231.	0			0.	
				-			
2 Compensation of five highest-paid employees (other than those inc		enter "NONE."					
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	i a	(e) Expi ecount, allowar	ense other ices	
I/A							
	0.00	0.	0	<u>. </u>		0.	
Total number of other employees paid over \$50,000	44444					0	
			For	ո 990)-PF	(2017)	

3 Five highest-paid independent contractors for professional services. If none, enter "N	ONE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
N/A		
		0.
Total number of others receiving over \$50,000 for professional services		•
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical number of organizations and other beneficiaries served, conferences convened, research papers produce	information such as the d, etc.	Expenses
1		
See Statement 4		47,565.
2		
3		
Part IX-B Summary of Program-Related Investments		
Describe the two largest program-related investments made by the foundation during the tax year on lines	s 1 and 2.	Amount
1 N/A		
2		
All other program-related investments. See instructions.		
3		
Total. Add lines 1 through 3	<u> </u>	0.

Part X Minimum Investment Return (All domestic foundations must complete this part. F	Foreign foundations, see in	istructions.)
1 Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
Average monthly fair market value of securities	1a	0.
b Average of monthly cash balances	1b	18,115.
c Fair market value of all other assets	1c	
d Total (add lines 1a, b, and c)	1d	18,115.
e Reduction claimed for blockage or other factors reported on lines 1a and		
1c (attach detailed explanation) 1e	0,	
2 Acquisition indebtedness applicable to line 1 assets	2	0.
3 Subtract line 2 from line 1d	3	18,115.
4 Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	272.
Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4		17,843.
Minimum Investment return. Enter 5% of line 5		892.
Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating for foreign organizations, check here x and do not complete this part.)	ındations and certain	
Minimum investment return from Part X, line 6	1	
2a Tax on investment income for 2017 from Part VI, line 52a	The second secon	
b Income tax for 2017. (This does not include the tax from Part VI.) 2b		
c Add lines 2a and 2b	2c	
B Distributable amount before adjustments. Subtract line 2c from line 1	3	
Recoveries of amounts treated as qualifying distributions		
5 Add lines 3 and 4		
Deduction from distributable amount (see instructions)	6	
Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1		
Part XII Qualifying Distributions (see instructions)	7	
Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:	1143605	
a Expenses, contributions, gifts, etc total from Part 1, column (d), line 26	1a	47,565.
b Program-related investments - total from Part IX-B		0.
Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes		
Amounts set aside for specific charitable projects that satisfy the:	**************************************	
a Suitability test (prior IRS approval required)	3a	
b Cash distribution test (attach the required schedule)		
Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8; and Part XIII, line 4		47,565.
Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		-
income. Enter 1% of Part I, line 27b	5	0.
Adjusted qualifying distributions. Subtract line 5 from line 4		47,565.
Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the		ction

Form **990-PF** (2017)

4940(e) reduction of tax in those years.

	(a)	(b)	(c) 2016	(d) 2017
4 Distributable and seek 500 200 1200 1200	Corpus	Years prior to 2016	2010	2017
1 Distributable amount for 2017 from Part XI, line 7				
2 Undistributed income, if any, as of the end of 2017:				
a Enter amount for 2016 only				The second secon
b Total for prior years:				
, ,				
Excess distributions carryover, if any, to 2017:				
a From 2012				
b From 2013				
c From 2014				
d From 2015		1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	Name and the second	
e From 2016				
f Total of lines 3a through e	anala winang malayan ana ana ang ang ang ang ang ang ang a			
Qualifying distributions for 2017 from				
Part XII, line 4: ►\$				
a Applied to 2016, but not more than line 2a		And the second s	many and have the recent containing and analysis and	
b Applied to undistributed income of prior				
years (Election required - see instructions)				
c Treated as distributions out of corpus				
(Election required - see instructions)				
d Applied to 2017 distributable amount e Remaining amount distributed out of corpus				
!				<u> </u>
Excess distributions carryover applied to 2017 (If an amount appears in column (d), the same amount must be shown in column (a).)				
Enter the net total of each column as				
indicated below:				
& Corpus. Add lines 3f, 4c, and 4e. Subtract line 5				
b Prior years' undistributed income. Subtract				
line 4b from line 2b				
c Enter the amount of prior years'				
undistributed income for which a notice of				
deficiency has been issued, or on which the section 4942(a) tax has been previously				
assessed				
d Subtract line 6c from line 6b. Taxable				
amount - see instructions				
e Undistributed income for 2016. Subtract line				
4a from line 2a. Taxable amount - see instr.				
f Undistributed income for 2017. Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2018				
Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3) (Election				
may be required - see instructions)				
Excess distributions carryover from 2012				
•				
not applied on line 5 or line 7				
Excess distributions carryover to 2018.				
Subtract lines 7 and 8 from line 6a				
Analysis of line 9:				
a Excess from 2013				
b Excess from 2014				
c Excess from 2015				
d Excess from 2016				
e Excess from 2017				

