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EXTENDED TO AUGUST 17, 2015
Return of Private Foundation

Form 990-PF

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.

OMB No. 1545-0052

2014

Open to Public Inspection

For calendar year 2014 or tax year beginning

, and ending

Name of foundation

NAMASTE FOUNDATION, INC.

A Employer identification number

26-2541411

Number and street (or P O box number if mail is not delivered to street address)

187 BAYBERRY LANE

Room/suite

B Telephone number

908 769-9501

City or town, state or province, country, and ZIP or foreign postal code

WATCHUNG, NJ 07069

G Check all that apply:

☐ Initial return

☐ Initial return of a former public charity

☐ Final return

☐ Amended return

☐ Address change

☐ Name change

H Check type of organization:

☒ Section 501(c)(3) exempt private foundation

☐ Section 4947(a)(1) nonexempt charitable trust

☐ Other taxable private foundation

I Fair market value of all assets at end of year

(from Part II, col. (c), line 16)

J Accounting method:

☒ Cash

☐ Accrual

☐ Other (specify)

\$ 43,752. (Part I, column (d) must be on cash basis.)

C If exemption application is pending, check here ☐

D 1. Foreign organizations, check here ☐

2. Foreign organizations meeting the 85% test, check here and attach computation ☐

E If private foundation status was terminated under section 507(b)(1)(A), check here ☐

F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here ☐

Part I Analysis of Revenue and Expenses

(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a).)

(a) Revenue and expenses per books

(b) Net investment income

(c) Adjusted net income

(d) Disbursements for charitable purposes (cash basis only)

Revenue	1	Contributions, gifts, grants, etc., received	88,029.		N/A	
	2	Check <input type="checkbox"/> if the foundation is not required to attach Sch. B				
	3	Interest on savings and temporary cash investments				
	4	Dividends and interest from securities	448.	448.		STATEMENT 1
	5a	Gross rents				
	b	Net rental income or (loss)				
	6a	Net gain or (loss) from sale of assets not on line 10	71,793			
	b	Gross sales price for all assets on line 6a	111,761.			
	7	Capital gain net income (from Part IV, line 2)				
	8	Net short-term capital gain				
	9	Income modifications				
	10a	Gross sales less returns and allowances				
Operating and Administrative Expenses	b	Less: Cost of goods sold				
	c	Gross profit or (loss)				
	11	Other income				
	12	Total. Add lines 1 through 11	160,270.	72,241.		
	13	Compensation of officers, directors, trustees, etc.	0.	0.		0.
	14	Other employee salaries and wages				
	15	Pension plans, employee benefits				
	16a	Legal fees				
	b	Accounting fees	3,500.	0.		3,500.
	c	Other professional fees				
	17	Interest				
	18	Taxes				
	19	Depreciation and depletion				
	20	Occupancy				
	21	Travel, conferences, and meetings				
	22	Printing and publications				
	23	Other expenses	12,922.	0.		12,922.
	24	Total operating and administrative expenses. Add lines 13 through 23	16,422.	0.		16,422.
	25	Contributions, gifts, grants paid	115,464.			115,464.
	26	Total expenses and disbursements. Add lines 24 and 25	131,886.	0.		131,886.
	27	Subtract line 26 from line 12:				
	a	Excess of revenue over expenses and disbursements	28,384.			
	b	Net investment income (if negative, enter -0-)		72,241.		
	c	Adjusted net income (if negative, enter -0-)			N/A	

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LHA For Paperwork Reduction Act Notice, see instructions

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Part II Balance Sheets

Attached schedules and amounts in the description column should be for end-of-year amounts only

		Beginning of year	End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value
Assets	1 Cash - non-interest-bearing			
	2 Savings and temporary cash investments	15,188.	43,572.	43,572.
	3 Accounts receivable ▶ 180.			
	Less: allowance for doubtful accounts ▶	180.	180.	180.
	4 Pledges receivable ▶			
	Less: allowance for doubtful accounts ▶			
	5 Grants receivable			
	6 Receivables due from officers, directors, trustees, and other disqualified persons			
	7 Other notes and loans receivable ▶			
	Less: allowance for doubtful accounts ▶			
	8 Inventories for sale or use			
	9 Prepaid expenses and deferred charges			
	10a Investments - U.S. and state government obligations			
	b Investments - corporate stock			
	c Investments - corporate bonds			
	11 Investments - land, buildings, and equipment: basis ▶			
Less: accumulated depreciation ▶				
12 Investments - mortgage loans				
13 Investments - other				
14 Land, buildings, and equipment: basis ▶				
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)	15,368.	43,752.	43,752.	
Liabilities	17 Accounts payable and accrued expenses			
	18 Grants payable			
	19 Deferred revenue			
	20 Loans from officers, directors, trustees, and other disqualified persons			
	21 Mortgages and other notes payable			
	22 Other liabilities (describe ▶)			
23 Total liabilities (add lines 17 through 22)	0.	0.		
Net Assets or Fund Balances	Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31. ▶ <input type="checkbox"/>			
	24 Unrestricted			
	25 Temporarily restricted			
	26 Permanently restricted			
	Foundations that do not follow SFAS 117, check here and complete lines 27 through 31. ▶ <input checked="" type="checkbox"/>			
	27 Capital stock, trust principal, or current funds	0.	0.	
	28 Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.	
	29 Retained earnings, accumulated income, endowment, or other funds	15,368.	43,752.	
30 Total net assets or fund balances	15,368.	43,752.		
31 Total liabilities and net assets/fund balances	15,368.	43,752.		

