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SCALLINGO MAY & 1 2010

Form 990-PF

Return of Private Foundation

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

oundation 2014

Department of the Treasury Internal Revenue Service Do not enter social security numbers on this form as it may be made public.

Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf.

Open to Public Inspection

OMB No 1545-0052

			the delvice	Pa. ato	· · · · · · · · · · · · · · · · · · ·			·
			idar year 2014 or tax year beginning		, and	l ending		
	Nar	me of for	undation			A Employe	r identification numbe	•
			REISS FOUNDATION			_}		
	Nur	mber an	d street (or P O box number if mail is not delivered to street address)		Room/suite		13-6064123	
	BN	Y Mell	on, N.A - P O Box 185			B Telephon	e number (see instruction	ns)
		y or towr		ZIP co	ode	7		
	Pitt	tsburgi	nPA	15230-0185 (212) 922-		(212) 922-663	6636	
	For	eign cou	intry name Foreign province/state/county	Foreig	n postal code	C If exempt	ion application is pendir	ng, check here
						1		-
	G	Check	call that apply: Initial return Initial return	of a former or	ublic charity	D 1. Foreig	n organizations, check l	nere ▶□
			☐ Final return ☐ Amended ref	-		ŀ	_	
			Address change Name change			-	n organizations meeting here and attach comput	. —
	ㅠ	Check	type of organization X Section 501(c)(3) exempt pr		ion	-1	foundation status was to	
	ö		on 4947(a)(1) nonexempt charitable trust Other taxa				07(b)(1)(A), check here	▶□
	느					4		
	ı		narket value of all assets at J Accounting method.			F If the four	ndation is in a 60-month	termination
			f year (from Part II, col (c), Other (specify)			under sec	tion 507(b)(1)(B), check	there ▶∐
5			5) ▶ \$ 5,656,525 (Part I, column (d) must be	on cash basis	5)	<u>.l.</u>		
Ø _	P	art I	Analysis of Revenue and Expenses (The total of	(a) Revenue	and			(d) Disbursements
38			amounts in columns (b), (c), and (d) may not necessarily	expenses p	I (D) N	et investment income	(c) Adjusted net income	for chantable purposes
\$			equal the amounts in column (a) (see instructions))	books		income	moone	(cash basis only)
Envelode Postivark date MAY		1	Contributions, gifts, grants, etc , received (attach schedule)					
6 %		2	Check ► X if the foundation is not required to attach Sch B					
ā		3	Interest on savings and temporary cash investments				<u>-</u>	
::: :>		4	Dividends and interest from securities	132	2,728	127,411		
\$		5a	Gross rents		-,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	127,111		
		b	Net rental income or (loss)					
\rightleftharpoons		6a	Net gain or (loss) from sale of assets not on line 10	277	7,661	······································	<u> </u>	
©	ne	b	Gross sales price for all assets on line 6a 818,280		,001			~
$ \otimes $	evenue	7	Capital gain net income (from Part IV, line 2)			277,661		
E102	ev	8				277,001		
60	8	9	The same of the state of the st					
		. ~						
		10a	Gross sales less returns and allowances	<u></u>				
		b	Less Cost of goods sold .					ž.
		, c	Gross profit or (loss) (attach schedule)					
		11	Other income (attach schedule)					
2		12	Total. Add lines 1 through 11),389	405,072	0	
9 1	S	13	Compensation of officers, directors, trustees, etc	12	2,629	7,577		5,052
:	Expenses	14	Other employee salaries and wages					
1	eu	15	Pension plans, employee benefits					
	α×	16a	Legal fees (attach schedule) .					
•		b	Accounting fees (attach schedule)	<u>-1) .</u>				
	Ve	С	Other professional fees (attach schedule)					
	ati	17	Interest	12				
	str	18	Taxes (attach schedule) (see instructions) AY 1 8 20	15 10 12	2,367	2,166		
<u>.</u>	ij	19	Depreciation (attach schedule) and depletion	13 6 12				
ź	Ē	20		107				
3	٩d	21	Occupancy OGDEN. Travel, conferences, and meetings			-		
Š	q /	22	Printing and publications					
	an	23	Other expenses (attach schedule)			-	·	
	g	24	Total operating and administrative expenses.					
	tin	~~	Add lines 13 through 23) 2/	1,996	9,743	l o	5,052
	ra	25			1,000	3,143		254,000
	Operating and Administrative	26	Total expenses and disbursements. Add lines 24 and 25				<u> </u>	
	<u>o</u>			278	3,996	9,743	0	259,052
		27	Subtract line 26 from line 12	ļ				
		a	Excess of revenue over expenses and disbursements	131	,393		<u> </u>	
		b	Net investment income (if negative, enter -0-)			395,329	1	
		C	Adjusted net income (if negative, enter -0-)	1	1		l o	

For Paperwork Reduction Act Notice, see instructions.

Page **2**

Đ,	art II	Balance Sheets Attached schedules and amounts in the description column	Beginning of year	End of	f year
		should be for end-of-year amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash—non-interest-bearing			
	2	Savings and temporary cash investments	247,480	177,134	177,134
	3	Accounts receivable ▶			_
		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			
įts	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges .			
Ą	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) .	3,786,886	3,981,245	5,479,391
	14	Land, buildings, and equipment basis			
		Land, buildings, and equipment basis ► Less accumulated depreciation (attach schedule) ►			
	15	Other assets (describe)			
	16	Total assets (to be completed by all filers—see the			
		instructions. Also, see page 1, item i)	4,034,366	4,158,379	5,656,525
	17	Accounts payable and accrued expenses .			*
Ś	18	Grants payable			
itie	19	Deferred revenue			. ,
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
ia.	21	Mortgages and other notes payable (attach schedule)			
_	22	Other liabilities (describe)			
	23	Total liabilities (add lines 17 through 22)	0	0	
S		Foundations that follow SFAS 117, check here ▶ □			
ည		and complete lines 24 through 26 and lines 30 and 31.			
lan	24	Unrestricted			
Ba	25	Temporarily restricted			
פ	26	Permanently restricted			
or Fund Balances		Foundations that do not follow SFAS 117, check here		ı	
ř	^=	and complete lines 27 through 31.		4 450 050	
S	27	Capital stock, trust principal, or current funds	4,034,366	4,158,379	
Net Assets	28	Paid-in or capital surplus, or land, bldg., and equipment fund			
1Si	29	Retained earnings, accumulated income, endowment, or other funds	4.004.000	4.450.070	
jt.	30	Total net assets or fund balances (see instructions)	4,034,366	4,158,379	
ž	31	Total liabilities and net assets/fund balances (see	4 004 000	4 450 070	
D٥	rt III	Analysis of Changes in Net Assets or Fund Balances	4,034,366	4,158,379	
		net assets or fund balances at beginning of year—Part II, column (a	a) line 30 (must agree w	uth 1	
•		of-year figure reported on prior year's return)	a), mie oo (must agree w	1	4,034,366
2		amount from Part I, line 27a		2	131,393
			• •	3	101,090
				4	4,165,759
		eases not included in line 2 (itemize) See Attached Statement		5	7,380
		net assets or fund balances at end of year (line 4 minus line 5)—Pa	ort II. column (b). line 30	6	4,158,379
-			,		7,130,373

Form 9	90-PF (2014) JACOB L	REISS FOUNDATION				13-6064123	Page 3
Part	V Capital Gains and	d Losses for Tax on Investm	ent Income			·	
		he kind(s) of property sold (e g , real estate buse, or common stock, 200 shs MLC Co)	,	(b) How acquired P—Purchase D—Donation	(c) Date acqu	1 ' '	Date sold , day, yr)
1a	See Attached Statement	<u>:</u>		Donation			
b	See Attached Statement						
С	See Attached Statement						
đ	See Attached Statement						
е	See Attached Statement						
	(e) Gross sales price	(f) Depreciation allowed (or allowable)		r other basis ense of sale		(h) Gain or (loss) e) plus (f) minus (g)
а							0
b							0
С		•					0
<u>d</u>							0
ее							0
	Complete only for assets sh	nowing gain in column (h) and owned	by the foundation	n on 12/31/69		ıns (Col (h) gaın m	
	(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	• •	ss of col (i) (j), if any		, but not less than osses (from col (h)	•
a		·					0
b							<u>0</u>
<u>c</u> _							0
<u>d</u>							0
ее		/ If going	lso enter in Pa	et Line 7			0
2	Capital gain net income or	r (net capital loss) T If (loss),	enter -0- ın Pa	rt l, line 7 ナ	2		277,661
3		n or (loss) as defined in sections 1 , line 8, column (c) (see instructio					
	Part I, line 8	· · · · · · · · · · · · · · · · · · ·		. T	3		0
Part	V Qualification Und	ler Section 4940(e) for Reduc	ced Tax on N	et Investment	Income		
Was t	s," the foundation does not	section 4942 tax on the distributa qualify under section 4940(e) Do	not complete t	this part.			′es ⊠ No
1	Enter the appropriate amo	ount in each column for each year	; see the instru	ctions before mal	king any entr		
	(a) Base period years	(b)	N-4k	(c)		(d) Distribution rat	ilo
Cal	endar year (or tax year beginning in			of noncharitable-use as		col (b) divided by	
	2013		029	5,121			0 043942
	2012 2011		261 278	4,627			0 047164
	2010		832	4,515 4,290			0.046563
	2009		267	4,035			0 047037 0 063012
	2009		,207]	4,030	,,231		0 003012
2	Total of line 1, column (d)	·			. 2		0 247718
3		for the 5-year base period—divide		ne 2 by 5, or by th			0 2 11110
		dation has been in existence if les					0 049544
4	Enter the net value of non-	charitable-use assets for 2014 fro	m Part X, line s	5	. 4		5,594,271
5	Multiply line 4 by line 3 .				. 5		277,163
6	Enter 1% of net investmen	nt income (1% of Part I, line 27b)			6		3,953
7	Add lines 5 and 6 .				7		281,116
8	Enter qualifying distribution If line 8 is equal to or great	ns from Part XII, line 4 ter than line 7, check the box in P	 art VI. line 1b.	and complete tha	t part using a	a 1% tax rate	259,052 See the
	Part VI instructions	,	,				

