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Form 990-PF Department of the Treasury

Return of Private Foundation

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

OMB No 1545-0052

Note. The foundation may be able to use a copy of this return to satisfy state reporting requirements Internal Revenue Service For calendar year 2012 or tax year beginning , and ending Name of foundation A Employer Identification number The Columbian Charitable Group of Palisades Park Ridgefield Inc. 22-3796037 Number and street (or P O box number if mail is not delivered to street address) Room/suite Telephone number (see instructions) c/o R Lecky, 816 Pleasantview Ter 201 965 6565 City or town, state, and ZIP code C If exemption application is pending, check here 07657-2523 Ridgefield G Check all that apply. Initial return Initial return of a former public charity D 1. Foreign organizations, check here Final return Amended return 2 Foreign organizations meeting the 85% test Address change □ Name change check here and attach computation X Section 501(c)(3) exempt private foundation H Check type of organization: If private foundation status was terminated Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation under section 507(b)(1)(A), check here I Fair market value of all assets at end J Accounting method: X Cash If the foundation is in a 60-month termination under section 507(b)(1)(B), check here Other (specify) of year (from Part II, col (c), line 16) ► \$ 1,089,359 (Part I, column (d) must be on cash basis) (d) Disbursements Analysis of Revenue and Expenses (The total of (a) Revenue and (c) Adjusted net for chantable (b) Net investment amounts in columns (b), (c), and (d) may not necessarily equal expenses per income income purposes the amounts in column (a) (see instructions)) books (cash basis only) Contributions, gifts, grants, etc., received (attach schedule) Check ▶ If the foundation is not required to attach Sch B Interest on savings and temporary cash investments 53,283 53.283 Dividends and interest from securities 5 a Gross rents . **b** Net rental income or (loss) 28 6 a Net gain or (loss) from sale of assets not on line 10 **b** Gross sales price for all assets on line 6a 28 Capital gain net income (from Part IV, line 2) 13 Net short-term capital gain Income modifications w.witt: 10 a Gross sales less returns and allowances 3. J. F. C. s b Less Cost of goods sold c Gross profit or (loss) (attach schedule) 180 27 11 Other income (attach schedule) . . . 12 Total. Add lines 1 through 11 53.311 53,311 13 Compensation of officers, directors, trustees, etc 14 Other employee salaries and wages . . . 15 Pension plans, employee benefits . 16 a Legal fees (attach schedule) . 4,000 **b** Accounting fees (attach schedule) Administrative c Other professional fees (attach schedule) . 17 18 Taxes (attach schedule) (see instructions) 19 Depreciation (attach schedule) and depletion . 3,500 20 Occupancy . 21 Travel, conferences, and meetings and SCANNED SEP 22 Printing and publications . . . 215 23 Other expenses (attach schedule) 24 Total operating and administrative expenses. 7,715 Add lines 13 through 23 110,885 110,885 25 Contributions, gifts, grants paid . Total expenses and disbursements. Add lines 24 and 25. 26 118,600 0 110.885 27 LE LU L Subtract line 26 from line 12 a Excess of revenue over expenses and disbursements -65,289 53,311 b Net investment income (if negative, enter -0-)

For Paperwork Reduction Act Notice, see instructions.

c Adjusted net income (if negative, enter -0-) . .

Form 990-PF (2012)

HTA

Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30

1,157,255

6

| (a) List and describe the | nd Losses for Tax on Inv e kind(s) of property sold (e g , real est se, or common stock, 200 shs MLC C | late, | nt Inco | me (b) How acquired P—Purchase D—Donation | | ate acquired , day, yr) | (d) Date sold (mo , day, yr) |
|---|--|------------------|--------------------------|---|----------------|-----------------------------|----------------------------------|
| 1a See Attached Statement | | | | | | | |
| b See Attached Statement | | | | | | | |
| c See Attached Statement | | | | | | | |
| d See Attached Statement | | | | | | | |
| e See Attached Statement | | | | | | | <u> </u> |
| (e) Gross sales price | (f) Depreciation allowed (or allowable) | | | r other basis ense of sale | _ | | or (loss)) minus (g) |
| а | | | | | | | |
| b | | 1 | | | | | |
| C | | - | | | | | |
| d | | | | | | | |
| е | l | <u> </u> | | 40/04/00 | | | |
| Complete only for assets show | ving gain in column (h) and owne | ed by the | | | | | (h) gain minus |
| (i) F M V as of 12/31/69 | (j) Adjusted basis as of 12/31/69 | | | ss of col (i) (j), if any | | | less than -0-) or om col (h)) |
| a | | | | | | | |
| b | | ļ | | | | | |
| С | | ļ | | | | | |
| d | | <u> </u> | | | | | |
| <u>e</u> | <u></u> | | | | | | |
| 2 Capital gain net income or | | | ter in Par -0- ın Par | t I, line 7 } t I, line 7 } | 2 | | 28 |
| 3 Net short-term capital gain | or (loss) as defined in section: | s 1222(| 5) and (6 |): | | | |
| If gain, also enter in Part I, | line 8, column (c) (see instruc | tions). I | f (loss), e | nter -0- | | | |
| ın Part I, line 8 <u></u> | <u> </u> | | <u></u> | <u></u> | 3 | | 10,578 |
| Part V Qualification Un | der Section 4940(e) for R | Reduce | d Tax c | on Net Investm | ent Inc | come | |
| If section 4940(d)(2) applies, le Was the foundation liable for th If "Yes," the foundation does no | e section 4942 tax on the distort qualify under section 4940(e | e). Do n | ot compl | ete this part. | | | Yes X No |
| 1 Enter the appropriate amo | ount in each column for each y | year, se | e the ins | tructions before it | iaking a | ny entries. | (d) |
| Base penod years | (b) | | Mot value | (c) of nonchantable-use as | ccate | Dist | nbution ratio |
| Calendar year (or tax year beginning i | | | IVEL VAIUE | | | (col (b) | divided by col (c)) |
| 2011 | | 95,910 | | | 5,398 | | 0.083010 |
| 2010 | | 47,401 | | | 9,695 | | 0.126017 |
| 2009 | | 76,750 | - | | 3,384 2,907 | | 0.065409 0.05494 |
| 2008 | | 71,583 78,282 | | 1,502 | | | 0.03494 |
| 2007 | | 0,202 | | 1,500 | 3,236 | | 0.11003- |
| 2 Total of line 1, column (d) | | | | | | 2 | 0 44821 |
| 3 Average distribution ratio for the number of years the for | or the 5-year base period—div undation has been in existence | | | | . _ | 3 | 0 089642 |
| 4 Enter the net value of nonc | hantable-use assets for 2012 | from Pa | art X, line | 5 | . L | 4 | 1,096,193 |
| 5 Multiply line 4 by line 3 . | | | | | | 5 | 98,265 |
| 6 Enter 1% of net investment | income (1% of Part I, line 27I | b) | | | . L | 6 | 533 |
| 7 Add lines 5 and 6 | | | | | | 7 | 98,798 |
| 8 Enter qualifying distribution | s from Part XII, line 4 | | | | . [| 8 | 110,88 |
| If line 8 is equal to or great the Part VI instructions | er than line 7, check the box in | n Part V | l, line 1b | , and complete th | at part u | using a 1% t | ax rate. See |

