

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



Return of Private Foundation

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

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

OMB No 1545-0052

Department of the Treasury

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

	11.0.	Cotolide Cottice P miletination about 1 or		and ito separa					
_		endar year 2014 or tax year beginning			, 2014	, and ending			, 20
		of foundation					^	Employer identif	
_		JANE ELIZABETH COHEN FOUNDA				,	26-6688178		
Number and street (or P O box number if mail is not delivered to				address)		Room/suite	В	Telephone numb	er (see instructions)
							1	() –
_	2.0	BOX 34835				<u> </u>	\perp		
-	City or	town, state or province, country, and ZIP or foreign po	stal code						
							C	If exemption applic pending, check here	ation is
	3ETI	HESDA, MD 20827						pending, check ner	,
G	Che	ck all that apply: Initial return		Initial return	of a former p	ublic charity	y n	1. Foreign organiza	dunna shack hora
		Final return		Amended re	turn	•	٦	2. Foreign organiza	· ·
		Address change	-	Name chang	е		j	85% test, check	here and attach
H	Che	ck type of organization X Section 501(c)(3) e	<u> </u>				computation .	
Ì	_	ection 4947(a)(1) nonexempt charitable trust		ther taxable pr		tion	E		n status was terminated
+				method: X C		crual	┥_	•)(1)(A), check here
•		1 —	ther (sp		asii Acc	Juan	F		s in a 60-month termination
		· · · · · · · · · · · · · · · · · · ·		d) must be on cas			-[under Section 507(t	J(T)(B), CHECK HEIE .
	_	<u></u>	Olulini (d	a) must be on cas	in basis.)				(d) Disbursements
L	art l	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d)		Revenue and	(b) Net inve	estment	(c)	Adjusted net	for charitable
		may not necessarily equal the amounts in	ex	penses per books	incon		• •	income	purposes
-		column (a) (see instructions).)							(cash basis only)
	1	Contributions, gifts, grants, etc., received (attach schedule)		27,000					
	2	Check ► if the foundation is not required to attach Sch B							
ļ	3	Interest on savings and temporary cash investments.		<u> </u>					
	4	Dividends and interest from securities						·	<u> </u>
	5a	Gross rents							
1	ь	Net rental income or (loss)							
ē	6a	Net gain or (loss) from sale of assets not on line 10							
Revenue	b	Gross sales price for all assets on line 6a							
ev	7	Capital cain net income (from Part IV Jine 2)							
œ	8	Net short-term capital gain.							
	9	Income modifications							
	10 a	Gross sales less returns =	िंही						
	b	Less Cost of goods sole	S						
							· · · · · ·		
	11	Other income (attach schedule)							
	12	Total. Add lines 1 through 11		27,000.				· · · · · · · · · · · · · · · · · · ·	
_	13	Compensation of officers, directors, trustees, etc		(†
ŝ		Other employee salaries and wages			ļ ·				
ုစ္က	14	Pension plans, employee benefits	 						
୍ଞ	15	· · · · · · · · · · · · · · · · · · ·	 	·	 				
X	ıoa	Legal fees (attach schedule)	 	1,553	 				1,553
<u>.</u>	Ь	Accounting fees (attach schedule)ATCH. 1.	 		 				1,555
`	C	Other professional fees (attach schedule)	 						
ř	17	Interest	-		 				
and Administrative Expenses	18	Taxes (attach schedule) (see instructions)	 		 				
Έ	19	Depreciation (attach schedule) and depletion.	ļ		 				
Ad	20	Occupancy	·	207	·				307
<u> </u>	21	Travel, conferences, and meetings		387	 				387
a	22	Printing and publications			 				
<u>n</u>	23	Other expenses (attach schedule) ATCH , 2 ,		96	·				96
ati	23 24 25	Total operating and administrative expenses.		<u> </u>					
ě	i	Add lines 13 through 23		2,036					2,036
Ö	25	Contributions, gifts, grants paid		25,700					25,700
	26_	Total expenses and disbursements. Add lines 24 and 25		27,736		0			0 27,736
	27	Subtract line 26 from line 12:							
	a	Excess of revenue over expenses and disbursements	L	-736	·L				1
	ь	Net investment income (if negative, enter -0-)				0			
	С	Adjusted net Income (if negative, enter -0-)							

