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Department of the Treasury Internal Revenue Service

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

► 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.

OMB No 1545-0052

2013

	endar year 2013, or tax year beginning	, 2013,	and ending		<u>, </u>	
Name of f	oundation BREEN FOUNDATION				yer identification num 1272568	ber
Number a	nd street (or P O box number if mail is not delivered to street a	ddress)	Room/suite		one number (see the ins	
23 P	HEASANT HILL ROAD			(60	9) 921-049	9
-	vn, state or province, country, and ZIP or foreign postal code CETON	NJ	08540	C If exer	nption application is p	ending, check here . 🏲 🔲
	eck all that apply Initial return	Initial Return of a form	er public charity	D 1 Foreig	n or inizations, chec	k here ▶ □
	Final return	Amended return		*	2	لــا
	Address change	Name change		here a	nd a ach computation	ng the 85% test, check
H C		(c)(3) exempt private fou	indation nvate foundation		ite Indation status	لـــا
<u> </u> Fi	Section 4947(a)(1) nonexempt charitable trustair market value of all assets at end of year J Acc	ounting method X C			seq. on 507(b)(1)(A),	
		Other (specify)	aon 🔲 nooraa	F If the f	ou; ation Is in a 60-n	nonth termination —
► \$	108,229. (Part I,	column (d) must be on c	ash basis)		se on 507(b)(1)(B),	
Part	Analysis of Revenue and	(a) Revenue and	(b) Net investmen	nt (c)/	Acusted net	(d) Disbursements
	Expenses (The total of amounts in columns (b), (c), and (d) may not neces-	expenses per books	income		come	for charitable purposes
	sarily equal the amounts in column (a)					(cash basis only)
	(see instructions)) 1 Contributions, gifts, grants, etc, received (att sch)	8,203.	The way of the	2 1 27 W 60 55		ore or legging or sail years
	2 Ck if the foundn is not req to att Sch B		2 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			
	3 Interest on savings and temporary					
	cash investments	4,397.	4,39	27		The state of the s
	5 a Gross rents	4,397.	1,3	7,-		75 7 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5
	b Net rental income or (loss)	Santa Santa	广州游览流	1	多数域的多次	是公司 医原则性病
R	6 a Net gain/(loss) from sale of assets not on line 10	11,424.	L-6a Stmt	野雄 神道	图解图形态。"5	"我们的是一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个
E V	b Gross sales price for all assets on line 6a	State of the state of the				Medical Control of the Second
Ë N	7 Capital gain net income (from Part IV, line 2)		11,42	24.	11,424.	The same of the second
Ŭ	8 Net short-term capital gain		25 to 35 mg. 11"		11,424.	Fr. 19. 2 - 1 C. " 20 12 FT
E	10 a Gross sales less returns and				Section No. 18	
	allowances b Less Cost of	Service Control of the Control of th				
	goods sold · · ·			1201年	· · · · · · · · · · · · · · · · · · ·	
	c Gross profit/(loss) (att sch)		3 3 4 4 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5			the state of the s
	The Strict modifie (diagon constant)			¶		1.5毫加速。 過數學
	12 Total. Add lines 1 through 11	24,024.	15,8	21.	11,424.	\$ 1. 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
	13 Compensation of officers, directors, trustees, etc					
	14 Other employee salaries and wages					
_	15 Pension plans, employee benefits D	- 		- 1		
A D M	b Accounting feet (attach sch). L-16b Stmt.	1,445.	1,4	45.		
ï N	c Other profite (attach sch)	92 1				
0 1	17 Interest. C	2	ļ. 			
O P E R A T	18 Taxes (attach schedgle)(see instrs) EXCISE TAX BASED ON INVEST	58.		58.		STORMEN WARES
A A	19 Depreciation (after DEN, UT sch) and depletion DEN.					はいた。 できていた。
I I N V G E	20 Occupancy					
	21 Travel, conferences, and meetings					
A E N X D P	23 Other expenses (attach schedule)			1		·-· · · · · · · ·
E N				}}		
E N S E	24 Total operating and administrative	1,503.	1,5	n3		
S	expenses. Add lines 13 through 23	18,540.	10000000000000000000000000000000000000	U3.	COLON MARKE	18,540.
	26 Total expenses and disbursements.					
	Add lines 24 and 25 · · · · · · · ·	20,043.	1,5	03.[- T	18,540.
	27 Subtract line 26 from line 12: a Excess of revenue over expenses	<u> </u>		运机等		
	and disbursements	3,981.	THE STATE OF THE S	() () ()		
	b Net investment income (if negative, enter -0-).		14,3	18.	11 424	
RAA F	C Adjusted net Income (if negative, enter -0-) For Paperwork Reduction Act Notice, see in:	ार्टिक्टिक्ट्रिक्	14.14.00.1 在一次表表	TEEA0301	11,424.	Form 990-PF (2013)
		- •				•