Form 99	0-PF (2014) JACOB L REISS FOUNDATION		13-60	64123	F	age 4
Part '	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—sec	e ins	structio	15)		
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		1		7.907	·
	here ▶ ☐ and enter 1% of Part I, line 27b				. 100.	
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	•	7,907	
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	Г	4	-		
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-	Г	5	•	7,907	
6	Credits/Payments					
а	2014 estimated tax payments and 2013 overpayment credited to 2014 6a 6,920		ļ		:	
b	Exempt foreign organizations—tax withheld at source 6b		1			
С	Tax paid with application for extension of time to file (Form 8868) . 6c]	1		į	
d	Backup withholding erroneously withheld 6d					
7	Total credits and payments. Add lines 6a through 6d		7	(3,920	
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	L	8			
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed ▶		9		987	
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid . •	Ŀ	10		0	
11	Enter the amount of line 10 to be Credited to 2015 estimated tax ► Refunded ►		11		0	<u> </u>
	VII-A Statements Regarding Activities			,		
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or	dıd	it		Yes	No
	participate or intervene in any political campaign?			<u>1a</u>		<u> </u>
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see			1		
	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 n	nate	nals			1
_	published or distributed by the foundation in connection with the activities			<u> </u>		
C	Did the foundation file Form 1120-POL for this year?		•	1c		X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year					
е	(1) On the foundation. \$\(\) (2) On foundation managers \$\(\)\$					
-	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax if on foundation managers > \$	mpo	sea			
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		<u> </u>
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		X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?			4a		$\frac{\hat{x}}{x}$
b	If "Yes," has it filed a tax return on Form 990-T for this year?	•	-		N/A	<u> </u>
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	•	• •	5	1 177	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:					1
	By language in the governing instrument, or					
	• By state legislation that effectively amends the governing instrument so that no mandatory directio	ns th	hat			
	conflict with the state law remain in the governing instrument?			6	Х	
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 X	(V		7	X	
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)					
	N/A				'	
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney of	Gen	eral	<u> </u>		
	(or designate) of each state as required by General Instruction G? If "No," attach explanation .			8b	N/A	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 494					
	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		<u> </u>
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule lis names and addresses	tıng	theır	10		×

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Par	t 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		Х
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			
14	The books are in care of ► BNY MELLON, N A Telephone no ► (212	922-663	6	
	Located at ► P.O. BOX 185, PITTSBURGH, PA ZIP+4 ► 152			
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	N/A		
16	At any time during calendar year 2014, did the foundation have an interest in or a signature or other authority	<i>1</i> .	Yes	No
	over a bank, securities, or other financial account in a foreign country?	16		X
	See the instructions for exceptions and filing requirements for FinCEN Form 114, (formerly TD F 90-22.1) If			
	"Yes," enter the name of the foreign country ▶			
Par	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?	No		
	(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? Yes	i i		
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	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)?	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)	No		
	- -	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		X,
_		_		
С	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		X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private	16		 ^
_	operating foundation defined in section 4942(j)(3) or 4942(j)(5))			1
а	At the end of tax year 2014, did the foundation have any undistributed income (lines 6d and			1 1
_	6e. Part XIII) for tax year(s) beginning before 2014?	No		
	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	N/A	
С	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	ĺ		
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise			
	at any time during the year?	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	N/A	
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its chantable purposes?	4a		Х
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 leonardy before the first day of the tay year beginning in 20142	4b	l	V

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	VII-B	Statements Regarding Activities f			720 Ma	ay Be Req	uired (continue	ed)		
5a		e year did the foundation pay or incur an on propaganda, or otherwise attempt to			ı (sectio	on 4945(e))	?	☐ Yes	X No		
		nce the outcome of any specific public el			4955),	or to carry	on,	П.,			
		y or indirectly, any voter registration driv le a grant to an individual for travel, stud					•	☐ Yes	_	0	
		le a grant to an organization other than a		•			ed in		Д 110		
	section	n 4945(d)(4)(A)? (see instructions) .						☐ Yes	⊠ No		
	purpos	le for any purpose other than religious, on section of cruelty to charter that the prevention of cruelty to ch	ıldren	or anımals?		-		Yes			
b		wer is "Yes" to 5a(1)-(5), did any of the							bed in		
		ns section 53 4945 or in a current notice	_	_			structio	ns)? .	`	5b	N/A
С	If the answ	ions relying on a current notice regardin wer is "Yes" to question 5a(4), does the t maintained expenditure responsibility f	founda	ation claim ex		n from the t	ax	Yes	► L		
		ttach the statement required by Regulat									
6a		undation, during the year, receive any fu onal benefit contract?		•	•	o pay prem	iiums	☐ Yes	ਯਿਨ		
ь	-	onal penefit contract? undation, during the year, pay premiums				. noroenal h	onofit s		[Y] NO	6b	X
U		o 6b, file Form 8870	s, uirec	on maneci	iy, on a	i personai L	enent c	onitact?		0.0	
7a		during the tax year, was the foundation a pa	artv to a	prohibited tax	shelter t	transaction?		☐ Yes	X No		
	If "Yes," d	id the foundation receive any proceeds	or have	e any net inco	me att	ributable to	the tra	nsaction?		7b	N/A
Part		nformation About Officers, Directo	ors, Tı	rustees, Fo	undati	on Manag	gers, F	lighly Pa	aid Em	ploye	es,
1		nd Contractors			.:		/222 in	4 4	1		
	List all Or	ficers, directors, trustees, foundation (a) Name and address	(b) Tit	le, and average urs per week	(c) Co	mpensation not paid,	(d) emple	Contribution oyee benefit	s to plans		nse account,
BNY N	/lellon, N.A	١.	TRUS	ted to position TEE	_	nter -0-)	and der	erred compe	:iisalio <u>ii</u>		
		230-0185, PA 15230-0185		ATTACHED		45,658	NONE			NONE	
	lellon, N A		FEE								
<u> P O B</u>	ox 185 152	230-0185, PA 15230-0185	REIM	BURSEMENT	ļ	-33,029	N/A			N/A	
2	Compens "NONE."	ation of five highest-paid employees	(other	r than those	include	ed on line	1—see	instructi	ons). lí	none,	enter
	(a) Name and	d address of each employee paid more than \$50,00	0	(b) Title, and a hours per v devoted to p	veek	(c) Compe	nsation	(d) Contrib employee plans and compen	benefit deferred		nse account, allowances
NONE											
Total	number of	other employees paid over \$50 000				l	:			NONE	
IULAI		DOGE CHOODYEES DAIO DVEL MOU DUU								INI INI	

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Pa	rt VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Pai and Contractors (continued)	d Employees,
3	Five highest-paid independent contractors for professional services (see instructions). If none, en	ter "NONE."
	(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
NON	<u>VE</u>	
Tota	I number of others receiving over \$50,000 for professional services	NONE
Pa	art IX-A Summary of Direct Charitable Activities	_
	of the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of ganizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1	NONE	
2		
3		
4		
	rt IX-B Summary of Program-Related Investments (see instructions)	_
	escribe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1	NONE	
2		
All	other program-related investments. See instructions	
3	NONE	
Tota	II. Add lines 1 through 3	► NONE
		Form 990-PF (2014)

