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OMB No 1545-0052

Return of Private Foundation
or Section 4947(a)(1) Nonexempt Charitable Trust
Treated as a Private Foundation
Note. The foundation may be able to use a copy of this return to satisfy state reporting requirements

2011

F	or ca	lendar year 2011 or tax year beginning		, 2011,	, and endir	g			, 20
_	Name	of foundation				Α	Employer identific	cation number	
5	ГНЕ	CANDACE AND RICHARD S WEEKS	FAMILY FOUNDA	MOITA			27-63749	90	
_	Numb	per and street (or P O box number if mail is not delive	red to street address)	-	Room/suit	е в	Telephone numbe	er (see instructio	ns)
1	32	LEE'S HILL ROAD					973 285-	1657	
	City o	r town, state, and ZIP code							
						C	If exemption applica pending, check here	ition is	. ▶□
I	BASE	KING RIDGE, NJ 07920					portaing, orlook note		
G	Che	ck all that apply Initial return	Initial return	of a former p	ublic chari	у р	1 Foreign organizat	ions, check here	. ▶ 🔲
		Final return	Am ended ref	turn			2. Foreign organiza		
		Address change	Name change	е			85% test, check h computation .		. ▶ 🔲
H	Che	ck type of organization $x$ Section 501(	c)(3) exempt private f	oundation		_	If private foundation	n status was termin	ated
	_ s	ection 4947(a)(1) nonexempt charitable trust	Other taxable pr			_ `	under section 507(b		- I
I	Fair	\	unting method $oxedsymbol{f x}$ Ca	ash Acc	rual	F	If the foundation is	ın a 60-month tem	nination
	-	ear (from Part II, col. (c), line	ther (specify)				under section 507(b)	)(1)(B), check here	. ▶
		▶ \$ 188,060.00 (Part I,	column (d) must be on	cash basis.)				1	
L	art	Analysis of Revenue and Expenses (The	(a) Revenue and	(b) Net inve	estment	(c)	Adjusted net	(d) Disburs for char	
		total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in	expenses per	incom		(0)	income	purpo	
_		column (a) (see ınstructions) )	books		- 1			(cash bas	is only)
	1	Contributions, gifts, grants, etc., received (attach schedule)	100,000.00				<del></del>		
	2	Check ► attach Sch B							
	3	Interest on savings and temporary cash investments	52.00		52.00			_	
	4	Dividends and interest from securities	53.00		53.00				
	5 a	Gross rents							
		Net rental income or (loss)				1	RFCE!\	(ED	
ne		Net gain or (loss) from sale of assets not on line 10 Gross sales price for all				1 6		200	<del> </del>
Revenue		assets on line 6a			0.00	=	AUG 2 3	1 10	<del>                                     </del>
Re	7	Capital gain net income (from Part IV, line 2)			0.00	듄	AUU 4 3	7015 10	
	8	Net short-term capital gain				+			1
	9 10 a	Income modifications · · · · · · · · · · · · · · · · · · ·				+	OGDEN	<del>I, U I -</del>	1
<b>'</b> /)	_	and allowances · · · ·				<del>-</del>			<del>-</del>
つつかいか		Less Cost of goods sold . Gross profit or (loss) (attach schedule)							
2	11	Other income (attach schedule)							
	12	Total. Add lines 1 through 11	100,053.00		53.00		· <del> · · · · · · · · · · · · · · · · </del>		
;	13	Compensation of officers, directors, trustees, etc						<del></del>	
2	14	Other employee salaries and wages							<del>-</del>
Jes Jes	15	Pension plans, employee benefits							
ě	ı	Legal fees (attach schedule)							
Operating and Administrative Expenses		Accounting fees (attach schedule)	1,040.00	į	520.00				520.00
ķ.	ı	Other professional fees (attach schedule)							
ati	17	Interest							
istı	18	Taxes (attach schedule) (see instructions)							
ni Li	19	Depreciation (attach schedule) and depletion.							
۸d۲	20	Occupancy							
ğ	21	Travel, conferences, and meetings		_					
a	22	Printing and publications		,					
ing	23	Other expenses (attach schedule)							
rat	24	$\label{total operating and administrative expenses.}$							
Pe	ļ	Add lines 13 through 23	1,040.00		520.00				520.00
J	25	Contributions, gifts, grants paid	30,000.00	<del></del>					000.00
_	26	Total expenses and disbursements. Add lines 24 and 25	31,040.00		520.00			30,	520.00
	27	Subtract line 26 from line 12	60 010 00						
		Excess of revenue over expenses and disbursements	69,013.00			-			
		Net investment income (if negative, enter -0-)	· · · · · · · · · · · · · · · · · · ·				<del></del>	<u> </u>	
		nationed has income (it possitive optor f) \							

