

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



EXTENDED TO AUGUST 17, 203 Return of Private Foundation _2015

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 Open to Public Inspection

Depart	men I Re	t of the Treasury venue Service	•	► Informat	ion about For	sociai s m 990-F	ecurity number F and its sepa	s on rate	i this form as instructions i	it may be mi is at www. <i>lr</i> :	s.go	ov/form990pf.	Open to Public	Inspection
	_	idar year 2014 (······		, and e					
		f foundation									Α	Employer identification r	number	
												05 6606080		
		S FOUND and street (or PO b			alwared to etreet	t addraga)				Room/suite	-	25-6696272		
		•			611 46 160 to 511661	i additess)				HOOM/Suite	B	Telephone number 610 617-590	10	
981 IDLEWILD ROAD City or town, state or province, country, and ZIP or foreign postal code C if exemption application is pending, check												ightharpoonup		
-		DWYNE,		9035-		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,						ii oxomption application to por	iang, oncon noro	-
		all that apply:		Initial retur			Initial return o	f a fo	ormer public o	harity	D	1. Foreign organizations,	check here	ightharpoons
				Fınal returr	1		Amended retu	rn				2 Earough organizations most	and the 9504 test	_
				Address ch			Name change				4	Foreign organizations meet check here and attach com	putation	
H C	H Check type of organization: Section 501(c)(3) exempt private foundation E If private foundation status was terminated											,d		
		ction 4947(a)(1					xable private fo				┨	under section 507(b)(1)(/		
		arket value of all		ng of year	J Account	ıng metn ther (spe		SN	Accr	uai	F	If the foundation is in a 60		ation
(110 >3		Part II, col. (c),	-	,444.	1		must be on ca	ash i	basis.)			under section 507(b)(1)(l	o), check here	
Pai		Analysis of R	evenue and	Expenses	-1 '		Revenue and			vestment	\dagger	(c) Adjusted net	(d) Disburser	ments
y0		(The total of amo	ounts in colun	nns (b), (c), ar	nd (d) may not		enses per book	(S	inco			income	for charitable pi (cash basis	urposes
	1	Contributions,	gifts, grants	s, etc., rece	rved							N/A	, , , , , , , , , , , , , , , , , , ,	, xx4 xx
ļ	2	Check X			to attach Sch B	,			,	., ., ., ., ., ., ., ., ., ., ., ., ., .	,	, "		
1	3	Interest on saving cash investments	is and tempoi	rary		<u></u>		4.		4.	•		<u>TATEME</u>	<u> </u>
	4	Dividends and	interest fro	m securitie:	S						-			
		Gross rents				<u> </u>								<
ŀ	_	Net rental income	· · -						11 (F F)		┼-			,,, ,
음	6a	Net gain or (loss) to Gross sales price	from sale of a for all	ssets not on	line 10		RE(Ç.E	IVED	5	+		,	·
Revenue	7	assets on line 6a Capital gain net in		Part IV June 2\		1 4		* * .		φ ₀	<u> </u>	,	/;;	, , , , , , , , , , , , , , , , , , , ,
8	8	Net short-term				27	AUL B	2	8 2015	Q .	+			
	9	Income modific				*** <u>*</u>			The state of the s	181	T			
-	10a	Gross sales less r and allowances	returns				OG	DI	EN. UT		,		' '%' ~	. 18 41 ;
	b	Less Cost of goo	ds sold			\$x x^~						****	.^ .\ 8	
	C	Gross profit or	(loss)						,		╄		- ,*';	
	11	Other income						4			+-		· · · · · · · · · · · · · · · · · · ·	
	12	Total. Add line				-		$\frac{4}{0}$.	.	$\frac{4}{0}$				0.
- 1	13 14	Other employee			s, etc			<u>u .</u>		<u> </u>	╄		· · · · · · · · · · · · · · · · · · ·	<u> </u>
- 1.		Pension plans,		•							╁╌			
es .	.o 16a	Legal fees	omployee .	301101110							+-			
署	b	Accounting fee	s	SI	MT 2		63.	2.		0.	,			0.
雷	C	Other profession												
9	17	Interest									\perp			
4	18	Taxes						_			1		. , ,	
5	19	Depreciation ar	nd depletion	1				_			+		*	
到	20	Occupancy Travel confered	nooc c=-1	000trn=		<u> </u>					+-	-		
뒓	21 20	Travel, conference Printing and put		neeungs		-					+			
	22	Other expenses		ST	'МТ 3	<u> </u>	36	5.		0.	+			0.
Operating and Admittibly & E20018es	24	Total operating			~			•			\top			<u>~</u>
)	expenses. Add					99	7.		0.				0.
ा	25	Contributions,					28,95						28	,950.
:	26	Total expenses		ırsements.			_	_]						
		Add lines 24 ar				ļ	29,94	7.		0.	4		28	<u>,950.</u>
:		Subtract line 26				1	.00 01	ړ			1			
		Excess of revenue	•				<29,94	ქ.	>		+	····		^
		Net investment Adjusted net in								4.	-	N/A		1
42350 11-24-		LHA For Pa				instructi		l	3 3			11/A <u> </u>	Form 990-F	PF (2014)