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

Form 990-PF (2014) JACOB L REISS FOUNDATION 13-6064123 Page 8 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 1a 5.464.068 **b** Average of monthly cash balances . . . 1b 215,395 c Fair market value of all other assets (see instructions) . . . 1c 1d 5,679,463 Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation) 2 Acquisition indebtedness applicable to line 1 assets 3 Subtract line 2 from line 1d . . 3 5,679,463 Cash deemed held for charitable activities Enter 1 ½ % of line 3 (for greater amount, see 4 instructions) 85,192 5 Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4. 5 5,594,271 6 Minimum investment return. Enter 5% of line 5. 279,714 Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here $\blacktriangleright \square$ and do not complete this part.) 1 Minimum investment return from Part X, line 6 2a Tax on investment income for 2014 from Part VI, line 5 . . . Income tax for 2014 (This does not include the tax from Part VI) 2b c Add lines 2a and 2b 2c 7,907 3 Distributable amount before adjustments. Subtract line 2c from line 1 3 271,807 4 Recoveries of amounts treated as qualifying distributions . . . 4 5 Add lines 3 and 4 5 271,807 Deduction from distributable amount (see instructions) 6 Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1 271,807 Part XII Qualifying Distributions (see instructions) Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes Expenses, contributions, gifts, etc —total from Part I, column (d), line 26. 259,052 1a b Program-related investments—total from Part IX-B 1b NONE 2 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., 3 Amounts set aside for specific charitable projects that satisfy the Suitability test (prior IRS approval required) . 3a Cash distribution test (attach the required schedule) 3b Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4 4 259,052 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 6 Adjusted qualifying distributions. Subtract line 5 from line 4 . . . 6 . . Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation

e Excess from 2014

JACOB L REISS FOUNDATION 13-6064123 Form 990-PF (2014) Page 9 Part XIII Undistributed Income (see instructions) (a) (b) (c) (d) Distributable amount for 2014 from Part XI, Corpus Years prior to 2013 2013 2014 line 7 271.807 2 Undistributed income, if any, as of the end of 2014 a Enter amount for 2013 only 243,062 20____, 20____, 20 **b** Total for prior years 3 Excess distributions carryover, if any, to 2014 a From 2009 **b** From 2010 c From 2011 **d** From 2012 e From 2013 . f Total of lines 3a through e 4 Qualifying distributions for 2014 from Part XII, line 4: ▶ \$ 259.052 a Applied to 2013, but not more than line 2a 243,062 **b** Applied to undistributed income of prior years (Election required—see instructions) c Treated as distributions out of corpus (Election required-see instructions) 15,990 d Applied to 2014 distributable amount e Remaining amount distributed out of corpus Excess distributions carryover applied to 2014 (If an amount appears in column (d), the same amount must be shown in column (a)) 6 Enter the net total of each column as indicated below: a Corpus. Add lines 3f, 4c, and 4e Subtract line 5 b Prior years' undistributed income. Subtract line 4b from line 2b 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 d Subtract line 6c from line 6b. Taxable amount-see instructions e Undistributed income for 2013. Subtract line 4a from line 2a Taxable amount—see instructions . f Undistributed income for 2014 Subtract lines 4d and 5 from line 1. This amount must be distributed in 2015 255,817 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) 8 Excess distributions carryover from 2009 not applied on line 5 or line 7 (see instructions) Excess distributions carryover to 2015. Subtract lines 7 and 8 from line 6a 10 Analysis of line 9. a Excess from 2010 . . . **b** Excess from 2011 . . . c Excess from 2012 . . . d Excess from 2013 . . .

Form 9	990-PF (2014) JACOB L REISS FOU	NDATION			13-606	64123 Page 10
Part	XIV Private Operating Foundation	ons (see instruc	tions and Part V	/II-A, question 9)		N/A
1a	If the foundation has received a ruling	or determination l	etter that it is a pri	vate operating		
	foundation, and the ruling is effective for	or 2014, enter the	date of the ruling	▶		
b	Check box to indicate whether the foundation	on is a private opera	iting foundation des	cribed in section	4942(j)(3) or 4942(j)(5)
2a	Enter the lesser of the adjusted net	Tax year		Prior 3 years		
	income from Part I or the minimum	(a) 2014	(b) 2013	(c) 2012	(d) 2011	(e) Total
	investment return from Part X for each year listed	<u> </u>	· · · · · · · · · · · · · · · · · · ·			0
b	85% of line 2a			-		0
	Qualifying distributions from Part XII,					
·	line 4 for each year listed			}		o
	-			+		- 0
d	Amounts included in line 2c not used directly					
	for active conduct of exempt activities .		<u> </u>	-		
е	Qualifying distributions made directly					
	for active conduct of exempt activities					
	Subtract line 2d from line 2c		 			0
3	Complete 3a, b, or c for the					
	alternative test relied upon:					
а	"Assets" alternative test—enter					
	(1) Value of all assets					0
	(2) Value of assets qualifying under					
	section 4942(j)(3)(B)(ı) .					0
b	"Endowment" alternative test—enter 2/3 of minimum investment return shown in					
	Part X, line 6 for each year listed					0
С	"Support" alternative test—enter				ľ	
	(1) Total support other than gross			;		
	investment income (interest,					
	dividends, rents, payments on securities loans (section			1		
	512(a)(5)), or royalties)			1		l o
	(2) Support from general public					<u></u>
	and 5 or more exempt					
	organizations as provided in section 4942(j)(3)(B)(iii)					0
	(3) Largest amount of support from		 	 		
	an exempt organization .					,
	• •		 	 	 	0
Part	(4) Gross investment income XV Supplementary Information	. /Complete thi	nort only if th	o foundation ha	d \$5 000 or mor	
L en		•	•	ie foundation na	a \$5,000 or mor	e in assets at
	any time during the year—s		5.)			
1_	Information Regarding Foundation N			af tha tatal agusub		ha farradation
а	List any managers of the foundation wh					ne touridation
	before the close of any tax year (but or –	ny ii triey nave co	nurbutea more tha	an \$5,000) (See se	ection 507 (d)(2).)	
NON						
b	List any managers of the foundation wh			•		tion of the
	ownership of a partnership or other ent	ity) of which the fo	oundation has a 1	0% or greater inter	est	
<u>NON</u>				-		
2	Information Regarding Contribution,					
	Check here ► 🛛 If the foundation or	nly makes contribu	itions to preselect	ted charitable orgar	nizations and does	not accept
	unsolicited requests for funds. If the for		ifts, grants, etc (s	ee instructions) to	ındıvıduals or orgaı	nizations
	under other conditions, complete items	2a, b, c, and d				
а	The name, address, and telephone nur	nber or e-mail add	dress of the perso	n to whom applicat	tions should be add	dressed [.]
NOT	APPLICABLE					
b	The form in which applications should it	oe submitted and	information and m	naterials they shoul	d include	
	<u>APPLICABLE</u>					
	Any submission deadlines					
	APPLICABLE					
đ	Any restrictions or limitations on award	s, such as by geo	graphical areas, c	charitable fields, kin	ids of institutions, o	or other
No-	factors					
NOT	APPLICABLE					

JACOB L REISS FOUNDATION

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Part XV Supplementary Information (contin	nued)			
3 Grants and Contributions Paid During to	he Year or Approve	d for Fut	ure Payment	
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient	Contribution	
a Paid during the year				
See Attached Statement				
•				1
		:		
				1
				1
				1
				Í
				1
				1
Total		· <u></u>	<u> ▶ 3</u> ;	254,000
b Approved for future payment NONE				
Total			▶ 31	NONE

