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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 11/17 , 2014, and ending 12/31, **20** 14 A Employer identification number Name of foundation FELDMAN FAMILY FOUNDATION, INC. 47-2371066 Number and street (or P O box number if mail is not delivered to street address) B Telephone number (see instructions) Room/suite (201) 692-1754 1649 HANOVER STREET City or town, state or province, country, and ZIP or foreign postal code If exemption application is pending, check here TEANECK, NJ 07666 G Check all that apply. Initial return Initial return of a former public charity D 1. Foreign organizations, check here . Final return Amended return 2 Foreign organizations meeting the 85% test check here and attach Address change Name change computation . . . . H Check type of organization | X | Section 501(c)(3) exempt private foundation E If private foundation status was terminated Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation under section 507(b)(1)(A), check here . Fair market value of all assets at J Accounting method | X Cash | F If the foundation is in a 60-month termination end of year (from Part II, col. (c), line Other (specify) under section 507(b)(1)(B), check here . > 1,000,551. (Part I, column (d) must be on cash basis ) *16)* ▶ \$ (d) Disbursements Part I Analysis of Revenue and Expenses (The (a) Revenue and total of amounts in columns (b), (c), and (d) (b) Net investment (c) Adjusted net for charitable expenses per may not necessarily equal the amounts in income income purposes books (cash basis only) column (a) (see instructions) ) 1,000,551 Contributions, gifts, grants, etc., received (attach schedule). if the foundation is not required to attach Sch B Interest on savings and temporary cash investments. Dividends and interest from securities . . . b Net rental income or (loss) 6a Net gain or (loss) from sale of assets not on line 10 Gross sales price for all assets on line 6a Capital gain net income (from Part IV, line 2). Net short-term capital gain. . . . . . . . . Income modifications Gross sales less returns and allowances . . . Less Cost of goods sold \_ Gross profit or (loss) (attach schedule) C OGDEN. UT Other income (attach schedule) 1,000,551 Total. Add lines 1 through 11 . . . . . . 13 Compensation of officers, directors, trustees, etc . . . Expenses 14 Other employee salanes and wages . . . . . 15 Pension plans, employee benefits . . . . . 16a Legal fees (attach schedule) . . . . . b Accounting fees (attach schedule) . . . . . Administrative Other professional fees (attach schedule). . . 17 18 Taxes (attach schedule) (see instructions). . . 19 Depreciation (attach schedule) and depletion. 20 21 21 E 22 Travel, conferences, and meetings . . . . . . Printing and publications . . . . . . erating 23 Other expenses (attach schedule) . . . . 24 Total operating and administrative expenses. Add lines 13 through 23. . . . . . . . . . . Ö 25 Contributions, gifts, grants paid . . . . . . 26 Total expenses and disbursements. Add lines 24 and 25 27 Subtract line 26 from line 12. 1,000,551 Excess of revenue over expenses and disbursements . . b Net investment income (if negative, enter -0-) Adjusted net income (if negative, enter -0-). . Form 990-PF

