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. 990-PF

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.

		per and street (or P O. box number if mail is not delive	red to street address)	Room	m/suite	B Telephone numb	ber (see instructions)
2013 - الآ		5 HAMBURG TURNPIKE r town, state, and ZIP code				9'	<u>73- 305-3500</u>
7 C	City	town, state, and zir tode				C If exemption applic	cation is
, , _	WAY	NE, NJ 07470-5055				pending, check her	е
- 0	Che	eck all that apply: Initial return	Initial return	of a former public	charity	D 1 Foreign organiza	ations, check here .
:		Final return	Amended ret			2 Foreign organiza 85% test, check	
u -	Che	Address change ck type of organization: X Section 50	Name change			computation •	
OSTIMATING DATE	\neg	Section 4947(a)(1) nonexempt charitable trust	Other taxable pri				in status was terminated (b)(1)(A), check here
֓֞֞֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓		I —	ounting method: X Ca	sh Accrual		1	in a 60-month termination
			Other (specify)			under section 507()	b)(1)(B), check here . 🕨
3		► \$ 251,742. (Part Analysis of Revenue and Expenses (The Control of Control	l, column (d) must be or	cash basis.)	1	. <u>l</u>	(d) Disbursemen
ם ע	art	total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions).)	(a) Revenue and expenses per books	(b) Net investmer income	nt	(c) Adjusted net income	for charitable purposes (cash basis only
	1	Contributions, gifts, grants, etc., received (attach schedule)	. 110,122.				-
	2	Check If the foundation is not required to attach Sch. B	1				
	3	Interest on savings and temporary cash investments	2 222	9,92	00		STM
	4 5 a	Dividends and interest from securities	•	5,5			SIM
		Net rental income or (loss)					-
ne	6a	Net gain or (loss) from sale of assets not on line 10 Gross sales price for all	-31,542.			DEC	LENGES -
Revenue	,	assets on line 6a 956, 126.		- -	-	REC	*FIAFD
æ	7 8	Capital gain net income (from Part IV, line 2). Net short-term capital gain				-	
	9	Income modifications	1			APR	0 9 2013
	10 a	Gross sales less returns and allowances · · · · ·					ŏ
		Less Cost of goods sold	-		-		EN, UT
	11	Gross profit or (loss) (attach schedule) Other income (attach schedule)		<u> </u>			
_	12	Total. Add lines 1 through 11	88,508.	9,92			
	13	Compensation of officers, directors, trustees, etc.	2,250.	1,12	25.		1,
ses	14	Other employee salaries and wages					
	15 16a	Pension plans, employee benefits Legal fees (attach schedule)	·	 -	_		
Exp	b	Accounting fees (attach schedule) STMT 2	650.	32	25.	NONE	<u> </u>
ķ	С	Other professional fees (attach schedule)					
trat	17	Interest			_		ļ
inis	18 19	Taxes (attach schedule) (see instructions) STMT. 3. Depreciation (attach schedule) and depletion.			+-		1 n n n n n n n n n n n n n n n n n n n
/dm	20	Occupancy			 		
/ pc	21	Travel, conferences, and meetings					
<u> </u>	22	Printing and publications					
Operating and Administrative Expen	23	Other expenses (attach schedule)		<u> </u>			
per	24	Total operating and administrative expenses. Add lines 13 through 23		1,45	50	NONE	1,
0	25	Contributions, gifts, grants paid		1,12		NONE	76,
_		Total expenses and disbursements Add lines 24 and 25		1,45	0.	NONE	
	27	Subtract line 26 from line 12:					
		Excess of revenue over expenses and disbursements Net investment income (if negative, enter -0-)	8,654.	8,47			
		Adjusted net income (if negative, enter -0-).		0,4/		<u>- Hari in John in Ge</u>	
Fo	r Pap	erwork Reduction Act Notice, see instruction	S.		·		Form 990-PF (
410	1-000	BMR809 682U 03/27/2013 12:3	5.55	05270			3

Part I	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year	Beginning of year	End o	d of year	
	amounts only. (See instructions.)	(a) Book Value	(b) Book Value	(c) Fair Market Value	
1	Cash - non-interest-bearing				
2	Savings and temporary cash investments	91,706.	76,474.	76,474	
3	Accounts receivable >			76,474	
-	t ii e s seel 🔈	,			
4	Pledges receivable				
	Less allowance for doubtful accounts ▶	· · · · · · · · · · · · · · · · · · ·		P-01-11 / A ME-7-4 W-1	
5	Grants receivable				
6	Receivables due from officers, directors, trustees, and other				
"	disqualified persons (attach schedule) (see instructions)				
7	Other notes and loans receivable (attach schedule)				
′				tur life teri	
	Less. allowance for doubtful accounts				
Assets	Inventories for sale or use				
9	Prepaid expenses and deferred charges				
10 a	Investments - U.S. and state government obligations (attach schedule).				
	Investments - corporate stock (attach schedule) . STMT .4	209,011.	<u>232,898.</u>	175,268	
11 °	Investments - corporate bonds (attach schedule)		1 H 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
	less accumulated depreciation (attach schedule)				
12	Investments - mortgage loans			 -	
13 14	Investments - other (attach schedule) Land, buildings, and				
' '	equipment basis		·	H. I ,	
	equipment basis Less. accumulated depreciation (attach schedule)				
15	Other assets (describe)				
16	Total assets (to be completed by all filers - see the instructions. Also, see page 1, item l)	300,717.	309,372.	251,742	
17	Accounts payable and accrued expenses				
18	Grants payable				
<u>ي</u> 19	Deferred revenue			*	
19 20 21	Loans from officers, directors, trustees, and other disqualified persons			•	
21	Mortgages and other notes payable (attach schedule)				
22	Other liabilities (describe	-			
	Cuter habilities (describe >		-	<u>-</u>	
23	Total liabilities (add lines 17 through 22)		NONE		
- 23			NOME		
24 25	Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31.		•	· -	
25	F				
	Temporarily restricted			-	
일 26	Permanently restricted				
휜	Foundations that do not follow SFAS 117,				
히	check here and complete lines 27 through 31. ► X	200 717	200 270		
<u>2</u> 7	Capital stock, trust principal, or current funds	300,717.	309,372.	<u>'.</u> = _ <u> </u>	
Net Assets or Fund B	Paid-in or capital surplus, or land, bldg , and equipment fund ,			= =	
2 9	Retained earnings, accumulated income, endowment, or other funds				
30	Total net assets or fund balances (see instructions)	300,717.	309,372.		
31	Total liabilities and net assets/fund balances (see				
	instructions)	300,717.	309,372.		
	Analysis of Changes in Net Assets or Fund E				
	net assets or fund balances at beginning of year - Part I				
end-c	of-year figure reported on prior year's return)			300,717.	
2 Enter	amount from Part I, line 27a		2	8,654.	
3 Othe	r increases not included in line 2 (itemize) ▶ ROUNDING		3	1.	
	lines 1, 2, and 3		4	309,372.	
	eases not included in line 2 (itemize)		5		
	net assets or fund balances at end of year (line 4 minus lin	e 5) - Part II, column (h)		309,372.	
	The state of the s			Form 990-PF (2012)	