Form **990-P.F**

Form 990-PF (2014) JEDS FOUNDATION			6696272 Page 2
Part II Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year		of year
Columni snould be for end-or-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
1 Cash - non-interest-bearing	45 205	45 444	45 444
2 Savings and temporary cash investments	47,387.	17,444.	17,444.
3 Accounts receivable -	-		,
Less: allowance for doubtful accounts		, , - , - , - , - , - , - , - , -	
4 Piedges receivable ►		· ,	
Less: allowance for doubtful accounts			
5 Grants receivable		· · · · · · · · · · · · · · · · · · ·	
6 Receivables due from officers, directors, trustees, and other			
disqualified persons			
7 Other notes and loans receivable	-		·
Less: allowance for doubtful accounts			
9 Prepaid expenses and deferred charges			
9 Prepaid expenses and deferred charges			
108 myestinents - 0.5. and state government obligations			
b Investments - corporate stock			
c Investments - corporate bonds			3 35 V5 3 X 3
11 Investments - land, buildings, and equipment basis	<u> </u>	,	
Less accumulated depreciation			
12 Investments - mortgage loans			
13 Investments - other			/ ·/······
14 Land, buildings, and equipment; basis	in in the second	, , , , , , , , , , , , , , , , , , , ,	****
Less accumulated depreciation			
15 Other assets (describe ►)			
16 Total assets (to be completed by all filers - see the			
instructions. Also, see page 1, item I)	47,387.	17,444.	17,444.
17 Accounts payable and accrued expenses			
18 Grants payable			A SAMA
g 19 Deferred revenue			*
19 Deterred revenue 20 Loans from officers, directors, trustees, and other disqualified persons 21 Mortgages and other notes payable			
21 Mortgages and other notes payable			* * * * * * * * * * * * * * * * * * * *
☐ 22 Other liabilities (describe ►)			· , » `
		_	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1
23 Total liabilities (add lines 17 through 22)	0.	0,	
Foundations that follow SFAS 117, check here			
and complete lines 24 through 26 and lines 30 and 31.			
§ 24 Unrestricted			
25 Temporarily restricted			
26 Permanently restricted			
Foundations that do not follow SFAS 117, check here			
and complete lines 27 through 31.			
24 Unrestricted 25 Temporarily restricted 26 Permanently restricted Foundations that do not follow SFAS 117, check here and complete lines 27 through 31. 27 Capital stock, trust principal, or current funds 28 Paid-in or capital surplus, or land, bldg., and equipment fund 29 Retained earnings, accumulated income, endowment, or other funds 30 Total net assets or fund balances	0.	0.	
28 Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.	
Retained earnings, accumulated income, endowment, or other funds	47,387.	17,444.	
30 Total net assets or fund balances	47,387.	17,444.	
31 Total liabilities and net assets/fund balances	47,387.	17,444.	*
Part III Analysis of Changes in Net Assets or Fund B	Balances		
Total net assets or fund balances at beginning of year - Part II, column (a), line	30		
(must agree with end-of-year figure reported on prior year's return)	00		<i>/\'</i> 7 207
2 Enter amount from Part I, line 27a		1	47,387.
3 Other increases not included in line 2 (itemize)		2	<29,943.
Add lines 1, 2, and 3		3	17 444
5 Decreases not included in line 2 (itemize)	•	4	17,444.
5 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, c	olumn (h) line 20	5	17 444
Total net assets of fund balances at end of year (liftle 4 fillings liftle 5) - Part II, C	olumin (D), iille 30	6	17,444.