Part III Analysis of Changes in Net Assets or Fund Balances

1 Total net assets or fund balances at beginning of year - Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)	1	15,368.
2 Enter amount from Part I, line 27a	2	28,384.
3 Other increases not included in line 2 (itemize) ▶	3	0.
4 Add lines 1, 2, and 3	4	43,752.
5 Decreases not included in line 2 (itemize) ▶	5	0.
6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30	6	43,752.

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Part IV Capital Gains and Losses for Tax on Investment Income

(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.)	(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a 1500 SHS CROCS INC	D	04/28/14	06/02/14
b 850 SHS VALERO ENERGY CP	D	04/28/14	09/10/14
c 75 SHS ALEXANDERS INC	D	12/10/14	12/11/14
d 340 SHS DOW CHEMICAL CO	D	12/22/14	12/23/14
e			

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
a 21,836.		7,492.	14,344.
b 43,322.		14,802.	28,520.
c 31,059.		14,784.	16,275.
d 15,544.		2,890.	12,654.
e			

(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any	(l) Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col. (h))
a			14,344.
b			28,520.
c			16,275.
d			12,654.
e			

2 Capital gain net income or (net capital loss)	<div> <div>If gain, also enter in Part I, line 7</div> <div>If (loss), enter -0- in Part I, line 7</div> </div>	2	71,793.
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 8, column (c). If (loss), enter -0- in Part I, line 8		3	N/A

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

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

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

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period?

☐ Yes ☒ No

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

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

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col. (b) divided by col. (c))
2013	209,700.	24,969.	8.398414
2012	113,036.	82,268.	1.373997
2011	81,722.	94,769.	.862328
2010	58,530.	76,970.	.760426
2009	86,165.	53,421.	1.612942
2 Total of line 1, column (d)			2 13.008107
3 Average distribution ratio for the 5-year base period - divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years			3 2.601621
4 Enter the net value of noncharitable-use assets for 2014 from Part X, line 5			4 44,434.
5 Multiply line 4 by line 3			5 115,600.
6 Enter 1% of net investment income (1% of Part I, line 27b)			6 722.
7 Add lines 5 and 6			7 116,322.
8 Enter qualifying distributions from Part XII, line 4			8 131,886.

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate.
See the Part VI instructions.

Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see instructions)

1a Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter "N/A" on line 1. Date of ruling or determination letter: _____ (attach copy of letter if necessary-see instructions)		1	722.
b Domestic foundations that meet the section 4940(e) requirements in Part V, check here <input checked="" type="checkbox"/> and enter 1% of Part I, line 27b		2	0.
c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b).		3	722.
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)		4	0.
3 Add lines 1 and 2		5	722.
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)			
5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-			
6 Credits/Payments:			
a 2014 estimated tax payments and 2013 overpayment credited to 2014	6a	280.	
b Exempt foreign organizations - tax withheld at source	6b		
c Tax paid with application for extension of time to file (Form 8868)	6c	850.	
d Backup withholding erroneously withheld	6d		
7 Total credits and payments. Add lines 6a through 6d	7	1,130.	
8 Enter any penalty for underpayment of estimated tax. Check here <input type="checkbox"/> if Form 2220 is attached	8		
9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9		
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10	408.	
11 Enter the amount of line 10 to be: Credited to 2015 estimated tax <input checked="" type="checkbox"/> 408. Refunded <input type="checkbox"/>	11	0.	

Part VII-A Statements Regarding Activities

	Yes	No
1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?		X
1b 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.		X
c Did the foundation file Form 1120-POL for this year?		X
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: (1) On the foundation. <input checked="" type="checkbox"/> \$ <u>0.</u> (2) On foundation managers. <input checked="" type="checkbox"/> \$ <u>0.</u>		
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. <input checked="" type="checkbox"/> \$ <u>0.</u>		
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.		X
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		X
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?		X
b If "Yes," has it filed a tax return on Form 990-T for this year?		
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? If "Yes," attach the statement required by General Instruction T .		X
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?	X	
7 Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV	X	
8a Enter the states to which the foundation reports or with which it is registered (see instructions) <input checked="" type="checkbox"/> <u>NJ</u>		
b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G ? If "No," attach explanation	X	
9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2014 or the taxable year beginning in 2014 (see instructions for Part XIV)? If "Yes," complete Part XIV		X
10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses STMT 4	X	

N/A

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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 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 ► **GAYLE BERNHAUT** Telephone no. ► **908-769-9501**
 Located at ► **187 BAYBERRY LANE, WATCHUNG, NJ** ZIP+4 ► **07069**

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 over a bank, securities, or other financial account in a foreign country?
 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 ►

16		Yes	No
			X

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required

File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.