Form	990-	PF (2013) THE BREEN FOUNDATION	Degrana of year		of vear
Par	t II	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)	Beginning of year (a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash – non-interest-bearing	12,606.	16,547	. 16,547.
	2	Savings and temporary cash investments			
	3	Accounts receivable ▶			
		Less: allowance for doubtful accounts			
	4	Pledges receivable			
		Less: allowance for doubtful accounts			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions)			
	7		,	11	
A	'	Less: allowance for doubtful accounts	, , , , , , , , , , , , , , , , , , ,		
A S E T	8	Inventories for sale or use			
Ē	9	Prepaid expenses and deferred charges			<u> </u>
T S	10:	a Investments – U.S. and state government			
3	1	obligations (attach schedule)			
	k	investments — corporate stock (attach schedule) . L=10.b. Stmt	70,692.	70,732	91,682.
	(Investments — corporate bonds (attach schedule)			
	11	Investments – land, buildings, and equipment. basis		And the state of t	
		Less accumulated depreciation (attach schedule)			
	12	Investments – mortgage loans			
	13	Investments – other (attach schedule)			
	14	Land, buildings, and equipment: basis	The service of the se		
		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 I)	83,298.	87,279	108,229.
	17	Accounts payable and accrued expenses	03,290.	7-01,21	100,229.
Ţ	18	Grants payable			
A B	19	Deferred revenue			
Ĩ	20	Loans from officers, directors, trustees, & other disqualified persons			
F	21	Mortgages and other notes payable (attach schedule)		· · · · · · · · · · · · · · · · · · ·	- The same of the
Ť	22	Other liabilities (describe			
I E					
<u>s</u>	23	Total liabilities (add lines 17 through 22)			
		Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31.			
N F E U T N	24	Unrestricted			
E U	25	Temporarily restricted			
, D	26	Permanently restricted			
A S S A E T A		Foundations that do not follow SFAS 117, check here . \(\sum_{\text{and complete lines 27 through 31.}} \)			and the second
EL	27	Capital stock, trust principal, or current funds			The state of the state of
T A S N	28	Paid-in or capital surplus, or land, building, and equipment fund			
С	29	Retained earnings, accumulated income, endowment, or other funds	83,298.	87,279	
O E R S	30	Total net assets or fund balances (see instructions)	83,298.	87,27	
	31	Total liabilities and net assets/fund balances			
-	<u> </u>	(see instructions)	83,298.	87,27	<u>ا ، ا</u>
Par		Analysis of Changes in Net Assets or Fund Balanc			
1	end-d	net assets or fund balances at beginning of year — Part II, column of year figure reported on prior year's return)		[_	1 83,298.
2	Enter	r amount from Part I, line 27a			3,981.
3	Other	increases not included in line 2 (itemize)			3
4	Add I	ines 1, 2, and 3			4 87,279.
5		ases not included in line 2 (itemize)			5
6	Total	net assets or fund balances at end of year (line 4 minus line 5) - P	art II, column (b), line 30		6 87,279.

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Part! Capital Gains and	Losses for Tax on Investmen	nt income	(b) How acqu	ired (C)Date acquired	(d) Date sold	
(a) List and describe 2-story brick warehouse	P — Purcha D — Donati	se (month, day, year)				
1a 323 SHS ENTERPRISE	PROD PRTN LP			11/18/13	11/18/13	
b					 _	
с						
d						
	10.0	(a) Cook on other house		(h) Gain o	(1)	
(e) Gross sales price	(e) Gross sales price (f) Depreciation allowed (or allowable) (g) Cost or other basis plus expense of sale					
a 19,627.		8	,203.		11,424.	
<u>b</u>						
					-	
d	 					
Complete only for assets showing	l land owned by the gain in column (h) and owned by the	o foundation on 12/31/69		m. Oaline 10		
(i) Fair Market Value	(j) Adjusted basis	(k) Excess of column (i		(1) Gains (C gain minus column		
as of 12/31/69	as of 12/31/69	over column (j), if any		than -0-) or Losses (from column (h))	
a	 		 -		11,424.	
b						
						
d		·····				
8		-				
2 Capital gain net income or (net	capital loss) If gain, also	enter in Part I, line 7 er -0- in Part I, line 7				
3 Net short-term capital gain or (lo	oss) as defined in sections 1222(5) an	 '		2	11,424.	
If gain, also enter in Part I, line 8	3, column (c) (see instructions). If (loss	s), enter -0-	ļ	3	11,424.	
Part V Qualification Unde	r Section 4940(e) for Reduce	ed Tax on Net Investme	ent Inco	7	11,424.	
Was the foundation liable for the secti If 'Yes,' the foundation does not qualif	y under section 4940(e). Do not comp	lete this part.		Yes	X No	
1 Enter the appropriate amount in	each column for each year; see the ii		entries.			
(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use asse	ts	(d) Distributio (column (b) divided	n ratio by column (c))	
2012	23,100.	74	,241.			
2011	22,937.		,276.		0.311149	
2010	24,053.		, 1		0.311149 0.321805	
2009	21,894.	58	,647.			
2008		49	,647. ,814.		0.321805 0.410132 0.439515	
2 Total of line 1, column (d)	18,672.	49	,647.		0.321805 0.410132	
• •		49 79	,647. ,814. ,655.	2	0.321805 0.410132 0.439515	
3 Average distribution ratio for the number of years the foundation	18,672.	49 79	,647. ,814. ,655.	2 3	0.321805 0.410132 0.439515 0.234411	
	18,672.	49 79	,647. ,814. ,655.		0.321805 0.410132 0.439515 0.234411 1.717012 0.343402	
4 Enter the net value of noncharite	18,672.	49 79 on line 2 by 5, or by the ears	,647. ,814. ,655.	3	0.321805 0.410132 0.439515 0.234411 1.717012 0.343402 100,275.	
4 Enter the net value of noncharita 5 Multiply line 4 by line 3	18,672.	49 79	,647. ,814. ,655.	3	0.321805 0.410132 0.439515 0.234411 1.717012 0.343402 100,275. 34,435.	
4 Enter the net value of noncharita5 Multiply line 4 by line 36 Enter 1% of net investment inco	18,672.	49 79	,647. ,814. ,655.	3 4 5	0.321805 0.410132 0.439515 0.234411 1.717012 0.343402 100,275. 34,435.	
 4 Enter the net value of noncharita 5 Multiply line 4 by line 3 6 Enter 1% of net investment inco 7 Add lines 5 and 6 	18,672.	49 79 on line 2 by 5, or by the ears	,647. ,814. ,655.	3 4 5 6	0.321805 0.410132 0.439515 0.234411 1.717012 0.343402 100,275. 34,435. 143. 34,578.	
4 Enter the net value of noncharita 5 Multiply line 4 by line 3 6 Enter 1% of net investment inco 7 Add lines 5 and 6 8 Enter qualifying distributions from	18,672. 25-year base period — divide the total has been in existence if less than 5 years. able-use assets for 2013 from Part X,	on line 2 by 5, or by the ears	,647. ,814. ,655.	3 4 5 6 7	0.321805 0.410132 0.439515 0.234411 1.717012 0.343402 100,275. 34,435.	