(a) List and desc	Part IV Capital Gains and Losses for Tax on Investment Income (a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.) (b) How acquire P - Purchase D - Donation								(d) Date sold (mo., day, yr.)	
1a	<u> </u>				Ĺ					
b NO	NE							·		
<u> </u>		<u></u>								
<u>d</u>					┼					
<u>e</u>	(5)	December of the second	(-) O		۲		(h) Cou	((222)		
(e) Gross sales price	(1)	Depreciation allowed (or allowable)		st or other basis xpense of sale			(e) plus (n or (loss) f) minus (
<u>a</u>										
<u>b</u>	1			•						
d	ļ <u> </u>		·						<u></u>	
e Complete only for assets showing	ng gain in	column (h) and owned by t	the foundation	on 12/31/69		0) Gains (Col	. (h) gain	minus	
(i) F.M.V. as of 12/31/69		(j) Adjusted basis as of 12/31/69	(k) Ex	cess of col. (1) col. (j), if any		cò	. (k), but no Losses (fi	t less thar	า -0-) or	
a										
b										
C										
d										
<u> </u>						···-				
2 Capital gain net income or (net ca	apital loss	If gain, also enter If (loss), enter -0-	in Part I, line in Part I, line	7 7	}	2				
3 Net short-term capital gain or (los If gain, also enter in Part I, line 8,		ned in sections 1222(5) an			Ĵ					
If (loss), enter -0- in Part I, line 8	·	•			ال	3				
Part V Qualification U				· · · · · · · · · · · · · · · · · · ·			ome			
(For optional use by domestic private	e foundati	ons subject to the section 4	1940(a) tax on	net investment ir	ncome	.)				
If section 4940(d)(2) applies, leave t	his part bl	ank.								
Was the foundation liable for the sec				•	rıod?				Yes X No	
1 Enter the appropriate amount in					entries.					
(a)		(b)			(c)			Dietrib	(d) ution ratio	
Base periód years Calendar year (or tax year beginni	ng in)	Adjusted qualifying dist	tributions	Net value of no	onchar	itable-use assets	(с	(col. (b) divided by col. (c))		
2013			2,174.		61,120				.526407	
2012		2	7,800.			92,073			.301934	
2011			3,700.			111,712			.122637	
2010			8,690.		_	126,890			.147293	
2009	•	<u></u>	0,500.			139,421	•		.075311	
2 Total of line 1, column (d)							2		1.173582	
3 Average distribution ratio for the the foundation has been in existe	-	·	on line 2 by 5,	or by the number	r of yea	ars	3		.234716	
4 Enter the net value of noncharital	ole-use as	sets for 2014 from Part X, I	line 5				4		28,352	
5 Multiply line 4 by line 3						5				
6 Enter 1% of net investment income (1% of Part I, line 27b)					6					
7 Add lines 5 and 6							7		6,655	
8 Enter qualifying distributions from							8		28,950	
If line 8 is equal to or greater than See the Part VI instructions.	n line 7, ch	neck the box in Part VI, line	1b, and comp	lete that part usin	ıg a 1%	% tax rate.				

A	1 990-PF (2014) JEDS FOUNDATION OF VI Excise Tax Based on Investment Income (Section 4940)	0(a), 4940(b), 4940			66962 see ins	72 structio	Page 4		
1a	Exempt operating foundations described in section 4940(d)(2), check here and er Date of ruling or determination letter: (attach copy of letter if nec	nter "N/A" on line 1. essary-see instructions)		- 1	-4/2				
b Domestic foundations that meet the section 4940(e) requirements in Part V, check here X and enter 1% of Part I, line 27b									
C	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. Ot	hers enter -0-)		2			0.		
3	Add lines 1 and 2			3			0.		
4	4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)								
5									
	Credits/Payments:	11			Å.				
	2014 estimated tax payments and 2013 overpayment credited to 2014	6a			75%				
	Exempt foreign organizations - tax withheld at source	6b			·		\$		
	Tax paid with application for extension of time to file (Form 8868) Backup withholding erroneously withheld	6c 6d				4	, +> *		
	Total credits and payments. Add lines 6a through 6d	_ ou		7	, 2,375	4 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Ö.		
	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attack	ched		8					
	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed		•	9			0.		
	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			10					
	Enter the amount of line 10 to be: Credited to 2015 estimated tax	Ret	unded 🕨	11					
Pa	rt VII-A Statements Regarding Activities								
1a	During the tax year, did the foundation attempt to influence any national, state, or local legisl	lation or did it participate	or intervene	in		Yes	No		
	any political campaign?					1a	X		
b	b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definition)?								
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities.								
	distributed by the foundation in connection with the activities.								
	c Did the foundation file Form 1120-POL for this year?								
a	d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:								
•	(1) On the foundation. ► \$ 0. (2) On foundation managers. Enter the reimbursement (if any) paid by the foundation during the year for political expendit		0.			%	ļ		
-	managers. > \$ 0.	ture tax imposed on touth	ialion						
2	Has the foundation engaged in any activities that have not previously been reported to the IR	RS?			'	2	x		
	If "Yes," attach a detailed description of the activities.						383		
	Has the foundation made any changes, not previously reported to the IRS, in its governing in	nstrument, articles of inco	rporation, o	r			1. S.		
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the change					3	X_		
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year	r?				4a	X		
b	If "Yes," has it filed a tax return on Form 990-T for this year?			N,	/A _	4b	<u> </u>		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?				_	5	X		
	If "Yes," attach the statement required by General Instruction T.					,,,,,	1. 13		
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied eit	ther:			1				
	By language in the governing instrument, or		.41- 414-4-	1	İ				
	By state legislation that effectively amends the governing instrument so that no mandatory Tompon in the coverning instrument?	directions that conflict w	itn the state	iaw	1				
	remain in the governing instrument? Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," com	anlota Part II. aal. (a). a	ad Dort VIV		-	6 X 7 X	 		
•	Did the foundation have at least \$5,000 in assets at any time during the year: if Tes, Com	ipiete Fart II, coi. (c), a	iu rait Av		-	/ A			
8a	Enter the states to which the foundation reports or with which it is registered (see instruction	ns) ► <u>NONE</u>							
h	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the At	torney General (or design	ate)						
-	of each state as required by General Instruction G? If "No," attach explanation		TATEM	ENT	4	8b	x		
9	Is the foundation claiming status as a private operating foundation within the meaning of sec				- H				
	year 2014 or the taxable year beginning in 2014 (see instructions for Part XIV)? If "Yes," co					9	X		
	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedul	•	esses			10	X		
					Form	990-PF	(2014)		

