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Form **990-PF**

Department of the Treasury  
Internal Revenue Service

Return of Private Foundation

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

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▶ Information about Form 990-PF and its instructions is at [www.irs.gov/form990pf](http://www.irs.gov/form990pf).

OMB No 1545-0052

**2014**

Open to Public Inspection

For calendar year 2014, or tax year beginning 01-01-2014 , and ending 12-31-2014

Name of foundation REGINA GOLDWASSER FOUNDATION		<b>A Employer identification number</b>  13-2926389	
Number and street (or P O box number if mail is not delivered to street address) 1222 AVE M NO A		<b>B Telephone number</b> (see instructions)  (212) 869-5017	
City or town, state or province, country, and ZIP or foreign postal code BROOKLYN, NY 11230		<b>C</b> If exemption application is pending, check here <input type="checkbox"/>	
<b>G</b> Check all that apply <input type="checkbox"/> Initial return <input type="checkbox"/> Initial return of a former public charity <input type="checkbox"/> Final return <input type="checkbox"/> Amended return <input type="checkbox"/> Address change <input type="checkbox"/> Name change		<b>D 1.</b> Foreign organizations, check here <input type="checkbox"/> <b>2.</b> Foreign organizations meeting the 85% test, check here and attach computation <input type="checkbox"/>	
<b>H</b> Check type of organization <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		<b>E</b> If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/>	
<b>I</b> Fair market value of all assets at end of year (from Part II, col. (c), line 16)▶\$ 11,749		<b>F</b> If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/>	
<b>J</b> Accounting method <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____ (Part I, column (d) must be on cash basis.)			

Part I Analysis of Revenue and Expenses <small>(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions) )</small>		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
Revenue	<b>1</b> Contributions, gifts, grants, etc , received (attach schedule) . . . . .	106,500			
	<b>2</b> Check <input type="checkbox"/> if the foundation is <b>not</b> required to attach Sch B . . . . .				
	<b>3</b> Interest on savings and temporary cash investments				
	<b>4</b> Dividends and interest from securities. . . . .	101	101		
	<b>5a</b> Gross rents . . . . .				
	<b>b</b> Net rental income or (loss) _____				
	<b>6a</b> Net gain or (loss) from sale of assets not on line 10				
	<b>b</b> Gross sales price for all assets on line 6a _____				
	<b>7</b> Capital gain net income (from Part IV, line 2) . . . .		0		
	<b>8</b> Net short-term capital gain . . . . .				
	<b>9</b> Income modifications . . . . .				
	<b>10a</b> Gross sales less returns and allowances				
	<b>b</b> Less Cost of goods sold . . . . .				
	<b>c</b> Gross profit or (loss) (attach schedule) . . . . .				
	<b>11</b> Other income (attach schedule) . . . . .				
	<b>12 Total.</b> Add lines 1 through 11 . . . . .	106,601	101		
Operating and Administrative Expenses	<b>13</b> Compensation of officers, directors, trustees, etc	0	0		0
	<b>14</b> Other employee salaries and wages . . . . .				
	<b>15</b> Pension plans, employee benefits . . . . .				
	<b>16a</b> Legal fees (attach schedule) . . . . .				
	<b>b</b> Accounting fees (attach schedule) . . . . .	2,600	0		0
	<b>c</b> Other professional fees (attach schedule) . . . . .				
	<b>17</b> Interest . . . . .				
	<b>18</b> Taxes (attach schedule) (see instructions) . . . .	221	0		0
	<b>19</b> Depreciation (attach schedule) and depletion . . .				
	<b>20</b> Occupancy . . . . .				
	<b>21</b> Travel, conferences, and meetings . . . . .				
	<b>22</b> Printing and publications . . . . .				
	<b>23</b> Other expenses (attach schedule) . . . . .	1,933	0		0
	<b>24 Total operating and administrative expenses.</b>				
	Add lines 13 through 23 . . . . .	4,754	0		0
	<b>25</b> Contributions, gifts, grants paid . . . . .	109,072			109,072
	<b>26 Total expenses and disbursements.</b> Add lines 24 and 25	113,826	0		109,072
	<b>27</b> Subtract line 26 from line 12				
	<b>a Excess of revenue over expenses and disbursements</b>	-7,225			
	<b>b Net investment income</b> (if negative, enter -0-)		101		
	<b>c Adjusted net income</b> (if negative, enter -0-)				

Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions )	Beginning of year	End of year	
			(a) Book Value	(b) Book Value	(c) Fair Market Value
Assets	1	Cash—non-interest-bearing . . . . .	18,974	11,749	11,749
	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	Other notes and loans receivable (attach schedule) ▶ _____ Less allowance for doubtful accounts ▶ _____			
	8	Inventories for sale or use . . . . .			
	9	Prepaid expenses and deferred charges . . . . .			
	10a	Investments—U S and state government obligations (attach schedule)			
	b	Investments—corporate stock (attach schedule) . . . . .			
	c	Investments—corporate bonds (attach schedule). . . . .			
	11	Investments—land, buildings, and equipment basis ▶ _____ Less accumulated depreciation (attach schedule) ▶ _____			
	12	Investments—mortgage loans . . . . .			
	13	Investments—other (attach schedule) . . . . .			
	14	Land, buildings, and equipment basis ▶ _____ Less accumulated depreciation (attach schedule) ▶ _____			
	15	Other assets (describe ▶ _____)			
	16	<b>Total assets</b> (to be completed by all filers—see the instructions Also, see page 1, item I)	18,974	11,749	11,749
Liabilities	17	Accounts payable and accrued expenses . . . . .			
	18	Grants payable . . . . .			
	19	Deferred revenue . . . . .			
	20	Loans from officers, directors, trustees, and other disqualified persons			
	21	Mortgages and other notes payable (attach schedule) . . . . .			
	22	Other liabilities (describe ▶ _____)			
	23	<b>Total liabilities</b> (add lines 17 through 22) . . . . .	0	0	
Net Assets or Fund Balances	<b>Foundations that follow SFAS 117, check here</b> ▶ <input type="checkbox"/> <b>and complete lines 24 through 26 and lines 30 and 31.</b>				
	24	Unrestricted . . . . .			
	25	Temporarily restricted . . . . .			
	26	Permanently restricted . . . . .			
	<b>Foundations that do not follow SFAS 117, check here</b> ▶ <input checked="" type="checkbox"/> <b>and complete lines 27 through 31.</b>				
	27	Capital stock, trust principal, or current funds . . . . .	0	0	
	28	Paid-in or capital surplus, or land, bldg , and equipment fund	0	0	
	29	Retained earnings, accumulated income, endowment, or other funds	18,974	11,749	
	30	<b>Total net assets or fund balances</b> (see instructions) . . . . .	18,974	11,749	
	31	<b>Total liabilities and net assets/fund balances</b> (see instructions) . . .	18,974	11,749	