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Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing their names

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Part VII-B Statements Regarding Activiti	es for Which Form	4720 May Be Req	uired (continued)			
5 a During the year did the foundation pay or incur ar		······································				
(1) Carry on propaganda, or otherwise attempt to		ection 4945(e))?	Yes X	No		
(2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive?						
(3) Provide a grant to an individual for travel, stu	dy, or other similar purpo	ses?	Yes X	No ,		
(4) Provide a grant to an organization other than in section 509(a)(1), (2), or (3), or section 494	a chantable, etc, organi: 40(d)(2)? (see instruction	zation described is)	Yes X	No S		
(5) Provide for any purpose other than religious, educational purposes, or for the prevention of	chantable, scientific, lite of cruelty to children or ar	rary, or nimals?	Yes X	No I		
b If any answer is 'Yes' to 5a(1)-(5), did any of the described in Regulations section 53.4945 or in a (see instructions)?	current notice regarding.	disaster assistance		5 b		
Organizations relying on a current notice regardi	ng disaster assistance ch	neck here		1 3 1 1 1 1 1 1		
c If the answer is 'Yes' to question 5a(4), does the tax because it maintained expenditure responsib	foundation claim exempt ility for the grant?	on from the	· · · · Yes	No S		
If 'Yes,' attach the statement required by Regulat	tions section 53.4945-5(d	().				
6 a Did the foundation, during the year, receive any f on a personal benefit contract?			Yes X			
b Did the foundation, during the year, pay premium	s, directly or indirectly, o	n a personal benefit conf	ract?	6b X		
If 'Yes' to 6b, file Form 8870	an a nachi ta a k!k!t	l tay chalter transaction?	Yes X			
7 a At any time during the tax year, was the foundation						
b If 'Yes,' did the foundation receive any proceeds Part VIII Information About Officers, D	irectors Trustees	Foundation Manage	ners Highly Paid F	mplovees		
and Contractors	nectors, musices,	i Odildation Mana	gers, riiginiy r ala z	pioyees,		
1 List all officers, directors, trustees, foundatio	n managers and their o	ompensation (see inst	ructions).			
1 List an oniosis, anostoro, a Lottoro, to anostoro	(b) Title, and average	(c)Compensation	(d)Contributions to	(e) Expense account,		
(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	employee benefit plans and deferred compensation	other allowances		
DOUGLAS BREEN						
23 PHEASANT HILL ROADPRINCETON NJ 08540	PRESIDENT 1.00	0.	0.	0.		
SUSAN BREEN						
23 PHEASANT HILL ROADPRINCETON NJ 08540	VICE PRES.	0.	0.	0.		
		_				
	,					
2 Compensation of five highest-paid employee	s (other than those inc	luded on line 1 – see ii	nstructions). If none, e	nter 'NONE.'		
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d)Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances		
NONE						
		-	 	 		
Total number of other employees paid over \$50,000 .			·	None		
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Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid E and Contractors (continued)	:mployees,
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	
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 beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1 N/A	
	0.
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 N/A	
	0.
2	
All other program-related investments. See instructions.	
3	
Total. Add lines 1 through 3	1,10.10
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Part X | Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations. see instructions.) Fair market value of assets not used (or held for use) directly in carrying out charitable, etc, purposes 1 a 87,285. 1 b 14,517. 1 c 1 d 101,802. e Reduction claimed for blockage or other factors reported on lines 1a and 1c 1 e 2 Acquisition indebtedness applicable to line 1 assets 3 101,802. Subtract line 2 from line 1d Cash deemed held for charitable activities Enter 1-1/2% of line 3 4 1,527. 5 Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V. line 4. 100,275. 6 5,014. Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here and do not complete this part.) Minimum investment return from Part X, line 6 1 5,014. در پريو 2 a 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.)..... 2 c 286. 3 4,728. Distributable amount before adjustments. Subtract line 2c from line 1 4 Recoveries of amounts treated as qualifying distributions . . . 5 4,728. 6 Deduction from distributable amount (see instructions) Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1 7 4,728. 7 Part XII Qualifying Distributions (see instructions) Amounts paid (including administrative expenses) to accomplish charitable, etc. purposes a Expenses, contributions, gifts, etc - total from Part I, column (d), line 26 1 a 18,540. 1 b 0. 2 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc, purposes 3 a 3 b Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4. 4 18,540. Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income 5 n 54<u>0</u>. 6 Adjusted qualifying distributions. Subtract line 5 from line 4 . . 18