G	art IV Capital Gains	and Losses for Tax on Inve	estment Income			
	(a) List and 2-story br	(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)		
1a	DIDITALL EDADED					
Ŀ	o					
_c						
d	<u> </u>					
<u>e</u>	2		7.70			<u> </u>
	(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		(h) Gain or (lo (e) plus (f) mini	ıs (g)
_a	958,126.		989,668.			31,542.
_ <u>b</u>)					
_ <u>c</u>						
_d				ļ		
<u>e</u>						
	Complete only for assets st	nowing gain in column (h) and owned			Gains (Col. (h) ga (k), but not less t	
	(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any	coi.	Losses (from co	l. (h))
_a	<u> </u>					31,542.
_b)					
<u> </u>	:					
<u>d</u>	<u> </u>					• • • • • • • • • • • • • • • • • • • •
<u>e</u>)					
2	Capital gain net income or (not capital local	gain, also enter in Part I, line 7	2		21 5/2
2	Not chart-term canital gain	or (loss) as defined in sections 122	(loss), enter -0- in Part I, line 7			-31,542.
,		I, line 8, column (c) (see instr				
	•		ſ	3		
Ð	·		uced Tax on Net Investment In			
Wa		he section 4942 tax on the distrib	utable amount of any year in the ba	ase period	- 17	Yes X No
		ot qualify under section 4940(e). [see the instructions before making	any entry		
	(a)	(b)	(c)	any enun	(d)	
_c	Base period years Calendar year (or tax year beginning in)	Adjusted qualifying distributions	Net value of noncharitable-use assets	,	Distribution ra (col (b) divided by	col (c))
	2011	70,109.	277,401.			0.252735
	2010	74,964.	362,170.			0.206986
_	2009	77,382.	345,989.			0.223655
	2008	93,242.	482,850. 508,088.			0.193108
	2007	78,239.	508,088.			0.153987
2	Total of line 1 column (d)			2		1.030471
		or the 5-year base period - divide t		-		1.030471
3	_	ation has been in existence if less		3		0.206094
	number of years the lound	ation has been in existence in less	and o your			0.200031
4	Enter the net value of none	charitable-use assets for 2012 from	n Part X, line 5	4		259,788.
5	Multiply line 4 by line 3 .			5	···	53,541.
6	Enter 1% of net investment	t income (1% of Part I, line 27b)		6		85.
				7		53,626.
	•					
8	If line 8 is equal to or green Part VI instructions.	ns from Part XII, line 4	n Part VI, line 1b, and complete t	8 μ hat part ι	using a 1% tax	78,346. rate. See the

Par	t VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see i	nstruc	tions	5)
1 a	Exempt operating foundations described in section 4940(d)(2), check here			
	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1			
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check			85.
	here X and enter 1% of Part I, line 27b	543	7.	
c	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b).	+ ·	73 73	 : 189
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 2			
3	Add lines 1 and 2			85.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 4		ľ	NONE
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0			85.
6	Credits/Payments:			
а	2012 estimated tax payments and 2011 overpayment credited to 2012 6a	171	· -	
b	Exempt foreign organizations - tax withheld at source			-
C	Tax paid with application for extension of time to file (Form 8868) 6c NONE		_	
d	Backup withholding erroneously withheld		_	
7	Total credits and payments. Add lines 6a through 6d		N	ONE
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached 8			
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed			85.
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			
	Enter the amount of line 10 to be: Credited to 2013 estimated tax ▶ Refunded ▶ 11			
Part	VII-A. Statements Regarding Activities			
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate		Yes	No
	or intervene in any political campaign?	1a		X
þ	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see 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 published or			1
	distributed by the foundation in connection with the activities			1
C	Did the foundation file Form 1120-POL for this year?	1c		X
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year			
	(1) On the foundation. > \$			
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on	.		-
	foundation managers. ► \$	lì		
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		X
	If "Yes," attach a detailed description of the activities			ļ
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation,			[
	or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		X
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		<u> </u>
b	If "Yes," has it filed a tax return on Form 990-T for this year?	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		X
	If "Yes," attach the statement required by General Instruction T.	-	_	
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:	.	-	
	By language in the governing instrument, or		-	-
	By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict	-		
	with the state law remain in the governing instrument?	6	X	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV	7	X	
8a	Enter the states to which the foundation reports or with which it is registered (see instructions) NJ		-	<u>.</u>
Ь	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		ļ	
	4942(j)(5) for calendar year 2012 or the taxable year beginning in 2012 (see instructions for Part XIV)? If "Yes," complete		İ	
	Part XIV	9		<u> </u>
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and			
	addresses	10		<u> </u>
		~-m QQ	O DE	20421