Part III Analysis of Changes in Net Assets or Fund 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 18,974
2	Enter amount from Part I, line 27a . . . . .	2 -7,225
3	Other increases not included in line 2 (itemize) ▶ _____	3 0
4	Add lines 1, 2, and 3 . . . . .	4 11,749
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, column (b), line 30 .	6 11,749

Part IV

Capital Gains and Losses for Tax on Investment Income

(a) List and describe the kind(s) of property sold (e g , real estate, 2-story brick warehouse, or common stock, 200 shs MLC Co )		(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr )	(d) Date sold (mo , day, yr )
1a				
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)	
a				
b				
c				
d				
e				
Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(i) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))	
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any		
a				
b				
c				
d				
e				
2	Capital gain net income or (net capital loss) { If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 }		2	
3	Net short-term capital gain or (loss) as defined in sections 1222(5) and (6)  If gain, also enter in Part I, line 8, column (c) (see instructions) If (loss), enter -0- in Part I, line 8 . . . . . }		3	

Part V

Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income )

If section 4940(d)(2) applies, leave this part blank

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? ☐ Yes ☒ No

If "Yes," the foundation does not qualify under section 4940(e) Do not complete this part

1 Enter the appropriate amount in each column for each year, see instructions before making any entries

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col (b) divided by col (c))	
2013	100,641	35,254	2 854740	
2012	55,153	24,104	2 288126	
2011	79,693	42,807	1 861682	
2010	94,131	192,759	0 488335	
2009	118,715	213,554	0 555902	
2	Total of line 1, column (d). . . . .		2	8 048785
3	Average distribution ratio for the 5-year base period—divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years . . . .		3	1 609757
4	Enter the net value of noncharitable-use assets for 2014 from Part X, line 5. . . . .		4	779
5	Multiply line 4 by line 3. . . . .		5	1,254
6	Enter 1% of net investment income (1% of Part I, line 27b). . . . .		6	1
7	Add lines 5 and 6. . . . .		7	1,255
8	Enter qualifying distributions from Part XII, line 4. . . . .		8	109,072
If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate See the Part VI instructions				

Part VIExcise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see page 18 of the instructions)

1a		Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> 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 <input checked="" type="checkbox"/> and enter 1% of Part I, line 27b . . . . .		1	1
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-)		2	0
3		Add lines 1 and 2. . . . .		3	1
4		Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)		4	0
5		Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0- . . . . .		5	1
6		Credits/Payments			
a		2014 estimated tax payments and 2013 overpayment credited to 2014	6a		
b		Exempt foreign organizations—tax withheld at source . . . . .	6b		
c		Tax paid with application for extension of time to file (Form 8868) . . . . .	6c		
d		Backup withholding erroneously withheld . . . . .	6d		
7		Total credits and payments. Add lines 6a through 6d. . . . .		7	0
8		Enter any penalty for underpayment of estimated tax. Check here <input type="checkbox"/> 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 . . . . .		9	1
10		Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid. . . . .		10	
11		Enter the amount of line 10 to be Credited to 2015 estimated tax Refunded		11	

Part VII-AStatements 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 any political campaign? . . . . .		1a	Yes	No
b		Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for definition)? . . . . . 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.		1b		No
c		Did the foundation file Form 1120-POL for this year? . . . . .		1c		No
d		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				
e		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? . . . . . If "Yes," attach a detailed description of the activities.		2		No
3		Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes . . . . .		3		No
4a		Did the foundation have unrelated business gross income of \$1,000 or more during the year? . . . . .		4a		No
b		If "Yes," has it filed a tax return on Form 990-T for this year? . . . . .		4b		
5		Was there a liquidation, termination, dissolution, or substantial contraction during the year? . . . . . If "Yes," attach the statement required by General Instruction T.		5		No
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		No
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	Yes	
8a		Enter the states to which the foundation reports or with which it is registered (see instructions) NY				
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	Yes	
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 year 2014 or the taxable year beginning in 2014 (see instructions for Part XIV)? If "Yes," complete Part XIV . . . . .		9		No
10		Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses. . . . .		10		No

Part 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		No
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		No
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Yes	
Website address N/A				
14	The books are in care of THE FOUNDATION Telephone no (212) 869-5015 Located at 1222 AVE M NO A BROOKLYN NY ZIP+4 11230			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 —Check here and enter the amount of tax-exempt interest received or accrued during the year.	15		
16	At any time during calendar year 2014, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country?	16	Yes	No
See instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) If "Yes", enter the name of the foreign country				

