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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

► Do not enter social security numbers on this form as it may be made public.

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

OMB No 1545-0052

For calendar year 2014 or tax year beginning	, and c	nunny		
Name of foundation			A Employer identificatio	n number
SPECTOR FAMILY FOUNDATION			20-6350166	5
	address)	Room/suite		
12 WEIR LANE			1	507
City or town, state or province, country, and ZIP or foreign p	ostal code		C If exemption application is	pending, check here
A Employer identification number 20-6350166 20-6350166 8 Telephone unable 20-6350166 8 Telephone unable 21 WBTR LANB 12 WBTR LANB 15 for Town, state or prounce, country, and ZIP or foreign postal code CCCUST VALIEY, NY 11560 Check all that apply: Instat return Instal return Amended return Amen				
G Check all that apply: Initial return	Initial return of a former public of	charity	D 1. Foreign organization	ıs, check here
Final return	Amended return		2	050/ 44
Address change	Name change		check here and attach c	computation test,
H Check type of organization: X Section 501(c)(3) ex	kempt private foundation		E If private foundation sta	atus was terminated
			under section 507(b)(1	I)(A), check here 🕨 📖
·	•	rual	F If the foundation is in a	60-month termination
			under section 507(b)(1	I)(B), check here
	mn (d) must be on cash basis.)		<u> </u>	
Part I Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not				(d) Disbursements for charitable purposes
necessarily equal the amounts in column (a))		Unit		(cash basis only)
- ()	5930.		N/A	
Interest on savings and temporary		4		CMA MIDACONTO 1
3 cash investments				STATEMENT 1
	1286/-	T Z Z Z D / •		STATEMENT 2
				
6a Net gain or (loss) from sale of assets not on line 10 Gross sales price for all			-	
D assets on line 6a				+-
Capital gain net income (from Part IV, line 2)		<u> </u>		
Gross sales less returns				+
I .	 - 			
			, 1000	
	18798.	12868.		- Ta
				7700 9.
				I DOM
15 Pension plans, employee benefits			181	i n
9 16a Legal fees			1 6 3 met 8 i	GAA : 1 :
b Accounting fees STMT 3	1500.	0.	1°'L	- 100 0.
c Other professional fees			-INEU	
<u>9</u> 17 Interest				450
[18 Taxes STMT 4	119.	0.		
19 Depreciation and depletion				779
E 20 Occupancy			-	<u> </u>
Ž 21 Travel, conferences, and meetings				
23 Other expenses STMT 5	100.		·	0.
듆 24 Total operating and administrative	1510	^		
expenses. Add lines 13 through 23		U_		13350.
125 CONTRIBUTIONS, GIRS, GRANTS DAID	13350.		 	13330.
26 Total expenses and disbursements.	15060	٨		13350.
\\	15063.	U	•	15550.
	3729.			
a Excess of revenue over expenses and disbursements	3123.	12868	 	-
b Net investment income (if negative, enter -0-) c Adjusted net income (if negative, enter -0-)		12000	N/A	
423501 LHA For Paperwork Reduction Act Notice, see	instructions		41/44	Form 990-PF (2014

LHA For Paperwork Reduction Act Notice, see instructions.

149297.

Form 990-PF (2014)

