

See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



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

year 2011 or tax year be	ginning DEC	1, 2011	, and ending_	NOV 30, 20	<u> </u>	
of foundation				A Employer identific	ation number	
JOEL AND ELAINE	GERSHMAN F	OUNDATION				
C/O JAGER MANAG				22-25296	529	
Number and street (or P.O. box number if ma	all is not delivered to street	address)	Room/suite	D Telephone number		
261 OLD YORK ROA	<u> </u>		814	215-690-	-3220	
City or town, state, and ZIP code				C If exemption application	on is pending, check here	
JENKINTOWN, PA	19046		<u>.</u>	1		
G Check all that apply:	itial return	Initial return of a fo	rmer public charity	D 1 Foreign organiza	ations, check here 🗼 🕨 🛄	
En Fil	nal return	Amended return				
	dress change	Name change		2 check here and att	ons meeting the 85% test, ach computation	
		empt private foundation		E If private foundation	on status was terminated	
Section 4947(a)(1) nonexempt		Other taxable private founda	ition	under section 507	(b)(1)(A), check here 🔻 🗀	
I Fair market value of all assets at end	· · —	ng method; X Cash	Accrual		in a 60-month termination	
(from Part II, col. (c), line 16)		her (specify)	 	under section 507	(b)(1)(B), check here	
		mn (d) must be on cash l	basis.)		780	
Part I Analysis of Revenue and E (The total of amounts in columns necessarily equal the amounts in	: xpenses s (b), (c), and (d) may not	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net	for charitable purposes	
		exhenses het nongs	income		(cash basis only)	
1 Contributions, gifts, grants,				N/A		
2 Check X if the foundation is interest on savings and temporar cash investments	oot required to attach Sch. B	25		ļ	CMAMENTAM 1	
		27.	27.		STATEMENT 1	
Dividends and interest from Gross rents	Securities .	9,227.	9,227.	 	STATEMENT 2	
Gross rents Net rental income or (loss)				-	RECEIVED	
-58. Net gain or (loss) from sale of ass		1,925.		 		
الع Price for عال حال الحرابات المحرابات المحرابات المحرابات المحرابات المحرابات المحرابات المحرابات المحرابات	14,590.	1,763.		8		
assets on line da Capital gain net income (from Par			1,925.		SEP 1 8 2013	
Capital gain net income (from Par 8 Net short-term capital gain	. 19, 1410 2)		1,223.	 	<u></u>	
9 Income modifications				 	ORBENIUT	
108 Gross sales less returns						
b Less Cost of goods sold		• • • • •				
c Gross profit or (loss)						
= 11 Other income						
12 Total. Add lines 1 through 1	1	11,179.	11,179.			
13 Compensation of officers, director	rs, trustees, etc	0.	0.		0.	
14 Other employee salaries and	wages					
15 Pension plans, employee be	nefits	_				
16a Legal fees						
b Accounting fees	<u>.</u>					
c Other professional fees	STMT 3	3,869.	3,869.			
17 Interest						
17 Interest 18 Taxes 19 Depreciation and depletion 20 Occupancy 21 Travel, conferences, and me 22 Printing and publications 23 Other expenses 24 Total operating and admini expenses. Add lines 13 thro						
19 Depreciation and depletion				 	- 	
20 Occupancy		-		ļ		
21 Travel, conferences, and me	erings .			 		
22 Printing and publications					 	
23 Other expenses 24 Total operating and admini	etrotiva .			 	- 	
expenses. Add lines 13 thro		3,869.	3,869.	1	0.	
25 Contributions, gifts, grants p	- , ,	258,630.	3,003.	<u> </u>	258,630	
26 Total expenses and disburs	"	230,030.		-	230,030	
Add lines 24 and 25	··iitila.	262,499.	3,869.		258,630	
27 Subtract line 26 from line 12	::	404,433.	3,003.	 	230,030	
Supulacting 20 nomine 12 Excess of revenue over expenses	i i	<251,320.	_	1		
b Net investment income (if ne		\4JI,J4U.	7,310.	 	- 	
C Adjusted net income (it negations)	,	· . · - · · · · · · · · · · · · · · · ·	1,310.	N/A	 	
00604	Integrated Act Notice and i			N/W	Form 990-PF (2011	

