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## **Return of Private Foundation**

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

OMB No 1545-0052

Open to Public Inspection

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.

	1	Vame	of foundation		, 2010,	and ending	A	Employer identifi	
	_		ING BROOK COUNTRY CLUB FOUND	<del></del>			+		<del></del>
	Number and street (or P O box number if mail is not delivered  9 SPRING BROOK ROAD			d to street address)		Room/suite	В	•	er (see instructions) 3) 539-6660
	(	City o	r town, state or province, country, and ZIP or foreign po	stal code			С	If exemption application pending, check here	tion is X
	MORRISTOWN, NJ 07960		Initial return of a former public charity Amended return Name change c)(3) exempt private foundation			┥		, $\Box$	
	G Check all that apply  X Initial return Final return Address change  H Check type of organization:  X Section 501(c)					D 1. Foreign organizations, check here			
						_	If provide foundation	n status was terminated	
	Γ	ີ s	Section 4947(a)(1) nonexempt charitable trust	Other taxable pr	Other taxable private foundation			•	)(1)(A), check here
	ī	Fair	market value of all assets at J Acco	ounting method X C	ash Acc	rual	F	If the foundation is	in a 60-month termination
				ther (specify)					)(1)(B), check here . ►
				column (d) must be on	cash basis)		Ī		
	-P	art-l	Analysis of Revenue and Expenses (The 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 inve		(c) /	Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
	П	1	Contributions, qrfts, grants, etc., received (attach schedule) .	226.	5 7 4+		٠.		4
	1	2	if the foundation is not required to	,			\d.	-7 - 15	
		3	Interest on savings and temporary cash investments						, , , , , , , , , , , ,
		4	Dividends and interest from securities		-				
			Gross rents						
			Net rental income or (loss)	Law early programme	, <u> </u>		-	r_= = = = = = = = = = = = = = = = = = =	, ()
			Net gain or (loss) from sale of assets not on line 10			3 %	-,	g1 2	g = 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2
	ä		Gross sales price for all	17 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	~355	972 A 2 72		1.7	
	Revenue	_	assets on line 6a	C	<b>5/</b>			<u>,                                    </u>	3 12 2 2 2 2 2 2 3 3 4 3 6
	R	7	Capital gain net income (from Part IV, line 2) .	(G)	/ >	F. 11			F (4.5)
		8	Net short-term capital gain		2				
		9 10 a	Gross sales less returns	121	41	257		*	
			and allowances · · · ·	[2]	4		<u> </u>		* * * * * * * * * * * * * * * * * * * *
			Cross profit or (loss) (attach schedule)	7. 7	V /4	- 1,-			
	į	11	Other income (attach schedule)		308				- 4
<b>*</b>	$\dashv$	12	Total. Add lines 1 through 11	- L	36 1		_		
2014		13	Compensation of officers, directors, trustees, etc		7/				· · · · · · · · · · · · · · · · · · ·
	Ses	14	Other employee salaries and wages						
8	eus	15	Pension plans, employee benefits	281.					281
>	×	16a	Legal rees (attach schedule)						
NOV	e E	D	Accounting fees (attach schedule)						
_	ativ	_ C	Other professional fees (attach schedule)						
	str	17	interest					<del></del>	
乏	ij	18	Taxes (attach schedule) (see instructions)						1 1
CHARLED AND A	ф	19	Depreciation (attach schedule) and depletion.						
ਹ	Ā	20	Pension plans, employee benefits Legal fees (attach schedule) Accounting fees (attach schedule) Other professional fees (attach schedule) Interest Taxes (attach schedule) (see instructions) Depreciation (attach schedule) and depletion Occupancy						
め	and	21	rraver, conferences, and meetings						
	Ē	22	Printing and publications		<del> </del>				·
	Operating	23	Other expenses (attach schedule)	1					<del> </del>
	er	24	Total operating and administrative expenses.	1 201					281
	Ö		Add lines 13 through 23	281.					20.1
		25	Contributions, gifts, grants paid	201	,			:	301
	4	26	Total expenses and disbursements Add lines 24 and 25	281.					281
		27	Subtract line 26 from line 12				-		
			Excess of revenue over expenses and disbursements $\ \ . \ \ .$	-55.				<del></del>	<u> </u>
	,	b	Net investment income (if negative, enter -0-)			0			
		С	Adjusted net income (if negative, enter -0-)						**

JSA For Paperwork Reduction Act Notice, see instructions. 3E1410 1 000 2088GC M261

