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# Form **990-PF**

Department of the Treasury Internal Revenue Service

EXTENDED TO AJGUST 17, 2015

Return of Private Foundation

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

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

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

OMB No 1545-0052

rur ca	nena	ar year 2014 or tax year beginning	<del></del>	, and ending			
		oundation A & HARVEY GERTEL		A Employer identification number			
		TABLE FOUNDATION			35-6807639		
		d street (or P O box number if mail is not delivered to street	address)	Room/suite	B Telephone number	<del></del>	
90		OLLAND ROAD	•		617/277-31	68	
City		wn, state or province, country, and ZIP or foreign p	ostal code	····	C If exemption application is p		
-		KLINE, MA 02445					
G Ch	eck a	all that apply Initial return	Initial return of a for	rmer public charity	D 1. Foreign organizations	, check here	
		Final return	Amended return		2 Forger areas:	ating the 959/ test	
		Address change	Name change		2. Foreign organizations me check here and attach co	mputation	
H Cr		ype of organization X Section 501(c)(3) ex			E If private foundation sta		
<u> </u>			Other taxable private foundate		under section 507(b)(1)	(A), check here	
		ket value of all assets at end of year J Accounti	*	Accrual	F If the foundation is in a		
(irc		art II, col. (c), line 16) 0t 280 <b>,</b> 626 <b>.</b> (Part I, colu	her (specify) mn (d) must be on cash b	pasis )	under section 507(b)(1)	(B), CRECK REFE	
Pa		Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not	(a) Revenue and	(b) Net investment	(c) Adjusted net	(d) Disbursements	
- EX	<u> </u>	(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a))	expenses per books	income	income	for chantable purposes (cash basis only)	
	1	Contributions, gifts, grants, etc., received	50,000.	· · · · · · · · · · · · · · · · · · ·	N/A		
	2	Check If the foundation is not required to attach Sch. B					
	3	Interest on savings and temporary cash investments	152.	152.		STATEMENT 1	
	4	Dividends and interest from securities				1-	
	5a	Gross rents			ļ		
	b	Net rental income or (loss)					
မှု		Net gain or (loss) from sale of assets not on line 10 Gross sales price for all			/ 940.		
Revenue	D	assets on line 6a		0.	<del>                                      </del>	27 mm - m - m - m	
Re.		Capital gain net income (from Part IV, line 2)		<u> </u>	J-1	<del></del>	
İ		Net short-term capital gain Income modifications			101	27 2015	
ļ	40-	Gross sales less returns and allowances			TO TOP	<del>                                     </del>	
Ì	_	Less Cost of goods sold				+	
		Gross profit or (loss)				N 1 ( A 1 )	
		Other income				` ^ , ^ ^ ^	
l	12	Total Add lines 1 through 11	50,152.	152	•		
	13	Compensation of officers, directors, trustees, etc	0.	0 .	•	0.	
	14	Other employee salaries and wages		-	<u> </u>	ļ	
ø		Pension plans, employee benefits					
nse		Legal fees Accounting fees STMT 2	1,200.	0		0.	
ž De		. 10000111119	1,200.	<u> </u>	•	1	
e E		Other professional fees Interest					
Operating and Administrative Expenses	17 18	Taxes STMT 3	1.	0	•	0.	
istr	19	Depreciation and depletion					
mi Lin	20	Occupancy					
Ad	21	Travel, conferences, and meetings					
pue	22	Printing and publications					
ng i	23	Other expenses STMT 4	70.	0	•	0.	
rati	24	Total operating and administrative	1 071	_			
) Se		expenses. Add lines 13 through 23	1,271. 68,300.	0	•	68,300.	
J		Contributions, gifts, grants paid	08,300.			00,300.	
	26	Total expenses and disbursements	69,571.	0	_	68,300.	
	27	Add lines 24 and 25 Subtract line 26 from line 12	00,0,11.		-	33,300.	
		Excess of revenue over expenses and disbursements	-19,419.	£			
		Net investment income (if negative, enter -0-)		152	•		
		Adjusted net income (if negative, enter -0-)			N/A		

