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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

2014
Open to Public Inspection

Department of the Reasury Internal Revenue Service ▶ Do not enter social security numbers on this form as it may be made public.

▶ Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf. For calendar year 2014 or tax year beginning 2014, and ending 20 Name of foundation A Employer identification number **UM Holdingss Foundation** 52-1599160 Number and street (or P O box number if mail is not delivered to street address) Room/suite B Telephone number (see instructions) 56 N. Haddon Avenue 856-354-2200 City or town, state or province, country, and ZIP or foreign postal code C If exemption application is pending, check here ▶ Haddonfield, NJ 08033 ☐ Initial return ☐ Initial return of a former public charity G Check all that apply: D 1. Foreign organizations, check here Final return ☐ Amended return 2. Foreign organizations meeting the 85% test, ☐ Address change ☐ Name change check here and attach computation E If private foundation status was terminated under Check type of organization: Section 501(c)(3) exempt private foundation section 507(b)(1)(A), check here ▶□ Section 4947(a)(1) nonexempt charitable trust 

Other taxable private foundation J Accounting method: Cash Accrual Fair market value of all assets at F 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 3 line 16) ▶ \$ (Part I, column (d) must be on cash basis.) (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 purposes (cash basis only) the amounts in column (a) (see instructions).) SCANNED Contributions, gifts, grants, etc., received (attach schedule) 100.000.00 2 Check ► ☐ If the foundation is not required to attach Sch. B 3 Interest on savings and temporary cash investments 4.17 4.17 4 Dividends and interest from securities . . . . 33,924.57 33,924.57 Gross rents . . . . . . . . . 5a Net rental income or (loss) 6a Net gain or (loss) from sale of assets not on line 10 19,022.60 Gross sales price for all assets on line 6a Capital gain net income (from Part IV, line 2) . 8 Net short-term capital gain . . . . . 9 Income modifications 10a Gross sales less returns and allowances Less: Cost of goods sold . . . Gross profit or (loss) (attach schedule) . . . . Ś 11 Other income (attach schedule) . . . . . 12 Total. Add lines 1 through 11 . . 152,951.28 33,928.74 13 Compensation of officers, directors, trustees, etc. റല Operating and Administrative Expenses 14 Other employee salaries and wages . . . . . 15 Pension plans, employee benefits Legal fees (attach schedule) Accounting fees (attach schedule) . . . 74.29.5hnt 3 Other professional fees (attach schedule) 74.29 74.29 74.29 18 Taxes (attach schedule) (see instructions) . . . . 19 Depreciation (attach schedule) and depletion . . . 20 21 Travel, conferences, and meetings . . . 22 Printing and publications . . . 25.00,5/m+ 4 Other expenses (attach schedule) 25.00 25.00 25.00 Total operating and administrative expenses. Add lines 13 through 23 . . . . . . . . . . 99.29 99.29 99.29 99.29 25 Contributions, gifts, grants paid . . . . . . 131,460.00 131,460.00 26 Total expenses and disbursements. Add lines 24 and 25 131,559.29 99.29 99.29 131,559.29 Subtract line 26 from line 12: Excess of revenue over expenses and disbursements 21,391.99 **b** Net investment income (if negative, enter -0-) . 33,829.45

Form **990-PF** (2014)

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

Part II		Ratance Sheets Attached schedules and amounts in the description column	Beginning of year	End o	f year		
		Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only. (See instructions.)	(a) Book Value	(b) Book Value	(c) Fair Market Value		
	1	Cash—non-interest-bearing	68,826.41	192,852.40	192,852.40		
	2	Savings and temporary cash investments					
	3	Accounts receivable ▶					
	i	Less: allowance for doubtful accounts ▶			<u></u>		
	4	Pledges receivable ▶	i				
		Less: allowance for doubtful accounts					
	5	Grants receivable			· · · · · · · · · · · · · · · · · · ·		
	6	Receivables due from officers, directors, trustees, and other					
		disqualified persons (attach schedule) (see instructions)	·				
	7	Other notes and loans receivable (attach schedule) ▶					
	_	Less: allowance for doubtful accounts ▶					
Assets	8	Inventories for sale or use					
SS(	9	Prepaid expenses and deferred charges					
4	10a	Investments—U.S. and state government obligations (attach schedule)	102,634.00	0.00	0.00		
	b	Investments—corporate stock (attach schedule)	<u> </u>				
	С	Investments—corporate bonds (attach schedule)					
	11	Investments—land, buildings, and equipment: basis ▶			l		
		Less: accumulated depreciation (attach schedule) ▶					
	12	Investments—mortgage loans					
	13	Investments—other (attach schedule)					
	14	Land, buildings, and equipment: basis ▶					
	4-	Less: accumulated depreciation (attach schedule) ▶					
	15 16	Other assets (describe )					
	10	<b>Total assets</b> (to be completed by all filers—see the instructions. Also, see page 1, item I)					
	17		171,460.41	192,852.40	192,852.40		
		Accounts payable and accrued expenses					
es	18	Grants payable					
Liabilities	19 20	Deferred revenue					
abi	21	Loans from officers, directors, trustees, and other disqualified persons  Mortgages and other notes payable (attach schedule)			Ì		
Ë	22	· · · · · · · · · · · · · · · · · ·					
	23	Other liabilities (describe ► )  Total liabilities (add lines 17 through 22)			ļ		
	20	Foundations that follow SFAS 117, check here	-				
Balances		and complete lines 24 through 26 and lines 30 and 31.			}		
2	24	Unrestricted			1		
믈	25	Temporarily restricted			1		
= $ $	26	Permanently restricted			1		
Ē		Foundations that do not follow SFAS 117, check here ▶ □					
ヹ		and complete lines 27 through 31.					
Net Assets or Fund	27	Capital stock, trust principal, or current funds					
इ	28	Paid-in or capital surplus, or land, bldg., and equipment fund					
<b>SS</b>	29	Retained earnings, accumulated income, endowment, or other funds					
<b>₹</b>	30	Total net assets or fund balances (see instructions)	171,460.41	192,852.40			
ě	31	Total liabilities and net assets/fund balances (see					
1		ınstructions)	171,460.41	192,852.40			
	rt III	Analysis of Changes in Net Assets or Fund Balances					
1		I net assets or fund balances at beginning of year-Part II, colur		· ·			
_		of-year figure reported on prior year's return)		<u> </u>	<u>171,460.41</u>		
_		r amount from Part I, line 27a			21,391.99		
3	Othe	er increases not included in line 2 (itemize)		3			
_	_	lines 1, 2, and 3		<del></del>	192,852.40		
5 e	Decr	reases not included in line 2 (itemize) ► I net assets or fund balances at end of year (line 4 minus line 5)—F	Port II. column (b) II-	5			
0	rotal	i net assets of futio balances at end of year (line 4 minus line 5)—F	art II, Column (D), IIN	e 30   <b>6</b>	192,852.40		