	Yes	No
1a During the year did the foundation (either directly or indirectly):		
(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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)?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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.)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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	► <input type="checkbox"/>	X
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?		X
2 Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)):		
a At the end of tax year 2014, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2014?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
If "Yes," list the years ►		
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.)	N/A	
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 during the year?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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.)	N/A	
4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?		X
b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2014?		X

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Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required (continued)**5a** During the year did the foundation pay or incur any amount to:

(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?

☐ Yes ☒ No

(2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, any voter registration drive?

☐ Yes ☒ No

(3) Provide a grant to an individual for travel, study, or other similar purposes?

☐ Yes ☒ No

(4) Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? (see instructions)

☐ Yes ☒ No

(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?

☐ Yes ☒ No**b** If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)?

N/A

5b

Organizations relying on a current notice regarding disaster assistance check here

☒**c** If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?

N/A

☐ Yes ☐ No

If "Yes," attach the statement required by Regulations section 53.4945-5(d).

6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?☐ Yes ☒ No

6b

b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?

If "Yes" to 6b, file Form 8870.

7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?☐ Yes ☒ No**b** If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction?

N/A

7b

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors**1** List all officers, directors, trustees, foundation managers and their compensation.

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
DAVID BERNHAUT 187 BAYBERRY LANE WATCHUNG, NJ 07060	TREASURER 0.50	0.	0.	0.
GAYLE BERNHAUT 187 BAYBERRY LANE WATCHUNG, NJ 07060	TRUSTEE 0.50	0.	0.	0.
ERIC WITMONDT 560 ILLINGWORTH AVENUE ENGLEWOOD, NJ 07631	PRESIDENT 0.50	0.	0.	0.
JACQUELINE WITMONDT 560 ILLINGWORTH AVENUE ENGLEWOOD, NJ 07631	VICE PRESIDENT 0.50	0.	0.	0.

2 Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE."

(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE				

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

0

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

3 Five highest-paid independent contractors for professional services. If none, enter "NONE."

(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		

Total number of others receiving over \$50,000 for professional services

0

Part IX-A	Summary of Direct Charitable Activities
-----------	---

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.

Expenses

1	N/A	
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 on lines 1 and 2.

Amount

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.		Amount
1	N/A	
2		
All other program-related investments. See instructions.		
3		

Total. Add lines 1 through 3

0.

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

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
a	Average monthly fair market value of securities	1a	22,760.
b	Average of monthly cash balances	1b	22,351.
c	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	45,111.
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation)	1e	0.
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	45,111.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	677.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	44,434.
6	Minimum investment return. Enter 5% of line 5	6	2,222.

Part XI**Distributable Amount** (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here ☐ and do not complete this part.)

1	Minimum investment return from Part X, line 6	1	2,222.
2a	Tax on investment income for 2014 from Part VI, line 5	2a	722.
b	Income tax for 2014. (This does not include the tax from Part VI.)	2b	
c	Add lines 2a and 2b	2c	722.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	1,500.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	1,500.
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	1,500.

Part XII**Qualifying Distributions** (see instructions)

1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
a	Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26	1a	131,886.
b	Program-related investments - total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
a	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	131,886.
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	722.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	131,164.

Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years.

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2013	(c) 2013	(d) 2014
1 Distributable amount for 2014 from Part XI, line 7				1,500.
2 Undistributed income, if any, as of the end of 2014				
a Enter amount for 2013 only			0.	
b Total for prior years:		0.		
3 Excess distributions carryover, if any, to 2014:				
a From 2009	83,497.			
b From 2010	56,120.			
c From 2011	76,985.			
d From 2012	110,471.			
e From 2013	208,956.			
f Total of lines 3a through e	536,029.			
4 Qualifying distributions for 2014 from Part XII, line 4: ► \$	131,886.			
a Applied to 2013, but not more than line 2a			0.	
b Applied to undistributed income of prior years (Election required - see instructions)		0.		
c Treated as distributions out of corpus (Election required - see instructions)	0.			
d Applied to 2014 distributable amount				1,500.
e Remaining amount distributed out of corpus	130,386.			
5 Excess distributions carryover applied to 2014 (If an amount appears in column (d), the same amount must be shown in column (a))	0.			0.
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	666,415.			
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				0.
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions)	0.			
8 Excess distributions carryover from 2009 not applied on line 5 or line 7	83,497.			
9 Excess distributions carryover to 2015. Subtract lines 7 and 8 from line 6a	582,918.			
10 Analysis of line 9:				
a Excess from 2010	56,120.			
b Excess from 2011	76,985.			
c Excess from 2012	110,471.			
d Excess from 2013	208,956.			
e Excess from 2014	130,386.			