Part 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) (1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes No (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?. Yes No (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes No (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes No (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)?. Yes No (6) Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days ). Yes No			
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)? Organizations relying on a current notice regarding disaster assistance check here.	1b		
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 2014?.	1c		No
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))			
a	At the end of tax year 2014, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2014?. If "Yes," list the years 20 , 20 , 20 , 20			
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement—see instructions ).	2b		
c	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here 20 , 20 , 20 , 20			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?. Yes No			
b	If "Yes," did it have excess business holdings in 2014 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2014.).	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		No
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2014?	4b		No

Part VII-B

Statements Regarding Activities for Which Form 4720 May Be Required (continued)

5a	During the year did the foundation pay or incur any amount to			
	(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
	(2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
	(3) Provide a grant to an individual for travel, study, or other similar purposes?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
	(4) Provide a grant to an organization other than a charitable, etc , organization described in section 4945(d)(4)(A)? (see instructions).	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
	(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
b	If any answer is "Yes" to 5a(1)–(5), did <b>any</b> of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)?		5b	
	Organizations relying on a current notice regarding disaster assistance check here.	<input checked="" type="checkbox"/>		
c	If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
	If "Yes," attach the statement required by Regulations section 53.4945–5(d).			
6a	Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
b	Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		6b	No
	If "Yes" to 6b, file Form 8870.			
7a	At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
b	If yes, did the foundation receive any proceeds or have any net income attributable to the transaction?		7b	

Part VIII

Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors

1 List all officers, directors, trustees, foundation managers and their compensation (see instructions).				
(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
ELIEZER GOLDWASSER	TREASURER	0	0	0
964 EAST 23RD STREET BROOKLYN, NY 11210	0 00			
2 Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, enter "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.				0

Part VIII

Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors *(continued)*

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. . . . .		0

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	
2	
3	
4	

Part IX-B

Summary of Program-Related Investments (see instructions)

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1	
2	
All other program-related investments. See instructions.	
3	
Total. Add lines 1 through 3. . . . .	0



Part X

Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.)

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc , purposes		
a	Average monthly fair market value of securities. . . . .	1a	0
b	Average of monthly cash balances. . . . .	1b	791
c	Fair market value of all other assets (see instructions). . . . .	1c	0
d	Total (add lines 1a, b, and c). . . . .	1d	791
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation). . . . .	1e	0
2	Acquisition indebtedness applicable to line 1 assets. . . . .	2	0
3	Subtract line 2 from line 1d. . . . .	3	791
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see instructions). . . . .	4	12
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	779
6	Minimum investment return. Enter 5% of line 5. . . . .	6	39

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.)

1	Minimum investment return from Part X, line 6. . . . .	1	39
2a	Tax on investment income for 2014 from Part VI, line 5. . . . .	2a	1
b	Income tax for 2014 (This does not include the tax from Part VI ). . . . .	2b	
c	Add lines 2a and 2b. . . . .	2c	1
3	Distributable amount before adjustments Subtract line 2c from line 1. . . . .	3	38
4	Recoveries of amounts treated as qualifying distributions. . . . .	4	0
5	Add lines 3 and 4. . . . .	5	38
6	Deduction from distributable amount (see instructions). . . . .	6	0
7	Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1. . . . .	7	38

Part XII

Qualifying Distributions (see instructions)

1	Amounts paid (including administrative expenses) to accomplish charitable, etc , purposes		
a	Expenses, contributions, gifts, etc —total from Part I, column (d), line 26. . . . .	1a	109,072
b	Program-related investments—total from Part IX-B. . . . .	1b	0
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc , purposes. . . . .	2	
3	Amounts set aside for specific charitable projects that satisfy the		
a	Suitability test (prior IRS approval required). . . . .	3a	
b	Cash distribution test (attach the required schedule). . . . .	3b	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	109,072
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income Enter 1% of Part I, line 27b (see instructions). . . . .	5	1
6	Adjusted qualifying distributions. Subtract line 5 from line 4. . . . .	6	109,071

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 4940(e) reduction of tax in those years

Part XIII

Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2013	(c) 2013	(d) 2014
1 Distributable amount for 2014 from Part XI, line 7				38
2 Undistributed income, if any, as of the end of 2014				
a Enter amount for 2013 only. . . . .			0	
b Total for prior years 20____, 20____, 20____		0		
3 Excess distributions carryover, if any, to 2014				
a From 2009. . . . .				
b From 2010. . . . .				
c From 2011. . . . .				
d From 2012. . . . .				54,212
e From 2013. . . . .				99,120
f Total of lines 3a through e. . . . .	153,332			
4 Qualifying distributions for 2014 from Part XII, line 4 ▶ \$ 109,072				
a Applied to 2013, but not more than line 2a			0	
b Applied to undistributed income of prior years (Election required—see instructions). . . . .		0		
c Treated as distributions out of corpus (Election required—see instructions). . . . .	0			
d Applied to 2014 distributable amount. . . . .				38
e Remaining amount distributed out of corpus	109,034			
5 Excess distributions carryover applied to 2014 (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:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	262,366			
b Prior years' undistributed income Subtract line 4b from line 2b. . . . .		0		
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. . . . .		0		
d Subtract line 6c from line 6b Taxable amount—see instructions . . . . .		0		
e Undistributed income for 2013 Subtract line 4a from line 2a Taxable amount—see instructions . . . . .			0	
f Undistributed income for 2014 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2015 . . . . .				0
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions) . . . . .	0			
8 Excess distributions carryover from 2009 not applied on line 5 or line 7 (see instructions) . . .	0			
9 Excess distributions carryover to 2015. Subtract lines 7 and 8 from line 6a . . . . .	262,366			
10 Analysis of line 9				
a Excess from 2010. . . .				
b Excess from 2011. . . .				
c Excess from 2012. . . .				54,212
d Excess from 2013. . . .				99,120
e Excess from 2014. . . .				109,034

## Part XIV

**1a** If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2014, enter the date of the ruling. . . .

Check box to indicate whether the organization is a private operating foundation described in section 4942(j)(3) or 4942(j)(5)

