

See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



Form **990-PF**Department of the Treasury

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.

OMB No 1545-0052 **2013**Open to Public Inspection

▶ Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf. For calendar year 2013 or tax year beginning and ending Name of foundation A Employer identification number THE SILVER FAMILY FOUNDATION, INC. 86-1150491 Number and street (or P.O. box number if mail is not delivered to street address) Room/suite B Telephone number (973) 783-8017 105 GROVE STREET City or town, state or province, country, and ZIP or foreign postal code C If exemption application is pending, check here MONTCLAIR, NJ 07042 G Check all that apply: Initial return Initial return of a former public charity D 1. Foreign organizations, check here Final return Amended return 2. Foreign organizations meeting the 85% test check here and attach computation Address change Name change X Section 501(c)(3) exempt private foundation H Check type of organization: E If private foundation status was terminated Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation under section 507(b)(1)(A), check here I Fair market value of all assets at end of year | J Accounting method: X Cash If the foundation is in a 60-month termination Other (specify) (from Part II, col. (c), line 16) under section 507(b)(1)(B), check here 205, 279. (Part I, column (d) must be on cash basis.) ▶\$ (d) Disbursements for charitable purposes (cash basis only) Part | Analysis of Revenue and Expenses (a) Revenue and (b) Net investment (c) Adjusted net (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a)) expenses per books income income 438,527 N/A Contributions, gifts, grants, etc., received 2 Check If the foundation is not required to attach Sch B Interest on savings and temporary cash investments 1,016 1,016 STATEMENT Dividends and interest from securities 5a Gross rents b Net rental income or (loss) 22,419 6a Net gain or (loss) from sale of assets not on line 10 b Gross sales price for all assets on line 6a 51 48 129,281. 22,419 7 Capital gain net income (from Part IV, line 2) O 3 1 8 1 2 1 8 Net short-term capital gain 1751 Income modifications 10a Gross sales less returns and allowances 11 b Less Cost of goods sold c Gross profit or (loss) Ž 38 8.377 8,377 STATEMENT 11 Other income 470,339 31.812 Total. Add lines 1 through 11 0 0. 0 Compensation of officers, directors, trustees, etc 14 Other employee salaries and wages 15 Pension plans, employee benefits Expenses 16a Legal fees **b** Accounting fees 150 150. STMT 3 0. c Other professional fees 17 Interest and Administrative Taxes 19 Depreciation and depletion 20 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications STMT 12 0 12 23 Other expenses 24 Total operating and administrative 162 150 expenses. Add lines 13 through 23 447,634 25 Contributions, gifts, grants paid 26 Total expenses and disbursements. Add lines 24 and 25 447,796 150 447,646. 27 Subtract line 26 from line 12: 22,543 2 Excess of revenue over expenses and disbursements 31,662 b Net investment income (if negative, enter -0-)

C Adjusted net income (if negative, enter -0-)

<u> N/</u>A

Part.II Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only			or year
Part II Balance Cried to column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
1 Cash - non-interest-bearing			
2 Savings and temporary cash investments	75,813.	78,088.	78,088.
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			
7 Other notes and loans receivable			
Less: allowance for doubtful accounts			
Inventories for sale or use Prepaid expenses and deferred charges			
9 Prepaid expenses and deferred charges			
10a Investments - U.S. and state government obligations			
b Investments - corporate stock STMT 6	0.	0.	7,469.
c Investments - corporate bonds STMT 7	0.	35,903.	35,710.
11 Investments - land, buildings, and equipment basis			
Less accumulated depreciation			<u> </u>
12 Investments - mortgage loans			
13 Investments - other STMT 8	93,192.	84,012.	84,012.
14 Land, buildings, and equipment basis ▶	•	•	
Less accumulated depreciation	[• •	i -
15 Other assets (describe ►)	,		
16 Total assets (to be completed by all filers - see the	-		
instructions. Also, see page 1, item 1)	169,005.	198,003.	205,279.
17 Accounts payable and accrued expenses	107,003.	130,003.	203,273.
		-	1
18 Grants payable			1
19 Deferred revenue			
20 Loans from officers, directors, trustees, and other disqualified persons 21 Mortgages and other notes payable			
21 Mortgages and other notes payable			-
22 Other liabilities (describe >)			^
		•	
23 Total liabilities (add lines 17 through 22)	0.	<u> </u>	-
Foundations that follow SFAS 117, check here			
and complete lines 24 through 26 and lines 30 and 31.			Į
24 Unrestricted			*
25 Temporarily restricted 26 Permanently restricted Foundations that do not follow SFAS 117, check here			
26 Permanently restricted			ě,
Foundations that do not follow SFAS 117, check here			
			` ` `
Ö 27 Capital atook truct principal or current funds	0.	0.	
27 Capital stock, trust principal, or current times 28 Paid-in or capital surplus, or land, bldg., and equipment fund 29 Retained earnings, accumulated income, endowment, or other funds	0.	0.]/ \
29 Retained earnings, accumulated income, endowment, or other funds	169,005.	198,003.]
30 Total net assets or fund balances	169,005.	198,003.	
2 00 1000 1000 01 100	200,000		1
31 Total liabilities and net assets/fund balances	169,005.	198,003.	
Part III Analysis of Changes in Net Assets or Fund E	balances		
1 Total net assets or fund balances at beginning of year - Part II, column (a), line	30		
(must agree with end-of-year figure reported on prior year's return)		1	169,005.
2 Enter amount from Part I, line 27a		2	22,543.
3 Other increases not included in line 2 (itemize)	SEE ST.	ATEMENT 5 3	6,455.
4 Add lines 1, 2, and 3	~	4	198,003.
5 Decreases not included in line 2 (itemize)		5	0.
6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, o	olumn (b), line 30	6	198,003.
The state of the s	1-B		Form 990-PF (2013)

THE SILVER FAMILY FOUNDATION, INC.