JACOB L REISS FOUNDATION

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Рa	πχ	VI-A Analysis of Income-Producing Ac	tivities				
		oss amounts unless otherwise indicated.		isiness income	Excluded by sect	ion 512, 513, ar 514	(e)
1	Pro	ogram service revenue:	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income (See instructions)
	а						
	þ						
	C						
	ď						
	e f						
	g	Fees and contracts from government agencies					
2		mbership dues and assessments					
3		rest on savings and temporary cash investments .	:				
4		idends and interest from securities			14	132,728	
5	Net	t rental income or (loss) from real estate:				,	
		Debt-financed property					
		Not debt-financed property					
6		t rental income or (loss) from personal property					-
7		ner investment income			40	077.004	
8 9		n or (loss) from sales of assets other than inventory tincome or (loss) from special events .			18	277,661	
10		t income or (loss) from special events . Dess profit or (loss) from sales of inventory .				-	
11		ner revenue: a					
	b					-	
	С						
	d					_	
	e				,	-	
12	Sul	ototal Add columns (b), (d), and (e)		0		410,389	
71 *	101	tal. Add line 12, columns (b), (d), and (e)				13	410,389
			c)				
(See	e wo	rksheet in line 13 instructions to verify calculation		ent of Exempt	Purnoses		
(See	e wo	rksheet in line 13 instructions to verify calculation VI-B Relationship of Activities to the A	ccomplishm			1 importantly to the	
(See Par Lin	wo it X	rksheet in line 13 instructions to verify calculation VI-B Relationship of Activities to the A	ccomplishme	olumn (e) of Part	XVI-A contributed		
(See Par Lin	t X e No	rksheet in line 13 instructions to verify calculation VI-B Relationship of Activities to the A Explain below how each activity for which incom	ccomplishme	olumn (e) of Part	XVI-A contributed		
(See Par Lin	t X e No	rksheet in line 13 instructions to verify calculation VI-B Relationship of Activities to the A Explain below how each activity for which incom accomplishment of the foundation's exempt purp	ccomplishme	olumn (e) of Part	XVI-A contributed		
(See Par Lin	t X e No	rksheet in line 13 instructions to verify calculation VI-B Relationship of Activities to the A Explain below how each activity for which incom accomplishment of the foundation's exempt purp	ccomplishme	olumn (e) of Part	XVI-A contributed		
(See Par Lin	t X e No	VI-B Relationship of Activities to the A Explain below how each activity for which incom accomplishment of the foundation's exempt purp NOT APPLICABLE	ccomplishme	olumn (e) of Part	XVI-A contributed		
(See Par Lin	t X e No	rksheet in line 13 instructions to verify calculation VI-B Relationship of Activities to the A Explain below how each activity for which incom accomplishment of the foundation's exempt purp	ccomplishme	olumn (e) of Part	XVI-A contributed		
(See Par Lin	t X e No	VI-B Relationship of Activities to the A Explain below how each activity for which incom accomplishment of the foundation's exempt purp NOT APPLICABLE	ccomplishme	olumn (e) of Part	XVI-A contributed		
(See Par Lin	t X e No	VI-B Relationship of Activities to the A Explain below how each activity for which incom accomplishment of the foundation's exempt purp NOT APPLICABLE	ccomplishme	olumn (e) of Part	XVI-A contributed		
(See Par Lin	t X e No	VI-B Relationship of Activities to the A Explain below how each activity for which incom accomplishment of the foundation's exempt purp NOT APPLICABLE	ccomplishme	olumn (e) of Part	XVI-A contributed		
(See Par Lin	t X e No	VI-B Relationship of Activities to the A Explain below how each activity for which incom accomplishment of the foundation's exempt purp NOT APPLICABLE	ccomplishme	olumn (e) of Part	XVI-A contributed		
(See Par Lin	t X e No	VI-B Relationship of Activities to the A Explain below how each activity for which incom accomplishment of the foundation's exempt purp NOT APPLICABLE	ccomplishme	olumn (e) of Part	XVI-A contributed		
(See Par Lin	t X e No	VI-B Relationship of Activities to the A Explain below how each activity for which incom accomplishment of the foundation's exempt purp NOT APPLICABLE	ccomplishme	olumn (e) of Part	XVI-A contributed		
(See Par Lin	t X e No	VI-B Relationship of Activities to the A Explain below how each activity for which incom accomplishment of the foundation's exempt purp NOT APPLICABLE	ccomplishme	olumn (e) of Part	XVI-A contributed		
(See Par Lin	t X e No	VI-B Relationship of Activities to the A Explain below how each activity for which incom accomplishment of the foundation's exempt purp NOT APPLICABLE	ccomplishme	olumn (e) of Part	XVI-A contributed		
(See Par Lin	t X e No	VI-B Relationship of Activities to the A Explain below how each activity for which incom accomplishment of the foundation's exempt purp NOT APPLICABLE	ccomplishme	olumn (e) of Part	XVI-A contributed		
(See Par Lin	t X e No	VI-B Relationship of Activities to the A Explain below how each activity for which incom accomplishment of the foundation's exempt purp NOT APPLICABLE	ccomplishme	olumn (e) of Part	XVI-A contributed		
(See Par Lin	t X e No	VI-B Relationship of Activities to the A Explain below how each activity for which incom accomplishment of the foundation's exempt purp NOT APPLICABLE	ccomplishme	olumn (e) of Part	XVI-A contributed		
(See Par Lin	t X e No	VI-B Relationship of Activities to the A Explain below how each activity for which incom accomplishment of the foundation's exempt purp NOT APPLICABLE	ccomplishme	olumn (e) of Part	XVI-A contributed		
(See Par Lin	t X e No	VI-B Relationship of Activities to the A Explain below how each activity for which incom accomplishment of the foundation's exempt purp NOT APPLICABLE	ccomplishme	olumn (e) of Part	XVI-A contributed		
(See Par Lin	t X e No	VI-B Relationship of Activities to the A Explain below how each activity for which incom accomplishment of the foundation's exempt purp NOT APPLICABLE	ccomplishme	olumn (e) of Part	XVI-A contributed		
(See Par Lin	t X e No	VI-B Relationship of Activities to the A Explain below how each activity for which incom accomplishment of the foundation's exempt purp NOT APPLICABLE	ccomplishme	olumn (e) of Part	XVI-A contributed		
(See Par Lin	t X e No	VI-B Relationship of Activities to the A Explain below how each activity for which incom accomplishment of the foundation's exempt purp NOT APPLICABLE	ccomplishme	olumn (e) of Part	XVI-A contributed		

JACOB L REISS FOUNDATION

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Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable **Exempt Organizations** Did the organization directly or indirectly engage in any of the following with any other organization described Yes No in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political Transfers from the reporting foundation to a noncharitable exempt organization of: 1a(1) (2) Other assets . . 1a(2) Other transactions: N 20 (1) Sales of assets to a noncharitable exempt organization 1b(1) (2) Purchases of assets from a noncharitable exempt organization 1b(2) (3) Rental of facilities, equipment, or other assets 1b(3) (4) Reimbursement arrangements . . . 1b(4) (5) Loans or loan guarantees . . . 1b(5) (6) Performance of services or membership or fundraising solicitations 1b(6) Х Sharing of facilities, equipment, mailing lists, other assets, or paid employees . . . 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. (c) Name of noncharitable exempt organization (b) Amount involved (d) Description of transfers, transactions, and sharing arrangements NOT APPLICABLE Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations ☐ Yes ☒ No described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? b If "Yes," complete the following schedule (a) Name of organization (b) Type of organization (c) Description of relationship Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge Sign May the IRS discuss this return 4/9/2015 VICE PRESIDENT Here (see instructions)? X Yes No Signature of officer or trustee Date Print/Type preparer's name Preparer's signature Paid Check 🗓 if Shawn P. Hanlon 4/9/2015 self-employed P00965923 **Preparer** Firm's name ► PRICEWATERHOUSECOOPERS LLP Firm's EIN ► 13-4008324 Use Only Firm's address ► 600 GRANT STREET, PITTSBURGH, PA 15219 (412) 355-6000

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Part I, Line 6 (990-PF) - Gain/Loss from Sale of Assets Other Than Inventory

Long Term CG Distributions 76,136 818,280 540,617
(5,135) Capital Gains/Losses Other sales
Check "X" if
Check "X" if Purchaser
Check X' if Purchaser is a Date
Check "X" if Purchaser is a
<u> </u>
<u> </u>
Check "X"
1 -

Part I, Line 18 (990-PF) - Taxes

	12,367	2,166		0 0
Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
1 FOREIGN TAX WITHHELD	2,166	2,166		
2 PY EXCISE TAX DUE	3,281			
3 ESTIMATED EXCISE PAYMENTS	6,920			

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			3,786,886	3,981,245	5,479,391
		Basis of	Book Value	Book Value	FMV
	Asset Description	Valuation	Beg. of Year	End of Year	End of Year
-				0	
7	ACTAVIS PLC		0	50,404	90,094
က	DREYFUS STRATEGIC VALUE F-Y		0	182,244	183,760
4	APPLE COMPUTER INC COM		0	15,076	129,696
2	BNY MELLON INCOME STK FD CL M		0	186,800	269,249
9	BNY MELLON CORP BOND-M		0	275,000	269,759
7	MUN OPPORTUNITIES FD CL M		0	000'06	100,092
8	BNY MELLON MID CAP STK FD CL M		0	275,000	388,917
6	BNY MELLON INTL APPR FD CL M		0	152,404	162,603
10	BNY MELLON S/T US GVT SECS FD CL M		0	199,498	197,507
11	BNY MELLON SMALL CAP STK FD CL M S		0	104,964	147,949
12	BNY MELLON EMERGING MKTS FD CL M		0	351,976	334,603
13	CELGENE CORP		0	27,044	201,348
14	CISCO SYS INC		0	4,148	55,630
15	COSTCO WHSL CORP NEW		0	44,632	106,312
16	DISNEY (WALT) COMPANY HOLDING CO		0	48,747	141,285
11	DREYFUS YIELD ENH STRA T-Y		0	300,000	297,541
48	DREYFUS ALTERN DIVERS STR-Y		0	250,000	250,358
19	DREYFUS INFL TN ADJ SEC-Y		0	75,000	64,560
70	DREYFUS PREM LT TRM HI YLD-R		0	65,482	68,119
7	DREYFUS GLOBAL REAL ES SEC-Y		0	401,515	336,997
2	DREYFUS DIVERSIFIED EM MK-Y		0	000'09	63,311
23	DREYFUS/NEWTON INTERN EQTY-Y		0	100,000	115,321
2	EXXON MOBIL CORP		0	1,217	110,940
22	GOOGLE INC		0	46,586	79,599
92	GOOGLE INC		0	46,708	78,960
27	HOME DEPOT INC USD 0 05		0	38,588	167,952
78	INTEL CORPORATION		0	38,688	72,580
59	J P MORGAN CHASE & CO		0	52,112	100,128
90	JOHNSON & JOHNSON COM		0	54,070	104,570
31	JOHNSON CONTROLS INC		0	31,602	41,089
32	PFIZER INC COM		0	427	140,175
33	PROCTER & GAMBLE CO COM		0	42,953	118,417
发	SHIRE PHARMACEUTICALS GROUP		0	20,826	42,508
35	DREYFUS SELECT MGER S/C GR-Y		0	75,000	94,635
36	DREYFUS INTENATION STOCK-Y		0	100,000	107,606
37	DREYFUS SELECT MGER S/C VL-Y		0	75,000	86,872
88	TCW EMERGING MARKETS INCOME FUNI		0	44,120	40,851
39	UNITED TECHNOLOGIES CORP		0	34,877	92,000
6	YUM BRANDS INC		0	18,537	25,498