P	art II	Balance Sheets	Attached schedules and amounts in the description column should be for end-of-year	Beginning of year	End o	f year
_			amounts only (See instructions )	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-beari	ing			
	2 `		cash investments	119,047.00	188,060.00	188,060.00
	3	Accounts receivable				
		Less allowance for dou	btful accounts ▶			
	4		<b></b>		-	
		Less allowance for doub	btful accounts ▶			
	5					
	6		officers, directors, trustees, and other			
		disqualified persons (att	tach schedule) (see instructions)			
	7		eceivable (attach schedule)			
			btful accounts ▶			
_	8		e			
퓛	9	Prepaid expenses and d	eferred charges			
Assets			e government obligations (attach schedule)			
`			stock (attach schedule)			
			bonds (attach schedule)			
	11 Ĭ	Investments - land, buildings	s, •			
-		and equipment basis Less accumulated deprecia				
	12	(attach schedule)	loans			
- 1	13		ach schedule)			
	14	Land, buildings, and				
		equipment basis Less accumulated deprecia	ation			
١	15	(attach schedule)	<b>&gt;</b> )			
- 1	16		completed by all filers - see the			
			age 1, item I)	119,047.00	188,060.00	188,060.00
┪	17		occrued expenses	113,017.00	100,000.00	100/000.00
- 1	18					
- 1	19					
읦	20		ors, trustees, and other disqualified persons			
·≣Ι	21		otes payable (attach schedule)			
≝	22		• ►)			
		Ottion indomittoo (doodstac	, ,, , <sub> </sub>			
	23	Total liabilities (add line	es 17 through 22)			
T			low SFAS 117, check here ▶			
			24 through 26 and lines 30 and 31.			
es	24					
일	25					
鰄	26				· · · · · ·	
힐	24 25 26 27 28 29 30 31		not follow SFAS 117,		,	
اج			plete lines 27 through 31.			
5	27		cipal, or current funds	0.00	0.00	
ts	28		r land, bldg , and equipment fund			
Se	29		ulated income, endowment, or other funds	119,047.00	188,060.00	
ĕ	30		balances (see instructions)	119,047.00	188,060.00	
É	31		net assets/fund balances (see	1137017.00	1007000.00	
				119,047.00	188,060.00	
Р	art II		anges in Net Assets or Fund I		100/000.001	
			alances at beginning of year - Part		must agree with	
			d on prior year's return)			119,047.00
		r amount from Part I, I			1	69,013.00
				· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·	33,013.00
		lines 1, 2, and 3			<del></del>	188,060.00
_	D		luna O (damera) s		· · · · · · · · · · · · · · · · · · ·	
6	Total	net assets or fund ba	alances at end of year (line 4 minus i	ine 5) - Part II, column (b	), line 30 6	188,060.00
_			The second secon		,, <u></u>	Form 990-PF (2011)

L		d describe the kind(s) of property sold (s		(b) How acquired	(c) Date	(d) Date sold
_		rick warehouse, or common stock, 200 s	shs MLC Co)	P-Purchase D-Donation	/mo day vr \	(mo , day, yr )
_	NONE					
_ <u>b</u>					<del> </del>	
<u>c</u>						<u> </u>
e					<del>                                     </del>	
		(f) Depreciation allowed	(g) Cost or other basis	<del> </del>	(h) Gain or (lo	
	(e) Gross sales price	(or allowable)	plus expense of sale		(e) plus (f) min	
а	1					
b						
					<u>-</u>	
d	1					
<u>e</u>						
_	Complete only for assets	showing gain in column (h) and owned	d by the foundation on 12/31/69		Gains (Col (h) g	
	(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	COI	(k), but not less Losses (from co	
_a	1		<del>-</del>			
<u>_b</u>	)					
_ <u>c</u>	;					
<u>d</u>	i l					
<u>e</u>			<u> </u>			
2	Capital gain net income or		gain, also enter in Part I, line 7 }	. 2		
2	Net short-term capital gain	or (loss) as defined in sections 12	•	. 4		<del></del>
•		t I, line 8, column (c) (see instr				
	_			3		
Р	art V Qualification U	Jnder Section 4940(e) for Rec	duced Tax on Net Investment I			
w		leave this part blank the section 4942 tax on the distrib not qualify under section 4940(e)		ase perio	od?	Yes X No
_		ount in each column for each year,		any ent	ries	
÷	(a)	(b)	(c)		(d)	
c	Base period years Calendar year (or tax year beginning in)	Adjusted qualifying distributions	Net value of nonchantable-use assets		Distribution r (col (b) divided by	
	2010	81,000.00	79,136.00			1.0236
	2009	10.00	100,000.00			0.0001
	2008					
_	2007					
_	2006		<u> </u>			<del> </del>
_	T-4-1 of lime 4 - notioned (a)					1 0007
	Total of line 1, column (d)	for the 5-year base period - divide	the total on line 2 by 5 or by the	2		1.0237
3	_	for the 5-year base period - divide dation has been in existence if less		3		0.511827
	number of years the found	dation has been in existence inless	stilan 5 years ,	-3	<del></del>	0.311627
4	Enter the net value of non	charitable-use assets for 2011 fro	m Part X. line 5	4	1	51,762.89
5	Multiply line 4 by line 3			5		77,676.34
6	Enter 1% of net investme	nt income (1% of Part I, line 27b)		6		
				-		
7	Add lines 5 and 6			7		77,676.34
_		and the same than the same to				20 522 -
8	Enter qualifying distribution  If line 8 is equal to or gree  Part VI instructions	eater than line 7, check the box i	n Part VI, line 1b, and complete t	hat part	using a 1% ta	30,520.00 x rate See the

