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990-PF

Return of Private Foundation or Section_4947(a)(1) Nonexempt Charitable Trust

OMB No. 1545-0052

De Int	epartme ternal R	nt of the Treasury evenue Service	Note. The foundation m	Trea ay be able to	ated as a Priva	ate Foundation has return to sa	on atisfy state i	eportii	ng requirements.	2011
F	or cal	endar year 2011	or tax year beginning			/01 ,2011				03/31,2012
	Name	e of foundation			•			A	Employer identific	ation number
	AAR	ON & RACHEL	MEYER MEMORIAL	FOUNDA	MOITA				22-	6063514
	Numl	per and street (or P.O	box number if mail is not de	livered to stre	eet address)		Room/su	ite E	Telephone number	(see instructions)
							ļ			
		INDIAN TRA							(20)	1) 891-7007
	City c	or town, state, and Z	IP code			_				
								C	If exemption applicate pending, check here	
	FRA	NKLIN LAKES,	NJ 07417						p=///	
G	Che	ck all that apply:	Initial return		Initial return	of a former p	oublic char	ity	1 Foreign organization	ons, check here . >
			Final return		Amended re	turn			2 Foreign organization	
_			Address change		Name chang				85% test, check he computation - •	
H		• • • • •	ation: X Section 5						If private foundation s	status was terminated
1			onexempt charitable trust		ther taxable pr			¯	under section 507(b)(- I
I		market value of a	1		method. X C	ash Acc	crual	F	If the foundation is in	a 60-month termination
		ear (from Part II, c		Other (sp			 -		under section 507(b)(1)(B), check here . \blacktriangleright
					n (d) must be o	n casn basis.)	, ,			
L	'art	Analysis of Reve	enue and Expenses (7 on columns (b), (c), and (d)	(a)r	Revenue and	(b) Net inve	estment	(c)	Adjusted net	(d) Disbursements for charitable
		may not necessari	ly equal the amounts in	ex	penses per books	incom		•=7	income	purposes
_	Ι.	column (a) (see ins	•		DOUND	ļ				(cash basis only)
	1	uf the	ts, etc , received (attach schedule) e foundation is not required t	,·						
	2	Check ▶ attac	ch Sch B	•	89		- 00			CITINETT 1
	3	_	d temporary cash investmen		207,343	20	. 89 . 89. 7			STMT 1 STMT 2
	4	_	rest from securities		201,343		11,343.			S1M1 2
	5 a					 				
	b		loss)		129,042	 	-			
æ	6a b	Gross sales price for a	n sale of assets not on line 10 III		129,042		-			
Revenue	7	assets on line 6a	come (from Part IV, line 2)		-	12	9,042.			
æ	8	· ·	tal gain			12	. 5 , 0 = 2 .			
	9	•	DS							
1		Gross sales less return and allowances V E L	16							
	Ь	Less Cost-of-goods so	518 . ()			1				
	[100, 0					
	1	Off Tnc 2mg (attac	s) (attack schedule) ch schedule)							
_	12	Total, Add lines 1 t	brough #1	.	336,474	. 33	6,474.			
	13	Compensation of office	es directors, trustees, etc		65,000.					65,000
	14	Other employee sal	aries and wages				NONE		NONE	
Expenses	15	Pension plans, emp	oloyee benefits				NONE		NONE	
Эe	16a	Legal fees (attach s								
Ä	b		ttach schedule)			_				
	C	•	fees (attach scheding 4		56,540.	. 5	6,540.			
rati	17						2 4 : 2			
ist	18		e) (see instructions) STMT 5		8,266.		2,448.			
֝֟֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓	19	•	h schedule) and depletion	·						
and Administrative	20				_ 		NONTE		3703	-
2	21		, and meetings				NONE		NONE	
	22		ations CTMT C		27 042		NONE		NONE	25 212
6 Operating	23	· ·	tach schedule) STMT. 6		27,042.		+			27,042
e a	24	• •	d administrative expense	1	156,848.	_	ا موم و:		NONE	00 040
ş	2.	•	gh 23		534,000.		8,988.		NONE	92,042
3	25 26	-	, grants paid		690,848.		8,988.	,	NONE	534,000
ည_ ညည်	27	Subtract line 26 from	ursements Add lines 24 and :	2.0	020,040.		,0, 500.		NOINE	626,042
ຣັ			expenses and disbursements		-354,374					
			come (if negative, enter -0	-	331,314.	27	7,486.			
	, ,			·		+ 	. ,			

Part II		Balanca Chaota	Attached schedules and amounts in the description column should be for end-of-year		End (of year
	art II	Balance Sheets	amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-beari	ng	207,746.	373,356	
	2 ,	Savings and temporary	cash investments	111,219.	221,551	. 221,551
	3	Accounts receivable ▶_				
		Less: allowance for doub	otful accounts ►			
	4	Pledges receivable ▶_				
		Less allowance for doub	otful accounts >			
	5	Grants receivable				
	6	Receivables due from	officers, directors, trustees, and other			
		disqualified persons (att	ach schedule) (see instructions)			
			eceivable (attach schedule)			
		Less: allowance for doub	otful accounts >NONE			
s	8	Inventories for sale or us	se			
Assets	9	Prepaid expenses and d	eferred charges			
As	10 a	Investments - U.S. and state	government obligations (attach schedule)			
			stock (attach schedule) . STMT .7	2,603,304.		
	11 ^C	Investments - land, building		2,105,786.	2,202,900	2,457,865
		Less accumulated deprecia (attach schedule)				
	12	Investments - mortgage	loans	601 565	E04 214	647, 672
	14	Land, buildings, and	ch schedule)	621,565.	704,314	647,673
		(attach schedule)	ition			
	15	Other assets (describe	>)			
	16		completed by all filers - see the	F 640 600	E 200 004	(000 553
_			age 1, item I)	5,649,620.	5,388,084	6,802,553
	17		ccrued expenses			-
	18					
Liabilities	19					-
Ę	20	•	rs, trustees, and other disqualified persons			
Liak	21		tes payable (attach schedule)			-
	22	Other liabilities (describe	e ▶)			
	23	Tetal liabilities (add line	es 17 through 22)			
_	23	Foundations that fol	low SFAS 117, check here At through 26 and lines 30 and 31.			
ş	24	•				
nce	25					
ala	26					
e e	-"	· · · · · · · · · · · · · · · · · · ·	not follow SFAS 117,]
٦			plete lines 27 through 31.			
<u>-</u>	24 25 26 27		apal, or current funds	5,441,199.	5,388,084	
ţ	28		land, bldg , and equipment fund			
sse	29		ated income, endowment, or other funds	208,421.		
t A	28 29 30 31	Total net assets or fund	balances (see instructions)	5,649,620.	5,388,084	_
Š	31	Total liabilities and	net assets/fund balances (see			
_				5,649,620.	5,388,084	
			anges in Net Assets or Fund		······································	
1	Total	net assets or fund b	alances at beginning of year - Part	II, column (a), line 30	(must agree with	
	end-c	of-year figure reported	on prior year's return)	. 	<u>1</u>	5,649,620.
2	Enter	amount from Part I, I	ıne 27a	. <u> </u>	2	-354,374.
3	Othe	r increases not includ	ine 27a ed in line 2 (itemize) ► SEE STA	TEMENT 10		93,296.
			line 2 (itemize) ► SEE STA			5,388,542.
5	Decre	eases not included in	line 2 (itemize) SEE STA	TEMENT 11	5	458.
<u>6</u>	Total	net assets or fund ba	lances at end of year (line 4 minus li	ne 5) - Part II, column (b)	, line 30 6	5,388,084.