JOEL AND ELAINE GERSHMAN FOUNDATION

orm 990-PF (2011) C/O JAGER MANAGEMENT,	INC.		529629 Page 2
Part II Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year	End of y	
· · · · · · · · · · · · · · · · · · ·	(a) Book Value	(b) Book Value	(c) Fair Market Value
1 Cash - non-interest-bearing	27,467.	48,863.	48,863.
2 Savings and temporary cash investments	3,745,412.	3,483,507.	3,483,507.
3 Accounts receivable ►	1	İ	
Less: allowance for doubtful accounts			
4 Pledges receivable ►	1		
Less: allowance for doubtful accounts			
5 Grants receivable			
6 Receivables due from officers, directors, trustees, and other	1		
disqualified persons			
7 Other notes and loans receivable	<u> </u>		•
Less: allowance for doubtful accounts			
8 Inventories for sale or use			
8 Inventories for sale or use 9 Prepaid expenses and deferred charges 100 Investments - U.S. and state government objections. STIMIT A			
10a Investments - U.S. and state government obligations STMT 4	100,700.	102,554.	110,835.
b Investments - corporate stock STMT 5	141,134.	141,134.	117,908.
c Investments - corporate bonds STMT 6	51,217.	51,217.	52,155.
11 Investments - tand, buildings, and equipment basis			
tess accumulated depreciation	1		
12 Investments - mortgage loans			
13 Investments - other STMT 7	53,416.	40,751.	43,018.
14 Land, buildings, and equipment basis	33/1100	30,,31.	13,010.
Less accomplated depreciation	1		
15 Other assets (describe)	 		
15 One assers (describe >			
16 Total assets (to be completed by all filers)	4,119,346.	3,868,026.	3,856,286.
17 Accounts payable and accrued expenses	3,117,330.	3,000,020.	3,030,200.
18 Grants payable			
Lea B. C. L.			
• • • • • • • • • • • • • • • • • • • •			
20 Loans from officers, directors, trustees, and other disqualified persons			
21 Mortgages and other notes payable			
22 Other liabilities (describe >)			- ··· '
23 Total liabilities (add lines 17 through 22)	0.	0.	
Foundations that follow SFAS 117, check here	, , , , , ,		
and complete lines 24 through 26 and lines 30 and 31.			
B los Unrestricted			
25 Temporarily restricted			
26 Permanently restricted			
Foundations that do not follow SFAS 117, check here			
Foundations that do not follow SFAS 117, check here			
and complete lines 27 through 31.	0.	0.	
27 Capital stock, trust principal, or current funds			
26 Permanently restricted Foundations that do not follow SFAS 117, check here and complete lines 27 through 31. 27 Capital stock, trust principal, or current funds 28 Paid-in or capital surplus, or land, bldg., and equipment fund 29 Retained earnings, accumulated income, endowment, or other funds 30 Total net assets or fund balances	0.	0.	
29 Retained earnings, accumulated income, endowment, or other funds	4,119,346.	3,868,026.	
30 Total net assets or fund balances	4,119,346.	3,868,026.	
A4	1 4 110 346	3 000 000	
31 Total liabilities and net assets/fund balances	4,119,346.	3,868,026.	
Part III Analysis of Changes in Net Assets or Fund E	Balances		
Total get accets or find halances at horizones of uses. Dot II solves (a) her	. 20		
Total net assets or fund balances at beginning of year - Part II, column (a), line	: 30		A 110 246
(must agree with end-of-year figure reported on prior year's return)	• •	· · · 1	4,119,346.
Enter amount from Part I, line 27a		2	<251,320.
Other increases not included in line 2 (itemize)		3	0.
Add lines 1, 2, and 3		4	3,868,026.
Decreases not included in line 2 (itemize)			0.
Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, o	column (b), line 30	6	<u>3,868,026.</u>

	Oblighted year (or abrigation beginning my1				
_	2010	200,133.	4,115,864.		.048625
_	2009	925,013.	4,671,089.		.198029
_	2008	247,731.	4,768,812.		.051948
_	2007	205,287.	6,118,753.		.033550
_	2006	228,879.	5,531,765.		.041375
_		· · · · · · · · · · · · · · · · · · ·		2	.373527
3	Average distribution ratio for the 5-year bas the foundation has been in existence if less		or by the number of years	3	.074705
4	Enter the net value of noncharitable-use as:	sets for 2011 from Part X, line 5		4	3,933,781.
5	Multiply line 4 by line 3			5	293,873.
6	Enter 1% of net investment income (1% of	Part I, line 27b)		6	73.
7	Add lines 5 and 6			7	293,946.
8	Enter qualifying distributions from Part XII,	line 4		8	258,630.
	If line 8 is equal to or greater than line 7, ch See the Part VI instructions.	eck the box in Part VI, line 1b, and comp	plete that part using a 1% tax rate.		

123521 12-02-11

Form 990-PF (2011)

JOEL AND ELAINE GERSHMAN FOUNDATION		c 2 0		
Form 990-PF (2011) C/O JAGER MANAGEMENT, INC. 22	<u>-2529</u>	629		age 4
Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 494	5 - See II	istru	SHOTI	5)
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)			4.	4 -
b Domestic foundations that meet the section 4940(e) requirements in Part V, check here				<u>46.</u>
of Part I, line 27b				
c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b).				^
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)				0.
3 Add lines 1 and 2				46.
	-		- 1	0.
	5		<u> </u>	46.
6 Credits/Payments;				
a 2011 estimated tax payments and 2010 overpayment credited to 2011 6a 6, 116.				
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	_		c 1.	1 6
	7		6,1	10.
	3			
	9		- 0'	70
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			5,9	
	1]			0.
Part VII-A Statements Regarding Activities		<u> </u>	Yes	No
1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in			163	
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 instructions for definition)?		1b		
If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published of	r.		ĺ	
distributed by the foundation in connection with the activities.		1 1	1	X
c Did the foundation file Form 1120-POL for this year?		1c		
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:				
(1) On the foundation. > \$ O. (2) On foundation managers. > \$ O.				
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation				
managers. > \$ 0 . 2 Has the foundation engaged in any activities that have not previously been reported to the IRS?		,	ŀ	Х
		2	-+	
 If "Yes," attach a detailed description of the activities. Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or 			- 1	
bylaws; or other similar instruments? If "Yes," attach a conformed copy of the changes		3	- 1	·X
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?	N/A	4b		
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year?	14/11	5		x
If "Yes," attach the statement required by General Instruction T.			$\neg \neg$	
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 lay	ď			
remain in the governing instrument?	•	6	x	
7 Did the foundation have at least \$5,000 in assets at any time during the year?		7	X	
If "Yes," complete Part II, col. (c), and Part XV.		<u> </u>		
8. Enter the states to which the foundation reports or with which it is registered (see instructions) NONE				
			. 1	
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)			. 1	
of each state as required by General Instruction G? If "No," attach explanation SEE STATEMEN	8 TV	8b	. 1	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 calendary				 _
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
1	For	m 990	-PF (_