| | •••• | The oblamble Group of Fallsades Falk Mageriela me | | | 00001 | | |
|----|------|---|---------------|-----------|---------|--|----------------|
| P | art | VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—se | e iı | ıstru | ctions) | | |
| | _ | Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1. | \top | | | , | |
| ٠ | | Date of ruling or determination letter (attach copy of letter if necessary—see instructions) | | | | | |
| | | Domestic foundations that meet the section 4940(e) requirements in Part V, check | 1 | | | 533 | |
| | | here $\blacktriangleright X$ and enter 1% of Part I, line 27b | | | | | |
| | c | All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% | | | | | |
| | | of Part I, line 12, col (b) | | | | | |
| 2 | | Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) | \rightarrow | | | 0 | |
| 3 | | Add lifes Fallo 2 | 3 | | | 533 | L |
| 4 | | dubilitie // (income) tax (domestic section 454/(d)// india and taxable realizations only. Careful and | 1 | | | | <u> </u> |
| 5 | | Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0- | 5 | | | 533 | |
| 6 | | Credits/Payments | 3 | | * | • | |
| | | 2012 estimated tax payments and 2011 overpayment credited to 2012 . 6a 3,300 | | | | ~ , ; | |
| | | Exempt foreign organizations—tax withheld at source | | , " | , | | ` |
| | C | Tax paid with application for extension of time to file (Form 8868) 6c 6c | | | | · · · · · · · · | |
| | | Backup withholding erroneously withheld | | | | | <u></u> |
| 7 | | Total credits and payments ridd into out through ou | 7 | | | 3,300 | |
| 8 | | Enter any penalty for underpayment or estimated tax officer field | B 9 | | | <u>6</u> 0 | |
| 9 | | Tax due. If the total of lines 3 and 6 is more than line 7, office difficult of the total of lines 3 and 6 is more than line 7, office difficult of the total of lines 3 and 6 is more than line 7, office difficult of the total of lines 3 and 6 is more than line 7, office difficult of lines 3 and 6 is more than line 7, office difficult of lines 3 and 6 is more than line 7, office difficult of lines 3 and 6 is more than lines 3 and 6 is more than lines 4 is more than lines 3 and 6 is more than lines 3 and 6 is more than lines 3 and 6 is more than lines 4 is more than lines 5 is more than lines | - | | | 2,761 | |
| 10 | | Overpayment. If the File More than the total of miles a and of onto the annual conference of | 1 | | | 0 | |
| 11 | | Effect the amount of the 10 to 50 of called to 2010 detailed to 2010 detai | • | | | | L |
| | | VII-A Statements Regarding Activities | | | + | V | I NI = |
| 1 | а | During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it | | | - | Yes | No |
| | | participate or intervene in any political campaign? | | • | 1a | | X |
| | b | Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see | | | 145 | | |
| | | Instructions for the definition)? | • | • | 1b | | X |
| | | If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials | | | * | 4 | |
| | | published or distributed by the foundation in connection with the activities. | | | 1c | * | X |
| | | Did the foundation file Form 1120-POL for this year? | | | 1 C | * 35 | ^ |
| | d. | Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year. (1) On the foundation \$\bigsim \bigsim \ | | | 1* | | |
| | _ | Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed | | | ٠ ٠,٠ | ŝ | |
| | е | on foundation managers \$ | | | 1, 1 | | |
| 2 | | Has the foundation engaged in any activities that have not previously been reported to the IRS? | | | 2 | | Х |
| _ | | 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 | | | | | |
| Ū | | of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes | | | 3 | | X |
| 4 | а | Did the foundation have unrelated business gross income of \$1,000 or more during the year? | | | 4a | | X |
| • | | If "Yes," has it filed a tax return on Form 990-T for this year? | | | 4b | N/A | |
| 5 | | Was there a liquidation, termination, dissolution, or substantial contraction during the year? | | | . 5 | | X |
| | | If "Yes," attach the statement required by General Instruction T | | | < × . | ,.* ° | Y (|
| 6 | | Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either. | | | | | |
| | | By language in the governing instrument, or | | | \$ -80 | 1.000000000000000000000000000000000000 | |
| | | By state legislation that effectively amends the governing instrument so that no mandatory directions | | | قه تــ | نشنگ | |
| | | 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 F | Part | XV | 7 | X | |
| 8 | а | Enter the states to which the foundation reports or with which it is registered (see instructions) | | | - 23 | | 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 2012 or the taxable year beginning in 2012 (see instructions for Part XIV)? If "Yes," | | | | 1 | |
| | | complete Part XIV | • | | 9 | \vdash | X |
| 10 | 0 | Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing | | | 4.0 | | , |
| | | their names and addresses | | | 10 | 1 | X |

