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## Form **990-PF**

c Adjusted net Income nonegative

LHA For Paperwork Reduction Act Notice, see instructions.

Return of Private Foundation or Section 4947(a)(1) Nonexempt Charitable Trust
Treated as a Private Foundation
Note. The foundation may be able to use a copy of this return to satisfy state reporting requirements Department of the Treasury Internal Revenue Service For calendar year 2012 or tax year beginning and ending Name of foundation A Employer identification number THE SHAPIRO FAMILY FOUNDATION 22-6767630 Number and street (or P O box number if mail is not delivered to street address) Room/suite B Telephone number 252 HIGHWOOD AVENUE 201-568-0787 City or town, state, and ZIP code C If exemption application is pending, check here TENAFLY, NJ 07670 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, check here and attach computation Address change Name change X Section 501(c)(3) exempt private foundation H Check type of organization E 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 X Cash I Fair market value of all assets at end of year | J | Accounting method Accrual F If the foundation is in a 60-month termination (from Part II, col. (c), line 16) Other (specify) under section 507(b)(1)(B), check here 179, 468. (Part I, column (d) must be on cash basis.) ▶\$ Part I Analysis of Revenue and Expenses (d) Disbursements (a) Revenue and (b) Net investment (c) Adjusted net (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a)) for chantable purposes (cash basis only) expenses per books income income N/A 328,834 Contributions, gifts, grants, etc , received Check If the foundation is not required to attach Sch. B. Interest on savings and temporary cash investments 3 9,575. 9,575. STATEMENT 4 Dividends and interest from securities 5a Gross rents D Net rental income or (loss) -9316a Net gain or (loss) from sale of assets not on line 10 288,281. 7 Capital gain net income (from Part IV, line 2) 8 Net short-term capital gain Income modifications 10a Gross sales less returns and allowances **b** Less Cost of goods sold c Gross profit or (loss) 11 Other income 337,478 9,575. 12 Total. Add lines 1 through 11 0. Compensation of officers, directors, trustees, etc 14 Other employee salaries and wages 15 Pension plans, employee benefits 16a Legal fees 4,530. STMT 2 4,530. **b** Accounting fees c Other professional fees 17 Interest 18 Taxes 19 Depreciation and depletion 20 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications 338. 23 Other expenses STMT 3 0. 24 Total operating and administrative 4,868 4,530. expenses. Add lines 13 through 23 25 Contributions; gifts, grants paid 276,157. 276,157. 26 Total expenses and tisbursements. Add lines 24 and 25 281,025 4,530 276,157. 27 Subtract time 26 from line 12 MAY 20 a Excess of Payenue over expenses ar 56,453. 5,045 b Net investment-income (if negative, enter

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N/A

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182,288.

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

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(à) List and describe the	Losses for Tax on Inversion of the kind(s) of property sold (e.g., se; or common stock, 200 shs	real estate,		P	łow acc - Purch - Donat	ase '	) Date ac (mo , da		(d) Date sold (mo , day, yr )
a	<del></del>								
b SEE ATTACHED ST	ATEMENT		<del>,</del>	<u> </u>					
<u>c</u>				<u> </u>					
d				↓					
<u>e</u>				<u> </u>					
(e) Gross sales price	(f) Depreciation allowed (or allowable)		t or other basis xpense of sale					n or (loss) (f) minus (	
a									
b									
c									<del></del>
d						_			001
288,281.			289,21	.2 •					-931
Complete only for assets showing gain	in column (h) and owned by the	he foundation	on 12/31/69					l (h) gain	
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69		cess of col (ı) col (ı), ıf any			CO1 (I	(), Dut no Losses (	ot less than from col (	1 -U-) or h)) 
a			•						
b									
C									
d									
e									-931
Capital gain net income or (net capital lo	If gain, also enter (If (loss), enter -0-	in Part I, line	7	}	2				-931
	•		,	7	-				
Net short-term capital gain or (loss) as		d (6)		۱۱					
If gain, also enter in Part I, line 8, column	n (c)			-	3			N/A	
If (loss), enter -0- in Part I, line 8  Part V Qualification Unde	r Section 4940(e) for	Poducod	Tay on Not	l lov	_	ent Inco	me	IV/ A	
as the foundation liable for the section 49. Yes, the foundation does not qualify un	der section 4940(e). Do not co	mplete this pa	rt						Yes X N
Enter the appropriate amount in each c	olumn for each year, see the in	istructions de	fore making any o	entries	<u> </u>		т —	<del></del>	(d)
(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying dist	tributions	Net value of n	(c) oncha	ritable-i	use assets	Ι ,	Distrit	(d) oution ratio rided by col (c))
2011	27	0,242.			12	5,452.			2.15414
2010	23	4,293.			15	9,024.	1		1.47331
2009		6,280.				2,736.			1.39047
2008		6,100.				1,461.			1.12868
2007		6,735.				3,927.			1.31963
! Total of line 1, column (d)							2		7.46626
Average distribution ratio for the 5-year	base period - divide the total (	on line 2 by 5.	or by the numbe	r of ve	ears				
the foundation has been in existence if		<b>, -,</b>	,	,			3		1.49325
Enter the net value of noncharitable-use	assets for 2012 from Part X,	line 5					4		172,317
5 Multiply line 4 by line 3							5		257,313
· Montply into a by into b			-						
Enter 1% of net investment income (19	6 of Part I, line 27b)	-					6		50
7 Add lines 5 and 6							7		257,363
B Enter qualifying distributions from Part	XII, line 4						8		276,157
If line 8 is equal to or greater than line? See the Part VI instructions	7, check the box in Part VI, line	1b, and comp	olete that part usi	ng a 1	% tax r	ate			

