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Return of Private Foundation or Section 4947(a)(1) Trust Treated as Private Foundation

OMB No 1545-0052

Department of the Treasury Internal Revenue Service

▶ Do not enter Social Security numbers on this form as it may be made public.

▶ Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf. Open to Public Inspection

	calendar year 2013 or tax year béginning		, 2013, and ending		, 20
Nan	ne of foundation			A Employer identit	
TH	E JANE ELIZABETH COHEN FOUNDA'	rion		26-668817	78
Nur	nber and street (or PO box number if mail is not delivered	I to street address)	Room/suite	B Telephone numb	•
				(3)	01) 365-1530
P.	O. BOX 34835				
City	or town, state or province, country, and ZIP or foreign pos	stal code			
				C If exemption applic pending, check her	ation is
BE	THESDA, MD 20827				
G C	heck all that apply: Initial return		a former public charity	D 1 Foreign organiza	ations, check here . ►
	Final return	Amended return	n	2 Foreign organiza 85% test, check	
	Address change	Name change			nere and attach
H C	heck type of organization X Section 501(E If private foundation	on status was terminated
	Section 4947(a)(1) nonexempt charitable trust	Other taxable priva		under section 507(b)(1)(A), check here . \blacktriangleright
	1	unting method· X Cash	n Accrual		s in a 60-month termination
	· · · · · · · · · · · · · · · · · · ·	ther (specify)	 -	under section 507(t	o)(1)(B), check here .
		column (d) must be on ca	ash basis.)		(d) Disbursements
Par	t Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d)	(a) Revenue and	(b) Net investment	(c) Adjusted net	for charitable
	may not necessarily equal the amounts in	expenses per books	ıncome	income	purposes
	column (a) (see instructions))	12,500.			(cash basis only)
1	of the foundation is not required to	12,300			
2	Check ▶ attach Sch B				
3	, ,				
4					
5	a Gross rents				
	b Net rental income or (loss)				
Revenue 2	a Net gain or (loss) from sale of assets not on line 10 b Gross sales price for all				
. Š	assets on line 6a Capital gain net income (from Part IV, line 2).				
& 8	, -				
9	' -				
-	a Gross sales less returns				
<u>-</u>	and allowances · · · · · · · · · · · · · · · · · · ·		R	FOFIVED	
11 12 13	c Gross profit or (loss) (attach schedule)			FOLIVED	
) 11			[8]	55 11 15 1	O O
12		12,500.	面 Al	PR B # 4UI4	9
	Compensation of officers, directors, trustees, etc	Q			3
مها ک	Other employee salaries and wages		<u> </u>	DEN UT	
\$15 \$015 \$15 \$16					
Ö 👸 16	a Legal fees (attach schedule)				4 550
т	b Accounting fees (attach schedule)ATCH 1	1,573.			1,573
tive	c Other professional fees (attach schedule)				
istrat					
Operating and Administrative 5 5 5 15 6 1 1 1 1 1 1 1 1 1 1 1 1 1 1				<u></u>	
<u>آج</u> 19	, , , , , , , , , , , , , , , , , , , ,				
A 20	• •	323.			323
[21		343.			323
g 22		78.	 	 	78
	· · · · · · · · · · · · · · · · · · ·	/0.			1
E 24		1,974.			1,974
	Add lines 13 through 23	12,500.			12,500
25		14,474.	0		0 14,474
26		13,3/3.			23,313
27		-1,974.			
	a Excess of revenue over expenses and disbursements	-1, 5/4	0		
	b Net investment income (if negative, enter -0-)				
	c Adjusted net income (If negative, enter -0-)	<u> </u>			Form 990-PF (2013)