	990-PF (2014) JEDS FOUNDATION 25-669 int VII-A Statements Regarding Activities (continued)	<u>6272</u>	l	Page 5
	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of	Т		
• •	section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		x
40	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges?			
12		10		х
	If "Yes," attach statement (see instructions)	12	х	
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Δ	
	Website address NONE Tolonton Manual Control	17 5	0.01	
14	The books are in care of ► STEVE KATZNELSON Telephone no. ► 610 6			277
	Located at ▶981 IDLEWILD ROAD, GLADWYNE, PA ZIP+4 ▶1	9035	<u>-14</u>	3/
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here		. , , ▶	ш.
	and enter the amount of tax-exempt interest received or accrued during the year	N	/A	NI-
16	At any time during calendar year 2014, did the foundation have an interest in or a signature or other authority over a bank,	1 .	Yes	No
	securities, or other financial account in a foreign country?	16		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	50-3C	·** ·	7.6
	foreign country	Erm e R	3 k 300	
Pa	rt VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.	- A	Yes	No
1a	During the year did the foundation (either directly or indirectly):		ingon.	×
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?		·	
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)	: 35, 4	**	√° _{jes} ,
	a disqualified person?	* * * * * * * * * * * * * * * * * * *	ું ઉત્તર	
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	1,3500		de N
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	12.5	3.35	
	(5) Transfer any income or assets to a disqualified person (or make any of either available		1 6 L	
	for the benefit or use of a disqualified person)?		小"、	
	(6) Agree to pay money or property to a government official? (Exception. Check "No"	4.3.	*	(Y Y,"
	if the foundation agreed to make a grant to or to employ the official for a period after			۰ ۲۰٫۳۸
	termination of government service, if terminating within 90 days.)		,	27.0
h	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations	` ;	•	(
U	section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)? N/A	1b		
	. 1	, 10	7.2	
_	Organizations relying on a current notice regarding disaster assistance check here Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected	1		
C				~ » •
_	before the first day of the tax year beginning in 2014?	1c		<u> </u>
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation	7.	100	
	defined in section 4942(j)(3) or 4942(j)(5)):	~ &	``,	
а	At the end of tax year 2014, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning	,	, * * 2	
	before 2014?	1 , ,	38.34	, , , , , , , , , , , , , , , , , , ,
	If "Yes," list the years \blacktriangleright	. 5		i.
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	,	- 24.33 - × 11	Š
	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach	```	** 3.	ţ^
	statement - see instructions.)	2b		~
C	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.	, ,		ing in the second
	>	. ,	3.4	e S
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time	e ²		ž.
	during the year?		100	ء احت ا
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	-,	1	,
	May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose		1 S 1 1	
	of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C,	1 10 1 1	, xx ,	77/304
	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
	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that		,	
	had not been removed from jeopardy before the first day of the tax year beginning in 2014?	4b		х

4b X Form **990-PF** (2014)

Total number of other employees paid over \$50,000

Total. Add lines 1 through 3

P	Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations	ındations, se	e instructions.)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:	***	
a	Average monthly fair market value of securities	18	0.
b	Average of monthly cash balances	1b	28,784.
C	Fair market value of all other assets	10	
d	Total (add lines 1a, b, and c)	1d	28,784.
е	Reduction claimed for blockage or other factors reported on lines 1a and	A 5 3 .	
	1c (attach detailed explanation) 1e 0	, 1	
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	28,784.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	432.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	28,352.
6	Minimum investment return. Enter 5% of line 5	6	1,418.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations a foreign organizations check here ☐ and do not complete this part.)	nd certain	
1	Minimum investment return from Part X, line 6	1_	1,418.
2a	Tax on investment income for 2014 from Part VI, line 5	(v.,	· <u> </u>
b	Income tax for 2014. (This does not include the tax from Part VI.)],, '	
C	Add lines 2a and 2b	2c	
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	1,418.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	1,418.
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	1,418.
P	art XIII Qualifying Distributions (see instructions)		
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	28,950.
þ	Program-related investments - total from Part IX-B	15	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
a	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	<u> 28,950.</u>
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	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	28,950.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation 4940(e) reduction of tax in those years.	qualifies for th	e section

Form **990-PF** (2014)