| | | 96037 | Р | age 5 |
|-----|--|--------------|--|--------------|
| | t 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 | | _x_ |
| 12 | Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had | | | |
| | advisory privileges? If "Yes," attach statement (see instructions) | 12 | | _X_ |
| 13 | Did the foundation comply with the public inspection requirements for its annual returns and exemption application? | 13 | Х | |
| 14 | The books are in care of ▶ Robert Lecky, Secretary/Treasurer Telephone no. ▶ 201 288 76 | 69 | | |
| | Located at ► 816 Pleasant View Terrace Ridgefield NJ ZIP+4 ► 07657 | | - | |
| 15 | Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041—Check here | | • | • 🔲 |
| | and enter the amount of tax-exempt interest received or accrued during the year | | | |
| 16 | At any time during calendar year 2012, did the foundation have an interest in or a signature or other authority | . | Yes | No |
| | over a bank, 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 | 39. A 3 | (4) (5) | 7.00 |
| Pai | rt 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. | 100 | Yes | No |
| 1a | During the year did the foundation (either directly or indirectly): | ',,', | A 1988 | 33 |
| | (1) Engage in the sale or exchange, or leasing of property with a disqualified person? | 1.20 | | li la l |
| | (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) | 2.3% | | 4 |
| | a disqualified person? | 1.5 | | 3. |
| | (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X No | | | |
| | (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? | | | . 1 |
| | (5) Transfer any income or assets to a disqualified person (or make any of either available | 3 .70 | 11.3 | |
| | for the benefit or use of a disqualified person)? | | No. | P.Y |
| | (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 | 3 4.8 4 | . Pr. | 34 |
| | after termination of government service, if terminating within 90 days) | | | v I |
| b | If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in Regulations | | 12 | |
| | section 53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)? | 1b | N/A | |
| | Organizations relying on a current notice regarding disaster assistance check here | * | | W.A. |
| С | Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, | | - 44 | Lind |
| | that were not corrected before the first day of the tax year beginning in 2012? | 1c | | X |
| 2 | Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private | | | ` ` |
| | operating foundation defined in section 4942(j)(3) or 4942(j)(5)). | , S | ^<\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\ | 1 × 1 |
| а | At the end of tax year 2012, did the foundation have any undistributed income (lines 6d | | | |
| | and 6e, Part XIII) for tax year(s) beginning before 2012? | | . + | 3.55% |
| | If "Yes," list the years 20 , 20 | 10 W 10 | 1 | () |
| ь | Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) | 1.20 | | |
| | (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) | 144 | AL/A | E. |
| | to all years listed, answer "No" and attach statement—see instructions) | 2b | N/A | ite in the s |
| С | If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here. 20 | | | . 2 |
| 3a | Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? | | 4 | e l |
| b | If "Yes," did it have excess business holdings in 2012 as a result of (1) any purchase by the foundation | 178 | 表類 | 2 |
| _ | or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved | | | *** |
| | by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) | | r e | 144 |
| | the lapse of the 10-, 15-, or 20-year first phase holding penod? (Use Schedule C, Form 4720, to determine | 1,2 | | |
| | If the foundation had excess business holdings in 2012.) | 3b | N/A | |
| 4a | Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? | 4a | | X |
| ь | Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable | | <u>**</u> | 3 |
| | | | | 1 |

purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2012?

