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Form 990-PF

Return of Private Foundation

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

OMB No 1545-0052

Department of the Treasury

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

▶ Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf. Open to Public inspection For calendar year 2014 or tax year beginning and ending Name of foundation A Employer identification number CHON FAMILY FOUNDATION, INC. 35-2462413 Number and street (or P O box number if mail is not delivered to street address) Room/suite Telephone number (see instructions) 19 AUDREY URBAN COURT 201-731-3279 City or town, state or province, country, and ZIP or foreign postal code If exemption application is pending, check here ALPINE NJ 07620 G Check all that apply Initial return Initial return of a former public charity 1 Foreign organizations, check here Final return Amended return 2. Foreign organizations meeting the Address change Name change 85% test, check here and attach computation Check type of organization. X Section 501(c)(3) exempt private foundation If private foundation status was terminated under Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation section 507(b)(1)(A), check here X Cash I Fair market value of all assets at J Accounting method If the foundation is in a 60-month termination end of year (from Part II, col. (c). Other (specify) under section 507(b)(1)(B), check here 778,891 line 16) ▶ \$ (Part I, column (d) must be on cash basis) Part I (d) Disbursements Analysis of Revenue and Expenses (The total of (a) Revenue and (b) Net investment (c) Adjusted net for charitable amounts in columns (b), (c), and (d) may not necessarily equal expenses per books income purposes the amounts in column (a) (see instructions)) (cash basis only) Contributions, gifts, grants, etc., received (attach schedule) 200,001 2 Check ▶ I if the foundation is **not** required to attach Sch. B 446 3 Interest on savings and temporary cash investments 446 4 Dividends and interest from securities 14,633 14,633 5a Gross rents Net rental income or (loss) b Revenue Stmt 1 -1,773 6a Net gain or (loss) from sale of assets not on line 10 356,882 b Gross sales price for all assets on line 6a 0 7 Capital gain net income (from Part IV, line 2) 0 8 Net short-term capital gain 9 Income modifications 10a Gross sales less returns and allowances Less Cost of goods sold 8 2015 Gross profit or (loss) (attach schedule) 11 Other income (attach schedule) 205,715,079 213,307 0 12 Total. Add lines 1 through 11 Operating and Administrative/Expenses 13 Compensation of officers, directors, trustees, etc. 14 Other employee salaries and wages 15 Pension plans, employee benefits Legal fees (attach schedule) 16a Accounting fees (attach schedule) 5,536 5,536 Stmt 2 Other professional fees (attach schedule) С 17 Interest Stmt 3 18 Taxes (attach schedule) (see instructions) 19 Depreciation (attach schedule) and depletion 20 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications 876 451 Stmt 4 23 Other expenses (att sch) 24 Total operating and administrative expenses. 6,431 5,536 0 451 Add lines 13 through 23 35,500 35,500 25 Contributions, gifts, grants paid 5,536 0 35,951 41,931 26 Total expenses and disbursements. Add lines 24 and 25 Subtract line 26 from line 12 27 171,376 Excess of revenue over expenses and disbursements 9,543

For Paperwork Reduction Act Notice, see instructions.

Net investment income (if negative, enter -0-)

Adjusted net income (if negative, enter -0-)

Form 990-PF (2014)