Part XIV Private Operating Fo	oundations (see inst	ructions and Part VII-	A, question 9)		
1 a If the foundation has received a ruling or					
foundation, and the ruling is effective for	2017, enter the date of the	ruling			
b Check box to indicate whether the found	ation is a private operating	foundation described in		4942(j)(3) or 49	42(j)(5)
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years	7.000-7	/-\ T -4-1
income from Part I or the minimum	(a) 2017	(b) 2016	(c) 2015	(d) 2014	(e) Total
investment return from Part X for					
each year listed	0.	0.	0.	0.	0.
b 85% of line 2a	0.	0.	0,	0.	0.
c Qualifying distributions from Part XII,					
line 4 for each year listed	47,565.	0.	0.	0.	47,565.
d Amounts included in line 2c not					
used directly for active conduct of					
exempt activities	0.	0.	0.	0.	0.
e Qualifying distributions made directly					
for active conduct of exempt activities.					4-
Subtract line 2d from line 2c	47,565.	0.	0.	0.	47,565.
3 Complete 3a, b, or c for the alternative test relied upon:					
a "Assets" alternative test - enter:					_
(1) Value of all assets					0.
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					0.
b "Endowment" alternative test - enter					
2/3 of minimum investment return shown in Part X, line 6 for each year					
listed	595.	0.	0.	0.	595.
c "Support" alternative test - enter;					
(1) Total support other than gross					
investment income (interest, dividends, rents, payments on					
securities loans (section					0
512(a)(5)), or royalties)					0.
(2) Support from general public					
and 5 or more exempt organizations as provided in					
section 4942(j)(3)(B)(iii)					0.
(3) Largest amount of support from					٥
an exempt organization					0.
(4) Gross investment income	1: (01-1		t the ferredation	had \$5 000 ar me	
Part XV Supplementary Information at any time during the	rmation (Complete	e this part only i	rtne roundation	nau po,uuu or mi	ne in assers
		ictions.)			
1 Information Regarding Foundation	n Managers:	00/ -511 1-1-1	hutions received by the f	oundation before the clos	on of any tay
a List any managers of the foundation who year (but only if they have contributed m	o nave contributed more th fore than \$5 AAA) (See sec	an 2% of the lotal contri tion 507(d)(2).)	nations received by the i	Dalitanon before the clos	G Ut ally IGA
, , , , ,	1016 than 40,000). (000 300	111011 001 (u)(E).)			
Robert Katz	4001	-t1t	y an aqually large portion	a of the awarrahin of a na	ortnerchin or
b List any managers of the foundation who other entity) of which the foundation has	own 10% or more of the a 10% or greater interest.	Stock of a corporation (c	ii an equally large portion	Of the ownership of a po	ուսություն ու
· · ·	of 1070 or ground interest				
None	0	Sabalawahin ata Dua	a divolated		
2 Information Regarding Contribution Check here ► X if the foundation of	on, Grant, Giπ, Loan, S	ocnolarship, etc., ert precelected charitable o	ranizations and does no	nt accent unsolicited requ	ests for funds. If
the foundation makes gifts, grants, etc.,	my makes commountins to to individuals or organizati	presenected charnable o ons under other conditio	ns, complete items 2a, b	, c, and d.	0010 101 1011007 11
a The name, address, and telephone numb					
a The name, address, and telephone humb	TEL OF CHIMIN WOULGS? OF ME	bergon to whom abbuca	tions stodio pe addiess.		
b The form in which applications should b	a committed and information	n and materials they sho	nild judinde.		
to the torm in which applications should be	ธ อนมากแรน สถน แสนาสเสนเน	ы шы пацыкша аку экч	JOSE HIUSUUV.		
c Any submission deadlines:					
e Any seumosion ocacinics.					
d Any restrictions or limitations on awards	, such as by geographical	areas, charitable fields, k	inds of institutions, or o	ther factors:	