100	A VIII A Canada December A shiring / continued			5
	t VII-A Statements Regarding Activities (continued)	Ι		i .
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the		f	
	meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions	11_		<u> </u>
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		
13		13	X	<u> </u>
	Website address ► N/A			
14	The books are in care of ► VALLEY NATIONAL BANK Telephone no. ► (973)305-35	500		
	Located at ► 1195 HAMBURG TURNPIKE, WAYNE, NJ ZIP+4 ► 07470			
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		
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1. If "Yes," enter the name of			
	the foreign country			
Par	t 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.		Yes	No
1 a	During the year did the foundation (either directly or indirectly):			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes X No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a			
	disqualified person?	-		
	(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? Yes X No			<i>ن</i>
	(5) Transfer any income or assets to a disqualified person (or make any of either available for			
	the benefit or use of a disqualified person)?	ļ		
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the		-	-
	foundation agreed to make a grant to or to employ the official for a period after	i		
	termination of government service, if terminating within 90 days.)			
b	If any answer is "Yes" to 1a(1)(6), did any of the acts fail to qualify under the exceptions described in Regulations			
	section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	1b		
	Organizations relying on a current notice regarding disaster assistance check here			
C	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that			
	were not corrected before the first day of the tax year beginning in 2012?	1c		<u>X</u>
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private	į	1	
	operating foundation defined in section 4942(j)(3) or 4942(j)(5)).			
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?			
	If "Yes," list the years	ļ	- 1	
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)		-	
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to			
	all years listed, answer "No" and attach statement - see instructions.)	2b		X_
c	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here			
	·	ł		
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise			
	at any time during the year?			
ь	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, Form 4720, to determine if the	7. 7	-	
	foundation had excess business holdings in 2012.)	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		<u> X</u>
Ь	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its	٠. ا		
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2012?	4b		X

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2 Compensation of five highest-paid employees "NONE."	(other than thos	e included on line	1 - see instruction	ons). If none, ente
(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

Total number of other employees paid over \$50,000 Form 990-PF (2012)

-0-

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Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employ and Contractors (continued)	rees,
3 Five highest-paid independent contractors for professional services (see instructions). If none, enter "NONI	#
(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
Total number of others receiving over \$50,000 for professional services	NONE
Part IX-A Summary of Direct Charitable Activities	
List the foundation's four largest direct charitable activities during the tax year, include relevant statistical information such as the number of organizations and other beneficianes served, conferences convened, research papers produced, etc	Expenses
1NONE	
2	
3	
4	<u> </u>
Part IX-B Summary of Program-Related Investments (see instructions)	
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.	Amount
1 NONE	
2	
All other program-related investments. See instructions.	
3NONE	
otal. Add lines 1 through 3	
	222 25

Pa	rt X Minimum Investment Return (All domestic foundations must complete this part. Foreignsee instructions.)	gn foundat	ions,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,	-	
	purposes:		
а	Average monthly fair market value of securities	1a	172,180.
ь	Average of monthly cash balances	1b	91,564.
C	Fair market value of all other assets (see instructions)	1c	NONE
þ	Total (add lines 1a, b, and c)	1d	263,744.
е	Reduction claimed for blockage or other factors reported on lines 1a and	-	
	1c (attach detailed explanation)	<u>-</u>	
2	Acquisition indebtedness applicable to line 1 assets	2	NONE
3	Subtract line 2 from line 1d Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see	3	263,744.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see		
	Instructions) Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	4	3,956.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	259,788.
6	Minimum investment return. Enter 5% of line 5	6	12,989.
Pa	The provided HTML representation (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here ▶ ☐ and do not complete this p	art.)	
1	Minimum Investment return from Part X, line 6	1	12,989.
2a	Tax on investment income for 2012 from Part VI, line 5		
b	Income tax for 2012. (This does not include the tax from Part VI.)		
C	Add lines 2a and 2b	2c	85.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	12,904.
4	Recoveries of amounts treated as qualifying distributions	4	NONE
5	Add lines 3 and 4	5	12,904.
6	Deduction from distributable amount (see instructions)	6	NONE
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII,		
	line 1	7	12,904.
Pai	rt XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	78,346.
b	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.,	İ	
	purposes	2	NONE
3	Amounts set aside for specific charitable projects that satisfy the:		
а	Suitability test (prior IRS approval required)	3a	NONE
b	Cash distribution test (attach the required schedule)	3b	NONE
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	78,346.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income.		
	Enter 1% of Part I, line 27b (see instructions)	5	85.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	78,261.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calc qualifies for the section 4940(e) reduction of tax in those years.	ulating wh	ether the foundation

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	n 990-PF (2012)		<u>-</u>		Page 9
Pa	rt XIII Undistributed Income (see instru	i	<u> </u>		
1	Distributable amount for 2012 from Part XI,	(a) Corpus	(b) Years prior to 2011	(c) 2011	(d) 2012
	line 7			<u> </u>	12,904.
2	Undistributed income, if any, as of the end of 2012				
а	Enter amount for 2011 only			NONE	<u> </u>
b	Total for pnor years 20 10 , 20, 20		NONE		
3	Excess distributions carryover, if any, to 2012			1	
а	From 2007	*			\$
b	From 2008 69,655.				
C	From 2009 60,421.				
d	From 2010				
е	From 2011	* * * * * * * * * * * * * * * * * * * *		[- 	
f	Total of lines 3a through e	297,817.		-	
4	Qualifying distributions for 2012 from Part XII,				
	line 4 ▶ \$ 78,346.			-	
а	Applied to 2011, but not more than line 2a		-	NONE	
	Applied to undistributed income of prior years			=	-
_	(Election required - see instructions)		NONE		
c	Treated as distributions out of corpus (Election				Ī *
•	required - see instructions)	NONE		der all as propose tall today assault to assaul assaul	
d	Applied to 2012 distributable amount	-		-	12,904.
	Remaining amount distributed out of corpus	65,442.		*	
5	Excess distributions carryover applied to 2012	NONE		-	NONE
6	(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:	-	r		
а	Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	363,259.			-
	Prior years' undistributed income. Subtract				
b	line 4b from line 2b		NONE	made amountable to the tra	
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		NONE		
d	Subtract line 6c from line 6b. Taxable				-
	amount - see instructions		NONE		
e	Undistributed income for 2011. Subtract line 4a from line 2a. Taxable amount - see		* *		
	Instructions	-	-	NONE	
•	Undistributed income for 2012. Subtract lines				
•	4d and 5 from line 1. This amount must be		- 8 5		
	distributed in 2013			-	NONE
7	Amounts treated as distributions out of corpus				
	to satisfy requirements imposed by section				
	170(b)(1)(F) or 4942(g)(3) (see instructions)	NONE	-	-	
8	Excess distributions carryover from 2007 not applied on line 5 or line 7 (see instructions)	54,187.			*
9	Excess distributions carryover to 2013.		, = , = , = , = , = , = , = , = , = , =		
	Subtract lines 7 and 8 from line 6a	309,072.			
10	Analysis of line 9:				
а	Excess from 2008 69,655.				•
b	Excess from 2009 60,421.	· ,		- 1 2 , ,	
c	Excess from 2010 57,111.		,-		
d	Excess from 2011 56,443.	·	5 5 7 7 7 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		v * e
<u>e</u>	Excess from 2012 65,442.				= - "!
					Form 990-PF (2012)