Form	990-PF (2011)			age 4
Par	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see in	strue	ctions	)
1a	Exempt operating foundations described in section 4940(d)(2), check here			_
	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		0	.00
	here X and enter 1% of Part I, line 27b		·	
С	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of			
	Part I, line 12, col (b)			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)		0	.00
3	Add lines 1 and 2		0	.00
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)		0	.00
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-		_	.00
6	Credits/Payments	-		
_	2011 estimated tax payments and 2010 overpayment credited to 2011 6a 6a			
b	Exempt foreign organizations - tax withheld at source 6b			
C	Tax paid with application for extension of time to file (Form 8868)			
d	Backup withholding erroneously withheld 6d			
7	Total credits and payments Add lines 6a through 6d		0	.00
8	Enter any penalty for underpayment of estimated tax. Check here		0	.00
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed			.00
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			
	Enter the amount of line 10 to be Credited to 2012 estimated tax ▶ Refunded ▶ 11			
	t VII-A Statements Regarding Activities			
_	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate	l -	Yes	No
	or intervene in any political campaign?	1a		×
h	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see page 19 of the			
•	instructions for definition)?	1b		х
	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			
_	Did the foundation file Form 1120-POL for this year?	1 c		х
_	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year	10	_	
d	(1) On the foundation $\blacktriangleright$ \$ (2) On foundation managers $\blacktriangleright$ \$			
_	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed			
е		}		
_	on foundation managers.   \$	_		.,
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		×
_	If "Yes," attach a detailed description of the activities			
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of	_		
	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		_ X_
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		Х
b	If "Yes," has it filed a tax return on Form 990-T for this year?	4 b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5	_	<u> </u>
_	if "Yes," attach the statement required by General Instruction T	ľ		
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either			
	By language in the governing instrument, or			
	By state legislation that effectively amends the governing instrument so that no mandatory directions that			
	conflict with the state law remain in the governing instrument?	6	Х	
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	7	Х	<del></del>
8 a	Enter the states to which the foundation reports or with which it is registered (see instructions)			
	None			
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	8 b		×
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or			
	4942(j)(5) for calendar year 2011 or the taxable year beginning in 2011 (see instructions for Part XIV)? If "Yes," complete			
	Part XIV	9		х
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names			
	and addresses	10	x	

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, Form 4720, to determine if the

4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? . . . . . . .

b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2011?

Form 990-PF (2011)