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PAGE 1

P	art II	Ralance Sheets	Attached schedules and amounts in the description column should be for end-of-year	Beginning of year	End of	year
_	u	Datance Officets	amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
J	1	Cashnon-interest-beari	ng	6,653.	4,680.	4,680.
	2		cash investments			
-	3	Accounts receivable				
Į		Less: allowance for doub	-46) .			
	4					
ļ		Less: allowance for doub	otful accounts ►			
-	5					
	6		officers, directors, trustees, and other			<u> </u>
1			ach schedule) (see instructions)			
l	7		eceivable (attach schedule)			
1			otful accounts ►	1		
2	8	Inventories for sale or us	_			
Assets	9	Prepaid expenses and d	eferred charges			
A	10 a		government obligations (attach schedule)			
			-4 1 / 444- 1 2 1 3			
ĺ			bonds (attach schedule)			
	11	Investments - land, buildings	3,			
		and equipment basis Less accumulated deprecia	ttion			
	4.0	(attach schedule)				* *
	12 13		loans			
	14	Land, buildings, and				
		equipment basis Less accumulated deprecia	tion			
	15	(attach schedule))			
	16		completed by all filers - see the			
	10		age 1, item I)	6,653.	4,680.	4,680.
\dashv					4,000.	4,000.
- l	17		ccrued expenses	í		
tie	19					
賣	20		rs, trustees, and other disqualified persons			
•=	21		tes payable (attach schedule)			
	22	Other liabilities (describe	• ▶)			
	23	Total liabilities (add line	s 17 through 22)	0	0	
ᅱ	23		ow SFAS 117, check here ► X		<u>`</u>	
			24 through 26 and lines 30 and 31.			
Ses			through to and mice of and on.	6,653.	4,680.	
au	24	Unrestricted		- 0,000.	1,000.	
Bal	25	Temporarily restricted	not follow SFAS 117,			
핃	26	Permanently restricted .				
F		Foundations that do	not follow SFAS 117, P L			
9	~~	Check here and com	piete lines 27 through 31.			
įts	27	Capital stock, trust princ	cipal, or current funds			
SS	28	Paid-in or capital surplus, or	land, bldg , and equipment fund			
t A	29	Retained earnings, accumu	lated income, endowment, or other funds	6,653.	4,680.	
Ž	30	Total net assets or fund	het assets/fund balances (see	- 0,055.	4,000.	
	31			6,653.	4,680.	
	out II		inges in Net Assets or Fund B		4,000.	
			alances at beginning of year - Part II		ust agree with	
1			d on prior year's return)			6,653.
•						-1,974.
2	EU(er annount from Part I,	line 27a ded in line 2 (itemize) ► ATCH 3		3	1,3,4.
						4,680.
4	Add Do-	reases not included in	line 2 (itemize)		5	-,,,,,,,,
2	Dec	l not appote or fued b	alances at end of year (line 4 minus l	ine 5) - Part II column (h)		4,680.
<u>°</u>	108	al fiel assets of fully b	aiances at end of year time 4 millus i	and by Taren, column (b),		5 990-PE (2012)

04571

<u> </u>	Yes," the foundation does	not qualify under section 4940(e).	Do not complete this part.		
1	Enter the appropriate amo	ount in each column for each year,	, see the instructions before making	any entries	
	(a) Base penod years alendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of nonchantable-use assets	(cc	(d) Distribution ratio I (b) divided by col (c))
	2012	13,789.	7,541.		1.828537
	2011	4,439.	5,835.		0.760754
	2010	5,462.	5,899.		0.925920
	2009	9,356.	2,229.		4.197398
	2008				
2	Total of line 1, column (d)	·		2	7.712609
3		for the 5-year base period - divide dation has been in existence if less		3	1.928152
4	Enter the net value of nor	ncharitable-use assets for 2013 fro	m Part X, line 5	4	5,579.
5	Multiply line 4 by line 3			5	10,757.
6	Enter 1% of net investme	nt income (1% of Part I, line 27b)		6	
7	Add lines 5 and 6			7	10,757.
8	Enter qualifying distribution	ons from Part XII, line 4		8	14,474.
	If line 8 is equal to or green Part VI instructions.	eater than line 7, check the box i	n Part VI, line 1b, and complete t	hat part us	ing a 1% tax rate. See th

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Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2013 or the taxable year beginning in 2013 (see instructions for Part XIV)? If "Yes," complete

X

Х

4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? **b** Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its

charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2013?