Part XIV Private Operating Foundations (see instructions and Part VII-A, question 9)

N/A

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

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

	Tax year	Prior 3 years			(e) Total
	(a) 2014	(b) 2013	(c) 2012	(d) 2011	
2 a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed					
b 85% of line 2a					
c Qualifying distributions from Part XII, line 4 for each year listed					
d Amounts included in line 2c not used directly for active conduct of exempt activities					
e Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c					
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(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					
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 Information (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year-see instructions.)**1 Information Regarding Foundation Managers:**

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

SEE STATEMENT 5

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

NONE**2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:**

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

a The name, address, and telephone number or e-mail address of the person to whom applications should be addressed:

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

c Any submission deadlines:

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

Part XV Supplementary Information (continued)**3 Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient		If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)					
a Paid during the year					
ALEX'S LEMONADE STAND FOUNDATION 333 E LANCASTER AVENUE NO 414 WYNNEWOOD , PA 19096		N/A	PC	MEDICAL RESEARCH	100.
ALL STARS PROJECT INC 543 WEST 42ND STREET NEW YORK, NY 10036		N/A	PC	SOCIAL, EDUCATIONAL, CULTURAL AND RECREATIONAL PROGRAMS	15,325.
ALVIN AILEY DANCE FOUNDATION 405 WEST 55TH STREET NEW YORK, NY 10019		N/A	PC	SOCIAL, EDUCATIONAL, CULTURAL AND RECREATIONAL PROGRAMS	200.
AMERICAN CANCER SOCIETY 250 WILLIAMS STREET NW ATLANTA, GA 30303		N/A	PC	HEALTH ORGANIZATION DEDICATED TO ELIMINATING CANCER AS A MAJOR HEALTH PROBLEM.	50.
AMERICAN DIABETES ASSOCIATION 1701 NORTH BEAUREGARD STREET ALEXANDRIA, VA 22311		N/A	PC	SOCIAL, EDUCATIONAL, CULTURAL AND RECREATIONAL PROGRAMS	79.
Total		SEE CONTINUATION SHEET(S)			115,464.
b Approved for future payment					
NONE					
Total					0.

Part XVII	Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations
------------------	--

		Yes	No
1	Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?		
a	Transfers from the reporting foundation to a noncharitable exempt organization of:		
	(1) Cash		X
	(2) Other assets		X
b	Other transactions:		
	(1) Sales of assets to a noncharitable exempt organization		X
	(2) Purchases of assets from a noncharitable exempt organization		X
	(3) Rental of facilities, equipment, or other assets		X
	(4) Reimbursement arrangements		X
	(5) Loans or loan guarantees		X
	(6) Performance of services or membership or fundraising solicitations		X
c	Sharing of facilities, equipment, mailing lists, other assets, or paid employees		X
d	If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received.		

[illegible]


2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?

☐ Yes ☒ No

b If "Yes," complete the following schedule.

(a) Name of organization	(b) Type of organization	(c) Description of relationship
N/A		

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 Here  **7/27/15** **TRUSTEE**

Signature of officer or trustee Date Title

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

Paid Preparer Use Only	Print/type preparer's name	Preparer's signature	Date	Check <input type="checkbox"/> if self-employed	PTIN
	CHRISTINE N KOENIG	<i>Christine N Koenig</i>	7.20.15		P01022180
	Firm's name ▶ DEMING MALONE LIVESAY & OSTROFF PSC				Firm's EIN ▶ 61-1064249
	Firm's address ▶ 9300 SHELBYVILLE RD STE 1100 LOUISVILLE, KY 40222-5187				Phone no. (502) 426-9660

Form **990-PF** (2014)

Schedule B(Form 990, 990-EZ,
or 990-PF)Department of the Treasury
Internal Revenue Service**Schedule of Contributors**

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

OMB No 1545-0047

2014

Name of the organization

NAMASTE FOUNDATION, INC.

Employer identification number

26-2541411

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

☐ 501(c)() (enter number) organization☐ 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation☐ 527 political organization

Form 990-PF

☒ 501(c)(3) exempt private foundation☐ 4947(a)(1) nonexempt charitable trust treated as a private foundation☐ 501(c)(3) taxable private foundationCheck if your organization is covered by the **General Rule** or a **Special Rule**.**Note.** Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.**General Rule**

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

Special Rules

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

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

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2014)

Name of organization

Employer identification number

NAMASTE FOUNDATION, INC.**26-2541411****Part I Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>1</u>	<u>DAVID W AND GAYLE D BERNHAUT</u> <u>187 BAYBERRY LANE</u> <u>WATCHUNG, NJ 07069</u>	\$ <u>39,968.</u>	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
<u>2</u>	<u>WOODMONT PROPERTIES, LLC</u> <u>1 MAIN STREET, 2ND FLOOR</u> <u>CHATHAM, NJ 07928</u>	\$ <u>23,226.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
<u>3</u>	<u>ERIC AND JACQUELINE WITMONDT</u> <u>560 ILLINGWORTH AVENUE</u> <u>ENGLEWOOD, NY 07631</u>	\$ <u>22,035.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Employer identification number

26-2541411

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
1	1500 SHS CROCS INC 850 SHS VALERO ENERGY 75 SHS ALEXANDERS INC 340 SHS DOW CHEMICAL CO	\$ 117,445.	04/28/14
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	

Name of organization	Employer identification number
NAMASTE FOUNDATION, INC.	26-2541411

Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year (Enter this info once) ▶ \$ _____
Use duplicate copies of Part III if additional space is needed.