0

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

6

763,327

	ribe the kind(s) of property sold (e.g., real estate, arehouse, 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 N/A					
b					
с					
d					
е					
(e) Gross sales price	(f) Depreciation allowed (or allowable)		st or other basis expense of sale		n or (loss) (f) minus (g)
a					
b					
С					
d			. –		
e					
Complete only for assets showin	g gain in column (h) and owned by th	ne foundation on 12/3	31/69	(I) Gains (Co	l (h) gain minus
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69		xcess of col (i)	col (k), but no	ot less than -0-) or from col (h))
a			·		
b					
С					
d					
e					
? Capital gain net income or (net c	apital loss) If gain, also ente		•	2	
Net short-term capital gain or (lo	ss) as defined in sections 1222(5) ar	_			
If gain, also enter in Part I, line 8	, column (c) (see instructions) If (los	ss), enter -0- in			
Part I, line 8	• • • • • • • • • • • • • • • • • • • •	·	•	3	
1 a.t.1, 11110 U				3	
Part V Qualification Use or optional use by domestic private	nder Section 4940(e) for Rece e foundations subject to the section 4 his part blank			 	
Part V Qualification Use for optional use by domestic private section 4940(d)(2) applies, leave the foundation liable for the sec 쌗es,?the foundation does not qualification.	e foundations subject to the section 4 his part blank ction 4942 tax on the distributable am ilify under section 4940(e) Do not co	940(a) tax on net inv nount of any year in the mplete this part	restment income) he base period?	 	X Yes []
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Form	1 990-PF (2014) CHON FAMILY FOUNDATION, INC. 35-2462413			Page 4	4
Pe	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 ▶ and enter 발/A?on line 1				-
	Date of ruling or determination letter (attach copy of letter if necessary뽁ee instructions)				
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check			191	_
	here ▶ and enter 1% of Part I, line 27b				_
С	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-)			<u> </u>	
3	Add lines 1 and 2			191	Ē
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)			C	_
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-			191	
6	Credits/Payments				
а	2014 estimated tax payments and 2013 overpayment credited to 2014 6a 6a				
b	Exempt foreign organizations ?tax withheld at source 6b				
С	Tax paid with application for extension of time to file (Form 8868) 6c 350				
d	Backup withholding erroneously withheld 6d				
7	Total credits and payments Add lines 6a through 6d			350)
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached				_
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed				_
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			159	•
11	Enter the amount of line 10 to be Credited to 2015 estimated tax ▶ 159 Refunded ▶ 11				_
Pa	rt 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		Ye	s No	_
	participate or intervene in any political campaign?	18		Х	_
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see				_
	Instructions for the definition)?	11	,	x	
	If the answer is 벣es?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?	10	,	x	
d	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 > \$				
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2]	x	
	If પtes,?attach a detailed description of the activities			1	_
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 Wes,?attach a conformed copy of the changes	3	1	X	
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	48	3	X	_
b	If 벣es,?has it filed a tax return on Form 990-T for this year? N/2				_
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5	-	X	_
	If 悦es,?attach the statement required by General Instruction T		1		_
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?	6	<u>.</u>	K .	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If 벣es,?complete Part II, col. (c), and Part XV	7	. 3	ζ .	
8a	Enter the states to which the foundation reports or with which it is registered (see instructions) ▶				
	NJ				
b	If the answer is 벣es?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 謎o,?attach explanation See Stmt 6	81	b	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 벣es,?				
	complete Part XIV	_ 9	<u> </u>	<u> </u>	_
10	Did any persons become substantial contributors during the tax year? If 벣es,?attach a schedule listing their		, ا	ا ج	
	names and addresses SEME /	1 1		Da. I	

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Form	1990-PF (2014) CHON FAMILY FOUNDATION, INC. 35-2462413	3			Р	age 5
P	rt 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 ሢes,?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 벣es,?attach statement (see instructions)			12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption applica	tion?		13	X	
	Website address ► N/A					
14		none no 🕨	212-6	01-	190	8
	19 AUDREY URBAN COURT					
	Located at ▶ ALPINE NJ	ZIP+4 ▶	07620	1		
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			
16	At any time during calendar year 2014, did the foundation have an interest in or a signature or other authority				Yes	No
	over a bank, securities, or other financial account in a foreign country?			16		X
	See the instructions for exceptions and filing requirements for FinCEN Form 114, (formerly TD F 90-22 1) If					
	"Yes," enter the name of the foreign country ▶		· -			Ĺ
_Pa	ut VII-B Statements Regarding Activities for Which Form 4720 May Be Required					
	File Form 4720 if any item is checked in the 쌗es?column, unless an exception applies.				Yes	No
1a	During the year did the foundation (either directly or indirectly)					
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	Yes	X No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a					ĺ
	disqualified person?	Yes	X No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	Yes				
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	Yes	X No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for	 1				
	the benefit or use of a disqualified person)?	Yes	X No			ĺ
	(6) Agree to pay money or property to a government official? (Exception. Check 말이게 the					
	foundation agreed to make a grant to or to employ the official for a period after	п.	₩			ĺ
	termination of government service, if terminating within 90 days)	Yes	X No			
b	If any answer is 뱃es?to 1a(1)?6), did any of the acts fail to qualify under the exceptions described in Regulation	ons	N/A	41.		İ
	section 53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?		N/A	1b		
_	Organizations relying on a current notice regarding disaster assistance check here Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that					
С	were not corrected before the first day of the tax year beginning in 2014?		N/A	1c		
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private		11/11	10		
-	operating foundation defined in section 4942(j)(3) or 4942(j)(5))					
а	At the end of tax year 2014, did the foundation have any undistributed income (lines 6d and			ļ		
-	6e, Part XIII) for tax year(s) beginning before 2014?	Yes	X No			
	If 벣es,?list the years ▶ 20 , 20 , 20 , 20					
ь	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 멅o?and attach statement ?see instructions)		N/A	2b	<u> </u>	<u></u>
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here					
	▶ 20 , 20 , 20 , 20					
За	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise					
	at any time during the year?	Yes	X No			
b	If 쌗es,?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	3b	<u> </u>	<u> </u>
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purpose			4a	 	X
þ	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 2	0147		4b	00.5	<u> X</u>
				Form 9	3U-1	F (2014)