Form 990-PF (2013)

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FORM	990-PF (2013) 1111 011111 11111 11111	IDDIII CONDII I	OUNDITION		0000170	Page 0
Pai	rt VII-B Statements Regarding Activities for	or Which Form 4	720 May Be Requ	uired (continued)		
5a	During the year did the foundation pay or incur any amou	int to:				
	(1) Carry-on propaganda, or otherwise attempt to influe	nce legislation (section	1 4945(e))?	Yes X No	,	
	(2) Influence the outcome of any specific public ele	ction (see section 4	1955); or to carry of	on,		-
	directly or indirectly, any voter registration drive?			Yes X No	,	
	(3) Provide a grant to an individual for travel, study, or ot				,	
	(4) Provide a grant to an organization other than a	•				
	section 509(a)(1), (2), or (3), or section 4940(d)(2)? (,	1
	(5) Provide for any purpose other than religious, ch					
	purposes, or for the prevention of cruelty to children of				,	
ь	me no me de la companya de la compan				1 1	
_	Regulations section 53 4945 or in a current notice regard			skoophono dodonbod m	5b	X
	Organizations relying on a current notice regarding disast	_	•			_
_	If the answer is "Yes" to question 5a(4), does the				<u> </u>	1
·	because it maintained expenditure responsibility for the g					
				. Lines in No	' [- 1
e -	If "Yes," attach the statement required by Regulations sec	, ,	atl., to no., no			}
oa	Did the foundation, during the year, receive any fund	•				
_	on a personal benefit contract?					l x
D	Did the foundation, during the year, pay premiums, direct	city or indirectly, on a p	personal benefit contra	ισι′	6b	<u> </u>
_	If "Yes" to 6b, file Form 8870					
	At any time during the tax year, was the foundation a pa	•	·		1 1	
	If "Yes," did the foundation receive any proceeds or have tyll Information About Officers, Directors				7b	
Pal	rt VIII Information About Officers, Directors and Contractors	, Trustees, roun	uation managers	, riigiliy r ala Ellipic	уссэ,	
1	List all officers, directors, trustees, foundation n					
	(a) Name and address	(b) Title, and average hours per week	(c) Compensation (If not paid,	(d) Contributions to employee benefit plans	(e) Expense a other allow	
		devoted to position	enter -0-)	and deferred compensation		
7.00	CH 4		,			0
AIC	л 4			1 9		
						
				<u> </u>		
2	Compensation of five highest-paid employees "NONE."	(other than thos	e included on lir	ie 1 - see instructio	ons). If non	e, enter
	NONE.	(b) Title, and average		(d) Contributions to		
(a) Name and address of each employee paid more than \$50,000	hours per week	(c) Compensation	employee benefit plans and deferred	(e) Expense a other allow	
		devoted to position		compensation		
	NONE					
Tota	I number of other employees paid over \$50,000 .					