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

FORM 990-PF	DIVIDENDS AND INTEREST FROM SECURITIES	STATEMENT	1
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SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDENDS	(A) REVENUE PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME
MORGAN STANLEY	448.	0.	448.	448.	
TO PART I, LINE 4	448.	0.	448.	448.	

FORM 990-PF	ACCOUNTING FEES	STATEMENT	2
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DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
TAX PREPARATION FEES	3,500.	0.		3,500.
TO FORM 990-PF, PG 1, LN 16B	3,500.	0.		3,500.

FORM 990-PF	OTHER EXPENSES	STATEMENT	3
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DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
HOMELESS DRIVE	11,701.	0.		11,701.
HTC GOLF TOURNAMENT	1,000.	0.		1,000.
WEBSITE	91.	0.		91.
BANK FEES	130.	0.		130.
TO FORM 990-PF, PG 1, LN 23	12,922.	0.		12,922.

FORM 990-PF	LIST OF SUBSTANTIAL CONTRIBUTORS	STATEMENT	4
	PART VII-A, LINE 10		

NAME OF CONTRIBUTOR	ADDRESS
DAVID BERNHAUT	187 BAYBERRY LANE WATCHUNG, NJ 07060
GAYLE BERNHAUT	187 BAYBERRY LANE WATCHUNG, NJ 07060
ERIC WITMONDT	560 ILLINGWORTH AVENUE ENGLEWOOD, NJ 07631
JACQUELINE WITMONDT	560 ILLINGWORTH AVENUE ENGLEWOOD, NJ 07631

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

NAME OF MANAGER
DAVID BERNHAUT
GAYLE BERNHAUT
ERIC WITMONDT
JACQUELINE WITMONDT

Part XV Supplementary Information**3 Grants and Contributions Paid During the Year (Continuation)**

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
AMERICAN FRIENDS OF SHEBA MEDICAL CENTER 250 W 57TH ST SUITE 711 NEW YORK, NY 10107	N/A	PC	MEDICAL RESEARCH	1,000.
ANIMAL RESCUE FUND 90 DANIELS HOLE ROAD EAST HAMPTON, NY 11937	N/A	PC	SOCIAL PROGRAMS	150.
BACHMANN-STRAUSS DYSTONIA & PARKINSON FOUNDATION INC. 551 FIFTH AVENUE NEW YORK, NY 10176	N/A	PC	MEDICAL RESEARCH	150.
CEREBRAL PALSY OF NORTH JERSEY 220 SOUTH ORANGE AVENUE LIVINGSTON, NJ 07039	N/A	PC	MEDICAL RESEARCH	1,350.
CHARITIES AID FOUNDATION OF AMERICA 1800 DIAGONAL ROAD, SUITE 150 ALEXANDRIA, VA 22314	N/A	PC	SOCIAL, EDUCATIONAL, CULTURAL AND RECREATIONAL PROGRAMS	150.
CHILDREN'S HOSPITAL COLORADO FOUNDATION 13123 EAST 16TH AVENUE AURORA, CO 80045	N/A	PC	MEDICAL RESEARCH	100.
COMMUNITY FOOD BANK OF NEW JERSEY 31 EVANS TERMINAL HILLSIDE, NJ 07205	N/A	PC	SOCIAL PROGRAMS	3,369.
CONGREGATION BETH HATIKVAH 36 CHATHAM ROAD SUMMIT, NJ 07901	N/A	PC	SOCIAL, EDUCATIONAL, CULTURAL AND RECREATIONAL PROGRAMS	75.
COREY C GRIFFIN CHARITABLE FOUNDATION 225 FRANKLIN STREET, SUITE 300 BOSTON, MA 02110	N/A	PC	SOCIAL, EDUCATIONAL, CULTURAL AND RECREATIONAL PROGRAMS	1,000.
COVENANT HOUSE 5 PENN PLAZA, SUITE 3RD FLOOR NEW YORK, NY 10001	N/A	PC	SOCIAL, EDUCATIONAL, CULTURAL AND RECREATIONAL PROGRAMS	350.
Total from continuation sheets				99,710.

Part XV Supplementary Information**3 Grants and Contributions Paid During the Year (Continuation)**