86-1150491

Page 2

Form 990-PF (2013)

See the Part VI instructions.

_		T20,			Page 4
	rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 -	see ir	ıstru	ctio	ns)
1a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1.				
	Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)				
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here 🕨 🗓 and enter 1%			3	<u> 17.</u>
	of Part I, line 27b				
C	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b).				
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)				0.
3	Add lines 1 and 2			3	<u> 17.</u>
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)				<u>0.</u>
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-			3	<u>17.</u>
6	Credits/Payments:				
а	2013 estimated tax payments and 2012 overpayment credited to 2013 6a 649.				
b	Exempt foreign organizations - tax withheld at source				
C	Tax paid with application for extension of time to file (Form 8868)				
d	Backup withholding erroneously withheld				
7	Total credits and payments. Add lines 6a through 6d			6	49.
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				
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			3	<u>32.</u>
11	Enter the amount of line 10 to be: Credited to 2014 estimated tax				0.
Pa	rt VII-A Statements Regarding Activities				
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in			Yes	No
	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 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				
	distributed by the foundation in connection with the activities.				
C	Did the foundation file Form 1120-POL for this year?	1	10		х
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:	[
	(1) On the foundation. ▶ \$ 0. (2) On foundation managers. ▶ \$ 0.]	1		
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation				
	managers. ► \$ 0.				
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	Ĭ	2		х
	If "Yes," attach a detailed description of the activities.			-	
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or	l			
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	ŀ	3		X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	[4a		X
b	If "Yes," has it filed a tax return on Form 990-T for this year?	'A [4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?		5		X
	If "Yes," attach the statement required by General Instruction T.				
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:				
	By language in the governing instrument, or				
	By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law	- [
	remain in the governing instrument?	- [6	X	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV	[7	X	
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)				
	NJ				
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)				
	of each state as required by General Instruction G? If "No," attach explanation		8b	X	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar	Ī			
	year 2013 or the taxable year beginning in 2013 (see instructions for Part XIV)? If "Yes," complete Part XIV	[9		X
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses	ſ	10		X

orm	990-PF (2013) THE SILVER FAMILY FOUNDATION, INC. 86-1150	<u>491</u>		Page 5
	rt VII-A Statements Regarding Activities (continued)			
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of			
	section 512(b)(13)? If "Yes," attach schedule (see instructions)	11	_	X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges?			
	If "Yes," attach statement (see instructions)	12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	
	Website address ► N/A	• •	0.5 =	
14	The books are in care of \blacktriangleright THE SILVER FAMILY FOUNDATION, INC. Telephone no. \blacktriangleright 973-78			
	Located at ► 105 GROVE STREET, SUITE 5, MONTCLAIR, NJ ZIP+4 ►07	042	<u>-41</u>	37
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here			· L
	and enter the amount of tax-exempt interest received or accrued during the year	<u>N</u>	/A	
16	At any time during calendar year 2013, did the foundation have an interest in or a signature or other authority over a bank,	1	Yes	No
	securities, or other financial account in a foreign country?	16	l	X
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1. If "Yes," enter the name of the foreign			♦ f
	country			
Pa	rt VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1a	During the year did the foundation (either directly or indirectly):		3	!
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			,
	a disqualified person?	,		
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?			;
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?			,
	(5) Transfer any income or assets to a disqualified person (or make any of either available			
	for the benefit or use of a disqualified person)?			
	(6) Agree to pay money or property to a government official? (Exception. Check "No"			
	ıf the foundation agreed to make a grant to or to employ the official for a period after			, ,
	termination of government service, if terminating within 90 days.)			,
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations			,
	section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	1b		
	Organizations relying on a current notice regarding disaster assistance check here			
C	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected	_	_	:
	before the first day of the tax year beginning in 2013?	1c		X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation			
	defined in section 4942(j)(3) or 4942(j)(5)):		1	,
а	At the end of tax year 2013, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning	İ		,
	before 2013? Yes X No			
	If "Yes," list the years \blacktriangleright			٠
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect		,	, ;
	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach			1
	statement - see instructions.) N/A	2b	├	
C	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.		4] .
)		¢ ,	
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time	[* »	
	during the year?		, ,	· . ;
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	1		,
	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 foundation had excess business holdings in 2013.) N/A	3b		<u> </u>
	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		X
t	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?	4b	<u> </u>	X