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Form 990-PF (2011)				Page (
Part VII-B Statements Regarding Activities for	or Which Form 4	720 May Be Requ	ired (continued)	- 1 1 - 1
Part VII-B Statements Regarding Activities for 5a During the year did the foundation pay or incur any amout (1) Carry on propaganda, or otherwise attempt to influer (2) Influence the outcome of any specific public elective directly or indirectly, any voter registration drive? (3) Provide a grant to an individual for travel, study, or oth (4) Provide a grant to an organization other than a section 509(a)(1), (2), or (3), or section 4940(d)(2)? (5) Provide for any purpose other than religious, che purposes, or for the prevention of cruelty to children of the Regulations section 53 4945 or in a current notice regard Organizations relying on a current notice regarding disast continuous in the statement required by Regulations section 15 and	transactions fail to ding disaster assistance check in foundation claim extrant?	4945(e))?  1955), or to carry or anization described in the series (see instructions)?  1966 ere	Yes X No  In Yes X No  al Yes X No  xceptions described in  XX Yes No  IX Yes X No  IX Yes No  IX Yes X No  IX Yes No  IX Yes X No  IX Yes X No  IX X Yes X No	5 b
b If "Yes," did the foundation receive any proceeds or have	•	•		7b
Part VIII Information About Officers, Directors and Contractors				oyees,
1 List all officers, directors, trustees, foundation r	nanagere and their			
	ilaliayerə anu mei	r compensation (see	instructions).	
(a) Name and address	(b) Title, and average hours per week devoted to position	r compensation (see (c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
(a) Name and address	(b) Title, and average hours per week	(c) Compensation (If not paid, enter	(d) Contributions to employee benefit plans	
(a) Name and address  CANDACE C. WEEKS  132 LEE'S HILL ROAD; BASKING RIDGE, NJ 07920	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter	(d) Contributions to employee benefit plans	
(a) Name and address CANDACE C. WEEKS	(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	other allowances
(a) Name and address  CANDACE C. WEEKS  132 LEE'S HILL ROAD; BASKING RIDGE, NJ 07920  ALEXANDRA E. WEEKS  58 WEST 8TH ST; APT NO 2B; NEW YORK, NY 10011	(b) Title, and average hours per week devoted to position  TRUSTEE  1  TRUSTEE  1	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	other allowances
(a) Name and address  CANDACE C. WEEKS  132 LEE'S HILL ROAD; BASKING RIDGE, NJ 07920  ALEXANDRA E. WEEKS  58 WEST 8TH ST; APT NO 2B; NEW YORK, NY 10011  KATHERINE C. WEEKS	(b) Title, and average hours per week devoted to position  TRUSTEE  1  TRUSTEE  1  TRUSTEE	(c) Compensation (if not paid, enter .0-)	(d) Contributions to employee benefit plans and deferred compensation	0.00 0.00
(a) Name and address  CANDACE C. WEEKS  132 LEE'S HILL ROAD; BASKING RIDGE, NJ 07920  ALEXANDRA E. WEEKS  58 WEST 8TH ST; APT NO 2B; NEW YORK, NY 10011  KATHERINE C. WEEKS  1415 N. TAFT ST; APT P182; ARLINGTON, VA	(b) Title, and average hours per week devoted to position  TRUSTEE  1  TRUSTEE  1  TRUSTEE  1  TRUSTEE	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	other allowances
(a) Name and address  CANDACE C. WEEKS  132 LEE'S HILL ROAD; BASKING RIDGE, NJ 07920  ALEXANDRA E. WEEKS  58 WEST 8TH ST; APT NO 2B; NEW YORK, NY 10011  KATHERINE C. WEEKS  1415 N. TAFT ST; APT P182; ARLINGTON, VA  RICHARD M. WEEKS	(b) Title, and average hours per week devoted to position  TRUSTEE  1  TRUSTEE  1  TRUSTEE  1  TRUSTEE  1  TRUSTEE	(c) Compensation (If not paid, enter .0-)  0.00  0.00	(d) Contributions to employee benefit plans and deferred compensation  0.00  0.00	0.00 0.00
(a) Name and address  CANDACE C. WEEKS  132 LEE'S HILL ROAD; BASKING RIDGE, NJ 07920  ALEXANDRA E. WEEKS  58 WEST 8TH ST; APT NO 2B; NEW YORK, NY 10011  KATHERINE C. WEEKS  1415 N. TAFT ST; APT P182; ARLINGTON, VA  RICHARD M. WEEKS  132 LEE'S HILL ROAD; BASKING RIDGE, NJ 07920	(b) Title, and average hours per week devoted to position  TRUSTEE  1  TRUSTEE  1  TRUSTEE  1  TRUSTEE  1  TRUSTEE  1	(c) Compensation (If not paid, enter .0-)  0.00  0.00  0.00	(d) Contributions to employee benefit plans and deferred compensation  0.00  0.00  0.00	0.00 0.00 0.00
(a) Name and address  CANDACE C. WEEKS  132 LEE'S HILL ROAD; BASKING RIDGE, NJ 07920  ALEXANDRA E. WEEKS  58 WEST 8TH ST; APT NO 2B; NEW YORK, NY 10011  KATHERINE C. WEEKS  1415 N. TAFT ST; APT P182; ARLINGTON, VA  RICHARD M. WEEKS	(b) Title, and average hours per week devoted to position  TRUSTEE  1  TRUSTEE  1  TRUSTEE  1  TRUSTEE  1  TRUSTEE  1	(c) Compensation (If not paid, enter .0-)  0.00  0.00  0.00	(d) Contributions to employee benefit plans and deferred compensation  0.00  0.00  0.00	0.00 0.00 0.00
(a) Name and address  CANDACE C. WEEKS  132 LEE'S HILL ROAD; BASKING RIDGE, NJ 07920  ALEXANDRA E. WEEKS  58 WEST 8TH ST; APT NO 2B; NEW YORK, NY 10011  KATHERINE C. WEEKS  1415 N. TAFT ST; APT P182; ARLINGTON, VA  RICHARD M. WEEKS  132 LEE'S HILL ROAD; BASKING RIDGE, NJ 07920  2 Compensation of five highest-paid employees	(b) Title, and average hours per week devoted to position  TRUSTEE  1  TRUSTEE  1  TRUSTEE  1  TRUSTEE  1  TRUSTEE  1	(c) Compensation (If not paid, enter .0-)  0.00  0.00  0.00	(d) Contributions to employee benefit plans and deferred compensation  0.00  0.00  0.00	0.00 0.00 0.00
(a) Name and address  CANDACE C. WEEKS  132 LEE'S HILL ROAD; BASKING RIDGE, NJ 07920  ALEXANDRA E. WEEKS  58 WEST 8TH ST; APT NO 2B; NEW YORK, NY 10011  KATHERINE C. WEEKS  1415 N. TAFT ST; APT P182; ARLINGTON, VA  RICHARD M. WEEKS  132 LEE'S HILL ROAD; BASKING RIDGE, NJ 07920  2 Compensation of five highest-paid employees  "NONE."  (a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position  TRUSTEE  TRUSTEE  TRUSTEE  TRUSTEE  TRUSTEE  (other than those	(c) Compensation (If not paid, enter .0-)  0.00  0.00  0.00  0.00  e included on line	(d) Contributions to employee benefit plans and deferred compensation  0.00  0.00  0.00  e 1 - see instruction  (d) Contributions to employee benefit plans and deferred	0.00 0.00 0.00 0.00 pons). If none, enter
(a) Name and address  CANDACE C. WEEKS  132 LEE'S HILL ROAD; BASKING RIDGE, NJ 07920  ALEXANDRA E. WEEKS  58 WEST 8TH ST; APT NO 2B; NEW YORK, NY 10011  KATHERINE C. WEEKS  1415 N. TAFT ST; APT P182; ARLINGTON, VA  RICHARD M. WEEKS  132 LEE'S HILL ROAD; BASKING RIDGE, NJ 07920  2 Compensation of five highest-paid employees "NONE."	(b) Title, and average hours per week devoted to position  TRUSTEE  TRUSTEE  TRUSTEE  TRUSTEE  TRUSTEE  (other than those	(c) Compensation (If not paid, enter .0-)  0.00  0.00  0.00  0.00  e included on line	(d) Contributions to employee benefit plans and deferred compensation  0.00  0.00  0.00  e 1 - see instruction  (d) Contributions to employee benefit plans and deferred	0.00 0.00 0.00 0.00 pons). If none, enter
(a) Name and address  CANDACE C. WEEKS  132 LEE'S HILL ROAD; BASKING RIDGE, NJ 07920  ALEXANDRA E. WEEKS  58 WEST 8TH ST; APT NO 2B; NEW YORK, NY 10011  KATHERINE C. WEEKS  1415 N. TAFT ST; APT P182; ARLINGTON, VA  RICHARD M. WEEKS  132 LEE'S HILL ROAD; BASKING RIDGE, NJ 07920  2 Compensation of five highest-paid employees  "NONE."  (a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position  TRUSTEE  TRUSTEE  TRUSTEE  TRUSTEE  TRUSTEE  (other than those	(c) Compensation (If not paid, enter .0-)  0.00  0.00  0.00  0.00  e included on line	(d) Contributions to employee benefit plans and deferred compensation  0.00  0.00  0.00  e 1 - see instruction  (d) Contributions to employee benefit plans and deferred	0.00 0.00 0.00 0.00 pons). If none, enter
(a) Name and address  CANDACE C. WEEKS  132 LEE'S HILL ROAD; BASKING RIDGE, NJ 07920  ALEXANDRA E. WEEKS  138 WEST 8TH ST; APT NO 2B; NEW YORK, NY 10011  KATHERINE C. WEEKS  1415 N. TAFT ST; APT P182; ARLINGTON, VA  RICHARD M. WEEKS  132 LEE'S HILL ROAD; BASKING RIDGE, NJ 07920  2 Compensation of five highest-paid employees  "NONE."  (a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position  TRUSTEE  TRUSTEE  TRUSTEE  TRUSTEE  TRUSTEE  (other than those	(c) Compensation (If not paid, enter .0-)  0.00  0.00  0.00  0.00  e included on line	(d) Contributions to employee benefit plans and deferred compensation  0.00  0.00  0.00  e 1 - see instruction  (d) Contributions to employee benefit plans and deferred	0.00 0.00 0.00 0.00 pons). If none, enter