Part		Losses for Tax on Investme	nt Income	(h) How acquired			
		e kind(s) of property sold (e g , real estate, se, or common stock, 200 shs MLC Co)		(b) How acquired P—Purchase D—Donation		e acquired , day, yr )	(d) Date sold (mo , day, yr )
<u>1a</u>	Statement 1						
<u> </u>	<del></del>			<b></b>			
<u>c</u> _		<del></del>		<del> </del>			
<u>d</u>		<del></del>	<u>-</u>	<del> </del>			
<u>         e                           </u>		/A Depresenting allowed	(a) Cost or	cother been		/h) Go	n or (loss)
	(e) Gross sales price (f) Depreciation allowed (g) Cost or other basis plus expense of sale						f) minus (g)
<u>a</u>					_		
<u> </u>							
<u>c</u>	<del></del>		<del></del> -				
<u>d</u>				<del></del>			
<u>е</u>	Complete only for assets show	wing gain in column (h) and owned by	the foundation	on 12/31/69		(D. Carras (Car	1. (1.)
	(i) F M V as of 12/31/69	(j) Adjusted basis	(k) Exces	ss of col (i)	c	ol (k), but no	I (h) gain minus t less than -0-) <b>or</b> rom col (h))
		as of 12/31/69	over col	(j), if any			
<u>a</u> b			<del></del> -				
<u>c</u>					-	<del></del> -	
d							
е							
2	Capital gain net income or		so enter in Pa inter -0- in Pa		2		
3	Net short-term capital gair	or (loss) as defined in sections 1			-		·· <u>.</u>
•		I, line 8, column (c) (see instruction					
					3		
Part		er Section 4940(e) for Reduc	-		Incon	ne	
Was t	s," the foundation does not	section 4942 tax on the distributa qualify under section 4940(e). Do	not complete	this part.			☐ Yes 🕢 No
1	<del></del>	unt in each column for each year;	see the instr	uctions before m	akıng a	ny entries.	
Cale	(a) Base period years endar year (or tax year beginning in)	(b) Adjusted qualifying distributions	Net value o	(c) of nonchantable-use a	ssets		(d) tribution ratio divided by col (c))
	2013	187,755	.53	189,9	13.40		.9886376
	2012	55,068	.77	152,1	01.89		.3620518
	2011	103,596	.99	60,9	46.06		.6998143
	2010	91,034	.87		39.76		.7804789
	2009	99,954	.00	107,7	08.76		.9280025
2	Total of line 1, column (d)					2	_4.37589851
3		for the 5-year base period—divide			the		
	number of years the found	lation has been in existence if less	than 5 years		·  _	3	.9517970
4	Enter the net value of nonc	chantable-use assets for 2014 fro	m Part X, line	5	.	4	122,215.84
5	Multiply line 4 by line 3 .				.  -	5	116,324.67
6	Enter 1% of net investmen	nt income (1% of Part I, line 27b)			.  -	6	338.29
7	Add lines 5 and 6				.  -	7	116,662.96
8		ns from Part XII, line 4 ter than line 7, check the box in F				8 tusing a 1	228,576.69
	Part VI instructions.	ter than line 1, check the box in r	cut vi, iiiic It	o, and complete	iiai pai	t using a	70 tax rate. Oce the