REVA & HARVEY GERTEL

CHARITABLE FOUNDATION Form 990-PF (2014) 35-6807639 Page 2 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 1 Cash - non-interest-bearing 300,045. 280,626. 280,626. 2 Savings and temporary cash investments 3 Accounts receivable ► Less allowance for doubtful accounts 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 280,626. 300,045. 280,626. instructions Also, see page 1, item I) 17 Accounts payable and accrued expenses 18 Grants payable 19 Deferred revenue Loans from officers, directors, trustees, and other disqualified persons 21 Mortgages and other notes payable 22 Other liabilities (describe 0 0. 23 Total liabilities (add lines 17 through 22) ightharpoonsFoundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31. **Vet Assets or Fund Balances** 300,045. 280,626. 24 Unrestricted 25 Temporarily restricted 26 Permanently restricted Foundations that do not follow SFAS 117, check here and complete lines 27 through 31 27 Capital stock, trust principal, or current funds 28 Paid-in or capital surplus, or land, bldg, and equipment fund 29 Retained earnings, accumulated income, endowment, or other funds 280,626. 300,045. 30 Total net assets or fund balances 280,626. 300,045. 31 Total liabilities and net assets/fund balances 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	300,045.
2	Enter amount from Part I, line 27a	2	-19,419.
	Other increases not included in line 2 (itemize)	3	0.
_	Add lines 1, 2, and 3	4	280,626.
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	280,626

Form 990-PF (2014) CHARITABLE FOUNDATION

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.)					P	(b) How acquired P - Purchase D - Donation (mo				(d) Date sold (mo , day, yr )
a										<u> </u>
b NON	E					-				
C										
<u>d</u>										
е		· · · · · · · · · · · · · · · · · · ·			L_,					
(e) Gross sales price		eciation allowed allowable)		t or other basis opense of sale			(	(h) Gain or e) plus (f) m		)
a										
b				<u></u>						
<u>c</u>									<u> </u>	<del>-</del> "
<u>d</u>										
Complete only for assets showing	nain in colu	mn (h) and owned by the for	undation	on 12/31/69			(I) C	ains (Col (h	\ aaın n	oloue
(i) F M V as of 12/31/69	(j) A	djusted basis	(k) Exc	cess of col (i)			còl (k	), but not les osses (from	s than	-0-) or
•				(),						
<u>a</u> b										
C		· <del>-</del>								
d										
e										
2 Capital gain net income or (net cap	oital loss)	If gain, also enter in Pa	irt I, line 7 art I, line		}	2				
3 Net short-term capital gain or (loss	s) as defined	`			)					
If gain, also enter in Part I, line 8, c If (loss), enter -0- in Part I, line 8 Part V Qualification Ur	•	tion 4940(e) for Re			<u> </u>	3				
(For optional use by domestic private If section 4940(d)(2) applies, leave th Was the foundation liable for the secti	ıs part blank									Yes X No
If "Yes," the foundation does not quali 1 Enter the appropriate amount in e	fy under sect	ion 4940(e). Do not comple	te this pa	rt						<u> </u>
(a) Base period years Calendar year (or tax year beginnin		(b) Adjusted qualifying distribut		Net value of n	(c	)	-use assets	(col	Distribi	(d) ution ratio ded by col. (c))
2013	9/	71,	220.			28	2,559.	_ <del></del> ,		.25205
2012			799.				4,257.			.23576
2011			890.				5,867.			.36944
2010			900.				7,000.			.15177
2009		39,	250.			21	6,700.	ļ		.18112
2 Total of line 1, column (d)								2		1.19016
3 Average distribution ratio for the 5 the foundation has been in exister			ie 2 by 5,	or by the numb	er of y	ears		3		.23803
4 Enter the net value of noncharitable-use assets for 2014 from Part X, line 5					4		285,980			
5 Multiply line 4 by line 3					5		68,073			
	no /10/ c4 P-	rt I. lina 27h\						6		2
6 Enter 1% of net investment incom	ie (170 OI Pa	ICI, IIIIE 270)								68,075
7 Add lines 5 and 6								7		
8 Enter qualifying distributions from if line 8 is equal to or greater than			and com	plete that part us	sing a	1% tax	c rate	8		68,300
See the Part VI Instructions										orm <b>990-PF</b> (201