	Tax year	Prior 3 years			(e) Total
	(a) 2014	(b) 2013	(c) 2012	(d) 2011	
<b>2a</b> Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed . . . . .					
<b>b</b> 85% of line 2a . . . . .					
<b>c</b> Qualifying distributions from Part XII, line 4 for each year listed . . . . .					
<b>d</b> Amounts included in line 2c not used directly for active conduct of exempt activities . . . . .					
<b>e</b> Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c . . . . .					
<b>3</b> Complete 3a, b, or c for the alternative test relied upon					
<b>a</b> "Assets" alternative test—enter					
<b>(1)</b> Value of all assets . . . . .					
<b>(2)</b> Value of assets qualifying under section 4942(j)(3)(B)(i)					
<b>b</b> "Endowment" alternative test— enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed. . . . .					
<b>c</b> "Support" alternative test—enter					
<b>(1)</b> Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties). . . . .					
<b>(2)</b> Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii). . . . .					
<b>(3)</b> Largest amount of support from an exempt organization					
<b>(4)</b> Gross investment income					

**Part XV** **Supplementary Information (Complete this part only if the organization had \$5,000 or more in assets at any time during the year—see instructions.)**

## 1 Information Regarding Foundation Managers:

■ List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000) (See section 507(d)(2) )

• List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest

**2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:**

Check here ☒ if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d.

**a** The name, address, and telephone number or email address of the person to whom applications should be addressed

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

**c** Any submission deadlines

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

Part XV

Supplementary Information (continued)

3 Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year See Additional Data Table				
Total . . . . .			3a	109,072
b Approved for future payment				
Total . . . . .			3b	0

Enter gross amounts unless otherwise indicated

## Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes

Form **990-PF** (2014)

Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?

(1) Cash. . . . .

(2) Other assets. . . . .

**d** If the answer to any of the above is "Yes," complete the following schedule. Column **(b)** should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column **(d)** the value of the goods, other assets, or services received.

described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? . . . . . Yes ☐ No ☒


(a) Name of organization	(b) Type of organization	(c) Description of relationship

Title


May the IRS discuss this return with the preparer shown below (see instr )? ☒ **Yes** ☐ **No**

Phone no (212) 227-8034

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment


Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> Paid during the year				
AMERICAN FRIENDS OF OHEV YISROEL 5314 16TH AVENUE BROOKLYN,NY 11204	NONE		TO ASSIST NON-PROFIT ORGANIZATION WITH PROGRAM EXPENSES	500
AMERICAN FRIENDS OF YESHIVA GEDOLAH 233 E REDWOOD ST BALTIMORE,MD 21202	NONE		TO ASSIST NON-PROFIT ORGANIZATION WITH PROGRAM EXPENSES	1,000
ASHAR 360 NEW HEMPSTEAD RD NEW CITY,NY 10956	NONE		TO ASSIST EDUCATIONAL INSTITUTION WITH PROGRAM EXPENSES	4,400
BAIS FAIGA 901 MADISON AVENUE LAKEWOOD,NJ 08701	NONE		TO ASSIST EDUCATIONAL INSTITUTION WITH PROGRAM EXPENSES	1,600
BAIS MEDRASH TORAS CHESED 910 MONMOUTH AVENUE LAKEWOOD,NJ 08701	NONE		TO ASSIST EDUCATIONAL INSTITUTION WITH PROGRAM EXPENSES	1,000
BAIS TOVA 555 OAK STREET LAKEWOOD,NJ 08701	NONE		TO ASSIST EDUCATIONAL INSTITUTION WITH PROGRAM EXPENSES	5,600
BAIS YAAKOV OF SPRING VALLEY 235 NORTH MAIN STREET SPRING VALLEY,NY 10977	NONE		TO ASSIST EDUCATIONAL INSTITUTION WITH PROGRAM EXPENSES	2,500
BAIT HATEFILA MAPLEWOOD MONSEY,NY 10952	NONE		TO ASSIST EDUCATIONAL INSTITUTION WITH PROGRAM EXPENSES	100
BETH JACOB D'RAV HIRSCHPRUNG 1750 GLENDALE AVENUE MONTREAL,QUEBEC H2V1B3 CA	NONE		TO ASSIST EDUCATIONAL INSTITUTION WITH PROGRAM EXPENSES	2,000
BNOS BAIS YAACOV 155 N OBERLIN AVENUE LAKEWOOD,NJ 08701	NONE		TO ASSIST EDUCATIONAL INSTITUTION WITH PROGRAM EXPENSES	4,600
CHAI LIFE LINE 151 W30TH STREET NEW YORK,NY 10001	NONE		TO ASSIST COMMUNITY RESOURCE ORGANIZATION WITH PROGRAM EXPENSES	100
CHEDER TORAS ZEV 108 CHATEAU DRIVE LAKEWOOD,NJ 08701	NONE		TO ASSIST EDUCATIONAL INSTITUTION WITH PROGRAM EXPENSES	3,000
CONG BETH ISRAEL OF MONSEY 92 MAIN STREET MONSEY,NY 10952	NONE		TO ASSIST RELIGIOUS ORGANIZATIONS WITH PROGRAM EXPENSES	400
CONG BAIS AVROHOM 1227 54TH STREET BROOKLYN,NY 11219	NONE		TO ASSIST RELIGIOUS ORGANIZATIONS WITH PROGRAM EXPENSES	200
CONG TIFERE TZVI 28 W MAPLE AVENUE MONSEY,NY 10952	NONE		TO ASSIST RELIGIOUS ORGANIZATIONS WITH PROGRAM EXPENSES	2,800
<b>Total . . . . .</b>  <b>3a</b>				109,072