Part	VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948	8-see	instr	uctio	ns)		
1a	Exempt operating foundations described in section 4940(d)(2), check here ▶ ☐ and enter "N/A" on line 1.  Date of ruling or determination letter: (attach copy of letter if necessary—see instructions)						
ь		1		338	29		
	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-)	2					
3	, , , , , , , , , , , , , , , , , , ,	3		338	29		
4	<del></del>	4					
5							
6							
а	2014 estimated tax payments and 2013 overpayment credited to 2014   6a				,		
b	Exempt foreign organizations—tax withheld at source 6b						
С	Tax paid with application for extension of time to file (Form 8868) . 6c	ŀ			'		
d	Backup withholding erroneously withheld 6d	ł					
7		7		'			
8		8					
9		9		338	29		
10	<del> </del>	10					
11	· · · ·	11	•				
Part	VII-A Statements Regarding Activities						
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation of	or did it		Yes	No		
	participate or intervene in any political campaign?		1a		✓		
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purpose Instructions for the definition)?	es (see	1b		1		
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any m	natenals					
	published or distributed by the foundation in connection with the activities.						
С	Did the foundation file Form 1120-POL for this year?		1c		1		
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 impon foundation managers. ▶ \$	posed	;				
2	Has the foundation engaged in any activities that have not previously been reported to the IRS? If "Yes," attach a detailed description of the activities.		2		1		
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, and	ticles of					
	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes .		3	1 1	1		
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?		4a		7		
b	If "Yes," has it filed a tax return on Form 990-T for this year?		4b	<u> </u>	1		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?		5		1		
	If "Yes," attach the statement required by General Instruction T.						
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:						
	By language in the governing instrument, or		•				
	• By state legislation that effectively amends the governing instrument so that no mandatory direction	ons that					
	conflict with the state law remain in the governing instrument?		6	1			
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 I	Part XV	7	1			
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)						
	New Jersey		1				
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney (	General	1				
	(or designate) of each state as required by General Instruction G? If "No," attach explanation		8b	· ·	-		
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942	2(j)(3) or					
	4942(j)(5) for calendar year 2014 or the taxable year beginning in 2014 (see instructions for Part XIV)? It		[		-		
	complete Part XIV		9		1		
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing						
	names and addresses		10	✓	L		

Part	VII-A Statements Regarding Activities (continued)			
11	At any, time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		1
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		1
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	✓	
	Website address ▶			
14	The books are in care of ▶ Rebecca Price Telephone no. ▶ 856	-354-		
	Located at ► 56 N. Haddon Avenue, Haddonfield, NJ ZIP+4 ►	0803	3	·
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of <b>Form 1041</b> —Check here and enter the amount of tax-exempt interest received or accrued during the year		•	<b>▶</b> ⊔
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	L	<b>✓</b>
	"Yes," enter the name of the foreign country			
Par	VII-B Statements Regarding Activities for Which Form 4720 May Be Required		Yes	Mo
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1a	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes  No  (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? ☐ Yes ☐ No  (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? ☐ Yes ☐ No  (5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)?			
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.)			
b	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 section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	1b		- ~ -
	Organizations relying on a current notice regarding disaster assistance check here			
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2014?	1c		/
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)):			
а	6e, Part XIII) for tax year(s) beginning before 2014?			
	If "Yes," list the years ▶ 20 , 20 , 20 , 20			
Ь	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 statement—see instructions.)	2b	-	
С	If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here.  20 , 20 , 20 , 20			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?			
b	If "Yes," did it have excess business holdings in 2014 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2014.)	3b		
4a		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 had not been removed from jeopardy before the first day of the tax year beginning in 2014?	4b		1

	-
Dane	п

Part	VII-B	Statements Regarding Activities	s for W	hich Form	4720	May Be R	equire	d (contii	nued)			
5a	During	the year did the foundation pay or incur a	any amo	ount to:			-					
		ry on propaganda, or otherwise attempt to under the outcome of any specific public		_	-		-	Yes	<b></b> ✓ No			
		ectly or indirectly, any voter registration di		· · · ·			-	Yes	<b></b> ✓ No	ŀ	-	,
		vide a grant to an individual for travel, stu						☐ Yes	<b></b> No			,
		vide a grant to an organization other that tion 4945(d)(4)(A)? (see instructions)						Yes	<b>⊘</b> No			
		vide for any purpose other than religious poses, or for the prevention of cruelty to a				•		_				
h		•						∐Yes	. No			
J		Inswer is "Yes" to 5a(1)-(5), did <b>any</b> of the tions section 53.4945 or in a current notice							· ·	5b		
	Organizations relying on a current notice regarding disaster assistance check here ▶ □											
С	c If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?											
	If "Yes,	" attach the statement required by Regula	ations s	ection 53.49	45–5(d).	i						
6a		foundation, during the year, receive any ersonal benefit contract?		-	-		emiums	_	[Z]M-			1
b	•	foundation, during the year, pay premiur					henefi	Yes t contract	⊻ No ୨	6b		, ·
_		to 6b, file Form 8870.	, a	ony or mano	oy, o	a porcorra	2011011		•	1		<b>`-</b>
		ime during the tax year, was the foundation  " did the foundation receive any proceed						☐ Yes	_	7b		
	VIII	Information About Officers, Direct									ees.	
		and Contractors	, .	11401000, 1	Janua		.go.o,			···p··o·y	000,	
1	List all	officers, directors, trustees, foundatio	n mana	gers and th	eir con	npensation	ı (see i	nstructio	ns).			
		(a) Name and address		e, and average		mpensation		Contribution		(e) Expe	nse acc	ount,
		(a) Name and address		rs per week ed to position		not paid, iter -0-}		oyee benefit erred compe		other a	other allowances	
	Aglialoro				ŀ							
		venue, Haddonfield, NJ 08033	Charin	nan	<u> </u>	0.00						
Joan C			l									
		venue, Haddonfield, NJ 08033	Presid	ent		0.00						
	W. Hick		l_		ŀ							
<u>56 N. F</u> James		venue, Haddonfield, NJ 08033	Treasu	rer	ł	0.00						
•••		Diese Hedderfeld N.I. 00022				0.00						
2		<u>l Place, Haddonfield, NJ 08033</u> ensation of five highest-paid employe	Secret		se incli	0.00 uded on li	ne 1—	see instr	uctions	s). If no	one.	enter
	"NONE											
(	(a) Name a	and address of each employee paid more than \$50,00	00	(b) Title, and a hours per v devoted to p	veek	(c) Comper	nsation	(d) Contribution of the complete of the comple	benefit deferred	(e) Expe other a		
None				Ì								
							<u> </u>					
				-	·	<u> </u>						
	••••											
Total	number	of other employees paid over \$50,000 .		<u> </u>		· · · ·			. ▶			
										- 00	A DE	(004.4)