Pa	rt XIV Private Oper	rating Foundations	see instructions and	d Part VII-A, question	ו 9)	NOT APPLICABL			
1 a	if the foundation has	received a ruling or d	etermination letter tha	t it is a private opera	ating				
	foundation, and the ruling is effective for 2012, enter the date of the ruling								
ь	Check box to indicate wh)(3) or 4942(j)(5)			
2-	P.4	Tax year		Prior 3 years		/o) Total			
2 a	Enter the lesser of the ad- justed net income from Part	(a) 2012	(b) 2011	(c) 2010	(d) 2009	(e) Total			
	I or the minimum investment								
	return from Part X for each year listed								
h	85% of line 2a								
C	Qualifying distributions from Part XII, line 4 for each year listed .								
d									
е	Qualifying distributions made								
	directly for active conduct of			<u> </u>					
	exempt activities. Subtract line 2d from line 2c	1							
3	Complete 3a, b, or c for the								
а	alternative test relied upon *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 invest- ment return shown in Part X,								
	line 6 for each year listed								
C	"Support" alternative test - enter			-					
	(1) Total support other than								
	gross investment income (Interest, dividends, rents,								
	payments on securities loans (section 512(a)(5)),					ļ			
	or royalties)								
	(2) Support from general public and 5 or more								
	exempt organizations as								
	provided in section 4942 (j)(3)(B)(iii)								
	(3) Largest amount of sup- port from an exempt								
	organization				<u> </u>				
	(4) Gross investment income	I-fo		anti if the founds	tion had 65 000	or more in eccets			
_	at any time of	during the year - see	instructions.)	only if the founda		or more in assets			
1	Information Regarding List any managers of			e than 2% of the total	contributions receive	ed by the foundation			
а	before the close of any	tax year (but only if th				ed by the localidation			
<u>_</u>	GERALD LII		own 10% or more of	the stock of a corno	ration (or an equally	large portion of the			
IJ	ownership of a partner					30 portion of the			
	NONE	,							
	NONE								
2	Information Regarding	Contribution, Grant,	Gift, Loan, Scholarsh	ip. etc., Programs:					
_		=			able organizatione a	nd does not accept			
Check here ► X if the foundation only makes contributions to preselected charitable organizations and does no unsolicited requests for funds. If the foundation makes gifts, grants, etc. (see instructions) to individuals or organization									
	other conditions, comp				•	J			
a	The name, address, an	d telephone number o	r e-mail of the person	to whom applications	should be addressed:				
b	The form in which app	lications should be sul	omitted and information	on and materials they s	should include:				
c	Any submission deadli	ines:							
				-					
d	Any restrictions or li factors:	imitations on awards,	such as by geogra	phical areas, charitat	ole fields, kinds of	institutions, or other			

Form 990-PF (2012)				Page 11
Part XV Supplementary Information (
3 Grants and Contributions Paid Durin	ig the Year or Appr			<u> </u>
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		
a Paid during the year				
SEE STATEMENT 11				76,896.
	Ï			
	i			
	 	<u> </u> 		<u> </u>
			÷	
				1
				
Total			▶ 3a	76,896.
b Approved for future payment				
			-	
Total	L	<u> </u>	N 2L	
Total	<u> </u>		<u></u> 3b	L

Form 990-PF	(2012)				130,122	Page 12
Part XVI	<u> </u>	cing Activ	vities			
Enter gross amounts unless otherwise indicated.		1		Excluded by	y section 512, 513, or 514	(e)
1 Program	n service revenue	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income (See instructions.)
=						(and a deciding)
d						
e						
f	·					
_	and contracts from government agencies					
	rship dues and assessments					
	on savings and temporary cash investments			114	0 000	
	ds and interest from securities			14	9,928.	
	tal income or (loss) from real estate:	-				<u> </u>
	t-financed property					
	al income or (loss) from personal property					
	ivestment income					
	loss) from sales of assets other than inventory			18	-31,542.	
	ome or (loss) from special events					
	rofit or (loss) from sales of inventory					
	evenue: a					
d						
e						
	I. Add columns (b), (d), and (e)			2-18 2-18	-21,614.	
	dd line 12, columns (b), (d), and (e)			• • • • •	¹³	-21,614.
Part XVI-	Relationship of Activities		complishment of Eve	mnt Durn	0000	
Line No.						
	Explain below how each activit					
▼	accomplishment of the foundation	on's exemp	t purposes (other than t	y providing	liunas for such purposes	j. (See instructions.)
				· · · - · · · · · · · · · · · · · · · ·		
	-					· · · · · · · · · · · · · · · · · · ·
				•		 -
			NOT APPLICABLE	7		
			NOT AFFORCADO	<u> </u>		
						