3 Five highest-paid independent contractors for professional services (see instructions). If none, enter "NONE." (a) Name and address of each person paid more than \$50,000 (b) Type of service (c) Compensation NONE. NONE. Total number of others receiving over \$50,000 for professional services. Part IX-A Summary of Direct Charitable Activities List the foundation's four largest direct charitable activites of the foundation of the foundation's four largest direct charitable activities. 1 N/A 2	Part VIII	Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employand Contractors (continued)	yees,
(c) Name and address of each person paid more than \$50,000 (b) Type of service (c) Compensation NONE Total number of others receiving over \$50,000 for professional services. Part IX-A Summary of Direct Charitable Activities List the foundations four targest direct charitable structures during the tax year include relevant statistical information such as the number of granications and other beneficians served, conferences convened, research papers produced, etc 1 N/A 2	3 Five h	ghest-paid independent contractors for professional services (see instructions). If none, enter "NONE	."
Fortal number of others receiving over \$50,000 for professional services	•		
Fortal number of others receiving over \$50,000 for professional services			
Part IX-A Summary of Direct Charitable Activities List the foundation's four largest direct charitable activities during the tax year Include relevant statistical information such as the number of organizations and other beneficianes served, conferences convened, research papers produced, etc 1 N/A 2	NONE		<u> </u>
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 1 N/A 2			
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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 1 N/A 2			
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 1 N/A 2			
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. 1 N/A 2	Total numbe	r of others receiving over \$50,000 for professional services	
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 1 N/A 2	Part IX-A	Summary of Direct Charitable Activities	
rorganizations and other beneficianes served, conferences convened, research papers produced, etc 1 N/A 2			
2			Expenses
2 3 4 ———————————————————————————————			
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 All other program-related investments See instructions 3 NONE			
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 All other program-related investments See instructions 3 NONE			
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 All other program-related investments See instructions 3 NONE	2		
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 All other program-related investments See instructions NONE NONE			
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 All other program-related investments See instructions NONE NONE			
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 2 All other program-related investments See instructions 3 NONE	3		
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 1 NONE 2			
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 1 NONE 2			
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 1 NONE 2	4		
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 1 NONE 2	+		
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 1 NONE 2			
1 NONE 2 All other program-related investments See instructions 3 NONE	Part IX-B	Summary of Program-Related Investments (see instructions)	
All other program-related investments See instructions 3 NONE		two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
All other program-related investments See instructions 3 NONE	1 NONE		
All other program-related investments See instructions 3 NONE			
All other program-related investments See instructions 3 NONE			
3 NONE	2		
3 NONE			
3 NONE	All athas	ven related in restments. See instructions	
		ram-related investments See instructions	
Total Add lines 1 through 2	3 NONE		
Total Add lines 1 through 3			
	Total Add I	nos 1 through 3	

04571

Par	Minimum Investment Return (All domestic foundations must complete this part. Foreisee instructions.)	gn foundations	S,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purposes	_	
a	Average monthly fair market value of securities	1a	
	Average of monthly cash balances	1b	5,664.
C	Fair market value of all other assets (see instructions)	1c	F 664
d	Total (add lines 1a, b, and c)	1d	5,664.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
_	1c (attach detailed explanation) 1e		
2	Acquisition indebtedness applicable to line 1 assets	2	
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	5,664.
4			
_	Instructions) Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	4	85.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	5,579.
6	Minimum investment return. Enter 5% of line 5	6	279.
Par	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foun and certain foreign organizations check here ▶ and do not complete this part)	dations	
1	Minimum investment return from Part X, line 6	1	279.
2a	Tax on investment income for 2013 from Part VI, line 5		
b	Income tax for 2013 (This does not include the tax from Part VI.) 2b		
С	Add lines 2a and 2b	2c	
3	Distributable amount before adjustments Subtract line 2c from line 1	3	279.
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	279.
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted. Subtract line 6 from line 5 Enter here and on Part XIII,		
	line 1,	7	279.
Par	XII- Qualifying Distributions (see instructions)	, <u> </u>	
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes.	T	
`a	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	14,474.
b			
2	Program-related investments - total from Part IX-B Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.	- '-	
~		2	
3	purposes Amounts set aside for specific charitable projects that satisfy the		
э a	Suitability tast (prior IPS approval required)	3a	
	Suitability test (prior IRS approval required).	3b	
4	Cash distribution test (attach the required schedule) Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	14,474.
-	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income		
5	· ·	5	0
e	Enter 1% of Part I, line 27b (see instructions) Adjusted qualifying distributions. Subtract line 5 from line 4	6	14,474.
6	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when c		
	qualifies for the section 4940(e) reduction of tax in those years.	alculating whe	mer me roundatior