		Balanca Chasta	Attached schedules and amounts in the	Beginning of year	End	of year
	art	Balance Sneets	description column should be for end-of-year amounts only. (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1 (Cash - non-interest-bear	ing	4,680.	3,944.	3,944.
-	1		cash investments			
-		•				
1		ess: allowance for dou	btful accounts ▶			
					 	
1	•	rieuges receivable P_	btful accounts ▶			
ı						
-			officers, directors, trustees, and other			
			tach schedule) (see instructions)			
			receivable (attach schedule) 🕨			
			btful accounts ▶		••••	
Assets			se			
SS		· · · · · · · · · · · · · · · · · · ·	deferred charges	i		
⋖∣			te government obligations (attach schedule).			
ı			e stock (attach schedule)			<u> </u>
1	с	Investments - corporate	e bonds (attach schedule)			
	11	Investments - land, building and equipment basis	S,			
ı		Less accumulated depreci	ation			
	12	Investments - mortgage	loans			
	13	Investments - other (att	ach schedule)			
	14	Land, buildings, and				
ļ		Less accumulated depreci	ation		!	
	15	Other assets (describe	>)			
			completed by all filers - see the			
			page 1, item I)		3,944	3,944
_	_		accrued expenses			
				1		╡
رم	l			1		1
Liabilities						╡
薑	li .		tors, trustees, and other disqualified persons			-
<u>E</u>			otes payable (attach schedule)	Į.	<u> </u>	╡
	22	Other liabilities (descrit	œ ▶)			4
		T-4-1 Habilities (add lin	17 through 22\	d		٨
_			es 17 through 22)	-		1
			ollow SFAS 117, check here . ► X			
es		•	24 through 26 and lines 30 and 31	4,680.	3,944	
or Fund Balanc	24	Unrestricted		4,000.	3,344	4
32	25	Temporarily restricted				-
P	26	•				4
5			o not follow SFAS 117, 🕨 🖳			
7		check here and cor	nplete lines 27 through 31.			
9	27	Capital stock, trust pri	ncipal, or current funds			_
Assets	28	Paid-in or capital surplus,	or land, bldg, and equipment fund			
AS	29	Retained earnings, accur	mulated income, endowment, or other funds			
Ą	30	Total net assets or fur	nd balances (see instructions), , , , , ,	4,680.	3,944	<u>-</u>
_	31	Total liabilities an	d net assets/fund balances (see			
_			<u> </u>		3,944	
	art I	Analysis of Ch	anges in Net Assets or Fund Bai	ances		
			balances at beginning of year - Par		(must agree with	
	end	-of-year figure repor	ted on prior year's return)		1	
2		er amount from Part				-736
						7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7
	5 Dec	creases not included	ın line 2 (itemize) ▶		5	
4	B Tot	al net assets or fund	balances at end of year (line 4 minu	us line 5) - Part II. column		
`						