orm 990-PF (2014) CHON FAMILY Part VII-B . Statements Regard	FOUNDATION, INC	5. 35-2 Form 4720 May Ba D	462413	mund\	Pag
5a During the year did the foundation pay		roim 4/20 May Be R	equirea (cont	nuea)	
(1) Carry on propaganda, or otherwise		costion 4045(o)\2	\Box	es X No	
(2) Influence the outcome of any speci			¹	es X No	
directly or indirectly, any voter regis		555), or to carry on,	\Box	es 🗓 No	
(3) Provide a grant to an individual for		20002			
(4) Provide a grant to an organization of			י 🗀 י	es 🔀 No	
section 4945(d)(4)(A)? (see instruc	_	mzation described in		es X No	
(5) Provide for any purpose other than	•	erani or aducational		es 🗶 No	
purposes, or for the prevention of o		erary, or educational		es X No	
If any answer is 벣es?to 5a(1)?5), did a	•	life under the eventions do	لـــا	es X No	
Regulations section 53 4945 or in a cur				N/A	5b
Organizations relying on a current notice				"	30
If the answer is 锐es?to question 5a(4)					
because it maintained expenditure resp		ption from the tax	n/a 🗆	es No	
If 벣es,?attach the statement required l	•	(4)	N/A []	es 🗀 No	
Did the foundation, during the year, rec	, ,	V- /			
on a personal benefit contract?	cive any lands, allectly of indirec	ay, to pay premiums	г.	es 🗓 No	
Did the foundation, during the year, pay	r premiums, directly or indirectly	on a nersonal benefit contr		G2 TF IAO	6b
If 벣es?to 6b, file Form 8870	promising, and only of maneous,	on a personal benefit conti	acı,		70
At any time during the tax year, was the	foundation a party to a prohibite	nd tay shelter transaction?		es X No	
If 쌚es,?did the foundation receive any	· •			N/A	7b
	fficers, Directors, Truste				
and Contractors	,,	, all and of that	-av.v, inginy	. a.a Employ	,
List all officers, directors, trustees, for	indation managers and their co	ompensation (see instruc	tions).		
(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	(e) Expense acco
		devoted to position	enter 50-)	compensation	
Tason Chon	ALPINE				
9 Audrey Urban Court	NJ 07620	1.00	0	0	
ulie Park-Chon	ALPINE				
9 Audrey Urban Court	NJ 07620	1.00	0	0	
ustin Song	NEW YORK				
25 West 34th Street, 9th Floor	NY 10022	1.00	0	0	
Compensation of five highest-paid e		aluded as line 4 2ans inch			
Compensation of five highest-paid e 받ONE.?	improyees (other than those inc	ciadea on line i rsee inst	ructions). It non	e, enter	
(a) Name and address of each employe	e 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 acco
IONE					
		-			
				i .	

Form 990-PF (20	14) CHON FAMILY FOUNDATION, INC.	35-2462413	Page 7
Part VIII .	Information About Officers, Directors, Trustees, Found Contractors (continued)	ndation Managers, Highly Paid E	mployees,
3 Five highe	est-paid independent contractors for professional services (see in	structions). If none, enter 받ONE.?	
	(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE			
Total number of	others receiving over \$50,000 for professional services		•
Part IX-A	Summary of Direct Charitable Activities		
	four largest direct charitable activities during the tax year. Include relevant statistical information therefore the peneficiaries served conferences convened, research papers produced, etc.	ion such as the number of	Expenses
	T GRANTS AND CONTRIBUTIONS PAID TO IZATIONS	CHARITABLE	35 500
2		1	35,500
3			
4		····	
Part IX-B	Summary of Program-Related Investments (see ins	tructions)	
	rgest program-related investments made by the foundation during the tax year on lines 1 and 2	· · · · · · · · · · · · · · · · · · ·	Amount
1 N/A			
2			
	elated investments. See instructions		
3			
Total. Add lines	1 through 3	· · · · · · · · · · · · · · · · · · ·	