orm 990-PF (2013) THE SILVER FAMILY FOUNDA		No. 2012 2013	86-11504	91 Page	<u> </u>
Part VII-B Statements Regarding Activities for Which F	orm 4/20 May Be F	Requirea (contin	ued)		_
5a During the year did the foundation pay or incur any amount to:					
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	, ,,		es 🗶 No	i i	
(2) Influence the outcome of any specific public election (see section 4955); o	r to carry on, directly or indire				
any voter registration drive?			es X No		
(3) Provide a grant to an individual for travel, study, or other similar purposes		Ye	es X No		
(4) Provide a grant to an organization other than a charitable, etc., organization	n described in section				
509(a)(1), (2), or (3), or section 4940(d)(2)?			es X No		
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or f				
the prevention of cruelty to children or animals?			es X No		
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und		n Regulations		- [-]	
section 53.4945 or in a current notice regarding disaster assistance (see instru	•		N/A	5b	_
Organizations relying on a current notice regarding disaster assistance check h					
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fr				\$	٠
expenditure responsibility for the grant?		[/A	es L No	3	
If "Yes," attach the statement required by Regulations section 53.4945			į		1
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums on			} * '	,
a personal benefit contract?		Ye	es 🗶 No 🗓	* .l	_
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal benefit contract?		<u></u>	6b X	_
If "Yes" to 6b, file Form 8870.					ļ
7a At any time during the tax year, was the foundation a party to a prohibited tax s		Ye	es X No		_
b If 'Yes,' did the foundation receive any proceeds or have any net income attribu				7b	_
Part VIII Information About Officers, Directors, Truston Paid Employees, and Contractors	ees, Foundation Ma	nagers, Highly	y		
List all officers, directors, trustees, foundation managers and their	compensation.				_
A Nilson and address	(b) Title, and average hours per week devoted	(c) Compensation	(d) Contributions to employee benefit plans and deferred	(e) Expense account, other	,
(a) Name and address	to position	(If not paid, enter -0-)	and deferred compensation	allowances	
ROBERT H. SILVER	PRESIDENT				
145 INWOOD AVENUE					
JPPER MONTCLAIR, NJ 07043	20.00	0.	0.	0.	•
RHONDA A. SILVER	SECRETARY AND	TREASURE	R		
145 INWOOD AVENUE					
JPPER MONTCLAIR, NJ 07043	20.00	0.	0.	0.	•
JUSTIN P. SILVER	VICE PRESIDEN	T			
145 INWOOD AVENUE		İ			
JPPER MONTCLAIR, NJ 07043	20.00	0.	0.	0.	•
		<u> </u>			_
2 Compensation of five highest-paid employees (other than those inc		enter "NONE."	(d) Contributions to		_
(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	r
NONE					_
					_
					_
					_
					_
		1			_
Total number of other employees paid over \$50,000					'n

Part VIII Information About Officers. Directors. Trustees. Foundation	<u>86−1</u> Managers Highly	150491 Page 7
Part VIII Information About Officers, Directors, Trustees, Foundation Paid Employees, and Contractors (continued)	i Managers, riigiliy	
3 Five highest-paid independent contractors for professional services. If none, enter "NC	NE."	
(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 Part IX-A Summary of Direct Charitable Activities		▶ 0
	· · · · · · · · · · · · · · · · · · ·	
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical in number of organizations and other beneficiaries served, conferences convened, research papers produced		Expenses
1 N/A		
2		
3		
4		
Port IV P C of D Deleted Investments		
Part IX-B Summary of Program-Related Investments Describe the two largest program-related investments made by the foundation during the tax year on lines	1 and 2	Amount
	I allu Z.	Amount
1 N/A		
2		
All other program-related investments. See instructions.		
3		
		·····
Total. Add lines 1 through 3	. ▶	0.

Form 990-PF (2013) 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: Average monthly fair market value of securities 76,951. 1a Average of monthly cash balances 1b 113,483. Fair market value of all other assets 1c 190,434. 1d Total (add lines 1a, b, and c) e Reduction claimed for blockage or other factors reported on lines 1a and 0 1c (attach detailed explanation) Acquisition indebtedness applicable to line 1 assets 190,434. Subtract line 2 from line 1d 3 3 2.857. Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions) 4 187,577. Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4 5 9,379. Minimum investment return. Enter 5% of line 5 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.) 9,379. Minimum investment return from Part X, line 6 317 Tax on investment income for 2013 from Part VI, line 5 2a Income tax for 2013. (This does not include the tax from Part VI.) 2b 2¢ Add lines 2a and 2b 9,062. 3 Distributable amount before adjustments. Subtract line 2c from line 1 3 Recoveries of amounts treated as qualifying distributions 4 9,062. 5 Add lines 3 and 4 5 Deduction from distributable amount (see instructions) 6 Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1 062 Qualifying Distributions (see instructions) Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes: 447,646. a Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26 1a b Program-related investments - total from Part IX-B 1b Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes 2 Amounts set aside for specific charitable projects that satisfy the: Suitability test (prior IRS approval required) 3a 3Ь Cash distribution test (attach the required schedule) 447,646. Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4 4 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b

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

Form **990-PF** (2013)

6

Adjusted qualifying distributions. Subtract line 5 from line 4

4940(e) reduction of tax in those years.

Form 990-PF (2013)