						
			<u> </u>			
						·
	<u></u>					

Part	XVII	Exempt Organ		ransters 10	and Iransac	tions a	and Relationships With Non	chari	table	3
1 (Old the			y engage in a	ny of the followi	ng with	any other organization described	7	Yes	No
i	n section	on 501(c) of the Co	de (other tha	n section 501	(c)(3) organizatio	ns) or II	n section 527, relating to political	-=		-
	_	ations ⁷								- E
		rs from the reporting								
								1a(1)	1	X
						• • • •		1a(2)		X
		ansactions:			•					
(1) Sale	s of assets to a non	cnaritable exe	empt organizat	ion			1b(1)		X
								1b(2) 1b(3)		X
								1b(4)		X
								1b(5)		X
								1b(6)		X
								1c		X
							. Column (b) should always show		fair m	
							on. If the foundation received less			
v	alue ir	any transaction or	sharing arra	ngement, shov	w in column (d)	the valu	ie of the goods, other assets, or s	ervices	s rece	eived.
(a) Line	e no.	(b) Amount involved	(c) Name o	f nonchantable exe	empt organization	(d) D	escription of transfers, transactions, and shar	ıng arra	ngeme	nts
					<u> </u>					
						1				
						-				
			-			-}				
			 			+				
						1		-		
	-	-								
2a is	s the f	oundation directly	or indirectly a	affiliated with,	or related to, o	ne or m	ore tax-exempt organizations	_		_
d	lescribe	ed in section 501(c)	of the Code (other than sec	tion 501(c)(3)) a	r ın secti	ion 527 ⁷	Ye	es <u>X</u>	No ⊵
<u>b lf</u>	"Yes,"	complete the follow	ving schedule							
		(a) Name of organization	n	(b) T	Type of organization		(c) Description of relations	hip		
										
				+						
	Under	penalties of penjury, I decla	re that I have exa	I mined this return, in	ncluding accompanying	schedules a	and statements, and to the best of my knowledg	e and b	elief. it	ıs true
Sign	correct,	and complete. Declaration of	f preparer (other than	n taxpayer) is based or	n all information of whic	n preparer h	as any knowledge.			
Here		Valley No on	Mal Bridge	Bala	4/3/12			discuss		return below
	Signa	ture of officer of trustee	11 /	Date		Title	(see instruction		Yes	No
				Λ	A					
Paid		Print/Type preparer's	name	Preparer's	signature		Clieck [iii]	PTIN		
Prepa		LOUIS J. DER	OSE	116	12.1M2		03/27/2013 self-employed	P000	0048	12
•				TERS (TAX			Firm's EIN ▶ 75-	1297:	386	
Use (ן אוחע		3 THORNAL			710				
	_	ED	ISON, NJ	Γ	08	3837	Phone no. 732-76	57 - 9	100	

Schedule of Contributors

Schedule B (Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service

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

OMB No 1545-0047

2012

Name of the organization		Employer Identification number
LIPKIN FAMILY FOUNDATIO	N C/O VALLEY NATIONAL	52-1907122
Organization type (check one):		
Filers of: So	ection:	
Form 990 or 990-EZ	501(c)() (enter number) organization	
	4947(a)(1) nonexempt charitable trust not treated as a private four	idation
	527 political organization	
Form 990-PF	X 501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a private foundati	on
	501(c)(3) taxable private foundation	
	d by the General Rule or a Special Rule. or (10) organization can check boxes for both the General Rule and a S	pecial Rule. See
- X -For an organization filing-	Form-990, 990-EZ, or 990-PF that received, during the year, \$5,000 or on the state of the state	·more (in money or
Special Rules		
under sections 509(a)(1)	ganization filing Form 990 or 990-EZ that met the 33 $1/3$ % support te and $170(b)(1)(A)(vi)$ and received from any one contributor, during the or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 9	year, a contribution of
during the year, total cont	3), or (10) organization filing Form 990 or 990-EZ that received from an ributions of more than \$1,000 for use exclusively for religious, charitabor the prevention of cruelty to children or animals. Complete Parts I, II, a	le, scientific, literary,
during the year, contributi not total to more than \$1, year for an exclusively reli applies to this organization	3), or (10) organization filing Form 990 or 990-EZ that received from an ons for use <i>exclusively</i> for religious, charitable, etc., purposes, but these 000. If this box is checked, enter here the total contributions that were gious, charitable, etc., purpose. Do not complete any of the parts unless in because it received nonexclusively religious, charitable, etc., contributions.	e contributions did received during the s the General Rule tions of \$5,000 or
990-EZ, or 990-PF), but it must answ	covered by the General Rule and/or the Special Rules does not file Schwer "No" on Part IV, line 2 of its Form 990; or check the box on line H certify that it does not meet the filing requirements of Schedule B (Form	of its Form 990-EZ or on

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)

Name of organization
LIPKIN FAMILY FOUNDATION C/O VALLEY NATIONAL

Employer identification number 52-1907122

Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is need	Part I	Contributors	(see instructions). Use du	uplicate copies of Part	l if additional space is neede
--	--------	--------------	----------------------------	-------------------------	--------------------------------

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1_	GERALD LIPKIN C/O VALLEY NATIONAL BANK WAYNE, NJ 07470-5055	\$110,122.	Person Payroll Noncash (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.)
(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.)
(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.)
(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.)
(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.)

LIPKIN FAMILY FOUNDATION C/O VALLEY NATIONAL

Employer identification number 52-1907122

Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
1_	10,043 SHS VALLEY NATIONAL BANCORP		
:	· · · · · · · · · · · · · · · · · · ·	\$ 110,122.	07/03/2012
(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
		\$	
(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
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	

STATEMENT

PER BOOKS REVENUE EXPENSES AND DESCRIPTION

VNB CASH MANAGEMENT FUND VNB CASH MANAGEMENT FUND

BANK

VALLEY NATIONAL

BANK BANK BANK BANK

NATIONAL NATIONAL NATIONAL NATIONAL NATIONAL

VALLEY

VALLEY VALLEY

VALLEY

VALLEY VALLEY VALLEY

VALLEY NATIONAL BANK

- DIVIDENDS AND INTEREST FROM SECURITIES

PART I

FORM 990PF,

INVESTMENT INCOME

NET

		•	7.
INCOME	e	•	M
/11/201	m 	•	
08/11/201	R	•	
09/11/201	· ~	•	
12/13/201	R	•	
06/11/201	R	•	Э.
DUE 07/11/2012	e .	•	3.
05/11/201		•	8
03/11/201	R	•	
04/11/201	e	•	m
11/11/201		•	n
/11/201	e	•	
01/12/201	···		m
	8	•	82
TOTAL	9,928	. 6	.928.