123531 12-02-11

	JOEL AND ELAINE GERSHMAN FOUNDATION	•	7	
	n 990-PF (2011) C/O JAGER MANAGEMENT, INC. 22-252	<u> 29629</u>		Page 5
P	art VII-A Statements Regarding Activities (continued)	,	,	
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of			
	section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		<u>X</u>
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges?	1	 	
	If "Yes," attach statement (see instructions)	12	 ,	<u> </u>
13	· · · · · · · · · · · · · · · · · · ·	13	X	
	Website address ► N/A The books are in care of ► ELAINE GERSHMAN Telephone no. ► 215-6	200-3	220	
14	The books are in care of ► ELAINE GERSHMAN Located at ► 261 OLD YORK ROAD, JENKINTOWN, PA ZIP+4 ►1			
16	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here	. 70 40		\Box
10	and enter the amount of tax-exempt interest received or accrued during the year	N	/A	
16	At any time during calendar year 2011, did the foundation have an interest in or a signature or other authority over a bank,		Yes	No
	securities, or other financial account in a foreign country?	16		X
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1. If "Yes," enter the name of the foreign			
	country >			
Pa	art VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.	<u> </u>	Yes	<u>No</u>
18	a During the year did the foundation (either directly or indirectly):	ŀ		
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? Yes X No	İ		
		ŀ		
			'	
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? (5) Transfer any income or assets to a disqualified person (or make any of either available			
	for the benefit or use of a disqualified person)?	1		
	(6) Agree to pay money or property to a government official? (Exception. Check "No"	- {		
	if the foundation agreed to make a grant to or to employ the official for a period after			
	termination of government service, if terminating within 90 days.)			
t	b If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations			
	section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)? N/A	<u> 1b</u>		
	Organizations relying on a current notice regarding disaster assistance check here			
•	c Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected			•
	before the first day of the tax year beginning in 2011?	1c		<u> </u>
	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation	1	1	
	• defined in section 4942(j)(3) or 4942(j)(5)): a At the end of tax year 2011, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning			
•	before 2011?			
	If "Yes," list the years >			i
t	b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect			
	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach	1		
	statement - see instructions.) N/A	26	L	
(c if the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.	ĺ		
_	<u> </u>			
31	a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? Yes X No			
	during the year? Light Yes, did it have excess business holdings in 2011 as a result of (1) any purchase by the foundation or disqualified persons after	-		
	May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose	1		
	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 foundation had excess business holdings in 2011.) N/A	3b		
4:	a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	42		X
	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?	4b	<u> </u>	_X_
		Form 99 0)-PF	2011)

123541 12-02-11

, JORL AND ELAINE GERSHMAI	N FOUNDATION		,	,
Form 990-PF (2011) C/O JAGER MANAGEMENT,	INC.		22-25296	29 Page 6
Part VII-B Statements Regarding Activities for Which	Form 4720 May Be F	Required (contin	ued)	
5a During the year did the foundation pay or incur any amount to:				
(1) Carry on propaganda, or otherwise attempt to influence legislation (section)	on 4945(e))?	Ye	es X No	1
(2) Influence the outcome of any specific public election (see section 4955);	or to carry on, directly or indire	ectly,	ŀ	1 1
any voter registration drive?	•		s X No	
(3) Provide a grant to an individual for travel, study, or other similar purpose	95?	· · · · —	s X No	
(4) Provide a grant to an organization other than a charitable, etc., organization				
509(a)(1), (2), or (3), or section 4940(d)(2)?	ight described thi section		es X No	
	v or adventional numbers or i		וויייייייייייייייייייייייייייייייייייי	
(5) Provide for any purpose other than religious, charitable, scientific, literary	y, ai educational purposes, or i		es X No	
the prevention of cruelty to children or animals?			ן מאנבט פּפּ	
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify u	•	in Regulations	37/3	.
section 53 4945 or in a current notice regarding disaster assistance (see inst			N/A -	ib
Organizations relying on a current notice regarding disaster assistance check		•		
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption		. —		1 1
expenditure responsibility for the grant?		I/A L Y	es L No	
If "Yes," attach the statement required by Regulations section 53.49	, ,			1 1
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	o pay premiums on			
a personal benefit contract?		Y	s X No	<i>y</i>
b Did the foundation, during the year, pay premiums, directly or indirectly, on a	personal benefit contract?			b X
If "Yes" to 6b, file Form 8870.				1 1
7a At any time during the tax year, was the foundation a party to a prohibited tax	shelter transaction?	Y	es 🗶 No 📙	
b_if "Yes," did the foundation receive any proceeds or have any net income attri	butable to the transaction?		N/A	Ъ
Part VIII Information About Officers, Directors, Trus	tees, Foundation Ma	nagers, Highl	y	
Paid Employees, and Contractors				
1 List all officers, directors, trustees, foundation managers and their				·
(~) Blome and address	(b) Title, and average hours per week devoted	(c) Compensation (If not paid,	(d) Contributions to employee benefit plans	(e) Expense account, other
(a) Name and address	to position	enter -0-)	and deferred compensation	allowances
JOEL GERSHMAN (DEC'D OCT 4, 2011)	PRESIDENT			
261 OLD YORK ROAD			l	
JENKINTOWN, PA 19046	0.00	0.	0.	0.
ELAINE GERSHMAN	SECRETARY, TR	EASURER,		,
261 OLD YORK ROAD				
JENKINTOWN, PA 19046	0.00	0.	0.	0.
WILLIAM J. LEVITT 3RD	ASS'T TREASUR	ER		
261 OLD YORK ROAD	7		' '	
JENKINTOWN, PA 19046	0.00	0.	0.	0.
J. DAVID LEVITT	ASS'T SECRETA			· · · · · · · · · · · · · · · · · · ·
261 OLD YORK ROAD		T` -	٠	
JENKINTOWN, PA 19046	0.00	0.	0.	0.
2 Compensation of five highest-paid employees (other than those in	ncluded on line 1). If none,			
	(b) Title, and average hours per week		(d) Contributions to employee benefit plans and deferred	(e) Expense
(a) Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	and deferred compensation	account, other allowances
NONE	devoted to position	 	Compensator	ano maneos
HONE	-		1	
		.		
	\dashv]	
	 	 		