. e	rt XIII Undistributed Income (see instruction			 	
1	Distributable amount for 2013 from Part XI,	(a) Corpus	(b) Years prior to 2012	(c) 2012	(d) 2013
	line 7			··	279
	Undistributed income, if any, as of the end of 2013.				
а	Enter amount for 2012 only			 	
b	Total for pnor years 20 11 ,20 10 ,20 09			 	
	Excess distributions carryover, if any, to 2013				
а	From 2008				
b	From 2009 9,245.				
С	From 2010 5, 167.				
	From 2011 4, 147.				
	From 2012 13, 412.				
	Total of lines 3a through e	31,971.			
	Qualifying distributions for 2013 from Part XII,				
	line 4 ▶ \$14,474.				
а	Applied to 2012, but not more than line 2a		_	_	
	Applied to undistributed income of prior years (Election required - see instructions)				
С	Treated as distributions out of corpus (Election	-			
	required - see instructions)				
d	Applied to 2013 distributable amount				279
е	Remaining amount distributed out of corpus	14,195.			
	Excess distributions carryover applied to 2013				
i	(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:				
а	Corpus Add lines 3f, 4c, and 4e Subtract line 5	46,166.		_	
	Prior years' undistributed income Subtract				
С	Enter the amount of prior years' undistributed income for which a notice of deficiency has				
	been issued, or on which the section 4942(a) tax has been previously assessed				·
d	Subtract line 6c from line 6b Taxable amount - see instructions				
е	Undistributed income for 2012. Subtract line 4a from line 2a Taxable amount - see				
	instructions				
f	Undistributed income for 2013. Subtract lines 4d and 5 from line 1. This amount must be				
,	Amounts treated as distributions out of corpus				
	to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (see instructions)				
			<u> </u>		
	Excess distributions carryover from 2008 not applied on line 5 or line 7 (see instructions)			· · · · · · · · · · · · · · · · · · ·	
	Excess distributions carryover to 2014.	46,166.			
	Subtract lines 7 and 8 from line 6a				
	Analysis of line 9 Excess from 2009 9, 245.				
а	E 167				
Þ	4 1 4 7				
	12 410				
đ	Excess from 2012 13, 412. Excess from 2013 14, 195.				

b The form in which applications should be submitted and information and materials they should include:

c Any submission deadlines:

d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other

Page 11

Part XV Supplementary Information (continued)							
3 Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, show any relationship to any foundation manager or substantial contribution Purpose of grant or contribution Amount A								
Recipient	Recipient If recipient is an individual, show any relationship to any foundation manager recipient recipient is an individual.							
Name and address (home or business)	any foundation manager or substantial contributor	recipient	contribution	Amount				
a Paid during the year								
ATCH 5								
				ŀ				
		ļ	1	ł				
				1				
	}		1	1				
]		1				
		ļ]]				
				!				
Total	<u> </u>			12,500.				
b Approved for future payment								
		į		İ				
				1				
]]					
	<u> </u>							
Total		<u></u>	▶ 3b					

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Form 990-PF (2013)

Page **12**

art XVI- ter gross :	A Analysis of Income-Produ amounts unless otherwise indicated		ated business income	Excluded by	y section 512, 513, or 514	(e)
,	service revenue.	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exemp function income (See instructions
a NON	_			-		(See mondonone
f						
g Fees a	and contracts from government agencies					
Members	ship dues and assessments					
Interest or	n savings and temporary cash investments					
	Is and interest from securities					
	al income or (loss) from real estate.		 _	_		
	-financed property					
b Not d	lebt-financed property					·
	I income or (loss) from personal property .					
	vestment income	1				
•	oss) from sales of assets other than inventory	<u> </u>				
	me or (loss) from special events			-		
	rofit or (loss) from sales of inventory					
	venue a NONE					
b						
с						
с						
c d Subtotal Total. Addee worksh	Add columns (b), (d), and (e) dd line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calc	culations) s to the Ac	complishment of E	xempt Purp	oses	
c d e Subtotal Total. Added workshart XVI-	Add columns (b), (d), and (e) dd line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calc Relationship of Activities Explain below how each activity	s to the Ac	complishment of E	xempt Purp	oses e) of Part XVI-A contribi	uted importantly to
d e Subtotal Total. Adde worksh	Add columns (b), (d), and (e) dd line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calc	s to the Ac	complishment of E	xempt Purp	oses e) of Part XVI-A contribi	uted importantly to
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c de Subtotal Total. Adde workshart XVI-ne No.	Add columns (b), (d), and (e) dd line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calc Relationship of Activities Explain below how each activity	s to the Ac	complishment of E	xempt Purp	oses e) of Part XVI-A contribi	uted importantly to
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c d Subtotal Total. Ad e worksh Irt XVI-	Add columns (b), (d), and (e) dd line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calc Relationship of Activities Explain below how each activity	s to the Ac	complishment of E	xempt Purp	oses e) of Part XVI-A contribi	uted importantly to
c d e Subtotal Total. Ad e worksh art XVI-	Add columns (b), (d), and (e) dd line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calc Relationship of Activities Explain below how each activity	s to the Ac	complishment of E	xempt Purp	oses e) of Part XVI-A contribi	uted importantly to
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c d e Subtotal Total. Ad e worksh art XVI-	Add columns (b), (d), and (e) dd line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calc Relationship of Activities Explain below how each activity	s to the Ac	complishment of E	xempt Purp	oses e) of Part XVI-A contribi	uted importantly to
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Form 990-PF (2013)	THE JANE	ELIZABETH CO	OHEN	FOUNDATION	26-6688178	Page 13
Part XVII Information Exempt Organia		sfers To and	Trans	actions and Relat	ionships With Noncharita	ble