5 Decreases not included in line 2 (itemize)

Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30

LF	Part IV Capital Gains a	and Losses for Tax	on investment	Income					
		ibe the kind(s) of property sehouse; or common stock,			1 P •	ow acquired Purchase Donation] (a) m)	Date acquired io., day, yr.)	(d) Date sold (mo., day, yr.)
1a	1								
_b	NOI	NE							
c		·					L		
_d	<u> </u>	<u></u>			<u> </u>				
_e	·				<u> </u>				
	(e) Gross sales price	(f) Depreciation allowe (or allowable)		t or other basis xpense of sale				h) Gain or (loss) plus (f) minus (
_ a	·								
_b)								
	1								
e				10/01/00					
_	Complete only for assets showing	··				,		ns (Col. (h) gain but not less thai	
_	(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69		cess of col. (1) col. (j), if any			Los	sses (from col. (h))
a	<u> </u>								
_b)	==							
_0								·	
	1								
e									
2	Capital gain net income or (net cap	oital loss) { If gain, alsoital loss), e	so enter in Part I, line ' enter -0- in Part I, line	7 7	}	2			
3	Net short-term capital gain or (los	s) as defined in sections 122	22(5) and (6):						
	If gain, also enter in Part I, line 8, o		(-, (-,-)				
_	If (loss), enter -0- in Part 1, line 8				لل	3			
L	Part V Qualification U	nder Section 4940(e) for Reduced	lax on Net	Inve	estment II	ncom	e	
(F	or optional use by domestic private	foundations subject to the s	section 4940(a) tax on	net investment ir	ncome	.)			
If s	section 4940(d)(2) applies, leave th	us nart blank							
•••	3000001 4040(d)(E) applico, loavo til	no part olarin.							
	as the foundation liable for the sect			•	rıod?				Yes X No
	"Yes," the foundation does not quali								
1	Enter the appropriate amount in e	ach column for each year; s	ee the instructions de	fore making any e					(4)
	(a) Base period years	A durate d arrelié	(b) ying distributions	Net value of no	(C) anchar	tahla-uca acci	ate	Distrib	(d)
_	Calendar year (or tax year beginnir	ig in) Adjusted quality	<u> </u>	· · · · · · · · · · · · · · · · · · ·	Jilonai			(col. (b) alv	ided by col. (c))
	2013		12481.			26778			.046608
	2012		10205.			25479			.040052
_	2011		8210.			20783			.039503
_	2010		6857.			16649			.041185
_	2009		8253.			13960	73.	1	.059117
	Tetal of line 1 column (d)								226465
	Total of line 1, column (d)	Tuess been period duude th	na total on line O by E	or by the aumber	- of vo			2	.226465
3	Average distribution ratio for the 5 the foundation has been in exister		ie totai on illie 2 by 5,	or by the number	i oi yea	115			.045293
	the fourtoation has been in exister	ice ii iess tiiaii 5 years					-	3	.043233
4	Enter the net value of noncharitab	le-use assets for 2014 from	Part X, line 5					4	273915.
5	Multiply line 4 by line 3							5	12406.
6	Enter 1% of net investment incom	ne (1% of Part I, line 27b)						6	129.
7	Add lines 5 and 6							7	12535.
8	Enter qualifying distributions from	n Part XII, line 4					L	8	13350.
	If line 8 is equal to or greater than See the Part VI instructions.	line 7, check the box in Par	t VI, line 1b, and comp	olete that part usi	ng a 19	% tax rate.			

	rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940	0(b) 4040(a) a= 4	<u> 20-6</u>				2age 4
_			940 - ;	5ee 11	Stru	Clioi	15)
12	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on						
_	Date of ruling or determination letter:					1	20
Ō	Domestic foundations that meet the section 4940(e) requirements in Part V, check here X and 6	enter 1%					<u> 29.</u>
_	of Part I, line 27b	a 10 ani (h)					
	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, lin						0.
	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -C Add lines 1 and 2	J -)	3				$\frac{0.}{29.}$
3 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-	U-)	5			1	$\frac{0.}{29.}$
	Credits/Payments:						<u> </u>
	2014 estimated tax payments and 2013 overpayment credited to 2014 6a		- 1				
	Exempt foreign organizations - tax withheld at source 6b						
	Tax paid with application for extension of time to file (Form 8868) 6c		- [
	Backup withholding erroneously withheld 6d		j				
	Total credits and payments. Add lines 6a through 6d		7				0.
	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached		8				<u> </u>
	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed		9			1	29.
	Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid		10				<u> </u>
	Enter the amount of line 10 to be: Credited to 2015 estimated tax	Refunded	11				
	art VII-A Statements Regarding Activities	included P	<u> </u>				
	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did	it participate or intervene	ın		П	Yes	No
	any political campaign?				1a		Х
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see insti	ructions for the definition)?		1b		X
_	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of						
	distributed by the foundation in connection with the activities.	, , , , , , , , , , , , , , , , , , , ,					
С	Did the foundation file Form 1120-POL for this year?				1c		Х
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:				ŀ		
	(1) On the foundation. ► \$ 0 • (2) On foundation managers. ► \$	0.			l		
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax important						
	managers. ► \$ 0.						
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?				2		X
	If "Yes," attach a detailed description of the activities						
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, a	articles of incorporation, o	ır				
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes			Į	3		X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?			ļ	4a		<u> </u>
b	If "Yes," has it filed a tax return on Form 990-T for this year?		N/	'A	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?			1	_5_		X
	If "Yes," attach the statement required by General Instruction T.						
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:						
	By language in the governing instrument, or						
	By state legislation that effectively amends the governing instrument so that no mandatory directions	that conflict with the state	law	1			
	remain in the governing instrument?			}	6	77	<u> </u>
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part	II, col. (c), and Part XV	,	}	7	X	
_	Fabruary and the state of the s						
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)						
	NY	! (d					
b	of the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney Gene	erai (or designate)			0.	v	
_	of each state as required by General Instruction G? If "No," attach explanation	1)/2) or 4042/:\/E\ for cold	ndar		8b	<u> </u>	
9	, ,		iiuai		9		х
40	year 2014 or the taxable year beginning in 2014 (see instructions for Part XIV)? If "Yes," complete Pa	ait Aiv			10		v

Form 990-PF (2014) SPECTOR FAMILY FOUNDATION	20-6350	0166	_	Page 5
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		X
12 Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person h	ad advisory privileges?			
If "Yes," attach statement (see instructions)		12		X
Did the foundation comply with the public inspection requirements for its annual returns and exemption application	?	13	X	<u> </u>
Website address N/A 14. The heads are in case of N/A	Janhana na N E 1 6 7 1	50 2	607	
	elephone no. $\triangleright 516-75$		<u> </u>	
Located at 12 WEIR LANE, LOCUST VALLEY, NY 15 Section 4047(a)(1) propagate the stable trusts files form 000 PF to leave 5 form 4044. Check here	ZIP+4 ▶ <u>11</u>	1300		$\overline{}$
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	NT	/A	'لـــا
16 At any time during calendar year 2014, did the foundation have an interest in or a signature or other authority over a	•		Yes	No
securities, or other financial account in a foreign country?	a vank,	16	163	X
See the instructions for exceptions and filing requirements for FinCEN Form 114, (formerly TD F 90-22.1). If "Yes," e	enter the name of the	"		
foreign country	enter the hame of the			
Part VII-B Statements Regarding Activities for Which Form 4720 May Be Requi	ired			
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 X No			
(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)				
a disqualified person?	Yes X No			
(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	Yes X No			
(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	Yes X 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 X 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		1		
termination of government service, if terminating within 90 days.)	Yes X 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)?	N/A	1b		
Organizations relying on a current notice regarding disaster assistance check here				
c Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not	corrected			
before the first day of the tax year beginning in 2014?		1c		X
2 Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating	g 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	ar(s) beginning			
before 2014?	Yes X No			
If "Yes," list the years 🕨,,,,,,,,,				1
b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating	ng to incorrect			
valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "I	No" and attach			
statement - see instructions.)	N/A	2b		<u> </u>
c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.				
>				
3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time	r	1		
during the year?	Yes X No			
b If "Yes," did it have excess business holdings in 2014 as a result of (1) any purchase by the foundation or disqualific				
May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 49				
of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use				
Form 4720, to determine if the foundation had excess business holdings in 2014.)	N/A	3b		
4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?		4a		X
b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its char	ritable purpose that			
had not been removed from jeopardy before the first day of the tax year beginning in 2014?		4b	<u></u>	X