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
DWIGHT ENGLEWOOD SCHOOL FUND 315 EAST PALISADE AVENUE ENGLEWOOD, NJ 07631	N/A	PC	EDUCATIONAL PROGRAMS	25,750.
EMPLOYMENT HORIZONS INC. 10 RIDGEDALE AVENUE CEDAR KNOLLS, NJ 07927	N/A	PC	ASSIST PEOPLE WITH BARRIERS TO EMPLOYMENT	1,750.
ENVIRONMENTAL WORKING GROUP 1436 U STREET NW, SUITE 100 WASHINGTON, DC 20009	N/A	PC	SOCIAL, EDUCATIONAL, CULTURAL AND RECREATIONAL PROGRAMS	25.
FEDERATION FOR CHILDREN WITH SPECIAL NEEDS, INC. SCHRAFFT CENTER 529 MAIN STREET, SUITE 1M3 CHARLESTOWN, MA 02129	N/A	PC	SOCIAL, EDUCATIONAL, CULTURAL AND RECREATIONAL PROGRAMS	975.
FOOD ALLERGY RESEARCH & EDUCATION INC. 7925 JONES BRANCH DRIVE MCLEAN, VA 22102	N/A	PC	SOCIAL, EDUCATIONAL, CULTURAL AND RECREATIONAL PROGRAMS	500.
FRIENDSHIP CIRCLE INTERNATIONAL 816 EASTERN PARKWAY BROOKLYN, NY 11213	N/A	PC	SOCIAL, EDUCATIONAL, CULTURAL AND RECREATIONAL PROGRAMS	1,325.
GEORGETOWN UNIVERSITY LAW CENTER 600 NEW JERSEY AVENUE, NW WASHINGTON, DC 20001	N/A	PC	EDUCATIONAL PROGRAMS	500.
GREEN AMERICA 1612 K STREET NW WASHINGTON, DC 20006	N/A	PC	SOCIAL AND ENVIRONMENTAL PROGRAMS	170.
HADASSAH FOUNDATION INC 50 WEST 58TH STREET NEW YORK, NY 10019	N/A	PC	SOCIAL, EDUCATIONAL, CULTURAL AND RECREATIONAL PROGRAMS	360.
HEBREW ACADEMY OF LONG BEACH 132 SPRUCE STREET CEDARHURST, NY 11516	N/A	PC	SOCIAL, EDUCATIONAL, CULTURAL AND RECREATIONAL PROGRAMS	325.
Total from continuation sheets				

Part XV Supplementary Information**3 Grants and Contributions Paid During the Year (Continuation)**

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
HOLOCAUST MEMORIAL FOUNDATION OF ILLINOIS INC 9603 WOODS DRIVE SKOKIE, IL 60077	N/A	PC	SOCIAL, EDUCATIONAL, CULTURAL AND RECREATIONAL PROGRAMS	15,500.
HUMANE SOCIETY 2100 L STREET NW WASHINGTON, DC 20037	N/A	PC	SOCIAL, EDUCATIONAL, CULTURAL AND RECREATIONAL PROGRAMS	100.
JEWISH FEDERATION OF GREATER METROWEST NJ 901 ROUTE 10 WHIPPANY, NJ 07981	N/A	PC	SOCIAL, EDUCATIONAL, CULTURAL AND RECREATIONAL PROGRAMS	350.
JEWISH MUSEUM 1109 FIFTH AVENUE NEW YORK, NY 10128	N/A	PC	SOCIAL, EDUCATIONAL, CULTURAL AND RECREATIONAL PROGRAMS	500.
JEWISH VOCATIONAL SERVICE AND COMMUNITY WORKSHOP 29699 SOUTHFIELD ROAD SOUTHFIELD, MI 48076	N/A	PC	SOCIAL, EDUCATIONAL, CULTURAL AND RECREATIONAL PROGRAMS	5,250.
JOHN BUCK COMPANY FOUNDATION ONE NORTH WACKER DRIVE SUITE 2400 CHICAGO, IL 60606	N/A	PC	SOCIAL, EDUCATIONAL, CULTURAL AND RECREATIONAL PROGRAMS	325.
JUVENILE DIABETES RESEARCH FOUNDATION 26 BROADWAY NEW YORK, NJ 10004	N/A	PC	MEDICAL RESEARCH	660.
MAKE A WISH FOUNDATION OF NEW JERSEY INC 1347 PERRINEVILLE ROAD MONROE TOWNSHIP, NJ 08831	N/A	PC	SOCIAL, EDUCATIONAL, CULTURAL AND RECREATIONAL PROGRAMS	1,325.
MAX CURE FOUNDATION INC. 1350 AVENUE OF THE AMERICAS, 2ND FLOOR NEW YORK, NY 10019	N/A	PC	MEDICAL RESEARCH	200.
MONMOUTH UNIVERSITY 400 CEDAR AVENUE WEST LONG BRANCH, NJ 07764	N/A	PC	EDUCATIONAL	813.
Total from continuation sheets				

Part XV Supplementary Information**3 Grants and Contributions Paid During the Year (Continuation)**