Part V Capital Gains	and Losses for Tax on Inve	stment Income			1 290
	describe the kind(s) of property sold (e. ck warehouse; or common stock, 200 sl	hs MLC.Co.)	(b) How acquired P - Purchase	(c) Date acquired (mo., day, yr)	(d) Date sold (mo., day, yr)
 1a			D - Donation	(, 25), 3 /	
b					
С					
d					
е				L	<u> </u>
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		(h) Gain or (lo (e) plus (f) minu	
a					
b					
С					
<u>d</u>					
<u>e</u>		1. 11. 6		· - · · -	
Complete only for assets s	howing gain in column (h) and owned			Gains (Col. (h) g	
(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	col.	(k), but not less Losses (from co	
<u>a</u>			<u> </u>		
b					
C			·		
d					
Capital gain net income o	r (not capital loce)	gain, also enter in Part I, line 7 }	2		
3 Net short-term capital gai	in or (loss) as defined in sections 1: 1 in or (loss)		-		
	rt I, line 8, column (c) (see instr				
_			3		
Part V Qualification U	Inder Section 4940(e) for Red	luced Tax on Net Investment is	ncome		
	the section 4942 tax on the distributed to the dist		ase perio	d? [Yes X N
	ount in each column for each year		any en	tries	
(a) Base penod years	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets		(d) Distribution (col (b) divided b	
Calendar year (or tax year beginning in) 2013	14,474.	5,579.	 	(cor (b) divided b	2.594372
2012	13,789.	7,541.	 		1.828537
2011	4,439.	5,835.	1		0.760754
2010	5,462.	5,899.			0.925920
2009	9,356.	2,229.			4.197398
2 Total of line 1, column (d)		2		10.306981
3 Average distribution ratio	for the 5-year base period - divide	e the total on line 2 by 5, or by the	\ \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\		
	dation has been in existence if less		3		2.061396
4 Enter the net value of nor	ncharitable-use assets for 2014 fro	om Part X, line 5	4	-	9,703.
			5		20,002.
	ent income (1% of Part I, line 27b)		6		
			7		20,002.
					27,736.
If line 8 is equal to or graph Part VI instructions.	ons from Part XII, line 4 reater than line 7, check the box	in Part VI, line 1b, and complete	that part	using a 1% ta	

Form !	990-PF (2014) THE JANE ELIZABETH COHEN FOUNDATION 26-668	8178	Р	age 4
Par	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see i	nstruc	tions	s)
1a	Exempt operating foundations described in section 4940(d)(2), check here			
	Date of ruling or determination letter (attach copy of letter if necessary - see instructions)			
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check		_	0
	here ▶ X and enter 1% of Part I, line 27b			
C	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of			
	Part I, line 12, col. (b).			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 2			
3	Add lines 1 and 2		_	0
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 4			0
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0			0
6	Credits/Payments	_		
а	2014 estimated tax payments and 2013 overpayment credited to 2014 6a			
ь	Exempt foreign organizations - tax withheld at source			
С	Tax paid with application for extension of time to file (Form 8868) 6c			
d	Backup withholding erroneously withheld			
7	Total credits and payments. Add lines 6a through 6d			0
8	Enter any penalty for underpayment of estimated tax. Check here 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			0
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			
11	Enter the amount of line 10 to be Credited to 2015 estimated tax ▶ Refunded ▶ 11			
Par	t VII-A Statements Regarding Activities		_	
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it		Yes	No
	participate or intervene in any political campaign?	1a		X
ь	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see			
	Instructions for the definition)?	1b		Х
	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.			
С	Did the foundation file Form 1120-POL for this year?	1c	_	X
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year			
	(1) On the foundation ▶ \$(2) On foundation managers. ▶ \$			
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on			
	foundation managers. ▶ \$	li		
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		Х
	If "Yes," attach a detailed description of the activities.			
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of	1 1		1
	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		X
b	If "Yes," has it filed a tax return on Form 990-T for this year?	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		X
	If "Yes," attach the statement required by General Instruction T.			
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:	1		Ì
	By language in the governing instrument, or			
	By state legislation that effectively amends the governing instrument so that no mandatory directions that			
	conflict with the state law remain in the governing instrument?	6	X	<u> </u>
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV	7	Х	
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)			
	MD,			
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 Gº If "No," attach explanation	8b	X	<u> </u>
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or			1
	4942(j)(5) for calendar year 2014 or the taxable year beginning in 2014 (see instructions for Part XIV)? If "Yes,"			
	complete Part XIV	9		Х
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their			
. •	names and addresses	10		X
		m 99	0-PF	(2014)