			<u>67676</u>			age 4
Pε	art VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4	948 -	see in	stru	ctior	ıs)
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)				_	
t	Domestic foundations that meet the section 4940(e) requirements in Part V, check here 🕒 🗶 and enter 1%	1				50.
	of Part I, line 27b					
	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, col (b)	1 1				^
	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)	2				<u>0.</u>
3	Add lines 1 and 2	3				50.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)	4				0.
	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-	5			-	50.
	Credits/Payments  2012 estimated tax payments and 2011 overpayment credited to 2012  6a 837.					
	Exempt foreign organizations - tax withheld at source					
	Tax paid with application for extension of time to file (Form 8868).					
	1 Backup withholding erroneously withheld	_			0	37.
_	Total credits and payments Add lines 6a through 6d	7			0	3/.
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	8				
	Tax due If the total of lines 5 and 8 is more than line 7, enter amount owed	9			7	87.
	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid  Enter the amount of line 10 to be Credited to 2013 estimated tax   787. Refunded	10				0.
	Enter the amount of line 10 to be Credited to 2013 estimated tax   787 - Refunded   art VII-A   Statements Regarding Activities	1 11 1	<u> </u>			•
	a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene	ın	E		Yes	No
10	any political campaign?	: nı	ŀ	1a		X
,	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)?		1	1b		X
•	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published	ed or	ŀ			
	distributed by the foundation in connection with the activities.	50 01		- 1	1	
	© Did the foundation file Form 1120-POL for this year?			10	1	Х
	I Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year		ŀ			
•	(1) On the foundation ► \$ 0 • (2) On foundation managers ► \$ 0 •		ŀ			
	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?		[	2	1	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 of incorporation,	or				
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes			3		Х
4:	a Did the foundation have unrelated business gross income of \$1,000 or more during the year?		[	4a		X
- 1	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?			5		Х
	If "Yes," attach the statement required by General Instruction T.					
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either		İ		:	
	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.	e law			-	ŀ
	remain in the governing instrument?		- 1	6		X
7	Did the foundation have at least \$5,000 in assets at any time during the year?			7	<u>X</u>	ļ
	If "Yes," complete Part II, col. (c), and Part XV.				:	
8	a Enter the states to which the foundation reports or with which it is registered (see instructions)		[			
	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)					ŀ
	of each state as required by General Instruction G? If "No," attach explanation		ļ	8b	X	ļ
9		endar				.,
	year 2012 or the taxable year beginning in 2012 (see instructions for Part XIV)? If "Yes," complete Part XIV			9		X
10	Did any nersons become substantial contributors during the tay year? If *Vec * attach a schedule listing their names and addresses			10		ιX

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b If "Yes," did it have excess business holdings in 2012 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 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,

b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that

Form 4720, to determine if the foundation had excess business holdings in 2012.)

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

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

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Х

3b

4a

Yes X No

N/A

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Part VII-B Statements Regarding Activities for Which I	Form 4720 May Be F	tequirea (continu	ued)	<del></del>
5a During the year did the foundation pay or incur any amount to			[ <del>V</del> ]	
(1) Carry on propaganda, or otherwise attempt to influence legislation (section			s X No	
(2) Influence the outcome of any specific public election (see section 4955), o	or to carry on, directly or indire		ডে	
any voter registration drive?	-	r <del></del> -1	s X No	
(3) Provide a grant to an individual for travel, study, or other similar purposes		Ye	s X No	
(4) Provide a grant to an organization other than a charitable, etc., organization	n described in section			
509(a)(1), (2), or (3), or section 4940(d)(2)?			es X No	
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or f			
the prevention of cruelty to children or animals?		Ye	es X No	
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und	der the exceptions described i	n Regulations	.	
section 53 4945 or in a current notice regarding disaster assistance (see instru	ictions)?		N/A	5b
Organizations relying on a current notice regarding disaster assistance check h	iere			
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption f	rom the tax because it maintai	ned		
expenditure responsibility for the grant?	N	/A 🔲 Ye	es 🔲 No	
If "Yes," attach the statement required by Regulations section 53.494	5-5(d).			
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	• •			
a personal benefit contract?			s X No	
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	personal benefit contract?		The state of the s	6b   X
If "Yes" to 6b, file Form 8870.				
7a At any time during the tax year, was the foundation a party to a prohibited tax s	shelter transaction?	☐ Ye	s X No	1 1
b If "Yes," did the foundation receive any proceeds or have any net income attribu			/- P	7b
Part VIII Information About Officers, Directors, Trust Paid Employees, and Contractors		nagers, Highly		
List all officers, directors, trustees, foundation managers and their	compensation			
- List an omore, an estere, trastees, roundation managers and then	(b) Title, and average	(c) Compensation	(d) Contributions to	(e) Expense
(a) Name and address	hòurs per week devoted to position	(If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	account, other allowances
SHIRLEY SHAPIRO	TRUSTEE		ļ	
252 HIGHWOOD AVENUE	}			1
TENAFLY, NJ 07670	0.00	0.	0.	0.
DIANE SHAMAS	FOUNDATION MA	NAGER		
257 KIM HUBBARD ROAD	]			
PUTNEY, VT 05346	0.00	0.	0.	0.
	_			ļ
	-		ļ	
2 Compensation of five highest-paid employees (other than those inc	cluded on line 1). If none,	enter "NONE."	1.4.0	
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE				
	<u> </u>			
				<u></u>
		_		
			1	
	1			
	<u> </u>	•	1	
	1			<u></u>
Total number of other employees paid over \$50,000			<b>&gt;</b>	0

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All other program-related investments. See instructions