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Total number of other employees paid over \$50,000

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employ and Contractors (continued)	ees,
3 Five highest-paid independent contractors for professional services (see instructions). If none, enter "NONE	n
(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
NONE	
	<del> </del>
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 information such as the number of	- Frances
organizations and other beneficianes served, conferences convened, research papers produced, etc	Expenses
1 N/A	
2	
3	
4	
Part IX-B Summary of Program-Related Investments (see instructions)	
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1 N/A	
2	
All other program-related investments. See instructions	
3	
Total Add lines 1 through 3	

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Pa	Minimum Investment Return (All domestic foundations must complete this part. Forei see instructions)	gn foundat	ions,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		·
	purposes		
а	Average monthly fair market value of securities	1a	154,074.00
þ	Average of monthly cash balances	1b	
C	Fair market value of all other assets (see instructions)	1c	
d	Total (add lines 1a, b, and c)	1d	154,074.00
е	Reduction claimed for blockage or other factors reported on lines 1a and		· · · · · · · · · · · · · · · · · · ·
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Cultivant line O frame line 4d	3	154,074.00
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see		
		4	2,311.11
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	151,762.89
6	Minimum investment return. Enter 5% of line 5	6	7,588.14
Pa	<b>Distributable Amount</b> (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here ▶ □ and do not complete this process.	part )	
1	Minimum investment return from Part X, line 6	1	7,588.14
2 a	Tax on investment income for 2011 from Part VI, line 5		· · · · · · · · · · · · · · · · · · ·
b	Income tax for 2011 (This does not include the tax from Part VI) 2b	1	
	Add lines 2a and 2b	2c	
3	Distributable amount before adjustments Subtract line 2c from line 1		7,588.14
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	7,588.14
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII,		
	line 1	7	7,588.14
Pa	art XII Qualifying Distributions (see instructions)	<u> </u>	<u> </u>
<u> </u>	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes	<del> </del>	
a			20 500 00
b	Expenses, contributions, gifts, etc - total from Part I, column (d), line 26 Program-related investments - total from Part IX-B	1a	30,520.00
	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.	1b	
2			
•	purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the		
a	Suitability test (prior IRS approval required)	3a	
D 4	Cash distribution test (attach the required schedule)	3 b	0.0
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	30,520.00
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income	_	
	Enter 1% of Part I, line 27b (see instructions)	5	
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	30,520.00
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when cal qualifies for the section 4940(e) reduction of tax in those years	culating wh	ether the foundation

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Ρā	art XIII Undistributed Income (see instru	uctions)			
		(a)	(b)	(c)	(d)
1	Distributable amount for 2011 from Part XI,	Corpus	Years prior to 2010	2010	2011
	line 7			-	7,588.14
2	Undistributed income, if any, as of the end of 2011				
а	Enter amount for 2010 only			0.00	
	Total for pnor years 20,20,20		0.00		
3	Excess distributions carryover, if any, to 2011				
а	From 2006				
	From 2007				
	From 2008				
d	From 2009				
е	From 2010 77,034.00				
f	Total of lines 3a through e	77,034.00		_	
	Qualifying distributions for 2011 from Part XII,				
	line 4 ▶ \$30,520.00				
а	Applied to 2010, but not more than line 2a				
b	Applied to undistributed income of prior years				
	(Election required - see instructions)				
С	Treated as distributions out of corpus (Election required - see instructions)				
d	Applied to 2011 distributable amount				7,588.14
	Remaining amount distributed out of corpus	22,932.00			.,,000.11.
	Excess distributions carryover applied to 2011	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	7		
	(If an amount appears in column (d), the same				<del>v.</del>
6	amount must be shown in column (a) ) Enter the net total of each column as				
•	indicated below:				
а	Corpus Add lines 3f, 4c, and 4e Subtract line 5	99,966.00			
	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				
е	Undistributed income for 2010 Subtract line 4a from line 2a Taxable amount - see				
	instructions		_		<u> </u>
f	Undistributed income for 2011 Subtract lines				
•	4d and 5 from line 1 This amount must be				
	distributed in 2012				
7	Amounts treated as distributions out of corpus				
	to satisfy requirements imposed by section				
	170(b)(1)(F) or 4942(g)(3) (see instructions)			-	
8	Excess distributions carryover from 2006 not applied on line 5 or line 7 (see instructions)				
9	Excess distributions carryover to 2012.				
	Subtract lines 7 and 8 from line 6a	99,966.00		<u> </u>	
10	Analysis of line 9				
а	Excess from 2007				
	Excess from 2008			İ	
	Excess from 2009				
	Excess from 2010				
е	Excess from 2011 22,932.00				