Part VIII	Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid I and Contractors (continued)	Employees,
3 Five	highest-paid independent contractors for professional services (see instructions). If none, enter "NO	ONE."
	(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
None		
		<del></del>
		- <del></del> -
Total numi	per of others receiving over \$50,000 for professional services	<u> </u>
Part IX-A	Summary of Direct Charitable Activities	
List the fo	undation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number one and other beneficianes served, conferences convened, research papers produced, etc.	of Expenses
1 N/A		
2		
3		
3		
4		<del></del>
Part IX-E	Summary of Program-Related Investments (see instructions)	
Describe t	ne two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1 N/A		
All other p	rogram-related investments. See instructions	
3		
Total. Add	lines 1 through 3	
		Form <b>990-PF</b> (201

Part	X Minimum Investment Return (All domestic foundations must complete this part. Fore	ign foun	dations,
	see instructions.)		,
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	68,353.00
b	Average of monthly cash balances	1b	55,724.00
С	Fair market value of all other assets (see instructions)	1c	
d	Total (add lines 1a, b, and c)	1d	124,077.00
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	124,077.00
4	Cash deemed held for charitable activities. Enter 1 1/2 % of line 3 (for greater amount, see		
	instructions)	4	1,861.16
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	122,215.84
6	Minimum investment return. Enter 5% of line 5	6	6,110.79
Part	XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating f and certain foreign organizations check here ► ☐ and do not complete this part.)	oundatio	ons
1	Minimum investment return from Part X, line 6	1	6,110.79
2a	Tax on investment income for 2014 from Part VI, line 5   2a   338.29		
b	Income tax for 2014. (This does not include the tax from Part VI.) 2b	1	
С	Add lines 2a and 2b	2c	338.29
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	5,772.50
4	Recoveries of amounts treated as qualifying distributions	4	•
5	Add lines 3 and 4	5	5,772.50
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	5,772.50
Part	XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
a	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26	1a	131,559.29
b	Program-related investments—total from Part IX-B	1b	131,339.28
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,	<del>'''</del>	
_	purposes	2	07.017.40
3	Amounts set aside for specific charitable projects that satisfy the:	-	97,017.40
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	<del></del>
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	220 576 66
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income.	<del>                                     </del>	228,576.69
-	Enter 1% of Part I, line 27b (see instructions)	5	220 22
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	338.29 228,238.40
•	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating		
	qualifies for the section 4940(e) reduction of tax in those years.	y whene	i ine ioungation

art	XIII Undistributed Income	e (see instructio	ns)			
1	Distributable amount for 2014	′ <b>∟</b>	(a) Corpus	(b) Years prior to 2013	(c) 2013	(d) 2014
_	line 7					5,772.50
2	Undistributed income, if any, as of the					1
a	Enter amount for 2013 only Total for prior years: 20 ,20					
ь 3	Excess distributions carryover, if					
a	From 2009	94,468.51				1
b	From 2010	85,202.88				1
C	From 2011	100,549.69				1
ď	From 2012	47,463.68				·
e	From 2013	178,259.86				
f	Total of lines 3a through e		505,944.62			
4	Qualifying distributions for 2014 line 4: ▶ \$	from Part XII,				
а	Applied to 2013, but not more th	ıan lıne 2a .				
b	Applied to undistributed income (Election required—see instruction)					 
С	Treated as distributions out of co	· L				
	required—see instructions)	<u> </u>				
d e	Applied to 2014 distributable am Remaining amount distributed o		222,804.19			
5	Excess distributions carryover a	· · · · · · · · · · · · · · · · · · ·	222,004.19			
	(If an amount appears in column amount must be shown in column	(d), the same				
6	Enter the net total of each indicated below:	` ' '		:		1
а	Corpus. Add lines 3f, 4c, and 4e.	Subtract line 5	728,748.81			!
b	Prior years' undistributed inco	ome. Subtract				1
С	Enter the amount of prior years' income for which a notice of obeen issued, or on which the s	deficiency has		-"		
	tax has been previously assesse	d [				
d	Subtract line 6c from line amount—see instructions					1
е	Undistributed income for 2013. 4a from line 2a. Taxable instructions	amount-see	;		:	
f	Undistributed income for 2014. 4d and 5 from line 1. This am distributed in 2015	ount must be				
7	Amounts treated as distributions to satisfy requirements impose 170(b)(1)(F) or 4942(g)(3) (Electrony)	ed by section ction may be				
<b>D</b>	required—see instructions)	L				
8	Excess distributions carryover fi applied on line 5 or line 7 (see in	structions) .	94,468.51			
9	Excess distributions carryon Subtract lines 7 and 8 from line		634,280.30			
10	Analysis of line 9:	Ţ				
а	Excess from 2010	85,202.88		1	ŀ	
b	Excess from 2011	100,549.69	1	İ		
С	Excess from 2012	47,463.68	İ		j	
d	Excess from 2013	178,259.86				
_ е	Excess from 2014	222,804.19				