Total. Add lines 1 through 3

Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.) Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes 134,170. a Average monthly fair market value of securities 1a 40,771 Average of monthly cash balances 1b c Fair market value of all other assets 10 174,941. Total (add lines 1a, b, and c) 10 Reduction claimed for blockage or other factors reported on lines 1a and 0. 1c (attach detailed explanation) 1e Acquisition indebtedness applicable to line 1 assets 174,941 Subtract line 2 from line 1d 3 2.624 Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see instructions) 4 172,317. Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4 5 8,616. Minimum investment return. Enter 5% of line 5 Distributable Amount (see instructions) (Section 4942(I)(3) and (I)(5) private operating foundations and certain foreign organizations check here 
and do not complete this part ) 8,616. Minimum investment return from Part X, line 6 50 Tax on investment income for 2012 from Part VI. line 5 2a Income tax for 2012 (This does not include the tax from Part VI) 2b Add lines 2a and 2b 2¢ Distributable amount before adjustments. Subtract line 2c from line 1 3 Recoveries of amounts treated as qualifying distributions 4 8,566 5 Add lines 3 and 4 Deduction from distributable amount (see instructions) 6 8,566 Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII, line 1. Part XII Qualifying Distributions (see instructions) Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes 276,157. a Expenses, contributions, gifts, etc - total from Part I, column (d), line 26 1a Program-related investments - total from Part IX-B 1b 2 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes 2 Amounts set aside for specific charitable projects that satisfy the 3 Suitability test (prior IRS approval required) 3a 3b Cash distribution test (attach the required schedule) 276,157 Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4 4 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income Enter 1% of Part I, line 27b Adjusted qualifying distributions. Subtract line 5 from line 4 Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years

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Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2011	(c) 2011	(d) 2012
1 Distributable amount for 2012 from Part XI,				
line 7				8,566.
2 Undistributed income, if any, as of the end of 2012				
a Enter amount for 2011 only			0.	
b Total for prior years.				
	:	0.		
3 Excess distributions carryover, if any, to 2012				
a From 2007 170,071.				
b From 2008 206,527.	=			
c From 2009 218, 225.				
d From 2010 226, 344.				
e From 2011 264,039.	1 005 006			
f Total of lines 3a through e	1,085,206.			
4 Qualifying distributions for 2012 from				
Part XII, line 4 $\triangleright$ \$ 276, 157.	<u> </u>		0	
a Applied to 2011, but not more than line 2a			0.	
b Applied to undistributed income of prior	:	0.	,	
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus	0.			
(Election required - see instructions)	V •			8,566.
d Applied to 2012 distributable amount	267,591.			0,300.
e Remaining amount distributed out of corpus	0.			0.
5 Excess distributions carryover applied to 2012 (If an amount appears in column (d), the same amount must be shown in column (a))	<b></b>			0.
6 Enter the net total of each column as indicated below:				
2 Corpus Add lines 3f, 4c, and 4e Subtract line 5	1,352,797.			
b Prior years' undistributed income Subtract		_		<u>.</u>
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 assessed		0.		
d Subtract line 6c from line 6b Taxable				
amount - see instructions		0.		
e Undistributed income for 2011. Subtract line				
4a from line 2a Taxable amount - see instr			0.	
f Undistributed income for 2012 Subtract		<u>.</u>		
lines 4d and 5 from line 1. This amount must				
be distributed in 2013				0.
7 Amounts treated as distributions out of				1
corpus to satisfy requirements imposed by				1
section 170(b)(1)(F) or 4942(g)(3)	0.			
8 Excess distributions carryover from 2007	450 054			-
not applied on line 5 or line 7	170,071.			
9 Excess distributions carryover to 2013.	1 100 506			
Subtract lines 7 and 8 from line 6a	1,182,726.			
10 Analysis of line 9	,	1		1
a Excess from 2008 206, 527.		1		1
b Excess from 2009 218, 225.		1		1
c Excess from 2010 226, 344.				<b>‡</b>
d Excess from 2011 264,039.		1		
e Excess from 2012 267,591.	l		<u> </u>	5 000 DF (0040)

Part XIV Private Operating	Foundations (see in:	structions and Part VII	·A, question 9)	N/A	
1 a If the foundation has received a ruling	or determination letter that	t it is a private operating			
foundation, and the ruling is effective f	or 2012, enter the date of t	the ruling	▶		
b Check box to indicate whether the four	ndation is a private operatir	ng foundation described i	n section	4942(j)(3) or 49	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) 2012	(b) 2011	(c) 2010	(d) 2009	(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					
e Qualifying distributions made directly		<del></del>			
for active conduct of exempt activities					
Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the alternative test relied upon					
a "Assets" alternative test - enter (1) Value of all assets					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test - enter					-
2/3 of minimum investment return shown in Part X, line 6 for each year listed					
c "Support" alternative test - enter					
(1) Total support other than gross investment income (interest,					
dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from					
an exempt organization					
(4) Gross investment income					
Part XV Supplementary Inf	ormation (Comple	te this part only	if the foundation	had \$5 000 or me	ore in assets
at any time during			ii tilo rouridation	1100 40,000 01 111	310 III 000010
Information Regarding Foundat					
a List any managers of the foundation v	vho have contributed more		ributions received by the 1	foundation before the clo	se of any tax
year (but only if they have contributed	more than \$5,000) (See s	section 507(d)(2))			
SEE STATEMENT 6		<u></u>			
b List any managers of the foundation v other entity) of which the foundation i			(or an equally large portio	n of the ownership of a p	artnership or
ONE					
2 Information Regarding Contribu		, Scholarship, etc., P	rograms:		
Check here X if the foundation the foundation makes gifts, grants, etc.	only makes contributions	to preselected charitable	organizations and does no		
a The name, address, and telephone nu	·				
a The name, address, and telephone nu	mber of e-mail of the perso	on to whom applications :	enonia ne adaressea		
b The form in which applications should	l be submitted and informa	ation and materials they s	hould include		
c Any submission deadlines					
d Any restrictions or limitations on awa	rde euch se hy aggaraghic	nat areas charitable fields	kinds of institutions or o	ther factors	
a rany restrictions of infiltations oil dwa	us, such as by geographic	ai aicas, Chantable Helds	, milus vi ilistitutiviis, Vf V	מוטו ומטנטוס	