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

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

Part XIII Undistributed Income (see instructions)

		(a) Corpus	(b) Years prior to 2012	(c) 2012	(d) 2013
1	Distributable amount for 2013 from Part XI, line 7	,			4.728.
2	Undistributed income, if any, as of the end of 2013		x 2 2	game, og .,	() 为 的 () ()
а	Enter amount for 2012 only	2 3 3 3.00		0.	The same of the same
b	Total for pnor years 20 , 20 , 20			といいない 大学	1 14 m 1 m 1 m 1 m 1 m 1 m 1 m 1 m 1 m 1
3	Excess distributions carryover, if any, to 2013				
а	From 2008 14, 689.				
b	From 2009 19,745.	the second case of	1		100
c	From 2010 21, 315.				
d	From 2011 19, 419.	1. S. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.			, , ,
е	From 2012 19,446.	· · · · · · · · · · · · · · · · · · ·	,		
f	Total of lines 3a through e	94,614.			
4	Qualifying distributions for 2013 from Part			<i>F</i>	
	XII, line 4: \$ 18,540.	, J			
а	Applied to 2012, but not more than line 2a	1			
b	Applied to undistributed income of prior years (Election required – see instructions)			The state of the s	
c	: Treated as distributions out of corpus (Election required — see instructions)				
d	Applied to 2013 distributable amount	Service Market	and the second		,
е	Remaining amount distributed out of corpus	18,540.		- 12 th	, ***
5	Excess distributions carryover applied to 2013		Secretary of the second	in the say that or	
	(If an amount appears in column (d), the same amount must be shown in column (a).)		1.20		
6	Enter the net total of each column as indicated below:			Company of the Company	
а	Corpus Add lines 3f, 4c, and 4e Subtract line 5	113,154.	· · · · · · · · · · · · · · · · · · ·		
b	Prior years' undistributed income. Subtract line 4b from line 2b	Same and the	0.	The Barry of St.	
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				
c	Subtract line 6c from line 6b Taxable amount — see instructions		0.		The state of the s
e	Undistributed income for 2012 Subtract line 4a from line 2a Taxable amount — see instructions	The state of the s		0.	
f	Undistributed income for 2013. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2014		and the second		4,728.
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)	14,689.	-	4	
9	Excess distributions carryover to 2014. Subtract lines 7 and 8 from line 6a	98,465.			
10	Analysis of line 9	P. 1479	第二十二十二十二十二十二十二十二十二十二十二十二十二十二十二十二十二十二十二十	30 30 30	1 -3 2 4 2 4 2
a	Excess from 2009 19,745.	[17] "金额"。	[N. W. W. S.	10000000000000000000000000000000000000	北海軍國人
t	Excess from 2010		""这一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个	经的基础证据	
c	Excess from 2011 19, 419.]严重的发展的扩张		" "行为"总统"等。	16年第二次法
c	Excess from 2012			医生态 的复数	中的特殊。
6	Excess from 2013 18,540.	The state of the s	1. 张江 多。重然	· 原 人们还在一	1 美五二分配的
BAA				_	Form 990-PF (2013)

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	t XIVE Private Operating Foundat					N/A
	If the foundation has received a ruling or dete is effective for 2013, enter the date of the ruli	ng			· · <u>· ·</u> · · · · · •	
	Check box to indicate whether the foundation		ng foundation descri	·	4942(j)(3) or	4942(j)(5)
2 a	Enter the lesser of the adjusted net income from Part I or the minimum	Tax year		Prior 3 years		
	investment return from Part X for each year listed	(a) 2013	(b) 2012	(c) 2011	(d) 2010	(e) Total
t	85% of line 2a					
c	Qualifying distributions from Part XII, line 4 for each year listed					
c	Amounts included in line 2c not used directly for active conduct of exempt activities					
€	Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c					
3	Complete 3a, b, or c for the alternative test relied upon:					
а	'Assets' alternative test - enter					
	(1) Value of all assets					
	(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b	'Endowment' alternative test — enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed					
c	'Support' alternative test - enter:					
	(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					
	(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)					
	(3) Largest amount of support from an exempt organization					
	(4) Gross investment income					
Par	Supplementary Information assets at any time during th	(Complete this	part only if the structions.)	foundation ha	d \$5,000 or more	in
1					· · · · · · · · · · · · · · · · · · ·	
_	List any managers of the foundation who have	e contributed more	than 2% of the total	contributions receive	ed by the foundation b	efore the
	close of any tax year (but only if they have co	ontributed more than	\$5,000). (See Section	on 507(a)(2).}		
— <u>Б</u>	List any managers of the foundation who own	n 10% or more of the	stock of a corporat	ion (or an equally la	rge portion of the own	ership of
	a partnership or other entity) of which the fou NONE	indation has a 10% o	or greater interest.	•		·
2	Information Regarding Contribution, Gran	t, Gift, Loan, Schol	arship, etc, Progra	ms:		
	Check here X if the foundation only marequests for funds If the foundation makes g	ikes contributions to ifts, grants, etc (see	preselected charitations instructions) to individual	ole organizations an viduals or organizati	d does not accept uns ons under other condit	olicited ions,
	complete items 2a, b, c, and d The name, address, and telephone number of	or a mail of the norse	n to whom applicate	one should be addr	accod	
a	the name, address, and telephone number of	or e-mail or the perso	ni to whom applicati	ons should be addit	5356u	
b	The form in which applications should be sub	omitted and informati	on and materials the	ey should include.		
	Any submission deadlines:					
d	Any restrictions or limitations on awards, suc	h as by geographica	l areas, chantable fi	elds, kinds of institu	tions, or other factors	
		, 5 5				