| Forn | m 990-PF (2012) The Columbian Charitable Gr | oup of Palisades Parl | Ridgefield Inc | | 22-379 | 96037 | Page 6 |
|------|--|---|--|---|-----------------------|-----------|-------------------------|
| Pa | rt VII-B Statements Regarding Activi | ties for Which Fo | rm 4720 May Be | Required (cont | inued) | | |
| 5a | During the year did the foundation pay or incur any | amount to | | | | | ´ « « |
| | (1) Carry on propaganda, or otherwise attempt t | o influence legislation (| section 4945(e))? . | [Y | es X No | | |
| | (2) Influence the outcome of any specific public | election (see section 49 | 955), or to carry | | | | ; * ; |
| | on, directly or indirectly, any voter registratio | n drıve? | | Y | 'es X No | | |
| | (3) Provide a grant to an individual for travel, stu | idv. or other similar pur | poses? | 🗀 Y | es X No | Ì | |
| | (4) Provide a grant to an organization other than | • | | | | | |
| | in section 509(a)(1), (2), or (3), or section 49 | | | . T | 'es X No | | |
| | (5) Provide for any purpose other than religious, | | • | | | | |
| | educational purposes, or for the prevention of | | - | □ Υ | es X No | ` | ' . . |
| b | If any answer is "Yes" to 5a(1)-(5), did any of the | transactions fail to qual | fy under the exception | | ۔،، ریے | ļ | , *\ |
| | Regulations section 53.4945 or in a current notice | | | | | 5b | N/A |
| | Organizations relying on a current notice regarding | • | • | | ▶ 🗍 | | |
| С | If the answer is "Yes" to question 5a(4), does the f | | | | | | , A) |
| | tax because it maintained expenditure responsibili | • | | Пү | es No | *, | *** |
| | If "Yes," attach the statement required by Regulat | • | ō(d). | | | 3 % | |
| 6a | Did the foundation, during the year, receive any fu | nds, directly or indirectly | y, to pay | | | 1 7 78 | ľ <i>"</i>] |
| | premiums on a personal benefit contract? | | | . N | es X No | · ¸ · | * |
| b | Did the foundation, during the year, pay premiums | , directly or indirectly, o | n a personal benefit o | | LI | 6b | × |
| | If "Yes" to 6b, file Form 8870 | | · | | | | |
| 7a | At any time during the tax year, was the foundation | a party to a prohibited | tax shelter transaction | on? 🔲 Y | 'es X No | [| |
| b | If "Yes," did the foundation receive any proceeds of | or have any net income | attnbutable to the tra | nsaction? | | 7b | N/A |
| | art VIII Information About Officers | | | | hly Paid Er | nploy | ees. |
| | and Contractors | | · | | | | <u> </u> |
| 1 | List all officers, directors, trustees, foundate | tion managers and t | heir compensation | ı (see instructions | s). | | |
| | | | | | | | |
| | | (b) Title, and average | (c) Compensation | (d) Contributions | s to |) Expens | se account, |
| | (a) Name and address | (b) Title, and average hours per week devoted to position | (c) Compensation (If not paid, enter -0-) | | s to (e | | se account, lowances |
| See | | hours per week | (If not paid, enter | (d) Contributions employee benefit i | s to (e | | |
| See | (a) Name and address | hours per week | (If not paid, enter | (d) Contributions employee benefit i | s to (e | | |
| See | (a) Name and address | hours per week devoted to position | (If not paid, enter -0-) | (d) Contributions employee benefit i | s to (e | | |
| See | (a) Name and address | hours per week devoted to position | (If not paid, enter -0-) | (d) Contributions employee benefit i | s to (e | | |
| See | (a) Name and address | hours per week devoted to position .00 | (If not paid, enter -0-) O | (d) Contributions employee benefit i | s to (e | | |
| See | (a) Name and address | hours per week devoted to position | (If not paid, enter -0-) | (d) Contributions employee benefit i | s to (e | | |
| See | (a) Name and address | hours per week devoted to position .00 .00 | (If not paid, enter -0-) 0 | (d) Contributions employee benefit i | s to (e | | |
| | (a) Name and address e Attached Statement | hours per week devoted to position .00 .00 .00 | (If not paid, enter -0-) 0 0 | (d) Contributions employee benefit is and deferred compe | s to (e plans nsation | | |
| | (a) Name and address e Attached Statement Compensation of five highest-paid employe | hours per week devoted to position .00 .00 .00 | (If not paid, enter -0-) 0 0 | (d) Contributions employee benefit is and deferred compe | s to (e plans nsation | | |
| | (a) Name and address e Attached Statement | hours per week devoted to position .00 .00 .00 | (If not paid, enter -0-) 0 0 | (d) Contributions employee benefit is and deferred compe | ns). If none, | | |
| 2 | (a) Name and address e Attached Statement Compensation of five highest-paid employeenter "NONE." | hours per week devoted to position .00 .00 .00 .00 .00 .00 .00 .00 .00 .0 | (If not paid, enter -0-) 0 0 0 e included on line | (d) Contributions employee benefit is and deferred compe | ns). If none, | other all | lowances |
| 2 | (a) Name and address e Attached Statement Compensation of five highest-paid employe | hours per week devoted to position .00 .00 .00 .00 .00 .00 .00 .00 .00 . | (If not paid, enter -0-) 0 0 0 e included on line | (d) Contributions employee benefit is and deferred compe 1—see instructio (d) Contribution employee be plans and deferred compe | ns). If none, |) Expens | |
| | (a) Name and address e Attached Statement Compensation of five highest-paid employee enter "NONE." | hours per week devoted to position .00 .00 .00 .00 .00 .00 .00 .00 .00 .0 | (If not paid, enter -0-) 0 0 0 e included on line | (d) Contributions employee benefit is and deferred compe 1—see instructio (d) Contributions employee be | ns). If none, |) Expens | se account, |
| 2 | (a) Name and address e Attached Statement Compensation of five highest-paid employee enter "NONE." | hours per week devoted to position .00 .00 .00 .00 .00 .00 .00 .00 .00 . | (If not paid, enter -0-) 0 0 0 e included on line | (d) Contributions employee benefit is and deferred compe 1—see instructio (d) Contribution employee be plans and deferred compe | ns). If none, |) Expens | se account, |
| | (a) Name and address e Attached Statement Compensation of five highest-paid employee enter "NONE." | hours per week devoted to position .00 .00 .00 .00 .00 .00 .00 .00 .00 . | (If not paid, enter -0-) 0 0 0 e included on line | (d) Contributions employee benefit is and deferred compe 1—see instructio (d) Contribution employee be plans and deferred compe | ns). If none, |) Expens | se account, |
| | (a) Name and address e Attached Statement Compensation of five highest-paid employee enter "NONE." | hours per week devoted to position .00 .00 .00 .00 .00 .00 .00 .00 .00 . | (If not paid, enter -0-) 0 0 0 e included on line | (d) Contributions employee benefit is and deferred compe 1—see instructio (d) Contribution employee be plans and deferred compe | ns). If none, |) Expens | se account, |
| | (a) Name and address e Attached Statement Compensation of five highest-paid employee enter "NONE." | hours per week devoted to position .00 .00 .00 .00 .00 .00 .00 .00 .00 . | (If not paid, enter -0-) 0 0 0 e included on line | (d) Contributions employee benefit is and deferred compe 1—see instructio (d) Contribution employee be plans and deferred compe | ns). If none, |) Expens | se account, |
| | (a) Name and address e Attached Statement Compensation of five highest-paid employee enter "NONE." | hours per week devoted to position .00 .00 .00 .00 .00 .00 .00 .00 .00 . | (If not paid, enter -0-) 0 0 0 e included on line | (d) Contributions employee benefit is and deferred compe 1—see instructio (d) Contribution employee be plans and deferred compe | ns). If none, |) Expens | se account, |
| | (a) Name and address e Attached Statement Compensation of five highest-paid employee enter "NONE." | hours per week devoted to position .00 .00 .00 .00 .00 .00 .00 .00 .00 . | (If not paid, enter -0-) 0 0 0 e included on line | (d) Contributions employee benefit is and deferred compe 1—see instructio (d) Contribution employee be plans and deferred compe | ns). If none, |) Expens | se account, |
| | (a) Name and address e Attached Statement Compensation of five highest-paid employee enter "NONE." | hours per week devoted to position .00 .00 .00 .00 .00 .00 .00 .00 .00 . | (If not paid, enter -0-) 0 0 0 e included on line | (d) Contributions employee benefit is and deferred compe 1—see instructio (d) Contribution employee be plans and deferred compe | ns). If none, |) Expens | se account, |
| | (a) Name and address e Attached Statement Compensation of five highest-paid employee enter "NONE." | hours per week devoted to position .00 .00 .00 .00 .00 .00 .00 .00 .00 . | (If not paid, enter -0-) 0 0 0 e included on line | (d) Contributions employee benefit is and deferred compe 1—see instructio (d) Contribution employee be plans and deferred compe | ns). If none, |) Expens | se account, |
| | (a) Name and address e Attached Statement Compensation of five highest-paid employee enter "NONE." | hours per week devoted to position .00 .00 .00 .00 .00 .00 .00 .00 .00 . | (If not paid, enter -0-) 0 0 0 e included on line | (d) Contributions employee benefit is and deferred compe 1—see instructio (d) Contribution employee be plans and deferred compe | ns). If none, |) Expens | se account, |