83-0748664

reserved outpromontary information				
3 Grants and Contributions Paid During the	Year or Approved for Future	Payment		
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	status of recipient	COntribution	Allount
a Paid during the year				
None				
			111 111	
Total			> 3a	0.
total b Approved for future payment				~ .
• Approved for ratare payment				
None				
Total			lb⇒ 3h	0

Part XVI-A Analysis of Income-Producing Activities

	Unrela	ted business income	Cycle	uded by section 512, 513, or 514	
Enter gross amounts unless otherwise indicated.	(a) Business	(b) Amount	(C) Exclu- sion	(d) Amount	(e) Related or exempt function income
1 Program service revenue:	code	Airiguitt	code	Amount	Tancton income
a					
υ			<u> </u>		
d					
9			1		
f			 		
g Fees and contracts from government agencies			-		
2 Membership dues and assessments			1		
3 Interest on savings and temporary cash	****		\vdash		
investments			14	13	
4 Dividends and interest from securities	****				
5 Net rental income or (loss) from real estate;					
a Debt-financed property				The second of th	
b Not debt-financed property					
6 Net rental income or (loss) from personal					
property					
7 Other investment income					"
8 Gain or (loss) from sales of assets other	***		<u> </u>		
than inventory					
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue:					
a					
b					
C					
d					
e	_				
12 Subtotal. Add columns (b), (d), and (e)			20200	13.	0.
13 Total. Add line 12, columns (b), (d), and (e)			• • • • • • • • •	13	13.
See worksheet in line 13 instructions to verify calculations.)				
Part XVI-B Relationship of Activities	s to the Acc	omplishment of Ex	emp	t Purposes	
Line No. Explain below how each activity for which in the foundation's exempt purposes (other the			contrib	outed importantly to the accor	nplishment of
the foundation's exempt purposes (other th	an by providing to	mus ioi sadii pimposes).			
					 -

Form 990-PF (2017)

Part XVII	Information Regarding	Transfers to and Transactions and Relationships With Noncha	ritable
	Exempt Organizations		