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Part II	Palando Shoots	Attached schedules and amounts in the description column should be for end-of-year	Beginning of year	End o	of year
CILL!	Daiance Sneets	amounts only (See instructions )	(a) Book Value	(b) Book Value	(c) Fair Market Value
1	Cash - non-interest-bear	ing		765.	765
		cash investments			
1			1		
•	Less allowance for do				
4	Pledges receivable	ubtful accounts ▶	1572 5 7 2 5 2		
•	Less allowance for de	ibtful accounts ▶	The same and the s	to and the time on a few .	T
			l .		
		officers, directors, trustees, and other			
	disqualified persons (at	tach schedule) (see instructions)			. \
		receivable (attach schedule)		ramania (n. 1921)	
		ıbtful accounts ▶			
8	Inventories for sale or us	se			
9	Prepaid expenses and o	deferred charges			
		te government obligations (attach schedule)			
		e stock (attach schedule)			
		e bonds (attach schedule)			
11	Investments - land, building	s,			
	and equipment basis Less accumulated depreci	ation b	1		ne area mane a comme and a fact
	(attach schedule)		L .		<del> </del>
12	Investments - mortgage	loans			
13 14	Land, buildings, and	ach schedule)	<u> </u>		
1	equipment basis	<b>&gt;</b>			
1	Less accumulated depreci- (attach schedule)				
15	Other assets (describe	<b></b> )			
16	Total assets (to be	completed by all filers - see the			
	instructions. Also, see p	page 1, item l)	0	765.	765
		accrued expenses			
20		ors, trustees, and other disqualified persons			the state is reasonable.
· I		• • •			
		otes payable (attach schedule)			
22	Other liabilities (describ	e ▶)			
				_	
23	Total liabilities (add line	es 17 through 22)	0	<u> </u>	***
		llow SFAS 117, check here . ▶ X			
	and complete lines	24 through 26 and lines 30 and 31.			
24	Unrestricted			765.	
25					
26					
		not follow SFAS 117, ▶			
-	check here and com	pplete lines 27 through 31.			
		cipal, or current funds			
41					
28		or land, bidg, and equipment fund			
29	<del>-</del>	ulated income, endowment, or other funds		765.	
		d balances (see instructions)		/65.	
31		net assets/fund balances (see	_		
	instructions)	<del> </del>	0	765.	
		anges in Net Assets or Fund			
Tota	al net assets or fund	balances at beginning of year - Part	II, column (a), line 30 (	must agree with	
		ed on prior year's return)			
				_	-55
	er incresses not inclu	, line 27a ded in line 2 (itemize) ► ATCH 1		2	820
י טווול					765
	lines 1, 2, and 3				765
	reases not included i			5	
Tota د	al net assets or fund b	palances at end of year (line 4 minus	s line 5) - Part II, column (	(b), line 30   6	765

Page 3

E	art IV Capital Gains	and Losses for Tax on Inv	estment Income			
		describe the kind(s) of property sold		(b) How acquired	(c) Date acquired	(d) Date sold
_	2-story br	rick warehouse, or common stock, 200	shs MLC Co)	P - Purchase D - Donation	acquired (mo , day, yr )	(mo , day, yr )
<u>1a</u>				<u></u>		
_ <u>t</u>		<del></del>	<del></del>			
					_ · - ·	
_ <u>c</u>					·	
_		(f) Depreciation allowed	(g) Cost or other basis		(h) Gain or (lo	ss)
	(e) Gross sales price	(or allowable)	plus expense of sale		(e) plus (f) mini	
_a	1					
_ <u>t</u>	)					
				<u> </u>		
c					·	· · · · · · · · · · · · · · · · · · ·
		phowing goin in column (h) and awar	and but the foundation on 12/21/60			<del></del>
		showing gain in column (h) and owne (j) Adjusted basis	(k) Excess of col (i)		Gains (Col_(h) g (k), but not less t	
	(i) F M V as of 12/31/69	as of 12/31/69	over col (j), if any		Losses (from co	
	· · · · · · · · · · · · · · · · · · ·					-
Ŀ						
_ c						
	<u> </u>					
_6						
2	Capital gain net income or		f gain, also enter in Part I, line 7 } f (loss), enter -0- in Part I, line 7	2		
3	Net short-term capital dain	or (loss) as defined in sections 12		2		· <del>-</del> · · · · · · · · · · · · · · · · · · ·
Ū			tructions) If (loss), enter -0- in $\mathbf{l}$			
	Deat Live 0			3		
E			duced Tax on Net Investment I	ncome		
(F	or optional use by domestic	private foundations subject to the	ne section 4940(a) tax on net investi	ment inco	me)	
lf	section 4940(d)(2) applies,	leave this part blank NO	T AVAILABLE FOR INITIAL	YEAR F	RETURNS	
۱۸/	as the foundation liable for	the costion 4042 toy on the distrib	butable amount of any year in the b	ace perior	<sub>42</sub>	Yes No
		not qualify under section 4940(e)	· · · · · · · · · · · · · · · · · · ·	ase peno	·	_ Yes No
_			r, see the instructions before making	any entri	es	
_	(a)	(b)	(c)	<u> </u>	(d)	
_	Base period years Calendar year (or tax year beginning in)	Adjusted qualifying distributions	Net value of nonchantable-use assets		Distribution ra (col (b) divided by	
	2012					
	2011					
_	2010					
_	2009					-
_	2008			<u> </u>		
2	Total of line 1, column (d)			2		
2	Average distribution ratio	for the 5-year base period - divid	e the total on line 2 by 5, or by the	-		
Ū			s than 5 years	3		
	Trained or your and round				·	
4	Enter the net value of non	charitable-use assets for 2013 fro	om Part X, line 5	4		
5	Multiply line 4 by line 3			5		
	•					
6	Enter 1% of net investmen	nt income (1% of Part I, line 27b) .		6		
7	Add lines 5 and 6			7		
_	Fator 16 or 1 or 1	- Garage Bard VIII I				
8	Enter qualitying distribution	aster than line 7, sheek the how	in Part VI, line 1b, and complete t	hat part	using a 1% to	v rate. See the
_	Part VI instructions	sater than the r, check the box	an rait vi, inte 15, and complete t	mat part	using a 1/0 td.	Tale Gee life