TEEA0310 07/10/13

Form **990-PF** (2013)

BAA

Part Supplementary Information (continued)

3 Grants and Contributions Paid During the	Year or Approved for Fut	ure Paymen	t	
Recipient	If recipient is an individual, show any relationship to any foundation manager or	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)	substantial contributor	L		
a Paid during the year		1		
PRINCETON ART MUSEUM				
WITHERSPOON STREET PRINCETON NJ 085	10	CUNDITINGIE	EXEMPT PURPOSE OF RECEIVING ORGANIZATION	1,000.
PRINCETON NJ 085 PHI GAMMA DELTA FOUNDATION	10	CUWKI I VDPE	EXECUTE FOR OUR DESIGNATION OF THE PROPERTY OF	1,000.
1201 RED MILE ROAD				
LEXINGTON KY 405	14	CHARITABLE	EXEMPT PURPOSE OF RECEIVING ORGANIZATION	500.
BAY HEAD FIRE COMPANY	•	0		333.
PO BOX 111				
BAY HEAD NJ 087	12	CHARITABLE	EXEMPT PURPOSE OF RECEIVING ORGANIZATION	100.
PRINCETON FIRST AID & RESCUE SQU	1	İ		
PO BOX 529			1	
PRINCETON NJ 085	12	CHARITABLE	EXEMPT PURPOSE OF RECEIVING ORGANIZATION	100.
PRINCETON FRIENDS SCHOOL				
470 QUAKER ROAD				
PRINCETON NJ 085	10	CHARITABLE	EXEMPT PURPOSE OF RECEIVING ORGANIZATION	1,000.
PRINCETON HISTORICAL SOCIETY			1	
158 NASSAU STREET				
PRINCETON NJ 085	10	CHARITABLE	EXEMPT PURPOSE OF RECEIVING ORGANIZATION	100.
HOMEFRONT, INC.				
1880 PRINCETON AVE #3				0.70
LAWRENCEVILLE NJ 086		CHARITABLE	EXEMPT PURPOSE OF RECEIVING ORGANIZATION	250.
FRIENDS OF THE PRINCETON PUBLIC LIBR	RY		İ	
PO BOX 422	,,,	CHADIMADIR	PYPHON DUDDOCE OF DECETUING ODCANIGATION	1 000
PRINCETON NJ 085	12	CHAKITABLE	EXEMPT PURPOSE OF RECEIVING ORGANIZATION	1,000.
MARQUAND PARK FOUNDATION 54 TALBOT LANE				
PRINCETON NJ 085	10	CHARITABLE	EXEMPT PURPOSE OF RECEIVING ORGANIZATION	100.
See Line 3a statement		0		100.
500 Emilio da Giatomenia				
			1	14,390.
				·
Total		· · · · · ·	3a	18,540.
b Approved for future payment				
]	
			<u> </u>	
		Ì		
		<u> </u>		
Total			3b	Form 990 PE (2013)

				Activities

Enter	gross amounts unless otherwise indicated.	Unrelate	ed business income	Exclude	by section 512, 513, or 514	4.)
	Program service revenue:	(a) Business code	(b) Amount	(c) Exclu- sion code	(d) Amount	(e) Related or exempt function income (See instructions)
а						
b	-					
С						
d						
e						
f						
	Fees and contracts from government agencies					
	Membership dues and assessments			 		
				 -		
3	Interest on savings and temporary cash investments Dividends and interest from securities			14	1 397	
4					4,397.	
	Net rental income or (loss) from real estate.		4,	1 8 1 W	, , , , , , , , , , , , , , , , , , ,	
	Debt-financed property			+		_
b	Not debt-financed property					
6	Net rental income or (loss) from personal property					
7	Other investment income		<u> </u>			
8	Gain or (loss) from sales of assets other than inventory \dots		<u> </u>	18	11,424.	
9	Net income or (loss) from special events					
10	Gross profit or (loss) from sales of inventory					
11	Other revenue	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Symptotic State of the same			A St. B. Santa
а						
b						
С						
d						
e						
12	Subtotal. Add columns (b), (d), and (e)			4. 5.	15,821.	
13	Total. Add line 12, columns (b), (d), and (e)				13	15,821.
Line	Relationship of Activities to the No. Explain below how each activity for which is accomplishment of the foundation's exemption.	ncome is repor	ted in column (e) of Part	t XVI-A co	ontributed importantly to	the uctions)
	N/A					
						
						
						_
						
						<u> </u>
						
						
						
BAA		TEE	A0502 07/11/13			Form 990-PF (2013)