1	Did the	e organization direct	tly or indirectly	engage in a	ny of the follow	ing with	any other orga	nization	described		Yes	No
	ın sect	ion 501(c) of the Co	ode (other than	section 501	(c)(3) organizati	ons) or	in section 527,	relating	to political			
	organiz	zations?						_				
а	Transfe	ers from the reportir	ng foundation to	a noncharit	able exempt org	anızatio	n of.					
	(1) Cas	sh			· · · · · · · · · · · · · · · · · · ·					1a(1)		_ X
		ner assets								1a(2)		X
b		ransactions.										
	(1) Sal	es of assets to a no	ncharitable exe	mpt organiza	ition					1b(1)		X
	(2) Pur	rchases of assets fro	om a noncharita	able exempt o	organization					1b(2)		X
	(3) Rei	ntal of facilities, equ	ipment, or other	assets						1b(3)		X
	(4) Rei	imbursement arrang	ements							1b(4)		X
	(5) Loa	ans or loan guarante	es							1b(5)		X
	(6) Per	formance of service	es or memberst	nip or fundra	ising solicitations					1b(6)		X
С		g of facilities, equipr								1 c		X
d	If the a	answer to any of th	ne above is "Ye	es," complete	e the following	schedu	le Column (b) s	should a	ilways show	the f	aır m	arket
	value c	of the goods, other	assets, or serv	ices given b	y the reporting t	foundat	ion. If the found	lation re	ceived less	than f	air m	arket
	value i	n any transaction of	r sharing arran	gement, sho	w in column (d)	the va	lue of the goods	s, other	assets, or s	ervices	rece	eived
(a) L	ine no	(b) Amount involved	(c) Name of r	noncharitable ex	empt organization	(d)	Description of transf	ers, transa	ctions, and shar	ing arran	ngemer	nts
		N/A				N/	'A					
												
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_		<u> </u>	1									
2a		foundation directly	•				· ·	-	Г		s X	٦,,,
		ped in section 501(c		iner inan se	ction 50 i(c)(3)) (or in sec	ction 52/?		L		s <u> </u>	ן ואס
D	ii res	" complete the follo (a) Name of organization		(b)	Type of organization			(c) Descrip	tion of relations			
		(a) Name of organization		(5)	Type of organization		- 	(C) Descrip				
												
					-							
												
	Under	penalties of perjury, I decl	are that I have exam	ined this return, i	including accompanying	schedules	and statements, and	to the best	of my knowledg	e and be	elief, it	ıs true,
3		ct, and complete Declaration of	of preparer (other than t	taxpayer) is based i	on all information of whi	ch preparer	has any knowledge					
Sig		Sem 21	och_	1	3/2:114	_	Thertee			discuss eparer s		return below
Her	e Sign	nature/of officer or trustee	·	Date		Title	<u> </u>		(see instruction		Yes	No
		()							Ľ			=
		Print/Type preparer's na	ame	Preparer's	signature	>	Date	Ch	neck If F	PTIN		
Paid		W.CRAIG THOM	IPSON	NO F	1//		3/4/0			P0029	9509	4
Pre	parer			ANS & THO			77.	Firm's Ell	v ▶54-13	34131	18	
Use	Only		99 HERNDON	PARKWAY,	SUITE 206							
		HE	ERNDON, VA	<i>y</i>			20170-4467	Phone no				
								_	For	m 990	-PF	2013)