Page	1	ſ
raye		•

Statement 5

Part	XIV Private Operating Founda	tions (see instru	ctions and Part	VII-A question 9	3/	- rage 10
1a	If the foundation has received a ruling				<del>7</del>	
ıa	foundation, and the ruling is effective fo					•
b	Check box to indicate whether the four		<del>-</del>		L ection ☐ 4942(i)	(3) or 4942(j)(5)
_	Enter the lesser of the adjusted net	Tax year	operating loundar	Prior 3 years	BOLIOI   4342()/	(0) 01 <u> </u>
2.0	income from Part I or the minimum	(a) 2014	(h) 2012	(c) 2012	I (4) 2011	(e) Total
	investment return from Part X for	(a) 2014	<b>(b)</b> 2013	(6) 2012	(d) 2011	<del> </del>
	each year listed					<del></del>
þ	85% of line 2a					
С	Qualifying distributions from Part XII, line 4 for each year listed					
d	Amounts included in line 2c not used directly for active conduct of exempt activities					
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	"Assets" alternative test-enter:					
	(1) Value of all assets					
	(2) Value of assets qualifying under					
	section 4942(j)(3)(B)(i)					
b	"Endowment" alternative test—enter 2/3					
	of minimum investment return shown in Part X, line 6 for each year listed					
С	"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		******			
Part		n (Complete th	is part only if th	ne foundation h	ad \$5,000 or m	ore in assets at
	any time during the year-	•	•			
1	Information Regarding Foundation			•		
а	List any managers of the foundation	-	ited more than 2%	of the total cont	ributions received	by the foundation
	before the close of any tax year (but o	only if they have co	ontributed more th	an \$5,000). (See s	section 507(d)(2).)	
None						
b	List any managers of the foundation	who own 10% or	more of the stoc	k of a corporation	n (or an equally la	arge portion of the
	ownership of a partnership or other e	ntity) of which the	foundation has a 1	10% or greater int	erest.	
None						
2	Information Regarding Contribution	n, Grant, Gift, Loa	n, Scholarship, e	tc., Programs:		
	Check here ▶ ☐ If the foundation	only makes conti	ributions to presel	ected charitable	organizations and	does not accept
	unsolicited requests for funds. If the f	oundation makes	gifts, grants, etc.	(see instructions)	to individuals or o	rganizations under
	other conditions, complete items 2a,	b, c, and d.				
а	The name, address, and telephone nu	ımber or e-mail ac	Idress of the perso	n to whom applic	ations should be a	addressed:
	•		•			
Rebece	ca Price, 56 N. Haddon Avenue, Haddonf	ield. NJ 08033 856	-354-2200			
	The form in which applications should			materials they sho	ould include:	
	, ,			,		
Statem	ent 5					
C	Any submission deadlines:					
None	•					
	Any restrictions or limitations on av	vards, such as b	y geographical ar	eas, charitable fi	elds, kinds of ins	stitutions, or other
	factors:	-	- <b></b>			•

Part	Supplementary Information (conti	nued)	·	Dayman and	
3	Grants and Contributions Paid During t	ne Year or Approv	ed for Fut	ure Payment	F
	Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or	Amount
	Name and address (home or business)	or substantial contributor	recipient	contribution	
а	Paid dunng the year				
See At	tached				
					ŀ
					1
					i
			<u> </u>		
	Total	<u></u>		▶ 3a	
D	Approved for future payment				1
None					
	Total			▶ 3k	1