Pa	rt XIV Private Oper	rating Foundations	(see instructions and	<u>d Part VII-A, questio</u>	n 9)	
1 a	If the foundation has	received a ruling or d	etermination letter tha	t it is a private oper	rating	
	foundation, and the ruling					
b	Check box to indicate wh					)(3) or 4942(J)(5)
	Official and to maioric with	Tax year		Prior 3 years	1 13420	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
2 a	Enter the lesser of the ad-			· · · · · · · · · · · · · · · · · · ·	1	(e) Total
	justed net income from Part	(a) 2011	<b>(b)</b> 2010	(c) 2009	(d) 2008	<u> </u>
	I or the minimum investment return from Part X for each					
	year listed					
b	85% of line 2a					
				" " "		
С	Qualifying distributions from Part					
	XII, line 4 for each year listed			· <u>-</u>	<del></del>	
d	Amounts included in line 2c not used directly for active conduct					
	of exempt activities					
е	Qualifying distributions made			]	į	
	directly for active conduct of					
	exempt activities Subtract line					
3	2d from line 2c Complete 3a, b, or c for the				-	-
•	alternative test relied upon					
а	"Assets" alternative test - enter					
	(1) Value of all assets					
	(2) Value of assets qualifying					
	under section 4942(j)(3)(B)(i)					
b	"Endowment" alternative test-				<u> </u>	<u>†                                      </u>
	enter 2/3 of minimum invest-					
	ment return shown in Part X,					
	line 6 for each year listed					
C	"Support" alternative test - enter					
	(1) Total support other than					
	gross investment income (interest, dividends, rents,					
	payments on securities					
	loans (section 512(a)(5)),					
	or royalties) (2) Support from general					
	public and 5 or more					
	exempt organizations as					
	provided in section 4942 (j)(3)(B)(iii)					
	(3) Largest amount of sup-			4		
	port from an exempt					
	organization (4) Gross investment income					
Pa		ary Information (C	omplete this part	only if the found	ation had \$5 000	or more in assets
	at any time of	during the year - se	e instructions.)	only in the round		or more in account
4	Information Regarding					
١.				a than 20/ of the tate	al aantribuitiana raaaii	
а	List any managers of before the close of any	the Touridation who t	nave contributed more	nore than \$5 000) (S	See section 507(d)(2)	ed by the foundation
	before the close of arry	tax year (but only it ti	ley have contributed i	nore than \$5,000) (c	sec section 507 (d)(2) )	
	CHARD S. WEEKS					
b	List any managers of					large portion of the
	ownership of a partner	ship or other entity) of	f which the foundation	n has a 10% or greate	r interest	
NO	NE.					
2	Information Regarding	g Contribution, Grant	Gift, Loan, Scholarsh	ip. etc Programs:		
-		•		• • •		
	Check here ► X If t	he foundation only i	makes contributions	to preselected char	itable organizations a	ind does not accept
	unsolicited requests for			ints, etc (see instruc	tions) to individuals o	r organizations under
	other conditions, comp					
а	The name, address, a	nd telephone number	of the person to whor	n applications should b	oe addressed	-
<b>b</b>	The form in which app	lications should be su	bmitted and information	on and materials they	should include	
C	Any submission deadli	nes				
	Any restrictions or li	mitations on awards	such as by geogra	ophical areas charita	able fields kinds of	institutions or other
-	factors		, <b></b> ., googic	, wiewej enwitte		

Part XV Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, show any relationship to any foundation manager or substantial contributor Recipient Foundation status of Purpose of grant or contribution Amount Name and address (home or business) recipient a Paid during the year HOMELESS SOLUTIONS NONE 501(c)(3)CHARITABLE 20,000.00 1 JEAN STREET MORRISTOWN, NJ 07960 COMMUNITY FOUNDATION OF NJ NONE 501(c)(3)CHARITABLE 5,000.00 PO BOX 338 MORRISTOWN, NJ 07963 USO NONE 501(c)(3)CHARITABLE 5,000.00 PO BOX 96322 WASHINGTON, DC 20090-6322 ▶ 3a 30,000.00 Total **b** Approved for future payment