	art II	Palance Shoote	Attached schedules and amounts in the description column should be for end-of-year	Beginning of year	E	nd of year
	art II	Datatice Streets	amounts only (See instructions )	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-beam	ng		750,88	750,884
	2		cash investments			
	3					
		Less allowance for doul	btful accounts ▶	-	•	
	4					
	-	Less allowance for doub	btful accounts ▶	-		
	5				<del></del>	
	6		officers, directors, trustees, and other			
			ach schedule) (see instructions)			1
	7		eceivable (attach schedule)			
	′		otful accounts		-	
ຜ	8	Inventories for sale or us		ŀ		
ssets	ů					
Ass	9		eferred charges			
•			e government obligations (attach schedule)		249,66	249,667.
	1		stock (attach schedule)		245,00	249,007.
	11 C	Investments - corporate Investments - land, buildings	bonds (attach schedule)		· · · · · · · · · · · · · · · · · · ·	
		and equipment basis Less accumulated deprecia			K.	
		(attach schedule)		<del></del>	·	
	12		loans			
	13 14	Investments - other (atta Land, buildings, and	ch schedule)			
	'	equipment basis Less accumulated deprecia	····			-
		(attach schedule)				
		Other assets (describe I				
	16		completed by all filers - see the			
_		instructions Also, see pa	age 1, item 1)	0	1,000,55	1,000,551.
	17-	Accounts payable and a	ccrued expenses			-
	18	Grants payable				
es	19	Deferred revenue				
≣	20	Loans from officers, directo	rs, trustees, and other disqualified persons			
Liabilities	21	Mortgages and other no	tes payable (attach schedule)			
	22	Other liabilities (describe	· ▶)			
_	23	Total liabilities (add line	s 17 through 22)	0		_0
			ow SFAS 117, check here- ▶ 🔠			
Ś		and complete lines 2	24 through 26 and lines 30 and 31.			
nce	24	Unrestricted				
or Fund Balances	25					
B		· · ·				
ŭ		Foundations that do	not follow SFAS 117, ▶ 🗓			
F		check here and comp	plete lines 27 through 31.			
8	27	Capital stock, trust princ	apal, or current funds			İ
Assets	28		land, bldg , and equipment fund			$\neg$
Ass	29		lated income, endowment, or other funds		1,000,55	1.
Net ,			balances (see instructions)	0	1,000,55	1.
Z			net assets/fund balances (see			
		instructions)		o	1,000,55	1.
P			nges in Net Assets or Fund Bala	nces	· · · · · · · · · · · · · · · · · · ·	
			alances at beginning of year - Part I		nust agree with	
					<u> </u>	1 0
2		er amount from Part I,			· · · · · · · · ⊢	1,000,551.
						3
		lines 1, 2, and 3				1,000,551.
5	Dec	reases not included in	line 2 (rtemize)			5
6	Tota	at net assets or fund h	alances at end of year (line 4 minus	line 5) - Part II, column (I	o) line 30	6 1,000,551.
<u> </u>			and the state of t	5) . a.e.ii, oolaiiiii (i	-/1	<u>- 1</u>

Part	V Capital Gains	and Losses for Tax on Inv	restment Income			
		d describe the kind(s) of property sold	(e g , real estate,	(b) How acquired	(c) Date	(d) Date sold
	2-story b	rick warehouse; or common stock, 200	shs MLC Co)	P - Purchase D - Donation	acquired (mo, day, yr)	(mo, day, yr)
1a				Donaldi		
b						
<u>e</u>						
	·	(f) Depreciation allowed	(g) Cost or other basis		(h) Gain or (lo	ss)
,	e) Gross sales price	(or allowable)	plus expense of sale		(e) plus (f) mini	
a						
b						
С						
d						
е						
	Complete only for assets	showing gain in column (h) and owner	ed by the foundation on 12/31/69	(h	Gains (Col (h) g	ain minus
43.1	14.1/ ( 12/24/60	(j) Adjusted basis	(k) Excess of col. (t)		(k), but not less t	han -0-) <b>or</b>
(1) 1	M.V as of 12/31/69	as of 12/31/69	over col (j), if any		Losses (from co	l (h))
a					· · · · · · · · · · · · · · · · · · ·	
b						
С						
d						
e.						
		( )	gain, also enter in Part I, line 7			
2 C	apital gain net income o		f (loss), enter -0- ın Part I, line 7	2		
3 N	et short-term capital ga	un or (loss) as defined in sections	1222(5) and (6)			
lf	gain, also enter in Pa	art i, line 8, column (c) (see ins	structions) If (loss), enter -0- in 🕽			
Р	art I, line 8 <u></u> .	<u> </u>	<u>J</u>	3		
Part			duced Tax on Net Investment I	ncome		
(For o	ptional use by domestic	private foundations subject to the	ne section 4940(a) tax on net investi	ment inco	me)	
		-			•	
If sect	on 4940(d)(2) applies,	leave this part blank. NO	T AVAILABLE FOR INITIAL	YEAR F	RETURNS	
	,					
Was tl	ne foundation liable for	the section 4942 tax on the distril	butable amount of any year in the b	ase period	<b>1</b> ?	Yes No
If "Yes	," the foundation does	not qualify under section 4940(e).	. Do not complete this part			
1 E	nter the appropriate am	ount in each column for each yea	ar, see the instructions before makin	ig any enti	ries	
	(a) Base penod years	(b)	(c)		(d) Distribution ra	itio.
Calend	ar year (or tax year beginning in)	Adjusted qualifying-distributions	Net value of nonchantable-use assets		(col (b) divided by	
	2013					
	2012					
	2011					
	2010					
	2009					
2 Te	otal of line 1, column (d	)		2		
			de the total on line 2 by 5, or by the			
	_	•	ss than 5 years	3		
4 F	nter the net value of no	ncharitable-use assets for 2014 fr	rom Part X, line 5	4		
7 -	nice the net value of no	monantable doc docto for 2014 ii				
E 14	ultinly line 4 by line 3			5		
5 M	unipiy iiile 4 by iiile 3 .					
<b>о</b> г	-4 40/ -54			6		
6 E	nter 1% of het investme	ent income (1% of Part I, line 2/b)		<del>                                     </del>	<del></del>	<del></del>
<b>7</b> ^	dd linna E and C			7		
7 A	ud lines o and b		• • • • • • • • • • • • • • • • • • • •	<del>                                     </del>	<del> </del>	
	المستعدات حصرها والمناس	and from Dank VIII then 4		8		
8 Ei	nter qualitying distributions.	ons from Mart All, line 4	in Part VI, line 1b, and complete		using a 1% to	rate See the
	art VI instructions	Cator than hill r, check the box	are vi, into 15, and complete	part		aic occ iiie