Schedule B

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service Name of the organization

Schedule of Contributors

OMB No 1545-0047

▶ Attach to Form 990, Form 990-EZ, or Form 990-PF. ▶ Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at www.irs.gov/form990

Employer identification number

THE JANE ELIZABETH COM	EN FOUNDATION	26-6688178				
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 foun	ndation				
[527 political organization					
Form 990-PF	X 501(c)(3) exempt private foundation					
[4947(a)(1) nonexempt charitable trust treated as a private foundat	ion				
[501(c)(3) taxable private foundation					
Note. Only a section 501(c)(7), (8 instructions	red by the General Rule or a Special Rule.), or (10) organization can check boxes for both the General Rule and a S	ipecial Rule See				
General Rule						
	g Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 c contributor Complete Parts I and II	or more (in money or				
Special Rules						
under sections 509(a)(1	organization filing Form 990 or 990-EZ that met the 33 1/3 % support to) and 170(b)(1)(A)(vi) and received from any one contributor, during the 0 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form	e year, a contribution of				
during the year, total co	(8), or (10) organization filing Form 990 or 990-EZ that received from a intributions of more than \$1,000 for use <i>exclusively</i> for religious, charitals, or the prevention of cruelty to children or animals. Complete Parts I, II,	ble, scientific, literary,				
during the year, contribution of total to more than \$ year for an exclusively reapplies to this organization.	(8), or (10) organization filing Form 990 or 990-EZ that received from a utions for use <i>exclusively</i> for religious, charitable, etc., purposes, but the 1,000. If this box is checked, enter here the total contributions that were eligious, charitable, etc., purpose. Do not complete any of the parts unless tion because it received <i>nonexclusively</i> religious, charitable, etc., contributions.	ese contributions did e received during the es the General Rule utions of \$5,000 or				
Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)						

JSA

For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF.

04571

Schedule B (Form 990, 990-EZ, or 990-PF) (2013)

Name of organization THE JANE ELIZABETH COHEN FOUNDATION

Employer identification number 26-6688178

Part I	Contributors (see instructions)	Use duplicate copies of Par	t I if additional space is nee	eded.

(a)	(b)	(c) Total contributions	(d)
No.	Name, address, and ZIP + 4		Type of contribution
1 _	JANE E. COHEN 10132 CRESTBERRY PLACE BETHESDA, MD 20817	\$12,500.	Person Payroll Noncash (Complete Part II for noncash contributions)
(a)	(b)	(c)	(d) Type of contribution
No.	Name, address, and ZIP + 4	Total contributions	
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a)	(b)	(c)	(d) Type of contribution
No.	Name, address, and ZIP + 4	Total contributions	
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)

Name of organization THE JANE ELIZABETH COHEN FOUNDATION

Employer identification number

	·		26-6688178
Part II	Noncash Property (see instructions). Use duplicate copies	of Part II if additional space is ne	eded.
(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
		 \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		 s	

Employer identification number 26-6688178

,	For organizations completing Part III, ent contributions of \$1,000 or less for the y	er the total of exclusively	religious, charitable, etc
	Use duplicate copies of Part III if addition		, , , , , , , , , , , , , , , , , , ,
(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, and Z	(IP + 4	Relationship 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	
		(e) Transier of gift	
	Transferee's name, address, and Z	IP + 4	Relationship 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, and Z	IP + 4	Relationship of transferor to transferee
- 4-5-3-			
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
<u> </u>			
		(e) Transfer of gift	
	Transferee's name, address, and Z	(IP + 4	Relationship of transferor to transferee
	<u> </u>		· · · · · · · · · · · · · · · · · · ·

Exclusively religious, charitable, etc., individual contributions to section 501(c)(7), (8), or (10) organizations

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- ACCOUNTING FEES PART I FORM 990PF,

	REVENUE AND	NET	ADJUSTED	
	EXPENSES	INVESTMENT	NET	CHARITABLE
DESCRIPTION	PER BOOKS	INCOME	INCOME	PURPOSES
RUSSELL, EVANS & THOMPSON	1,573.			1,573.
TOTALS	1,573.			1,573.