Form 990-PF (2014)

35,951

За

3b

4

5

6

а

b

Suitability test (prior IRS approval required)

Enter 1% of Part I, line 27b (see instructions)

Cash distribution test (attach the required schedule)

Adjusted qualifying distributions. Subtract line 5 from line 4

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

Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4

Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation

Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income

Form 990-PF (2014) CHON FAMILY F		35-24624:	13	Page 9
Part XIII . Undistributed Income (s				
1 Distributable amount for 2014 from Part XI,	(a) Corpus	(b) Years prior to 2013	(c) 2013	(d) 2014
line 7	<u></u>			37,898
2 Undistributed income, if any, as of the end	of 2014			·
a Enter amount for 2013 only	·····		384	
b Total for prior years 20, 20				
3 Excess distributions carryover, if any, to 20	14			
a From 2009				
b From 2010				
c From 2011				
d From 2012				
e From 2013				
f Total of lines 3a through e				
4 Qualifying distributions for 2014 from Part X	KII,			•
line 4 ▶ \$35,951				
a Applied to 2013, but not more than line 2a			384	
b Applied to undistributed income of prior year	ars			
(Election required ?see instructions)		1		
c Treated as distributions out of corpus (Elec	tion			
required ?see instructions)				
d Applied to 2014 distributable amount				35,567
e Remaining amount distributed out of corpus	s =			
5 Excess distributions carryover applied to 20				
(If an amount appears in column (d), the sa				· · · · · · · · · · · · · · · · · · ·
amount must be shown in column (a))				
6 Enter the net total of each column as				
indicated below:	İ			
a Corpus Add lines 3f, 4c, and 4e Subtract I	line 5			
b Prior years' undistributed income Subtract				······································
line 4b from line 2b				
c Enter the amount of prior years' undistribute	ed			
income for which a notice of deficiency has	!			
been issued, or on which the section 4942(
tax has been previously assessed	۵ <i>)</i>			
d Subtract line 6c from line 6b Taxable				
amount ?see instructions				
e Undistributed income for 2013 Subtract lin	e			
4a from line 2a Taxable amount ?see				
instructions				
f Undistributed income for 2014 Subtract lin				
4d and 5 from line 1. This amount must be				0 221
distributed in 2015				2,331
7 Amounts treated as distributions out of cor	·			
to satisfy requirements imposed by section				
170(b)(1)(F) or 4942(g)(3) (Election may be	•			
required뾱ee instructions)	<u> </u>			
8 Excess distributions carryover from 2009 n				
applied on line 5 or line 7 (see instructions))			
9 Excess distributions carryover to 2015.	1			
Subtract lines 7 and 8 from line 6a				······································
10 Analysis of line 9				
a Excess from 2010				
b Excess from 2011				
c Excess from 2012				
d Excess from 2013				
e Excess from 2014	l			