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Part XV Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation status of Purpose of grant or contribution show any relationship to Amount any foundation manager Name and address (home or business) or substantial contributor recipient a Paid during the year AIDS PROJECT OF VERMONT NONE OTHER PUBLIC GENERAL 15 GROVE STREET CHARITY BRATTLEBORO, VT 05302 GENERAL 250. NONE AMERICAN BALLET THEATRE OTHER PUBLIC GENERAL 890 BROADWAY CHARITY NEW YORK, NY 10003 4,700. OTHER PUBLIC GENERAL NONE AMERICAN CANCER SOCIETY 19 WEST 56TH STREET CHARITY NEW YORK, NY 10019 200. AMERICAN HEART ASSOCIATION NONE OTHER PUBLIC GENERAL 2550 US ROUTE #1 CHARITY NORTH BRUNSWICK, NJ 08902 100. AMERICAN TECHNION SOCIETY NONE OTHER PUBLIC GENERAL 55 EAST 59TH STREET CHARITY NEW YORK, NY 10022 300. SEE CONTINUATION SHEET(S) ➤ 3a Total 276,157. b Approved for future payment NONE **▶** 3b 0<u>.</u> Total

## Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated	Unrelated	business income		led by section 512, 513, or 514	(e)
	(a) Business	(b) Amount	(C) Exclu- sion	(d) Amount	Related or exempt function income
1 Program service revenue	code	Amount	code	AHIOUH	- Idiliction income
a	_			_	
b	i I				
<u> </u>	_				
d	_				
e					
†	_				
g Fees and contracts from government agencies	-				
2 Membership dues and assessments					<del> </del>
3 Interest on savings and temporary cash investments					
4 Dividends and interest from securities					9,575.
5 Net rental income or (loss) from real estate					
a Debt-financed property					
b Not debt-financed property					
6 Net rental income or (loss) from personal property					
7 Other investment income					
8 Gain or (loss) from sales of assets other	<del></del>		1 1		
than inventory					-931.
9 Net income or (loss) from special events					,,,,,
10 Gross profit or (loss) from sales of inventory					
11 Other revenue					
a b	-				
c	1 1				
	1				
0		•			
12 Subtotal Add columns (b), (d), and (e)	_	(	5.	0.	8,644.
13 Total. Add line 12, columns (b), (d), and (e)	<u> </u>		: Fl	13	8,644. 8,644.
(See worksheet in line 13 instructions to verify calculations	)				
			_		

#### Relationship of Activities to the Accomplishment of Exempt Purposes

Line No.	Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of
	the foundation's exempt purposes (other than by providing funds for such purposes)
1	INVESTMENT INCOME IS ADDED TO PRINCIPAL AND UTILIZED TO PURSUE A
2	PROGRAM OF SUPPORTING VARIOUS CHARITABLE ORGANIZATIONS DETERMINED BY
3	THE TRUSTEES TO BE WORTHWHILE CHARITABLE ORGANIZATIONS IN NEED OF
4	ADDITIONAL FINANCIAL SUPPORT. THE TRUSTEES SELECT SUCH CHARITABLE
5	ORGANIZATIONS AT LEAST ANNUALLY.

WHITE PLAINS, NY 10603

-om 990		12) THE S	UNLIKO LE	TAITTI L	JUNDATION		22-0	707030	<u> </u>	ge 13
Part X	VII	Information Re Exempt Organi		sfers To a	nd Transactions a	nd Relationsh	nips With None	charitable	•	
<b>1</b> Did	the org	anization directly or indir	ectly engage in any	of the following	with any other organization	n described in section	on 501(c) of		Yes	No
the	Code (o	ther than section 501(c)	(3) organizations) (	or in section 52	7, relating to political organi	izations?				
<b>a</b> Tran	isfers fi	om the reporting founda	ition to a noncharita	able exempt org	anization of					
(1)	Cash							1a(1)		_X_
(2)	Other a	ssets		-				1a(2)		X
<b>b</b> Othe	er trans	actions								
(1)	Sales o	of assets to a noncharitat	ble exempt organiza	ation				1b(1)		X
(2)	Purcha	ses of assets from a nor	ncharitable exempt	organization		-		1b(2)		X
(3)	Rental	of facilities, equipment, o	or other assets					1b(3)		X
(4)	Reimb	ursement arrangements						1b(4)		X
(5)	Loans	or loan guarantees				-		1b(5)		X
(6)	Perfor	mance of services or me	mbership or fundra	ısıng solıcıtatıoı	ns			1b(6)		X
	•	facilities, equipment, mai	•		•			10		X
<b>d</b> If th	e answ	er to any of the above is '	"Yes," complete the	following sched	dule Column (b) should alv	vays show the fair m	arket value of the go	ods, other ass	ets,	
					ed less than fair market valu	e in any transaction	or sharing arrangem	ent, show in		
		the value of the goods,	-							
(a) Line no	) (	b) Amount involved	(c) Name o		exempt organization	(d) Description	of transfers, transactions	s, and sharing ar	rangeme	nts
			-	N/A						
			,							
							····			
	_		<del></del>							
	-									
	+									
	+									
<del></del>	-					<del></del>				
	-									
	+									
20 10 11	ha faun	dation disasthi as indirect	the affiliated with a	related to one	or more toy exempt erecov	-ations described				
		•	-		or more tax-exempt organi	zations described			T	] No
		501(c) of the Code (other	-	c)(3)) or iii seci	1011 527 /			L Yes	LA	טווו נ.
י יו ט	es, co	mplete the following sch (a) Name of org		• • • • • • • • • • • • • • • • • • • •	(b) Type of organization	1 (	c) Description of rela	ntionship		
		N/A	jumzation		(b) Typo or organization	'	ay becompared or real	onomp		
		21,722								
					···	<del></del>				
						***************************************				
					g accompanying schedules and			May the IRS	diagrica	Abre
Sign	and be	ief, it is true, correct and cor	plete Declaration of	preparer (other thai	n taxpayer) is based on all inform	nation of which preparer	has any knowledge	return with th	e prepa	rer
Here		Skul	ey Aka	pero	15/14/12	TRUSTE	E	shown below		] No
	Sign	ature of officer or trustee	, , , , , , ,	1	Date	Title		-		
	<u> </u>	Print/Type preparer's na	ame	Preparer's s		Date	Check If	PTIN		
		•			NIK 1	Sholin 1	self- employed			
Paid		DAVID I. B	ARISH	Yen	All Park	3/10/13		P00387		<u> </u>
Prepa	arer	Firm's name ► BAR	ISH & O'	BRIEN	7		Firm's EIN ► 13			
Use (	Only									
		Firm's address ▶ 57	2 NORTH	BROADWA	.Y					

914-428-8600

Phone no

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

Department of the Treasury Internal Revenue Service

# **Schedule of Contributors**

► Attach to Form 990, Form 990-EZ, or Form 990-PF.