1000	A VIII A Statements Bounding Activities (continued)			
	t VII-A Statements Regarding Activities (continued)	_	1	
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the		i i	Х
	meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)	11_		
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified			х
	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		
	Website address ► N/A The books are in care of ► JANE ELIZABETH COHEN Located at ►P.O. BOX 34835 BETHESDA, MD ZIP+4 ► 20827	5-1	30-	
14	The books are in care of PORMS BETTLESDA MD	:		-
	Located at Pr.O. Box 34033 BETHESDA, MD	- -		7-7
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here		•	لـــا
40	and enter the amount of tax-exempt interest received or accrued during the year		Yes	No
16	At any time during calendar year 2014, did the foundation have an interest in or a signature or other authority	46	162	X
	over a bank, securities, or other financial account in a foreign country?	<u> 16</u>		
	See the instructions for exceptions and filing requirements for FinCEN Form 114, (formerly TD F 90-22.1). If			
Day	"Yes," enter the name of the foreign country ► It VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
Га			Yes	No
4-	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		163	140
18	During the year did the foundation (either directly or indirectly): (1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes X No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a			
	disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?		}	
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?			
	(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)?			
	(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.)		1	
ŀ	of f any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations	i	,	
	section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	1b		Х
	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		ĺ	ĺ
	were not corrected before the first day of the tax year beginning in 2014?	1c		Х
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? Yes X No			
	If "Yes," list the years ▶			
ŧ	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)	l		1
	(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.)	<u>2b</u>	ļ	
•	: If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			
	>			
3 8	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise			
	at any time during the year?		1	
1	of If "Yes," did it have excess business holdings in 2014 as a result of (1) any purchase by the foundation or	l	1	1
	disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the		1	
	Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of			1
	the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the	2		
_	foundation had excess business holdings in 2014.)	3b	 	X
	a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	 	 ^
'	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its	46	1	x
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2014?	4b	O-PE	J

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

P	20	Δ.	7

and Contractors (continued)	. 61
3 Five highest-paid independent contractors for professional services (see instructions). If none, enter "NONE (a) Name and address of each person paid more than \$50,000 (b) Type of service	
(a) Name and address of each person paid more than \$50,000 (b) type of service	(c) Compensation
NONE	ı
· · · · · · · · · · · · · · · · · · ·	
otal number of others receiving over \$50,000 for professional services	
	
Part IX-A Summary of Direct Charitable Activities	
List the foundation's four largest direct chantable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficianes served, conferences convened, research papers produced, etc	Expenses
1 N/A	
2	
3	
4	
Part IX-B Summary of Program-Related Investments (see instructions)	l
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1 NONE	-
<u></u>	
2	
All other program-related investments See instructions	
3 NONE	
Total. Add lines 1 through 3	<u> </u>
	Form 990-PF (2)

Page 8

Par	see instructions.)	gn toun	dations,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purposes		
а	Average monthly fair market value of securities	1a	
b	Average of monthly cash balances	1b	9,851.
С	Fair market value of all other assets (see instructions)	1c	
d	Total (add lines 1a, b, and c)	1d	9,851.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d Cash deemed held for charitable activities. Enter 1 1/2 % of line 3 (for greater amount, see	3	9,851.
4		i	
	instructions)	4	148.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	9,703.
6	Minimum investment return. Enter 5% of line 5	6	485.
Par	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foun and certain foreign organizations check here ▶ ☐ and do not complete this part.)	dations	
1	Minimum investment return from Part X, line 6	1	485.
2a	Tax on investment income for 2014 from Part VI, line 5		
b	Income tax for 2014. (This does not include the tax from Part VI.)	i	
C	Add lines 2a and 2b	2c	
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	485.
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	485.
6	Deduction from distributable amount (see instructions)	6	·
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII,		
	<u>li</u> ne 1	7	485.
Par	XII 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	27,736.
þ	Program-related investments - total from Part IX-B	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
	purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
а	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	27,736.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income	_	•
	Enter 1% of Part I, line 27b (see instructions)	5	0
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	27,736.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when qualifies for the section 4940(e) reduction of tax in those years.	calculatii	ng whether the foundation