Part III (990-PF) - Changes in Net Assets or Fund Balances

Line 5 - Decreases not included in Part III, Line 2

1	ROC COST ADJ ON CUSIP - 87234N765	1	380
2	2015 GRANT REVERSAL FOR 2014 DIST - SISTERS OF ST. JOSEPH	2	7,000
_3	Total	3	7,380

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Part IV (990-PF) - Capital Gains and Lossas for Tax on Investment Income

		_	_	_	_	_	_		_	_								_		
	201,525	Gains Minus Excess	of FMV Over Adjusted	Basis or Losses	33.227	-502	-6.474	-7.184	80,850	21,940	-8.143	-6,903	2.846	29,768	-10,501	-7.775	22 398	24.137	9.621	22,400
			Excess of FMV	Over Adi Basis																
	0	Adjusted Basis	as of	12/31/69	0	0	0	0		0	0	0	0		0	0	0	0	0	0
	0		FMV as of	12/31/69	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	201,525			Gain or Loss	33,227	-502	-8,474	-7,164	90,650	21,940	-6,143	6,903	2,846	29,768	10,501	577.7-	22,398	24,137	9,621	22,400
	540,619	Cost or Other	Basis Plus	Expense of Sale	5,132	100,502	30,614	43,024	12,020	12,999	44 500	99,460	34,597	304	18,723	59,258	9,647	22 842	13,028	33,969
	0			Adjustments	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	0		Depreciation	Allowed																
	742,144		Gross	Sales Price	38,359	100,000	24,140	35,860	92,670	34,939	38,357	92,557	37,443	30 072	8,222	51,483	32,045	46,979	22,649	696'95
			Date	Sold	8/4/2014	8/4/2014	1/31/2014	1/31/2014	12/12/2014	8/4/2014	2/3/2014	8/4/2014	8/4/2014	8/4/2014	12/26/2014	12/26/2014	8/4/2014	12/12/2014	8/4/2014	12/12/2014
			Oate	Acquired	11/22/2008	12/19/2013 8/4/2014	12/29/2010 1/31/2014	9/29/2010	12/28/2005 12/12/2014	12/31/2009 8/4/2014	8/5/2011	3/29/2006	12/27/2011	12/31/1969	7/29/2011 12/26/2014	6/14/2002	12/31/2002	6/14/2002	9/27/2001	9/29/2005 12/12/2014
			Acquisition	Method																
76,136	0			CUSIP #	037833100	05569M780	05569M855	05569M855	151020104	254687108	261980494	261980759	261980759	30231G102	35871D857	369604103	437076102	459200101	46625H100	98956P102
Long Term CG Distributions	Short Term CG Distributions			Description of Property Sold	1 APPLE INC	2 BNY MELLON S/T US GOV SECS-M	3 BNY MELLON EMERGING MKTS-M	4 BNY MELLON EMERGING MKTS-M	S CELGENE CORP	6 WALT DISNEY CO/THE	7 DREYFUS EMG MKT DEBT LOC C-I	8 DREYFUS HIGH YIELD-I	9 DREYFUS HIGH YIELD-I	10 EXXON MOBIL CORP	11 FREEPORT-MCMORAN INC	12 GENERAL ELECTRIC CO	13 HOME DEPOT INC	14 INTERNATIONAL BUSINESS MACHINES	15 JP MORGAN CHASE & CO	16 ZIMMER HOLDINGS INC

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Part VIII, Line 1 (990-PF) - Compensation of Officers, Directors, Trustees and Foundation Managers

_		,	
	Expense Account	NONE	N/A
•	Benefits		47
12,629	Avg Hrs Compensation Br	45,6581	-33,029 N/A
	Avg Hrs Per Week	SEE ATTAC	REIMBURSI
	Title	TRUSTEE	FEE
	Foreign Country		
	Zip Code	15230-0185	15230-0185
	State	ΡA	A A
	City	15230-0185	15230-0185
	Street	X P O Box 185	X P O Box 185
	Check "X" if Business	×	×
	Name	BNY Mellon, N.A	BNY Mellon, N.A

Part VI, Line 6a (990-PF) - Estimated Tax Payments

		Date	Amount
	Credit from prior year return	 1	0
2	First quarter estimated tax payment	 5/9/2014 2	1,730
	Second quarter estimated tax payment .	 6/11/2014 3	1,730
4	Third quarter estimated tax payment .	 9/10/2014 4	1,730
5	Fourth quarter estimated tax payment	 12/9/2014 5	1,730
6	Other payments	 6	
_7	Total	 7	6,920

4/9/2015 9:50:45 AM - 1539 - MNY - JACOB L REISS FOUNDATION

Distributable amounts for 2013 that remained undistributed at the beginning of the 2014 tax year	1	243,062
	2	
	3 <u></u>	
	4	
	5	
	6	
	7	
	8	
	9	
Total	10	243.0

Attachment to Form 990PF Part VIII, Column (b) Title and Average Hours Per Week Devoted To Position

The compensation reported in column (b) paid to BNY Mellon, N.A. as Corporate Trustee is calculated based on market value and current fee schedule. It is not determined on an hourly basis. Corporate Trustee services include administrative responsibilities, grant requirements, recordkeeping, investment management, income collection, statement and accounting services, and regulatory reporting.