Par	t VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see i	nstru	cuons	<u> </u>		
1 a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1			. z		
	Date of ruling or determination letter (attach copy of letter if necessary - see instructions)	7.4		1 1 1		
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check					
	here ▶ and enter 1% of Part I, line 27b	3 1 E	λ(T	**************************************		
С	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of		<u>1</u>	- TT.		
	Part I, line 12, col (b)					
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 2			Ö		
3						
4						
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0			0		
6	Credits/Payments Credits/Payments	3-57	, ,	2.5		
а	2013 estimated tax payments and 2012 overpayment credited to 2013 6a	-22,	, ,,	34		
b	Exempt foreign organizations - tax withheld at source 6b	,		- ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
С	Tax paid with application for extension of time to file (Form 8868)		1 . 2	¥:		
d	Backup withholding erroneously withheld 6d 6	in Bur	- 41-			
7	Total credits and payments Add lines 6a through 6d					
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			0		
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid					
11	Enter the amount of line 10 to be Credited to 2014 estimated tax ▶ Refunded ▶ 11					
	t VII-A Statements Regarding Activities	т т				
1 a	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		
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for the			v		
	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		~ , <u>.</u> !	:		
	distributed by the foundation in connection with the activities		/\*	X		
	Did the foundation file Form 1120-POL for this year?	1c	<del></del>			
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year		( )	, <del>, ,</del>		
	(1) On the foundation > \$(2) On foundation managers > \$			4 - 2 -		
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on	2.	12,2	~~~,		
	foundation managers > \$	j	- 1	~ î ~ -		
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2				
	If "Yes," attach a detailed description of the activities		, 75			
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation,			х		
	or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3 4a		<u> </u>		
4 a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?			X		
þ	If "Yes," has it filed a tax return on Form 990-T for this year?	4b		X		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5_	. ,			
	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	6		X		
_	with the state law remain in the governing instrument?	7		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			-		
вa	Enter the states to which the foundation reports or with which it is registered (see instructions)					
	Kither and the line 7 has the foundation formated a case of Form 000 PE to the Attendor Congret (or designate)	1		;		
đ	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)	8b		 X		
_	of each state as required by General Instruction G? If "No," attach explanation	100				
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or	1		' ' '		
	4942(j)(5) for calendar year 2013 or the taxable year beginning in 2013 (see instructions for Part XIV)? If "Yes," complete	9		X		
	Part XIV	-3-		<u> </u>		
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and	10				
	addresses	10 Form 9	90-PF	(2013)		
				, /		

c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here

b If "Yes," did it have excess business holdings in 2013 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

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

3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise 

charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2013? Form 990-PF (2013)

2b

Х

Х

Х

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46-0719083 SPRING BROOK COUNTRY CLUB FOUNDATION, INC Form 990-PF (2013) Page 7 Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued) 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 Total number of others receiving over \$50,000 for professional services.  $\blacktriangleright$ 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 Expenses organizations and other beneficianes served, conferences convened, research papers produced, etc. 1 NONE Summary of Program-Related Investments (see instructions) Amount Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 1 NONE