OMB No 1545-0047

2012

Name of the organization

Employer identification number

Т	HE SHAPIRO FAMILY FOUNDATION	22-6767630
Organization type (check	one):	
Filers of:	Section:	
Form 990 or 990-EZ	501(c)( ) (enter number) organization	
	4947(a)(1) nonexempt charitable trust not treated as a private foundation	ก
	527 political organization	
Form 990-PF	X 501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a private foundation	
	501(c)(3) taxable private foundation	
Note. Only a section 501(	n is covered by the <b>General Rule</b> or a <b>Special Rule</b> . (c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special	
	pplete Parts I and II.	
Special Rules		
509(a)(1) and 17	1(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test or 0(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.	n of the greater of (1) \$5,000 or (2) 2%
total contribution	1(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any orns of more than \$1,000 for use exclusively for religious, charitable, scientific, literar for cruelty to children or animals. Complete Parts I, II, and III	
contributions for If this box is che purpose. Do not	1(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any or use exclusively for religious, charitable, etc., purposes, but these contributions dicked, enter here the total contributions that were received during the year for an ecomplete any of the parts unless the <b>General Rule</b> applies to this organization below, etc., contributions of \$5,000 or more during the year	id not total to more than \$1,000. exclusively religious, charitable, etc.,
	that is not covered by the General Rule and/or the Special Rules does not file Sc on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or	

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2012)

certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization

Employer identification number

## THE SHAPIRO FAMILY FOUNDATION

22-6767630

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

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	RACHEL APPELLOF  160 FAIRFIELD WOODS ROAD  FAIRFIELD , CT 06825	\$300.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	SHIRLEY SHAPIRO  252 HIGHWOOD AVENUE  TENAFLY, NJ 07670	\$59,064.	Person Payroli Noncash X (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3	SHIRLEY SHAPIRO  252 HIGHWOOD AVENUE  TENAFLY, NJ 07670	\$112,103.	Person Payroll Noncash X (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4	SHIRLEY SHAPIRO  252 HIGHWOOD AVENUE  TENAFLY, NJ 07670	\$\$4,957.	Person Payroll Noncash X (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5	SHIRLEY SHAPIRO  252 HIGHWOOD AVENUE  TENAFLY, NJ 07670	\$	Person Payroll Noncash X (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)

Name of organization

Employer identification number

# THE SHAPIRO FAMILY FOUNDATION

22-6767630

(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	50000 NEW BRUNSWICK NJ BOND		
-		\$59,064.	01/31/12
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
3 -	100000 BERGEN CNTY NJ BOND		
-		<u> </u>	04/02/12
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
4	50000 NJ ST EDL BOND		
-		\$\$	04/02/12
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
5	90000 LONE STAR TX BOND		
1	20000 SHS WEST ORANGE	\$\$	09/18/12
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	90, 990-EZ, or 990-PF) (

Employer identification number

HE SH	APIRO FAMILY FOUNDATION			22-6/6/630		
Part III	Exclusively religious, charitable, etc., Indivi- year. Complete columns (a) through (e) and the the total of exclusively religious, charitable, etc Use duplicate copies of Part III if additional	following line entry For organiza , contributions of <b>\$1,000 or less</b>	ations completing	0) organizations that total more than \$1,000 for the Part III, enter this information once.)		
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held		
	Transferee's name, address, an	(e) Transfer of		onship of transferor to transferee		
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held		
	Transferee's name, address, an	(e) Transfer of		onship of transferor to transferee		
(a) No.						
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held		
	(e) Transfer of gift					
	Transferee's name, address, an	and ZIP + 4		onship of transferor to transferee		
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held		
	(e) Transfer of gift					
	Transferee's name, address, ar	nd ZIP + 4	Relat	ionship of transferor to transferee		

Part XV Supplementary Informati				
3 Grants and Contributions Paid During the			<del> </del>	
. 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
ivanie and address (nome of business)	or substantial contributor	recipient		
ARTS COUNCIL OF MORRIS AREA	NONE	OTHER PUBLIC	GENERAL	
15 MAPLE AVE		CHARITY		
MORRISTOWN, NJ 07960				1,000.
BERGEN PERFORMING ARTS	NONE	OTHER PUBLIC	GENERAL	
30 NORTH VAN BRUNT STREET		CHARITY		
ENGLEWOOD, NJ 07631			-	1,000.
CYSTIC FIBROSIS	NONE	OTHER PUBLIC	GENERAL	
6931 ARLINGTON RD		CHARITY		<u> </u>
BETHESDA, MD 20814				50.
	ļ			
CAMP SUNSHINE AND CAMP SNOWFLAKE	NONE	OTHER PUBLIC	GENERAL	
PO BOX 99		CHARITY		
RIDGEWOOD, NJ 07451				15,000.
CANCERCARE, INC.	NONE	OTHER PUBLIC	GENERAL	
275 SEVENTH AVE	NONE	CHARITY		
NEW YORK, NY 10001				225.
CENTER FOR FOOD ACTION	NONE	OTHER PUBLIC	GENERAL	
192 WEST DEMAREST AVE	NONE	CHARITY	DINIMAL	
ENGLEWOOD, NJ 07631				9,000.
CHAI LIFELINE	NONE	OTHER PUBLIC	COMPONI	
151 WEST 30TH STREET	MONE	CHARITY	SENERAL	
NEW YORK, NY 10001				400.
CHILDREN'S THERAPY CENTER	NONE	OTHER PUBLIC	GENERAL	
29-01 BERKSHIRE ROAD		CHARITY		
FAIR LAWN, NJ 07410				30,600.
DOCTORS WITHOUT BORDERS	NONE	OTHER PUBLIC	GENERAL	
6 EAST 39TH STREET		CHARITY		
NEW YORK, NY 10016				1,000.
EASTER SEALS	NONE	OTHER PUBLIC	GENERAL	
CN 2013	NONE	CHARITY	UNIANG	
TOMS RIVER, NJ 08754				250.
Total from continuation sheets	<u> </u>			270,607.