	4			
	- 	 	 	
	4		<u> </u>	
			.	
		1		
	1	1	L	
Total number of other employees paid over \$50,000				0
			Form S	990-PF (2011)

JOEL AND ELAINE GERSHMAN FOUNDATION Form 990-PF (2011) 22-2529629 C/O JAGER MANAGEMENT, INC. Page 7 Information About Officers, Directors, Trustees, Foundation Managers, Highly Part VIII Paid Employees, and Contractors (continued) 3 Five highest-paid independent contractors for professional services. If none, enter "NONE." (a) Name and address of each person paid more than \$50,000 (c) Compensation (b) Type of service NONE 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 **Expenses** number of organizations and other beneficiaries served, conferences convened, research papers produced, etc. Part IX-B Summary of Program-Related Investments Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2. Amount 1 N/A All other program-related investments. See instructions. 3

123561 12-02-11 Form 990-PF (2011)

Total. Add lines 1 through 3

FO	m 990-PF (2011) C/O JAGER MANAGEMENT, INC.	44-45	123023 Fage 0
F	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign four	ndations, see	instructions.)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
	Average monthly fair market value of securities	_1a	0
Ь	Average of monthly cash balances	16	3,993,686
C	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	10	3,993,686
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 1e 0.		
2	Acquisition indebtedness applicable to line 1 assets	2	0
3	Subtract line 2 from line 1d	3	3,993,686
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	59,905
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	3,933,781
6	Minimum investment return. Enter 5% of line 5	6	196,689
F	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and foreign organizations check here and do not complete this part.)	d certain	
1	Minimum investment return from Part X, line 6	1	196,689
22	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.)	1	
c	Add lines 2a and 2b	2c	146
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	196,543
4	Recoveries of amounts treated as qualifying distributions	4	0
5	Add lines 3 and 4	5	196,543
6	Deduction from distributable amount (see instructions)	6	0
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	196,543
F	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
1	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	258,630
þ	Program-related investments - total from Part IX-8	1b	0
.2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	<u> </u>
3	Amounts set aside for specific charitable projects that satisfy the:	•	
a	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	258,630
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	5	0
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	258,630
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation of 4940(e) reduction of tax in those years.	ualifies for the	section

Form **990-PF** (2011)

Part XIII Undistributed Income (see instructions)

,	(a) Corpus	(b) Years prior to 2010	(c) 2010	(d) 2011
1 Distributable amount for 2011 from Part XI,	30,500	Tour prior to 2015	2010	2011
line 7	Ì			196,543.
2 Undistributed income, if any, as of the end of 2011				
a Enter amount for 2010 only			0.	
b Total for prior years:				
,,		0.	· · · · · · · · · · · · · · · · · · ·	
3 Excess distributions carryover, if any, to 2011:				
a From 2006				
b From 2007				
c From 2008 9,965.				
d From 2009 691,671.				
e From 2010	504 626			
f Total of lines 3a through e	701,636.			
4 Qualifying distributions for 2011 from				
Part XII, line 4: ►\$ 258,630.	į		0	
a Applied to 2010, but not more than line 2a			0.	
b Applied to undistributed income of prior		0.		
years (Election required - see instructions)				
c Treated as distributions out of corpus (Election required - see instructions)	0.			
d Applied to 2011 distributable amount				196,543.
e Remaining amount distributed out of corpus	62,087.			100,040.
5 Excess distributions carryover applied to 2011	0.		. <u>-</u>	0.
(if an amount appears in column (d), the same amount must be shown in column (a).)				`
6 Enter the net total of each column as indicated below:		:		
8 Corpus Add lines 31, 4c, and 4e Subtract line 5	763,723.			
b Prior years' undistributed income. Subtract		·		
line 4b from line 2b		0.		
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	- 1			
assessed		0.		
d Subtract line 6c from line 6b. Taxable		0.		
amount - see instructions		U.		
e Undistributed income for 2010. Subtract line 4a from line 2a. Taxable amount - see instr.	ł		0.	
f Undistributed income for 2011. Subtract	<u>_</u>		0.	
lines 4d and 5 from line 1. This amount must	Ì			
be distributed in 2012				0.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3)	0.			
8 Excess distributions carryover from 2006				
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2012.				
Subtract lines 7 and 8 from line 6a	763,723.			
10 Analysis of line 9:				
a Excess from 2007				
b Excess from 2008 9,965.				
c Excess from 2009 691,671.				
d Excess from 2010				
e Excess from 2011 62,087.				5 OOA BE (0044)
				Form 990-PF (2011)