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0

3 NONE

Total. Add lines 1 through 3

All other program-related investments. See instructions

			- age o
Pari	Minimum Investment Return (All domestic foundations must complete this part. Foreigne instructions.)	gn foundations,	<del></del>
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,	= -	<del></del>
	purposes	ra ,	
а	Average monthly fair market value of securities	   1a	
b	Average of monthly cash balances		793.
c	Fair market value of all other assets (see instructions)	1c	
d	Total (add lines 1a, b, and c)	1d	793.
e	Total (add lines 1a, b, and c)  Reduction claimed for blockage or other factors reported on lines 1a and	-7 (*)	
_	1c (attach detailed explanation) 1e 1e	1. 2.	
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	793.
4	Subtract line 2 from line 1d  Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see		
	instructions)	4	12.
5	Instructions)  Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	781.
6	Minimum investment return. Enter 5% of line 5	6	39.
Part	Distributable Amount (see instructions) (Section 4942(J)(3) and (J)(5) private operating found	dations	
	and certain foreign organizations check here ▶ and do not complete this part.)		
1	Minimum investment return from Part X, line 6	1	39.
2 a			<del></del>
b	Income tax for 2013 (This does not include the tax from Part VI) 2b		
С	Add lines 2a and 2b	2c	
3	Add lines 2a and 2b  Distributable amount before adjustments Subtract line 2c from line 1	3	39.
4	Recoveries of amounts treated as qualifying distributions	4	
5		5	39.
6	Add lines 3 and 4  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	39.
		<u> </u>	-···· <u></u>
Pari	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 1	281.
ь	Program related investments, total from Dod IV D	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
	purposes	2	
3	purposes Amounts set aside for specific charitable projects that satisfy the		
а	Suitability test (prior IRS approval required)	3a	
þ	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	281.
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	0
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	281.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when c	alculating whether t	he foundation
	qualifies for the section 4940(e) reduction of tax in those years	-	

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Pa	rt XIII Undistributed Income (see instru	uctions)			
1	Distributable amount for 2013 from Part XI,	(a) Corpus	(b) Years prior to 2012	(c) 2012	<b>(d)</b> 2013
•	line 7				39.
2	Undistributed income, if any, as of the end of 2013				
_	Enter amount for 2012 only			_	
	Total for pnor years 20 11 ,20 10 ,20 09				
3	Excess distributions carryover, if any, to 2013				
a	From 2008			- ,	سرئور ۾ 10 ا
	From 2009				
С	From 2010				
d	From 2011				
е	From 2012	The second to th		- N	
f	Total of lines 3a through e				
4	Qualifying distributions for 2013 from Part XII,				
	line 4: ▶ \$ 281.	20	* ;		
а	Applied to 2012, but not more than line 2a				
b	Applied to undistributed income of prior years	***			
	(Election required - see instructions)	4 1 1 1 4 2 1			
C	Treated as distributions out of corpus (Election required - see instructions)				
d	Applied to 2013 distributable amount	4 ,	- 4		39.
	Remaining amount distributed out of corpus	242.		1 -1-	, · · · · · · · · · · · · · · · · · · ·
5	Excess distributions carryover applied to 2013 .			- · · · · · · · · · · · · · · · · · · ·	
	(If an amount appears in column (d), the same amount must be shown in column (a))	- 4			
6	Enter the net total of each column as	,		ري د س <sup>ا</sup> سيد د	
	indicated below:				
а	Corpus Add lines 3f, 4c, and 4e Subtract line 5	242.		-	<u> </u>
ь	Prior years' undistributed income Subtract				
_	Enter the amount of prior years' undistributed			, -	· · · · · · · · · · · · · · · · · · ·
C	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				
е	amount - see instructions	-	-		
	4a from line 2a Taxable amount - see	- :			
	instructions			<u> </u>	
f	Undistributed income for 2013 Subtract lines	, , ,		-	
	4d and 5 from line 1 This amount must be distributed in 2014	,	,		
7	Amounts treated as distributions out of corpus				- ' ,
•	to satisfy requirements imposed by section				
	170(b)(1)(F) or 4942(g)(3) (see instructions)				, -
8	Excess distributions carryover from 2008 not			-	
	applied on line 5 or line 7 (see instructions)		`		- '
9	Excess distributions carryover to 2014.				
	Subtract lines 7 and 8 from line 6a	242.			- , '_ '
10	Analysis of line 9	1		1	,
а	Excess from 2009			7 .	a' 1
b	Excess from 2010		-		
С	Excess from 2011	-	<u> </u>	2 -	
đ	Excess from 2012	-		_	
<u>e</u>	Excess from 2013 242.	-			<u> </u>