Form 990-PF (2014) SPECTOR FAMILY FOUNDATIO Part VII-B Statements Regarding Activities for Which I	N Form 4720 May Be I	Required (control	20-63501	166	Page 6
 5a During the year did the foundation pay or incur any amount to: Carry on propaganda, or otherwise attempt to influence legislation (section) Influence the outcome of any specific public election (see section 4955); of any voter registration drive? Provide a grant to an individual for travel, study, or other similar purposes Provide a grant to an organization other than a charitable, etc., organization 4945(d)(4)(A)? (see instructions) Provide for any purpose other than religious, charitable, scientific, literary, the prevention of cruelty to children or animals? If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und section 53.4945 or in a current notice regarding disaster assistance (see instructions) If the answer is "Yes" to question 5a(4), does the foundation claim exemption for expenditure responsibility for the grant? "Yes," attach the statement required by Regulations section 53.4945. 	n 4945(e))? or to carry on, directly or indirectly or educational purposes, or der the exceptions described actions)? Here from the tax because it maintains 15-5(d).	ectly, Ye Ye Ye for Ye In Regulations	S X No	5b	
 6a Did the foundation, during the year, receive any funds, directly or indirectly, to a personal benefit contract? b Did the foundation, during the year, pay premiums, directly or indirectly, on a pif "Yes" to 6b, file Form 8870. 7a At any time during the tax year, was the foundation a party to a prohibited tax seems. 	personal benefit contract?	_	es X No	6b	X
b If "Yes," did the foundation receive any proceeds or have any net income attributed Part VIII Information About Officers, Directors, Trust		anagers, Highly	N/A	7b	
Paid Employees, and Contractors 1 List all officers, directors, trustees, foundation managers and their	compensation.				
(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) acco all	Expense ount, other owances
JAMES SPECTOR	TRUSTEE				
12 WEIR LANE LOCUST VALLEY, NY 11560	0.00	0.	0.		0.
2 Compensation of five highest-paid employees (other than those income (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	l acco	Expense ount, other lowances
NONE					
Total number of other employees paid over \$50,000			<u> </u>		0

Part VIII Information About Officers, Directors, Trustees, Found Paid Employees, and Contractors (continued)		350166 Page 7
3 Five highest-paid independent contractors for professional services. If none, enter	r "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 Part IX-A Summary of Direct Charitable Activities		0
List the foundation's four largest direct charitable activities during the tax year. Include relevant station number of organizations and other beneficiaries served, conferences convened, research papers pro		Expenses
1 <u>N/A</u>		
2		
3		
4		
Part IX-B Summary of Program-Related Investments Describe the two largest program-related investments made by the foundation during the tax year or	n lines 1 and 2.	Amount
1 <u>N/A</u>		
2		
All other program-related investments. See instructions.		
3		
Total. Add lines 1 through 3	>	0.

<u> </u>	Minimum Investment Return (All domestic foundations must complete this part. Foreign four	ndations, s	ee instructions)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		-
а	Average monthly fair market value of securities	1a	272317.
b	Average of monthly cash balances	1b	5769.
C	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	278086.
е	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	278086.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	4171.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	273915.
6	Minimum investment return Enter 5% of line 5	6	13696.
Р	art XI Distributable Amount (see instructions) (Section 4942(i)(3) and (j)(5) private operating foundations and foreign organizations check here and do not complete this part.)	id certain	
1	Minimum investment return from Part X, line 6	1	13696.
2a	Tax on investment income for 2014 from Part VI, line 5		
b	Income tax for 2014. (This does not include the tax from Part VI.)		
C	Add lines 2a and 2b	2c	129.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	13567.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	13567.
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	13567.
<u>P</u>	Qualifying Distributions (see instructions)	r	
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	13350.
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:		
а		3a	
b	,	3b	
4	Qualifying distributions Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	13350.
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	5	129.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	13221.
	Note The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation of	qualifies for	the section