4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?

b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its

charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2014?

4a

Χ

Х

FELDMAN FAMILY FOUNDATION, INC. 47-2371066 Form 990-PF (2014) Page 7 Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued) 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 (c) Compensation NONE Total number of others receiving over \$50,000 for professional services . .  $\triangleright$ 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 Expenses organizations and other beneficianes served, conferences convened, research papers produced, etc Part IX-B Summary of Program-Related Investments (see instructions) Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 Amount NONE

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3 NONE

Total. Add lines 1 through 3.

All other program-related investments. See instructions

Page 8

Par	Minimum Investment Return (All domestic foundations must complete this part. Forei see instructions.)	gn foundations,
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 20,806
b	Average of monthly cash balances	<b>1b</b> 62,574
C		1c
d	Total (add lines 1a, b, and c)	1d 83,380
е		
	1c (attach detailed explanation)1e	]
2	Acquisition indebtedness applicable to line 1 assets	2
3	Subtract line 2 from line 1d	3 83,380
4	Subtract line 2 from line 1d  Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see	
	instructions)	4 1,251
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5 82,129
6	Minimum investment return. Enter 5% of line 5	6 506
Par	Distributable Amount (see instructions) (Section 4942(J)(3) and (J)(5) private operating found and certain foreign organizations check here ▶ and do not complete this part )	dations
1	Mınimum ınvestment return from Part X, line 6	1 506
2a	Tax on investment income for 2014 from Part VI, line 5	
b		
С	Add lines 2a and 2b	2c
3	Distributable amount before adjustments Subtract line 2c from line 1	3 506
4	Recoveries of amounts treated as qualifying distributions	4
5	Add lines 3 and 4	5 506
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,	
	line 1	7 506
Pari	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
b	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
þ	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
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
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when c qualifies for the section 4940(e) reduction of tax in those years	alculating whether the foundati

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For	n 990-PF (2014)				Page 9
Pa	rt XIII Undistributed Income (see instru	uctions)			
1	Distributable amount for 2014 from Part XI,	(a) Corpus	(b) Years prior to 2013	(c) 2013	(d) 2014
	ine 7			·	506.
2	Undistributed income, if any, as of the end of 2014				
а	Enter amount for 2013 only				
b	Total for pnor years 20 12 ,20 11 ,20 10				
3	Excess distributions carryover, if any, to 2014				
а	From 2009				
	From 2010				
С	From 2011		,		
	From 2012				
	From 2013				
	Total of lines 3a through e	0			}
	Qualifying distributions for 2014 from Part XII,				
	line 4 ▶ \$				
а	Applied to 2013, but not more than line 2a			•	
	Applied to undistributed income of prior years	······································			
b	(Election required - see instructions)				
_	Treated as distributions out of corpus (Election				
L	required - see instructions)				j
d	Applied to 2014 distributable amount				
	Remaining amount distributed out of corpus				
5	Excess distributions carryover applied to 2014				
	(If an amount appears in column (d), the same			· · · · · · · · · · · · · · · · · · ·	
6	amount must be shown in column (a) ) Enter the net total of each column as				
ь	indicated below:				
а	Corpus Add lines 3f, 4c, and 4e Subtract hme 5				:
	Pnor years' undistributed income Subtract-				
D	line 4b from line 2b				
С	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				
	· · · · · · · · · · · · · · · · · · ·				
a	Subtract line 6c from line 6b Taxable amount - see instructions				
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	-			506.
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)				
8	Excess distributions carryover from 2009 not				
0	applied on line 5 or line 7 (see instructions)		· ·		
9	Excess distributions carryover to 2015.	· · · · · · · · · · · · · · · · · · ·			
,	Subtract lines 7 and 8 from line 6a	0			
10	Analysis of line 9	-			
	Excess from 2010				
	Excess from 2011				
	Excess from 2012				
	Excess from 2013				
-	Excess from 2014				