THF	SHAPTRO	FAMTT.V	FOUNDATION
T 11 L	OHAL TIVO	TULLITIE	LOCHDALLON

Part XV Supplementary Informatio 3 Grants and Contributions Paid During the				
Recipient	If recipient is an individual,	T	1	<del></del>
Name and address (home or business)	show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
<del></del>	or substantial contributor	recipient		
ENGLEWOOD COMMUNITY CHEST	NONE	OTHER PUBLIC	GENERAL	
310 ENGLE STREET		CHARITY		
ENGLEWOOD, NJ 07631	-			250.
ENGLEWOOD HOSPITAL & MEDICAL CENTER 350 ENGLE STREET	NONE	OTHER PUBLIC	GENERAL	
ENGLEWOOD NJ 07631		CHARITY		5 000
INCOLUNCE, NO 07031				5,000.
FRACTURED ATLAS	NONE	OTHER PUBLIC	GENERAL	
301 OTERO ST		CHARITY		
SANTA FE , NM 87501				500.
HOPKINS	NONE	OTHER PUBLIC	GENERAL	
986 FORREST RD		CHARITY		
NEW HAVEN, CT 06333	-			1,000
JEWISH FEDERATION OF NORTHERN NJ	NONE	OTHER PUBLIC	GENERAL	
50 EISENHOWER DR PARAMUS, NJ 07652		CHARITY		7,000.
				7,000.
HADASSAH	NONE	OTHER PUBLIC	GENERAL	
50 w 58sr		CHARITY		
NEW YORK, NY 10019		<u> </u>		350
HEIFER INTL	NONE	OTHER PUBLIC	GENERAL	
1 WORLD AVE LITTLE ROCK, AR 72202		CHARITY		1,000
HOLY APOSTLES SOUP KITCHEN	NONE	OTHER PUBLIC	GENERAL	
296 9TH AVE		CHARITY		
NEW YORK, NY 10001				2,500
HOSPITAL FOR SPECIAL SURGERY	NONE	OTHER PUBLIC	GENERAL	
535 EAST 70TH STREET		CHARITY		
NEW YORK, NY 10021				500
ISPART. 2 A	NONE	Outing print to	CONTRAT	
ISRAEL 2.0. 8 HAMPTON ROAD	NONE	OTHER PUBLIC CHARITY	GENERAL	
CLIFTON, NJ 07012		CHARLII		10,000
Total from continuation sheets		<u> </u>		20,000

Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, show any relationship to any foundation manager or substantial contributor Recipient Foundation Purpose of grant or Amount status of contribution Name and address (home or business) recipient JCC THURNAUER SCHOOL OF MUSIC NONE OTHER PUBLIC GENERAL 411 E CLINTON AVENUE CHARITY TENAFLY, NJ 07670 2,500. JEWISH COMMUNITY CENTER - SHERMAN NONE OTHER PUBLIC GENERAL 9 RTE 39 SOUTH CHARITY SHERMAN, CT 06784 100. NONE GENERAL JEWISH COMMUNITY CENTER ON THE OTHER PUBLIC PALISADES (KAPLAN) CHARITY 411 E CLINTON AVENUE 5,000. TEANECK, NJ 07670 OTHER PUBLIC JEWISH FAMILY SERVICE NONE GENERAL 1485 TEANECK RD CHARITY TEANECK, NJ 07666 250. JEWISH FEDERATION OF PALM BEACH NONE OTHER PUBLIC GENERAL CHARITY 4601 COMMUNITY DRIVE WEST PALM BEACH, FL 33417 500. NONE KINGDOM COUNTY PROD OTHER PUBLIC GENERAL CHARITY 949 SOMERS RD BARNET, VT 05821 500. JEWISH HOME FOUNDATION NONE OTHER PUBLIC GENERAL 10 LINK DR CHARITY ROCKLEIGH, NJ 07647 5,000. JEWISH MUSEUM NONE OTHER PUBLIC GENERAL CHARITY 1109 FIFTH AVENUE NEW YORK, NY 10128 1,500. NONE JEWISH NATIONAL FUND OTHER PUBLIC GENERAL 42 EAST 69TH STREET CHARITY NEW YORK, NY 10021 500. JEWISH THEOLOGICAL SEMINARY OF NONE OTHER PUBLIC GENERAL AMERICA CHARITY 3080 BROADWAY NEW YORK, NY 10027 50,000. Total from continuation sheets

Part XV Supplementary Information 3 Grants and Contributions Paid During the			<del></del>	
Recipient	If recipient is an individual,	·		
Name and address (home or business)	show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
	or substantial contributor	recipient		
RIDS WISH NETWORK	NONE	OTHER PUBLIC	GENERAL	
4060 LOUIS AVENUE	HONE	CHARITY	BENERAL	
OLIDAY, FL 34691				100
EAGUE OF WOMEN VOTERS OF NJ	NONE	OTHER PUBLIC	GENERAL	
EDUCATION FUND		CHARITY		
204 W. STATE STREET				
RENTON, NJ 08608			<u> </u>	200
			}	
MAKE A WISH FOUNDATION	NONE	OTHER PUBLIC	GENERAL	
PO BOX 6062		CHARITY		
ALBERT LEA, MN 56007		<u> </u>		100
MARBEATZE TORAH INSTITUTE	NONE	OTHER PUBLIC	GENERAL	
.719 AVENUE P	NONE	CHARITY	GENERAL	
BROOKLYN, NY 11229				108
•				
ASORTI FOUNDATION FOR CONSERVATIVE	NONE	OTHER PUBLIC	GENERAL	
UDAISM OF KRAEL		CHARITY		
175 RIVERSIDE DR #832				
NEW YORK, NY 10115				1,250
MEMORIAL SLOAN KETTERING	NONE	OTHER PUBLIC	GENERAL	
1275 YORK AVE	NONE	CHARITY	GENERAL	
NEW YORK, NY 10021				600
METROPOLITAN MUSEUM OF ART	NONE	OTHER PUBLIC	GENERAL	
.000 FIFTH AVENUE		CHARITY		
NEW YORK, NY 10028	-			1,538
INCOLN CRAMER	NONE	OTHER PUBLIC	GENERAL	
JINCOLN CENTER IEW YORK, NY 10023		CHARITY		
IEW TORK, NI 10025		-		8,000
USEUM OF MODERN ART	NONE	OTHER PUBLIC	GENERAL	
L1 WEST 53RD STREET		CHARITY		
NEW YORK, NY 10001				706
NATIONAL AUDEBON SOCIETY	NONE	OTHER PUBLIC	GENERAL	1
200 TRILLUM LANE		CHARITY		
ALBANY, NY 12203	1	I	I	25