68	1 Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) Yes No								NIO	
1	Did the organization directly or indirectly engage in any of the following with any other organization					n described in section 501(c)			162	INO
	(other than section 501(c)(3) organizations) or in section 527, relating to political organizations?									
a	Transfers from the reporting foundation to a noncharitable exempt organization of:									
	(1) Cash							1a(1)		X
	(2) Other	assets						1a(2)		X
b	Other tran	sactions:								
	(1) Sales	of assets to a noncharital	ble exempt organizat	ion				1b(1)		X
	(2) Purch	ases of assets from a nor	ncharitable exempt o	rganization				1b(2)		Х
	(3) Renta	l of facilities, equipment, o	or other assets					1b(3)		Х
								1b(4)		Х
	5.5							1b(5)		Х
					ns			1b(6)		Х
C					ployees			1c		Х
d	If the ansy	ver to any of the above is '	"Yes," complete the f	ollowing sche	dule. Column (b) should alv	ways show the fair m	arket value of the goods, ot	her ass	sets,	
200	or service	s given by the reporting fo	oundation. If the four	ndation receive	ed less than fair market valu	e in any transaction	or sharing arrangement, sh	ow in		
) the value of the goods, (- 5				
(a)L		(b) Amount involved			exempt organization	(d) Description	of transfers, transactions, and sh	aring ar	rangeme	ents
1-7-	3.00.130.22	V-7:		N/A						
				-1,7-1						
						_				
2a	Is the four	dation directly or indirect	tly affiliated with, or r	elated to, one	or more tax-exempt organi	zations described		4	_	
								Yes	Х	No
in section 501(c) (other than section 501(c)(3)) or in section 527? b If "Yes," complete the following schedule.										
-	(a) Name of organization (b) Type of organization					(c) Description of relationshi	р			
		N/A								
	Under	penalties of periury. I declare t	that I have examined this	s return, includin	I g accompanying schedules and	statements, and to the	best of my knowledge	the IDC	discuss	this
Si	and he	and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.					with th	e prepa	rer	
He		3/4/19 Treasurer X					100000000000000000000000000000000000000	? See in	No	
110		enture of officer or trustee	1 Cla		Data	Title	·	1 168		_ NO
	Sigr	ature of officer or trustee		Dropgrania	Date		Check if PTIN			
		Print/Type preparer's name Preparer's signature Date				self- employed				
_				manie	, nuntego	2/26/19	6 (52	C 2 0 0 F	ı.	
Pa		Maria Montoya			0		P013	03907		
Preparer Use Only		Firm's name ▶ Kundi	inger, Corder	& Engle P	.C.		Firm's EIN ▶			
		Firm's address ▶ 475 Lincoln Street, Suite 200					1000	150		
Denver, CO 80203							Phone no. (303) 534			
_							For	m 99	0-PF	(2017)

Schedule B

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

Department of the Treasury Internal Revenue Service

Schedule of Contributors

Attach to Form 990, Form 990-EZ, or Form 990-PF.
 Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2017

Employer identification number Name of the organization 83-0748664 Katz Amsterdam 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 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** 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. 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) (2017)

Name of organization

Employer identification number

Katz Amsterdam Foundation

83-0748664

Part I	Contributors (see instructions). Use duplicate copies of Part I if addition	al space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	Robert Katz 2255 Sheridan Boulevard, Unit C Edgewater, CO 80214	\$100,000.	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 Oncash 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 Oncash Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
-		\$	Person Payroll Oncash Complete Part II for noncash contributions.)

Schedule B (Form 990, 990·EZ, or 990·PF) (2017) Name of organization

Employer identification number

Katz Amsterdam Foundation

83-0748664

, , , , , , , , , , , , , , , , , , ,	art II if additional space is needed.	
(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
	\$	
(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
	(b) Description of noncash property given (b) Description of noncash property given	(b) Description of noncash property given (c) FMV (or estimate) (See instructions.) (b) Description of noncash property given (c) FMV (or estimate) (See instructions.) (c) FMV (or estimate) (See instructions.) (d) FMV (or estimate) (See instructions.) (e) FMV (or estimate) (See instructions.) (f) FMV (or estimate) (See instructions.) (h) Description of noncash property given (c) FMV (or estimate) (See instructions.) (c) FMV (or estimate) (See instructions.)

Name of orga	inization		Employer identification number					
Katz Amst	erdam Foundation		83-0748664					
Part III	Exclusively religious, charitable, etc., contri- the year from any one contributor. Complete co- completing Part III, enter the total of exclusively religious, Use duplicate copies of Part III if additional	lumns (a) through (e) and the folio charitable, etc., contributions of \$1,000 o	I in section 501(c)(/), (8), or (10) that total more than \$1,000 for wing line entry. For organizations					
(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	1 ZIP + 4	Relationship of transferor to transferee					
(a) No. from Part I	(b) Purpose of gift (c) Use of		(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.								
(a) No. from Part I	(b) Purpose of gift (c) Use of		(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, and	ZIP + 4	Relationship of transferor to transferee					