| Part VIII Information About Officers, Directors, Trustees, | , Foundation Managers, Highly Pai | d Employees, |
|---|--|------------------|
| and Contractors (continued) | as instructions) If none onter "NONE " | |
| 3 Five highest-paid independent contractors for professional services (se (a) Name and address of each person paid more than \$50,000 | (b) Type of service | (c) Compensation |
| (a) Name and address of each person paid more than \$50,000 | (b) Type of Service | (c) Compensation |
| ONE | | |
| | | |
| | | |
| | | |
| | | |
| otal 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 chantable activities during the tax year. Include relevant s the number of organizations and other beneficianes served, conferences convened, research pa | | Expenses |
| N/A | | |
| | | |
| | | |
| <u> </u> | | |
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| 3 | | |
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| 1 | | |
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| | | |
| Part IX-B Summary of Program-Related Investments (see | instructions) | |
| Describe the two largest program-related investments made by the foundation during the tax yea | er on lines 1 and 2 | Amount |
| N/A | | |
| | | |
| | | |
| | | |
| | | |
| All other program-related investments. See instructions | | |
| | | |
| | | 1 |
| | | i |
| | | |

Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment

Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation

income Enter 1% of Part I, line 27b (see instructions)

Adjusted qualifying distributions. Subtract line 5 from line 4 . . .

qualifies for the section 4940(e) reduction of tax in those years.

5

110,352

5

6

Part XIII Undistributed Income (see instructions) (c) (d) Corpus Years prior to 2011 2011 2012 Distributable amount for 2012 from Part XI, 54,277 line 7 Undistributed income, if any, as of the end of 2012 a Enter amount for 2011 only . . **b** Total for prior years: 20 _ _ , 20 Excess distributions carryover, if any, to 2012. a From 2007 . . 104,338 **b** From 2008 . . 7,671 19,291 **c** From 2009 90,014 **d** From 2010 41,394 e From 2011 . 262,708 f Total of lines 3a through e Qualifying distributions for 2012 from Part XII, line 4: F\$ a Applied to 2011, but not more than line 2a . **b** Applied to undistributed income of prior years (Election required—see instructions) . c Treated as distributions out of corpus (Election required—see instructions) 54.277 d Applied to 2012 distributable amount 56,608 e Remaining amount distributed out of corpus Excess distributions carryover applied to 2012. . . (If an amount appears in column (d), the same amount must be shown in column (a)) Enter the net total of each column as indicated below: 319,316 a Corpus Add lines 3f, 4c, and 4e Subtract line 5. **b** Prior years' undistributed income Subtract line 4b from line 2b . . c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed . . . d Subtract line 6c from line 6b Taxable amount-see instructions . . . e Undistributed income for 2011 Subtract line 4a from line 2a Taxable amount-see instructions f Undistributed income for 2012. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2013 . . . Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (see instructions) Excess distributions carryover from 2007 104,338 not applied on line 5 or line 7 (see instructions) Excess distributions carryover to 2013. 214,978 Subtract lines 7 and 8 from line 6a Analysis of line 9. 7,671 a Excess from 2008 19,291 **b** Excess from 2009 . . . 90,014 Excess from 2010 . . d Excess from 2011 . . 41,394 56,608 e Excess from 2012