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	, , ,	\$ ×,\	*** \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\	1,418.
2 Undistributed income, if any, as of the end of 2014			, , , , , , , , , , , , , , , , , , , ,	
a Enter amount for 2013 only	* ' ,	1.	0.	
b Total for prior years:		_		
	/	Q.	(A)	
3 Excess distributions carryover, if any, to 2014:		A SA		
a From 2009 3,539.				
b From 2010 12,349.	1	, ",",		
c From 2011 8,114.	4 ·*	ŕ		
d From 2012 27,580. e From 2013 29,118.		,		
f Total of lines 3a through e	80,700 .	,	,	
4 Qualifying distributions for 2014 from	80,700.	*******		
Part XII, line 4: ►\$ 28,950.	``^,,,,',		~~ · · · · · · · · · · · · · · · · · ·	
a Applied to 2013, but not more than line 2a	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1	*	0.	
b Applied to undistributed income of prior		<u>*</u>	, ,	*** ·
years (Election required - see instructions)	* *	0.	,	
c Treated as distributions out of corpus		`		* * * * * * * * * * * * * * * * * * * *
(Election required - see instructions)	0.		,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
d Applied to 2014 distributable amount	., , , , , , , , , , , , , , , , , , ,			1,418.
e Remaining amount distributed out of corpus	27,532.			
5 Excess distributions carryover applied to 2014 (If an amount appears in column (d), the same amount	0.			0.
(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	108,232.	*	, "	
b Prior years' undistributed income. Subtract	,s		,, ,′	
line 4b from line 2b	, , , , ,	0.	, 3	and the second
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	` , , ^ <u>"</u> "	_		
assessed	`'y	0.	` <u>`</u>	
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.	, ,	,	.	, X3, -2, X4,
f Undistributed income for 2014. Subtract	, 8%.	* , , , , , , , , , , , , , , , , , , ,	0.	* *
lines 4d and 5 from line 1. This amount must		, * 3*	, , , , , , , , , , , , , , , , , , ,	
be distributed in 2015	· , · , · , · , · , · , · , · , · , · ,		, , , , , , , , , , , , , , , , , , , ,	0.
7 Amounts treated as distributions out of			Gara	**************************************
corpus to satisfy requirements imposed by	4	· .		3.4
section 170(b)(1)(F) or 4942(g)(3) (Election				
may be required - see instructions)	0.	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
8 Excess distributions carryover from 2009		. **	Varya N.	
not applied on line 5 or line 7	<u>3,539.</u>	', '',		The same of the sa
9 Excess distributions carryover to 2015.		,	*2, 8*.,	
Subtract lines 7 and 8 from line 6a	104,693.			
O Analysis of line 9:		,		*
a Excess from 2010 12,349.		,	*	" Highly Man
b Excess from 2011 8,114.	The state of	it is in in the	ελ» ν ,	
e Excess from 2012 27,580.	, y	* * *	i interest	
d Excess from 2013 29,118.	· · · · · · · · · · · · · · · · · · ·			The state of the s
e Excess from 2014 27,532.		<u> </u>	V (Y X)	Form 990-PF (2014)

	UNDATION			25	5-6696272	Page 1
Part XIV Private Operating P	oundations (see in	structions and Part VI	I-A, question 9)	N/A		
1 a If the foundation has received a ruling of	r determination letter that	t it is a private operating				
foundation, and the ruling is effective fo	r 2014, enter the date of	the ruling	> _			
b Check box to indicate whether the found	lation is a private operatir	ng foundation described	in section	4942(j)(3) or	4942(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) To	tal
investment return from Part X for						
each year listed			1			
b 85% of line 2a						
e Qualifying distributions from Part XII,						
line 4 for each year listed	İ					
d Amounts included in line 2c not						
used directly for active conduct of			ļ			
exempt activities			İ			
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	-					
alternative test relied upon:			Ì			
a "Assets" alternative test - enter:				•		
(1) Value of all assets						
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)						
b "Endowment" alternative test - enter						
2/3 of minimum investment return						
shown in Part X, line 6 for each year listed			i			
c "Support" alternative test - enter:						
• •						
(1) Total support other than gross investment income (interest,						
dividends, rents, payments on						
securities loans (section						
512(a)(5)), or royalties)						
(2) Support from general public						
and 5 or more exempt organizations as provided in						
section 4942(j)(3)(B)(iii)						
(3) Largest amount of support from						
an exempt organization						
(4) Gross investment income						
Part XV Supplementary Info			if the foundat	tion had \$5,000	or more in asse	ts
at any time during t	he year-see instr	ructions.)				
1 Information Regarding Foundation	n Managers:					
a List any managers of the foundation whyear (but only if they have contributed n			ributions received b	y the foundation before	the close of any tax	
SEE STATEMENT 5	lore man 40,000). (See S	ection 507 (u)(2).)				
b List any managers of the foundation wh	o own 10% or more of th	a stock of a corneration	or an equally large	nortion of the ownership	n of a partnership or	
other entity) of which the foundation has	a 10% or greater interes	st.	or an equally large	portion of the ownership	or a partitorising or	
NONE						
2 Information Regarding Contributi	on, Grant, Gift, Loan,	Scholarship, etc., Pr	ograms:			
Check here ► X if the foundation o				oes not accept unsolicit	ed requests for funds.	lf
the foundation makes gifts, grants, etc.						
a The name, address, and telephone numl	per or e-mail address of t	he person to whom appli	cations should be a	ddressed:		
<u> </u>		F				
b The form in which applications should b	e submitted and informat	tion and materials they sh	ould include:			
. =						
c Any submission deadlines:						
d Any restrictions or limitations on awards	such as by geographics	l areas, charitable fields	kinds of institutions	or other factore		
2 . a.y roomonono or minamono on awarus	, outil at by googlapilloa	a a sas, sna nasie nelus,	mindo or mouturions	, 0. 00101 1001010.		