123581 12-02-11

	, JOEL AN	D ELAINE GE	RSHMAN FOUN	DATION		· 1
		GER MANAGEM		• • • • • • • • • • • • • • • • • • •		29629 Page 10
Pa	rt XIV Private Operating F	oundations (see in	structions and Part VII	A, question 9)	N/A	
1 a	If the foundation has received a ruling o					
	foundation, and the ruling is effective for			▶ ∟	·····	
b	Check box to indicate whether the found	lation is a private operation	ng foundation described is		4942(j)(3) or49)42(j)(5)
2 a	Enter the lesser of the adjusted net	Tax year		Prior 3 years		
	income from Part I or the minimum	(a) 2011	(b) 2010	(c) 2009	(d) 2008	(e) Total
	investment return from Part X for					
	each year listed .					
b	85% of line 2a					
C	Qualifying distributions from Part XII,			-		
	line 4 for each year listed					
d	Amounts included in line 2c not					
	used directly for active conduct of					
	exempt activities	ł				
A	Qualifying distributions made directly		<u> </u>			
٠	for active conduct of exempt activities.					
	Subtract line 2d from line 2c					
3	Complete 3a, b, or c for the	·	*****		 	
	alternative test relied upon:					
8	"Assets" alternative test - enter:					j
	(1) Value of all assets				 	
	(2) Value of assets qualifying under section 4942(i)(3)(B)(i)					
	Endowment alternative test - enter					
U	2/3 of minimum investment return	,			ĺ	
	shown in Part X, line 6 for each year	ļ				
	listed					
C	"Support" alternative test - enter:	1				
	(1) Total support other than gross	•		1		
	investment income (interest, dividends, rents, payments on			,		
	securities loans (section				1	
	512(a)(5)), or royalties)				<u> </u>	
	(2) Support from general public				1	
	and 5 or more exempt organizations as provided in					
	section 4942(j)(3)(B)(iii)					
	(3) Largest amount of support from					
	an exempt organization		1			,
	(4) Gross investment income					
Pa	rt XV Supplementary Info	rmation (Comple	te this part only	if the foundation	had \$5,000 or me	ore in assets
	at any time during t	the year-see insti	ructions.)			
1	Information Regarding Foundation	n Managers:				
	List any managers of the foundation wh	•	than 2% of the total contr	ributions received by the	foundation before the clo	se of any tax
	year (but only if they have contributed in					•
EL	AINE GERSHMAN					
	List any managers of the foundation wh	n own 10% or more of th	e stock of a corporation (or an equally large portion	on of the ownership of a p	artnership or
	other entity) of which the foundation ha			a. a. oquanj migo porti	37 the stringroup of a p	a. a.o. o.o.p or
NO	NE					
2	Information Regarding Contribut	ion Grant Gift Loan	Scholarchin etc. Dr	ograme:		
•	Check here ► X if the foundation of				ot account uncolicited recu	uncte for funde. If
	the foundation makes gifts, grants, etc.	(see instructions) to indi-	nduals or organizations in	nder other conditions or	ioi accept orisolicheo rego implete items 2a h c and	1 d
						
a	The name, address, and telephone num	ber of the person to who	in applications should be	addressed:		
_	The form to which applications should be	a submitted and informs		and and and		
	The form in which applications should b	e submitted and informa	tion and materials they sn	iouid include;		
C	Any submission deadlines:					
d	Any restrictions or limitations on awards	s, such as by geographic	al areas, charitable fields,	kinds of institutions, or o	other factors:	
			·			

Form 990-PF (2011) C/O JAGER MANAGEMENT, INC.

Part XV Supplementary Information (continued)

22-2529629 Page 11

Part XV Supplementary Information	<u> </u>			
3 Grants and Contributions Paid During the Y		Payment I		
Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
	any foundation manager or substantial contributor	recipient		
a Paid during the year				
21ST ANNUAL SCHOLARSHIP BENEPIT -			arts	
ROCK SCHOOL OF PA				
PHILADELPHIA PA				209
ABRAMSON CENTER			COMMUNITY	
NORTH WALES PA				1 000
		}		
COALITION TO SALUTE AMERICA'S HEROES			COMMUNITY	
WILTON, CT				20
CONGREGATION RODELPH SHALOM			RELIGIOUS	
PHILADELPHIA, PA				1,880
CORNELL UNIVERSITY			EDUCATION	
ITHACA NE			1	26_050
	TINUATION SHEE	T(S)	. > 3a	258,630
b Approved for future payment				
NONE				
	ļ <u>.</u>	ļ		
Total	<u> </u>		▶ 3b	

Form 990-PF (2011

Part XVI-A Analysis of Income-Producing Activities

ler gross amounts unless otherwise indicated.	(a) Business	ousiness income (b) Amount	(C) Exclu- sion	(d) Amount	(e) Related or exempt function income
Program service revenue: a b	code		code	, under	Tariotion medica
<u> </u>			┼		
	 		 		
e			 		
g Fees and contracts from government agencies					
Membership dues and assessments					
Interest on savings and temporary cash					
investments			14	27.	
Dividends and interest from securities	ļ		14	9,227.	
Net rental income or (loss) from real estate:	<u> </u>				
a Debt-financed property	ļ				
b Not debt-financed property			+ +		
Net rental income or (loss) from personal			1		
property			 		
Other investment income			 		
Gain or (loss) from sales of assets other than inventory			18	1,925.	
Net income or (loss) from special events	 	·· · · · · · · · · · · · · · · · · · ·	1-9-	1,343.	
Grace arold or (lone) from cales of inventory			 		
Other revenue:			1		
8	1				
b	· · · · · ·	,, 			
	·		 		
C			1 1		
d		0.		11,179.	
e Subtotal, Add columns (b), (d), and (e) Total, Add line 12, columns (b), (d), and (e)		0.			11,1
d e Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities	to the Accon	nplishment of E	xempt l	Purposes	11,17
d e Subtotal, Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculations.) art XVI-B Relationship of Activities ne No. Explain below how each activity for which income	to the Accon	nplishment of E	xempt l	Purposes	11,15
d e Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculations.) art XVI-B Relationship of Activities ne No. Explain below how each activity for which inco	to the Accon	nplishment of E	xempt l	Purposes	11,1
d e Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculations.) art XVI-B Relationship of Activities ne No. Explain below how each activity for which inco	to the Accon	nplishment of E	xempt l	Purposes	11,1
d e Subtotal, Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculations.) art XVI-B Relationship of Activities ne No. Explain below how each activity for which income	to the Accon	nplishment of E	xempt l	Purposes	11,1
d e Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculations.) art XVI-B Relationship of Activities ne No. Explain below how each activity for which inco	to the Accon	nplishment of E	xempt l	Purposes	11,1
d e Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculations.) art XVI-B Relationship of Activities ne No. Explain below how each activity for which inco	to the Accon	nplishment of E	xempt l	Purposes	11,1
Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculations.) Art XVI-B Relationship of Activities ne No. Explain below how each activity for which income	to the Accon	nplishment of E	xempt l	Purposes	11,1
Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculations.) Art XVI-B Relationship of Activities ne No. Explain below how each activity for which income	to the Accon	nplishment of E	xempt l	Purposes	11,1
d e Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculations.) art XVI-B Relationship of Activities ne No. Explain below how each activity for which inco	to the Accon	nplishment of E	xempt l	Purposes	11,1
d e Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculations.) art XVI-B Relationship of Activities ne No. Explain below how each activity for which inco	to the Accon	nplishment of E	xempt l	Purposes	11,1
d e Subtotal, Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculations.) art XVI-B Relationship of Activities ne No. Explain below how each activity for which income	to the Accon	nplishment of E	xempt l	Purposes	11,1
d e Subtotal, Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculations.) art XVI-B Relationship of Activities ne No. Explain below how each activity for which income	to the Accon	nplishment of E	xempt l	Purposes	11,1
d e Subtotal, Add columns (b), (d), and (e) Total, Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities ne No. Explain below how each activity for which income	to the Accon	nplishment of E	xempt l	Purposes	11,1
d e Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculations.) art XVI-B Relationship of Activities ne No. Explain below how each activity for which inco	to the Accon	nplishment of E	xempt l	Purposes	11,1
d e Subtotal, Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculations.) art XVI-B Relationship of Activities ne No. Explain below how each activity for which income	to the Accon	nplishment of E	xempt l	Purposes	11,1