Part IV Capital Gains	and Losses for Tax on Inve	estment Income			
	describe the kind(s) of property sold (each warehouse; or common stock, 200		(b) How acquired P-Purchase D-Donation	(c) Date acquired (mo., day, yr)	(d) Date sold (mo , day, yr)
a PUBLICLY TRADED					
b					
C					
d		<u> </u>			
е				<u> </u>	<u> </u>
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		(h) Gain or (lo (e) plus (f) min	
a 1,290,306.		1,161,331.		1:	2 <u>8,975.</u>
b					
С					
<u>d</u>					
e			ļ		
Complete only for assets sl	nowing gain in column (h) and owned	by the foundation on 12/31/69		Gains (Col (h) g	
(i) F M.V as of 12/31/69	(j) Adjusted basis	(k) Excess of col (i)	col	(k), but not less Losses (from co	
	as of 12/31/69	over col (j), if any		· · · · · · · · · · · · · · · · · · ·	
a				12	28,975.
b					· · · · · · · · · · · · · · · · · · ·
С					
d					
<u>e</u>					
Capital gain net income or	mot conital local	gain, also enter in Part I, line 7	,		120 042
•	("'	(loss), enter -0- in Part I, line 7	2		129,042.
	or (loss) as defined in sections 122 : I, line 8, column (c) (see insti				
_			,		
	- day Castian 4040(a) for Pade	uced Tax on Net Investment I	3 		
	he section 4942 tax on the distrib	outable amount of any year in the b	ase perio	d?	Yes X N
	ot qualify under section 4940(e).	see the instructions before making	any ontri	ios	
1 Enter the appropriate amo			any entir	(d)	
Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets		Distribution ra (col (b) divided by	col (c)}
2010	688,514.	6,899,871.			0.099787
2009	472,461.	7,175,958.			0.065839
2008	379,882.	7,676,087.			0.049489
2007	546,343.	9,414,536.			0.058032
2006	491,455.	8,839,769.			0.055596
					0 220742
! Iotal of line 1, column (d)		the Antal on Bess O has Foresteed	2		0.328743
•	for the 5-year base period - divide t	-			0 065740
number of years the found	ation has been in existence if less	than 5 years	3		0.065749
Enter the net value of none	charitable-use assets for 2011 fror	m Part X, line 5	4		5,630,985
Multiply line 4 by line 3			5		435,981
Enter 1% of net investmen	t income (1% of Part I, line 27b)		6		2,775
Add lines 5 and 6			7		438,756
B Enter qualifying distribution If line 8 is equal to or green Part VI instructions.	ns from Part XII, line 4	n Part VI, line 1b, and complete t	8 Inat part	using a 1% ta	626,042 c rate See th

Par	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see in	ıstru	ctions)	_
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)			
Ь	Domestic foundations that meet the section 4940(e) requirements in Part V, check		2,775	·
	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-) 2			
3	Add lines 1 and 2		2,775	
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 4		NON	Ē
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0		2,775	_
6	Credits/Payments:			_
а	2011 estimated tax payments and 2010 overpayment credited to 2011 6a 6, 660 .			
ь	Exempt foreign organizations - tax withheld at source			
С	Tax paid with application for extension of time to file (Form 8868) 6c NONE			
d	Backup withholding erroneously withheld			
7	Total credits and payments. Add lines 6a through 6d		6,660	
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached			_
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed			_
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid		3,885	<u>.</u>
11	Enter the amount of line 10 to be: Credited to 2012 estimated tax ▶ 2,776. Refunded ▶ 11		1,109	
Par	t VII-A Statements Regarding Activities			_
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate		Yes No	<u>)</u>
	or intervene in any political campaign?	1a		<u>X</u>
b	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		X
	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.	1		
С	Did the foundation file Form 1120-POL for this year?	1c		X
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:			
	(1) On the foundation ▶\$ (2) On foundation managers. ▶\$			
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed			
	on foundation managers > \$			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		X
	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		<u>X</u>
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		X
b	If "Yes," has it filed a tax return on Form 990-T for this year?	4b		_
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		<u>X</u>
	If "Yes," attach the statement required by General Instruction T.			
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	X	_
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	X	_
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)		1	
	NJ			
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	8b	X	_
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		<u>X</u>
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names		,	٠,
	and addresses	10		<u>X</u>
	F	00	A DE 12011	

c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.

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?