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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				13567.
2 Undistributed income, if any, as of the end of 2014				
a Enter amount for 2013 only			13182.	
b Total for prior years:		0.		
3 Excess distributions carryover, if any, to 2014:		<u></u>		
a From 2009				
b From 2010				
c From 2011				
d From 2012				
e From 2013				
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2014 from				
Part XII, line 4: ▶\$ 13350.				
a Applied to 2013, but not more than line 2a			13182.	
b Applied to undistributed income of prior			13101.	
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus			, , , , , , , , , , , , , , , , , , ,	
(Election required - see instructions)	0.			
d Applied to 2014 distributable amount				168.
e Remaining amount distributed out of corpus	0.			100.
5 Excess distributions carryover applied to 2014	0.		· · · · · · · · · · · · · · · · · · ·	0.
(If an amount appears in column (d), the same amount must be shown in column (a))				<u> </u>
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	0.			
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 instr.			0.	
f Undistributed income for 2014. Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2015				13399.
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	0.			
9 Excess distributions carryover to 2015				
Subtract lines 7 and 8 from line 6a	0.			
10 Analysis of line 9:				
a Excess from 2010				
b Excess from 2011				
c Excess from 2012				
d Excess from 2013				
e Excess from 2014 423581				

Form 990-PF (2014) SPECTOR	FAMILY FOU	NDATION			550166 Page 10
Part XIV Private Operating F			I-A, question 9)	N/A	
1 a If the foundation has received a ruling o	r determination letter that	t it is a private operating			
foundation, and the ruling is effective fo		•	▶		
b Check box to indicate whether the found	dation is a private operation	ng foundation described		4942(j)(3) or49	942(j)(5)
2 a 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					
b 85% of line 2a					
c Qualifying distributions from Part XII,			ļ ·	*	_
line 4 for each year listed					
d Amounts included in line 2c not					
used directly for active conduct of					
exempt activities					
e Qualifying distributions made directly					
for active conduct of exempt activities.					
Subtract line 2d from line 2c 3 Complete 3a, b, or c for the				1.	
3 Complete 3a, b, or c for the alternative test relied upon:					
a "Assets" alternative test - enter:					
(1) Value of all assets					
(2) Value of assets qualifying under section 4942(i)(3)(B)(i)					
b "Endowment" alternative test - enter					
2/3 of minimum investment return shown in Part X, line 6 for each year listed					1
c "Support" alternative test - enter:			-		
• •					
(1) Total support other than gross investment income (interest,					
dividends, rents, payments on					,
securities loans (section					
512(a)(5)), or royalties)		1			
(2) Support from general public and 5 or more exempt					
organizations as provided in					
section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from					
an exempt organization					
(4) Gross investment income	<u> </u>				
Part XV Supplementary Info			if the foundation	n had \$5,000 or m	ore in assets
at any time during	the year-see inst	ructions.)			
1 Information Regarding Foundation	on Managers:				
a List any managers of the foundation wh	-	than 2% of the total con	tributions received by the	e foundation before the clo	se of any tax
year (but only if they have contributed r					
JAMES SPECTOR					
b List any managers of the foundation wh	no own 10% or more of t	he stock of a corporation	(or an equally large port	ion of the ownership of a p	partnership or
other entity) of which the foundation ha			, , , , - , - , - , - , - , - , - , - ,	-	•
NONE					
2 Information Regarding Contribut	tion Grant Gift Loar	Scholarship etc. D	rograme:	<u></u>	
Check here 🕨 🗶 if the foundation of	only makes contributions	to preselected charitable	organizations and does		
the foundation makes gifts, grants, etc.					0 0.
a The name, address, and telephone num	iber or e-mail address of	the person to whom app	lications should be addre	essed:	
b The form in which applications should	be submitted and informa	ation and materials they s	should include:		
c Any submission deadlines:			·	-	
d Any restrictions or limitations on award	ds, such as by geographic	cal areas, charitable fields	kinds of institutions or	other factors:	
e Any restrictions of infiniations on aware	io, caon as by goographic	our arous, onarnasio notos	, and of monutions, of	Caroli Idoloro.	
423601 11-24-14				 	Form 990-PF (2014)