BANK BANK BANK BANK BANK

> NATIONAL NATIONAL NATIONAL NATIONAL

> > VALLEY

VALLEY VALLEY

NATIONAL

BANCORP BANK

NATIONAL

VALLEY

CHARITABLE PURPOSES	325.
ADJUSTED NET INCOME	NONE
NET INVESTMENT INCOME	325.
REVENUE AND EXPENSES PER BOOKS	650.
DESCRIPTION	TAX PREPARATION FEE (ALLOCABLE TOTALS

~

STATEMENT

FORM 990PF, PART I - TAXES

DESCRIPTION

REVENUE
AND
EXPENSES
PER BOOKS

FEDERAL TAX PAYMENT - PRIOR YE

58.

TOTALS

58.

FORM 990PF, PART II - CORPORATE STOCK

DESCRIPTION

VALLEY NATIONAL BANCORP

ENDING	BOOK VALUE	1 1 1 1 1 1 1
	ĕ	i

ENDING FMV

232,898.

TOTALS

232,898.

175,268. 175,268.

005270

STATEMENT

2,250.

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

OFFICER NAME:

VALLEY NATIONAL BANK

ADDRESS:

1195 HAMBURG TURNPIKE

WAYNE, NJ 07470

ית.דידודי

CO-TRUSTEE

AVERAGE HOURS PER WEEK DEVOTED TO POSITION: 2

COMPENSATION

OFFICER NAME:

GERALD LIPKIN

ADDRESS:

3 STONEHENGE COURT

MONTVILLE, NJ 07045

TITLE:

CO-TRUSTEE

AVERAGE HOURS PER WEEK DEVOTED TO POSITION: 1

OFFICER NAME:

LINDA LIPKIN

ADDRESS:

3 STONEHENGE COURT

MONTVILLE, NJ 07045

TITLE:

CO-TRUSTEE

AVERAGE HOURS PER WEEK DEVOTED TO POSITION: 1

OFFICER NAME:

PAMELA LIPKIN SAUERTIG

ADDRESS:

20 DOREMUS DRIVE

TOWACO, NJ 07082

TITLE:

CO-TRUSTEE

AVERAGE HOURS PER WEEK DEVOTED TO POSITION: 1

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

OFFICER NAME:

JEFFREY LIPKIN

ADDRESS:

45 E. HARSHORN DRIVE SHORT HILLS, NJ 07078

TITLE:

CO-TRUSTEE

AVERAGE HOURS PER WEEK DEVOTED TO POSITION: 1

TOTAL COMPENSATION:

2,250.

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

LIPKIN FAMILY FOUNDATION C/O VALLEY NATIONAL 52-1907122 FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID

RECIPIENT NAME:

BE A STAR FOUNDATION

ADDRESS:

1201 US HIGHWAY 1, SUITE 350A NORTH PALM BEACH, FL 33408

RELATIONSHIP:

NONE

FOUNDATION STATUS OF RECIPIENT:

501(C)(3)

RECIPIENT NAME:

THE GERALDINE R DODGE FOUNDATION

ADDRESS:

14 MAPLE AVE, SUITE 400 MORRISTOWN, NJ 07960

RELATIONSHIP:

NONE

FOUNDATION STATUS OF RECIPIENT:

501(C)(3)

RECIPIENT NAME:

TEMPLE B'NAI JESHURUN C/O EXECUTIVE DIRECTOR

ADDRESS:

1025 SOUTH ORANGE AVE SHORT HILLS, NJ 07078

RELATIONSHIP:

NONE

FOUNDATION STATUS OF RECIPIENT:

501(C)(3)

AMOUNT OF GRANT PAID 5,675.

52-1907122 LIPKIN FAMILY FOUNDATION C/O VALLEY NATIONAL FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID _______ RECIPIENT NAME: JARA ENDOWMENT FUND JEWISH ASSOC FOR RES CARE ADDRESS: 21160 95TH AVE SOUTH BOCA RATON, FL 33428 RELATIONSHIP: NONE FOUNDATION STATUS OF RECIPIENT: 501(C)(3) AMOUNT OF GRANT PAID 1,800. RECIPIENT NAME: ROBERT R LAZAR MIDDLE SCHOOL ADDRESS: 123 CHANGEBRIDGE ROAD MONTVILLE, NJ 07045-9560 RELATIONSHIP: NONE FOUNDATION STATUS OF RECIPIENT: 501(C)(3) AMOUNT OF GRANT PAID RECIPIENT NAME: CONGREGATION B'NAI **JESHURUN** ADDRESS: 1025 SOUTH ORANGE AVE SHORT HILLS, NJ 07078 RELATIONSHIP: NONE FOUNDATION STATUS OF RECIPIENT:

AMOUNT OF GRANT PAID

501(C)(3)

3,086.

RECIPIENT NAME: PINE BROOK JEWISH CENTER ADDRESS: 174 CHANGEBRIDGE ROAD MONTVILLE, NJ 07045-8800 RELATIONSHIP: NONE FOUNDATION STATUS OF RECIPIENT: 501(C)(3) AMOUNT OF GRANT PAID 11,635. RECIPIENT NAME: RUTGERS UNIVERSITY FDTN ADDRESS: 7 COLLEGE AVENUE NEW BRUNSWICK, NJ 08901 RELATIONSHIP: NONE FOUNDATION STATUS OF RECIPIENT: 501(C)(3) AMOUNT OF GRANT PAID 20,000. RECIPIENT NAME: UJA OF METRO WEST NJ ADDRESS: 901 ROUTE 10 WHIPPANY, NJ 07981 RELATIONSHIP: NONE FOUNDATION STATUS OF RECIPIENT: 501(C)(3) AMOUNT OF GRANT PAID RECIPIENT NAME: BETA GAMMA SIGMA ADDRESS: 125 WELDON PARKWAY MARYLAND HGTS, MO 63043

AMOUNT OF GRANT PAID

STATEMENT

RELATIONSHIP:

501(C)(3)

FOUNDATION STATUS OF RECIPIENT:

NONE

9

500.