3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise

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X

3b

Par	VII-B Statements Regarding Activities for	Which Form 47	720 May Be Requ	ired (continued)		
5a	During the year did the foundation pay or incur any amou	nt to:				
	(1) Carry on propaganda, or otherwise attempt to influence	ce legislation (section	1 4945(e))?	Yes X No		
	(2) Influence the outcome of any specific public ele	-	· ·			
	directly or indirectly, any voter registration drive?			()		
	(3) Provide a grant to an individual for travel, study, or other				1	
	(4) Provide a grant to an organization other than a	• •			, I	
	section 509(a)(1), (2), or (3), or section 4940(d)(2)? (s	•	-		_	
				- — —	•	1
	(5) Provide for any purpose other than religious, ch		•		_	
	purposes, or for the prevention of cruelty to children of					
D	If any answer is "Yes" to 5a(1)-(5), did any of the					
	Regulations section 53.4945 or in a current notice regard				<u>5b</u>	
	Organizations relying on a current notice regarding disast			·		
C	If the answer is "Yes" to question 5a(4), does the	foundation claim ex	kemption from the ta	× — —		
	because it maintained expenditure responsibility for the g	rant?		Yes No)	[[
	If "Yes," attach the statement required by Regulations sect	ion 53.4945-5(d).			•	
6a	Did the foundation, during the year, receive any fund	ds, directly or indire	ectly, to pay premium	ns —	i	
	on a personal benefit contract?			. Yes X No	,	
ь	Did the foundation, during the year, pay premiums, directly	y or indirectly, on a p	ersonal benefit contra	et?	6b	X
	If "Yes" to 6b, file Form 8870.					
7a	At any time during the tax year, was the foundation a part	ty to a prohibited tax	shelter transaction?	Yes X No	,	
b	If "Yes," did the foundation receive any proceeds or have a	any net income attrib	utable to the transaction	on?	7ь	
Par	VIII Information About Officers, Directors	, Trustees, Foun	dation Managers	Highly Paid Empl	oyees,	
1	and Contractors List all officers, directors, trustees, foundation ma	nagare and their	compensation (see	instructions)		
<u> </u>		(b) Title, and average	(c) Compensation	(d) Contributions to	(e) Expens	se account,
	(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	employee benefit plans and deferred compensation		owances
SEE	STATEMENT 12		65,000.	-0-		-0-
		1				
						
		J	,			
						-
	Compensation of five highest-paid employees	Other than thos	se included on line	e 1 - see instruction	nns) If n	one enter
_	"NONE."	totale than the			J.1.07. 1. 1.	,
		(b) Title, and average		(d) Contributions to employee benefit	(e) Expens	se account,
(a	Name and address of each employee paid more than \$50,000	hours per week	(c) Compensation	plans and deferred		owances
		devoted to position	<u> </u>	compensation		
ATON:			NONE	MONE	N	OME
NON	<u> </u>		NONE	NONE		ONE
						
		L				
Tota	number of other employees paid over \$50,000 .	<u> </u>	<u></u> .	<u></u>		NONE

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_	
D~~~	

	Information About Officers, Directors, Trustees, Foundation Managers, land Contractors (continued)	Highly Paid Employ	/ees,
3 Five hig	hest-paid independent contractors for professional services (see instructions). I	f none, enter "NONE	."
		Type of service	(c) Compensation
NONE			NONE
Total number	of others receiving over \$50,000 for professional services	▶	NONE
Part IX-A	Summary of Direct Charitable Activities		
	ntion's four largest direct charitable activities during the tax year. Include relevant statistical information and other beneficiaries served, conferences convened, research papers produced, etc	such as the number of	Expenses
1 NONE			
2			
3			
4			
-			
Part IX-B	Summary of Program-Related Investments (see instructions)		
	o largest program-related investments made by the foundation during the tax year on lines 1 and 2		Amount
1NONE			
2			
	am-related investments. See instructions		
зйойЁ			
Total. Add lin	es 1 through 3	▶	

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	6,167,216.
b	Average of monthly cash balances	1b	564,748.
С	Fair market value of all other assets (see instructions)	1c	NONE
d		1d	6,731,964.
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	NONE
3		3	6,731,964.
4	Subtract line 2 from line 1d		
		4	100,979.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	6,630,985.
6	Minimum investment return. Enter 5% of line 5	6	331,549.
Pa	To Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here ☐ and do not complete this		
1	Minimum investment return from Part X, line 6	1	331,549.
	Tax on investment income for 2011 from Part VI, line 5		
 b		1	
c	Add lines 2a and 2b	1 2c	2,775.
3	Distributable amount before adjustments. Subtract line 2c from line 1		328,774.
4	Recoveries of amounts treated as qualifying distributions		NONE
5	Add lines 3 and 4	5	328,774.
6	Deduction from distributable amount (see instructions)	6	NONE
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII,		
•	line 1	7	328,774.
Pa	rt XII Qualifying Distributions (see instructions)		5207.
	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:	<u> </u>	
1		1a	626,042.
a	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1b	020,042.
b	Program-related investments - total from Part IX-B Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,	10	
2	•		NONE
	purposes	2	NONE
3	Amounts set aside for specific charitable projects that satisfy the:	20	NONE
a	Suitability test (prior IRS approval required)		NONE NONE
b	Cash distribution test (attach the required schedule)	4	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	-4	626,042.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income.		ט ממר
	Enter 1% of Part I, line 27b (see instructions)	6	2,775.
6	Adjusted qualifying distributions. Subtract line 5 from line 4		623,267.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when call qualifies for the section 4940(e) reduction of tax in those years.	iculating wh	netner the foundation

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	rt XIII Undistributed Income (see instru	ictions)			Page 9
μĒ	Chaistibated income (see motific	(a)	(b)	(c)	(d)
1	Distributable amount for 2011 from Part XI,	Corpus	Years prior to 2010	2010	2011 328,774.
2	Undistributed income, if any, as of the end of 2011				320,114.
2	Enter amount for 2010 only			NONE	
	Total for prior years: 20 09, 20, 20		NONE	HONE	
	Excess distributions carryover, if any, to 2011:		NONL		
3	: · · · · · · · · · · · · · · · · · · ·				
a h	From 2006 NONE From 2007				
	From 2008				
٥	From 2009				
u	From 2010				
	Total of lines 3a through e	558,693.			
4	Qualifying distributions for 2011 from Part XII,	330,033.			
•	line 4. ► \$ 626,042.				
•	Applied to 2010, but not more than line 2a			NONE	
				1,01,12	
b	Applied to undistributed income of prior years (Election required - see instructions)		NONE		
C	Treated as distributions out of corpus (Election	NIONIE			
	required - see instructions)	NONE			220 774
	Applied to 2011 distributable amount	297,268.			328,774.
	Remaining amount distributed out of corpus	NONE			NONE
5	Excess distributions carryover applied to 2011. (If an amount appears in column (d), the same	NONE			NONE
6	amount must be shown in column (a).)				
а	Corpus Add lines 3f, 4c, and 4e Subtract line 5	855,961.			
ь	Prior years' undistributed income. Subtract				
	line 4b from line 2b		NONE		
С	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		MONT		
	been previously assessed		NONE		
d	Subtract line 6c from line 6b. Taxable		NONE		
е	amount - see instructions		HONE		
	4a from line 2a. Taxable amount - see instructions			NONE	
f	Undistributed income for 2011 Subtract lines				
	4d and 5 from line 1. This amount must be				MONTE
	distributed in 2012				NONE
7	Amounts treated as distributions out of corpus				
	to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (see instructions)	NONB			
8	Excess distributions carryover from 2006 not applied on line 5 or line 7 (see instructions)	NONE			
9	Excess distributions carryover to 2012.				· —
	Subtract lines 7 and 8 from line 6a	855,961.			
10	· • · · · · · · · · · · · · · · · · · ·			}	
а	Excess from 2007 59,622.				
Ь	Excess from 2008 2,334.	}			
C	Excess from 2009 141,153.				
d	Excess from 2010 355, 584.				
e	Excess from 2011 297, 268.				
					Form 990-PF (2011)