	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	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV	7	X
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)	_	
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)	ĺ	
	of each state as required by General Instruction G? If "No," attach explanation	8b	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	ļ	
	year 2014 or the taxable year beginning in 2014 (see instructions for Part XIV)? If "Yes," complete Part XIV	9	
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses	10_	

X

• 1	REVA & HARVEY GERTEL
Form 990-PF (2014)	CHARITABLE FOUNDATION

2 -	-6	$\sim$	$\sim$	~	_	$\sim$	$\sim$
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"	$-\mathbf{v}$	v	v	•	v	J	_

n	_	~	_	

Pa	rt VII-A Statements Regarding Activities (continued)	000		raye u
	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		Х
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		х
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Х	
	Website address ► N/A			
14	The books are in care of ▶ REVA & HARVEY GERTEL CHARITABLE FND Telephone no ▶617/27	7-3	168	
		445		$\overline{21}$
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here		<b></b>	
	and enter the amount of tax-exempt interest received or accrued during the year	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,		Yes	No
	securities, or other financial account in a foreign country?	16		Х
	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			
Pε	rt VII-B Statements Regarding Activities for Which Form 4720 May Be Required	10000000	_	
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.	ļ	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?			
	(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"			
	ıf 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 )		•	
ì	If any answer is "Yes" to 1a(1)-(6), did <b>any</b> of the acts fail to qualify under the exceptions described in Regulations			1
	section 53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	1b	ļ.,	<u> </u>
	Organizations relying on a current notice regarding disaster assistance check here			
(	; Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected			l
	before the first day of the tax year beginning in 2014?	10	ļ	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))			
;	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 $\blacktriangleright$			
	Are there any years listed in 2a for which the foundation is <b>not</b> 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	1		
	statement - see instructions ) N/A	2b	-	-
	thithe provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here			
	<u> </u>			1
3	a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			
	during the year?	Ì		1
	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			1
	of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C,		1	
	Form 4720, to determine if the foundation had excess business holdings in 2014.)  N/A	3b	<del> </del>	X
	a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	-	1
	b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that	,	ŀ	x
	had not been removed from jeonardy before the first day of the tax year beginning in 2014?	4h	1	Ι Δ

REVA & HARVEY GERTEL				
Form 990-PF (2014) CHARITABLE FOUNDATION			<u>35–680763</u>	3'9 Page <b>6</b>
Part VII-B Statements Regarding Activities for Which F	orm 4720 May Be F	Required (continu	ued)	
5a During the year did the foundation pay or incur any amount to				
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	· • • •		s X No	
(2) Influence the outcome of any specific public election (see section 4955), o	r to carry on, directly or indire	ectly,		
any voter registration drive?		Ye	s X No	
(3) Provide a grant to an individual for travel, study, or other similar purposes	?	Ye	s X No	
(4) Provide a grant to an organization other than a charitable, etc., organization	n described in section			
4945(d)(4)(A)? (see instructions)		Ye	s X No	
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or f			
the prevention of cruelty to children or animals?			s X No	
<b>b</b> If any answer is "Yes" to 5a(1)-(5), did <b>any</b> of the transactions fail to qualify unc	der the exceptions described i	n Regulations		
section 53 4945 or in a current notice regarding disaster assistance (see instru	ctions)?		N/A 5	ib
Organizations relying on a current notice regarding disaster assistance check h				
$oldsymbol{c}$ If the answer is "Yes" to question 5a(4), does the foundation claim exemption fr				
expenditure responsibility for the grant?	N	I/A Ye	s L No	
If "Yes," attach the statement required by Regulations section 53.4945	5-5(d)			
6a Did the foundation, during the year, receive any funds, directly or indirectly, to j	pay premiums on			
a personal benefit contract?		Y€	s X No	
<b>b</b> Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal benefit contract?		<u></u>	ib X
If "Yes" to 6b, file Form 8870.				
7a At any time during the tax year, was the foundation a party to a prohibited tax s		Ye	s X No	
b If "Yes," did the foundation receive any proceeds or have any net income attribu				7b
Part VIII Information About Officers, Directors, Trusto Paid Employees, and Contractors	ees, Foundation Ma	ınagers, Highly	/	
1 List all officers, directors, trustees, foundation managers and their	componentian	<del>-</del>		<del>.</del>
List all officers, directors, trustees, foundation managers and their	- · · · · · · · · · · · · · · · · · · ·	(c) Compensation	(d) Contributions to	(e) Expense
(a) Name and address	(b) Title, and average hours per week devoted	(If not paid,	(d) Contributions to employee benefit plans and deferred	account, other
DEVA CEDMET	to position DIRECTOR	enter -0-)	compensation	allowances
REVA GERTEL	DIRECTOR			
BROOKLINE, MA 02445-5721	2.00	0.	o .	0.
	DIRECTOR	· · ·		
90 HOLLAND STREET	DIRECTOR			
BROOKLINE, MA 02445-5721	2.00	0.	0.	0.
BROOKLINE, MA 02443-3721	2.00		0.	
	-			
			l.	
	1			
	†		'	
2 Compensation of five highest-paid employees (other than those inc	cluded on line 1). If none	enter "NONE."	J	
	(b) Title, and average		(d) Contributions to employee benefit plans	(e) Expense account, other
(a) Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	and deferred compensation	account, other allowances
NONE	develor to position		Componication	
None	-			ŀ
		<del>                                     </del>		
	1		1	
			1	
	1			
	1			
	-			
		<u> </u>	<u> </u>	<u></u>
Total number of other employees paid over \$50,000			<b></b>	0