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,		·	***************************************	0.050
line 7				9,062.
2 Undistributed income, if any, as of the end of 2013			^	
a Enter amount for 2012 only			0.	
b Total for prior years:		0.		: :
3 Excess distributions carryover, if any, to 2013:		U•		
a From 2008 1, 131, 270.			li .	
				1
	v			
d From 2011 379,584. e From 2012 571,362.	, ,			,
	2 122 025			
f Total of lines 3a through e	3,132,025.			, , , ,
4 Qualifying distributions for 2013 from	•			
Part XII, line 4: ►\$ 447,646.			^	, , , ,
a Applied to 2012, but not more than line 2a			0.	<u>'</u>
b Applied to undistributed income of prior	:	0		, ',
years (Election required - see instructions)		0.	THE TO THE THE SHOOT MANAGEMENT AND THE SHOT MANAGEMENT AND THE SHOOT MANAGEMENT AND THE SHOOT MANAGEMENT AND THE SHOT MANAGEMENT AND THE SHOOT MANAGEMENT AND THE SHOOT MA	* · · · · · · · · · · · · · · · · · · ·
c Treated as distributions out of corpus	•			
(Election required - see instructions)	0.			0.000
d Applied to 2013 distributable amount	420 504			9,062.
e Remaining amount distributed out of corpus	438,584.		>	
5 Excess distributions carryover applied to 2013 (If an amount appears in column (d), the same amount must be shown in column (a))	0.		``	0.
6 Enter the net total of each column as indicated below:				, , ,
& Corpus Add lines 3f, 4c, and 4e Subtract line 5	3,570,609.			, , , , , , , , , , , , , , , , , , ,
b Prior years' undistributed income. Subtract	3737070030			
line 4b from line 2b		0.		, , ,
c Enter the amount of prior years'				3
undistributed income for which a notice of deficiency has been issued, or on which				p
the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b. Taxable				, ,
amount - see instructions		0.		÷ }
e Undistributed income for 2012. Subtract line			_	, , ,
4a from line 2a. Taxable amount - see instr.		C	0.	, , ,
f Undistributed income for 2013. Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2014				0.
7 Amounts treated as distributions out of				8 · A
corpus to satisfy requirements imposed by	•			
section 170(b)(1)(F) or 4942(g)(3)	0.			\$\hat{\partial}{\partial}\$
8 Excess distributions carryover from 2008	1 121 050			^ Å, Å
not applied on line 5 or line 7	1,131,270.			4
9 Excess distributions carryover to 2014.	0 420 220			** ;
Subtract lines 7 and 8 from line 6a	2,439,339.			, } ^ {
10 Analysis of line 9:				,
a Excess from 2009 680,713.				3,
b Excess from 2010 369,096.				
c Excess from 2011 379,584.				,
d Excess from 2012 571,362.				
e Excess from 2013 438,584.			L	

Form 990-PF (2013) THE SII	VER FAMILY	FOUNDATION,	INC.	86-11	50491 Page 10
Part XIV Private Operating F	oundations (see in	structions and Part VII	-A, question 9)	N/A	
1 a If the foundation has received a ruling of	or determination letter tha	it it is a private operating			
foundation, and the ruling is effective fo			>		
b Check box to indicate whether the foun	dation is a private operati	ng foundation described i	n section	4942(j)(3) or49	42(j)(5)
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years		
income from Part I or the minimum	(a) 2013	(b) 2012	(c) 2011	(d) 2010	(e) Total
investment return from Part X for					
each year listed					
b 85% of line 2a					
c Qualifying distributions from Part XII,					
line 4 for each year listed					
d Amounts included in line 2c not					
used directly for active conduct of					
exempt activities					
e Qualifying distributions made directly					
for active conduct of exempt activities.					
Subtract line 2d from line 2c Complete 3a, b, or c for the alternative test relied upon: a "Assets" alternative test - enter: (1) Value of all assets					
(2) Value of assets qualifying under section 4942(1)(3)(B)(1)					
b "Endowment" alternative test - enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed					
c "Support" alternative test - enter:					
(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(III)					
(3) Largest amount of support from an exempt organization					
(4) Gross investment income					
Part XV Supplementary Info	ormation (Comple	ete this part only	if the foundatio	n had \$5,000 or mo	ore in assets
at any time during	the year-see inst	ructions.)			
Information Regarding Foundati List any managers of the foundation wigear (but only if they have contributed)	ho have contributed more		ributions received by th	e foundation before the clos	se of any tax
SEE STATEMENT 9 b List any managers of the foundation w			or an equally large por	tion of the ownership of a p	artnership or
other entity) of which the foundation have NONE	as a 10% or greater intere	est.			
2 Information Regarding Contribu	tion Grant Gift Loar	Scholarehin etc. Pr	odrame.		
Check here X if the foundation the foundation makes gifts, grants, etc.	only makes contributions	to preselected charitable	organizations and does		
a The name, address, and telephone nur	nber or e-mail address of	the person to whom appl	cations should be addr	essed:	
b The form in which applications should	be submitted and informa	ation and materials they s	hould include:		
c Any submission deadlines:					
				<u> </u>	
d Any restrictions or limitations on award	is, such as by geographic	cal areas, charitable fields,	kinds of institutions, or	r other factors:	

Part XVI-A

THE SILVER FAMILY FOUNDATION, INC.

Analysis of Income-Producing Activities

nter gross amounts unless otherwise indicated.	Unrelate	ed business income	Exclu	ded by section 512, 513, or 514	/a)
•	(a) Business	(b) Amount	(c) Exclu- sion code	(d) Amount	(e) Related or exempt function income
1 Program service revenue:	code		COGE		
a			-		····
b		•			
<u> </u>			-		<u> </u>
d					
e				·	
			-		-
g Fees and contracts from government agencies			 		
2 Membership dues and assessments					
3 Interest on savings and temporary cash					
Investments			14	1 016	
4 Dividends and interest from securities			14	1,016.	
5 Net rental income or (loss) from real estate:					
a Debt-financed property			 		
b Not debt-financed property					
6 Net rental income or (loss) from personal					
property			<u> </u>		
7 Other investment income		,	14	8,377.	
8 Gain or (loss) from sales of assets other					
than inventory			18	22,419.	 .
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue:				,	
a					
b					
C					
d			ļ		
e					
12 Subtotal. Add columns (b), (d), and (e)		0.		31,812.	0.
13 Total. Add line 12, columns (b), (d), and (e)				13	31,812.
(See worksheet in line 13 instructions to verify calculations.)				·	
Part XVI-B Relationship of Activities to	the Acc	omplishment of Ex	emn	t Purposes	
				<u>-</u>	
Line No. Explain below how each activity for which incore the foundation's exempt purposes (other than the foundation's exempt purposes (other than the foundation's exempt purposes).			contrit	outed importantly to the accom	plishment of
	by providing to	ilius foi sucii purposes).	-		
N/A	•				
	-				
					