Part XVII. Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

							أسارة	Yes	No
1 Did th	e organization directly	or indirectly enga	ige in any of the foll	lowing with any	other organization		3	,	
	ibed in section 501(c)		r than section 501(c	c)(3) organizatio	ons) or in section 527,			3,00	`
	ng to political organizat				-4			5.	
	fers from the reporting							<u>````</u>	
(1) C	ash						1 a (1)		_X_
(2) 0	Other assets						1 a (2)		Х
h Other	transactions:						-34	-7	
		obaritable avern	t organization				1 b (1)		~~~
									<u>X</u>
							1 b (2)		<u>X</u>
							1 b (3)		X
(4) R	leimbursement arrange	ements					1 b (4)		Х
							1 b (5)		X
							1 b (6)		X
c Sharir	ng of facilities, equipm	ent, mailing lists, o	other assets, or pai	d employees.			1 c	1	<u>X</u>
						1 16 . 4			
the or	onds other assets or s	services given by	the reporting found	lation. If the fou	mn (b) should always s ndation received less th ods, other assets, or se	nan fair market value	alue of n		
						nsfers, transactions, and s	haring arrang	amonto	
(a) Line no	(b) Amount involved	(c) Name o	f noncharitable exempt	organization	(a) Description of tra	iisieis, iialisaciiolis, aliu s	mailing arrain	jemenis	
							_		
							=		
									
						· · · · · · · · · · · · · · · · · ·			
	ļ <u></u>								
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						····			
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	_								
					· · · · · · · · · · · · · · · · · · ·				
2 a Is the	foundation directly or	indirectly affiliated	d with, or related to,	one or more ta	ax-exempt organization	S	. TYes	□	Ma
			r than section 501(c)(3)) or in sect	ion 527?		· Lites	X	VO.
b If 'Yes	s,' complete the followi	ng schedule.							
	(a) Name of organizat	tion	(b) Type of	f organization	(c) Description of relat	ionship		
	<u> </u>								
					*				
									
	·············								
Und	er pertalties of periury. I decla	re that I have examine	d this return, including acc	companying schedul	es and statements, and to the	best of my knowledge and b	elief, it is true,		
corn	rect, and complete Declaration	or preparer (Ather tha	n taxpayer) is based on a	Il information of which	es and statements, and to the h preparer has any knowledge				
Sign	` 1 N. (Z . /\/\a .		1 - 14		1	May the I		ss
Here	// k ///h ke)	$\langle \Lambda N I N L \rangle$	/ -1.4	6-9-14	Ø 501.	D. A-	preparer :	shown be	
	1110004	WWW	< breeze	<u> </u>		OCC V	_ (see instr		1 1
Si	ignature of officer or trustee			ate	Title	· · · · · · · · · · · · · · · · · · ·		Yes	No
(Print/Type preparer n	ame	Preparer's sign	nature	Date	Check If	PTIN		
Paid	JOSEPH B. S	SCHRUM, CPA		1/) 1/L	_ 5.21.	self-employed	P00129	725	
		DRUCKER MA		N PC		Firm's EIN 22-3	077628		
Preparer	_ l			<u>.,</u>			5,,520		
Use Only	Firm's address		GHWAY ONE					- 0 0 0	
		NORTH BRUN	ISWICK	,	IJ 08902-4309	Phone no (732			
BAA							Form 990)-PF (2	013)

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

Schedule of Contributors

Employer Identification number

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

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

THE BREEN FOUNDATION	52-1272568
Organization type (check one):	
Filers of:	Section:
Form 990 or 990-EZ	501(c)() (enter number) organization
	4947(a)(1) nonexempt chantable trust not treated as a private foundation
	527 political organization
	Company of Sanyana and Company of the Company of th
Form 990-PF	X 501(c)(3) exempt private foundation
	4947(a)(1) nonexempt chantable trust treated as a private foundation
	501(c)(3) taxable private foundation
	Go T(o)(o) taxable private learnasies
Check if your organization is covered by the	e General Rule or a Special Rule
Note. Only a section 501(c)(7), (8), or (10)	organization can check boxes for both the General Rule and a Special Rule. See instructions
General Rule [X] For an organization filing Form 990, 99 contributor. (Complete Parts I and II.)	00-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one
Special Rules	
509(a)(1) and 170(b)(1)(A)(vi) and rec	ing Form 990 or 990-EZ that met the 33-1/3% support test of the regulations under sections event from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.
For a section 501(c)(7), (8), or (10) org total contributions of more than \$1,000 the prevention of cruelty to children or	panization filing Form 990 or 990-EZ that received from any one contributor, during the year, if for use <i>exclusively</i> for religious, charitable, scientific, literary, or educational purposes, or animals. Complete Parts I, II, and III.
if this box is checked, enter here the to purpose. Do not complete any of the p	panization filing Form 990 or 990-EZ that received from any one contributor, during the year, igious, charitable, etc, purposes, but these contributions did not total to more than \$1,000. Ital contributions that were received during the year for an exclusively religious, charitable, etc, arts unless the General Rule applies to this organization because it received nonexclusively of \$5,000 or more during the year
990-PF) but it must answer 'No' on Part IV	ed by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or /, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Form 990-PF, it the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).
BAA For Paperwork Reduction Act Not or 990-PF.	tice, see the Instructions for Form 990, 990EZ, Schedule B (Form 990, 990-EZ, or 990-PF) (2013)

	B (Form 990, 990-EZ, or 990-PF) (2013)	Page	1 of 1 of Part
Name of org	panization REEN FOUNDATION		identification number
	Contributors (see instructions). Use duplicate copies of Part I if additional space	e is needed.	
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	DOUGLAS BREEN 23 PHEASANT HILL ROAD PRINCETON NJ 08540	\$ <u>8,203.</u>	Person Payroll Noncash X (Complete Part II for noncash contributions)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		- - - -	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		- \$=	Person Payroll Complete Part II for noncash contributions)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		- \$=	Person Payroll Complete Part II for noncash contributions)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		- - - \$	Person Payroll Noncash (Complete Part II for noncash contributions)
RAA	TEEA0702 12/27/13	Schedule B (Form 99	0. 990-EZ or 990-PF) (2013)