Page 9

	rt XIII Undistributed Income (see instru	(a)	(b)	(c)	(d)
1	Distributable amount for 2014 from Part XI,	Corpus	Years prior to 2013	2013	2014
,	Undistributed income, if any, as of the end of 2014.			 	
2	Enter amount for 2013 only				
h	Total for prior years 20 12 ,20 11 ,20 10	· · · · · · · · · · · · · · · · · · ·		····	
3	Excess distributions carryover, if any, to 2014				
	From 2009 9,245.				
ь	From 2010 5, 167.				
С	From 2011 4,147.				
d	From 2011 4,147. From 2012 13,412. From 2013 14,195.				}
е	From 2013 14,195.				
f	Total of lines 3a through e	46,166.			
4	Qualifying distributions for 2014 from Part XII,				
	line 4 ► \$ 27,736.				
а	Applied to 2013, but not more than line 2a				
b	Applied to undistributed income of prior years				
	(Election required - see instructions)			<u> </u>	
С	Treated as distributions out of corpus (Election				
	required - see instructions)				405
	Applied to 2014 distributable amount	27,251.			485.
	Remaining amount distributed out of corpus	27,231.		· - · · · · · · · · · · · · · · · · · · ·	
5	Excess distributions carryover applied to 2014 (If an amount appears in column (d), the same				
	amount must be shown in column (a).)				
6	Enter the net total of each column as Indicated below:				
2	Corpus Add lines 3f, 4c, and 4e. Subtract line 5	73,417.			
		<u></u>			
D	Prior years' undistributed income. Subtract line 4b from line 2b				
C	Enter the amount of prior years' undistributed				
	income for which a notice of deficiency has been issued, or on which the section 4942(a)				
	tax has been previously assessed				
d	Subtract line 6c from line 6b. Taxable				
	amount - see instructions				ļ. <u>.</u>
е	Undistributed income for 2013. Subtract line 4a from line 2a. Taxable amount - see				
	instructions				
f	Undistributed income for 2014. Subtract lines				
	4d and 5 from line 1. This amount must be				
	distributed in 2015	<u> </u>		_ 	
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)	<u></u>			
8	Excess distributions carryover from 2009 not applied on line 5 or line 7 (see instructions)	9,245.			
9	Excess distributions carryover to 2015.				
3	Subtract lines 7 and 8 from line 6a	64,172.			
10	Analysis of line 9:				
а	Excess from 2010 5,167.				
b	Excess from 2011 4, 147.	·			
C	Excess from 2012 13, 412.				
d					
_	Excess from 2014 27, 251.				