	- -				
					
	_				
	· · · · · · · · · · · · · · · · · · ·				······································
		 			
					

		Exempt Organ	izations							
1	Did the org	anization directly or indir	ectly engage in any of	the following	g with any other organizatio	n described in sectio	n 501(c) of		Yes	No
	the Code (d	other than section 501(c))(3) organizations) or ir	n section 52	7, relating to political organi	zations?				
a	-	rom the reporting founda						l		1
	(1) Cash							1a(1)		X
	(2) Other	assets						1a(2)		X
b	Other trans									
	(1) Sales	of assets to a noncharital	ble exempt organizatio	n				16(1)		x
	(2) Purch	ases of assets from a no	ncharitable exempt org	anization				1b(2)		Х
		of facilities, equipment,						1b(3)		Х
	• •	ursement arrangements						1b(4)		х
	• •	or loan guarantees						1b(5)		Х
		mance of services or me	mbership or fundraisin	ng solicitation	ns			1b(6)		Х
C		facilities, equipment, ma	•	-				1c		Х
					dule. Column (b) should alw	vays show the fair m	arket value of the goods, o	her ass	ets,	
		=		_	ed less than fair market valu					
	column (d)	the value of the goods,	other assets, or service	es received.					_	
a)L	on eni.	(b) Amount involved	(c) Name of n	oncharitable	exempt organization	(d) Description	of transfers, transactions, and s	haring ar	rangeme	nts
				N/A						
				_	· · · · · · · · · · · · · · · · · · ·					
					<u></u>					
							•••			
					 -		_			
		· · · · · · · · · · · · · · · · · · ·			·	 				
		·				-				
							118			
							•			
				_						
							· ·			
	-	·			 					
		·								
2a	Is the foun	idation directly or indirec	tly affiliated with, or rel	ated to, one	or more tax-exempt organiz	zations described			•	
	in section	501(c) of the Code (othe	r than section 501(c)(3	3)) or in sect	ion 527?			☐ Yes	X] No
b	If "Yes," co	mplete the following sch	edule.							
	_	(a) Name of org	janization		(b) Type of organization	(c) Description of relationsh	ıp		
	_	N/A								
	_									
		1	Α							
		- 1111-	//							
_	l la dan		the second state of the se	Atum maludus	ig accompanying schedules and	statements, and to the h	nest of my knowledge			
Q:					taxpayer) is based on all inform		May	the IRS	discuss le prepar	this rer
He	ere	<i>(LK)</i>		1/ /		PRESID	shov	vn belov	(see ins	<u>str</u>)?
		ature of officer or trustee		$J \setminus J$	Qate /	Title	ENT	Yes	<u> </u>	⊔ No
_		Print/Type preparer's na		Pregarer's si		Date .	Check If PTIN			
				11 1	1/2		self- employed			
Pá	aid	ROBERT T.	CASSA (ts vat	- Coshal M	8/21/14	· ·	546	524	ı
	eparer	Firm's name ► BLC		3 & C	O., P.C. CPA	'S	Firm's EIN ▶ 13-30			
U	se Only									_
		Firm's address ▶ 45								
		NE NE	W YORK, NY	1012	3	·	Phone no. 212-24	<u> 4 – 2</u>	112	i

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

Department of the Treasury Internal Revenue Service

Schedule of Contributors

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

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

OMB No 1545-0047

2013

Name of the organization

Employer identification number

T	HE SILVER FAMILY FOUNDATION, INC.	86-1150491
Organization type (check	one):	
Filers of:	Section:	
Form 990 or 990-EZ	501(c)() (enter number) organization	
	4947(a)(1) nonexempt charitable trust not treated as a private foundation	
	527 political organization	
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	
Note. Only a section 501(c	is covered by the General Rule or a Special Rule . c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special F	
	on filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in plete Parts I and II.	money or property) from any one
Special Rules		
509(a)(1) and 170	I (c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the re D(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution of the n (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.	-
total contribution	I (c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one consist of more than \$1,000 for use exclusively for religious, chantable, scientific, literary, or efforcely to children or animals. Complete Parts I, II, and III.	
contributions for If this box is chec purpose. Do not (I(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one conuse exclusively for religious, charitable, etc., purposes, but these contributions did not cked, enter here the total contributions that were received during the year for an exclusion complete any of the parts unless the General Rule applies to this organization because ble, etc., contributions of \$5,000 or more during the year	total to more than \$1,000. wely religious, chantable, etc ,
but it must answer "No" o	that is not covered by the General Rule and/or the Special Rules does not file Schedulon Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its et the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).	

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2013)

Name of organization

Employer identification number

THE SILVER FAMILY FOUNDATION, INC.

86-1150491

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional	space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	RHONDA A. SILVER 145 INWOOD AVENUE UPPER MONTCLAIR, NJ 07043	\$150,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	ROBERT H. SILVER 145 INWOOD AVENUE UPPER MONTCLAIR, NJ 07043	\$150,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3	RHONDA A. SILVER 145 INWOOD AVENUE UPPER MONTCLAIR, NJ 07043	\$69,263.	Person Payroll Noncash X (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4	ROBERT H. SILVER 145 INWOOD AVENUE UPPER MONTCLAIR, NJ 07043	\$ <u>69,264.</u>	Person Payroll Noncash X (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)

Name of organization

Employer identification number

THE SILVER FAMILY FOUNDATION, INC.