JACOB L REISS FOUNDATION	_			13-606	34123 Page	<u>1 of 5</u>
Continuation of Part XV, Lir	ne 3a (990-PF) -	Gran	ts and Cont	ributions Paid	d During th	e Year
Recipient(s) paid during the year	10 00 1000 117	<u> </u>	to and John	inbationo i ait	a Daring ti	10 1001
Name						
ST VINCENT'S NURSING HOME						
Street				<u>-</u>		
315 EAST LINDSEY ROAD						
City		State	Zip Code	Foreign Cour	itry	-
CEDAR GROVE		NJ	07009	J	,	
Relationship	Foundation Status		10.000			
NONE	PC					
Purpose of grant/contribution	<u> </u>				Amount	
GENERAL OPERATING PURPOSES					Amount	E 000
OCITETAL OF ENATING FORFOSES					<u> </u>	5,000
Name						
FALMOUTH HOSPITAL						
Street						
100 TERACE HEUN DRIVE						
City		State	Zip Code	Foreign Coun	itry	
FALMOUTH		MA	02540	, croigii couii	· y	
Relationship	Foundation Status		102040			
NONE	PC					
Purpose of grant/contribution	JFC				A	
					Amount	5 000
GENERAL OPERATING PURPOSES					<u> </u>	5,000
Name						
ST ANTHONY SCHOOL						
Street				 -		
55 OAK STREET, P O BOX 808						
City	· · · · · ·	Ctata	7in Codo	Faraina Caus	.4	
_		State	Zip Code	Foreign Coun	itry	
WINSTED	TE 11: 01.1	СТ	06098			
Relationship	Foundation Status					
NONE	PC				_	
Purpose of grant/contribution					Amount	
					Amount	
GENERAL OPERATING PURPOSES					Amount	10,000
GENERAL OPERATING PURPOSES					Amount	10,000
GENERAL OPERATING PURPOSES Name	THE SACRED HEA	DT SCL	AND ARMIR ELINI	. <u> </u>	Amount	10,000
GENERAL OPERATING PURPOSES Name STUART COUNTRY DAY SCHOOL OF	THE SACRED HEA	RT SCH	IOLARHIP FUNI	 D	Amount	10,000
Mame STUART COUNTRY DAY SCHOOL OF Street	THE SACRED HEA	RT SCH	IOLARHIP FUNI	D	Amount	10,000
Name STUART COUNTRY DAY SCHOOL OF Street 1200 STUART DRIVE	THE SACRED HEA				1	10,000
Name STUART COUNTRY DAY SCHOOL OF Street 1200 STUART DRIVE City	THE SACRED HEA	State	Zip Code) Foreign Coun	1	10,000
Name STUART COUNTRY DAY SCHOOL OF Street 1200 STUART DRIVE City PRINCETON		State NH			1	10,000
Name STUART COUNTRY DAY SCHOOL OF Street 1200 STUART DRIVE City PRINCETON Relationship	Foundation Status	State NH	Zip Code		1	10,000
Name STUART COUNTRY DAY SCHOOL OF Street 1200 STUART DRIVE City PRINCETON Relationship NONE		State NH	Zip Code		itry	10,000
Name STUART COUNTRY DAY SCHOOL OF Street 1200 STUART DRIVE City PRINCETON Relationship NONE Purpose of grant/contribution	Foundation Status	State NH	Zip Code		1	10,000
Name STUART COUNTRY DAY SCHOOL OF Street 1200 STUART DRIVE City PRINCETON Relationship NONE	Foundation Status	State NH	Zip Code		itry	10,000
Name STUART COUNTRY DAY SCHOOL OF Street 1200 STUART DRIVE City PRINCETON Relationship NONE Purpose of grant/contribution GENERAL OPERATING PURPOSES	Foundation Status	State NH	Zip Code		itry	
GENERAL OPERATING PURPOSES Name STUART COUNTRY DAY SCHOOL OF Street 1200 STUART DRIVE City PRINCETON Relationship NONE Purpose of grant/contribution GENERAL OPERATING PURPOSES Name	Foundation Status	State NH	Zip Code		itry	
GENERAL OPERATING PURPOSES Name STUART COUNTRY DAY SCHOOL OF Street 1200 STUART DRIVE City PRINCETON Relationship NONE Purpose of grant/contribution GENERAL OPERATING PURPOSES Name THE JULIAN REISS FOUNDATION	Foundation Status	State NH	Zip Code		itry	
Name STUART COUNTRY DAY SCHOOL OF Street 1200 STUART DRIVE City PRINCETON Relationship NONE Purpose of grant/contribution GENERAL OPERATING PURPOSES Name THE JULIAN REISS FOUNDATION Street	Foundation Status	State NH	Zip Code		itry	
Name STUART COUNTRY DAY SCHOOL OF Street 1200 STUART DRIVE City PRINCETON Relationship NONE Purpose of grant/contribution GENERAL OPERATING PURPOSES Name THE JULIAN REISS FOUNDATION Street 17 RIDGEWAY LANE	Foundation Status	State NH	Zip Code 08540	Foreign Coun	Amount	
Name STUART COUNTRY DAY SCHOOL OF Street 1200 STUART DRIVE City PRINCETON Relationship NONE Purpose of grant/contribution GENERAL OPERATING PURPOSES Name THE JULIAN REISS FOUNDATION Street 17 RIDGEWAY LANE City	Foundation Status	State NH	Zip Code 08540 Zip Code		Amount	
Name STUART COUNTRY DAY SCHOOL OF Street 1200 STUART DRIVE City PRINCETON Relationship NONE Purpose of grant/contribution GENERAL OPERATING PURPOSES Name THE JULIAN REISS FOUNDATION Street 17 RIDGEWAY LANE City BOSTON	Foundation Status PC	State NH State MA	Zip Code 08540	Foreign Coun	Amount	
Name STUART COUNTRY DAY SCHOOL OF Street 1200 STUART DRIVE City PRINCETON Relationship NONE Purpose of grant/contribution GENERAL OPERATING PURPOSES Name THE JULIAN REISS FOUNDATION Street 17 RIDGEWAY LANE City BOSTON Relationship	Foundation Status	State NH State MA	Zip Code 08540 Zip Code	Foreign Coun	Amount	
Name STUART COUNTRY DAY SCHOOL OF Street 1200 STUART DRIVE City PRINCETON Relationship NONE Purpose of grant/contribution GENERAL OPERATING PURPOSES Name THE JULIAN REISS FOUNDATION Street 17 RIDGEWAY LANE City BOSTON Relationship NONE	Foundation Status PC	State NH State MA	Zip Code 08540 Zip Code	Foreign Coun	Amount	
Name STUART COUNTRY DAY SCHOOL OF Street 1200 STUART DRIVE City PRINCETON Relationship NONE Purpose of grant/contribution GENERAL OPERATING PURPOSES Name THE JULIAN REISS FOUNDATION Street 17 RIDGEWAY LANE City BOSTON Relationship	Foundation Status PC	State NH State MA	Zip Code 08540 Zip Code	Foreign Coun	Amount	
Name STUART COUNTRY DAY SCHOOL OF Street 1200 STUART DRIVE City PRINCETON Relationship NONE Purpose of grant/contribution GENERAL OPERATING PURPOSES Name THE JULIAN REISS FOUNDATION Street 17 RIDGEWAY LANE City BOSTON Relationship NONE Purpose of grant/contribution	Foundation Status PC	State NH State MA	Zip Code 08540 Zip Code	Foreign Coun	Amount	10,000
Name STUART COUNTRY DAY SCHOOL OF Street 1200 STUART DRIVE City PRINCETON Relationship NONE Purpose of grant/contribution GENERAL OPERATING PURPOSES Name THE JULIAN REISS FOUNDATION Street 17 RIDGEWAY LANE City BOSTON Relationship NONE Purpose of grant/contribution GENERAL OPERATING PURPOSES	Foundation Status PC	State NH State MA	Zip Code 08540 Zip Code	Foreign Coun	Amount	
Name STUART COUNTRY DAY SCHOOL OF Street 1200 STUART DRIVE City PRINCETON Relationship NONE Purpose of grant/contribution GENERAL OPERATING PURPOSES Name THE JULIAN REISS FOUNDATION Street 17 RIDGEWAY LANE City BOSTON Relationship NONE Purpose of grant/contribution GENERAL OPERATING PURPOSES Name THE JULIAN REISS FOUNDATION Street 17 RIDGEWAY LANE City BOSTON Relationship NONE Purpose of grant/contribution GENERAL OPERATING PURPOSES Name	Foundation Status PC Foundation Status	State NH State MA	Zip Code 08540 Zip Code	Foreign Coun	Amount	10,000
Name STUART COUNTRY DAY SCHOOL OF Street 1200 STUART DRIVE City PRINCETON Relationship NONE Purpose of grant/contribution GENERAL OPERATING PURPOSES Name THE JULIAN REISS FOUNDATION Street 17 RIDGEWAY LANE City BOSTON Relationship NONE Purpose of grant/contribution GENERAL OPERATING PURPOSES Name ST JOSEPH'S ADDICTION AND TREA	Foundation Status PC Foundation Status	State NH State MA	Zip Code 08540 Zip Code	Foreign Coun	Amount	10,000
Name STUART COUNTRY DAY SCHOOL OF Street 1200 STUART DRIVE City PRINCETON Relationship NONE Purpose of grant/contribution GENERAL OPERATING PURPOSES Name THE JULIAN REISS FOUNDATION Street 17 RIDGEWAY LANE City BOSTON Relationship NONE Purpose of grant/contribution GENERAL OPERATING PURPOSES Name STJOSEPH'S ADDICTION AND TREA	Foundation Status PC Foundation Status PC	State NH State MA	Zip Code 08540 Zip Code	Foreign Coun	Amount	10,000
Name STUART COUNTRY DAY SCHOOL OF Street 1200 STUART DRIVE City PRINCETON Relationship NONE Purpose of grant/contribution GENERAL OPERATING PURPOSES Name THE JULIAN REISS FOUNDATION Street 17 RIDGEWAY LANE City BOSTON Relationship NONE Purpose of grant/contribution GENERAL OPERATING PURPOSES Name ST JOSEPH'S ADDICTION AND TREATING PURPOSES Street 159 GLENWOOD DRIVE P O BOX 470	Foundation Status PC Foundation Status PC	State NH State MA	Zip Code 08540 Zip Code 02114	Foreign Coun	Amount	10,000
Name STUART COUNTRY DAY SCHOOL OF Street 1200 STUART DRIVE City PRINCETON Relationship NONE Purpose of grant/contribution GENERAL OPERATING PURPOSES Name THE JULIAN REISS FOUNDATION Street 17 RIDGEWAY LANE City BOSTON Relationship NONE Purpose of grant/contribution GENERAL OPERATING PURPOSES Name ST JOSEPH'S ADDICTION AND TREATING PURPOSES Street 159 GLENWOOD DRIVE P O BOX 470 City	Foundation Status PC Foundation Status PC	State NH State MA	Zip Code 08540 Zip Code 02114	Foreign Coun	Amount	10,000
Name STUART COUNTRY DAY SCHOOL OF Street 1200 STUART DRIVE City PRINCETON Relationship NONE Purpose of grant/contribution GENERAL OPERATING PURPOSES Name THE JULIAN REISS FOUNDATION Street 17 RIDGEWAY LANE City BOSTON Relationship NONE Purpose of grant/contribution GENERAL OPERATING PURPOSES Name ST JOSEPH'S ADDICTION AND TREAS Street 159 GLENWOOD DRIVE P O BOX 470 City SARANAC LAKE	Foundation Status PC Foundation Status PC	State NH State MA	Zip Code 08540 Zip Code 02114	Foreign Coun	Amount	10,000
Name STUART COUNTRY DAY SCHOOL OF Street 1200 STUART DRIVE City PRINCETON Relationship NONE Purpose of grant/contribution GENERAL OPERATING PURPOSES Name THE JULIAN REISS FOUNDATION Street 17 RIDGEWAY LANE City BOSTON Relationship NONE Purpose of grant/contribution GENERAL OPERATING PURPOSES Name ST JOSEPH'S ADDICTION AND TREATING PURPOSES Street 159 GLENWOOD DRIVE P O BOX 470 City	Foundation Status PC Foundation Status PC	State NH State MA	Zip Code 08540 Zip Code 02114	Foreign Coun	Amount	10,000
Name STUART COUNTRY DAY SCHOOL OF Street 1200 STUART DRIVE City PRINCETON Relationship NONE Purpose of grant/contribution GENERAL OPERATING PURPOSES Name THE JULIAN REISS FOUNDATION Street 17 RIDGEWAY LANE City BOSTON Relationship NONE Purpose of grant/contribution GENERAL OPERATING PURPOSES Name ST JOSEPH'S ADDICTION AND TREAS Street 159 GLENWOOD DRIVE P O BOX 470 City SARANAC LAKE	Foundation Status PC Foundation Status PC TMENT CENTERS	State NH State MA	Zip Code 08540 Zip Code 02114	Foreign Coun	Amount	10,000
Name STUART COUNTRY DAY SCHOOL OF Street 1200 STUART DRIVE City PRINCETON Relationship NONE Purpose of grant/contribution GENERAL OPERATING PURPOSES Name THE JULIAN REISS FOUNDATION Street 17 RIDGEWAY LANE City BOSTON Relationship NONE Purpose of grant/contribution GENERAL OPERATING PURPOSES Name ST JOSEPH'S ADDICTION AND TREA Street 159 GLENWOOD DRIVE P O BOX 470 City SARANAC LAKE Relationship	Foundation Status PC Foundation Status PC TMENT CENTERS	State NH State MA	Zip Code 08540 Zip Code 02114	Foreign Coun	Amount	10,000