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Pa	rt XIV Private Op	erating Foundations	(see instructions ar	nd Part VII-A, questi	on 9)	NOT APPLICABL	
1 a	If the foundation has				ating		
	foundation, and the ruling	ruling is effective for 2013, enter the date of the ruling					
b	Check box to indicate wh	ether the foundation is a	private operating found	ation described in section	4942(J)	(3) or 4942(J)(5)	
2 a	Enter the lesser of the ad-	Tax year		Prior 3 years		(e) Total	
	justed net income from Part	(a) 2013	(b) 2012	(c) 2011	(d) 2010	(6)	
	I or the minimum investment return from Part X for each						
	year listed						
b	85% of line 2a		<u> </u>				
С	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						
е	Qualifying distributions made directly for active conduct of						
	exempt activities Subtract line						
3	2d from line 2c Complete 3a, b, or c for the						
5	alternative test relied upon						
а	"Assets" alternative test - enter						
	(1) Value of all assets (2) Value of assets qualifying			<del></del>			
	under section		•				
h	4942(j)(3)(B)(i)					<u> </u>	
	enter 2/3 of minimum invest-						
	ment return shown in Part X,						
_	"Support" alternative test - enter						
·	(1) Total support other than						
	gross investment income (interest, dividends, rents,						
	payments on securities						
	toans (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 sup-						
	port from an exempt organization						
	(4) Gross investment income.	ļ					
Pa		ntary Information (		t only if the found	ation had \$5,000	or more in assets	
	<u>-</u>	during the year - s					
1	Information Regarding List any managers of			a than 20/ of the tota	d contributions roce	and by the foundation	
a	before the close of any	tax vear (but only if th	nev have contributed in	nore than \$5,000) (Se	ee section 507(d)(2))	red by the roundation	
	N/A		•	, ,			
b	List any managers of	the foundation who	own 10% or more of	f the stock of a corp	oration (or an equally	/ large portion of the	
	ownership of a partner						
	N/A						
2	Information Regardin	g Contribution, Grant	, Gift, Loan, Scholarsh	ip, etc., Programs:			
	Check here ► X If t	he foundation only	makes contributions	to preselected char	table organizations a	and does not accep	
	unsolicited requests for	or funds If the found	ation makes gifts, gra	ants, etc (see instruct	tions) to individuals o	or organizations unde	
	other conditions, comp						
а	The name, address, a	nd telephone number	or e-mail address of t	he person to whom ap	plications should be ad	dressed	
<b>h</b>	The form in which app	lications should be sul	omitted and information	on and materials they	should include		
	o roini iii willon app		omitted and imprintation	m and materials tries			
С	Any submission deadli	nes				- · · · · · · · · · · · · · · · · · · ·	
لم ا	Any restrictions of the	mitations on aviants	auch on his man	unbigal areas she-4-	blo folds limits of		
u	Any restrictions or li factors	mitations on awards,	such as by geogra	ipnicai areas, chanta	uie neias, kinas of i	nsulutions, or other	

Page 1'

Amount   Recipient   Recipien	Part XV Supplementary Information (	continued)			
Total	3 Grants and Contributions Paid Durin	ng the Year or Appr	oved for F	uture Payment	
Total	Recipient	If recipient is an individual,	Foundation	Purpose of grant or	
Total	Name and address (home or business)	any foundation manager	status of recipient	contribution	Amount
b Approved for future payment	Name and address (home or business)  a Paid during the year	any foundation manager or substantial contributor	recipient	contribution	Amount
		<u> </u>	<u> </u>	<u></u> 3a	
	<b>b</b> Approved for future payment				
	Total			▶ 3b	

Page **12** 

Part XVI	-A Analysis of Income-Produ	icing Activ	vities		-	•
Enter gross	amounts unless otherwise indicated		ated business income	Excluded b	y section 512, 513, or 514	(e) Related or exempt
1 Program	n service revenue	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	function income (See instructions)
a						
b						<del></del>
c						
d						
· · · · · · · · · · · · · · · · · · ·						
f	<del></del>					
_	and contracts from government agencies					
	rship dues and assessments		<u> </u>			
	on savings and temporary cash investments			<del> </del>		
	ds and interest from secunties tal income or (loss) from real estate		Control of the second	,		
						PRESENT TRANSPORT
	t-financed property		<u> </u>		<u> </u>	
	al income or (loss) from personal property		<del>-</del>			<del></del>
	nvestment income					
	(loss) from sales of assets other than inventory		-			
,	ome or (loss) from special events					
	profit or (loss) from sales of inventory.					
	evenue a					
d						
е				-		
12 Subtota	I Add columns (b), (d), and (e)	_ '				
(See works) Part XVI Line No.	dd line 12, columns (b), (d), and (e) heet in line 13 instructions to venfy calc  B Relationship of Activities  Explain below how each activit	ulations) to the Ac	complishment of Ex	cempt Purp	oses	
<b>V</b>	accomplishment of the foundation		-		- TE	
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					<del></del>	
			· · · · · · · · · · · · · · · · · · ·			
			<del>-</del>			<del></del>
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		<u> </u>	·			<u> </u>
				<del>.</del>		
						<del></del>