Part XV **Supplementary Information** Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient Purpose of grant or show any relationship to Foundation **Amount** any foundation manager status of contribution Name and address (home or business) or substantial contributor recipient NATIONAL PARKS CONSERVATION ASSOC NONE OTHER PUBLIC GENERAL 777 6TH STREET NW CHARITY WASHINGTON, DC 20001 50. NATL MUSEUM OF AMERICAN INDIANS NONE OTHER PUBLIC GENERAL PO BOX 23473 CHARITY WASHINGTON, DC 20026 1,000. NCLR NONE OTHER PUBLIC GENERAL 870 MARKET STREET CHARITY SAN FRANCISCO, CA 94102 200. NEW ENGLAND YOUTH THEATRE NONE OTHER PUBLIC GENERAL PO BOX 6394 CHARITY BRATTLEBORO, VT 05302 15,000. NEW FAIRFIELD VOLUNTEER FIRE DEPT. NONE OTHER PUBLIC GENERAL PO BOX 8307 CHARITY NEW FAIRFIELD, CT 06333 300. NATIONAL WILDLIFE FEDERATION NONE OTHER PUBLIC GENERAL PO BOX 1691 CHARITY MERRIFIELD, VA 22116 5<u>0.</u> NEW YORK-PRESBYTERIAN HOSPITAL NONE OTHER PUBLIC GENERAL CHARITY 622 WEST 168TH STREET NEW YORK, NY 10032 1,500. NEW FAIRFIELD LAND TRUCT NONE OTHER PUBLIC GENERAL 4 BRUSH HILL RD CHARITY NEW FAIRFIELD, CT 06812 200. NONE NYC BALLET OTHER PUBLIC GENERAL 20 LINCOLN CENTER CHARITY NEW YORK, NY 10023 785. PALM BEACH COUNTY FIREFIGHTERS NONE OTHER PUBLIC GENERAL 2100 N.FLORIDA MANGO RD CHARITY WEST PALM BEACH, FL 33409 25. Total from continuation sheets

Part XV **Supplementary Information Grants and Contributions Paid During the Year (Continuation)** If recipient is an individual, · Recipient Foundation Purpose of grant or show any relationship to **Amount** any foundation manager status of contribution Name and address (home or business) or substantial contributor recipient PALM BEACH COUNTY PBA NONE OTHER PUBLIC GENERAL CHARITY 2100 N.FLORIDA MANGO RD WEST PALM BEACH, FL 33409 20. PLANNED PARENTHOOD NONE OTHER PUBLIC GENERAL 810 7TH AVE CHARITY NEW YORK, NY 10019 300. NONE RAMAPO COLLEGE OTHER PUBLIC GENERAL. 505 RAMAPO VALLEY ROAD CHARITY MAHWAH, NJ 07430 500. TEMPLE SINAI OTHER PUBLIC GENERAL CHARITY ONE ENGLE ST TENAFLY, NJ 07670 318. WORLD WILD LIFE FUND OTHER PUBLIC NONE GENERAL 1250 24TH ST NW CHARITY WASHINGTON, DC 20090 50. UNIVERSITY OF NYC NONE OTHER PUBLIC GENERAL 17 WASHINGTON SQUARE S CHARITY NEW YORK, NY 10012 500. SHELTER OUR SISTERS NONE OTHER PUBLIC GENERAL 405 STATE ST CHARITY HACKENSACK, NJ 07601 200. OTHER PUBLIC SMILE TRAIN NONE GENERAL 245 5TH AVENUE CHARITY NEW YORK, NY 10016 3,400. SOLOMON SCHECHTER DAY SCHOOL OF NONE OTHER PUBLIC GENERAL BERGEN COUNTY CHARITY BERGEN AVENUE NEW MILFORD, NJ 07646 25,000. SPECTRUM FOR LIVING DEVELOPMENT INC OTHER PUBLIC GENERAL NONE 210 RIVERDALE RD #3 CHARITY RIVER VALE, NJ 07675 3,600. Total from continuation sheets