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

Page 7

3 Five highest-paid independent contractors for professional services. If none, enter "NO	NE."	<del></del>
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensatio
NONE		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	-	
otal number of others receiving over \$50,000 for professional services		<b>•</b>
Part IX-A Summary of Direct Charitable Activities		<u>-</u>
ist the foundation's four largest direct charitable activities during the tax year. Include relevant statistical in	formation such as the	
number of organizations and other beneficiaries served, conferences convened, research papers produced,	, etc	Expenses
N/A		
	-	
		· · · · · · · · · · · · · · · · · · ·
	-	
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
N/A		
		]
All other program-related investments. See instructions		
All other program rolated invostments occurrence		
		1
		1
		(

CHARITABLE FOUNDATION

	Minimum Investment Return (All domestic foundations must complete this part. Foreign foun	idations, se	e instructions.)		
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes				
	Average monthly fair market value of securities	1a	0. 290,335.		
	Average of monthly cash balances	1b_	290,335.		
C	Fair market value of all other assets	10			
d	Total (add lines 1a, b, and c)	1d	290,335.		
е	Reduction claimed for blockage or other factors reported on lines 1a and				
	1c (attach detailed explanation) 1e 0.				
2	Acquisition indebtedness applicable to line 1 assets	2	0.		
3	Subtract line 2 from line 1d	3	290,335.		
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	4,355.		
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4.	5	285,980.		
6	Minimum investment return. Enter 5% of line 5	6	14,299.		
P	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations an foreign organizations check here   and do not complete this part )	d certain			
1	Minimum investment return from Part X, line 6	1	14,299.		
2a	Tax on investment income for 2014 from Part VI, line 5				
b	Income tax for 2014 (This does not include the tax from Part VI )				
C	Add lines 2a and 2b	2c	2.		
3	Distributable amount before adjustments Subtract line 2c from line 1	3	14,297.		
4	Recoveries of amounts treated as qualifying distributions	4	0.5		
5	Add lines 3 and 4	5	14,297.		
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	14,297.		
P	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	68,300.		
b	Program-related investments - total from Part IX-B	1b	0.		
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2			
3	Amounts set aside for specific charitable projects that satisfy the				
а	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	68,300.		
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	2.		
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	68,298.		
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					

Form **990-PF** (2014)

4940(e) reduction of tax in those years

Form 990-PF (2014)