12

123622	
123022	
12-02-1	۰
12-02-1	

Here

Paid

Preparer

Use Only

SIGNI

Preparer's signature

PA 19102

Signature of officer or trustee

Print/Type preparer's name

ELLIOT BRAUNSTEIN

Firm's name ► BRAUNSTEIN & COMPANY,

PHILADELPHIA,

Firm's address ► TWO PENN CENTER,

Title

Check X if self- employed

Phone no.

Date.

X Yes

P00174292

215-972-7022

Form **990-PF** (2011)

Firm's EIN ► 30-0007439

Form 8858 (Rev. 1-2012) If you are fifing for an Additional (Not Automatic) 3-Month	Extension (complete only Part II and check this	s box	Page 2
Note. Only complete Part II if you have already been granted				بس
• If you are filing for an Automatic 3-Month Extension, com				
Part II Additional (Not Automatic) 3-Monti			nal (no copies needed).	
			identifying number, see in	
Type or Name of exempt organization or other filer, see in:	structions		Employer identification num	
print JOEL AND ELAINE GERSHMAN E		ION		
File by the C/O JAGER MANAGEMENT, INC			X 22-25296	29
Number street, and room or suite no. If a P.O. bo		tions.	Social security number (SSI	
filing your return See 261 OLD YORK ROAD, NO. 814	-			•
enstructions. City, town or post office, state, and ZIP code. For		fress, see instructions.		
JENKINTOWN, PA 19046	•			
Enter the Return code for the return that this application is for	r (file a separa	te application for each return)		04
Application	Return	Application		Return
ls For	Code	Is For		Code
Form 990	01			7 2
Form 990-BL	02	Form 1041-A		08
Form 990-EZ	01	Form 4720		09
Form 990-PF	04	Form 5227		10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069		11
Form 990-T (trust other than above)	06	Form 8870		12
STOP: Do not complete Part II If you were not already gran BLAINE GERSHN		natic 3-month extension on a prev	riously filed Form 8868.	
If the organization does not have an office or place of busing lifthis is for a Group Return, enter the organization's four dispose. If it is for part of the group, check this box. I request an additional 3-month extension of time until for calendar year or other tax year beginning. If the tax year entered in line 5 is for less than 12 month. Change in accounting period. State in detail why you need the extension. Conflete and force for a force of the standard force.	git Group Exe and atta OCTO DEC 1 s, check reas	emption Number (GEN)	g NOV 30, 2012 Final return To Final return	
8a If this application is for Form 990-BL, 990-PF, 990-T, 472	20, or 6069, e	nter the tentative tax, less any		
nonrefundable credits. See instructions.			8a \$	0.
b If this application is for Form 990-PF, 990-T, 4720, or 60	•			
tax payments made, include any prior year overpaymen	nt allowed as a	a credit and any amount paid	<u> </u>	
previously with Form 8868.		<u></u>	8b \$	<u>6,116.</u>
c Balance due. Subtract line 8b from line 8a. Include you		h this form, if required, by using		•
EFTPS (Electronic Federal Tax Payment System). See in		A b a a a a a a d d a d d a d D a d N	8c \$	0.
Under penalties of perury, I declare that I have examined this form, in it is true, correct, and complete, and that I am authorized to prepare the	cluding accomp nis form.	st be completed for Part II of panying schedules and statements, and to		betief,
Signature			Form 8868 (F	Pey 1-2012
			1 8000 1110 1	1-2U12,

22-2529629 C/O JAGER MANAGEMENT, INC. Part XV Supplementary Information 3 Grants and Contributions Paid During the Year (Continuation) If recipient is an individual. Recipient show any relationship to Foundation Purpose of grant or Amount any foundation manager status of contribution Name and address (home or business) or substantial contributor recipient CURTIS INSTITUTE OF MUSIC ARTS PHILADELPHIA PA 3 500 PRANKLIN INSTITUTE EDUCATION PHILADELPHIA PA 7 000. PREE LIBRARY OF PHILADELPHIA COMMUNITY 250 PHILADELPHIA PA FRIENDS OF RITTENHOUSE SQUARE COMMUNITY PHILADELPHIA PA 5 500 GERSHMAN Y COMMUNITY PHILADELPHIA, PA 37,500. HELP HOSPITALIZED VETERANS COMMUNITY WINCHESTER, CA 64. JEWISH FAMILY AND CHILDREN'S SERVICES COMMUNITY PHILADELPHIA PA 200. JEWISH HOME FOUNDATION RELIGIOUS ROCHESTER NY 25, KIMMEL CENTER OF THE PERFORMING ARTS ARTS PHILADELPHIA PA 1 000.

N.O.H.R.

NARBERTH PA

Total from continuation sheets

MEDICAL

100.

229 475.