JSĀ 1E1490 1 000

SEE ATTACHED STATEMENT FOR LINE 2

Part XV Supplementary Information (continued)										
3 Grants'and Contributions Paid Durin	g the Year or Appro		uture Payment							
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount						
Name and address (home or business)	any foundation manager or substantial contributor	recipient	contribution							
a Paid during the year										
SEE STATEMENT 16										
		İ								
		ļ								
			•							
		l								
•		1								
		<u> </u>								
Total			▶ 3a	534,000.						
b Approved for future payment										
.,			<u> </u>							
		1								
		1								
Total										
	<u> </u>			<u> </u>						

Part XVI-	A Analysis of Income-Produ				······································	····
Enter gross a	amounts unless otherwise indicated.	Unrela	ated business income	Excluded by	section 512, 513, or 514	(e) Related or exempt
•		(a) Business code	(b) Amount	(c)	(d) Amount	function income
1 Program	service revenue	Business code	Amount	Exclusion code	Amount	(See instructions)
			<u> </u>	- 		
						
e f					-	
	and contracts from government agencies			 		
_	ship dues and assessments					
	n savings and temporary cash investments			14	89.	
	s and interest from securities			14	207,343.	
	al income or (loss) from real estate:					
	financed property					
	lebt-financed property					
	income or (loss) from personal property .					
7 Other inv	vestment income					
8 Gain or (lo	oss) from sales of assets other than inventory			18	129,042.	18018
9 Net inco	me or (loss) from special events			_		
10 Gross pre	ofit or (loss) from sales of inventory					
11 Other rev	venue: a					
ь						
c						
d			-	-		
e		·			336,474.	
	Add columns (b), (d), and (e)					336,474.
	dd line 12, columns (b), (d), and (e) eet in line 13 instructions to verify calcu					330/1/4.
Part XVI-			complishment of E	xempt Purp	oses	
Line No.	Explain below how each activit					tod importantly to the
	accomplishment of the foundation					
▼	accomplishment of the loandate	on a exemp	t porposes totaler talen		Tando to: Saon parposos	
					. 10	
		-				
						
			NOT APPLICABI	· r		
	-		NOT APPLICABL	<u> </u>		
			· · · · · · · · · · · · · · · · · · ·			
						

• , Form 990-P					22-6063514			ge 13
Part XV	Information R Exempt Organ		insfers To and Transa	ctions a	and Relationships With Non	charit	table	;
1 Did			engage in any of the follow	ing with	any other organization described		Yes	No
					n section 527, relating to political			
org	anızations?							
a Tra	nsfers from the reporting	g foundation to	a noncharitable exempt org	anization	of:			
(1)	Cash	- 				1a(1)		Х
						1a(2)		Х
	er transactions:	•						
(1)	Sales of assets to a non	charitable exem	pt organization			1b(1)		Х
			-			1b(2)		X
			-			1b(3)		Х
						1b(4)		X
						1b(5)		X
	•					1b(6)		Х
c Sha	arıng of facilities, equipm	nent, mailing list	s, other assets, or paid emp	loyees .		1c		Χ
					e. Column (b) should always shov	v the	fair m	narket
valı	ue of the goods, other	assets, or servi-	ces given by the reporting	foundation	on. If the foundation received less	than	fair m	narket
valı	ue in any transaction of	r sharing arrang	ement, show in column (d	the val	ue of the goods, other assets, or s	ervices	s rece	₃ıved.
(a) Line no	(b) Amount involved	(c) Name of n	oncharitable exempt organization	(d) I	Description of transfers, transactions, and sha	ring arra	ngeme	nts
•								
				-				
-								
				<u> </u>				
				 				
								
				- 				
·								
_								
	 			_		-		
			filiated with, or related to, ther than section 501(c)(3))		nore tax-exempt organizations	Ye	es 🗆	X No
	Yes," complete the follow						_	_
	(a) Name of organization		(b) Type of organization		(c) Description of relation	ship		
•	.,		-					
		-						
	· · · · · · · · · · · · · · · · · · ·							
Ti	Under penalties of periury, I decl	are that I have exami	ned this return, including accompanying	schedules	and statements, and to the best of my knowled	ge and b	elief, it	ıs true,
C: 3	correct, and complete Declaration of	of preparer (other than to	expayer) is based on all information of wh	ich prebarer l	has any knowledge			

Sign Here

Signature of officer or trustee

08/30/2012

Preparer's agnature

Date

Date

with	the	prep	are	er s	hown	return below
(see i	nstru	ctions)?	X	Yes	No

Paid Preparer **Use Only** Print/Type preparer's name

► WELLS FARGO BANK Firm's address ▶ 1525 W W.T. HARRIS BLVD.