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2013	(c) 2013	(d) 2014
1 Distributable amount for 2014 from Part XI,				
line 7				14,297.
2 Undistributed income, if any, as of the end of 2014	The bottom is a second	· · · · · · · · · · · · · · · · · · ·	<del></del>	
a Enter amount for 2013 only			0.	
<b>b</b> Total for prior years				<del> </del>
3 Excess distributions carryover, if any, to 2014		0.		<del> </del>
a From 2009 31,858.				
b From 2010 20, 072.		•		
c From 2011 46,605.				
d From 2012 36,088.				
e From 2013 57,094.			+	
f Total of lines 3a through e	191,717.			
4 Qualifying distributions for 2014 from				······································
Part XII, line 4 ►\$ 68,300.		[		
a Applied to 2013, but not more than line 2a			0.	
b Applied to undistributed income of prior	Han			<del>di ini di ini di ini di</del>
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus				<del> </del>
(Election required - see instructions)	0.			
d Applied to 2014 distributable amount				14,297.
e Remaining amount distributed out of corpus	54,003.			
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:	***************************************			
2 Corpus Add lines 3f, 4c, and 4e Subtract line 5	245,720.			
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			<u></u>	
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	114	1		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.	i ii 1744 - 14172 - 17	· · · · · · · · · · · · · · · · · · ·	1+1-1+1>1H
8 Excess distributions carryover from 2009	21 050			
not applied on line 5 or line 7	31,858.	'. '.  12   14174 - 17471	·, · · · · · · · · · · · · · · · · · ·	·
9 Excess distributions carryover to 2015.	212 062	;		
Subtract lines 7 and 8 from line 6a	213,862.	/ <del>11 1 15 </del>		
10 Analysis of line 9				
a Excess from 2010 b Excess from 2011 20,072.				
26 200				
F. G. O. O.				
d Excess from 2013 57,094. e Excess from 2014 54,003.				
423581 11-24-14		1	<u> </u>	Form <b>990-PF</b> (2014)

Page 10

Part XIV   Private Operating	<del></del>		I-A, question 9)	N/A	
la If the foundation has received a ruling	or determination letter that	it is a private operating			
foundation, and the ruling is effective f	for 2014, enter the date of th	ne ruling	<b>&gt;</b>		
<b>b</b> Check box to indicate whether the four	ndation is a private operatin	g foundation described	in section	4942(J)(3) or 49	942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years		
income from Part I or the minimum	(a) 2014	(b) 2013	(c) 2012	(d) 2011	(e) Total
investment return from Part X for			<u> </u>		
each year listed					
b 85% of line 2a		<del>-</del>			
c Qualifying distributions from Part XII,		<del></del>			
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	1 1				
Subtract line 2d from line 2c					
Complete 3a, b, or c for the					
alternative test relied upon					
a "Assets" alternative test - enter (1) Value of all assets					
( )		<del></del>			
(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			<del></del>		
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			<del>                                     </del>		-
Part XV Supplementary In	formation (Comple	te this part only	if the foundation	had \$5,000 or m	ore in assets
	the year-see instr		ii iiio iodiidatioii	1100 40,000 01 11	.0.0 400010
Information Regarding Founda			<del></del>		
a List any managers of the foundation v	=	than 2% of the total cor	tributions received by the	foundation before the cl	ose of any tax
year (but only if they have contributed					•
ONE					
b List any managers of the foundation	who own 10% or more of th	e stock of a corporation	(or an equally large portion	on of the ownership of a	partnership or
other entity) of which the foundation				•	
IONE					
2 Information Regarding Contrib	ution, Grant, Gift, Loan	Scholarship, etc., F	Programs:		
Check here ► X if the foundation				ot accept unsolicited red	uests for funds If
the foundation makes gifts, grants, el					
a The name, address, and telephone no	umber or e-mail address of t	the person to whom app	olications should be address	ssed	
a The hame, address, and tolephone he	2111001 01 0 111011 0001000 01				
b The form in which applications shoul	ld be submitted and informa	tion and materials they	should include	<del></del>	
e Any cubmission deadlines	<del></del>				
c Any submission deadlines					
d Any restrictions or limitations on awa	ards, such as by geographic	al areas, charitable field	s, kinds of institutions, or	other factors	