	990-PF (2014) CHON FAMILY IT XIV Private Operating Fou			35-2462		Page Page
	If the foundation has received a ruling or				3)	
	foundation, and the ruling is effective for			ating		
ь	Check box to indicate whether the found		_	ribad in addish D	1042()(2) ==	40(1)(5)
	Enter the lesser of the adjusted net	Tax year	Taking loundation desc		1942(j)(3) or 49	42(_J)(5)
Za			41,0040	Prior 3 years		(e) Total
	income from Part I or the minimum	(a) 2014	(b) 2013	(c) 2012	(d) 2011	
	investment return from Part X for					
_	each year listed				+-	
b	85% of line 2a					
С	Qualifying distributions from Part XII,					
	line 4 for each year listed			 	+	
q	Amounts included in line 2c not used directly					
_	for active conduct of exempt activities				 	
е	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.					
а	Subsets?alternative test?enter					
	(1) Value of all assets		 	- 		1
	(2) Value of assets qualifying under					
I	section 4942(j)(3)(B)(i)		 -	-		+
b	Indowment?alternative test ?enter 2/3					
	of minimum investment return shown in					
	Part X, line 6 for each year listed					
С	맞upport?alternative test ?enter					İ
	(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)				<u> </u>	
	(3) Largest amount of support from					
	an exempt organization			 		
	(4) Gross investment income	4: (01-	4. 45.3 4 5 - 3	£ 41 £	1.05.000	
14.6	Supplementary Inform		-	t the foundation i	nad \$5,000 or mo	re in assets at
	any time during the y		ctions.)			
1	Information Regarding Foundation Ma	-	46 00/ -6464-4		allo allo de estados	
а	List any managers of the foundation who				-	
	before the close of any tax year (but only	if they have contrib	uted more than \$5,000) (See section 507(d)(2))	\$200.001
	JASON CHON	100/	. 6 4 1	-1		\$200,001
b	List any managers of the foundation who				ge portion of the	
	ownership of a partnership or other entity	() of which the found	lation has a 10% or gre	eater interest		
	JASON CHON					
2	Information Regarding Contribution, C					
	Check here ► X if the foundation only			*		
	unsolicited requests for funds. If the four		grants, etc. (see instru	ctions) to individuals o	r organizations under	
	other conditions, complete items 2a, b, c					
а	The name, address, and telephone num	ber or e-mail addres	s of the person to who	m applications should l	be addressed	
	N/A					
b	The form in which applications should be	e submitted and info	rmation and materials	they should include		
	N/A					
C	Any submission deadlines.					
	N/A					
d	Any restrictions or limitations on awards	, such as by geograp	onical areas, charitable	tields, kinds of institut	ions, or other	
	factors:					
	N/A					
AA						Form 990-F

_____ Supplementary Information (continued) Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient show any relationship to Purpose of grant or status of Amount any foundation manager contribution recipient Name and address (home or business) or substantial contributor a Paid during the year **ENOB** 40 WEST 37TH STREET SUITE NEW YORK NY 10018 TO ASSIST PURPOSE OF DONEE ORGANIZTN 7,500 FAMILY TOUCH 240 GRAND AVENUE PC LEONIA NJ 07605 TO ASSIST PURPOSE OF DONEE ORGANIZTN 5,000 HOLY NAME MEDICAL CENTER 718 TEANECK ROAD PC TEANECK NJ 07666 TO ASSIST PURPOSE OF DONEE ORGANIZTN 2,000 **KACF** 31 WEST 34TH STREET PC NEW YORK NY 10001 TO ASSIST PURPOSE OF DONEE ORGANIZTN 15,000 KCCP 3490 US HWY 1, SUITE 7-C PC PRINCETON NJ 08540 TO ASSIST PURPOSE OF DONEE **ORGANIZTN** 3,000 BEAUTIFUL FOUNDATION 1605 JOHN STREET #309 PC TO ASSIST PURPOSE OF DONEE FORT LEE NJ 07024 **ORGANIZTN** 2,500 SOMAHNG CHURCH **451 GRAND AVENUE** PC PALISADES PARK NJ 07650 TO ASSIST PURPOSE OF DONEE ORGANIZTN 500 **▶** 3a 35,500 Total b Approved for future payment N/A ▶ 3b Total

	Analysis of incomes founding A	CUVILIES				
•	nounts unless otherwise indicated	Unrelate (a) Business code	d business income (b) Amount	(c) Exclusion code	y section 512, 513, or 514 (d) Amount	(e) Related or exempt function income (See instructions.)
_	ervice revenue	<u> </u>		 		(Ode instructions)
			· · · · · · · · · · · · · · · · · · ·	 		
		_				
с		_		<u> </u>		· · · · · · · · · · · · · · · · · · ·
d		_				
е						
f						
g Fees a	and contracts from government agencies					· · · · · · · · · · · · · · · · · · ·
	up dues and assessments					
	savings and temporary cash investments			-		446
	and interest from securities			 		14,633
			······			14,633
	income or (loss) from real estate				······································	
	inanced property			 		
	bt-financed property		· · · · · · · · · · · · · · · · · · ·			
	income or (loss) from personal property	ļ		 - - - - - - - - 		
7 Other inve	stment income					
8 Gain or (lo	ss) from sales of assets other than inventory					-1,773
9 Net incom	e or (loss) from special events					
	fit or (loss) from sales of inventory					
	enue a	-				· · · · · · · · · · · · · · · · · · ·
		_				
		_		+	-	
		— 		 		
		-		+		· · · · · · ·
e				 -		
	Add columns (b), (d), and (e)			<u> </u>	0]	13,306
	l line 12, columns (b), (d), and (e)				13	13,306
	et in line 13 instructions to verify calculations)					
Part XVI-						
Line No.	Explain below how each activity for which inco					
	accomplishment of the foundation accomplishment of the foundation acco	urposes (other thar	n by providing funds f	or such pu	rposes) (See instruct	ions)
<u> N/A</u>						
		· · · · · · · · · · · · · · · · · · ·				

