

**Image Deposit Items Detail Report - Customer: Johns Hopkins University,  
Deposit: 047512****Report Settings****Sort Criteria:** Sequence**Filtered Fields:****Amount/Item Totals****Total Number of Items:** 1**Total Amount of Deposit:** \$ 50,000.00 USD**Report Details****Location:** 9507 Development**Status:** Received**Account Number:** 970339507 - Development Office**Transferred by:** U0058016**Assigned to:** U0058016**Sent Date and Time:** Mar 31, 2020 03:36 PM**Create Date and Time:** Mar 31, 2020 03:36 PM**Received Date and Time:** Mar 31, 2020 03:36 PM

| Sequence | Item Type      | Serial | Routing Transit | Account | T/C | Amount (\$) |
|----------|----------------|--------|-----------------|---------|-----|-------------|
| 1        | Business Check | 009710 | 021000089       |         |     | 50,000.00   |

ATRAN FOUNDATION INC.

155 North Dean Street  
Suite 3D  
Englewood, NJ 07631  
Tel: (201) 569-9677  
Fax: (201) 569-2290

March 9, 2020

Ms. Monica Butta  
Dept. of Medicine Development Office  
Fund for Johns Hopkins Medicine  
5200 Eastern Avenue  
MFL Center Tower, Suite 354  
Baltimore, MD 21224-2735

Dear Monica:

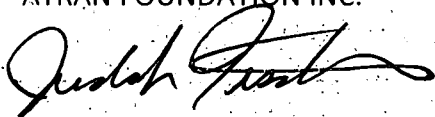
The Atran Foundation is pleased to inform you that at our annual Board of Directors and Members meeting held in January 2020, a grant in the amount of \$50,000 was awarded to The Johns Hopkins University in support of The Atran Foundation-Johns Hopkins Program for Crohn's Disease Genetics Research in Ashkenazi Jews. Please find our enclosed check for the stated amount.

Please note that our yearly deadline to receive grant requests and reports is September 30<sup>th</sup>. Prior to that deadline it will be necessary to provide the Atran Foundation with a brief narrative on the work supported by our funding along with a written request for continued support if so desired. The Foundation will not consider any new funding allocation without a timely request and report.

The Atran Foundation is pleased to be a part of the IBD Center's important research efforts and we look forward to your report.

Formal acknowledgment of receipt of our check is required.

Sincerely,  
ATRAN FOUNDATION INC.



Judah Fischer  
Executive Director

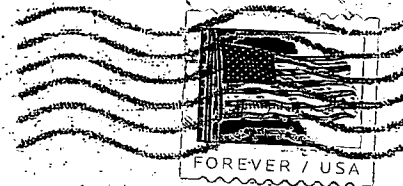
Enclosure

ATRAN FOUNDATION INC.

155 North Dean Street, Suite 3D  
Englewood, NJ 07631

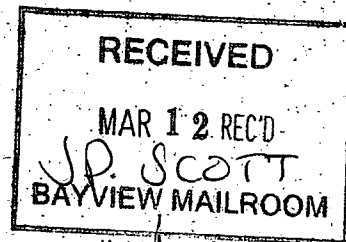
DR DANIELS MD MD

10 MAR 2020 PM 10:11



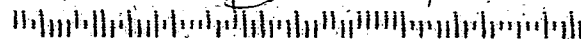
RECEIVED  
MAR 3 11 2020

Ms. Monica Butta  
Dept. of Medicine Development Office  
Fund for Johns Hopkins Medicine  
5200 Eastern Avenue  
MFL Center Tower, Suite 354  
Baltimore, MD 21224-2735



DOM

21224-274075



CASH ONLY IF ALL CheckLock™ SECURITY FEATURES LISTED ON BACK INDICATE NO TAMPERING OR COPYING

ATRAN FOUNDATION INC.  
155 N. DEAN ST. SUITE 3D  
ENGLEWOOD, NJ 07631-2532  
(201) 569-9677

CITIBANK, N.A.  
ENGLEWOOD, NJ 07631  
01-008/210

9710

3/9/2020

PAY TO THE  
ORDER OF

The Johns Hopkins University

\$ \*\*50,000.00

Fifty Thousand and 00/100\*\*\*\*\*

DOLLARS

PROTECTED AGAINST FRAUD

The Johns Hopkins University  
5200 Eastern Avenue  
MFL Center Tower, Suite 354  
Baltimore, MD 21224-2735