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
MOVEMBER FOUNDATION 8559 HIGUERA STREET CULVER CITY, CA 90232	N/A	PC	SOCIAL, EDUCATIONAL, CULTURAL AND RECREATIONAL PROGRAMS	150.
MULTIPLE MYELOMA RESEARCH FOUNDATION 383 MAIN AVENUE, 5TH FLOOR NORWALK, CT 06851	N/A	PC	MEDICAL RESEARCH	150.
MUSEUM OF JEWISH HERITAGE 36 BATTERY PL NEW YORK, NY 10280	N/A	PC	SOCIAL, EDUCATIONAL, CULTURAL AND RECREATIONAL PROGRAMS	100.
NATIONAL PARKS CONSERVATION ASSOCIATION 777 6TH STREET NW NO 700 WASHINGTON, DC 20001	N/A	PC	SOCIAL, EDUCATIONAL, CULTURAL AND RECREATIONAL PROGRAMS	250.
NATURAL RESOURCES DEFENSE COUNCIL 40 W 20TH STREET NEW YORK, NY 10011	N/A	PC	SOCIAL, EDUCATIONAL, CULTURAL AND RECREATIONAL PROGRAMS	750.
NEW ENGLAND CENTER FOR CHILDREN INC. 33 TURNPIKE ROAD SOUTHBOROUGH, MA 01772	N/A	PC	SOCIAL, EDUCATIONAL, CULTURAL AND RECREATIONAL PROGRAMS	250.
NEW JERSEY FUTURE INC. 137 W HANOVER STREET TRENTON, NJ 08618	N/A	PC	SOCIAL, EDUCATIONAL, CULTURAL AND PROGRAMS	1,500.
NEW JERSEY PERFORMING ARTS CENTER CORPORATION ONE CENTER STREET NEWARK, NJ 07102	N/A	PC	SOCIAL, EDUCATIONAL, CULTURAL AND RECREATIONAL PROGRAMS	100.
NEW JERSEY SYMPHONY ORCHESTRA MILITARY PARK BUILDING, 60 PARK PLACE NEWARK, NJ 07102	N/A	PC	SOCIAL, EDUCATIONAL, CULTURAL AND RECREATIONAL PROGRAMS	100.
NEW YORK ROAD RUNNERS TEAM FOR KIDS 156 WEST 56TH STREET, 3RD FLOOR NEW YORK, NY 10019	N/A	PC	SOCIAL, EDUCATIONAL, CULTURAL AND RECREATIONAL PROGRAMS	250.
Total from continuation sheets				

Part XV Supplementary Information**3 Grants and Contributions Paid During the Year (Continuation)**

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
OAK RIDGE PRESBYTERIAN CHURCH 321 OAK RIDGE ROAD OAK RIDGE, NJ 07460	N/A	PC	RELIGIOUS PROGRAMS	300.
ORGANIZATION FOR TEACHERS OF SOCIAL STUDIES AT THE UNIVERSITY OF MISSOURI 114 ELLIS LIBRARY COLUMBIA, MO 65211	N/A	PC	EDUCATIONAL	2,500.
PADDLERS FOR HUMANITY PO BOX 2555 EAST HAMPTON, NY 11937	N/A	PC	SOCIAL, EDUCATIONAL, CULTURAL AND RECREATIONAL PROGRAMS	100.
PARTNERSHIP FOR A DRUG-FREE NEW JERSEY 155 MILLBURN AVENUE MILLBURN, NJ 07041	N/A	PC	SOCIAL, EDUCATIONAL, CULTURAL AND RECREATIONAL PROGRAMS	1,625.
PENN STATE UNIVERSITY UNIVERSITY PARK STATE COLLEGE, PA 16801	N/A	PC	EDUCATIONAL	100.
RARE 1310 NORTH COURTHOUSE ROAD, STE 110 ARLINGTON, VA 22201	N/A	PC	SOCIAL, EDUCATIONAL, CULTURAL AND RECREATIONAL PROGRAMS	750.
REGENTS OF THE UNIVERSITY OF MICHIGAN 1029 VAUGHN STREET ANN ARBOR, MI 48104	N/A	PC	EDUCATIONAL	20,000.
ROCKING THE BOAT INC. 812 EDGEWATER ROAD BRONX, NY 10474	N/A	PC	SOCIAL, EDUCATIONAL, CULTURAL AND RECREATIONAL PROGRAMS	100.
SCLERODERMA FOUNDATION INC. 300 ROSEWOOD DRIVE NO. 105 DANVERS, MA 01923	N/A	PC	MEDICAL RESEARCH	162.
SEEING EYE, INC. PO BOX 375 MORRISTOWN, NJ 07963	N/A	PC	PROVIDE SEEING EYE DOGS TO THE BLIND	50.
Total from continuation sheets				

Part XV Supplementary Information**3 Grants and Contributions Paid During the Year (Continuation)**

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
SIMON WIESENTHAL CENTER INC. 1399 S ROXBURY DRIVE LOS ANGELES, CA 90035	N/A	PC	SOCIAL, EDUCATIONAL, CULTURAL AND RECREATIONAL PROGRAMS	360.
SMITHSONIAN INSTITUTION 1000 JEFFERSON DRIVE SW WASHINGTON, DC 20560	N/A	PC	SOCIAL, EDUCATIONAL, CULTURAL AND RECREATIONAL PROGRAMS	300.
SOLOMON SCHECHTER SCHOOL OF WESTCHESTER INC 555 W HARTSDALE AVENUE HARTSDALE, NY 10530	N/A	PC	EDUCATIONAL	250.
SOUTH AMBOY NEW JERSEY PARADE COMMITTEE 141 BERTRAM AVENUE SOUTH AMBOY, NJ 08879	N/A	PC	SOCIAL, EDUCATIONAL, CULTURAL AND RECREATIONAL PROGRAMS	1,000.
SPECIAL OLYMPICS NEW JERSEY 3 PRINCESS ROAD LAWRENCEVILLE, NJ 08648	N/A	PC	SOCIAL, EDUCATIONAL, CULTURAL AND RECREATIONAL PROGRAMS	100.
ST. JUDE CHILDREN'S RESEARCH HOSPITAL 262 DANNY THOMAS PLACE MEMPHIS, TN 38105	N/A	PC	MEDICAL RESEARCH	100.
STARLIGHT'S CHILDREN FOUNDATION CENTURY PARK EAST, SUITE 4320 LOS ANGELES, CA 90067	N/A	PC	MEDIAL PROGRAMS	406.
SWIM ACROSS AMERICA, INC. ONE INTERNATIONAL PLACE, SUITE 4600 BOSTON, MA 02110	N/A	PC	MEDICAL RESEARCH	150.
THE LAMP FOUNDATION INC. PO BOX 39703 PHILADELPHIA, PA 19106	N/A	PC	SOCIAL, EDUCATIONAL, CULTURAL AND RECREATIONAL PROGRAMS	100.
TOYS FOR TOTS FOUNDATION 18251 QUANTICO GATEWAY DRIVE TRIANGLE, VA 2272	N/A	PC	SOCIAL, EDUCATIONAL, CULTURAL AND RECREATIONAL PROGRAMS	250.
Total from continuation sheets				