1 of Part 1

1 to 1 of Part II

Name of organization

THE BREEN FOUNDATION

52-1272568

Employer identification number

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	323 SHARES ENTERPRISE PROD PRTN LP	\$19,735.	11/18/13
(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	
BAA	Sche	l dule B (Form 990, 990-EZ,	or 990-PF) (2013)

Form 990-PF Part I, Line 6a

Net Gain or Loss From Sale of Assets

2013

Name		Employer Identification Number
THE BREEN FOUNDATION		52-1272568
Asset Information:		
Description of Property: 323	SHS ENTERPRISE PROD PRTN LP	
	How Acquired Donated	
Date Sold 11/18/13	Name of Buyer:	
	Cost or other basis (do not reduce by depreciation) 8, 2	03.
Sales Expense	Valuation Method: Cost	
Total Gain (Loss):	24. Accumulation Depreciation:	
Description of Property:	· — — — — — — — — — — — — — — — — — — —	
Date Acquired:	How Acquired	
Date Sold:	Name of Buyer	
Sales Price:	Cost or other basis (do not reduce by depreciation)	
Sales Expense: .	Valuation Method:	
Total Gain (Loss).	Accumulation Depreciation:	
Description of Property		
Date Acquired:	How Acquired:	
Date Sold:	Name of Buyer:	
Calas Price:	Cost or other basis (do not reduce by depreciation)	
Sales Expense	Valuation Method:	
Total Gain (Loss):	Valuation Method Accumulation Depreciation:	-
Description of Property.		
Date Acquired:	How Acquired	
Date Sold	How Acquired Name of Buyer:	
Sales Price:	Cost or other basis (do not reduce by depreciation)	
Sales Expense:	Valuation Method:	
Total Gain (Loss)	Valuation Method:	
Description of Property:		
Date Acquired: .	How Acquired	
Date Sold	How Acquired Name of Buyer:	
Sales Price:	Cost or other basis (do not reduce by depreciation)	
Sales Expense:	Valuation Method:	
Total Gain (Loss)	Valuation Method Accumulation Depreciation:	
Description of Property		
Date Acquired:	How Acquired	
Date Sold	Name of Buyer:	
Sales Price:	Cost or other basis (do not reduce by depreciation)	
Sales Expense	Valuation Method:	
Total Gain (Loss):	Accumulation Depreciation:	
Description of Property:		
Date Acquired: .	How Acquired	
Date Sold:	Name of Buyer:	
Sales Price:	Cost or other basis (do not reduce by depreciation)	
Sales Expense:	Valuation Method:	
Total Gain (Loss):	Accumulation Depreciation:	
Description of Property		
Date Acquired: .	How Acquired	
Date Sold	Name of Buyer:	
Sales Price	Cost or other basis (do not reduce by depreciation)	
Sales Expense: .	Valuation Method	
Total Gain (Loss):	Accumulation Depreciation	

Form 990-PF, Page 11, Part XV, line 3a Line 3a statement

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Person or Business Checkbox Amount
a Paid during the year MCCARTER THEATRE 91 UNIVERSITY PLACE PRINCETON NJ 08540		CHARITABLE	EXEMPT PURPOSE OF RECEIVING ORGANIZATI	Person or Business X
PRINCETON MEDICAL CENTER 253 WITHERSPOON STREET PRINCETON NJ 08540		 CHARITABLE	EXEMPT PURPOSE OF RECEIVING ORGANIZATI	Person or Business X
FRIENDS OF MORVEN 55 STOCKTON STREET PRINCETON NJ 08540		CHARITABLE	EXEMPT PURPOSE OF RECEIVING ORGANIZAT.	Person or Business X
OCEAN COUNTY COLLEGE PO BOX 2001 TOMS RIVER NJ 08753			EXEMPT PURPOSE OF RECEIVING ORGANIZAT	Person or Business X
PHILADELPHIA MUSEUM OF ART PO BOX 7647 PHILADELPHIA PA 19101			EXEMPT PURPOSE OF RECEIVING ORGANIZAT	Person or Business X
ROCKINGHAM FOUNDATION PO BOX 496 KINGSTON NJ 08528			EXEMPT PURPOSE OF RECEIVING ORGANIZAT	Person or Business X
PRINCETON SMALL ANIMAL RESCUE 900 HERRONTOWN ROAD PRINCETON NJ 08540		CHARITABLE	EXEMPT PURPOSE OF RECEIVING ORGANIZAT	Person or Business X
SAVE BARNEGAT BAY 906B ROUTE 35 NORTH LAVALLETTE NJ 08735		CHARITABLE	EXEMPT PURPOSE OF RECEIVING ORGANIZAT	Person or Business X
ELIZABETH SCHRUM COOK SCHOLARSHIP FUND 168 JFK BOULEVARD				Person or Business X
SOURLANDS PLANNING COUNCIL PO BOX 72		CHARITABLE		Person or Business X
HOPEWELL NJ 08525 STONY BROOK/MILLSTONE WATERSHED 31 TITUS MILL ROAD		CHARITABLE	EXEMPT PURPOSE OF RECEIVING ORGANIZAT	Person or Business X
PENNINGTON NJ 08534 MERCER COUNTY WILDLIFE CENTER, INC. COLLEGE DRIVE PO BOX 2001		CHARITABLE	EXEMPT PURPOSE OF RECEIVING ORGANIZAT	Person or Business X
TOMS RIVER NJ 08754 WWFM PUBLIC RADIO PO BOX B		CHARITABLE	EXEMPT PURPOSE OF RECEIVING ORGANIZAT	Person or Business X
TRENTON NJ 08690 PRINCETON YMCA		CHARITABLE	EXEMPT PURPOSE OF RECEIVING ORGANIZAT	Person or
PAUL ROBESON PLACE PRINCETON NJ 08540		CHARITABLE	EXEMPT PURPOSE OF RECZIVING ORGANIZAT	Business X 200.