86-1150491

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
3	1,785 SHARES OF BP PLC		
		\$84,823.	12/24/13
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
4	3,690 SHARES OF CABCO SER 2004-102 TR 3.450%		
		\$82,804.	08/15/13
(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
23453 10-2	A 12	Schedule B (Form	

Name of orga	anization			Employer identification number	_	
THE SI	LVER FAMILY FOUNDATION	, INC.	-4 V-1 V-1	86-1150491		
Part III	year. Complete columns (a) through (e) and the total of exclusively religious, charitable, etc.	ridual contributions to section 50 ne following line entry. For organics contributions of \$1,000 or les	01(c)(7), (8), izations comp is for the year	, or (10) organizations that total more than \$1,000 for the pleting Part III, enter [. (Fater this information page)] \$	8	
	Use duplicate copies of Part III if addition	al space is needed		True una una una una una una una una una una		
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held		
					-	
					-	
		(e) Transfer of	f gift			
-	Transferee's name, address, a	nd ZIP + 4	R	elationship of transferor to transferee	_	
					<u>-</u>	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held		
					-	
					-	
		(e) Transfer o	f gift			
	Transferee's name, address, a	nd ZIP + 4	R	elationship of transferor to transferee	_	
					-	
(a) No. from Part i	(b) Purpose of gift (c) Use of g		gift (d) Description of how gift is held			
Parti					_	
					<u>-</u>	
-	(e) Transfer of gift					
	Transferee's name, address, and ZIP + 4			Relationship of transferor to transferee		
					- -	
(a) Na					_	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held		
					_	
		(e) Transfer o	f gift			
	Transferee's name, address, a	nd ZIP + 4	R	telationship of transferor to transferee		
					_	
					_	

FORM 990-PF	DIVIDENDS	AND INTE	REST	FROM SECU	RITIES	STATEMENT	1
SOURCE	GROSS AMOUNT	CAPITA GAINS DIVIDEN		(A) REVENUE PER BOOKS	(B) NET INVEST MENT INCOM		
UBS FINANCIAL SERVICES	1,016.		0.	1,016	. 1,016	•	
TO PART I, LINE 4 =	1,016.		0.	1,016	1,016	•	
FORM 990-PF		OTHER	INCOM	Œ		STATEMENT	2
DESCRIPTION			REV		(B) NET INVEST- MENT INCOME	(C) ADJUSTEI NET INCOI	
SIGULER GUFF CAPITAL	PARTNERS	_		8,377.	8,377.		
		_		 .			
TOTAL TO FORM 990-PF	, PART I,	LINE 11 =		8,377.	8,377.	3	·· .
FORM 990-PF		LINE 11 =	SSION	=	8,377.	STATEMENT	3
	ОТ		NET	=	(C) ADJUSTED NET INCOME	STATEMENT (D) CHARITA	BLE
FORM 990-PF	ОТ	HER PROFE (A) EXPENSES	NET MEN	(B)	(C) ADJUSTED	STATEMENT (D) CHARITA	BLE
FORM 990-PF DESCRIPTION	OT	HER PROFE (A) EXPENSES PER BOOKS	NET MEN	(B) INVEST-	(C) ADJUSTED	STATEMENT (D) CHARITA	BLE ES
FORM 990-PF DESCRIPTION INVESTMENT FEES	OT	HER PROFE (A) EXPENSES PER BOOKS	NET MEN	(B) INVEST- IT INCOME 150.	(C) ADJUSTED	STATEMENT (D) CHARITA	BLE ES 0.
FORM 990-PF DESCRIPTION INVESTMENT FEES TO FORM 990-PF, PG 1	OT	(A) EXPENSES PER BOOKS 150	NET MEN	(B) INVEST- IT INCOME 150.	(C) ADJUSTED	STATEMENT (D) CHARITAL PURPOSE STATEMENT (D) CHARITAL	BLE ES 0. 0.
FORM 990-PF DESCRIPTION INVESTMENT FEES TO FORM 990-PF, PG 1 FORM 990-PF	OT	HER PROFE (A) EXPENSES PER BOOKS 150 OTHER (A) EXPENSES	NET MEN • • EXPEN	(B) INVEST- IT INCOME 150. 150. ISES	(C) ADJUSTED NET INCOME	STATEMENT (D) CHARITAL PURPOSE STATEMENT (D) CHARITAL PURPOSE	0. 0. 4

FORM 990-PF OTHER INCREASES IN NE	T ASSETS OR FU	ND BALANCES	STATEMENT	5
DESCRIPTION			AMOUNT	
PARTNERSHIP PASS THRU - UNREALIZED	GAINS		6,4	55.
TOTAL TO FORM 990-PF, PART III, LIN	E 3		6,4	55.
FORM 990-PF COR	PORATE STOCK	. 	STATEMENT	6
DESCRIPTION		BOOK VALUE	FAIR MARKET	r
VERIZON COMMUNICATIONS		0.	7,4	59.
TOTAL TO FORM 990-PF, PART II, LINE	10B	0.	7,40	59.
FORM 990-PF COR	PORATE BONDS		STATEMENT	7
DESCRIPTION		BOOK VALUE	FAIR MARKE	r
CABCO SER 2004-102 TR SB 3.450%	•	35,903.	35,7	10.
TOTAL TO FORM 990-PF, PART II, LINE	10C	35,903.	35,7	10.
FORM 990-PF OTHE	R INVESTMENTS		STATEMENT	8
DESCRIPTION	VALUATION METHOD	BOOK VALUE	FAIR MARKE	r
SIGULER GUFF CAPITAL PARTNERS (VLLI 5), LLC	COST	84,012.	84,0	12.
TOTAL TO FORM 990-PF, PART II, LINE	13	84,012.	84,0	12.