JSA

## spring brook country club foundation, inc 46-0719083 Page 13 Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations Part XVII

1		e organization direct								Yes	No
		tion 501(c) of the Co	de (other than	section 501(c)(3	3) organizatior	ns) or ir	n section 527, i	elating to politi	cal		3
	_	izations?							1	1	ر زادی
а		fers from the reportin								: `	3
	(1) Ca	ash							1a(1)	<u> </u>	X
	(2) Ot	her assets							1a(2)	<u> </u>	Х
þ		transactions:									
	(1) Sa	ales of assets to a no	ncharitable exe	mpt organization					. <u>  1ь(1)</u>	<u></u>	X
	(2) Pu	irchases of assets fro	om a noncharita	able exempt orga	nization				. 1b(2)	ļ	X
	(3) Re	ental of facilities, equi	pment, or other	assets					1b(3)		X
	(4) Re	eimbursement arrange	ements						1b(4)		X
	(5) Lo	ans or loan guarantee	es						. 1b(5)		X
	(6) Pe	erformance of service	s or memberst	hip or fundraising	solicitations				. 1b(6)		X
		ng of facilities, equipm									X
d		answer to any of th									
		of the goods, other									
	value	in any transaction or	sharing arran	gement, show in	column (d) t	he valu	ue of the goods	, other assets,	or service	s rec	eived
(a) L	ine no	(b) Amount involved	(c) Name of	noncharitable exempt	organization	(d) [	Description of transf	ers, transactions, and	shanng arra	ingeme	nts
		N/A				N/A	Α				
						ļ					
						<u> </u>					
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				<del> </del>		<del>                                     </del>					
20	le the	foundation directly of	or undergothy of	fileted with or	roleted to on		are toy every	t osaanizationa			
24		bed in section 501(c)	•	·			•	•	$\square$	es X	ملا
h		s,"_complete the follow	•	uner man section	1 30 1(0)(3)) 01	III SECI	11011 3217		٠ ـــــا ٠	es [	7 140
	11 163	(a) Name of organization		(b) Type	of organization		1	c) Description of rel	ationship		
				(, ., ),			<u> </u>				
					····		-				
	-						1			-	
	Unde	er penalties of perjuny, I decler ct, and complete Declaration of	re that I have exam	ined this return, includi	ng accompanying s	chedules a	and statements, and t	o the best of my kno	wledge and I	oelief, it	is true,
Sigr	corre	ct, and complete Declaration of	preparement other than t	taxpayer) is based on all i	nformation of which	preparer h	nas any knowledge				
_		11 whey	Me	//. 1	4. 14	) G	-NI COC	, , ,	e IRS discus ie preparer		retum below
Her	e Sig	nature of officer or trustee		Date		Title			ructions)? X		No
					N. 1	$\land$		,			
<b></b> :		Print/Type preparer's nai	me	Preparer's signa	ature	$\neg$	0¢1 3 1 2	Check	if PTIN		
Paic		JAMES J REILL	Y		( ) ( ) (	1	UU 3 1 2	2014 self-employe	d P001	837€	59
ore:	parer	Firm's name ► CO	NDON O'MEA	ARA MCGINTY	& DONNE	Y I	•	Firm's EIN ▶ 13	3-36282	55	
Jse	Only	Firm's address N	E BATTERY	PARK PLAZA	, A)	١					
		NE.	W YORK, N	1Y		<u> </u>	10004-1405	Phone no 212	2-661-7	777	
									Form 99	0-PF	(2013)