Рa	$\pi x$	Analysis of Income-Producing Ac	,				
Ente	r gro	ss amounts unless otherwise indicated.	Unrelated bu	usiness income	Excluded by sect	ion 512, 513, or 514	(e) Related or exempt
			(a)	(b)	(c)	(d)	function income
1	Prod	gram service revenue:	Business code	Amount	Exclusion code	Amount	(See instructions.)
•	a	gram service revenue.					
	ъ -						
	-						
	٠						
	ď						
	е _				ļ		
	f.						
	g i	Fees and contracts from government agencies					
2	Men	nbership dues and assessments					
3		rest on savings and temporary cash investments					4.17
4		dends and interest from securities					33,924.57
5		rental income or (loss) from real estate:					33,324.37
•		Debt-financed property					
_		Not debt-financed property			· · · · · · · · · · · · · · · · · · ·		
_		rental income or (loss) from personal property			ļ		
7		er investment income					
8		or (loss) from sales of assets other than inventory					
9	Net	income or (loss) from special events			J		
10	Gros	ss profit or (loss) from sales of inventory					
11	Othe	er revenue: a					
	b						
	c -						,
	ď						
	~ _	<u> </u>					
	_						
10	e Sub	total Add columns (b) (d) and (c)					
	Sub	total. Add columns (b), (d), and (e)					
13	Sub	al. Add line 12, columns (b), (d), and (e)				13	39,928.74
<b>13</b> (See	Sub Tota work	al. Add line 12, columns (b), (d), and (e)	 ıs.)			13	39,928.74
13 (See Par	Sub Tota work	al. Add line 12, columns (b), (d), and (e) ssheet in line 13 instructions to verify calculation I-B Relationship of Activities to the A	 is.) iccomplishm	ent of Exemp	t Purposes		
13 (See Pal Lin	Sub Tota work t XV	al. Add line 12, columns (b), (d), and (e) ssheet in line 13 instructions to verify calculation I-B Relationship of Activities to the A	 is.) iccomplishm	ent of Exemp	t Purposes		
13 (See Pal Lin	Sub Tota work t XV • No.	al. Add line 12, columns (b), (d), and (e) ssheet in line 13 instructions to verify calculation I-B Relationship of Activities to the A	 is.) iccomplishm	ent of Exemp	t Purposes		
13 (See Pal Lin	Sub Tota work t XV	al. Add line 12, columns (b), (d), and (e) ssheet in line 13 instructions to verify calculation I-B Relationship of Activities to the A	 is.) iccomplishm	ent of Exemp	t Purposes		
13 (See Pal Lin	Sub Tota work t XV • No.	al. Add line 12, columns (b), (d), and (e) ssheet in line 13 instructions to verify calculation I-B Relationship of Activities to the A	 is.) iccomplishm	ent of Exemp	t Purposes		
13 (See Pal Lin	Sub Tota work t XV • No.	al. Add line 12, columns (b), (d), and (e) ssheet in line 13 instructions to verify calculation I-B Relationship of Activities to the A	 is.) iccomplishm	ent of Exemp	t Purposes		
13 (See Pal Lin	Sub Tota work t XV • No.	al. Add line 12, columns (b), (d), and (e) ssheet in line 13 instructions to verify calculation I-B Relationship of Activities to the A	 is.) iccomplishm	ent of Exemp	t Purposes		
13 (See Pal Lin	Sub Tota work t XV • No.	al. Add line 12, columns (b), (d), and (e) ssheet in line 13 instructions to verify calculation I-B Relationship of Activities to the A	 is.) iccomplishm	ent of Exemp	t Purposes		
13 (See Pal Lin	Sub Tota work t XV • No.	al. Add line 12, columns (b), (d), and (e) ssheet in line 13 instructions to verify calculation I-B Relationship of Activities to the A	 is.) iccomplishm	ent of Exemp	t Purposes		
13 (See Pal Lin	Sub Tota work t XV • No.	al. Add line 12, columns (b), (d), and (e) ssheet in line 13 instructions to verify calculation I-B Relationship of Activities to the A	 is.) iccomplishm	ent of Exemp	t Purposes		
13 See Pal Lin	Sub Tota work t XV • No.	al. Add line 12, columns (b), (d), and (e) ssheet in line 13 instructions to verify calculation I-B Relationship of Activities to the A	 is.) iccomplishm	ent of Exemp	t Purposes		
13 (See Pal Lin	Sub Tota work t XV • No.	al. Add line 12, columns (b), (d), and (e) ssheet in line 13 instructions to verify calculation I-B Relationship of Activities to the A	 is.) iccomplishm	ent of Exemp	t Purposes		
13 See Pal Lin	Sub Tota work t XV • No.	al. Add line 12, columns (b), (d), and (e) ssheet in line 13 instructions to verify calculation I-B Relationship of Activities to the A	 is.) iccomplishm	ent of Exemp	t Purposes		
13 (See Pal Lin	Sub Tota work t XV • No.	al. Add line 12, columns (b), (d), and (e) ssheet in line 13 instructions to verify calculation I-B Relationship of Activities to the A	 is.) iccomplishm	ent of Exemp	t Purposes		
13 (See Pal Lin	Sub Tota work t XV • No.	al. Add line 12, columns (b), (d), and (e) ssheet in line 13 instructions to verify calculation I-B Relationship of Activities to the A	 is.) iccomplishm	ent of Exemp	t Purposes		
13 (See Pal Lin	Sub Tota work t XV • No.	al. Add line 12, columns (b), (d), and (e) ssheet in line 13 instructions to verify calculation I-B Relationship of Activities to the A	 is.) iccomplishm	ent of Exemp	t Purposes		
13 (See Pal Lin	Sub Tota work t XV • No.	al. Add line 12, columns (b), (d), and (e) ssheet in line 13 instructions to verify calculation I-B Relationship of Activities to the A	 is.) iccomplishm	ent of Exemp	t Purposes		
13 (See Pal Lin	Sub Tota work t XV • No.	al. Add line 12, columns (b), (d), and (e) ssheet in line 13 instructions to verify calculation I-B Relationship of Activities to the A	 is.) iccomplishm	ent of Exemp	t Purposes		
13 (See Pal Lin	Sub Tota work t XV • No.	al. Add line 12, columns (b), (d), and (e) ssheet in line 13 instructions to verify calculation I-B Relationship of Activities to the A	 is.) iccomplishm	ent of Exemp	t Purposes		
13 (See Pal Lin	Sub Tota work t XV • No.	al. Add line 12, columns (b), (d), and (e) ssheet in line 13 instructions to verify calculation I-B Relationship of Activities to the A	 is.) iccomplishm	ent of Exemp	t Purposes		
13 (See Pal Lin	Sub Tota work t XV • No.	al. Add line 12, columns (b), (d), and (e) ssheet in line 13 instructions to verify calculation I-B Relationship of Activities to the A	 is.) iccomplishm	ent of Exemp	t Purposes		
13 (See Pal Lin	Sub Tota work t XV • No.	al. Add line 12, columns (b), (d), and (e) ssheet in line 13 instructions to verify calculation I-B Relationship of Activities to the A	 is.) iccomplishm	ent of Exemp	t Purposes		
13 (See Pal Lin	Sub Tota work t XV • No.	al. Add line 12, columns (b), (d), and (e) ssheet in line 13 instructions to verify calculation I-B Relationship of Activities to the A	 is.) iccomplishm	ent of Exemp	t Purposes		
13 (See Pal Lin	Sub Tota work t XV • No.	al. Add line 12, columns (b), (d), and (e) ssheet in line 13 instructions to verify calculation I-B Relationship of Activities to the A	 is.) iccomplishm	ent of Exemp	t Purposes		
13 (See Pal Lin	Sub Tota work t XV • No.	al. Add line 12, columns (b), (d), and (e) ssheet in line 13 instructions to verify calculation I-B Relationship of Activities to the A	 is.) iccomplishm	ent of Exemp	t Purposes		
13 (See Pal Lin	Sub Tota work t XV • No.	al. Add line 12, columns (b), (d), and (e) ssheet in line 13 instructions to verify calculation I-B Relationship of Activities to the A	 is.) iccomplishm	ent of Exemp	t Purposes		
13 (See Pal Lin	Sub Tota work t XV • No.	al. Add line 12, columns (b), (d), and (e) ssheet in line 13 instructions to verify calculation I-B Relationship of Activities to the A	 is.) iccomplishm	ent of Exemp	t Purposes		
13 (See Pal Lin	Sub Tota work t XV • No.	al. Add line 12, columns (b), (d), and (e) ssheet in line 13 instructions to verify calculation I-B Relationship of Activities to the A	 is.) iccomplishm	ent of Exemp	t Purposes		