Part XV Supplementary Information**3 Grants and Contributions Paid During the Year (Continuation)**

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
TRIPLE NEGATIVE BREAST CANCER FOUNDATION PO BOX 204 NORWOOD, NJ 07648	N/A	PC	MEDICAL RESEARCH	250.
UNIVERSITY OF MARYLAND COLLEGE PARK FOUNDATION 4603 CALVERT ROAD COLLEGE PARK, MD 20742	N/A	PC	EDUCATIONAL	1,000.
US HOLOCAUST MEMORIAL CENTER 28123 ORCHARD LAKE ROAD FARMINGTON HILLS, MI 48334	N/A	PC	SOCIAL, EDUCATIONAL, CULTURAL AND RECREATIONAL PROGRAMS	860.
WELCOME HOME VETS INC 1370 BEDFORD DRIVE MELBOURNE, FL 32940	N/A	PC	SOCIAL, EDUCATIONAL, CULTURAL AND RECREATIONAL PROGRAMS	250.
WOMEN'S INTERNATIONAL ZIONIST ORGANIZATION 950 THIRD AVENUE SUITE 2803 NEW YORK, NY 10022	N/A	PC	SOCIAL, EDUCATIONAL, CULTURAL AND RECREATIONAL PROGRAMS	150.
WORLD WILDLIFE FUND INC 1250 24TH ST NW WASHINGTON, DC 20037	N/A	PC	SOCIAL, EDUCATIONAL, CULTURAL AND RECREATIONAL PROGRAMS	500.
Total from continuation sheets				

Application for Extension of Time To File an Exempt Organization Return

OMB No 1545-1709

Department of the Treasury
Internal Revenue Service

► File a separate application for each return.

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

- If you are filing for an Automatic 3-Month Extension, complete only Part I and check this box ☒
- If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this form)

Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868.

Electronic filing (e-file). You can electronically file Form 8868 if you need a 3-month automatic extension of time to file (6 months for a corporation required to file Form 990-T), or an additional (not automatic) 3-month extension of time. You can electronically file Form 8868 to request an extension of time to file any of the forms listed in Part I or Part II with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/efile and click on e-file for Charities & Nonprofits.

Part I Automatic 3-Month Extension of Time. Only submit original (no copies needed).

A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete

Part I only ☐

All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

Type or print	Name of exempt organization or other filer, see instructions.	Enter filer's identifying number
File by the due date for filing your return. See instructions.	NAMASTE FOUNDATION, INC.	Employer identification number (EIN) or 26-2541411
	Number, street, and room or suite no. If a P.O. box, see instructions. 187 BAYBERRY LANE	Social security number (SSN)
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. WATCHUNG, NJ 07069	

Enter the Return code for the return that this application is for (file a separate application for each return)

Application Is For	Return Code	Application Is For	Return Code
Form 990 or Form 990-EZ	01	Form 990-T (corporation)	07
Form 990-BL	02	Form 1041-A	08
Form 4720 (individual)	03	Form 4720 (other than individual)	09
Form 990-PF	04	Form 5227	10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

GAYLE BERNHAUT

- The books are in the care of ► **187 BAYBERRY LANE - WATCHUNG, NJ 07069**
Telephone No. ► **908-769-9501** Fax No. ►

- If the organization does not have an office or place of business in the United States, check this box ☐
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) . If this is for the whole group, check this box ☐. If it is for part of the group, check this box ☐ and attach a list with the names and EINs of all members the extension is for.

- 1 I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until **AUGUST 15, 2015**, to file the exempt organization return for the organization named above. The extension is for the organization's return for.
► ☒ calendar year **2014** or
► ☐ tax year beginning _____, and ending _____

- 2 If the tax year entered in line 1 is for less than 12 months, check reason: ☐ Initial return ☐ Final return ☐ Change in accounting period

3a If this application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	3a	\$	1,130.
b If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.	3b	\$	280.
c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	3c	\$	850.

Caution. If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.