ATTACHMENT 1

## FORM 990PF, PART III - OTHER INCREASES IN NET WORTH OR FUND BALANCES

DESCRIPTION AMOUNT

820. BEGINNING CASH BALANCE

> 820. TOTAL

ATTACHMENT 2

NAME AND ADDRESS	TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION	COMPENSATION	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	EXPENSE ACCT AND OTHER ALLOWANCES
KRISTIN HARRINGTON 9 SPRING BROOK ROAD MORRISTOWN, NJ 07960	PRESIDENT 1.00	0	0	0
NOEL EBRAHIM 9 SPRING BROOK ROAD MORRISTOWN, NJ 07960	TREASURER 1.00	0	0	0
JOHN MCEVOY 9 SPRING BROOK ROAD MORRISTOWN, NJ 07960	SECRETARY 1.00	0	0	0
TOM ARNOLD 9 SPRING BROOK ROAD MORRISTOWN, NJ 07960	TRUSTEE 1.00	0	0	0
JAMES BIELLO 9 SPRING BROOK ROAD MORRISTOWN, NJ 07960	TRUSTEE 1.00	0	0	0
WILLIAM MARINO 9 SPRING BROOK ROAD MORRISTOWN, NJ 07960	TRUSTEE 1.00	0	0	0

1 11	•		
ATTACHMENT 2 (CONT'D)	EXPENSE ACCT AND OTHER ALLOWANCES	0	0
ATTACH	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	0	0
	COMPENSATION	0	0
FORM 990PE, PART VIII - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES	TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION	TRUSTEE 1.00	GRAND TOTALS
FORM 990PE, PART VIII - LIST	NAME AND ADDRESS	ANN MARIE 9 SPRING BROOK ROAD MORRISTOWN, NJ 07960	

(Rev January 2014)

Department of the Treasury

# Application for Extension of Time To File an Exempt Organization Return

OMB No. 1545-1709

File a separate application for each return.

Internal Revenue	Service Information about Form 88	68 and its i	nstructions is at www.irs.g	10V/10III18868.						
	filing for an Automatic 3-Month Extension, o						<b>&gt;</b> X			
	filing for an Additional (Not Automatic) 3-Molete Part II unless you have already been gra						60			
	ling (e-file). You can electronically file Form n required to file Form 990-T), or an addition									
	uest an extension of time to file any of the									
Return for	Fransfers Associated With Certain Persona	l Renefit (	Contracte which must	he sent to the IRS	in r	JUTU, Vanor	format (sec			
	. For more details on the electronic filing of the									
	tomatic 3-Month Extension of Time. Or				.,,,,	4 710	ripi onto.			
	n required to file Form 990-T and requesting				nple	te				
Part I only							▶□			
All other cor	porations (including 1120-C filers), partnersh	ips, REMIC	s, and trusts must use F	form 7004 to request an	exte	nsior	of time			
to file income				Enter filer's identifyin	g nu	mber, s	see instructions			
Type or	Name of exempt organization or other filer, see in	structions.	Employer identification nu			mber (EIN) or				
print										
File by the	SPRING BROOK COUNTRY CLUB FOUNDATION, INC 46-0719083					3				
due date for	Number, street, and room or suite no If a P.O. bo	x, see instruc	ctions.	Social security number (SSN)						
filing your return See	9 SPRING BROOK ROAD									
instructions	City, town or post office, state, and ZIP code. For a foreign address, see instructions.									
	MORRISTOWN, NJ 07960	<del></del>								
Enter the Re	eturn code for the return that this application	is for (file a	a separate application for	r each return)	• •		01			
Application		Return	Application	Application			Return			
Is For		Code	ls For				Code			
Form 990 or	Form 990-EZ	01	Form 990-T (corporation)				07			
Form 990-BL	-	02	Form 1041-A				08			
Form 4720 (	(individual)	03	Form 4720 (other than individual)				09			
Form 990-PF		04	Form 5227				10			
Form 990-T	(sec. 401(a) or 408(a) trust)	05	Form 6069				11			
Form 990-T	(trust other than above)	06	Form 8870				12			
	CIN CINCIPAL									
The books	s are in the care of  GUY_CUMMINGS									
Tolonhone	No.									
	e No. ► 973 539-6660		FAX No. ▶							
If this is fall	anization does not have an office or place of	business ir	the United States, chec	CENT DOX						
for the whole	or a Group Return, enter the organization's fo e group, check this box ▶					_	this is			
	e names and EINs of all members the extens		art of the group, check the	nis box▶ [		and a	ttach			
	st an automatic 3-month (6 months for a cor		ocured to file Form 990	-T) extension of time						
	08/15, 20 14, to file the	•	•	•	2014	. The	evtension is			
	organization's return for.	exempt of	gariization return for the	organization named at	JO V (	. 1110	CALCITISION			
	calendar year 20 13 or									
	tax year beginning	. 20	and ending		20					
	, , , , , , , , , , , , , , , , , , , ,	,	, =	'		· – – ·				
2 If the ta	ax year entered in line 1 is for less than 12 m	onths, ched	ck reason. Initial re	eturn Final returi	n					
	hange in accounting period									
	application is for Form 990-BL, 990-PF, 99	90-T, 4720	, or 6069, enter the t	entative tax, less any						
nonrefundable credits. See instructions  b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and							0			
							_			
	ted tax payments made Include any prior yea					\$	0			
	e due. Subtract line 3b from line 3a. Include onic Federal Tax Payment System) See instru		your payment with this form, if required, by using EFTPS				_			
Caution. If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-EO and Form						79-FO	for payment			
instructions.	- 2.2 going to make an electronic funds withdrawa	, (anectaen	к <i>,</i> мит инэ голн оооо, se	o i oill 0400-EO alla FOM	1 00	- <del>5-</del> EU	ю раушент			
	ct and Paperwork Reduction Act Notice, see instr	uctions.			For	n 886	8 (Rev 1-2014)			