LIPKIN FAMILY FOUNDATION C/O VALLEY NATIONAL 52-1907122 FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID ______ RECIPIENT NAME: CHARCOT-MARIE-TOOTH ASSOCIATION ADDRESS: 2700 CHESTNUT PARKWAY CHESTER, PA 19013 RELATIONSHIP: NONE FOUNDATION STATUS OF RECIPIENT: 501(C)(3) 250. AMOUNT OF GRANT PAID RECIPIENT NAME: SMITH INFECTIONS DISEASE FOUNDATION, INC. ADDRESS: 189 EAGLE ROCK AVENUE ROSELAND, NJ 07068-1347 RELATIONSHIP: NONE FOUNDATION STATUS OF RECIPIENT: 501(C)(3) AMOUNT OF GRANT PAID 500. RECIPIENT NAME: CROHN'S & COLITIS FDTN OF AMERICA ADDRESS: 386 PARK AVE S, 17TH FL NEW YORK, NY 10016 RELATIONSHIP: NONE FOUNDATION STATUS OF RECIPIENT: 501(C)(3) 200.

AMOUNT OF GRANT PAID

LIPKÍN FAMILY FOUNDATION C/O VALLEY NATIONAL -52-1907122 FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID ______ RECIPIENT NAME: CURE BREAST CANCER FOUNDATION, INC. ADDRESS: 1122 CLIFTON AVENUE CLIFTON, NJ 07013 RELATIONSHIP: NONE FOUNDATION STATUS OF RECIPIENT: 501(C)(3) AMOUNT OF GRANT PAID 10,500.

TOTAL GRANTS PAID:

76,896.

SCHEDULE D (Form 1041)

. (1) 0

Department of the Treasury

Internal Revenue Service

Capital Gains and Losses

► Attach to Form 1041, Form 5227, or Form 990-T.
► Information about Schedule D (Form 1041) and its separate instructions is at www.irs.gov/form1041

OMB No 1545-0092

2012

Employer identification number LIPKIN FAMILY FOUNDATION C/O VALLEY NATIONAL 52-1907122 Note: Form 5227 filers need to complete only Parts I and II. Short-Term Capital Gains and Losses - Assets Held One Year or Less (f) Gain or (loss) for (e) Cost or other basis (a) Description of property (b) Date acquired (c) Date sold (d) Sales price the entire year Subtract (e) from (d) (Example: 100 shares 7% preferred of "Z" Co.) (see instructions) (mo., day, yr.) (mo, day, yr) 1a b Enter the short-term gain or (loss), if any, from Schedule D-1, line 1b 1b NONE Short-term capital gain or (loss) from Forms 4684, 6252, 6781, and 8824 2 Net short-term gain or (loss) from partnerships, S corporations, and other estates or trusts Short-term capital loss carryover. Enter the amount, if any, from line 9 of the 2011 Capital Loss Net short-term gain or (loss). Combine lines 1a through 4 in column (f). Enter here and on line 13, NONE Long-Term Capital Gains and Losses - Assets Held More Than One Year Part II (f) Gain or (loss) for (e) Cost or other basis (a) Description of property (b) Date acquired (c) Date sold the entire year Subtract (e) from (d) (d) Sales price (Example: 100 shares 7% preferred of "Z" Co.) (mo, day, yr.) (mo., day, yr.) (see instructions) 6a **b** Enter the long-term gain or (loss), if any, from Schedule D-1, line 6b 6b -31,542. Long-term capital gain or (loss) from Forms 2439, 4684, 6252, 6781, and 8824 Net long-term gain or (loss) from partnerships, S corporations, and other estates or trusts Capital gain distributions 9 Gain from Form 4797, Part I 10 10 Long-term capital loss carryover. Enter the amount, if any, from line 14 of the 2011 Capital Loss 11 Net long-term gain or (loss). Combine lines 6a through 11 in column (f). Enter here and on line 14a,

For Paperwork Reduction Act Notice, see the Instructions for Form 1041.

Schedule D (Form 1041) 2012

Page 2 Schedule D (Form 1041) 2012 Summary of Parts I and II (2) Estate's (1) Beneficiaries' (3) Total or trust's Caution: Read the instructions before completing this part. (see instr.) NONE 13 Net short-term gain or (loss) 14 Net long-term gain or (loss): -31,542. a Total for year b Unrecaptured section 1250 gain (see line 18 of the wrksht.) Total net gain or (loss). Combine lines 13 and 14a ▶ 15 Note: If line 15, column (3), is a net gain, enter the gain on Form 1041, line 4 (or Form 990-T, Part I, line 4a). If lines 14a and 15, column (2), are net gains, go to Part V, and do not complete Part IV If line 15, column (3), is a net loss, complete Part IV and the Capital Loss Carryover Worksheet, as Part IV Capital Loss Limitation Enter here and enter as a (loss) on Form 1041, line 4 (or Form 990-T, Part I, line 4c, if a trust), the smaller of: 3,000) The loss on line 15, column (3) or b \$3,000 Note: If the loss on line 15, column (3), is more than \$3,000, or if Form 1041, page 1, line 22 (or Form 990-T, line 34), is a loss, complete the Capital Loss Carryover Worksheet in the instructions to figure your capital loss carryover. Tax Computation Using Maximum Capital Gains Rates Form 1041 filers. Complete this part only if both lines 14a and 15 in column (2) are gains, or an amount is entered in Part I or Part II and there is an entry on Form 1041, line 2b(2), and Form 1041, line 22, is more than zero. Caution: Skip this part and complete the Schedule D Tax Worksheet in the instructions if: Either line 14b, col. (2) or line 14c, col. (2) is more than zero, or Both Form 1041, line 2b(1), and Form 4952, line 4g are more than zero. Form 990-T trusts. Complete this part only if both lines 14a and 15 are gains, or qualified dividends are included in income in Part I of Form 990-T, and Form 990-T, line 34, is more than zero. Skip this part and complete the Schedule D Tax Worksheet in the instructions if either line 14b, col. (2) or line 14c, col. (2) is more than zero. Enter taxable income from Form 1041, line 22 (or Form 990-T, line 34) . . . 17 Enter the smaller of line 14a or 15 in column (2) Enter the estate's or trust's qualified dividends from Form 1041, line 2b(2) (or enter the qualified dividends included in income in Part I of Form 990-T) . . . 20 20 If the estate or trust is filing Form 4952, enter the amount from line 4g; otherwise, enter -0- Subtract line 21 from line 20. If zero or less, enter -0-22 22 23 Subtract line 22 from line 17. If zero or less, enter -0-Enter the smaller of the amount on line 17 or \$2,400 24 24 Is the amount on line 23 equal to or more than the amount on line 24? 25 Yes. Skip lines 25 and 26; go to line 27 and check the "No" box. No. Enter the amount from line 23 Subtract line 25 from line 24 26 Are the amounts on lines 22 and 26 the same? 27 Yes. Skip lines 27 thru 30, go to line 31. No. Enter the smaller of line 17 or line 22 27 Enter the amount from line 26 (If line 26 is blank, enter -0-) 29 Subtract line 28 from line 27 Multiply line 29 by 15% (.15) 30 Figure the tax on the amount on line 23. Use the 2012 Tax Rate Schedule for Estates and Trusts (see the Schedule G instructions in the instructions for Form 1041) Add lines 30 and 31 32 32 Figure the tax on the amount on line 17. Use the 2012 Tax Rate Schedule for Estates and Trusts (see the Schedule G instructions in the instructions for Form 1041) 33 Tax on all taxable income. Enter the smaller of line 32 or line 33 here and on Form 1041, Schedule G, line 1a (or Form 990-T, line 36)