Part XV Supplementary Information	· · · · · · · · · · · · · · · · · · ·			
3 Grants and Contributions Paid During the Ye	ear or Approved for Future	Payment		
Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
<u> </u>	any foundation manager or substantial contributor	recipient		
a Paid during the year				
AFRIKA TIKKUN	NONE	PUBLIC CHARITY	FIGHT POVERTY	
535 E 72ND STREET, APT 2A				
NEW YORK, NY 10021				7,500.
AGNES IRWIN SCHOOL	NONE	PUBLIC CHARITY	EDIICATIONAI.	
ITHAN AVENUE AND CONESTOGA ROAD	NONE		EBOOMITOMME	
ROSEMONT, PA 19010				5,000.
AGNES IRWIN SCHOOL ITHAN AVENUE AND CONESTOGA ROAD	NONE	PUBLIC CHARITY	EDUCATIONAL	
ROSEMONT, PA 19010				2,500.
				•
BOYS' LATIN OF PHILADELPHIA CHARTER	NONE	PUBLIC CHARITY	EDUCATIONAL.	
SCHOOL				
5501 CEDAR AVENUE				
PHILADELPHIA, PA 19143				4,700.
BRYN MAWR HOSPITAL FOUNDATION	NONE	DIIRI.TC CHARTTY	HEALTH CARE SERVICES	
130 S. BRYN MAWR AVENUE	NOME	FORDIC CHARITI	HEADIN CARE SERVICES	
BRYN MAWR PA 19010				1,000.
	TINUATION SHEE	T(S)	<u> </u>	28,950.
b Approved for future payment				
270277				
NONE				
- · · · · · · · · · · · · · · · · · · ·				
Total	<u> </u>		. ▶ 3b	0.

Part XVI-A	•	Analysis	of	Income-Produc	ing	Ac	tiv	/i¹	tie

Enter gross amounts unless otherwise indicated.	Unrelate	d business income		ded by section 512, 513, or 514	(e)
•	(a) Business	(b) Amount	(C) Exclu- sion	(d) Amount	Related or exempt function income
1 Program service revenue:	code	, anount	code	Amount	Tunicuon meonie
a	-				
b	1 1		+		
G			╅──		
d					
e f		***			
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash investments					4.
4 Dividends and interest from securities					
 5 Net rental income or (loss) from real estate: a Debt-financed property b Not debt-financed property 	. >		***		
6 Net rental income or (loss) from personal property					
7 Other investment income					
8 Gain or (loss) from sales of assets other than inventory					
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue:					
8	-		+		
b		•	1		
c			1		
d					
6		0	+	0.	4.
12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e)			•1		4.
(See worksheet in line 13 instructions to verify calculations.)				18_	7.
Port XVI-R Polationship of Activities					

Line No.	Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes).								
3	INTEREST	FROM	CASH	IN	SAVINGS				
			_						
		_							

423621 11-24-14

Form **990-PF** (2014)

, ≽i‱air∨A	Exempt Organ		sters 10	and Transactions a	and Relationsi	nips with Nonc	naritable	,	
1 Did the	organization directly or indi		of the following	ng with any other organization	on described in section	on 501(c) of	*(1)	Yes	No
	de (other than section 501(c					011 00 1(0) 01	¥	100	7.7.2
	ers from the reporting found			· ,;	چېرون	1			
(1) Ca				•			1a(1)	(P) V., Y.	x
(2) Otl	her assets						1a(2)		Х
b Other to	ransactions:							,	
(1) Sa	les of assets to a noncharita	ble exempt organiza	tion				1b(1)		X
(2) Pu	rchases of assets from a no	ncharitable exempt o	organization				1b(2)		X
(3) Re	ntal of facilities, equipment,	or other assets					1b(3)		X
(4) Re	imbursement arrangements						1b(4)		X
(5) Lo	ans or loan guarantees						1b(5)		X
(6) Pe	rformance of services or me	mbership or fundrai	sing solicitatio	ons			1b(6)		X
	g of facilities, equipment, ma						1c		X
	nswer to any of the above is							ets,	
	ices given by the reporting for				ue in any transaction	or sharing arrangemen	nt, show in		
	(d) the value of the goods,								
(a) Line no	(b) Amount involved	(c) Name of		e exempt organization	(d) Description of transfers, transactions, and sharing arra				nts
			N/A						
					-				
									