Part	XVII	Information . Exempt Or		sfers To and Tran	sactions and	Relationshi	ps With Nonch	aritable	
	in sect	organization o	directly or indirectly	engage in any of the t section 501(c)(3) orga					s No
	_		porting foundation to	a noncharitable exe	mpt organization	of:			1
								1a(1)	1
		ner assets .						1a(2)	1
		transactions:							
	(1) Sa	ales of assets to a noncharitable exempt organization							
		· · ·							
				er assets				1b(2) 1b(3)	1
								1b(4)	1
		ans or loan gua						1b(5)	1
	• •	•		np or fundraising solid				1b(6)	17
С				sts, other assets, or p				1c	1
		-		s," complete the folio					market
				ces given by the repo					
				ement, show in colun					
(a) Line	no (b	) Amount involved	(c) Name of nonc	naritable exempt organization	on (d) Desc	ription of transfe	rs, transactions, and sl	naring arranger	nents
	_							-	
							·		
	_				-				
	_								
	_	<del></del>	·						
					-				
	<del></del>						-		
				<del>_</del>					
2a				filiated with, or relate					
_				other than section 501	(c)(3)) or in secti	on 52/? .		∐ Yes ∐	No
ь	It "Yes	<u> </u>	following schedule				<del>-,</del>		
		(a) Name of organ	ization	(b) Type of orga	anızatıon		(c) Description of relati	onship	
		. <u>-</u> .							
<u> </u>	Under	penalties of perfury, I	declare that I have examine	ed this return, including accom an taxpayer) is based on all in	npanying schedules an	d statements, and	to the best of my knowledge	edge and belief,	ıt ıs true,
Sign	Correct	, and complete. Deci	ration of preparer (other th	an taxpayer) is based on all in			wiedge May the	IRS discuss th	s return
Here	▶		,	15/14/15	1 RE	ASUREN		preparer show	
<del>-</del>		ture of officer or trus	stee	Date	Title	<u> </u>	(see insti	ructions)? TYe	a⊓wo
Doid	<u> </u>	Print/Type preparer	's name	Preparer s signature		Date	Check	PTIN	
Paid	- 1						Check if self-employed		
Prepa		Firm's name	<del></del>				Firm's EIN ▶	1	
Use (	Only Firm's name ► Firm's EIN ► Phone no								
		3 4441633					1 HONG NO		

#### 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

Organiz	Organization type (check one)						
Filers o	f:	Section:					
Form 99	00 or 990-EZ	☐ 501(c)(	) (enter number) organization				
		☐ 4947(a)(1) non	exempt charitable trust <b>not</b> treated as a private foundation				
		527 political or	rganization				
Form 99	00-PF	√ 501(c)(3) exem	pt private foundation				
		4947(a)(1) non	exempt charitable trust treated as a private foundation				
		501(c)(3) taxable private foundation					
<del></del>							
	nly a section 501(c)(7		neral Rule or a Special Rule. zation can check boxes for both the General Rule and a Special Rule See				
Genera	l Rule						
<b>V</b>	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 33½ % support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1 Complete Parts I and II						
	For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III						
For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year.							