Part XV Supplementary Informati	APIRO FAMILY FOU			67630
3 Grants and Contributions Paid During th	e Year (Continuation)		_	
. 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		
PEMPLE EMANU-EL	NONE	OTHER PUBLIC	GENERAL	
.80 PIERMONT ROAD	10.12	CHARITY		
LOSTER, NJ 07624				43,72
PENAFLY FIREMANS ASSOC	NONE	OTHER PUBLIC	GENERAL	
PO BOX 511	NONE	CHARITY	GENERAL	
PENAFLY, NJ 07670				250
PENAFLY VOLUNTEER AMBULANCE	NONE	OTHER PUBLIC	GENERAL	
PO BOX 355	NONE	CHARITY	SENZIVED	
TENAFLY, NJ 07670				500
THIRTEEN/WNET	NONE	OTHER PUBLIC	GENERAL	
150 WEST 33RD STREET		CHARITY		
NEW YORK, NY 10001				93:
TORAH FUND	NONE	OTHER PUBLIC	GENERAL	
3080 BROADWAY		CHARITY		
NEW YORK, NY 10027				2,500
VANTAGE HEALTH SYSTEM	NONE	OTHER PUBLIC	GENERAL	
93 WEST PALISADE AVENUE		CHARITY		
ENGLEWOOD, NJ 07631				1,000
wBGO	NONE	OTHER PUBLIC	GENERAL	
54 PARK PLACE NEWARK, NJ 07102		CHARITY		20
NOMEN'S AMERICAN ORT 315 PARK AVENUE SOUTH	NONE	OTHER PUBLIC	GENERAL	
NEW YORK, NY 10010		CHARITY		2,10
Total In Total				2,10
WOMEN'S RIGHTS INFO CENTER	NONE	OTHER PUBLIC	GENERAL	
108 WEST PALISADE AVE ENGLEWOOD, NJ 07631		CHARITY		50
YCS FOUNDATION	NONE	OTHER PUBLIC	GENERAL	
270 UNION STREET		CHARITY		
HACKENSACK, NJ 07601  Total from continuation sheets	L .			80

Tare to Capital Gains and Lu	22C2 IOL LOY OIL IIIAC2IIIICIII IIICOIIIC				
(a) List and • 2-story b	describe the kind(s) of property solution in the describe the kind(s) of property solution in the common stock, 2	(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo , day, yr )	(d) Date sold (mo , day, yr )	
1a 50000 NEW BRUN	SWICK NJ BOND		D		-
b 75 SHS DOLLAR			D		
c 20000 PORT AUT		D	D		
d 25000 NJ TPK B			D		
e 40000 PORT AUT		D	D		
f 50000 BERGEN C	NTY NJ BOND		D		
g 40000 NJ EDL	BOND		D		
h 30000 BERGEN C	NTY NJ BOND		D		-
t					
1					
k					
1					
m				Ì	
n	•				
0		-			
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(e) t (µ	) Gain or (loss) blus (f) minus (g)	
a 57,436.		59,064.			-1,628.
b 6,496.		6,233.			263.
c 21,898.		21,184.			714.
d 26,324.		26,733.			-409.
e 43,562.		42,349.			1,213.
f 55,500.		56,052.			-552.
g 43,580.		43,966.			-386.
h 33,485.		33,631.			-146.
1					
1					
k					
ī					
m					
n				_	
0					
Complete only for assets show	ing gain in column (h) and owned by	the foundation on 12/31/69	(I) Lo	sses (from col (h))	)
(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	Gains (excess but i	of col (h) gain ove not less than "-0-")	rcol (k),
a	-				-1,628.
b					263.
c					714.
d					-409.
e					1,213.
f			·		-552.
g					-386.
h					-146.
1					
}					
k					
I					
m					
n					
0					
2 Capital gain net income or (net o	capital loss) { If gain, also enter "-	er in Part I, line 7 -0-" in Part I, line 7	2		-931.
	oss) as defined in sections 1222(5) a	<b>\</b> 1			
If gain, also enter in Part 1, line 8	3, column (c)	}		NT / N	
If (loss), enter "-0-" in Part I, line	8 8	<i>)</i>	3	N/A	

FORM 990-PF · DIVIDENI	OS AND INTER	EST FROM	SECUE	RITIES	STATEMENT	1
SOURCE	GROSS	AMOUNT		TAL GAINS	COLUMN (A AMOUNT	)
MORGAN STANLEY SMITH BARNEY		9,575.		0.	9,5	75.
TOTAL TO FM 990-PF, PART I, I	LN 4	9,575.		0.	9,5	75.
FORM 990-PF	ACCOUNTI	NG FEES			STATEMENT	2
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INV MENT IN		(C) ADJUSTED NET INCOM		
ACCOUNTING	4,530.	4	,530.			0.
TO FORM 990-PF, PG 1, LN 16B	4,530.	4	,530.			0.
FORM 990-PF	OTHER E	XPENSES			STATEMENT	3
FORM 990-PF  DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INV		(C) ADJUSTED NET INCOM	(D) CHARITA	
DESCRIPTION	(A) EXPENSES	(B) NET INV MENT IN		ADJUSTED	(D) CHARITA	BLE
DESCRIPTION ————————————————————————————————————	(A) EXPENSES PER BOOKS	(B) NET INV MENT IN	COME	ADJUSTED	(D) CHARITA	BLE ES
DESCRIPTION  ENTERTAINMENT/GIFTS  TO FORM 990-PF, PG 1, LN 23  FORM 990-PF	(A) EXPENSES PER BOOKS	(B) NET INV MENT IN	0.	ADJUSTED	(D) CHARITA	BLE ES
DESCRIPTION  ENTERTAINMENT/GIFTS  TO FORM 990-PF, PG 1, LN 23	(A) EXPENSES PER BOOKS  338.	(B) NET INV MENT IN	0. 0.	ADJUSTED	(D) CHARITA E PURPOS	BLE ES 0.
DESCRIPTION  ENTERTAINMENT/GIFTS  TO FORM 990-PF, PG 1, LN 23  FORM 990-PF	(A) EXPENSES PER BOOKS  338.	(B) NET INV MENT IN	0. 0.	ADJUSTED NET INCOM	(D) CHARITA E PURPOS  STATEMENT  FAIR MARKE VALUE	BLE ES 0.

FORM 990-PF	CORPORATE BONDS		STATEMENT	5
DESCRIPTION		BOOK VALUE	FAIR MARKE	Г
NJ TPK AUTHORITY NJ ST EDL PORT AUTH NY & NJ BERGEN CNTY NJ EDL LONE STAR		0. 5,793. 0. 22,420. 10,991. 102,111.	5,50 22,50 10,90 104,50	0. 44. 77.
TOTAL TO FORM 990-PF, PART II,	LINE 10C	141,315.	143,60	69.
	ART XV - LINE 1A F FOUNDATION MANAGE	RS	STATEMENT	6

NAME OF MANAGER

SHIRLEY SHAPIRO DIANE SHAMAS