| _ | The Columbian Chantable G | | | | 22-3796 | 037 Page 10 |
|----------|---|------------------------|---------------------------------------|---------------------------|--|-------------|
| _ | t XIV Private Operating Foundations | | | (, question 9) | | N/A |
| 1 а | If the foundation has received a ruling or determination, and the ruling is effective for 2012, enti- | | | _ | | |
| h | Check box to indicate whether the foundation is a | | · · | | 4942(j)(3) or | 4942(1)(5) |
| | Enter the lesser of the adjusted net | | T T T T T T T T T T T T T T T T T T T | | 4342()(3) (1 | 4542()(3) |
| | income from Part I or the minimum | Tax year | (h) 0044 | Prior 3 years | (4) 2000 | (e) Total |
| | investment return from Part X for each year listed | (a) 2012 | (b) 2011 | (c) 2010 | (d) 2009 | |
| 1. | | | - | - | | 0 0 |
| | 85% of line 2a | | | | | |
| · | line 4 for each year listed | | | | | 0 |
| d | Amounts included in line 2c not used directly | | | · · · · - | | |
| | for active conduct of exempt activities | | | | | 0 |
| е | Qualifying distributions made directly | | | | | |
| | for active conduct of exempt activities Subtract line 2d from line 2c | | | | | 0 |
| 3 | Complete 3a, b, or c for the | | | | + | 0 |
| | alternative test relied upon | | | | · | |
| а | "Assets" alternative test—enter | | | | | 0 |
| | (1) Value of all assets | | | | | |
| | (2) Value of assets qualifying under section 4942(j)(3)(B)(i) | | | | | 0 |
| b | "Endowment" alternative test—enter 2/3 | | | | | |
| | of minimum investment return shown in | | | | | • |
| _ | Part X, line 6 for each year listed . | | - | | | 0 |
| C | "Support" alternative test—enter (1) Total support other than gross | | | | | |
| | investment income (interest, | | | | | |
| | dividends, rents, payments on secunties loans (section | | | | | |
| | 512(a)(5)), or royalties) | | | | | 0 |
| | (2) Support from general public and 5 or more exempt | | | | | |
| | organizations as provided in | | | | | |
| | section 4942(j)(3)(B)(III) | | | | | 0 |
| | (3) Largest amount of support from an exempt organization | | | | | 0 |
| | (4) Gross investment income | | | | | 0 |
| Рa | rt XV Supplementary Information (Co | mplete this par | t only if the fo | undation had \$5 | 5.000 or more in | |
| | assets at any time during the ye | | | • | | |
| 1 | Information Regarding Foundation Manage | rs: | | | | |
| а | List any managers of the foundation who have con | tributed more than | 2% of the total con | tributions received by | the foundation | |
| | before the close of any tax year (but only if they ha | ive contributed mor | e man \$5,000) (Se | se section 507(d)(2)) | | |
| ŀ | List any managers of the foundation who own 10% | or more of the sto | ck of a corporation | (or an equally large p | ortion of the | |
| _ | ownership of a partnership or other entity) of which | | | | | |
| | | | | | | |
| 2 | Information Regarding Contribution, Grant | | - | - | | |
| | Check here If the foundation only makes unsolicited requests for funds. If the foundation makes | contributions to pre | eselected chantable | e organizations and d | oes not accept | |
| | other conditions, complete items 2a, b, c, and d | ikes giits, grants, et | e (see maddonons | , to marriada or org | | |
| a | The name, address, and telephone number or e-m | all of the person to | whom applications | should be addressed | I | |
| _ | | .e.11 NI 07057 0 | 04.005.6505 | | | |
| | nnis DeSantis 816 Pleasant View Terrace Ridge The form in which applications should be submitte | | | hould include | | |
| r. | , The form in which applications should be submitte | o ano miorniquori a | materials troy s | | | |
| | itten Request outlining detail purpopse and man | ner in which gran | t will be administe | ered | | |
| C | Any submission deadlines | | | | | |
| Nο | ne - Continuing as need arises | | | | | |
| .,, | Any restrictions or limitations on awards, such as t | y geographical are | as, chantable fields | s, kinds of institutions, | or other | |
| | factors | | | | | |
| Lin | nited to poor, religious, educational, expectant n | nothers, diabled, h | omeless, etc., pe | er by laws | | |