NC

08/30/2012 self-employed P00116953 Firm's EIN ▶ 94-3080771

Check

704-427-6882 Phone no

Form 990-PF (2011)

CHARLOTTE

FORM 990PF, PART I - INTEREST ON TEMPORARY CASH INVESTMENTS

NET INVESTMENT INCOME	8 8 8 8 8 8 8 8 8 8
REVENUE AND EXPENSES PER BOOKS	8 9 8 8 9
	TOTAL
	WFB MONEY MARKET DEPOSIT ACCOUNT
DESCRIPTION	WFB MONEY MARKET

FORM 990PF, PART I - DIVIDENDS AND INTEREST FROM SECURITIES

NET INVESTMENT INCOME	7,125. 1,188. 6,056. 9,500. 1,800. 1,200. 1,1,100. 1,2,000. 1,2,000. 1,2,000. 1,2,000. 4,512.
REVENUE AND EXPENSES PER BOOKS	7,125. 1,188. 6,020. 9,500. 1,800. 3,986. 3,986. 1,100. 10,000. 11,100. 11,100. 12,000. 12,000. 12,000. 12,000. 12,000. 3,285. 4,377.
DESCRIPTION	BANKAMERICA CORP SUB NT DTD 10/24/96 7.1 CENOVUS ENERGY INC CHUBB CORP COM CISCO SYSTEMS INC E.I. DU PONT DE NEMO 4.750% 3/14/17 E.I. DU PONT DE NEMO 4.750% 3/15/15 ENCANA CORP EXXON MOBIL CORP COM GENERAL ELEC CO COM HEWLETT-PACKARD CO COM INTL BUSINESS MACHINES CORP COM JOHNSON & JOHNSON COM L-3 COMMUNICATIONS HLDGS INC COM MANTECH INTERNATIONAL CORP-A ANTECH INTERNATIONAL CORP-A MEDTRONIC INC MANTECH INTERNATIONAL CORP-A MEDTRONIC INC MANTECH INTERNATIONAL CORP-A MEDTRONIC INC MICROSOFT CORP MORGAN STANLEY S. 5.000% 8/31/25 NIKE INC CL B COM PEPSICO INC NIKE INC COM PEPSICO INC PEPSICO INC PERSICO INC PERSICO INC PERSICO INC PROCTER & GAMBLE CO COM OUALCOMM INC COM PEPSICO INC PROSTICO INC PROST

STATEMENT

FORM 990PF, PART I - DIVIDENDS AND INTEREST FROM SECURITIES

NET INVESTMENT INCOME	12,250. 17,500. 121. 6,320. 96.	207,343.
	12,250. 17,500. 121. 6,320.	207,343.
DESCRIPTION	UNITED TECHNOLOGIES 6.125% 2/01/19 UNITED TECHNOLOGIES 6.125% 2/01/19 UERIZON COMMUNICATIO 8.750% 11/01/18 WABTEC COM TRANSOCEAN LTD. OTHER INTEREST	TOTAL

FORM 990PF, PART I - OTHER PROFESSIONAL FEES

NET	INVESTMENT INCOME	1 1 1 1		38,378.	56,540.	
REVENUE AND	EXPENSES PER BOOKS	1 1 1 1 1 1	18,162.	38,378.	56,540.	
	DESCRIPTION		WELLS FARGO INVESTMENT MGMT FE	NEVILLE, RODIE & SHAW - ADVISO	TOTALS	

FORM 990PF, PART I - TAXES

NET INVESTMENT INCOME	1 1 1 1 1	2,448.	2,448.
REVENUE AND EXPENSES PER BOOKS	! ! ! ! ! ! ! ! ! ! ! ! ! ! ! ! ! ! !	2,448. 5,818.	8,266.
DESCRIPTION		FOREIGN TAXES FEDERAL ESTIMATES - PRINCIPAL	TOTALS

STATEMENT

FORM 990PF, PART I - OTHER EXPENSES

REVENUE AND EXPENSES PER BOOKS	2,100. 24. 21,600. 3,292.	27,042.
DESCRIPTION	WEBSITE DEVELOPMENT BANK SERVICE CHARGES OFFICE RENTAL STATE OF NEW JERSEY OFFICE RENTAL MAINTENANCE	TOTALS

2,100. 24. 21,600. 3,292.

CHARITABLE PURPOSES

27,042.

22-6063514

- CORPORATE STOCK FORM 990PF, PART II

AARON & RACHEL MEYER MEMORIAL FOUNDATION

22-6063514

FORM 990PF, PART II - CORPORATE BONDS

DESCRIPTION	ENDING BOOK VALUE	ENDING FMV
066050CMS BANKAMERICA CORP SUB		
17275RAK8 CISCO SYSTEMS INC	\circ	16,64
263534BX6 E.I. DU POINT	199,428.	221,814.
585055AN6 MEDTRONIC INC	7'00	36,97
617446H51 MORGAN STANLEY MED	\circ	04,66
61745E5Q0 MORGAN STANLEY MED	98,5	97,51
713448BG2 PEPSICO INC	00,3	07,29
87612EAS5 TARGET CORP	00	43,80
	,66	45,68
92343VAQ7 VERIZON COMMUNICATIO	199,900.	271,406.
428236BT9 HEWLETT-PACKARD CO	00	03,18
478366AZ0 JOHNSON CONTROLS INC	00	03,00
548661CS4 LOWE'S COMPANIES INC 61745E5Q0 MORGAN STANLEY	, 66	05,88
TOTALS	2,202,900.	2,457,865.

FOUNDATION
MEMORIAL
MEYER
RACHEL
AARON &

INVESTMENTS	COST/ FMV C OR F	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	טטטטטטט
FORM 990PF, PART II - OTHER INVESTMENTS			4 ENCANA CORP 9 TEVA PHARMACEUTICAL 9 TORONTO DOMINION 0 TRANSOCEAN LTD 3 WEATHERFORD INTL 8 SCHLUMBERGER LTD 7 SUNCOR ENERGY INC
FORM 990F	ESCRIPT		292505104 881624209 891160509 H8817H100 H27013103 806857108

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ENDING	157,710.	111,888.
FMV	144,415.	124,260.
	109,400.	
ENDING BOOK VALUE	143,055. 134,409. 148,887.	140,800. 137,163. 704,314.

==============

FORM 990PF, PART III - OTHER INCREASES IN NE	ET WORTH OR FUND BALANCES
DESCRIPTION	TMUOMA
ACCD IN PURCHASED PRIOR YR EFF CURRENT YR	245.
BEGINNING BOOK VALUE ADJUSTMENT	93,051.
TOTAL	93,296.