MEMO

2020 Grant for Atran-JH Program in Crohn's Resear

Details on Back  
Inkjet CheckLock™ Secure Check

THE JOHNS HOPKINS INSTITUTIONS GIFT ADVICE FORM  
\*\*CONFIDENTIAL\*\*

Entry Date: 03/31/2020  
Given By: 00313651 Atran Foundation, Inc.  
Receipt Address: Atran Foundation, Inc.  
  
c/o Ms. Diane Fischer, President  
155 N Dean St #3D  
Englewood, New Jersey 07631-2532  
  
Appeal:  
Batch ID: 423342 Batch Auto Pay: N  
Entered: JPEKOSZ1 03/31/2020  
Modified:  
Deposit Date: 03/31/2020  
Receipt Text:  
Notes:

Gift Id: G-20064368  
  
Credited Date: 03/10/2020 Auto Pay: N  
Trans. Amount: 50,000.00  
NonDeduct. Amount: 0.00  
NonDeduct. Item:  
Gross Amount: 50,000.00  
Transaction Type: Gift  
Planned Gift Type:  
Char. Deduct. Amt:  
Pay Out Ratio:  
Payment Method: Cash/Check  
Check#: 9710  
CC Trans ID/CC Apprv:  
Assignment ID: R47512  
Non-Cash Descr.:  
Security Proceeds:



| <u>Dst</u> | <u>Amount</u> | <u>BENT</u> | <u>DOFF</u> | <u>Fund</u> | <u>Description</u> | <u>Cost Object</u> | <u>Description</u>         | <u>GLAC</u> | <u>Purp</u> | <u>Use</u> | <u>Use Rt</u> | <u>Camp</u> | <u>Perm</u> | <u>AG Pledge ID</u> | <u>Dst</u> | <u>Split</u> | <u>Prop ID</u> |
|------------|---------------|-------------|-------------|-------------|--------------------|--------------------|----------------------------|-------------|-------------|------------|---------------|-------------|-------------|---------------------|------------|--------------|----------------|
| 1          | 50,000.00     | JHU         | DEPM        | 1317000001  | Designated         | 80041372           | Atran Foundation Gift Fund | 430100      | U           | 1          | D             |             | N           | Y                   |            |              |                |

Entered: JPEKOSZ1 03/31/2020 Modified:

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DEVI USE ONLY

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VERIFIED BY: \_\_\_\_\_ APPROVED BY: \_\_\_\_\_

G/P REMARKS: \_\_\_\_\_

FILE: \_\_\_\_\_ COST OBJECT \_\_\_\_\_ CENTRAL DEVELOPMENT \_\_\_\_\_ DONOR/BACKGROUND \_\_\_\_\_ DEVELOPMENT RESEARCH

JOHNS HOPKINS  
UNIVERSITY & MEDICINE

Atran Foundation, Inc.  
c/o Ms. Diane Fischer, President  
155 N Dean St #3D  
Englewood, New Jersey 07631-2532

**Thank you for your recent gift in support of Johns Hopkins.**

Gift Details

**Charitable contribution:** **\$50,000.00**

Date processed\*: 03/31/2020  
Serial number: G-20064368-JPEK

**Distribution of gift:**

| <u>Amount</u> | <u>Recipient (To benefit)</u>          | <u>Designation</u>         |
|---------------|--|----------------------------|
| \$50,000.00   | JH University (Department of Medicine) | Atran Foundation Gift Fund |

**\*Please note that this document reflects the date your gift was processed. You may wish to keep an additional personal record to reflect the calendar date that you made your gift. Please consult your tax advisor regarding methods of confirming the date of your gift.**

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Unless otherwise indicated above, no substantial goods or services were received in return for your gift. If you have any questions regarding this receipt, or to request a copy of the current annual financial statement for the Johns Hopkins University or the Johns Hopkins Health System, please contact the Office of Donor and Volunteer Engagement, 410-516-2832. Documents filed in accordance with the Maryland Charitable Organizations Act may be obtained from the Maryland Secretary of State. Charitable gifts made to Johns Hopkins University and Johns Hopkins Health Systems are subject to receipt, accounting and other gift policies approved by the respective institutions.