| 3 Grants and Contributions Paid During | the Year or Approved | for Future | Payment | · · · · · · · · · · · · · · · · · · · |
|--|--|----------------------|----------------------------------|---------------------------------------|
| Recipient | If recipient is an individual, show any relationship to any foundation manager | Foundation status of | Purpose of grant or contribution | Amount |
| Name and address (home or business) | or substantial contributor | recipient | | |
| a Paid during the year | | | DELIGIOUS ELECT | 4 007 |
| SAINT MATTHEWS CHURCH | | i | RELIGIOUS EVENT | 1,827 |
| 555 PROSPECT ST | | | FIELD TRIF | |
| RIDGEFIELD, NJ 07657 SEVERAL SOURCES | | | UNRESTRICTED | 10,000 |
| PO BOX 157 | | | IONICOTED | 10,000 |
| RAMSEY, NJ 07446 | | | | |
| SAINT MICHAELS CHURCH | | | UNRESTRICTED | 1,100 |
| 1ST ST & CENTRAL BLVD | | 1 | | |
| PALISADES PARK, NJ 07650 | | | | |
| SAINT NICHOLAS CHURCH | | | UNRESTRICTED | 12,000 |
| 442 E BRINKERHOFF ST | | | | |
| PALISADES PARK, NJ 07650 | | | | |
| NOTRE DAME INTERPEROCIAL SCHOOL | | | EDUCATIONAL | 21,400 |
| 321 FIRST STREET | | | EQUIPMENT | |
| PALISADES PARK, NJ 07650 | | | LINESCENICES | 5 000 |
| SAINT MICHAELS CHURCH | | | UNRESTRICTED | 5,000 |
| 1ST ST & CENTRAL BLVD | | | | |
| PALISADES PARK, NJ 07650 | | | UNRESTRICTED | 1,500 |
| WOUNDED WARRIOR PROJECT | | | UNKESTRICTED | 1,500 |
| 4899 BELFORT RD,SUITE 300 | | | | |
| JACKSONVILLE, FL 32256 NOTRE DAME INTERPEROCIAL SCHOOL | | | EDICATIONAL | 25,000 |
| 321 FIRST STREET | | l | FACILITIES | |
| PALISADES PARK, NJ 07650 | | | | |
| ARCH DIOCESE OF NEWARK | | | UNRESTRICTED | 2,500 |
| 171 CLIFTON AVE | | | | |
| NEWARK, NJ 07101 | | İ | | |
| DIOCESE OF VIJAYAPARUM SEMINARY | | | SEMINARY | 3,000 |
| P B. 82, KOTTAYAM | | | EDUCATION | |
| KERALA India | | | | 050 |
| SAINT MATTHEWS CHRUCH | | 1 | RELIGIOUS EVENT | 258 |
| 555 PROSPECT ST | | | | |
| RIDGEFIELD, NJ 07657 | <u>,L</u> | <u> </u> | ▶ 3a | 110,885 |
| Total See Attached Statement | | · · · · · | | 110,000 |
| b Approved for future payment | | | | |
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| Total | <u> </u> | <u> </u> | ▶ 3b | |

State | Zip Code

Foundation Status

07650

Foreign Country

Amount

2,500

Street

City

1ST ST & CENTRAL BLVD

Purpose of grant/contribution

PALISADES PARK
Relationship

UNRESTRICTED

| | gross amounts unless otherwise indicated. | I | iness income | Excluded by section | on 512, 513, or 514 | (e) |
|--|--|----------------------|---------------|---|---------------------|--|
| | | (a) Business code | (b) Amount | (c) Exclusion code | (d) Amount | Related or exempt function income (See instructions) |
| 1 Pro | gram service revenue: | | | | | |
| a | | | | | | |
| b | | | | | | - |
| C | | | | | | |
| d | | | | | | |
| e | | | | | | |
| f | Construction from any annual annual and any | | | | | |
| _ | Fees and contracts from government agencies | | | | | |
| | mbership dues and assessments | | | · | | |
| | | | | 14 | 53,283 | |
| | idends and interest from securities | 111111 | 1 - 5 () | *************************************** | 33,203 | 1-38 3 |
| | Debt-financed property | * 3 % * / | * 3000 | 75 N 9 100 N | 977 90 4 8 74 | - 22 608 22 |
| | Not debt-financed property | | | | | |
| | t rental income or (loss) from personal property | | | | | |
| | ner investment income | | - | | - | |
| | in or (loss) from sales of assets other than inventory | | | 18 | 28 | |
| | t income or (loss) from special events | | | | | |
| | oss profit or (loss) from sales of inventory | | | | | |
| | ner revenue. a | | | | | |
| b | | | | | | |
| C | | | | | | |
| - | | | | | | |
| d | | | | | | |
| d e | | | | | | |
| d e 12 Su | btotal. Add columns (b), (d), and (e) | * *** | 0 | | 53,311 | |
| d e 12 Su 13 To | btotal. Add columns (b), (d), and (e) tal. Add line 12, columns (b), (d), and (e) | | 0 | | 53,311 13 | 53,311 |
| d e 12 Su 13 To (See w | btotal. Add columns (b), (d), and (e) tal. Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calculations) | • | | | | |
| d e 12 Su 13 To (See w | btotal. Add columns (b), (d), and (e) tal. Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calculations) (VI-B Relationship of Activities to the Acc | complishment | of Exempt P | urposes | 13 | |
| d e 12 Su 13 To (See w Part | btotal. Add columns (b), (d), and (e) tal. Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calculations) VI-B Relationship of Activities to the Accordance Explain below how each activity for which income | complishment | of Exempt P | Purposes | 13 | 53,311 |
| d e 12 Su 13 To (See w | btotal. Add columns (b), (d), and (e) tal. Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calculations) (VI-B Relationship of Activities to the Acc | complishment | of Exempt P | Purposes | 13 | 53,311 |
| d e 12 Su 13 To (See w Part | btotal. Add columns (b), (d), and (e) tal. Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calculations) VI-B Relationship of Activities to the Accordance Explain below how each activity for which income | complishment | of Exempt P | Purposes | 13 | 53,311 |
| d e 12 Su 13 To (See w Part | btotal. Add columns (b), (d), and (e) tal. Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calculations) VI-B Relationship of Activities to the Accordance Explain below how each activity for which income | complishment | of Exempt P | Purposes | 13 | 53,311 |
| d e 12 Su 13 To (See w Part | btotal. Add columns (b), (d), and (e) tal. Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calculations) VI-B Relationship of Activities to the Accordance Explain below how each activity for which income | complishment | of Exempt P | Purposes | 13 | 53,311 |
| d e 12 Su 13 To (See w Part | btotal. Add columns (b), (d), and (e) tal. Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calculations) VI-B Relationship of Activities to the Accordance Explain below how each activity for which income | complishment | of Exempt P | Purposes | 13 | 53,311 |
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| d e 12 Su 13 To (See w Part | btotal. Add columns (b), (d), and (e) tal. Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calculations) VI-B Relationship of Activities to the Accordance Explain below how each activity for which income | complishment | of Exempt P | Purposes | 13 | 53,311 |
| d e 12 Su 13 To (See w Part | btotal. Add columns (b), (d), and (e) tal. Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calculations) VI-B Relationship of Activities to the Accordance Explain below how each activity for which income | complishment | of Exempt P | Purposes | 13 | 53,311 |
| d e 12 Su 13 To (See w Part | btotal. Add columns (b), (d), and (e) tal. Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calculations) VI-B Relationship of Activities to the Accordance Explain below how each activity for which income | complishment | of Exempt P | Purposes | 13 | 53,311 |
| d e 12 Su 13 To (See w Part | btotal. Add columns (b), (d), and (e) tal. Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calculations) VI-B Relationship of Activities to the Accordance Explain below how each activity for which income | complishment | of Exempt P | Purposes | 13 | 53,311 |
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Richard Balletto