FORM 990PF, PART III - OTHER DE	ECREASES IN NET WORTH	OR FUND BALANCES			
DESCRIPTION AMOUNT					
ACCD INT PURCHASED CURRENT YR E	EFF NEXT YR	458.			
THE STATE OF THE PARTY OF THE P					
	TOTAL	458.			
		==========			

FORM 990PF, PART VIII - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES ______

OFFICER NAME:

PHILIP B. LOWY

ADDRESS:

811 COLONIAL ROAD

FRANKLIN LAKES, NJ 07417

TITLE:

PRESIDENT

AVERAGE HOURS PER WEEK DEVOTED TO POSITION: 5

OFFICER NAME:

ALISSA MURPHY

ADDRESS:

811 COLONIAL ROAD

FRANKLIN LAKES, NJ 07052

SECRETARY/TREASURER

AVERAGE HOURS PER WEEK DEVOTED TO POSITION: 25

65,000. COMPENSATION

OFFICER NAME:

JANEY LOWY

ADDRESS:

811 COLONIAL ROAD

FRANKLIN LAKES, NJ 07052

TITLE:

VICE PRESIDENT

AVERAGE HOURS PER WEEK DEVOTED TO POSITION: 5

TOTAL COMPENSATION:

65,000.

==========

AARON & RACHEL MEYER MEMORIAL FOUNDATION FORM 990PF, PART XV - LINES 2a - 2d

RECIPIENT NAME:

PHILIP LOWY

ADDRESS:

811 COLONIAL ROAD

FRANKLIN LAKES, NJ 07417

RECIPIENT'S PHONE NUMBER: NONE LISTED

FORM, INFORMATION AND MATERIALS:

APPLY ONLINE AT http://www.armeyerfoundation.org/applications_form.htm A FREE FORM APPLICATION WILL ALSO BE ACCEPTED AND MUST INCLUDE A PROPOSAL STATEMENT AND A COPY OF THE IRS DETERMINATION LETTER.

SUBMISSION DEADLINES:

MARCH 1 ANNUALLY FOR APRIL REVIEW MEETING

NOVEMBER 1 ANNUALLY FOR OCTOBER REVIEW MEETING

RESTRICTIONS OR LIMITATIONS ON AWARDS:

PRIORITY IS GIVEN TO THE NORTHEASTERN NEW JERSEY AREA. FOCUS IS ON HEALTHCARE, HUMAN SERVICES, RESEARCH, EDUCATION, ANIMAL WELFARE, AND THE ARTS.

RECIPIENT NAME:

BOROUGH OF FRANKLIN LAKES POLICE

ADDRESS:

480 DE KORTE DR

FRANKLIN LAKES, NJ 07417

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

TACTICAL BALLISTIC VESTS

FOUNDATION STATUS OF RECIPIENT:

PUBLIC EXEMPT

RECIPIENT NAME:

NEW YORK-PRESBYTERIAN FUND

ADDRESS:

525 E 68TH STREET

NEW YORK, NY 10065

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

CAPITAL IMPROVEMENTS/ENHANCING EPILEPSY DIAGN

FOUNDATION STATUS OF RECIPIENT:

PUBLIC EXEMPT

RECIPIENT NAME:

AMERICAN HEART ASSOCIATION

ADDRESS:

7272 GREENVILLE AVE

DALLAS, TX 75231

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

CRS - HOOPS

FOUNDATION STATUS OF RECIPIENT:

PUBLIC EXEMPT

RECIPIENT NAME:

CHRISTIAN HEALTH CARE CENTER FDN

ADDRESS:

301 SICOMAC BLDG 1 WYCHOFF, NJ 07481

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

POST-ACUTE CARE ENHANCEMENTS

FOUNDATION STATUS OF RECIPIENT:

PUBLIC EXEMPT

RECIPIENT NAME:

BOYS & GIRLS CLUB OF PATERSON

AND PASSAIC

ADDRESS:

264 21ST AVE.

PATERSON, NJ 07501

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

GENERAL USE

FOUNDATION STATUS OF RECIPIENT:

PUBLIC EXEMPT

AMOUNT OF GRANT PAID 6,000.

RECIPIENT NAME:

THE VALLEY HOSPITAL FOUNDATION

ADDRESS:

2223 N. VAN DIEN AVE.

RIDGEWOOD, NJ 07450

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

PURCHASE OF DAVINCI ROBOTIC SI MACHINE

FOUNDATION STATUS OF RECIPIENT:

PUBLIC EXEMPT

AMOUNT OF GRANT PAID 450,000.

AARON & RACHEL MEYER MEMORIAL FOUNDATION 22-6063514 FORM 990PF, PART XV, LINE 3 - CONTRIBUTIONS, GIFTS, GRANTS PAID ______ RECIPIENT NAME: OASIS ADDRESS: 59 MILLS ST PATERSON, NJ 07501 RELATIONSHIP: NONE PURPOSE OF GRANT: OKTOBERFEST FOUNDATION STATUS OF RECIPIENT: PUBLIC EXEMPT AMOUNT OF GRANT PAID 5,000. RECIPIENT NAME: FRANKLIN LAKES VOLUNTEER FIRE DEPARTMENT ADDRESS: PO BOX 199 FRANKLIN LAKES, NJ 07417 RELATIONSHIP: NONE PURPOSE OF GRANT: WATER BOAT RESCUE FOUNDATION STATUS OF RECIPIENT: PUBLIC EXEMPT

AMOUNT OF GRANT PAID

TOTAL GRANTS PAID:

534,000.

5,000.

===============

SCHEDULE D (Form 1041)

Department of the Treasury Internal Revenue Service

Capital Gains and Losses

► Attach to Form 1041, Form 5227, or Form 990-T. See the Instructions for Schedule D (Form 1041) (also for Form 5227 or Form 990-T, if applicable).

OMB No 1545-0092

2011

Employer identification number

AARON & RACHEL MEYER MEMORIAL FOUNDATION 22-6063514 Note: Form 5227 filers need to complete only Parts I and II. Short-Term Capital Gains and Losses - Assets Held One Year or Less (f) Gain or (loss) for (b) Date acquired (c) Date sold (e) Cost or other basis (a) Description of property (d) Sales price the entire year (Example: 100 shares 7% preferred of "Z" Co) (see instructions) (mo, day, yr) (mo, day, yr) Subtract (e) from (d) 1a <u>18,0</u>67. 1b Net short-term gain or (loss) from partnerships, S corporations, and other estates or trusts Short-term capital loss carryover. Enter the amount, if any, from line 9 of the 2010 Capital Loss Net short-term gain or (loss). Combine lines 1a through 4 in column (f). Enter here and on line 13, 18,067 column (3) on the back Long-Term Capital Gains and Losses - Assets Held More Than One Year (f) Gain or (loss) for (b) Date acquired (e) Cost or other basis (c) Date sold (a) Description of property the entire year (d) Sales price (see instructions) (Example 100 shares 7% preferred of "Z" Co) (mo,day,yr) (mo, day, yr) 6a 67. LONG-TERM CAPITAL GAIN DIVIDENDS 110,908 b Enter the long-term gain or (loss), if any, from Schedule D-1, line 6b............. Long-term capital gain or (loss) from Forms 2439, 4684, 6252, 6781, and 8824 7 Net long-term gain or (loss) from partnerships, S corporations, and other estates or trusts . . . 10 10 Long-term capital loss carryover. Enter the amount, if any, from line 14 of the 2010 Capital Loss 11 Net long-term gain or (loss). Combine lines 6a through 11 in column (f). Enter here and on line 14a, 12 110,975 Schedule D (Form 1041) 2011 For Paperwork Reduction Act Notice, see the Instructions for Form 1041