ter gross	amounts unless otherwise indicated	Unrela	ated business income	Excluded by	section 512, 513, or 514	(e)
••		(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income (See instructions)
_	Sel vice revenue			1		(OCC IIISTI GCTOTIS)
				_		
f						
g Fees a	and contracts from government agencies		· -·			
_	ship dues and assessments			Ì		
	n savings and temporary cash investments					
	s and interest from securities			14	53.00	
	al income or (loss) from real estate					
a Debt-	financed property					
	ebt-financed property		-			
	income or (loss) from personal property					
Other inv	vestment income					
	oss) from sales of assets other than inventory					
-	me or (loss) from special events					
	ofit or (loss) from sales of inventory					
-	venue a					
_						
d						
d						
е	Add columns (b), (d), and (e)				53.00	
e Subtotal	Add columns (b), (d), and (e) dd line 12, columns (b), (d), and (e)				·	53.00
e Subtotal Total. Ad	Add columns (b), (d), and (e) dd line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calci	 ulations )			13	53.00
e Subtotal  Total. Ad ee worksh	Add columns (b), (d), and (e) dd line 12, columns (b), (d), and (e)	 ulations )			13	53.00
e Subtotal Total. Ad	Add columns (b), (d), and (e) dd line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calci	ulations)	complishment of E	xempt Purp	13	
e Subtotal Total. Ad ee worksh art XVI-	Add columns (b), (d), and (e) dd line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calcillationship of Activities	ulations) to the Ac	complishment of E	xempt Purp	oses e) of Part XVI-A contrib	uted importantly to t
Subtotal Total. Addee worksh art XVI- ine No.	Add columns (b), (d), and (e)	ulations) to the Ac	complishment of E	xempt Purp	oses e) of Part XVI-A contrib	uted importantly to t
Subtotal Total. Addee worksh art XVI- ine No.	Add columns (b), (d), and (e) dd line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calcing Relationship of Activities  Explain below how each activity	ulations) to the Ac	complishment of E	xempt Purp	oses e) of Part XVI-A contrib	uted importantly to t
Subtotal Total. Addee worksh art XVI- ine No.	Add columns (b), (d), and (e)	ulations) to the Ac	complishment of E	xempt Purp	oses e) of Part XVI-A contrib	uted importantly to t
Subtotal Total. Addee worksh art XVI- ine No.	Add columns (b), (d), and (e)	ulations) to the Ac	complishment of E	xempt Purp	oses e) of Part XVI-A contrib	uted importantly to t
Subtotal Total. Addee worksh art XVI- ine No.	Add columns (b), (d), and (e)	ulations) to the Ac	complishment of E	xempt Purp	oses e) of Part XVI-A contrib	uted importantly to t
Subtotal Total. Ad ee worksh art XVI- ine No.	Add columns (b), (d), and (e)	ulations) to the Ac	complishment of E	xempt Purp	oses e) of Part XVI-A contrib	uted importantly to t
Subtotal Total. Addee worksh art XVI- ine No.	Add columns (b), (d), and (e)	ulations) to the Ac	complishment of E	xempt Purp	oses e) of Part XVI-A contrib	uted importantly to t
Subtotal Total. Ad ee worksh art XVI-	Add columns (b), (d), and (e)	ulations) to the Ac	complishment of E	xempt Purp	oses e) of Part XVI-A contrib	uted importantly to t
Subtotal Total. Addee worksh art XVI- ine No.	Add columns (b), (d), and (e)	ulations) to the Ac	complishment of E	xempt Purp	oses e) of Part XVI-A contrib	uted importantly to t
Subtotal Total. Ad ee worksh art XVI- ine No.	Add columns (b), (d), and (e)	ulations) to the Ac	complishment of E	xempt Purp	oses e) of Part XVI-A contrib	uted importantly to t
Subtotal Total. Addee worksh art XVI- ine No.	Add columns (b), (d), and (e)	ulations) to the Ac	complishment of E	xempt Purp	oses e) of Part XVI-A contrib	uted importantly to t
Subtotal Total. Addee worksh art XVI- ine No.	Add columns (b), (d), and (e)	ulations) to the Ac	complishment of E	xempt Purp	oses e) of Part XVI-A contrib	uted importantly to t
Subtotal Total. Addee worksh art XVI- ine No.	Add columns (b), (d), and (e)	ulations) to the Ac	complishment of E	xempt Purp	oses e) of Part XVI-A contrib	uted importantly to t
Subtotal Total. Addee worksh art XVI- ine No.	Add columns (b), (d), and (e)	ulations) to the Ac	complishment of E	xempt Purp	oses e) of Part XVI-A contrib	uted importantly to t
Subtotal Total. Ad ee worksh art XVI- ine No.	Add columns (b), (d), and (e)	ulations) to the Ac	complishment of E	xempt Purp	oses e) of Part XVI-A contrib	uted importantly to t
Subtotal Total. Ad ee worksh art XVI- ine No.	Add columns (b), (d), and (e)	ulations) to the Ac	complishment of E	xempt Purp	oses e) of Part XVI-A contrib	uted importantly to t
Subtotal Total. Ad ee worksh art XVI- ine No.	Add columns (b), (d), and (e)	ulations) to the Ac	complishment of E	xempt Purp	oses e) of Part XVI-A contrib	uted importantly to t
Subtotal Total. Ad ee worksh art XVI- ine No.	Add columns (b), (d), and (e)	ulations) to the Ac	complishment of E	xempt Purp	oses e) of Part XVI-A contrib	uted importantly to t
Subtotal Total. Ad ee worksh art XVI- ine No.	Add columns (b), (d), and (e)	ulations) to the Ac	complishment of E	xempt Purp	oses e) of Part XVI-A contrib	uted importantly to t
Subtotal Total. Ad ee worksh art XVI- ine No.	Add columns (b), (d), and (e)	ulations) to the Ac	complishment of E	xempt Purp	oses e) of Part XVI-A contrib	uted importantly to t
Subtotal Total. Ad ee worksh art XVI-	Add columns (b), (d), and (e)	ulations) to the Ac	complishment of E	xempt Purp	oses e) of Part XVI-A contrib	uted importantly to t
Subtotal Total. Ad ee worksh art XVI-	Add columns (b), (d), and (e)	ulations) to the Ac	complishment of E	xempt Purp	oses e) of Part XVI-A contrib	uted importantly to t
Subtotal Total. Ad ee worksh art XVI- ine No.	Add columns (b), (d), and (e)	ulations) to the Ac	complishment of E	xempt Purp	oses e) of Part XVI-A contrib	uted importantly to t