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

factors

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Part XV Supplementary Information (	continued)			
3 Grants and Contributions Paid Duri Recipient Name and address (home or business)	ng the Year or Appi	roved for I	Future Payment	
Recipient	If recipient is an individual, show any relationship to	Foundation	Purpose of grant or	
Name and address (home or business)	any foundation manager or substantial contributor	recipient	Purpose of grant or contribution	Amount
a Paid during the year				
•		İ		
		-	•	
		i		
				1
			1	
				İ
	]			
	İ			
				!
		İ		
		_		
Total				
b Approved for future payment				
			:	
		ĺ		
		1		
Total	· · · · · · · · · · · · · · · · · · ·		▶ 3b	
	<del> </del>			Form 990-DE (2014)

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r gross	amounts unless otherwise indicated	Unrel	ated business income	Excluded by	section 512, 513, or 514	(e) Related or exen
<sup>2</sup> rogram	ı service revenue	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	function incom
•						
		,				
	and contracts from government agencies					
	ship dues and assessments	· · · · · · · · · · · · · · · · · · ·				
	n savings and temporary cash investments					
	Is and interest from securities					
	al income or (loss) from real estate					<del></del>
	-financed property					
	lebt-financed property					
	I income or (loss) from personal property .vestment income	<del> </del>	<del></del>			
	oss) from sales of assets other than inventory	<del></del>	<u> </u>			
•	me or (loss) from special events					
	rofit or (loss) from sales of inventory.		<del></del>	_		
	venue a					
ubtotal otal. Ad worksh	Add columns (b), (d), and (e)	ulations)				
ubtotal otal. Ad worksh	Add columns (b), (d), and (e) dd line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calculated Relationship of Activities	ulations) to the Ac	complishment of E	xempt Purp	oses	
otal. Ad worksh t XVI-I	Add columns (b), (d), and (e)   Id line 12, columns (b), (d), and (e)   leet in line 13 instructions to venfy calcu	ulations) to the Ac	complishment of E	xempt Purp	oses e) of Part XVI-A contribu	ited importantly
ubtotal otal. Ad worksh t XVI-I	Add columns (b), (d), and (e)	ulations) to the Ac	complishment of E	xempt Purp	oses e) of Part XVI-A contribu	ited importantly
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otal. Ad worksh t XVI-I	Add columns (b), (d), and (e)	ulations) to the Ac	complishment of E	xempt Purp	oses e) of Part XVI-A contribu	ted importantly
otal. Ad worksh t XVI-I	Add columns (b), (d), and (e)	ulations) to the Ac	complishment of E	xempt Purp	oses e) of Part XVI-A contribu	ited importantly
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ubtotal otal. Ad worksh t XVI-	Add columns (b), (d), and (e)	ulations) to the Ac	complishment of E	xempt Purp	oses e) of Part XVI-A contribu	ted importantly
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otal. Ad worksh t XVI-I	Add columns (b), (d), and (e)	ulations) to the Ac	complishment of E	xempt Purp	oses e) of Part XVI-A contribu	ted importantly t
otal. Ad worksh t XVI-I	Add columns (b), (d), and (e)	ulations) to the Ac	complishment of E	xempt Purp	oses e) of Part XVI-A contribu	ted importantly