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Schedule D (Form 1041) 2012

SCHEDULE D-1 (Form 1041)

Continuation Sheet for Schedule D (Form 1041)

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

OMB No. 1545-0092

Department of the Treasury Internal Revenue Service Name of estate or trust

▶ Information about Schedule D (Form 1041) and its separate instructions is at www.irs.gov/form1041

Employer identification number 52-1907122

LIPKIN FAMILY FOUNDATION C/G Part I Short-Term Capital Gains ar (a) Description of property (Example 100 sh. 7% preferred of 'Z' Co.) 1a 75297.25 VALLEY NATIONAL 10/11/2012 75290.85 VALLEY NATIONAL 108/11/2012 75294.05 VALLEY NATIONAL 1	(b) Date acquired (mo., day, yr)			(e) Cost or other basis (see instructions)	(f) Gain or (loss) Subtract (e) from (d)
(a) Description of property (Example 100 sh. 7% preferred of *Z* Co.) 1a 75297.25 VALLEY NATIONAL 1 10/11/2012 75290.85 VALLEY NATIONAL 1 08/11/2012	(b) Date acquired (mo., day, yr) 3 09/11/2012	(c) Date sold (mo., day, yr)			
10/11/2012 75290.85 VALLEY NATIONAL 1 08/11/2012	3 09/11/2012 3	10/12/2012			Subtract (8) Ironi (0)
08/11/2012	l .		75,297.00	75,297.00	
75204 OS VALLEV MATIONAL I		08/11/2012	75,291.00	75,291.00	
09/11/2012	08/13/2012	09/11/2012	75,294.00	75,294.00	
75303.54 VALLEY NATIONAL 1 12/13/2012 75284.56 VALLEY NATIONAL 1	11/15/2012	12/13/2012	75,304.00	75,304.00	
75284.36 VALLEY NATIONAL 1 06/11/2012 75287.76 VALLEY NATIONAL 1	05/11/2012	06/12/2012	75,285.00	75,285.00	
07/11/2012 75281.47 VALLEY NATIONAL 1	06/12/2012	07/11/2012	75,288.00	75,288.00	
05/11/2012 75275.28 VALLEY NATIONAL 1	04/12/2012	05/11/2012	75,281.00	75,281.00	
03/11/2012 75278.27 VALLEY NATIONAL 1		03/11/2012	75,275.00	75,275.00	<u>.</u>
04/11/2012 75300.34 VALLEY NATIONAL 1	03/12/2012 3 10/12/2012	04/12/2012 11/15/2012	75,278.00 75,300.00	75,278.00 75,300.00	<u> </u>
11/11/2012 75272.19 VALLEY NATIONAL 1 02/11/2012			75,300.00	75,272.00	
75269.1 VALLEY NATIONAL BA		01/13/2012	75,269.00	75,269.00	
		-			
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1b Total. Combine the amounts in column (f). Enter here and on Schedule D, line 1b

Name of estate or trust as shown on Form 1041. Do not enter name and employer identification number if shown on the other side.

I.TPKIN FAMILY FOIDNATION C/O VALLEY NATIONAL.

Employer identification number 52-1907122

LIPKIN FAMILY FOUNDATION C				52-19071	22
art II Long-Term Capital Gains and		Held More Tha	n One Year		
(a) Description of property (Example 100 sh. 7% preferred of "Z" Co.)	(b) Date acquired (mo., day, yr.)	(c) Date sold (mo., day, yr.)	(d) Sales price	(e) Cost or other basis (see instructions)	(f) Gain or (loss Subtract (e) from (
1000. VALLEY NATIONAL BANC	07/25/2006	03/13/2012	12,400.00	21,017.00	-8,617.
131.3549 VALLEY NATIONAL B					
1266.4417 VALLEY NATIONAL	12/14/2007	04/30/2012	1,651.00	1,958.00	-307.
102.2034 VALLEY NATIONAL B	12/15/2006	04/30/2012	15,922.00	25,613.00	9,691.
	07/25/2006	04/30/2012	1,285.00	2,148.00	863.
.25 VALLEY NATIONAL BANCOR	12/14/2007	05/25/2012	3.00	4.00	-1.
585.5776 VALLEY NATIONAL B	12/14/2007	11/27/2012	5,488.00	8,314.00	-2,826.
1914.4224 VALLEY NATIONAL					
	12/14/2007	11/27/2012	17,943.00	27,180.00	-9,237.
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Total. Combine the amounts in column					