aı	it XIV Private Ope					MOR 3 2 2 2 2 2 2 2 2 2
_			(see instructions ar			NOT APPLICABL
	If the foundation has i					
	foundation, and the ruling					V(2) es 4042(i)(E)
D	Check box to indicate v	Tax year	is a private operating	Prior 3 years	in section 4942(j)(3) or 4942(j)(5)
	Enter the lesser of the ad- justed net income from Part	(a) 2014	(b) 2013	(c) 2012	(d) 2011	(e) Total
	I or the minimum investment	(8) 2014	(0) 2010	(0) 2012	(4)2011	
	return from Part X for each year listed					
_	85% of line 2a					
	Qualifying distributions from Part					
	XII, line 4 for each year listed		_ 			
	Amounts included in line 2c not used directly for active conduct					
	of exempt activities					-
	Qualifying distributions made directly for active conduct of					
	exempt activities Subtract line					
	2d from line 2c Complete 3a, b, or c for the					
	alternative test relied upon					
	"Assets" alternative test - enter					
	(1) Value of all assets (2) Value of assets qualifying					·
	under section					
ь	4942(j)(3)(B)(i) "Endowment" alternative test-					
	enter 2/3 of minimum invest-					
	ment return shown in Part X, line 6 for each year listed					
	"Support" alternative test - enter					
	(1) Total support other than					
	gross investment income (interest, dividends, rents,					
	payments on securities toans (section 512(a)(5)),					
	or royalties)		· · · · · · · · · · · · · · · · · · ·			
	(2) Support from general public and 5 or more					
	exempt organizations as provided in section 4942					
	()(3)(B)(III)					
	(3) Largest amount of sup- port from an exempt					
	organization					
Dai		ntary Information (Complete this par	t only if the four	ndation had \$5,000	or more in assets
٦		during the year - s		comy in this roun	idation nad \$0,000	or more in assets
1	Information Regardin	g Foundation Manage	rs:			
a	List any managers of	the foundation who I	nave contributed mor	e than 2% of the to	otal contributions recei	ved by the foundation
	-		iey nave contributed r	nore than \$5,000). (See section 507(d)(2))	
	JANE E. COI		100/		,,,	
b	List any managers of ownership of a partner					ly large poπion of the
	Ownership of a partite	Ship of other entity) of	Willon the roundation	rnas a 1070 or great	bi interest,	
	N/A					
2	Information Regardin	g Contribution, Grant	. Gift. Loan. Scholarsh	nip. etc Programs:		·
_	<u>~</u>	•		•	aritable organizations	and does not accom
	unsolicited requests for	or funds. If the found	ation makes gifts, gra	ants, etc. (see instru	ictions) to individuals	or organizations under
	other conditions, comp			•	•	· ·
a	The name, address, a	nd telephone number	or e-mail address of	the person to whom a	applications should be ac	idressed:
b	The form in which app	lications should be su	bmitted and information	on and materials the	y should include:	

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

c Any submission deadlines

Form 990-PF (2014)	(2224)	·		Page 11
Part XV Supplementary Information	continued)	oved for E	interes December	
3 Grants and Contributions Paid Dur	Ing the Year or Appl	Foundation		
Recipient (home or hyppose)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		
a Paid during the year	NONE	PC	GENERAL PURPOSES.	25,700.
HISTORIC RITTENHOUSETOWN INC	NONE	PC	GENERAL PURPOSES.	25,700.
206 LINCOLN DRIVE				
DUTTABET BUTA DA 10144				
PHILADELPHIA, PA 19144				
			,	
		1		
		1		
			1	
			}	
		1	1	
	<u></u>	<u> </u>		05 700
Total	 		▶ 3a	25,700.
b Approved for future payment			1	
			1	
		İ		
			1	
			1	
		1	1	
			1	
Tabel	<u> </u>	1	N 25	
Total	<u> </u>		<u>▶</u> 3b	

JSA 4E1491 1 000

Page 12

Part XVI-A Analysis of Income-Producing Activities Enter gross amounts unless otherwise indicated Unrelated business income Excluded by section 512, 513, or 514 (e)							
Program service revenue [*]	(a) Business code	(b) Amount	(c) Exclusion code	(d)	Related or exempt function income (See instructions)		
a NONE			 		(See instructions)		
			 				
b			 				
d							
е			ļ				
f			<u> </u>				
g Fees and contracts from government agencies							
2 Membership dues and assessments							
3 Interest on savings and temporary cash investments			l				
4 Dividends and interest from securities			L				
5 Net rental income or (loss) from real estate:							
a Debt-financed property			<u></u>				
b Not debt-financed property					i		
6 Net rental income or (loss) from personal property .							
7 Other investment income			ļ				
8 Gain or (loss) from sales of assets other than inventory	<u>.</u> .		ļ				
9 Net income or (loss) from special events							
O Gross profit or (loss) from sales of inventory				<u> </u>			
1 Other revenue: a NONE			 				
b			<u> </u>				
c			 				
d				<u> </u>			
e			 	ļ <u>-</u>			
2 Subtotal. Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e)		L	<u> </u>	1	L.,		
Part XVI-B Relationship of Activities Line No. Explain below how each activities					uted importantly to		
▼ accomplishment of the foundation							
							