Form 8868 (I	Rev 1-2014)				Page 2					
<ul><li>If you a</li></ul>	re filing for an Additional (Not Automatic) 3-M	onth Exten	sion, complete only Part I	I and check this box	<b>&gt;</b> X					
	y complete Part II if you have already been gra									
<ul><li>If you a</li></ul>	re filing for an Automatic 3-Month Extension,									
Part II	Additional (Not Automatic) 3-Month E	xtension c	of Time. Only file the original	ginal (no copies needed).						
		E	Enter filer's identifying number, see instructions							
	Name of exempt organization or other filer, see in		Employer identification number (EIN) or							
Type or										
print	SPRING BROOK COUNTRY CLUB FO	46-0719083								
File by the	Number, street, and room or suite no. If a P O box, see instructions.			Social security number (SSN)	-					
due date for	9 SPRING BROOK ROAD									
filing your return See	City, town or post office, state, and ZIP code. For a foreign address, see instructions.									
instructions	MORRISTOWN, NJ 07960									
Enter the	Return code for the return that this application	is for (file a	a separate application for ea	ach return)	. 01					
Application		Return	Application		Return					
ls For		Code	is For		Code					
Form 990	0 or Form 990-EZ	01			門際聖代斯					
Form 990-BL		02	Form 1041-A		08					
Form 472	20 (individual)	03	Form 4720 (other than individual)		09					
Form 990	)-PF	04	Form 5227		10					
Form 990	0-T (sec. 401(a) or 408(a) trust)	05	Form 6069	- , , ,	11					
Form 990	0-T (trust other than above)	06	Form 8870	12						
STOP! Do	not complete Part II if you were not already	granted ar	n automatic 3-month exter	nsion on a previously filed For	m 8868.					
	oks are in the care of ▶									
	one No ▶ 973 539-6660		Fax No. 🕨							
	rganization does not have an office or place of									
	s for a Group Return, enter the organization's fo				nis is					
	nole group, check this box ▶ 🔃 . I		art of the group, check this	box ▶ and at	tach a					
list with th	e names and EINs of all members the extension	n is for.								
	uest an additional 3-month extension of time u			11/17, 20 14.						
	calendar year $ \underline{2013}$ , or other tax year beginn				, 20					
6 If the	If the tax year entered in line 5 is for less than 12 months, check reason:  Initial return  Final return  Change in accounting period									
7 State	e in detail why you need the extension ALL	THE INFO	RMATION NECESSARY	TO COMPLETE THE						
	URN IS NOT AND WILL NOT BE AVAI									
RES	PECTIVELY REQUEST ADDITIONAL TI	ME TO C	OMPLETE THE RETURN	1.						
			· · · · · · · · · · · · · · · · · · ·							
8a If the	is application is for Forms 990-BL, 990-PF, 9	990-T, 472	0, or 6069, enter the ten	tative tax, less any						
	efundable credits. See instructions			8a \$	0					
b If th	nis application is for Forms 990-PF, 990-T	, 4720, o	r 6069, enter any refur	ii						
estin	nated tax payments made. Include any pr	sted tax payments made. Include any prior year overpayment allowed as a credit and any								
	ount paid previously with Form 8868									
c Bala	ince Due. Subtract line 8b from line 8a Include	your paym	nent with this form, if requi	red, by using EFTPS						
(Electronic Federal Tax Payment System). See instructions.										
	Signature and Verific	ation mu	st be completed for F	Part II only.						
	alties of perjury, I declare that I have examined that and belief, it is true, correct, and complete, and that	this form, in	cluding accompanying scheme	<u> </u>	e best of my					
			•							
Signature >			Title ▶	Date Date						
				Form <b>8868</b>	Rev 1-2014)					