FORM 990-PF

PART XV - LINE 1A LIST OF FOUNDATION MANAGERS STATEMENT

9

NAME OF MANAGER

ROBERT H. SILVER RHONDA A. SILVER

JUSTIN P. SILVER

10

FORM 8688

EXPLANATION FOR EXTENSION

STATEMENT

EXPLANATION

AN ATTEMPT TO OBTAIN INFORMATION NECESSARY FOR FILING A RETURN WAS REQUESTED IN A TIMELY FASHION, BUT THE INFORMATION WAS NOT FURNISHED IN SUFFICIENT TIME TO PERMIT THE TIMELY FILING OF THE RETURN, OR THE TAXPAYER PERSONALLY VISITED AN IRS OFFICE FOR THE PURPOSE OF SECURING INFORMATION OR ADVICE AND WAS UNABLE TO MEET WITH AN IRS REPRESENTATIVE

500 00

500 00

1,000.00 2,009 00 2,005 00

Give the Kids Hope Foundation Inc.

Newark Academy Newark Academy

05/10/2013

Check Check Check

1485

05/10/2013

The EMHS Alumni Association

1481 1482 1483

05/03/2013 05/03/2013 05/07/2013

Check Check Check Check

Toni's Kitchen

Avon Walk for Breast Cancer St Baldrick's Foundation

04/23/2013

04/23/2013

The Silver Family Foundation	د '	,			1:39 PM
Charitable Contributions for Tax Return January through December 2013	s for Tax	Return			02/18/2014 Accrual Basis
	Туре	Date	En	Name	Amount
6000 · CHARITABLE OUTLAYS					
6010 · Charitable donations					
	Check	01/09/2013	1463	Licking County Humane Society	250 00
	Check	01/09/2013	1464	Promise Project FCNY	1,000 00
	Check	01/17/2013	1465	SKIP of New York/Julia's Birthday Gift	200 00
	Check	01/28/2013	ą	Special Olympics	200 00
	Check	01/28/2013	P	LLS-E Fundraising	3,600.00
	Check	01/28/2013	pp	BB Congressional Di	360 00
	Check	02/04/2013	1466	Human Needs Food Pantry	200 00
	Check	02/07/2013	1467	Shomrei Emunah Jewish Leaming Center	360 00
	Check	02/08/2013	1468	Toni's Kitchen	200.00
	Check	02/27/2013	1469	Congregation Shomrel Emunah	180 00
	Check	02/28/2013	1471	Toni's Kitchen	200 00
	Check	03/04/2013	1470	Montclair Ambulance Unit	200.00
	Check	03/06/2013	1472	Jazz House Kids	10,000 00
	Check	03/08/2013	1473	Partners for Women & Justice	3,600 00
	Check	03/08/2013	1474	Home Corp	2,000 00
	Check	03/12/2013	1475	Avon Walk for Breast Cancer	200 00
	Check	03/27/2013	g	Comell	350 00
	Check	03/27/2013	pp	American Diabetes	228 00
	Check	04/09/2013	1476	Toni's Kitchen	200.00
	Check	04/17/2013	1477	Museum at Eldndge Street	10,000.00
	Check	04/17/2013	1478	MSKCC	0.00
	Check	04/23/2013	1479	Trustee of Tufts College	1,000 00
	Check	04/23/2013	1480	Trustee of Tufts College	1,000 00
					1

Туре	Date	Num	Name	Amount
Check	05/22/2013	1486	The Valene Fund	50,000 00
Check	05/22/2013	1487	Beth El Synagogue	1,800 00
Check	05/28/2013	용	Visa Debit Card	3,600 00
Check	05/29/2013	1488	MSKCC	25,000 00
Check	05/31/2013	1489	Montclair Celebrates	1,000 00
Check	06/05/2013	1490	Toni's Kitchen	200 00
Check	06/11/2013	1491	Congregation Shomrel Emunah	2,500 00
Check	06/12/2013	1492	Project Graduation	200 00
Check	06/18/2013	1493	Sicha - Continuing the conversation	5,000.00
Check	07/10/2013	1494	Congregation Shomrei Emunah	00.09
Check	07/10/2013	1495	Toni's Kitchen	200.00
Check	07/18/2013	1496	Jazz House Kids	2,500 00
Check	08/09/2013	1497	Congregation Shomrei Emunah	360 00
Check	08/09/2013	1499	Shomrei Torah Chanty Fund	200 00
Check	08/10/2013	용	Bachmann-Strauss Dystonia Parkinson Fdn	1,000.00
Check	08/16/2013	1501	Congregation Shomrei Emunah	1,836 00
Check	08/16/2013	1502	WCMC	1,000 00
Check	08/16/2013	1498	Toni's Kitchen	200.00
Check	08/30/2013	1503	Museum at Eldridge Street	3,600 00
Check	09/05/2013	용	Big Brothers Big Sisters	1,000.00
Check	09/10/2013	1504	Lower East Side Jewish Conservancy	360 00
Check	09/10/2013	1505	Amencan Friends of Alyn Hospital	360 00
Check	09/10/2013	1506	Arts & Sciences Foundation UNC	24,000.00
Check	09/10/2013	1507	Ton's Kitchen	200 00
Check	09/19/2013	1508	Misty Meadows Mitey Riders, Inc.	5,774 00
Check	09/20/2013	1509	Lakeland Charities Scholar Fnd	200 00
Check	09/20/2013	1510	Glen Ridge Educational Foundation	750 00
Check	09/23/2013	1511	Ohr Samayach Institutions	7,200 00
Check	09/23/2013	1512	YMCA	2,000 00
Check	09/30/2013	1513	Toni's Kitchen	200 00
Check	09/30/2013	1515	Congregation Shomrei Emunah	23,775 00
Check	10/04/2013	1516	American Cancer Society	200 00
Check	10/09/2013	1517	The Valene Fund	10,000 00
Check	10/10/2013	1518	East Mecklenburg High School Foundation	20,000 00
Check	10/15/2013	1519	Montclair Fund for Educational Excellence	1,000 00