CHARITABLE FOUNDATION

35-6807639 Page 11

Part XV Supplementary Informatio	_ i i	Danas		
3 Grants and Contributions Paid During the		Payment		
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	Purpose of grant or contribution	Amount
	or substantial contributor	recipient		
a Paid during the year				
ORGANIZATIONS GIVING DONATIONS OF	NON-RELATED	QUALIFIED	EDUCATION	
31,000 OR LESS		PROGRAM SERVICE	1	
VARIOUS				
/ARIOUS, MA 00000				4,800
AFIKIM FOUNDATION	NON-RELATED	QUALIFIED	EDUCATION	
111 JOHN STREET STE 1720		PROGRAM SERVICE		
NEW YORK, NY 10038				5,000
MAIMONIDES SCHOOL	NON-RELATED	QUALIFIED	EDUCATION	
PHILBRICK ROAD		PROGRAM SERVICE		
BROOKLINE, MA 02456				25,500
CENTRAL FUND OF ISRAEL	NON-RELATED	QUALIFIED	EDUCATION	
980 AVENUE OF THE AMERICAS		PROGRAM SERVICE	<sup>2</sup>	
NEW YORK, NY 10018				25,000
MA'AYAN ET AL (EDUCATION DONATIONS)	NON-RELATED	QUALIFIED	EDUCATION	
90 OAK ST		PROGRAM SERVICE	5	8,000
NEWTON, MA 02464 Total			▶ 3a	68 300
b Approved for future payment				
NONE				
MONE			ļ	
Total			<b>▶</b> 3b	

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

Form 990-PF (2014)

Enter gross amounts unless otherwise indicated	Unrelated	d business income	Exclu	ded by section 512, 513, or 514	(e)
	(a) Business	(b)	(C) Exclu- sion	(d)	Related or exempt
1 Program service revenue	code	Amount	code	Amount	function income
a					
b					
C	.				
d	.				
e					
f					
g Fees and contracts from government agencies					
2 Membership dues and assessments			<u> </u>		
3 Interest on savings and temporary cash			ŀ		
investments					152.
4 Dividends and interest from securities			<u> </u>		
5 Net rental income or (loss) from real estate					
a Debt-financed property					· · · · · · · · · · · · · · · · · · ·
b Not debt-financed property					<u></u>
6 Net rental income or (loss) from personal					
property					<u></u>
7 Other investment income		<u> </u>		<u></u>	
8 Gain or (loss) from sales of assets other					
than inventory					
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue	1		ļ		
a	_				
b			<u> </u>		
C			ļ		
d	_				
e	_				1.50
12 Subtotal Add columns (b), (d), and (e)		0.			152.
13 Total. Add line 12, columns (b), (d), and (e)				13 _	152.
(See worksheet in line 13 instructions to verify calculations)					
Part XVI-B Relationship of Activities	to the Acco	omplishment of E	kemp	ot Purposes	
					mplishment of
Explain below how each activity for which income the foundation's exempt purposes (other that	come is reported i	nds for such nurnoses)	Contin	buted intiportaintly to the accor	iipiisiiiiletti oi
25 PROVIDES FUNDS TO FURT			ттс	N	
25 TROVIDED TORDO TO TORE					<del></del>
	·				
				···	
	-	<del></del>	-	1.0 H.L.	
		·			<del></del>
		<del></del>			
				· · · · · · ·	* ·
		<del></del>			<del> </del>
		<del></del>		<del></del>	
					<del></del>
					·- <u>-</u>
				·-	<del> </del>
423621 11-24-14					Form <b>990-PF</b> (2014
11-24-14					

,		& HARVEY GERTEL	25 60	,	•
Form 990- Part X	<del>,</del>	TABLE FOUNDATION  egarding Transfers To and Transactions a		07639	Page 1
	Exempt Organ		nd Relationships with Nonci	nantable	
1 Did ti	ne organization directly or indi	rectly engage in any of the following with any other organization	n described in section 501(c) of		Yes No
ţhe C	ode (other than section 501(c	)(3) organizations) or in section 527, relating to political organi	zations?		
a Trans	fers from the reporting found	ation to a noncharitable exempt organization of			
(1)	Cash			1a(1)	X
(2)	Other assets			1a(2)	X
<b>b</b> Other	transactions				
(1)	Sales of assets to a noncharita	ble exempt organization		1b(1)	X
(2)	Purchases of assets from a no	ncharitable exempt organization		1b(2)	X
(3)	Rental of facilities, equipment,	or other assets		1b(3)	X
(4)	Reimbursement arrangements			1b(4)	X
(5)	oans or Ioan guarantees			1b(5)	X
(6)	Performance of services or me	embership or fundraising solicitations		1b(6)	Х
	•	uling lists, other assets, or paid employees		10	<u> </u>
		"Yes," complete the following schedule Column (b) should alw	_		ets,
		oundation If the foundation received less than fair market value	e in any transaction or sharing arrangemer	nt, show in	
	<del>, ` '                                  </del>	other assets, or services received	(4)		
(a) Line no	(b) Amount involved	(c) Name of noncharitable exempt organization	(d) Description of transfers, transactions,	and shanng am	angements
		N/A			
				<u> </u>	
				_	
				***	
					<del></del>
				<del></del> ,	
					·· <del>···</del>
	<del> </del>				
	<del> </del>				