Sched	dule D (Form 1041) 2011				Page 2
Par	t III Summary of Parts I and II		(1) Beneficiaries'	(2) Estate's	(3) Total
	Caution: Read the instructions before completing this p	oart.	(see instr)	or trust's	(3) TO(a)
13	Net short-term gain or (loss)	13_		<u> </u>	18,067.
14	Net long-term gain or (loss):				
	Total for year	14a			110,975.
b	Unrecaptured section 1250 gain (see line 18 of the wrksht.)	14b			
	28% rate gain	14c			
	Total net gain or (loss). Combine lines 13 and 14a ▶	15			129,042.
Note	e: If line 15, column (3), is a net gaın, enter the gaın on Form 1041, line 4 (s, go to Part V, and do not complete Part IV. If line 15, column (3), is a net loss, co	or For	m 990-T, Part I, line 48	a) If lines 14a and 15 Lloss Carryover Works	, column (2), are net
		inpiec	e i ait iv and the dupita	- Loss Carryover Works	nect, as necessary
	t IV Capital Loss Limitation	:	4. 5.4. 4) 41-2-2		
16	Enter here and enter as a (loss) on Form 1041, line 4 (or Form 990-T, Pa				1
Note	The loss on line 15, column (3) or b \$3,000	 e 1, lin	e 22 (or Form 990-T, li	ne 34), is a loss, comp	lete the Capital Loss
Par	t V Tax Computation Using Maximum Capital Gains Rate	s			
Forn	1041 filers. Complete this part only if both lines 14a and 15 in colu	mn (2) are gains, or an am	nount is entered in F	Part I or Part II and
there	e is an entry on Form 1041, line 2b(2), and Form 1041, line 22, is mor	e thar	r zero.		
	ion: Skip this part and complete the Schedule D Tax Worksheet in the in	nstruc	tions if:		
	ther line 14b, col. (2) or line 14c, col. (2) is more than zero, or				
	oth Form 1041, line 2b(1), and Form 4952, line 4g are more than zero. n 990-T trusts. Complete this part only if both lines 14a and 15 are	aain	s or qualified divide	ande are included i	n income in Part I
	orm 990-T, and Form 990-T, line 34, is more than zero. Skip this part a				
	her line 14b, col. (2) or line 14c, col. (2) is more than zero.				
17	Enter taxable income from Form 1041, line 22 (or Form 990-T, line 3	41	17		-
18	Enter the smaller of line 14a or 15 in column (2)	٠, .			
10	but not less than zero				
19	Enter the estate's or trust's qualified dividends				
	from Form 1041, line 2b(2) (or enter the qualified				
	dividends included in income in Part I of Form 990-T) . 19				
20	Add lines 18 and 19				
21	If the estate or trust is filing Form 4952, enter the				
	amount from line 4g; otherwise, enter -0 \(\begin{array}{c} 21\)				
22	Subtract line 21 from line 20. If zero or less, enter -0		22		
23	Subtract line 22 from line 17. If zero or less, enter -0-		23		
	,,,,,,,,,				
24	Enter the smaller of the amount on line 17 or \$2,300		24		
25	Is the amount on line 23 equal to or more than the amount on line 24	?			
	Yes. Skip lines 25 and 26; go to line 27 and check the "No" box				
	No. Enter the amount from line 23		25		
26	Subtract line 25 from line 24		26		
27	Are the amounts on lines 22 and 26 the same?				
	Yes. Skip lines 27 thru 30, go to line 31 No. Enter the smaller of line 17 or line	e 22	27		
28	Enter the amount from line 26 (If line 26 is blank, enter -0-)		28		
29	Subtract line 28 from line 27		29		
30	Multiply line 29 by 15% (.15)				
31	Figure the tax on the amount on line 23. Use the 2011 Tax Rate				
	(see the Schedule G instructions in the instructions for Form 1041)			31	
32	Add lines 30 and 31			32	
33	Figure the tax on the amount on line 17. Use the 2011 Tax Rate			1 1	
•	(see the Schedule G instructions in the instructions for Form 1041)				
34	Tax on all taxable income. Enter the smaller of line 32 or line 33 h				
	G, line 1a (or Form 990-T, line 36)	· · ·	· · · · · · · · · · · · · · · · · · ·		D (Form 1041) 2011

JSA 1F1220 2 000

SCHEDULE D-1 (Form 1041)

Department of the Treasury

Internal Revenue Service Name of estate or trust Continuation Sheet for Schedule D (Form 1041)

➤ See instructions for Schedule D (Form 1041).

▶ Attach to Schedule D to list additional transactions for lines 1a and 6a.

OMB No 1545-0092

Employer identification number

2011

AARON & RACHEL MEYER MEMORIAL FOUNDATION 22-6063514 Part I Short-Term Capital Gains and Losses - Assets Held One Year or Less (b) Date (a) Description of property (Example 100 sh 7% preferred of "Z" Co) (e) Cost or other basis (f) Gain or (loss) (c) Date sold (d) Sales price acquired (mo, day, yr) (see instructions) Subtract (e) from (d) (mo, day, yr) 1a 3000. CENOVUS ENERGY INC 02/24/2012 117,598.00 99,531.00 18,067.00 06/23/2011

1b Total. Combine the amounts in column (f). Enter here and on Schedule D, line 1b

18,067.00

Schedule D-1 (Form 1041) 2011 Employer identification number Name of estate or trust as shown on Form 1041 Do not enter name and employer identification number if shown on the other side