Form 990-PF, Page 11, Part XV, line 3a Line 3a statement

Continued

any foundation cipient manager or substantial contributor	nanager or substantial
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Total

14,390.

Form 990-PF, Page 1, Part I Line 16b - Accounting Fees

Name of Provider	Type of Service Provided	Amount Paid Per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
DRUCKER MATH & WHITMAN PC	ACCOUNTING AND TAX PREPARATION	1,445.	1,445.		

Total

1,445. 1,445.

Form 990-PF, Page 2, Part II, Line 10b

L-10b Stmt

	End of Year				
Line 10b - Investments - Corporate Stock:	Book Value	Fair Market Value			
EAGLE ROCK ENERGY PARTNERS	16,942.	11,900.			
LOOMIS SAYLES STRATEGIC INCOME	10,475.	16,512.			
MAGELLAN MIDSTREAM PARTNERS LP	43,315.	63,270.			
Total	70,732.	91,682.			

(Rev January 2014)

Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return.

OMB No. 1545-1709

Department of the Internal Revenue	e Treasury Service	►information about Form 886	88 and its ir	structions is at www.irs.gov/form	8868.				
		utomatic 3-Month Extension, comp	lete only Pa	art I and check this box					• X
If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this form).									
Do not complete Part II unless you have already been granted an automatic 3-month extention on a previously filed Form 8868.									
Electronic fill corporation in request an ex-	ling (e-file). You equired to file F extension of time with Certain Pe	ou can electronically file Form 8868 if form 990-T), or an additional (not auto to file any of the forms listed in Part resonal Benefit Contracts, which must visit www.lrs.gov/efile and click on e-	you need a omatic) 3-m I or Part II w be sent to the	3-month automatic extension of time onth extension of time. You can election of the exception of Form 8870, Infone IRS in paper format (see instructions)	e to file (ctronical) rmation	(6 moi ly file l Retur	nths for Form & In for T	3868 to Fransfer	'S 0
		3-Month Extension of Time.							
A corporation	required to file	Form 990-T and requesting an auto	matic 6-mor	ith extension — check this box and o	complete	Part	I only	• • • •	• • • □
All other corp income tax re		ding 1120-C filers), partnerships, REM	MICs, and to	usts must use Form 7004 to request Enter filer's					estructions
	Name of exempt	organization or other filer, see instructions.				Employ	er identif	ication nui	mber (EIN) or
Type or print THE BREEN FOUNDATION					52-1272568 Social security number (SSN)				
File by the due date for	Number, street, a	nd room or suite number. If a P.O. box, see instru	ctions.		1	Social E	ecunty n	iumber (SS	SN)
filing your		ANT HILL ROAD office, state, and ZIP code. For a foreign address	and both setuc						
retum, See instructions.			, see marucuci	15.	1		_		
	PRINCETO	N			-}	N	<u>J</u>	08540)
Enter the Ret	turn code for th	e return that this application is for (file	a separate	application for each return)	1		• • •	· · · ·	. 04
Application Is For			Return Code	Application Is For	١			_	Return Code
Form 990 or I	Form 990-EZ		01	Form 990-T (corporation)					07
Form 990-BL			02	Form 1041-A	<u> </u>				08
Form 4720 (ir	ndividual)		03	Form 4720 (other than individual)	<u> </u>				09
Form 990-PF			04	Form 5227					10
		or 408(a) trust)	05	Form 6069					11
Form 990-T (1	trust other than	above)	06	Form 8870					12
Telephone If the orga	anization does	0) 921-0499 not have an office or place of busines		ited States, check this box ;			• • •	• • • •	▶ []
	•	urn, enter the organization's four digit	•	· · ·				whole gr	
		. If it is for part of the group, chec	CK this dox.	and attach a list with the	e name:	s and	EINS 0	न all mer	mbers
the extens		3-month (6 months for a corporation	required to	file Form 990-T) extension of time					
until A The ext ➤ X ➤ I 2 If the ta:	ension is for the calendar year tax year begin	, 20 <u>14</u> , to file the exempt organi e organization's return for: 20 <u>13</u> or ning, 20 in line 1 is for less than 12 months, c	zation return	n for the organization named above.	_	al retu	m		
3 a If this ap	oplication is for ndable credits.	Forms 990-BL, 990-PF, 990-T, 4720 See instructions), or 6069, e	enter the tentative tax, less any		3 a	\$		0.
b If this ap tax payr	oplication is for ments made. Ir	Forms 990-PF, 990-T, 4720, or 606 clude any prior year overpayment al	9, enter any lowed as a	refundable credits and estime ad credit	<u></u>	3 ь	\$		0.
EFTPS	(Electronic Fed	t line 3b from line 3a. Include your pa deral Tax Payment System). See inst	tructions	<u></u>		3 с			0.
Caution. If yo payment instru	u are going to uctions.	make an electronic funds withdrawal	(direct debi	t) with this Form 8868, see Form 84	153-EO a	and F	orm 88	79-EO fo	or