Firm's name

► Richard A Balletto CPA

Firm's address > 52 Mariton Drive, Wayne, NJ 07470

Preparer

Use Only

| Form 990-P | F (2012) The Columb | <u>oian</u> Charitable Gr | roup of Palisades Park Ridg | gefield_Inc_ | _ | 22-3796 | 3037 | Pag | e 13 |
|---------------|--------------------------------------|--|--|-------------------|-----------------------------|--|-----------|-----------|--------|
| Part XV | | • | ers To and Transactior | ns and Re | lationships W | ith Nonchari | able | | |
| | Exempt Organiz | ations | | | | | | | |
| 1 Did t | he organization directly | or indirectly engage | ge in any of the following wi | ith any othe | r organization de | scribed | | Yes | No |
| ın se | ction 501(c) of the Code | (other than section | on 501(c)(3) organizations) | or in section | n 527, relating to | political | | | \Box |
| | nizations? | • | | | | • | | | ĺ |
| • | | | | | | | ŀ | | ļ |
| | | | onchantable exempt organi | zation of: | | | | | |
| (1) (| Cash | • | | | | | 1a(1) | | X |
| (2) | Other assets | | | | | | 1a(2) | | X |
| b Othe | r transactions: | | | | | | | | Í |
| (1) 5 | Sales of assets to a non- | chantable exempt | t organization | | | | 1b(1) | | Х |
| (2) F | Purchases of assets fror | n a nonchantable | exempt organization . | | | | 1b(2) | | X |
| (3) F | Rental of facilities, equip | ment, or other as: | sets | | | | 1b(3) | | Х |
| | Reimbursement arrange | | | | | | 1b(4) | | X |
| | oans or loan guarantee | | | | | | 1b(5) | _ | X |
| | • | | or fundraising solicitations . | | | | 1b(6) | - | X |
| | | - | other assets, or paid employ | | | | 1c | | x |
| | • • • • | • | | | | | | L | _^ |
| value | of the goods, other ass | sets, or services q | nplete the following schedul liven by the reporting founds int, show in column (d) the v | ation. If the | foundation receive | ed less than fai | ir marke | et ed. | |
| (a) Line no | (b) Amount involved | (c) Name of no | oncharitable exempt organization | (d) De | escription of transfers, | transactions, and sh | anng arra | ngeme | nts |
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The Columbian Charitable Group of Palisades Park Ridgefield inc Part I, Line 6 (990-PF) - Gain/Loss from Sale of Assets Other Than Inventory

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| Cost, Other | Basis and Expenses | | | Expense of Sale and Cost of | Improve- | GIDII. | | | | | | | | | | | | | | | | | | | | | | | | | | i | | | | |
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| Gross | Sales | | | | Cost or | 11,180 | 13,256 | 14,596 | 10,212 | 11,744 | 50,543 | 50,149 | 50,149 | 8,445 | 10,943 | 1,526 | 2,976 | 1,214 | 1,047 | 939 | 117 | 30,104 | 30,038 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 216 |
| Totals | | Capital Gains/Losses | Other sales | | Gross Sales | 14.406 | 13,958 | 17,631 | 10,488 | 15,049 | 43,962 | 46,496 | 46,747 | 8,373 | 10,849 | 1,513 | 2,951 | 1,204 | 1,038 | 931 | 116 | 35,854 | 27,589 | 4 | 4 | 4 | 5 | 5 | 4 | 4 | 4 | 4 | 2 | 4 | 4 | 216 |
| | | ප | | | Date | 470/2012 | 4/20/2012 | 4/20/2012 | 4/20/2012 | 4/20/2012 | 4/4/2012 | 8/8/2012 | 8/8/2012 | 3/26/2012 | 4/26/2012 | 5/29/2012 | 6/25/2012 | 7/25/2012 | 10/25/2012 | 11/26/2012 | 11/26/2012 | 4/4/2012 | 4/4/2012 | 1/11/2012 | 2/14/2012 | 3/13/2012 | 4/10/2012 | 5/16/2012 | 6/12/2012 | 7/6/2012 | 8/10/2012 | 9/12/2012 | 10/8/2012 | 11/19/2012 | 12/11/2012 | 12/31/2012 |
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Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief it is true perfect, and complete, and that I am authorized to prepare this form.

I Mille State on

Date ► 8/13/2013

Form 8868 (Rev. 1-2013)