_					*****	
						
						
						
						
					. <u> </u>	
				<u> </u>		
						·- ···· · · · · · · · · · · · · · · · ·
				····		

		14) CHON FAMI Information Rega Exempt Organiza	arding Tra			35-246 ns and Relations		oncharitable		ge 13
1 D	id the orga	anization directly or indi	rectly engag	e in any of the followi	ing with any o	ther organization des	cribed		Yes	No
		01(c) of the Code (othe								
0	rganizatior	ns?								
аТ	ransfers fr	om the reporting found	ation to a no	ncharitable exempt o	rganization o	f				
('	1) Cash							1a(1)	<u></u>	X
(2	2) Other a	ssets						1a(2)	<u> </u>	X
	ther trans									
		f assets to a noncharita						1b(1)	<u> </u>	X
-	-	ses of assets from a no		, -				1b(2)		X
•	•	of facilities, equipment,		ets				1b(3	<u> </u>	X
	•	irsement arrangements	;					1b(4		X
	-	or loan guarantees						1b(5		X
•	•	nance of services or me	•	-				1b(6	4	X
	_	acilities, equipment, ma	-	·		(1.		_ <u>1c</u> _		X
		er to any of the above is								
		goods, other assets, o transaction or sharing	-							
	Line no	(b) Amount involved		of noncharitable exempt or				ns, and sharing arrangem	ents	
N/A		 		····		(-,		, , , , , , , , , , , , , , , , , , ,		
										
						-				
							···			
										
								 		
			<u> </u>						·	
			<u> </u>							
		 			····					
		 								
22	s the found	dation directly or indirec	tly affiliated	with or related to on	e or more tax	-evemnt organizations			·	
		n section 501(c) of the	- ·				•		res 🛭	Νο
		mplete the following sc			,,					
		(a) Name of organization		(b) Type of organ	nization		(c) Description of i	relationship		
N	/A									
		- 								
				L .,,,,		<u> </u>	 			
		enalties of perjury, I declare the and complete Declaration of p								
								May the IRS discuss this with the preparer shown		
Sign	1	1				, ,		(see instructions)?		No
Here	1 3	<u> </u>	C+/		1 \	8/15/102	() 1	<u> </u>		
	1 2	nature of officer as trustee	W/			10/15/17	CHAIRM	<i>3</i> 7.4		 -
	j ₹ Sigi	nature of officer or trustee	₹ -		Date	, ,	1110			

Preparer's signature Date Print/Type preparer's name Check ____ if JUSTIN SONG Fith Sr 08/11/15 JUSTIN SONG Preparer P00369090 Sejong LLP PTIN Firm's name **Use Only** Firm's EIN > 01-0754454 2050 Center Ave Ste 415 Firm's address ▶ 212-564-9190 Fort Lee, NJ 07024

Form 990-PF (2014)

Paid

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, 990-PF) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

Name of the organization

Employer identification number

CHON FAMILY	FOUNDATION, INC.	35-2462413
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 priva	ate foundation
	527 political organization	
Form 990-PF	X 501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a private for	oundation
	501(c)(3) taxable private foundation	
	is covered by the General Rule or a Special Rule.)(7), (8), or (10) organization can check boxes for both the General Ri	ule and a Special Rule See
	n filing Form 990, 990-EZ, or 990-PF that received, during the year, co or property) from any one contributor. Complete Parts I and II. See in ontributions.	
Special Rules		
regulations under s 13, 16a, or 16b, ar	n described in section 501(c)(3) filing Form 990 or 990-EZ that met the sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Ford that received from any one contributor, during the year, total contribit fithe amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, li	m 990 or 990-EZ), Part II, line outlons of the greater of (1)
contributor, during	n described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ the year, total contributions of more than \$1,000 exclusively for religional anal purposes, or for the prevention of cruelty to children or animals.	ous, charitable, scientific,
contributor, during contributions totale during the year for General Rule app	the year, contributions exclusively for religious, charitable, etc., purposed more than \$1,000. If this box is checked, enter here the total contributions exclusively for religious, charitable, etc., purposed more than \$1,000. If this box is checked, enter here the total contribution exclusively religious, charitable, etc., purposed Do not complete an ies to this organization because it received nonexclusively religious, comore during the year.	oses, but no such butions that were received ny of the parts unless the
990-EZ, or 990-PF), but it	hat is not covered by the General Rule and/or the Special Rules does must answer 말o?on Part IV, line 2, of its Form 990, or check the box , to certify that it does not meet the filing requirements of Schedule B	on line H of its Form 990-EZ or on its

Name of organization
CHON FAMILY FOUNDATION, INC.