JACOB L REISS FOUNDATION				13-606	4123 Page	2 of 5
Continuation of Part XV, Lir	ne 3a (990-PF) -	Gran	ts and Cont	ributions Paid	d During th	ne Year
Recipient(s) paid during the year	(00001)		<u> </u>		<u> </u>	
Name FAMILIES FIRST						
Street						
196 WATER STREET						
City	-	State	Zip Code	Foreign Coun	try	
ELIZABETH TOWN		NY	19232	Foreign Coun	шу	
Relationship	Foundation Status		113232			<u>-</u>
NONE	PC					
Purpose of grant/contribution	<u> </u>				Amount	
GENERAL OPERATING PURPOSES					Amount	10,000
						10,000
Name						
SOCIETY OF THE HOLY CHILD JESU	<u>S</u>	_				
Street						
1341 MONTGOMERY AVENYE			l=: a :	<u> </u>		
City			Zip Code	Foreign Coun	try	
ROSEMONT	TE. 14: 04.4	PA	19010			
Relationship	Foundation Status					
NONE	JPC				14	
Purpose of grant/contribution					Amount	
GENERAL OPERATING PURPOSES						5,000
Name						
NORTHWESTERN CONNECTICUT YN	ICA INC					
Street						
259 PROSPECT STREEET						
City		State	Zip Code	Foreign Coun	try	
TORRINGTON		CT	06790	_		
Relationship	Foundation Status					
NONE	PC					
Purpose of grant/contribution					Amount	
GENERAL OPERATING PURPOSES						6,000
••						
Name						
Name ALZHEIMER'S ASSOCIATION						
ALZHEIMER'S ASSOCIATION Street			<u></u>			
ALZHEIMER'S ASSOCIATION Street			-			
ALZHEIMER'S ASSOCIATION Street 360 LEXINGTON AVENUE		State	Zip Code	Foreign Coun	trv	
ALZHEIMER'S ASSOCIATION Street 360 LEXINGTON AVENUE City			Zip Code	Foreign Coun	try	
ALZHEIMER'S ASSOCIATION Street 360 LEXINGTON AVENUE	Foundation Status	State NY	Zip Code 10017	Foreign Coun	try	
ALZHEIMER'S ASSOCIATION Street 360 LEXINGTON AVENUE City NEW YORK	Foundation Status			Foreign Coun	try	
ALZHEIMER'S ASSOCIATION Street 360 LEXINGTON AVENUE City NEW YORK Relationship				Foreign Coun	try	
ALZHEIMER'S ASSOCIATION Street 360 LEXINGTON AVENUE City NEW YORK Relationship NONE				Foreign Coun		3,000
ALZHEIMER'S ASSOCIATION Street 360 LEXINGTON AVENUE City NEW YORK Relationship NONE Purpose of grant/contribution GENERAL OPERATING PURPOSES				Foreign Coun		3,000
ALZHEIMER'S ASSOCIATION Street 360 LEXINGTON AVENUE City NEW YORK Relationship NONE Purpose of grant/contribution GENERAL OPERATING PURPOSES Name	PC			Foreign Coun		3,000
ALZHEIMER'S ASSOCIATION Street 360 LEXINGTON AVENUE City NEW YORK Relationship NONE Purpose of grant/contribution GENERAL OPERATING PURPOSES Name MERCY CARE FOR THE ADIRONDAC	PC			Foreign Coun		3,000
ALZHEIMER'S ASSOCIATION Street 360 LEXINGTON AVENUE City NEW YORK Relationship NONE Purpose of grant/contribution GENERAL OPERATING PURPOSES Name MERCY CARE FOR THE ADIRONDAC Street	PC			Foreign Coun		3,000
ALZHEIMER'S ASSOCIATION Street 360 LEXINGTON AVENUE City NEW YORK Relationship NONE Purpose of grant/contribution GENERAL OPERATING PURPOSES Name MERCY CARE FOR THE ADIRONDAC Street 184 OLD MILITARY ROAD	PC	NY	10017		Amount	3,000
ALZHEIMER'S ASSOCIATION Street 360 LEXINGTON AVENUE City NEW YORK Relationship NONE Purpose of grant/contribution GENERAL OPERATING PURPOSES Name MERCY CARE FOR THE ADIRONDAC Street 184 OLD MILITARY ROAD City	PC	NY State	Zip Code	Foreign Coun	Amount	3,000
ALZHEIMER'S ASSOCIATION Street 360 LEXINGTON AVENUE City NEW YORK Relationship NONE Purpose of grant/contribution GENERAL OPERATING PURPOSES Name MERCY CARE FOR THE ADIRONDAC Street 184 OLD MILITARY ROAD City LAKE PLACID	PC KS	NY	10017		Amount	3,000
ALZHEIMER'S ASSOCIATION Street 360 LEXINGTON AVENUE City NEW YORK Relationship NONE Purpose of grant/contribution GENERAL OPERATING PURPOSES Name MERCY CARE FOR THE ADIRONDAC Street 184 OLD MILITARY ROAD City LAKE PLACID Relationship	KS Foundation Status	NY State	Zip Code		Amount	3,000
ALZHEIMER'S ASSOCIATION Street 360 LEXINGTON AVENUE City NEW YORK Relationship NONE Purpose of grant/contribution GENERAL OPERATING PURPOSES Name MERCY CARE FOR THE ADIRONDAC Street 184 OLD MILITARY ROAD City LAKE PLACID Relationship NONE	PC KS	NY State	Zip Code		Amount	3,000
ALZHEIMER'S ASSOCIATION Street 360 LEXINGTON AVENUE City NEW YORK Relationship NONE Purpose of grant/contribution GENERAL OPERATING PURPOSES Name MERCY CARE FOR THE ADIRONDAC Street 184 OLD MILITARY ROAD City LAKE PLACID Relationship NONE Purpose of grant/contribution	KS Foundation Status	NY State	Zip Code		Amount	
ALZHEIMER'S ASSOCIATION Street 360 LEXINGTON AVENUE City NEW YORK Relationship NONE Purpose of grant/contribution GENERAL OPERATING PURPOSES Name MERCY CARE FOR THE ADIRONDAC Street 184 OLD MILITARY ROAD City LAKE PLACID Relationship NONE Purpose of grant/contribution GENERAL OPERATING PURPOSES	KS Foundation Status	NY State	Zip Code		Amount	3,000
ALZHEIMER'S ASSOCIATION Street 360 LEXINGTON AVENUE City NEW YORK Relationship NONE Purpose of grant/contribution GENERAL OPERATING PURPOSES Name MERCY CARE FOR THE ADIRONDAC Street 184 OLD MILITARY ROAD City LAKE PLACID Relationship NONE Purpose of grant/contribution GENERAL OPERATING PURPOSES	Foundation Status	NY State	Zip Code		Amount	
ALZHEIMER'S ASSOCIATION Street 360 LEXINGTON AVENUE City NEW YORK Relationship NONE Purpose of grant/contribution GENERAL OPERATING PURPOSES Name MERCY CARE FOR THE ADIRONDAC Street 184 OLD MILITARY ROAD City LAKE PLACID Relationship NONE Purpose of grant/contribution GENERAL OPERATING PURPOSES Name BOYS AND GIRLS CLUB OF MASSEN	Foundation Status	NY State	Zip Code		Amount	
ALZHEIMER'S ASSOCIATION Street 360 LEXINGTON AVENUE City NEW YORK Relationship NONE Purpose of grant/contribution GENERAL OPERATING PURPOSES Name MERCY CARE FOR THE ADIRONDAC Street 184 OLD MILITARY ROAD City LAKE PLACID Relationship NONE Purpose of grant/contribution GENERAL OPERATING PURPOSES Name BOYS AND GIRLS CLUB OF MASSEN Street	Foundation Status	NY State	Zip Code		Amount	
ALZHEIMER'S ASSOCIATION Street 360 LEXINGTON AVENUE City NEW YORK Relationship NONE Purpose of grant/contribution GENERAL OPERATING PURPOSES Name MERCY CARE FOR THE ADIRONDAC Street 184 OLD MILITARY ROAD City LAKE PLACID Relationship NONE Purpose of grant/contribution GENERAL OPERATING PURPOSES Name BOYS AND GIRLS CLUB OF MASSEN Street 60 MAIN STREET (TOWN HALL BUILD	Foundation Status	State NY	Zip Code 12946	Foreign Coun	Amount	
ALZHEIMER'S ASSOCIATION Street 360 LEXINGTON AVENUE City NEW YORK Relationship NONE Purpose of grant/contribution GENERAL OPERATING PURPOSES Name MERCY CARE FOR THE ADIRONDAC Street 184 OLD MILITARY ROAD City LAKE PLACID Relationship NONE Purpose of grant/contribution GENERAL OPERATING PURPOSES Name BOYS AND GIRLS CLUB OF MASSEN Street 60 MAIN STREET (TOWN HALL BUILD City	Foundation Status	State NY	Zip Code 12946		Amount	
ALZHEIMER'S ASSOCIATION Street 360 LEXINGTON AVENUE City NEW YORK Relationship NONE Purpose of grant/contribution GENERAL OPERATING PURPOSES Name MERCY CARE FOR THE ADIRONDAC Street 184 OLD MILITARY ROAD City LAKE PLACID Relationship NONE Purpose of grant/contribution GENERAL OPERATING PURPOSES Name BOYS AND GIRLS CLUB OF MASSEN Street 60 MAIN STREET (TOWN HALL BUILD City MASSENA	Foundation Status PC A DING - ROOM 9)	State NY	Zip Code 12946	Foreign Coun	Amount	
ALZHEIMER'S ASSOCIATION Street 360 LEXINGTON AVENUE City NEW YORK Relationship NONE Purpose of grant/contribution GENERAL OPERATING PURPOSES Name MERCY CARE FOR THE ADIRONDAC Street 184 OLD MILITARY ROAD City LAKE PLACID Relationship NONE Purpose of grant/contribution GENERAL OPERATING PURPOSES Name BOYS AND GIRLS CLUB OF MASSEN Street 60 MAIN STREET (TOWN HALL BUILD City MASSENA Relationship	Foundation Status PC A DING - ROOM 9) Foundation Status	State NY	Zip Code 12946	Foreign Coun	Amount	
ALZHEIMER'S ASSOCIATION Street 360 LEXINGTON AVENUE City NEW YORK Relationship NONE Purpose of grant/contribution GENERAL OPERATING PURPOSES Name MERCY CARE FOR THE ADIRONDAC Street 184 OLD MILITARY ROAD City LAKE PLACID Relationship NONE Purpose of grant/contribution GENERAL OPERATING PURPOSES Name BOYS AND GIRLS CLUB OF MASSEN Street 60 MAIN STREET (TOWN HALL BUILD City MASSENA	Foundation Status PC A DING - ROOM 9)	State NY	Zip Code 12946	Foreign Coun	try	