	Type	Date	En N	Name	Amount	
	Check	10/15/2013		LLS-E Fundraising	250 00	
	Check	11/05/2013	1521	Toni's Kitchen	200 00	
	Check	11/05/2013	1523	Congregation Shomrei Emunah	300 00	
	Check	11/05/2013	1524	Jazz House Kids	35,000.00	
	Check	11/05/2013	1526	Hillside PTA	700 00	
	Check	11/06/2013	8	LLS-E Fundraising	360.00	
	Check	11/07/2013	8	Covenant House	1,000.00	
	Check	11/08/2013	8	Network for Good	250 00	
	Check	11/08/2013	1520	Pals	200 00	
	Check	11/15/2013	8	Donoorschoose	160 42	
	Check	11/15/2013	1528	Hollis Academy	1,000 00	
	Check	11/15/2013	1527	YMCA of Greater New York	100,000 00	
	Check	11/15/2013	8	Network for Good	2,575 00	
	Check	11/27/2013	1529	Museum at Eldridge Street	20,000 00	
	Check	12/02/2013	8	InMotion	360 00	
	Check	12/04/2013	1530	Promise Project FCNY	2,000 00	
	Check	12/04/2013	1531	Toni's Kitchen	200 00	
	Check	12/10/2013	8	Metropoliitan Museum	220 00	
	Check	12/20/2013	1533	Food Pantry Inc	200.00	
	Check	12/20/2013	1534	Fine Arts Department	200 00	
	Check	12/20/2013	1535	Feed the Children	200 00	
	Check	12/20/2013	1536	Operation Smile	200 00	
	Check	12/23/2013	1538	Montclair Shared Housing Assoc.	2,000 00	
	Check	12/23/2013	8	Shomrer Torah Chanty Fund	511 76	
	Check	12/26/2013	1539	East Mecklenburg High School Foundation	20,000 00	
Total 6010 Chantable donations					447,634 18	
otal 6000 CHARITABLE OUTLAYS					447,634.18	
_					447,634.18	

Total 6000

TOTAL

Form 886	68 (Rev. 1-2014)					Page 2
• If you	are filing for an Additional (Not Automatic) 3-Month Ex	tension, d	complete only Part II and check the	s box	_	▶ X
	ly complete Part II if you have already been granted an a				8868.	
	are filing for an Automatic 3-Month Extension, comple					
Part II				nal (no c	opies nee	ded).
					•	see instructions
Time or	Name of exempt organization or other filer, see instru	etions	Litter mer s			n number (EIN) or
Type or	Name of exempt organization of other filer, see institu	ctions.		Employe	identinicatio	ir number (Elia) or
print	MUR CTIVED ENNILY ECINIDAMICS	AT T.N.T.	α		86-11	E0401
File by the due date for	THE SILVER FAMILY FOUNDATION					
filing your return See	Number, street, and room or suite no. If a P.O. box, s 105 GROVE STREET, NO. 5	ee instruc	tions.	Social se	curity numbe	er (SSN)
instructions	City, town or post office, state, and ZIP code For a form MONTCLAIR, NJ 07042	oreign add	fress, see instructions.			
Enter the	Return code for the return that this application is for (file	e a separa	te application for each return)			0 4
Applicat	ion	Return	Application			Return
ls For		Code	Is For			Code
	O or Form 990-EZ	01	,			
Form 990		02	Form 1041-A			08
	20 (individual)	03	Form 4720 (other than individual)			09
Form 990		04	Form 5227			10
	O-T (sec. 401(a) or 408(a) trust)	05	Form 6069			11
	O-T (trust other than above)	06	Form 8870			12
	o not complete Part II if you were not already granted	<u> </u>		danaha fila	d Farm 000	
Telepl If the If this box 4 I re 5 Fo 6 If t	ooks are in the care of ▶ 105 GROVE STRED hone No. ▶ 973-783-8017 organization does not have an office or place of business is for a Group Return, enter the organization's four digit If it is for part of the group, check this box ▶ □ equest an additional 3-month extension of time until 1 or calendar year 2013, or other tax year beginning 1 the tax year entered in line 5 is for less than 12 months, or 12 Change in accounting period 12 the tax year entered in line 5 is for less than 12 months, or 13 change in accounting period 14 change in detail why you need the extension 15 change in 3 chan	s in the Ur Group Exe and atta NOVEM	Fax No ▶ 973-783-70 nited States, check this box	75	r the whole g	roup, check this
b if tax	his application is for Forms 990-BL, 990-PF, 990-T, 4720, nrefundable credits. See instructions his application is for Forms 990-PF, 990-T, 4720, or 6069 apayments made. Include any prior year overpayment all eviously with Form 8868), enter an lowed as a	y refundable credits and estimated a credit and any amount paid	8a 8b	\$	600. 649.
	lance due. Subtract line 8b from line 8a. Include your pa	•	th this form, if required, by using			^
EF	TPS (Electronic Federal Tax Payment System). See instru		at he completed for Dort II	<u>8c</u>	\$	0.
	Signature and Venticat nalties of perjury, I declare that I have examined this form, includ correct, and complete, and that I am authorized to prepare this form.	ling accomp	st be completed for Part II of panying schedules and statements, and t	-	f my knowled	ge and belief,
Signature				Date	•	