Employer identification number 35-2462413

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			
1	JASON CHON 19 AUDREY URBAN COURT ALPINE NJ 07620	\$ 200,001	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)			

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CFFV2 CHON FAMILY FOUNDATION, INC. 35-2462413 FYE: 12/31/2014

Federal Statements

6a - Sale of Assets
1 - Form 990-PF, Part I, Line (
Statement

	Net Depreciation Gain / Loss	\$ \$ -156	-185	662	638	-3,032	4,359	-1	-3,329	3,360	882			-5,027	20	-1	37
	Expense																
	Cost	34,814 \$	34,843	37,493	37,517	46,944	24,225	7	29,993	30,000	29,989	∞	m	49,991	972	13	1,843
How Received	Sale Price	Purchase 34,658 \$		Purchase 38,155	Purchase 38,155	Purchase 43,912	Purchase 28, 584	Purchase 6	Purchase 26,664	Purchase 33,360	Purchase 30,871	Purchase 8	Purchase 3	Purchase 44,964	Purchase 992	Purchase 12	Purchase 1,880
	Date Sold	5/02/14 \$		5/02/14	5/02/14	5/02/14	7/28/14	11/20/14	11/20/14	12/19/14	12/22/14	12/22/14	12/22/14	12/22/14	12/22/14	12/22/14	12/22/14
Description	Date Acquired	ETF 2/26/14	ETF 2/26/14	JST 2/26/14	JST 2/26/14	2/21/14	5/09/14	2/21/14	2/21/14	6/12/14	L 2/21/14	VG 12/22/14 12/22/14	STL 12/22/14 12/22/14	EQ I 2/21/14	EQ I 12/17/14	EQ I 12/17/14	EQ I 12/17/14
De	Whom Sold	AP 400	SDPR S&P MIDCAP 400 ETF	SPDR S&P 500 ETF TRUST	SPDR S&P 500 ETF TRUST	IVY SCN & TECH FD I	TWITTER INC	MAINSTAY MARKETFIELD	MAINSTAY MARKETFIELD	WFM STARTS ISSUER RBC	NB LONG SHORT FD INSTL	NEUBERGER BERMAN LONG	NB LONG SHORT FD INSTL 1.	GF MUL FAC INT GRTH EQ I 2/21/14 12/22/14	GF MUL FAC INT GRTH	GF MUL FAC INT GRTH EQ I 12/17/14 12/22/14	GF MUL FAC INT GRTH EQ I 12/17/14 12/22/14

8/11/2015 9:53 AM		Sain / Loss	0 \$ -1,7/3	Charitable Purpose	Charitable Purpose	0 		Charitable Purpose	\$ 425 \$ 451	4
	ssets (continued)		0 \$ rofessional Fees	Adjusted Net	- Taxes Adjusted Net	\$	er Expenses	Adjusted Net		
deral Statements	F, Part I, Line 6a - Sale of Assets (continued) How Received	Cost	\$ 356,882 \$ 358,655 \$ 0 \$ = = 0 \$ = = = 0 \$ = = = 0 \$ = = = 0 \$ = = 0 \$ = = 0 \$ = 0	Net Investment \$ 5,536 \$ 5,536	990-PF, Part I, Line 18 - Net Investment	\$ \$	F, Part I, Line 23 - Oth	Net Investment		
Ē.	Statement 1 - Form 990-PF, Pa	Sal		Total \$ 5,536 \$ 5,536	Statement 3 - Form 990-PF, Total	\$ 19	Statement 4 - Form 990-PF, Part I, Line 23 - Other Expenses	Total	850 26 \$ 876	
CFFV2 CHON FAMILY FOUNDATION, INC. 35-2462413 FYE: 12/31/2014	Stateme Description	Whom Date Sold Acquired	Total Statement 2	Description FUND MANAGEMENT FEE Total	Description	FEDERAL EXCISE TAX Total	735	Description	Expenses FEES BANK SERVICE FEE Total	