Part XVII	. Information R Exempt Organ		ansfers To ar	nd Transact	ons and	Relation	ships With Non	charit	able	)
in sec	ne organization direction 501(c) of the Conzations?	-			-	_			Yes	No
	fers from the reportingsh	-						1a(1)	1	Х
	her assets							1a(2)		Х
<b>b</b> Other	transactions							trans-rt		
(1) Sa	les of assets to a no	ncharitable exe	mpt organization					1b(1)		X
(2) Pu	irchases of assets fro	om a noncharita	ible exempt orga	nization				15(2)		X
(3) Re	ental of facilities, equi	ipment, or other	assets					1b(3)		<u>X</u>
(4) Ke	embursement arrang	ements			• • • • • •			1b(4)		<u>X</u>
(5) LO	ans or loan guarantee erformance of service	es					• • • • • • • • • •	1b(5)		<u>X</u>
	ng of facilities, equipn							1b(6)		$\frac{\lambda}{X}$
d If the value	answer to any of the of the goods, other in any transaction or	ne above is "Ye assets, or servi r sharing arrang	s," complete the ces given by the gement, show in	e following so e reporting fo n column (d) t	hedule Coundation Industrial	olumn (b) s f the found f the goods	should always show lation received less s, other assets, or s	v the factor than factors	air m	arket arket eived
(a) Line no	(b) Amount involved	(c) Name of r	noncharitable exempt	t organization	(d) Descr	ption of transf	fers, transactions, and sha	nng arran	gemer	its
	<del>-</del>			<del></del>		<del> </del>	······			
		-							<del></del>	
						<u></u>	<u></u>			
	·····								<del>~ · · · · ·</del>	
			,,,,,							
			· <del></del>	<u></u> .		·····				
descri	foundation directly ibed in section 501(c)	of the Code (o				-	t organizations	Ye	s	] No
	(a) Name of organization		(b) Type	of organization		(	(c) Description of relations	ship		
						<del></del>				
Sign Here	er penalties of per ury i declaration of complete Declaration of the complete Declarat	ere that I have examing preparer (other than the	ned this return include axpayer) is based on all included the Date	ing accompanying so information of which	hedules and storeparer has any	atements and to knowledge	May the IRS	discuss eparer si	this	return below No
	•		$\cup$				1000	لـــا		
Paid	Print/Type preparer's	name	Preparer's sig	nature		Date	Checkififif	PTIN		
Preparer	Firm's name						Firm's EIN ▶			
Use Only	Firm's address >									
		·		<del></del>			Phone no			
							F	om 990	-PF (	2011)

## 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.

OMB No 1545-0047

2011

**Employer identification number** Name of the organization 27-6374990 THE CANDACE AND RICHARD S WEEKS FAMILY FOUNDATION Organization type (check one). Section: Filers of: Form 990 or 990-EZ 501(c)( ) (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization 501(c)(3) exempt private foundation Form 990-PF 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See instructions General Rule For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II **Special Rules** For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3 % support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1 Complete Parts I and II For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals Complete Parts I, II, and III For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use exclusively for religious, charitable, etc., purposes, but these contributions did not total to more than \$1,000 If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990,

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

For Paperwork Reduction Act Notice, see the Instructions for Form 990, \$90-EZ, or 990-PF.

Schedule B (Form 990, 990-EZ, or 990-PF) (2011)

Name of organization
THE CANDACE AND RICHARD S WEEKS FAMILY FOUNDATION

Employer identification number 27-6374990

Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
1	RICHARD S. WEEKS  132 LEE'S HILL ROAD  BASKING RIDGE, NJ 07920	\$100,000.00	Person X Payroll Noncash  (Complete Part II if there is a noncash contribution)
(a)	(b)	(c) Total contributions	(d)
No.	Name, address, and ZIP + 4		Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
		\$	Person Payroli Noncash (Complete Part II if there is a noncash contribution)

### **SCHEDULE O** (Form 990 or 990-EZ)

# Supplemental Information to Form 990 or 990-EZ

Open to Public

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

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

Inspection

Name of the organization	Employer identification number
THE CANDACE AND RICHARD S WEEKS FAMILY FOUNDATION	27-6374990
PART VII-A, QUESTION 10, PAGE 4, FORM 990-PF	. <b></b>
Richard S. Weeks; 132 Lee's Hill Road; Basking Ridge, NJ 07920	
Explanation Concerning Part VII-A, Line 8B, Form 990-PF New Jersey has no registration	
requirement for an organization which does not exceed \$10,000 in gross public	
contributions for the current fiscal year.	
PART VIII, QUESTION 1, ADDITIONAL INFORMATION	·
Richard S. Weeks; 132 Lee's Hill Road; Basking Ridge, NJ 07920	
Title: Founder; Hours Per Week Devoted to Position: 0; Compensation: 0	