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment


Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> Paid during the year				
CPE YESHIVA GEDOLAH 6155 BEACON ROAD MONTREAL, QUEBEC H3S2P4 CA	NONE		TO ASSIST EDUCATIONAL INSTITUTION WITH PROGRAM EXPENSES	1,000
ICHUD HAYESHIVOT 5904 13TH AVENUE BROOKLYN, NY 11219	NONE		TO ASSIST EDUCATIONAL INSTITUTION WITH PROGRAM EXPENSES	100
J DACHS ELEMENTARY SCHOOL 320 W PETERSON AVENUE CHICAGO, IL 60659	NONE		TO ASSIST EDUCATIONAL INSTITUTION WITH PROGRAM EXPENSES	1,200
JCC OF CHICAGO 3003 W TOUHY AVENUE CHICAGO, IL 60656	NONE		TO ASSIST EDUCATIONAL INSTITUTION WITH PROGRAM EXPENSES	1,800
JEC 330 ELMORA AVENUE ELIZABETH, NJ 07208	NONE		TO ASSIST COMMUNITY RESOURCE ORGANIZATION WITH PROGRAM EXPENSES	600
KHAL ADATH JESHURUN 714 WEST 186TH STREET NEW YORK, NY 10033	NONE		TO ASSIST CONGREGATION WITH EXPENSES RELATED TO RELIGIOUS PROGRAMS	2,500
KAHAL DERECH EMES 133 ROUTE 59 MONSEY, NY 10952	NONE		TO ASSIST CONGREGATION WITH EXPENSES RELATED TO RELIGIOUS PROGRAMS	2,700
KAHAL SHAAREI TEFFILAH 21 SANDS POINT RD MONSEY, NY 10952	NONE		TO ASSIST CONGREGATION WITH EXPENSES RELATED TO RELIGIOUS PROGRAMS	5,000
KHAL ADATH JESHURUN 700 W 186TH STREET NEW YORK, NY 10033	NONE		TO ASSIST CONGREGATION WITH EXPENSES RELATED TO RELIGIOUS PROGRAMS	100
KOLEL BELS MONSEY 1 WARREN CT MONSEY, NY 10952	NONE		TO ASSIST CONGREGATION WITH EXPENSES RELATED TO RELIGIOUS PROGRAMS	180
KOLLEL ZICHRON MENACHIM 10 MAPLE TERRACE MONSEY, NY 10952	NONE		TO ASSIST CONGREGATION WITH EXPENSES RELATED TO RELIGIOUS PROGRAMS	360
KOLLEL ZICHRON SHNEUR 55 WEST MAPLE AVENUE MONSEY, NY 10952	NONE		TO ASSIST CONGREGATION WITH EXPENSES RELATED TO RELIGIOUS PROGRAMS	50
KUPAT EZRAH 59 COLLEGE ROAD MONSEY, NY 10952	NONE		TO ASSIST COMMUNITY RESOURCE ORGANIZATION WITH PROGRAM EXPENSES	770
KZM 10 MAPLE TERRACE MONSEY, NY 10952	NONE		TO ASSIST CONGREGATION WITH EXPENSES RELATED TO RELIGIOUS PROGRAMS	7,228
ME'OHR BAIS YAAKOV INC 110 CHESTNUT RIDGE RD MONTVALE, NJ 07645	NONE		TO ASSIST EDUCATIONAL INSTITUTION WITH PROGRAM EXPENSES	4,000
<b>Total . . . . .</b>  <b>3a</b>				109,072




Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> Paid during the year				
MESIVTA OF CLIFTON 338 DELAWANA AVENUE CLIFTON,NJ 07014	NONE		TO ASSIST EDUCATIONAL INSTITUTION WITH PROGRAM EXPENSES	2,300
MISASKIM 5805 16TH AVENUE BROOKLYN,NY 11204	NONE		TO ASSIST COMMUNITY RESOURCE ORGANIZATION WITH PROGRAM EXPENSES	280
MOSDOS SQUARE 105 HEYWARD STREET BROOKLYN,NY 11206	NONE		TO ASSIST COMMUNITY RESOURCE ORGANIZATION WITH PROGRAM EXPENSES	54
OTHER MISCELLANEOUS CHARITIES 1222 AVENU M BROOKLYN,NY 11230	NONE		TO ASSIST RELIGIOUS ORGANIZATIONS & EDUCATIONAL INSTITUTION WITH PROGRAM EXPENSES	530
SHAAGAS ARYEH 285 RIVER AVENUE LAKEWOOD,NJ 08701	NONE		TO ASSIST EDUCATIONAL INSTITUTION WITH PROGRAM EXPENSES	900
SHALOM TORAH CENTER 417 13TH STREET LAKEWOOD,NJ 08701	NONE		TO ASSIST EDUCATIONAL INSTITUTION WITH PROGRAM EXPENSES	1,000
SHALOM YITZCHOK TORAH INSTITUTE 208 5TH STREET LAKEWOOD,NJ 08701	NONE		TO ASSIST EDUCATIONAL INSTITUTION WITH PROGRAM EXPENSES	250
TALMUD TORAH OHR ELCHANON 805 CROSS ST STE 1 LAKEWOOD,NJ 08701	NONE		TO ASSIST EDUCATIONAL INSTITUTION WITH PROGRAM EXPENSES	2,700
TASHBAR OF LAKEWOOD 655 PRINCETON AVENUE LAKEWOOD,NJ 08701	NONE		TO ASSIST EDUCATIONAL INSTITUTION WITH PROGRAM EXPENSES	1,800
THE LAKEWOOD CHEDER SCHOOL 901 MADISON AVENUE LAKEWOOD,NJ 08701	NONE		TO ASSIST EDUCATIONAL INSTITUTION WITH PROGRAM EXPENSES	900
TOMCHAI SHABBOS 6225 NEW UTRECHT AVENUE BROOKLYN,NY 11219	NONE		TO ASSIST COMMUNITY RESOURCE ORGANIZATION WITH PROGRAM EXPENSES	180
TORAH V'CHESED 6407 WEST ORANGE STREET LOS ANGELES,CA 90048	NONE		TO ASSIST COMMUNITY RESOURCE ORGANIZATION WITH PROGRAM EXPENSES	180
YESHIVA BAIS BINYOMIN 132 PROSPECT STREET STAMFORD,CT 06901	NONE		TO ASSIST EDUCATIONAL INSTITUTION WITH PROGRAM EXPENSES	250
YESHIVA CHOFETZ CHAIM 14 CLOVERDALE LANE MONSEY,NY 10952	NONE		TO ASSIST EDUCATIONAL INSTITUTION WITH PROGRAM EXPENSES	1,200
YESHIVA GEDOLA MERKAS HATORAH MONTREAL 6155 DEACON RD MONTREAL,QUEBEC H3S 2P4 CA	NONE		TO ASSIST EDUCATIONAL INSTITUTION WITH PROGRAM EXPENSES	500
<b>Total . . . . .</b>  <b>3a</b>				109,072


Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> Paid during the year				
YESHIVA MAYAN HATALMUD 218 JOE PARKER RD LAKEWOOD,NJ 08701	NONE		TO ASSIST EDUCATIONAL INSTITUTION WITH PROGRAM EXPENSES	1,500
YESHIVA MESIVTA TORAH TEMIMAH 555 OCEAN PARKWAY BROOKLYN,NY 11218	NONE		TO ASSIST EDUCATIONAL INSTITUTION WITH PROGRAM EXPENSES	100
YESHIVA OF SPRING VALLEY 121 COLLEGE ROAD SUFFERN,NY 10901	NONE		TO ASSIST EDUCATIONAL INSTITUTION WITH PROGRAM EXPENSES	2,100
YESHIVA OF TELSHE SLUMNI 4904 INDEPENDENCE AVENUE BRONX,NY 10471	NONE		TO ASSIST EDUCATIONAL INSTITUTION WITH PROGRAM EXPENSES	900
YESHIVA OHR HATORAH 54 WHISPERING PINES LANE LAKEWOOD,NJ 08701	NONE		TO ASSIST EDUCATIONAL INSTITUTION WITH PROGRAM EXPENSES	900
YESHIVA ORCHAS CHAIM 410 OBERLIN AVENUE LAKEWOOD,NJ 08701	NONE		TO ASSIST EDUCATIONAL INSTITUTION WITH PROGRAM EXPENSES	2,700
YESHIVA RABBI SR HIRSCH 91 BENNETT AVENUE NEWYORK,NY 10033	NONE		TO ASSIST EDUCATIONAL INSTITUTION WITH PROGRAM EXPENSES	5,800
YESHIVA TORAH TEMIMA 555 OCEAN PARKWAY BROOKLYN,NY 11218	NONE		TO ASSIST EDUCATIONAL INSTITUTION WITH PROGRAM EXPENSES	2,200
YESHIVA TORAS CHAIMDENVER 1555 STUART STREET DENVER,CO 80204	NONE		TO ASSIST EDUCATIONAL INSTITUTION WITH PROGRAM EXPENSES	900
YESHIVA ZICHRON MELECH 510 DAHILL ROAD BROOKLYN,NY 11218	NONE		TO ASSIST EDUCATIONAL INSTITUTION WITH PROGRAM EXPENSES	150
YRSRH OF MONSEY PO BOX 344 MONSEY,NY 10952	NONE		TO ASSIST EDUCATIONAL INSTITUTION WITH PROGRAM EXPENSES	2,200
AISH HATORAH 408 S LAKE DRIVE AMINISTRATIVE OFFICES LAKEWOOD,NJ 08701	NONE		TO ASSIST EDUCATIONAL INSTITUTION WITH PROGRAM EXPENSES	50
AMERICAN FRIENDS OF KUPAT HAIR 4415 14TH AVENUE BROOKLYN,NY 11219	NONE		TO ASSIST COMMUNITY RESOURCE ORGANIZATION WITH PROGRAM EXPENSES	36
AREIVIM 20 BRIARCLIFF DRIVE MONSEY,NY 10952			TO ASSIST COMMUNITY RESOURCE ORGANIZATION WITH PROGRAM EXPENSES	2,000
BAIS MEDRASCH L'TORAH 31 12TH STREET LAKEWOOD,NJ 08701			TO ASSIST CONGREGATION WITH EXPENSES RELATED TO RELIGIOUS PROGRAMS	50
<b>Total . . . . .</b>  <b>3a</b>				109,072


Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
BAIS MEDRASH TORAH OF MONSEY PO BOX 1286 MONSEY,NY 10952			TO ASSIST CONGREGATION WITH EXPENSES RELATED TO RELIGIOUS PROGRAMS	50
BETH MEDRASH GAVOHA 617 6TH STREET LAKWOOD,NJ 08701			TO ASSIST EDUCATIONAL INSTITUTION WITH PROGRAM EXPENSES	550
BNOS DEVORAH 243 PROSPECT STREET LAKEWOOD,NJ 08701			TO ASSIST EDUCATIONAL INSTITUTION WITH PROGRAM EXPENSES	400
CHAVERIM OF ROCKLAND PO BOX 1115 MONSEY,NY 10952			TO ASSIST COMMUNITY RESOURCE ORGANIZATION WITH PROGRAM EXPENSES	200
CHOFETZ CHAIM HERITAGE FOUNDATION 361 SPOOK ROCK ROAD SUFFERN,NY 10901			TO ASSIST NON-PROFIT ORGANIZATION WITH PROGRAM EXPENSES	1,080
CONG CHAYAI OLEM 104 FRANCIS PLACE SPRING VALLEY,NY 10952			TO ASSIST NON-PROFIT ORGANIZATION WITH PROGRAM EXPENSES	250
CONG K'HAL ADATH JESHURUN 700 WEST 186TH STREET NEWYORK,NY 10033			TO ASSIST CONGREGATION WITH EXPENSES RELATED TO RELIGIOUS PROGRAMS	190
CONG ZICHRON MENACHEM 4404 14TH AVENUE BROOKLYN,NY 11219			TO ASSIST NON-PROFIT ORGANIZATION WITH PROGRAM EXPENSES	180
EZRAS YISROEL 4415 14TH AVENUE BROOKLYN,NY 11219			TO ASSIST NON-PROFIT ORGANIZATION WITH PROGRAM EXPENSES	36
KAJ OF YRSRH 100 RENNET AVENUE NYC,NY 10033			TO ASSIST NON-PROFIT ORGANIZATION WITH PROGRAM EXPENSES	1,500
HATZOLAH EMS OF ROCKLAND COUNTY 19 GROVE STREET AT SADDLE RIVER ROAD MONSEY,NY 10952			TO ASSIST COMMUNITY RESOURCE ORGANIZATION WITH PROGRAM EXPENSES	1,000
KEREN HASHVIIS 4520 18TH AVENUE BROOKLYN,NY 11204			TO ASSIST COMMUNITY RESOURCE ORGANIZATION WITH PROGRAM EXPENSES	50
KESER TORAH RADOMSK 3054 BEDFORD AVENUE BROOKLYN,NY 11210			TO ASSIST EDUCATIONAL INSTITUTION WITH PROGRAM EXPENSES	250
KHAL CHESIDEL LELOV 1842 53RD STREET BROOKLYN,NY 11204			TO ASSIST CONGREGATION WITH EXPENSES RELATED TO RELIGIOUS PROGRAMS	138
KHAL DERECH EMES 133 RT 59 MONSEY,NY 10952			TO ASSIST CONGREGATION WITH EXPENSES RELATED TO RELIGIOUS PROGRAMS	100
<b>Total . . . . .</b>  <b>3a</b>				109,072

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> Paid during the year				
KOLEL BE'ER MORDCHAI 305 WEST 91ST STREET NEW YORK,NY 10024			TO ASSIST EDUCATIONAL INSTITUTION WITH PROGRAM EXPENSES	360
KOLEL HORAAH OF FLATBUSH 1206 AVENUE M BROOKLYN,NY 11230			TO ASSIST EDUCATIONAL INSTITUTION WITH PROGRAM EXPENSES	1,800
KOLEL SHOMRE HACHOMOS OF JERUSALEM INC 18 HEYWARD STREET BROOKLYN,NY 11249			TO ASSIST COMMUNITY RESOURCE ORGANIZATION WITH PROGRAM EXPENSES	190
KOLEL CHASIDEI RACHMISTKEVKE PO BOX 284 MONSEY,NY 10952			TO ASSIST EDUCATIONAL INSTITUTION WITH PROGRAM EXPENSES	100
KOLEL LOMDEI SHAS 2 CARMEN COURT CHESTNUT RIDGE,NY 10977			TO ASSIST EDUCATIONAL INSTITUTION WITH PROGRAM EXPENSES	5,000
M&H NEIMAN FOUNDATION 39 BROADWAY NEW YORK,NY 10006			TO ASSIST NON-PROFIT ORGANIZATION WITH PROGRAM EXPENSES	200
SHAAREI TEFILAH 7 NELSON ROAD MONSEY,NY 10952			TO ASSIST CONGREGATION WITH EXPENSES RELATED TO RELIGIOUS PROGRAMS	500
SHIRAS DEVORAH 555 OAK STREET LAKEWOOD,NJ 08701			TO ASSIST EDUCATIONAL INSTITUTION WITH PROGRAM EXPENSES	300
THE CHEDER 129 ELMWOOD AVENUE BROOKLYN,NY 11230			TO ASSIST EDUCATIONAL INSTITUTION WITH PROGRAM EXPENSES	36
TALMUDIC YESHIVA OF PHILADELPHIA 6063 DREXEL ROAD PHILADELPHIA,PA 19131			TO ASSIST NON-PROFIT ORGANIZATION WITH PROGRAM EXPENSES	100
TZDAKA VOCHESED 4716 17TH AVE BROOKLYN,NY 11204			TO ASSIST COMMUNITY RESOURCE ORGANIZATION WITH PROGRAM EXPENSES	100
VAAD L'HATZOLAHS NID CHEE YISROEL 1566 CONEY ISLAND AVENUE BROOKLYN,NY 11230			TO ASSIST NON-PROFIT ORGANIZATION WITH PROGRAM EXPENSES	100
YAD BATYA L'KALLAH 1256 EAST 26TH STREET BROOKLYN,NY 11210			TO ASSIST NON-PROFIT ORGANIZATION WITH PROGRAM EXPENSES	50
YESHIVA DERECH CHAIM 1573 39TH STREET BROOKLYN,NY 11218			TO ASSIST EDUCATIONAL INSTITUTION WITH PROGRAM EXPENSES	240
YESHIVA MESIVTA MEOR CHAIM 1571 51ST STREET BROOKLYN,NY 11219			TO ASSIST EDUCATIONAL INSTITUTION WITH PROGRAM EXPENSES	250
<b>Total . . . . .</b>  <b>3a</b>				109,072