Federal Statements

CFFV2 CHON FAMILY FOUNDATION, INC. 35-2462413 FYE: 12/31/2014

CK INVESTMENTS	Basis of Valuation	Market	\$ 772,916
Ub - Corporate Sto	End of Year	\$ 757,352	\$ 757,352
Form 990-PF, Part II, Line 10b - Corporate Stock Investmen	Beginning of Year	ဟ	\$
Statement 3 - For	Description		Total

2

CFFV2 CHON FAMILY FOUNDATION, INC. 35-2462413 Federal Statements

FYE: 12/31/2014

Statement 6 - Form 990-PF, Part VII-A, Line 8b - Not Filing with Attorney General Explanation

Description

NEW JERSEY STATE DOES NOT REQUIRE TO SEND A COPY OF FORM 990-PF TO THE ATTORNEY GENERAL

8/11/2015 9:53 AM

8/11/2015 9:53 AM City, State, Zip Statement 7 - Form 990-PF, Part VII-A, Line 10 - Substantial Contributors ALPINE NJ 07620 Federal Statements Address 19 AUDREY URBAN COURT CFFV2 CHON FAMILY FOUNDATION, INC. Name FYE: 12/31/2014 35-2462413 JASON CHON

CFFV2 CHON FAMILY FOUNDATION, INC.

Federal Statements 8/11/2015 9:53 AM FYE: 12/31/2014 Form 990-PF, Part XV, Line 1a - Managers Who Contributed Over 2% or \$5,000 Name of Manager Amount JASON CHON 200,001 Total 200,001 Form 990-PF, Part XV, Line 1b - Managers Who Own 10% or More Stock Name of Manager Amount JASON CHON Total

(Rev January 2014)

Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return.

OMB No 1545-1709

Internal Revenue S	Service	■ Information about	ut Form 8868 and	its instructions is at www	.irs.gov/form8868.				
If you are	is you are mining for an Automatic 3-months 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)								
		nless you have already been gra							
		ou can electronically file Form 8							
a corporation	required to file	Form 990-T), or an additional (not automatic) 3-n	nonth extension of time. You	can electronically file Form	1			
		on of time to file any of the forms							
		lated With Certain Personal Ber							
		alls on the electronic filing of this							
Parti		ic 3-Month Extension of							
	required to tile	e Form 990-T and requesting ar	automatic 6-mont	th extension ?check this box	and complete	. —			
Part I only		di== 4400 O.St	DEMIC			▶ [_]			
		ding 1120-C filers), partnerships	s, REMICS, and tru	ists must use Form 7004 to	request an extension of tir	ne			
to file income	tax returns								
	<u> </u>			<u>En</u> 1	ter filer's identifying nun				
Type or	Name of ex	empt organization or other filer,	see instructions		Employer identification n	umber (EIN) or			
print	CHOM	EAMTIV FOIDINATIO	N TNC	1	25 0460412				
		FAMILY FOUNDATIO			35-2462413				
		reet, and room or suite no. If a F		ictions	Social security number (SSN)			
File by the due date for		DREY URBAN COURT							
filing your	City, town o	or post office, state, and ZIP cod	ie. For a foreign ad	dress, see instructions					
return See	AT DENT	a	NT 07606						
instructions	ALPINI	<u> </u>	NJ 07620	,		 			
Enter the Ret	urn code for th	he return that this application is	for (file a separate	application for each return)		04			
									
Application	1		Return	Application		Return			
Is For	- Farm 000 F	7	Code	Is For		Code			
	r Form 990-E		01	Form 990-T (corporation)		07			
Form 990-E			02	Form 1041-A		08			
Form 4720			03	Form 4720 (other than ind	ividual)	10			
Form 990-F		400(-) 4	04	Form 5227					
		or 408(a) trust)	05	Form 6069	11				
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		19 AUDREY URBAN	•	••					
• The bester	+		COORI		,	NJ 07620			
• The books	are in the care of	of ▶ ALPINE			•	NO 07620			
Talamban	-N- N 21	.2-601-1908	FAX No						
•		not have an office or place of b		· · ·		▶ □			
-		eturn, enter the organization's fo			If this is	• 🗆			
	group, check	~ ~ ~	part of the group,		and attach				
	•	INs of all members the extension		CHECK THIS BOX	and attach				
		ic 3-month (6 months for a corp		file Form 990-T) extension o	ftime				
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