AARON & RACHEL MEYER MEMORIAL FOUNDATION 22-6063514 Part II - Long-Term Capital Gains and Losses - Assets Held More Than One Year (b) Date (a) Description of property (Example 100 sh 7% preferred of "Z" Co) (e) Cost or other basis (f) Gain or (loss) (c) Date sold (d) Sales price acquired (see instructions) Subtract (e) from (d) (mo., day, yr) (mo, day, yr) 6a 100000. BANKAMERICA CORP S 99,822.00 09/11/1997 10/15/2011 100,000.00 178.00 10/24/96 7.125% 10/15/2011 800. CHUBB CORP COM 48,967.00 39,848.00 9,119.00 02/01/2010 06/23/2011 4500. ENCANA CORP 04/30/2010 11/28/2011 83,284.00 149,236.00 -65,952.00 COM 3400. GENERAL ELEC CO COM 109,180.00 61,505.00 -47,675.00 07/13/2005 06/23/2011 2000, L-3 COMMUNICATIONS H 150,020.00 -22,008.00 09/02/2009 09/27/2011 128,012.00 700. NIKE INC CL B COM 63,269.00 35,455.00 27,814.00 06/25/2009 10/10/2011 1500. PIEDMONT NATURAL GAS 43,439.00 37,115.00 6,324.00 W/RIGHTS ATTACHED EXP 2/26/ 04/24/2009 06/23/2011 200000. ROYAL BK OF SCOT G -40,282.00 11/24/2004 12/28/2011 163,000.00 203,282.00 10/01/14 500. UNITED TECHNOLOGIES 24,796.00 13,441.00 10/24/2011 38,237.00 04/24/2009 1000. WABTEC COM 39,820.00 29,229.00 10/24/2008 04/20/2011 69,049.00 1800. WABTEC COM 122,526.00 53,593.00 68,933.00 02/23/2009 11/11/2011 400. WABTEC COM 16,826.00 11/14/2011 27,190.00 10,364.00 02/23/2009 300. WABTEC COM 20,393.00 7,773.00 12,620.00 02/23/2009 11/15/2011 10000. WEATHERFORD INTL LT 101,496.00 102,341.00 11/20/2008 04/27/2011 203,837.00

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6b Total. Combine the amounts in column (f). Enter here and on Schedule D, line 6b

110,908.00

Form **8868**

(Rev_January 2012)

Department of the Treasury

Application for Extension of Time To File an Exempt Organization Return

OMB No. 1545-1709

Internal Revenue Service	separate ap	plication for each return.			
• If you are filing for an Automatic 3-Month Extension, c	-	=		► X	
• If you are filing for an Additional (Not Automatic) 3-Mo	nth Exten	sion, complete only Par	rt II (on page 2 of this form).		
Do not complete Part II unless you have already been gran	ted an auto	omatic 3-month extension	on on a previously filed Form 886	8.	
Electronic filing (e-file). You can electronically file Form	8868 if yo	u need a 3-month autor	matic extension of time to file (6	months for	
a corporation required to file Form 990-T), or an addition	ial (not aut	omatic) 3-month extens	sion of time. You can electronica	lly file Form	
8868 to request an extension of time to file any of the	forms liste	d in Part I or Part II wit	th the exception of Form 8870,	Information	
Return for Transfers Associated With Certain Personal	Benefit (Contracts, which must	be sent to the IRS in paper	tormat (see	
instructions). For more details on the electronic filing of the				ipronts.	
Part Automatic 3-Month Extension of Time. On					
A corporation required to file Form 990-T and requesting Part I only				▶□	
All other corporations (including 1120-C filers), partnership				of time	
to file income tax returns.	,	,	Enter filer's Identifying number, s		
Name of exempt organization or other filer, see ins	structions		Employer identification numbe		
Type or AARON & RACHEL MEYER MEMORIA					
print FOUNDATION			X 22-6063514		
File by the due date for Number, street, and room or suite no. If a P O. box	, see instruc	tions	Social security number (SSN)		
filing your 1525 W W.T. HARRIS BLVD. D11	14-044				
return See Instructions City, town or post office, state, and ZIP code For a	a foreign add	dress, see instructions			
CHARLOTTE, NC 28288			· · · · · · · · · · · · · · · · · · ·		
Enter the Return code for the return that this application is	s for (file a	separate application for	each return)	. 04	
		A		Detum	
Application	Return	Application Is For		Return Code	
Is For	Code	Form 990-T (corporation	on!	07	
Form 990	01 02		JII)	08	
Form 990-BL Form 990-EZ	01	Form 4720	Form 1041-A		
	04	Form 5227			
Form 990-PF Form 990-T (sec. 401(a) or 408(a) trust)		Form 6069	10		
Form 990-T (trust other than above)	05 06	Form 8870		12	
Tomi 550 T (trast other than above)		11911119079			
• The books are in the care of ▶ WELLS FARGO BAN	K, N.A.				
		·			
Telephone No. ► (908) 598-3582		AX No. ►		. —	
If the organization does not have an office or place of b					
If this is for a Group Return, enter the organization's four the organization of				his is	
for the whole group, check this box		rt of the group, check th	nis box ▶ 🔃 and at	tacn	
a list with the names and EINs of all members the extension		rused to file Form 000 7	T) outonoion of time		
1 request an automatic 3-month (6 months for a corp	oration re	quired to the Form 990-1	organization named above. The e	vtencion ic	
until 11/15, 20 12, to file the of for the organization's return for:	exempt org	gamzation return for the	organization named above. The e	Atension is	
calendar year 20 or					
X tax year beginning 04/	01.2011	. and ending	03/31.20 12 .		
	<u></u> , <u></u>				
2 If the tax year entered in line 1 is for less than 12 mg	onths, chec	k reason: Initial re	eturn Final return		
Change in accounting period					
20 If this application is for Form 990 PL 900 PE 90	O.T 4720	or 6069 enter the t	tentative tay less any		
3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions. 3a \$ 2,774.					
b If this application is for Form 990-PF, 990-T,	4720 0	6069, enter any re-		2,774.	
estimated tax payments made. Include any prior yea				6,660.	
c Balance due. Subtract line 3b from line 3a. Include				<u>-</u>	
(Electronic Federal Tax Payment System) See instru	ctions.		3c \$		
Caution. If you are going to make an electronic fund v		with this Form 8868,	see Form 8453-EO and Form 8	3879-EO for	
payment instructions					

For Privacy Act and Paperwork Reduction Act Notice, see Instructions.

Form 8868 (Rev 1-2012)