Supplementary Information (continued) Part XV Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Foundation status of Purpose of grant or contribution show any relationship to Amount any foundation manager Name and address (home or business) or substantial contributor recipient a Paid dunng the year AUTISM NEW JERSEY N/A NON PROFIT AUTISM AWARENESS 500 HORIZON DRIVE, #530 ORGANIZATION ROBBINSVILLE, NJ 08691 1300. CARNEGIE MELLON UNIVERSITY N/A UNIVERISITY EDUCATION 500 FORBES AVENUE PITTSBURGH, PA 15213 <u>1500.</u> DANA FARBER CANCER INSTITUTE INC N/A NON PROFIT MEDICAL RESEARCH 450 BROOKLINE AVENUE ORGANIZATION BOSTON, MA 02215 1500. JEWISH ASSOCIATION ON AGING N/A NON PROFIT SENIOR SERVICES 200 JHF DRIVE ORGANIZATION PITTSBURGH, PA 15217 300. LIVINGSTON FIRE DEPARTMENT COMMUNITY SERVICES N/A NON PROFIT 62 S LIVINGSTON AVENUE ORGANIZATION 200. LIVINGSTON NJ 07039 SEE CONTINUATION SHEET(S) ► 3a Total 13350. b Approved for future payment NONE

▶ 3b

Total

Part XVI-A **Analysis of Income-Producing Activities**

Enter gross amounts unless otherwise indicated.	Unrelate	ed business income	Exclu	ded by section 512, 513, or 514	(e)
Program service revenue:	(a) Business code	(b) Amount	(C) Exclu- sion code	(d) Amount	Related or exempt function income
	Code		0000		
<u> </u>		_	-		
d					
e					
f					
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash					
investments			18		
4 Dividends and interest from securities			18	12867.	
5 Net rental income or (loss) from real estate:					
a Debt-financed property	ĺ				
b Not debt-financed property					
6 Net rental income or (loss) from personal					
property					
7 Other investment income					
8 Gain or (loss) from sales of assets other			<u> </u>		
than inventory					
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue:					
b			 		
d					
12 Subtotal. Add columns (b), (d), and (e)		0.		12868.	0.
13 Total. Add line 12, columns (b), (d), and (e)			L		12868.
(See worksheet in line 13 instructions to verify calculations.)				13	12000.
Part XVI-B Relationship of Activities to Line No Explain below how each activity for which incor					plishment of
the foundation's exempt purposes (other than I					
423821 11-24-14				-	Form 990-PF (2014)

MELVILLE, NY 11747

Part 2		Information Re	egarding Transf		and Transactions	and Re	elationsh		charitable		ge 13
		Exempt Organ								1-2	
					g with any other organiza			on 501(c) of		Yes	No
					7, relating to political org	anizations	?			ļ	
		from the reporting found	ation to a noncharitable	e exempt or	ganization of:					1	
٠.	Cash								1a(1)		<u> </u>
	Other								1a(2)	 -	_X_
		sactions:	N								77
		of assets to a noncharita							15(1)	 	<u>X</u>
		ases of assets from a no		janization					1b(2)		X
		l of facilities, equipment,							1b(3)		X
		oursement arrangements							1b(4)	-	X
		s or loan guarantees rmance of services or me	mharahia ar fundraicin	va colicitatio	nc				1b(5)		X
٠,,		facilities, equipment, ma	•	•					1b(6)		X
	-		- '		ployees dule. Column (b) should :	alwaye eb	ou the fair m	arket value of the acc	1c		
				-	ed less than fair market va	-		-		5615,	
) the value of the goods,			sa 1005 triair iair market ve	aldo III diliy	unsuction	or snaring arrangeme	///, SHOW III		
a) Line n	· · · · · · · · · · · · · · · · · · ·	(b) Amount involved	· · · · · · · · · · · · · · · · · · ·		exempt organization	(0	Description	of transfers, transactions,	and sharing ar	тапоете	nts
		· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·	N/A		—					
				-1,							
											