-									
				 					
						·			
									
•		<u> </u>					· · · · · · · · · · · · · · · · · · ·		
2a Is the fo	oundation directly or indirect	lv affiliated with or i	related to one	or more tax-exempt organi	zations described				
	on 501(c) of the Code (other	•		, ,	20110113 003011000		Yes	X] No
	complete the following sch	, ,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,						,
(a) Name of organization				(b) Type of organization	(1	c) Description of relation	onship		
	N/A				,	•			
		-							
	der penalties of perjury, I declare t						May the IRS d	iscuss t	his
Sign L	belief, it is true, correct, and con	iplete Declaration of pro	eparer (other tha	n taxpayer) is based on all inform	nation of which preparer i	nas any knowledge 	return with the shown below (prepare	er e
Here		-time		6/4/15	Truste	Q	Yes		Νο
Si	ignature of officer or trustee			Date	Title				
	Print/Type preparer's na	me	Preparer's s	ignature 00 o	Date	Check 🗶 If PT	IN		,
	KENNETH E.	LEHRER,	1600 a	HISYINA		self- employed			
Paid	CPA, LLC		1 DEM	W. July 1911	6/9/13		00162		
Prepare		NETH E. L	EHRER,	CPA, LLC		Firm's EIN ► 06-	18324	87	
Use Only	- L								
	Firm's address ► 73	0 EAST RA	ILROAD	AVENUE, SUI	TE 202				
	BR'	YN MAWR,	PA 190	10		Phone no. 610-	581-88		
				· — —			Form 990	-PF(2014)

Part XV Supplementary Information				
3 Grants and Contributions Paid During the Y		· · · · · · · · · · · · · · · · · · ·		
1 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	oonano da on	
CHILDREN'S HOSPITAL OF PHILADELPHIA 34TH STREET PHILADELPHIA, PA 19104	NONE	PUBLIC CHARITY	CHILDREN'S HOSPITAL	2,500 .
				2,500.
FRANCISVALE HOME FOR SMALLER ANIMALS 328 UPPER GULPH ROAD RADNOR, PA 19087	NONE	PUBLIC CHARITY	ANIMAL SHELTER	500,
FRIENDS' CENTRAL SCHOOL 1101 CITY AVENUE	NONE	PUBLIC CHARITY	EDUCATIONAL	
WYNNEWOOD, PA 19096				3,000.
HOLY REDEEMER HEALTH SYSTEM 521 MOREDON ROAD	NONE	PUBLIC CHARITY	HEALTH CARE SERVICES	
HUNTINGDON VALLEY, PA 19006				600.
NATIONAL MS SOCIETY 30 SOUTH 17TH STREET	NONE	PUBLIC CHARITY		
PHILADELPHIA, PA 19103				900.
PENN MEDICINE 3451 WALNUT STREET PHILADELPHIA, PA 19104	NONE	PUBLIC CHARITY	HEALTH CARE SERVICES	250,
UNIVERSITY OF PENNSYLVANIA 3451 WALNUT STREET	NONE	PUBLIC CHARITY	UNIVERSITY	
PHILADELPHIA, PA 19104				500.
Total from continuation sheets				8,250.

INGS AND TEM	PORARY CAS	H INVESTMENTS	STATEMENT 1		
REVE	NUE NE	T INVESTMENT			
4.		4.			
	4.	4.			
ACCOUNTI	NG FEES		STATEMENT 2		
(A) EXPENSES PER BOOKS	(B) NET INVES MENT INCO	(C) T- ADJUSTEI ME NET INCOI	(D) D CHARITABLE ME PURPOSES		
632.		0.	0.		
632.		0.	0.		
OTHER E	XPENSES		STATEMENT 3		
(A) EXPENSES PER BOOKS	(B) NET INVES	(C) T- ADJUSTEI ME NET INCOI	(D) D CHARITABLE ME PURPOSES		
365.		0.	0.		
365.		0.	0.		
	(A) EXPENSES PER BOOKS 632. OTHER E (A) EXPENSES PER BOOKS	(A) REVENUE NE PER BOOKS 4. 4. ACCOUNTING FEES (A) (B) EXPENSES NET INVEST PER BOOKS MENT INCOME 632. 632. OTHER EXPENSES	REVENUE PER BOOKS INCOME 4. 4. 4. 4. 4. ACCOUNTING FEES (A) (B) (C) EXPENSES NET INVEST- ADJUSTED NET INCOME 632. 0. OTHER EXPENSES (A) (B) (C) ADJUSTED NET INCOME OTHER EXPENSES (A) (B) (C) ADJUSTED NET INCOME PER BOOKS MENT INCOME (C) ADJUSTED NET INVEST- ADJUSTED NET INCOME PER BOOKS MENT INCOME NET INCOME		

EXPLANATION

NOT REQUIRED

FORM 990-PF PART XV - LINE 1A STATEMENT 5
LIST OF FOUNDATION MANAGERS

NAME OF MANAGER

STEVEN B. KATZNELSON LAURIE L. MACKIMMIE

Form **8868** (Rev. January 2014)

(Rev. January 2014)

Department of the Treasury Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return.