JACOB L REISS FOUNDATION			_	13-606	4123 Page	3 of 5
Continuation of Part XV, Lin	e 3a (990-PF) -	Gran	ts and Cont	ributions Paid	During th	e Year
Recipient(s) paid during the year	· · · · · · · · · · · · · · · · · · ·			-		
Name						
CATHOLIC CHARITIES ARCHDIOCES	E OF HARTEORD					
Street	L OF HARTIONS					
839-841 ASYLUM AVENUE						
City		State	Zip Code	Foreign Coun	trv	
HARTFORD		СТ	06105		,	
Relationship	Foundation Status			 		
NONE	PC					
Purpose of grant/contribution	•				Amount	
GENERAL OPERATING PURPOSES						10,000
Name						
MARYKNOLL SISTERS						
Street						
P O BOX 331						
City .		State	Zip Code	Foreign Coun	trv	
NARTJBIKK_		TN	10545-0311		·· <i>y</i>	
Relationship	Foundation Status		110010 0011	1		
NONE	PC					
Purpose of grant/contribution					Amount	
GENERAL OPERATING PURPOSES						5,000
Nama					•	-
Name	NOUE A					
MARYKNOLL FATHERS ATTN FR LEC	SHEA					
P O BOX 302						
City		Ctata	7:- Codo	Faraira Caus		
MARYKNOLL		State NY	Zip Code 10545-0311	Foreign Coun	try	
Relationship	Foundation Status	INT	110545-0511			
NONE	PC					
Purpose of grant/contribution	<u>ILO</u>				Amount	
GENERAL OPERATING PURPOSES					Amount	5,000
						0,000
Name						
THE SHRINERS HOSPITAL FOR CHIL	DREN					
Street						
2425 STOCKTON BLVD			T=- 0 1	<u> </u>		
City			Zip Code	Foreign Coun	try	
SACRAMENTO Political Polit	Foundation Status	CA	95817	<u> </u>		
Relationship NONE	PC					
Purpose of grant/contribution	JFC		 ·		Amount	
GENERAL OPERATING PURPOSES					Amount	5,000
OLIVERAL OF LIVATING FORFOSES			•		1	3,000
Name						
ALISA ANN RUCH BURN FOUNDATIO	<u>N</u>			- 		_
Street						
2501 WEST BURBANK BLVD SUITE 2	01		γ	·		
City			Zip Code	Foreign Coun	try	
BURBANK	1	CA	91505			
Relationship	Foundation Status					
NONE	PC		··· -··		T	
Purpose of grant/contribution					Amount	
GENERAL OPERATING PURPOSES					<u> </u>	5,000
Name						
BASCOM PALMER EYE INSTITUTE OF	F THE PALM BEACH	IES				
Street						
7101 FARWAY DRIVE						
City		State	Zip Code	Foreign Coun	try	
PALM BEACH GARDENS		FL	33418			
Relationship	Foundation Status					
NONE	PC					
Purpose of grant/contribution		-			Amount	
GENERAL OPERATING PURPOSES						10 000

JACOB L REISS FOUNDATION				13-606	34123 Page	4 of 5
Continuation of Part XV, Lir	ne 3a (990-PF) -	Gran	ts and Con	ributions Paid	d During th	ne Year
Recipient(s) paid during the year						
- · · · · · · · · · · · · · · · · · · ·						
Name	INDATION					
MONMOUTH MEDICAL CENTER FOU	INDATION					
300 2ND AVENUE						
City		State	Zip Code	Foreign Coun	try	
LONG BRANCH		NJ	07740	l oreign ooun	,	
Relationship	Foundation Status		10	_		
NONE	PC					
Purpose of grant/contribution					Amount	
GENERAL OPERATING PURPOSES						25,000
Name						
HOSPITAL FOR SPECIAL SURGERY						
Street						
535 E 70TH ST, 7TH FL						
City		State	Zip Code	Foreign Coun	try	
NEW YORK		NY	10021			
Relationship	Foundation Status					
NONE	PC					
Purpose of grant/contribution					Amount	
GENERAL OPERATING PURPOSES						13,000
Name						
GEORGETOWN UNIVERSITY						
Street						
P.O BOX 571253						
City		State	Zip Code	Foreign Coun	trv	
WASHINGTON		DC	20057-1253		•	
Relationship	Foundation Status					
NONE	PC					
Purpose of grant/contribution					Amount	
GENERAL OPERATING PURPOSES					_ <u></u>	25,000
Name						
COMMUNITY SOLUTIONS						
Street						
12 EAST 28TH STREET						
City		State	Zip Code	Foreign Coun	try	
NEW YORK		NY	10016			
Relationship	Foundation Status					
NONE	PC					
Purpose of grant/contribution					Amount	
GENERAL OPERATING PURPOSES						2,000
Name .						
JESUIT VOLUNTEER CORP						
Street						
801 SAINT PAUL STREET						
City		State	Zip Code	Foreign Coun	try	
BALTIMORE		MD	21202			_
Relationship	Foundation Status					
NONE	PC					
Purpose of grant/contribution					Amount	
GENERAL OPERATING PURPOSES						1,000
Name						
ST FRANCIS INN						
Street	· · · · · · · · · · · · · · · · · · ·					
279 ST GEORGE ST						
City		State	Zip Code	Foreign Coun	try	
ST AUGUSTINE		FL	32084		-	
Relationship	Foundation Status					
NONE	PC			· · · · · · · · · · · · · · · · · · ·		
Purpose of grant/contribution					Amount	
GENERAL OPERATIONS PHRPHSCLS						4 000

JACOB L REISS FOUNDATION				13-606	4123 Page 5	of 5
Continuation of Part XV, Lin	ne 3a (990-PF) -	Gran	ts and Con	tributions Paid		
Recipient(s) paid during the year					-	
Name NEW YORK WEILL CORNELL MEDICA	AL CENTER					
Street 1300 YORK AVENUE						
City		State	Zip Code	Foreign Coun	trv	
NEW YORK		NY	10065		,	
Relationship	Foundation Status					
NONE Purpose of grant/contribution	PC				Tā	
GENERAL OPERATING PURPOSES					Amount	3,000
Name RELIGIOUS OF THE SACRED HEART	OF MARY					
Street						
50 WILSON PARK DRIVE		1				
City TARRYTOWN			Zip Code	Foreign Coun	try	
Relationship	Foundation Status	NY	10591			
NONE	PC					
Purpose of grant/contribution GENERAL OPERATING PURPOSES					Amount	7,000
Name						
Street						
City	* **	State	Zip Code	Foreign Coun	try	
Relationship	Foundation Status					
Purpose of grant/contribution					Amount	
Name				.,		-
Street			 -	-		
City		State	Zip Code	Foreign Coun	try	
Relationship	Foundation Status		·			
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Purpose of grant/contribution					Amount	