				-							
											-
					· · · · · · · · · · · · · · · · · · ·	<u></u>					
			<u> </u>		· · · · · · · · · · · · · · · · · · ·						
2a ls t	he four	ndation directly or indirec	tly affiliated with, or rel	ated to, one	or more tax-exempt orga	ınızatıons (described				_
ın s	section	501(c) of the Code (othe	r than section 501(c)(3	3)) or in sect	ion 527?				Yes	X] No
b If "	Yes," cc	omplete the following sch			T	1					
		(a) Name of org	janization		(b) Type of organization	1	(-	c) Description of relat	ionship		
		N/A									
						_					
	-										
	Under	penalties of periupy 1 declare	that I have examined this r	eturn includir	l ng accompanying schedules a	nd statemen	ts and to the h	nest of my knowledge			
Sign					n taxpayer) is based on all info				May the IRS return with th		
Here		//dmo	South		14/19/15	_	Pagi	In to	shown below	(see ins	tr)?
	Sign	nature of officer or trustee	Mou		Date	Z	<u> </u>		LX Yes	·	J No
	J	Pript/Type preparer's na		Preparer's		Date	Ī	Check If P	TIN		
		75.,50 5.050.01.01.01						self- employed			
Paid		ALAN J. CC	HEN			02/	23/15		P00185	ักรถ	
Prep	arer	Firm's name ALA		J CPA	SERVICES,	P.C.		Firm's EIN ► 11			
Use (The state of the s	L. O. COILLI	., OIR					55001		
	-	Firm's address ► 53	4 BROADHOL	LLOW R	OAD STE 45	0					

Phone no. 631-629-4344

Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, show any relationship to any foundation manager or substantial contributor Recipient Foundation Purpose of grant or Amount status of contribution Name and address (home or business) recipient LIVINGSTON POLICE DEPARTMENT N/A NON PROFIT COMMUNITY SERVICES 333 S LIVINGSTON AVENUE ORGANIZATION LIVINGSTON, NJ 07039 200. SAFE HORIZONS N/A NON PROFIT DOMESTIC VIOLENCE 2 LAFAYETTE STREET ORGANIZATION NEW YORK, NY 10007 500. ST. JUDE'S CHILDREN'S RESEARCH N/A NON PROFIT MEDICAL RESEARCH HOSPITAL ORGANIZATION 501 ST. JUDE PLACE 500. MEMPHIS TN 38105 SUPERSTITION MOUNTAIN SEARCH AND NON PROFIT EMERGENCY SERVICES N/A RESCUE ORGANIZATION PO BOX 1123 250. APACHE JUNCTION AZ 85117 SUSAN G. KOMEN FOR THE CURE ADVOCACY N/A NON PROFIT COMMUNITY OUTREACH ORGANIZATION ALLIANCE 5005 LBJ FREEWAY, #250 500. DALLAS, TX 75244 WEST SIDE Y N/A NON PROFIT EDUCATIONAL ORGANIZATION 5 WEST 63RD STREET NEW YORK, NY 10023 100. WILDLIFE CONSERVATION SOCIETY N/A NON PROFIT SAVING ENDANGERED ORGANIZATION SPECIES PO BOX 420235 300. PALM BEACH, FL 32142 WOUNDED WARRIOR PROJECT N/A NON PROFIT MEDICAL RESEARCH 4899 BELFORT ROAD ORGANIZATION JACKSONVILLE, FL 32256 500. ZOOLOGICAL SOCIETY NJ N/A NON PROFIT ANIMAL PRESERVATION ORGANIZATION 560 NORTHFIELD AVENUE WEST ORANGE, NJ 07052 150. PINAL COUNTY SEARCH & RESCUE N/A NON PROFIT VOLUNTEER SEARCH AND 6499 S KINGS RANCH RD ORGANIZATION RESCUE GOLD CANYON, AZ 85118 250, Total from continuation sheets 8550.