▶ Information about Form 8868 and its instructions is at www.irs.gov/form8868 .

OMB No. 1545-1709

• 1 111 1111 1 111		<u> </u>						
If you are filing for an Automatic 3-Month Extension, complet	e only Pa	rt I and check this box			· [X]			
If you are filing for an Additional (Not Automatic) 3-Month Ext								
Oo not complete Part II unless you have already been granted a		· ·	•					
Electronic filing (e-file). You can electronically file Form 8868 if you								
equired to file Form 990-T), or an additional (not automatic) 3-mon		•		•				
of time to file any of the forms listed in Part I or Part II with the exc								
Personal Benefit Contracts, which must be sent to the IRS in paper		(see instructions). For more details o	on the elec	ctronic filing of this t	form,			
visit www.irs.gov/efile and click on e-file for Charities & Nonprofits.		ubmit original (no conice no	adad)					
Part I Automatic 3-Month Extension of Time								
A corporation required to file Form 990-T and requesting an autom	natic 6-mo	inth extension - check this box and	complete					
Part I only					· Ш			
All other corporations (including 1120-C filers), partnerships, REMI o file income tax returns.	Cs, and ti	usts must use Form 7004 to reques						
			Enter filer's identifying number					
Type or Name of exempt organization or other filer, see instruc	жопѕ.		Employer identification number (EIN) or $25-6696272$					
orint THDG HOLDING MITON								
JEDS FOUNDATION			0:-					
tue date for Number, street, and room or suite no. If a P.O. box, se illing your 981 TDT.FWTT.D ROAD	e instruct	ions.	Social se	1)				
eturn See JOI IDIIIWIID KOAD								
city, town or post office, state, and ZIP code. For a fo	reign add	ress, see instructions.						
GLADWINE, PA 19035-1437				···				
Entar the Deturn ends for the return that this application is far /file	o concret	to application for each return)			0 4			
Enter the Return code for the return that this application is for (file	a separai	e application for each return)			014			
Application	Return	Application			Return			
Application	_	Application						
s For Form 990 or Form 990-EZ	Code 01	Is For Form 990-T (corporation)			Code 07			
Form 990-BL	02	Form 1041-A			08			
Form 4720 (individual)	03	Form 4720 (other than individual)						
Form 990-PF	04	Form 5227						
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069						
Form 990-T (trust other than above)	06	Form 8870			11 12			
STEVE KATZNELSO		FOIII 6870			12			
The books are in the care of > 981 IDLEWILD RO		GLADWYNE, PA - 19	035_1	137				
Telephone No. ► 610 617-5901	AD,	Fax No. F	<u>033-1</u>	437				
	in tha l la	· · · · · · · · · · · · · · · · · · ·						
 If the organization does not have an office or place of business If this is for a Group Return, enter the organization's four digit G 				· · · · · · · · · · · · · · · · · · ·	book thio			
				•				
				ale fila ayratieiöii is	101.			
		tion return for the organization name		The extension				
	Organizat	ion recommon the organization name	ou above.	THE EXIGNSION				
► X calendar year 2014 or	is for the organization's return for:							
tax year beginning	an	d ending						
tax year beginning	, a			<u> </u>				
2 If the tax year entered in line 1 is for less than 12 months, ch	neck reaso	on: Initial return	Final retur	n				
Change in accounting period	icon icast		i iiiqi rotan					
3a If this application is for Forms 990-BL, 990-PF, 990-T, 4720,	or 6069 d	enter the tentative tax less any	1					
nonrefundable credits. See instructions.	3a	\$	0.					
b If this application is for Forms 990-PF, 990-T, 4720, or 6069,	enter an	refundable credits and	Ja	\\				
	-			\$	0.			
	estimated tax payments made. Include any prior year overpayment allowed as a credit. Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required,							
by using EFTPS (Electronic Federal Tax Payment System). S		I			0.			
Caution. If you are going to make an electronic funds withdrawal (nd Form 8870 FO fo				
nstructions.	ancor del	219 mai ano i omi 0000, 300 i 01111 0	LO al		paymont			

Form 8868 (Rev. 1-2014)

For Privacy Act and Paperwork Reduction Act Notice, see instructions.

LHA

423841 05-01-14