							
							
							
			···	<u>.</u>			
				·	_		
				-			
					<u>-</u>		
	····						
				- ·· · · · - · - · - · - · - · · · · ·			
							

Form 990)-PF (20	014)	THE JANE	E ELIZABETH CO				0-0000			ge 13
Part X	(VII	Information R Exempt Organization direct	Regarding Tra	ansfers To and	Transactio	ons and	Relationships With	n Nonci	hari	table	;
1 Di	d the	organization direc	tly or indirectly	engage in any of the	ne following	with any	other organization desc	cribed		Yes	No
		on 501(c) of the Cations?	ode (other than	section 501(c)(3) o	organizations) or in se	ection 527, relating to po	olitical			
	-		ng foundation to	a noncharitable ex	empt organiz	zation of:		1	l		ĺ
		•	-					1	la(1)		Х
											Х
		ransactions:									
(1) Sale	es of assets to a no	oncharitable exe	mpt organization				1	[b(1)		Х
(2) Pur	chases of assets fr	om a noncharita	able exempt organiza	ation			[1	1 b(2)		Х
											X
											X
											Х
											Х
											X
d If	the a	answer to any of t	he above is "Ye	es," complete the f	ollowing sch	nedule. C	olumn (b) should alway	s show	the 1	fair m	ıarke
		_					If the foundation receive				
va	alue ir	n any transaction o	or sharing arran	gement, show in co	olumn (d) th	e value c	of the goods, other asse	ts, or se	rvice	s rec	eived
(a) Line	no	(b) Amount involved	(c) Name of	noncharitable exempt org	janization		ription of transfers, transactions	s, and sharir	ng arra	ngeme	nts
		N/A				N/A					
			<u> </u>								
			<u> </u>								
							· · · · · · · · · · · · · · · · · · ·				
	L										
				<u></u>							
			<u> </u>								
				<u>-</u>							
		<u>. </u>									
		- 		<u></u>							
						· -					
2a Is	the	foundation directly	or indirectly a	ffiliated with, or rel	lated to, one	or more	e tax-exempt organization	ons _	_	_	_
d	escrit	ped in section 501(c) of the Code (d	other than section 5	01(c)(3)) or i	n section	527?	L	Y	es 🔯	No.
b If	"Yes	" complete the foll									
		(a) Name of organizat	ion	(b) Type of	organization		(c) Description	of relationsh	nıp	_	
		·									
	1		-t Ab-4 b			nadulas and	olatomonto and to the heat of m	knowlada		halof it	
				nined this return, including itaxpayer) is based on all info			statements, and to the best of m ny knowledge	y knowledge	ano i	Deller, 11	. IS THU
Sign		×2 5	Sel	1 5/6	1.1			y the IRS	discus	s this	return
Here		1 acce C	6	5/8	// 2	· · · ·	with		parer		below
	Sigi	nature of officer or trusted	a	Date		Title	(se	e Instructions	:)?^	Yes	N-
	<u> </u>	D-st/Time		Designed area of the	m /2	·	Data		אודי		
Paid		Print/Type preparer's r		Preparere signatur			Date Check	└──┙¨╵	HIV		
Prepa	arer		OMPSON	ANG C TUDADOO	NV DIIC		4/40// self-em	ibiolea			
-				ANS & THOMPSO		····	Firm's EIN	<u> </u>			
Use C	אומל	Firm's address > 2	. JU HEKNDON	PARKWAY, SUI	IF ZOP		İ				

703-478-0320

Firm's address

HERNDON,

20170-4467 Phone no

(Form 990, 990-EZ, or 990-PF)

Schedule of Contributors

Attach to Form 990, Form 990-EZ, or Form 990-PF.