C/O JAGER MANAGEMENT, INC.

Part XV | Supplementary Information

3 Grants and Contributions Paid During the			- ₁	
Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
	or substantial contributor	recipient		
NATIONAL CENTER FOR MISSING &			COMMUNITY	
EXPOILTED CHILDREN			COMMONITI	
ALEXANDRIA VA				100
NATIONAL JEWISH HEALTH			MEDICAL	
MATIONAL OEWISH HEADIN			BEDICAL	•
DENVER_CO				_ 50
PARALYZED VETERANS OF AMERICA			COMMUNITY	
WASHINGTON DC				88
montagon, be				
PENNSYLVANIA ACADEMY OF FINE ARTS			arts	
PHILADELPHIA, PA			 	150
PHILADELPHIA ART ALLIANCE			ARTS	
PHILADELPHIA PA				9,000
PHILADELPHIA MUSEUM OF ART			ARTS	
PHILADELPHIA PA				10,350
PHILADELPHIA RETIRED POLICE AND			COMMUNITY	
FIREMAN'S ASSOCIATION				
PHILADELPHIA PA				20
PHILADELPHIA THEATRE COMPANY			ARTS	
PHILADELPHIA PA				1,000
PRILADBURNIA, PA				1,000
PROJECT HOME			COMMUNITY	:
PHILADELPHIA, PA	 		 	100
THE ROCK SCHOOL OF PENNSYLVANIA			ARTS	
BALLET			1	
PHILADELPHIA PA			<u> </u>	5,000
Total from continuation sheets .				

JOEL AND ELAINE GERSHMAN FOUNDATION

22-2529629 C/0 JAGER MANAGEMENT, INC. Part XV Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient show any relationship to Foundation Purpose of grant or Amount any foundation manager status of contribution Name and address (home or business) recipient or substantial contributor THE WISTAR INSTITUTE MEDICAL 1 000 PHILADELPHIA PA TRUSTEES OF THE UNIVERSITY OF EDUCATION PENNSYLVANIA PHILADELPHIA PA 80, UNITED WAY OF SE PENNSYLVANIA COMMUNITY PHILADELPHIA PA 100,000, UNIVERSITY OF THE ARTS ARTS PHILADELPHIA PA 11,000. ALZHEIMER'S DISEASE REASEACH MEDICAL 36. PHILADELPHIA PA AMERICAN JEWISH COMMITTEE COMMUNITY NEW YORK NY 1,100. ANTI-DEFAMATION LEAGUE COMMUNITY 100, PHILADELPHIA PA AMERICAN ASSOCIATION OF STATE COMMUNITY TROOPERS TALLAHASSEE FL 10. AMERICAN FEDERATION OF POLICE & COMMUNITY CONCERNED CITIZENS 55 TITUSVILLE FL AMERICAN HEART ASSOCIATION HEALTH DALLAS TX 50. Total from continuation sheets

123631 08-03-11

Part XV Supplementary Information

22-2529629

Pagenant	If recipient in an indenduct			
Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
Marile and address (notice of business)	or substantial contributor	recipient		<u> </u>
MERICAN SEPHARDI FEDERATION			RELIGIOUS	
EW YORK NY				1,200
MVETS			COMMUNITY	
ANHAM MD				25
NNA & SAMUEL LUNDY ENDOWED CHOLARSHIP FOUNDATION			EDUCATION	
CHOMENONIT TOUNDATION			,	
RYN MAWR PA	-	 .		_50
RTHRITIS POUNDATION			MEDICAL	
TLANTA GA				100
SPEN INSTITUTE			COMMUNITY	
ASHINGTON DC				5,500
Marie Control of the				
SPEN JEWISH CONGREGATION			RELIGIOUS	-
SPEN CO				1,800
ARNES POUNDATION			ARTS	
HILADELPHIA, PA		· -		10,000
OMMON CAUSE			COMMUNITY	
ASHINGTON DC				200
CONGREGATION MIKVEH ISRAEL			RELIGIOUS	
HILADELPHIA, PA	+			720
OUNCIL OF INDIAN NATIONS			COMMUNITY	
PACHE JUNCTION AZ				20

22-2529629

Part XV Supplementary Information 3 Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient Purpose of grant or contribution Foundation show any relationship to Amount status of any foundation manager Name and address (home or business) recipient or substantial contributor ARTS CURTIS SCHOOL OF MUSIC PHILADELPHIA, PA_ 550 DAKOTA INDIAN FOUNDATION COMMUNITY 15. CHAMBERLAIN SD DELAWARE VALLEY STROKE COUNCIL MEDICAL PHILADELPHIA, PA 1,300, DO-GOODERS CLUB COMMUNITY 85. NARBETH PA EARTHJUSTICE ENVIRONMENTAL SAN PRANCISCO CA 15. ARTS FLEISHER ART MEMORIAL 100. PHILADELPHIA PA MEDICAL GLAUCOMA SERVICE FOUNDATION 100. PHILADELPHIA PA HABITAT FOR HUMANITY COMMUNITY 200, ATLANTA GA INTERNATIONAL OCD FOUNDATION COMMUNITY BOSTON MA 700, JEWISH WOMEN'S ARMED FORCES COMMUNITY WASHINGTON DC 36. Total from continuation sheets

JOEL AND ELAINE GERSHMAN FOUNDATION C/O JAGER MANAGEMENT, INC.

Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient show any relationship to Foundation Purpose of grant or Amount status of any foundation manager contribution Name and address (home or business) or substantial contributor recipient MOTHERS AGAINST DRUNK DRIVING COMMUNITY 10. IRVING TX MAYO CLINIC MEDICAL 200. SCOTTSDALE AZ COMMUNITY MCKINLEY PIRE COMPANY 50, ELKINS PARK PA COMMUNITY MUSEUM OF THE AMERICAN REVOLUTION 1,000. PHILADELPHIA, PA AMERICAN RED CROSS - SE PENNSYLVANIA COMMUNITY CHAPTER 100 PHILADELPHIA PA PHILADELPHIA FIRE DEPARTMENT COMMUNITY PHILADELPHIA PA 25, PHILABUNDANCE COMMUNITY 50, PHILADELPHIA PA PLANNED PARENTHOOD HEALTH NEW YORK NY 50. POLICE ATHLETIC LEAGUE OF COMMUNITY PHILADELPHIA PHILADELPHIA PA 1,000, COMMUNITY PUBLIC CITIZEN 1,050, WASHINGTON_DC Total from continuation sheets

123631 08-03-11

22-2529629

.. . JOEL AND ELAINE GERSHMAN FOUNDATION

C/O JAGER MANAGEMENT, INC.

Part XV | Supplementary Information

22-2529629

3 Grants and Contributions Paid During the	··· / · · · · · · · · · · · · · · · · ·			
Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
Marile and address (notice of business)	or substantial contributor	recipient		
ALVATION ARMY			COMMUNITY	
LEXANDRIA VA				1
MILE TRAIN			COMMUNITY	
EW YORK NY				2!
ST JOSEPH'S INDIAN SCHOOL			COMMUNITY	
CHAMBERLAIN, SD				
THE FRESH AIR FUND			COMMUNITY	
IEW YORK, NY				
EN TORK, NI				
THE HERITAGE FOUNDATION			COMMUNITY	
ASHINGTON DC				
THE JEFFERSON FOUNDATION			COMMUNITY	
TONDATION			COMMONTT	
PHILADELPHIA, PA				2:
J.S. ENGLISH			COMMUNITY	
ASHINGTON DC				1:
инүү			CONMUNITY	
HILADELPHIA PA				10
OMEN'S WAY			COMMUNITY	
HILADELPHIA, PA				1,6
OUNDED WARRIOR PROJECT			COMMUNITY	
ACKSONVILLE PL				
Total from continuation sheets				

C/O JAGER MANAGEMENT, INC.

Part XV | Supplementary Information

3 Grants and Contributions Paid During the Recipient	If recipient is an individual.	· · · · · · · · · · · · · · · · · · ·	T	
Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
	or substantial contributor	recipient		
ES DAMES D'ASPEN			ARTS	
				_
SPEN CO				1,20
MANN CENTER FOR PERFORMING ARTS			ARTS	
]		j	
HILADELPHIA, PA				5,00
				ļ
				İ
			 	
	- 		 	<u> </u>
		·		
	ļ			
		· · · · · · · · · · · · · · · · · · ·		
			 	
	 			
Total from continuation sheets			<u>.l</u>	<u></u>

FORM 990-PF INTEREST ON SAVI	NGS A	ND TEM	PORARY	CASH	IN	VESTMENTS	STATEME	NT	1
SOURCE							AMOU	NT	
CITIZENS BANK						27.			
TOTAL TO FORM 990-PF, PART I,	LINE	3, CO	LUMN A						27.
FORM 990-PF DIVIDEND	S AND	INTER	EST FRO	OM SE	CUR	ITIES	STATEME	NT	2
SOURCE		GROSS	AMOUN'			TAL GAINS VIDENDS	COLUMN AMOU)
GLENMEDE TRUST COMPANY GLENMEDE TRUST COMPANY GLENMEDE TRUST COMPANY			3,220 6,00 2,21	l.		0. 0. 2,213.		3,22	
TOTAL TO FM 990-PF, PART I, I	.N 4	<u> </u>	11,44). = =		2,213.		9,2	27.
FORM 990-PF C	THER	PROFES	SIONAL	FEES			STATEME	INT	3
DESCRIPTION	EXPE	A) NSES BOOKS	(1 NET II MENT I			(C) ADJUSTED NET INCOM	CHAR	D) ITAI POSI	
PROFESSIONAL FEES - INVESTMENT ADVISORY		3,869.		3,86	9.				0.
TO FORM 990-PF, PG 1, LN 16C		3,869.		3,86	9.				0.

FORM 990-PF U.S. AND STATE/C	ITY GOVERNMENT	OBLIGATIONS	STATEMENT
DESCRIPTION	U.S. OTHER GOV'T	BOOK VALUE	FAIR MARKET VALUE
GLENMEDE CORE FIXED INCOME PORTFOLIO	x	102,554.	110,835
TOTAL U.S. GOVERNMENT OBLIGATIONS	•	102,554.	110,835
TOTAL STATE AND MUNICIPAL GOVERNMEN	T OBLIGATIONS		
TOTAL TO FORM 990-PF, PART II, LINE	10A	102,554.	110,835
FORM 990-PF COR	PORATE STOCK		STATEMENT
DESCRIPTION		BOOK VALUE	FAIR MARKET VALUE
2,800 SHS MEDTRONIC, INC	•	141,134.	117,908
TOTAL TO FORM 990-PF, PART II, LINE	10B	141,134.	117,908
FORM 990-PF COR	PORATE BONDS		STATEMENT
DESCRIPTION		BOOK VALUE	FAIR MARKET VALUE
CORPORATE BONDS	•	51,217.	52,155
TOTAL TO FORM 990-PF, PART II, LINE	10C	51,217.	52,155
FORM 990-PF OTHE	R INVESTMENTS		STATEMENT
DESCRIPTION	VALUATION METHOD	BOOK VALUE	FAIR MARKET VALUE
ISRAEL BOND FNMA MORTGAGE BACKED SECURITIES	COST	4,886. 35,865.	4,886 38,132
TOTAL TO FORM 990-PF, PART II, LINE	. 13	40,751.	43,018

JOEL AND ELAINE GERSHMAN FOUNDATION C/O

22-2529629

FORM 990-PF EXPLANATION CONCERNING PART VII-A, LINE 8B STATEMENT

EXPLANATION

NOT REQUIRED