2a ist	he foundation directly or indirectly affiliated with, or relate	d to, one or more tax-exempt organiz	zations described	
ın s	section 501(c) of the Code (other than section 501(c)(3))	or in section 527?		Yes X No
b If"	Yes," complete the following schedule			
	(a) Name of organization	(b) Type of organization	(c) Description of	of relationship
	N/A			
				<del></del>
				· · · · · · · · · · · · · · · · · · ·
	<u> </u>			
	Under penalties of penury, I declare that I have examined this retu and belief, it is true correct, and complete Declaration of prepare	m, including accompanying scriedules and r (other than taxpayer) is based on all inform	statements, and to the best of my knowledgenation of which preparer has any knowledgen	May the IRS discuss this return with the preparer
Sign Here		المراه المرسمور	DIRECTOR	shown below (see instr )?
пеге		1/3//3		X Yes  No
	Signature of officer or trusted	Date '	Title Check X	ıf PTIN
	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	parer's signature	self- employed	
D-:-I	ROY S. SCHREIBER		06/18/15	P00388983
Paid	arer Firm's name ► ROY S. SCHREIB			22-2351602
Prep	1,	DER & CO., CPAS	Firm's Eliv	22-2331002

Preparer **Use Only** 

Firm's address ▶ 9 WASHINGTON PLACE

SHARON, MA 02067-1933

## 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

REVA & HARVEY GERTEL CHARITABLE FOUNDATION

**Employer identification number** 

35-6807639

Organization type (check one):					
Filers of:		Section:			
Form 990 c	or 990-EZ	501(c)( ) (enter number) organization			
		4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private foundation			
		527 political organization			
Form 990-F	PF	X 501(c)(3) exempt private foundation			
		4947(a)(1) nonexempt charitable trust treated as a private foundation			
		501(c)(3) taxable private foundation			
		covered by the <b>General Rule</b> or a <b>Special Rule.</b> 7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.			
General R	ule				
	_	filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.			
Special R	ules				
s a	ections 509(a)(1) a ny one contributo	described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under 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 r, 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, line 1. Complete Parts I and II.			
у	ear, total contribu	described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the tions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for ruelty to children or animals. Complete Parts I, II, and III.			
у 15 Р	rear, contributions is checked, enter h purpose. Do not co	described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box were the total contributions that were received during the year for an exclusively religious, charitable, etc., complete any of the parts unless the <b>General Rule</b> applies to this organization because it received nonexclusively e, etc., contributions totaling \$5,000 or more during the year			
but it mus	st answer "No" on	nat is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), 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 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
REVA & HARVEY GERTEL
CHARITABLE FOUNDATION

Employer identification number

35-6807639

Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a)	(b)	(c) Total contributions	(d)
No.	Name, address, and ZIP + 4		Type of contribution
1	HARVEY & REVA GERTEL  90 HOLLAND STREET  BROOKLINE, MA 02445-5721	\$50,000.	Person X Payroll
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
		\$	Person Payroll Noncash Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c) Total contributions	(d)
No.	Name, address, and ZIP + 4		Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d) Type of contribution
No.	Name, address, and ZIP + 4	Total contributions	
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)