Part XV

Supplementary Information

SPECTOR FAMILY FOUNDATION

Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, show any relationship to any foundation manager or substantial contributor Recipient Foundation Purpose of grant or Amount status of contribution Name and address (home or business) recipient AUTISM AWARENESS ANTHONY FASANO FOUNDATION N/A NON PROFIT 60 ROSELAND AVE ORGANIZATION 2200. CALDWELL, NJ 07006 AUTISM SCIENCE FOUNDATION N/A NON PROFIT AUTISM RESEARCH 28 WEST 39TH STREET ORGANIZATION 250. NEW YORK, NY 10018 HEALTH MOVEMBER FOUNDATION N/A NON PROFIT ORGANIZATION PO BOX 1595 <u>500.</u> CULVER CITY, CA 90232 TEMPLE B'NAI ABRAHAM N/A NON PROFIT TEMPLE ORGANIZATION 300 E NORTHFIELD AVE WEST ORANGE NJ 07039 1000. NON PROFIT EDUCATION MOST VALUABLE KIDS N/A ORGANIZATION 11122 STEPHALEE LANE 250. ROCKVILLE, MD 20852 LOCUST LIBRARY N/A NON PROFIT COMMUNITY ORGANIZATION 170 BUCKRAM ROAD 500. LOCUST VALLEY NY 11560 LOCUST VALLEY TENNIS ASSOCIATION N/A NON PROFIT EDUCATIONAL brganization PO BOX 120 500. LOCUST VALLEY, NY 11560 N/A NON PROFIT COMMUNITY NASSAU COUNTY PAL ORGANIZATION 167 BROADWAY 100. HICKSVILLE NY 11801 Total from continuation sheets

Part XV

Supplementary Information

FORM 990-PF INTERE	ST ON SAVII	NGS AND TEM	PORARY (CASH IN	VESTMENTS	STATEMENT	1
SOURCE		(A REVEI PER BO	NUE		(B) VESTMENT COME	(C) ADJUSTEI NET INCOM	
CHARLES SCWAB 96918	952		1.		1.		
TOTAL TO PART I, LI	NE 3		1.		1.		
FORM 990-PF	DIVIDEND	S AND INTER	EST FRO	M SECUR	ITIES	STATEMENT	2
SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDEND	RE'	(A) VENUE BOOKS	(B) NET INVES MENT INCO		
CHARLES SCWAB 96918952	12867	•	0.	12867.	1286	7.	
TO PART I, LINE 4	12867	•	0.	12867.	1286	7.	
FORM 990-PF		ACCOUNTI	NG FEES			STATEMENT	3
DESCRIPTION		(A) EXPENSES PER BOOKS) VEST- NCOME			
ACCOUNTING FEES		1500.		0.			0.
TO FORM 990-PF, PG	1, LN 16B	1500.		0.			0.
FORM 990-PF	· · · · · · · · · · · · · · · · · · ·	TAX	ES			STATEMENT	4
DESCRIPTION		(A) EXPENSES PER BOOKS) VEST- NCOME			
EXCISE TAX		119.		0.			0.
TO FORM 990-PF, PG	1, LN 18	119.		0.			0.

FORM 990-PF	OTHER EXPENSES			STATEMENT 5	
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME			
FILING FEES	100.	0	•	0.	
TO FORM 990-PF, PG 1, LN 23	100.	0	•	0.	
FORM 990-PF	CORPORAT	E STOCK		STATEMENT 6	
DESCRIPTION		В	OOK VALUE	FAIR MARKET VALUE	
DESCRIPTION MORGAN STANLEY		B	OOK VALUE 148502.		