Part	XVII	Information R Exempt Organ		ansfers To a	ınd Transact	ions an	d Relation	ships W	ith None	chari	table	<del>)</del>
1	n sect	e organization direction 501(c) of the Cozations?	•			•					Yes	No
a Transfers from the reporting foundation to a noncharitable exempt organization of												
								1a(1)		X		
		ner assets						· · · · · ·		1a(2)		X
		transactions. les of assets to a no	ncharitable eve	ampt organization	n					- 4 h (4)		X
(	1) Sai 2) Piir	rchases of assets fro	nonantable exe	ahle exempt ora	anization				• • • • •	1b(1) 1b(2)		- <u>x</u> -
(	2) Rei	ntal of facilities, equi	pment, or othe	r assets	anzaton							<u>X</u> _
		ımbursement arrangı										Х
(	<b>5)</b> Loa	ans or loan guarantee	es							1b(5)		Х
		rformance of service										X
		g of facilities, equipm										X
٧	alue o	answer to any of th of the goods, other n any transaction or	assets, or serv	rices given by t	he reporting for	undation	If the found	lation rece	eived less	than i	fair m	arket
(a) Line		(b) Amount involved	T	noncharitable exem			cription of trans		·			
		N/A				N/A						
								<del></del>				
		<del></del> -										
										****		
		· · · · · · · · · · · · · · · · · · ·										
				·								
						<b></b>			•••			
d	lescrib	foundation directly oped in section 501(c)	of the Code (c				•	t organiza	tions	Ye	s X	No
D II	res,	complete the follow (a) Name of organization		(h) Typ	e of organization			(c) Description	n of relations			
		(=,	<del> </del>	(-) . , , ,	o o o o o o o o o o o o o o o o o o o		···	(e) Beeep		<u>P</u>		
										-		
			•									
	Lundan							- 15 - 5 - 1 - 4				
Sign		penatties of penjury, I declar t, and complete Declaration of						Ţ.	May the IRS with the pre	discuss	this	
Here	Sign	nature of officer or trustee		Date	101	Title		<u>L</u>	(see instructions	)? X	Yes [	No
Paid		Print/Type preparer's na		Preparer's 6001	nature		Date	Chec	~ └── ''	TIN		
	2505	ANTHONY J PAN		M			<u>                                     </u>	<b>)</b> self-€		2003		6
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			IMIDIONN,	110		07	200-0497	Phone no		n <b>990</b>		2014)

## Schedule B

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

Name of the organization

## Schedule of Contributors

OMB No 1545-0047

► 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.

Employer identification number

FELDMAN FAMILY FOUNDATION, INC. 47-2371066 Organization type (check one): Filers of: Section: Form 990 or 990-EZ 501(c)( ) (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization Form 990-PF 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private 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 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 General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions 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)

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 FELDMAN FAMILY FOUNDATION, INC.

Employer identification number 47-2371066

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

(a)	(b)	(c)	_ (d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
1_	RELLA FELDMAN  1649 HANOVER STREET  TEANECK, NJ 07666	\$750,884.	Person  Payroll  Noncash  (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2_	RELLA FELDMAN  1649 HANOVER STREET  TEANECK, NJ 07666	\$249,667.	Person  Payroli  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)

Name of organization FELDMAN FAMILY FOUNDATION, INC.

Employer identification number 47-2371066

Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date receive d
_ 2	SECURITIES	\$249,667.	12/31/201 <b>4</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
		\$	
(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>

Name of organization FELDMAN FAMILY FOUNDATION, INC.

Employer identification number

	1					
		(e) Transfer of gift				
a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) De	escription of how gift is held		
			<b>_</b>			
	Transferee's name, address, a	nd ZIP + 4	Relationship of trai	nsferor to transferee		
	(e) Transfer of gift					
a) No. from Part I	(b) Purpose of gift	(c) Use of gift		escription of how gift is held		
	Transferee's name, address, a	nd ZIP + 4	Relationship of trai	nsferor to transferee		
		(e) Transfer of gift				
a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) De	escription of how gift is held		
	Transferee's name, address, a	nd ZIP + 4	Relationship of trai	nsferor to transferee		
		(e) Transfer of gift				
from Part I	(b) Purpose of gift	(c) Use of gift	(d) De	escription of how gift is held		
a) No.	contributions of \$1,000 or less for th Use duplicate copies of Part III if addit	e year (Enter this information				
	that total more than \$1,000 for the y following line entry For organizations					
rt III	Exclusively religious, charitable, etc					

ATTACHMENT 1

PART VII-A, LINE 10 - NEW SUBSTANTIAL CONTRIBUTORS FORM 990PF,

FELDMAN FAMILY FOUNDATION, INC.

NAME AND ADDRESS

RELLA FELDMAN 1649 HANOVER STREET TEANECK, NJ 07666

ATTACHMENT 2

EXPENSE ACCT AND OTHER ALLOWANCES	0	0	0	0
CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	0	0	0	0
COMPENSATION	0	0	0	0
TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION	PRESIDENT - TRUSTEE 1.00	SECRETARY - TRUSTEE 1.00	VP/TREASURER - TRUSTEE 1.00	GRAND TOTALS
NAME AND ADDRESS	RELLA FELDMAN 1649 HANOVER STREET TEANECK, NJ 07666	MICHAEL FELDMAN 1649 HANOVER STREET TEANECK, NJ 07666	JOSEPH FELDMAN 1649 HANOVER STREET TEANECK, NJ 07666	