REVA & HARVEY GERTEL

Employer identification number

art II	Noncash Property (see instructions). Use duplicate copies of P	art II if additional space is needed.	iditional space is needed.			
(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			
		<b>\$</b>				
(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			
		<b>\$</b>				
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received			

e of organiza (77) c. tj	tion ARVEY GERTEL		Employer identification number
	LE FOUNDATION		35-6807639
rt III Z	Exclusively religious, charitable, etc., contributions of the pear from any one contributor. Complete of completing Part III, enter the total of exclusively religious used the pear that the copies of Part III if additional and the pear that III is additional to the pear that III is additional that the pear that II is additional that the pear that II is additional that I is a pear that II is additional that I is a pear that I is a pea	olumns (a) through (e) and the following chantable, etc., contributions of \$1,000 or le	n section 501(c)(7), (8), or (10) that total more than \$1,000 for
No. om art I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
		(e) Transfer of gift	
	Transferee's name, address, an	d ZIP + 4	Relationship of transferor to transferee
No. rom art I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
$-\mid$			
		(e) Transfer of gift	
	Transferee's name, address, ar	nd ZIP + 4	Relationship of transferor to transferee
No. om art I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
_   _			
		(e) Transfer of gift	
	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee
_			
No. rom art I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
_   -			
		(e) Transfer of gift	1
			·

FORM 99Q-PF INTEREST ON SAVI	NGS AND TEM	PORARY CASH	INVESTMENTS	STATEMENT 1
SOURCE	(A) REVEI PER BO	NUE NET	(B) INVESTMENT INCOME	(C) ADJUSTED NET INCOME
EASTERN BANK EASTERN BANK CAPITAL MARKETS		51. 101.	51. 101.	
TOTAL TO PART I, LINE 3		152.	152.	
FORM 990-PF	ACCOUNTI	NG FEES		STATEMENT 2
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST MENT INCOM		
ACCOUNTING	1,200.		0.	0.
TO FORM 990-PF, PG 1, LN 16B	1,200.		0.	0.
FORM 990-PF	TAX	ES		STATEMENT 3
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST MENT INCOM		CHARITABLE
======================================	1.		0.	0.
FEDERAL				0.
TO FORM 990-PF, PG 1, LN 18	1.	=	0.	0.
-	1.	XPENSES	<del> </del>	
TO FORM 990-PF, PG 1, LN 18	1.	(B) NET INVES	(C)	STATEMENT 4  (D) CHARITABLE
TO FORM 990-PF, PG 1, LN 18 =	OTHER E  (A) EXPENSES	(B) NET INVES MENT INCO	(C)	STATEMENT 4  (D) CHARITABLE

## Form **8868**

(Rev. January 2014)

Department of the Treasury Internal Revenue Service

## Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return.

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

OMB No. 1545-1709

• If you are filing for an Automatic 3-Month Extension, complete only Part I and check this box  $\triangleright X$  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. 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 Enter filer's identifying number Name of exempt organization or other filer, see instructions. Type or Employer identification number (EIN) or REVA & HARVEY GERTEL print CHARITABLE FOUNDATION 35-6807639 File by the Number, street, and room or suite no. If a P.O. box, see instructions. Social security number (SSN) due date for filing your C/O ROY S. SCHREIBER CPA - 9 WASHINGTON PLACE return See City, town or post office, state, and ZIP code. For a foreign address, see instructions. instructions SHARON, MA 02067-1933 0 4 Enter the Return code for the return that this application is for (file a separate application for each return) **Application** Return Return **Application** Code Code Is For Is For Form 990-T (corporation) 07 Form 990 or Form 990-EZ 01 02 Form 1041-A 80 Form 990-BL Form 4720 (other than individual) 09 Form 4720 (individual) 03 Form 990-PF 04 Form 5227 10 05 Form 6069 11 Form 990-T (sec. 401(a) or 408(a) trust) 06 Form 8870 Form 990-T (trust other than above) REVA & HARVEY GERTEL CHARITABLE FND • The books are in the care of ▶ 90 HOLLAND STREET - BROOKLINE, MA 02445-5721 Fax No. 
ightharpoonup 617/663-6605Telephone No. ► 617/277-3168 • 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 . 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. 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: ► X calendar year 2014 or tax year beginning , and ending If the tax year entered in line 1 is for less than 12 months, check reason: Initial return Change in accounting period If this application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any 0. nonrefundable credits. See instructions. 3a If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and 0. 3b

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.

by using EFTPS (Electronic Federal Tax Payment System). See instructions.

estimated tax payments made. Include any prior year overpayment allowed as a credit.

Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required,

3с