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> Paid during the year				
YESHIVA MIR YERUSHALAYIM 5227 NEW UTRECHT AVENUE BROOKLYN, NY 11219			TO ASSIST EDUCATIONAL INSTITUTION WITH PROGRAM EXPENSES	600
YESHIVA OF FAR ROCKAWAY 802 HICKSVILLE ROAD FAR ROCKAWAY, NY 11691			TO ASSIST EDUCATIONAL INSTITUTION WITH PROGRAM EXPENSES	300
YESHIVA OHEL TORAH 6301 17TH AVENUE BROOKLYN, NY 11204			TO ASSIST EDUCATIONAL INSTITUTION WITH PROGRAM EXPENSES	414
YESHIVA OHR V'DAAS 927 CHESTNUT RIDGE ROAD SPRING VALLEY, NY 10977			TO ASSIST EDUCATIONAL INSTITUTION WITH PROGRAM EXPENSES	360
ZICHRON YOCHANAN 24 JACKSON AVENUE SPRING VALLEY, NY 10977			TO ASSIST NON-PROFIT ORGANIZATION WITH PROGRAM EXPENSES	100
<b>Total</b> . . . . .  <b>3a</b>				109,072

<div>Schedule B</div> <div>(Form 990, 990-EZ, or 990-PF)</div> <div>Department of the Treasury Internal Revenue Service</div>	<div>Schedule of Contributors</div> <div>▶ Attach to Form 990, 990-EZ, or 990-PF.</div> <div>▶ Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at <a href="http://www.irs.gov/form990">www.irs.gov/form990</a>.</div>	<div>OMB No 1545-0047</div> <div>2014</div>
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<div>Name of the organization</div> <div>REGINA GOLDWASSER FOUNDATION</div>	<div>Employer identification number</div> <div>13-2926389</div>
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Organization type (check one)

<div>Filers of:</div> <div>Form 990 or 990-EZ</div> <div>Form 990-PF</div>	<div>Section:</div> <div><div><input type="checkbox"/> 501(c)( ) (enter number) organization</div><div><input type="checkbox"/> 4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private foundation</div><div><input type="checkbox"/> 527 political organization</div><div><input checked="" type="checkbox"/> 501(c)(3) exempt private foundation</div><div><input type="checkbox"/> 4947(a)(1) nonexempt charitable trust treated as a private foundation</div><div><input type="checkbox"/> 501(c)(3) taxable private foundation</div></div>
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Check if your organization is covered by the **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

- ☒ For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or other property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

- ☐ For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33<sup>1</sup>/<sub>3</sub>% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of **(1)** \$5,000 or **(2)** 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.
- ☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.
- ☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Do not complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year. . . . . ▶ \$ \_\_\_\_\_

**Caution.** An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer “No” on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Form 990PF, Part I, line 2, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

<b>Name of organization</b> REGINA GOLDWASSER FOUNDATION	<b>Employer identification number</b> 13-2926389
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<b>Part I</b>	<b>Contributors</b> (see instructions) Use duplicate copies of Part I if additional space is needed
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(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	TRUST UW JAKOB GOLDWASSER  26 WEST MAPE AVENUE  MONSEY, NY 10952	\$ 106,500	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/>  (Complete Part II for noncash contributions )
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/>  (Complete Part II for noncash contributions )
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/>  (Complete Part II for noncash contributions )
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/>  (Complete Part II for noncash contributions )
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/>  (Complete Part II for noncash contributions )
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/>  (Complete Part II for noncash contributions )
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/>  (Complete Part II for noncash contributions )

<b>Name of organization</b> REGINA GOLDWASSER FOUNDATION	<b>Employer identification number</b> 13-2926389
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**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
_____	_____ _____ _____ _____	_____ \$	_____
(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
_____	_____ _____ _____ _____	_____ \$	_____



Name of organization REGINA GOLDWASSER FOUNDATION	Employer identification number 13-2926389
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Part III

**Exclusively** religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of *exclusively* religious, charitable, etc., contributions of **\$1,000 or less** for the year. (Enter this information once. See instructions.) ▶ \$ \_\_\_\_\_

Use duplicate copies of Part III if additional space is needed.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
—	<div></div>	<div></div>	<div></div>
	<div></div>	<div></div>	<div></div>
	<div></div>	<div></div>	<div></div>
(e) Transfer of gift			
Transferee's name, address, and ZIP 4		Relationship of transferor to transferee	
<div></div>		<div></div>	
<div></div>		<div></div>	
<div></div>		<div></div>	

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
—	<div></div>	<div></div>	<div></div>
	<div></div>	<div></div>	<div></div>
	<div></div>	<div></div>	<div></div>
(e) Transfer of gift			
Transferee's name, address, and ZIP 4		Relationship of transferor to transferee	
<div></div>		<div></div>	
<div></div>		<div></div>	
<div></div>		<div></div>	

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
—	<div></div>	<div></div>	<div></div>
	<div></div>	<div></div>	<div></div>
	<div></div>	<div></div>	<div></div>
(e) Transfer of gift			
Transferee's name, address, and ZIP 4		Relationship of transferor to transferee	
<div></div>		<div></div>	
<div></div>		<div></div>	
<div></div>		<div></div>	

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
—	<div></div>	<div></div>	<div></div>
	<div></div>	<div></div>	<div></div>
	<div></div>	<div></div>	<div></div>
(e) Transfer of gift			
Transferee's name, address, and ZIP 4		Relationship of transferor to transferee	
<div></div>		<div></div>	
<div></div>		<div></div>	
<div></div>		<div></div>	

## TY 2014 Accounting Fees Schedule

**Name:** REGINA GOLDWASSER FOUNDATION

**EIN:** 13-2926389

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
ACCOUNTING FEES	2,600	0		0

## TY 2014 Other Expenses Schedule

**Name:** REGINA GOLDWASSER FOUNDATION

**EIN:** 13-2926389

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
BANK FEES	798	0		0
OFFICE	1,135	0		0

**TY 2014 Taxes Schedule****Name:** REGINA GOLDWASSER FOUNDATION**EIN:** 13-2926389

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
GOVERNMENT FEES	221	0		0