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

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

Employer identification number THE JANE ELIZABETH COHEN FOUNDATION 26-6688178 Organization type (check one) Filers of: Section: 501(c)(Form 990 or 990-EZ) (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 foundation Check if your organization is covered by the General Rule or a Special Rule. Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. **General Rule** [X] 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 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

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).

General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions

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)

Employer Identification number 26-6688178

Part I	Contributors (see instructions). Use duplicate copies	of Part I if additional space is nee	ded.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1_	JANE E. COHEN 10132 CRESTBERRY PLACE BETHESDA, MD 20817	\$ <u>27,000</u> .	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$ \$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
~		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		 \$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		 \$	Person Payroll Noncash (Complete Part II for noncash contributions.)

Schedule B (Form 990, 990-EZ, or 990-PF) (2014)

Name of organization THE JANE ELIZABETH COHEN FOUNDATION

Employer identification number 26-6688178

Part II	Noncash Property	(see instructions)	Use duplicate copies	of Part II if additional	space is needed
u allu III	itoriousii i opcity	(300 11130 4000110).	Ouc auphoute copies	or r art ii ii aaaiiioria	opaco io necaca.

(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
		 \$	

Employer identification number Name of organization THE JANE ELIZABETH COHEN FOUNDATION 26-6688178 Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once. See instructions.) ▶\$ Use duplicate copies of Part III if additional space is needed. (a) No. from Part I (c) Use of gift (d) Description of how gift is held (b) Purpose of gift (e) Transfer of gift Relationship of transferor to transferee Transferee's name, address, and ZIP + 4 (a) No. (c) Use of gift from (b) Purpose of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of glft (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

Schedule B (Form 990, 990-EZ, or 990-PF) (2014)

ATTACHMENT 1 PAGE 18

l	-	
	E	
I	Z	
l	H	
I	TUTMUTATION	
	F	
l	Ø	

FEES	
ACCOUNTING	
H	
PART	
990PF,	
Ō	

CHARITABLE	PURPOSES	1,553.	1,553.
ADJUSTED NET	INCOME		
NET INVESTMENT	INCOME		
REVENUE AND EXPENSES	PER BOOKS	1,553.	1,553.
	DESCRIPTION	RUSSELL, EVANS & THOMPSON	TOTALS

ATTACHMENT 2 PAGE 19

F	•		ı
i		,	•
:	2		
1	3	L	ļ
ì	2	•	ì
:	3	C	•
i	•	•	١
`	•	í	į
!	•	4	٠
Į	=		١
I	÷	-	۱
ı	<	1	۱

~

	REVENUE AND
FORM 990PF, PART I - OTHER EXPENSES	

EXPENSES	PER BOOKS	80.	16.	.96
				S.IATOT

DESCRIPTION
PO BOX RENTAL
POSTAGE

80. 16.

CHARITABLE PURPOSES 96.

ATTACHMENT

FORM 990PF, PART VIII - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES

					\ `
NAME AND ADDRESS	TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION	COMPENSATION	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	EXPENSE ACCT AND OTHER ALLOWANCES	ď
JANE ELIZABETH COHEN 10132 CRESTBERRY PLACE BETHESDA, MD 20817	TRUSTEE 4.50	0	0	0	
JANET R. MILLER 914 BARKER HILL ROAD HERNDON, VA 20170	ADVISOR TRUSTEE 1.30	0	0	0	
CATHERINE MICK 1003 REMINGTON ROAD WYNNEWOOD, PA 19096	ADVISOR TRUSTEE	0	0	0	
SHEILA RABB WEIDENFELD 3059 Q STREET, NW WASHINGTON, DC 20007	ADVISOR TRUSTEE	0	0	0	
	GRAND TOTALS	0	0	0	

ATTACHMENT 3 PAGE 20