ATTACHMENT 2 PAGE 19

- OTHER EXPENSES PART I FORM 990PF,

DESCRIPTION PO BOX RENTAL

REVENUE AND EXPENSES PER BOOKS

TOTALS

78.

CHARITABLE PURPOSES

78.

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ATTACHMENT

26-6688178

ATTACHMENT 3

FORM	'990PF.	PART	III	_	OTHER	INCREASES	IN	NET	WORTH	OR	FUND	BALANCES
T OTATA	J J U L L I		~		OTILLI	THOTHDODO		****	*****	~ - \	1 0110	21111110

TOTAL

DESCRIPTION AMOUNT
ROUNDING 1.

AND ADDRESS WEEK DEVOTED TO POSITION COMPENSATION TO EMPLY PLANS A14835 FOUNDAMED SHEET PLANS A	FORM 990PF, PART VIII - LIST OF OFFICERS,	ERS, DIRECTORS, AND TRUSTEES		ATTACHMENT	MENT 4
EN TRUSTEE 1.50 ADVISOR TRUSTEE ADVISOR TRUSTEE ADVISOR TRUSTEE 20 00 01 1.50 0 0 1.20 1.50 1.20 1.50		AND AVERAGE HOURS PER DEVOTED TO POSITION	OMPENSATION	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	EXPENSE ACCT AND OTHER ALLOWANCES
FELD FELD ADVISOR TRUSTEE ADVISOR TRUSTEE 20 15 .15 .15 .15 SPREVIOUSLY PROVIDED LEGAL FEES INCURRED DURING 2013.	JANE ELIZABETH COHEN P.O. BOX 34835 BETHESDA, MD 20827		0	0	0
FELD FELD ADVISOR TRUSTEE .15 FELD IS THE SPOUSE OF A MEMBER OF THE WEIDENFELD LAW S. PREVIOUSLY PROVIDED LEGAL SERVICES FOR THE R., THERE WERE NO LEGAL FEES INCURRED DURING 2013.	JANET R. MILLER P.O. BOX 34835 BETHESDA, MD 20827	ADVISOR TRUSTEE	0	0	0
FELD .15 FELD IS THE SPOUSE OF A MEMBER OF THE WEIDENFELD LAW S PREVIOUSLY PROVIDED LEGAL SERVICES FOR THE R, THERE WERE NO LEGAL FEES INCURRED DURING 2013.	CATHERINE MICK P.O. BOX 34835 BETHESDA, MD 20827	ADVISOR TRUSTEE	0	0	0
	SHEILA RABB WEIDENFELD P.O. BOX 34835 BETHESDA, MD 20827 SHEILA RABB WEIDENFELD IS THE SPOUSE FIRM. THE FIRM HAS PREVIOUSLY PROVI	ADVISOR TRUSTEE .15 OF A MEMBER OF THE WEIDENFELD LAW DED LEGAL SERVICES FOR THE EGAL FEES INCURRED DURING 2013.	0	0	0

GRAND TOTALS

FORM 990PE, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

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04571

2,500. 5,000. 12,500. 5,000. AMOUNT ATTACHMENT 5 TO SUPPORT CHILDREN'S CHORUS AND GENERAL PURPOSES TOTAL CONTRIBUTIONS PAID PURPOSE OF GRANT OR CONTRIBUTION GENERAL PURPOSES. GENERAL PURPOSES. RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR FOUNDATION STATUS OF RECIPIENT

NONE

STRATHMORE HALL FOUNDATION INC

BETHESDA, MD 20814-1509

7 WEST DRIVE

NONE አ

THE CHILDREN'S INN AT NIH, WOODMONT HOUSE

RECIPIENT NAME AND ADDRESS

NONE

HISTORIC RITTENHOUSETOWN INC

N BETHESDA, MD 20852 5301 TUCKERMAN LANE

PHILADELPHIA, PA 19144

206 LINCOLN DRIVE

ATTACHMENT 5

PAGE 22