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

Name of organization Employer identification number

(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
1	John Aglialoro  182 Tavistock Lane  Haddonfield, NJ 08033	\$ 50,000.00	Person Payroll Noncash  (Complete Part II for noncash contributions)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
1	Joan Carter  182 Tavistock Lane  Haddonfield, NJ 08033	\$ 50,000 00	Person
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
		\$	Person Payroll Concash (Complete Part II for noncash contributions)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
			Person Payroll Oncash Complete Part II for noncash contributions )
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
		\$	Person
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
			Person

Employer identification number

Ioncash Property (see instructions) Use duplicate co	pies of Part II if additional space	ce is needed
(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	\$	
(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	\$	
(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	\$	
(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	\$	
(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	\$	
(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	s	
	(b)  Description of noncash property given  (b)  Description of noncash property given  (b)  Description of noncash property given  (b)  Description of noncash property given  (b)  Description of noncash property given	Description of noncash property given  \$

Name of o	rganization	-	•	Employer identif	ication number		
Part III	Exclusively religious, charitable, e (10) that total more than \$1,000 for the following line entry. For organiza contributions of \$1,000 or less for the Use duplicate copies of Part III if add	r the year from any o tions completing Par ne year. (Enter this inf	one contributor. Ill, enter the tota formation once. S	Complete columns (a) throal of exclusively religious, c	ough (e) and		
(a) No.		· · · · · · · · · · · · · · · · · · ·		T			
from Part I	(b) Purpose of gift	(c) Use c	of gift	(d) Description of how	gift is held		
1 4111				<del></del>			
1							
Γ		(e) Transfe	er of gift				
	Transferee's name, address, a	nd ZIP + 4	Relatio	nship of transferor to transfe	eree		
1			*****				
/-VAI-							
(a) No. from	(b) Purpose of gift	(c) Use o	f gift	(d) Description of how	gift is held		
Part I	(0, 000 0, 900						
-	(e) Transfer of gift						
	(-)						
	Transferee's name, address, a	nship of transferor to transfe	eree				
	· · · · · · · · · · · · · · · · · · ·						
(a) No. from	(b) Purpose of gift	(c) Use o	faift	(d) Description of how	gift is hold		
Part I	(b) i dipose oi giit	(0) 036 0	i giit	(a) Description of now	girtis ileid		
Ļ	.,			<u> </u>	· <del>- ···</del>		
	(e) Transfer of gift						
	Transferee's name, address, and ZIP + 4 Relation			nship of transferor to transfe	2500		
}	Transferee 3 ffame, address, a	10211 7 7		ising of transferor to transfer			
Ì							
(a) No.	(h) D		e	(0.5)	···		
from Part I	(b) Purpose of gift	(c) Use o	t giπ	(d) Description of how	gift is held		
				-			
		**					
		(e) Transfe	er of gift				
	Transferee's name, address, a	nd ZIP + 4	Relatio	nship of transferor to transfe	eree		

FORM 990-PF			· ·				STATEMENT 1
			GAIN OR (I	LOSS) FROM S	ALE OF ASSE	TS	
DESCRIPTION	(A) N OF PRO	OPERTY			MANNER ACQUIRED	DATE ACQUIRED	_
Cybex Internat	tional Inc				Purchased	See Below	
	Shares	Date	(B) Gross	(C) Cost or	(D) Expense of	(E)	(F)
DATE SOLD	Sold	<u>Acquired</u>	Sales Price	Other Basis	Sale	Deprec.	Gain or (Loss)
4/22/2014 9/25/2014	5,000 2,000	9/6/2013 4/22/2014	114,074 31 104,599 69	102,634 00 97,017 40			11,440 31 7,582 29
		•	218,674 00	199,651 40	_		-
CAPITAL GAI	NS DIVID	ENDS FROI	M PART IV				0.00
TOTAL TO FO	ORM 990	PF, PART I,	LINE 6A				19,022.60

#### 52-1599160

FORM 990-PF INTEREST ON SAVINGS AND TEMPORARY CA	STATEMENT 2 ARY CASH INVESTMENTS		
SOURCE	AMOUNT		
Wachovia Securities - Evergreen Money Market	4 17		
TOTAL TO FORM 990-PF, PART I, LINE 3, COLUMN A	4.17_		

FORM 990-PF	STATEMENT 3 Other Professional Fees				
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	( C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
CSC - Annual Registered Agent Fee	74 29	74 29	74 29	74 29	
TO FORM 990-PF, PART I, LINE 16a	74.29	74.29	74.29	74.29	

#### **UM HOLDINGS FOUNDATION**

FORM 990-PF	STATEMENT 4 OTHER EXPENSES			
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	( C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
Secretary of State Charges	25 00	25 00	25 00	25 00
TO FORM 990-PF, PART I, LINE 23	25.00	25.00	25.00	25.00

FORM 990-PF

STATEMENT 5

## PART XV, LINE 2B APPLICATION REQUIREMENTS

#### **DESCRIPTION**

UM Holdings Foundation supports organizations and initiatives that advocate a society built on capitalism in which profit and production are seen as virtuous and government serves only to protect the rights of the individual and to defend American freedom against any who would violate those rights

Applications should be in the form of a letter explaining the purpose of the organization and its need for funds

#### **UM HOLDINGS FOUNDATION**

# ATTACHMENT TO PART XV - Supplementary Information 3. Grants and Congributions Paid During the Year

NAME/ADDRESS	Relationship	Foundation status of receipient	Purpose of grant of contribution	Amount
a. Paid during the year				
The Atlas Society - Home of the Objectivist Center 1001 Connecticut Avenue, NW, Suite 380 Washington, DC 20036	none		assistance for charitable purpose	25,000 00
Freedom Works Foundation 400 North Capitol NW, Suite 765 Washington DC 20001	none		assistance for charitable purpose	10,000 00
David Horowitz Freedom Center Philadelphia 40 Morris Aveneu, Suite 120 Bryn Mawr, PA 19010-3304	none		assistance for charitable purpose	1,000 00
CATO Institute 1000 Massachusetts Ave , NW Washington, DC 20001	none		assistance for charitable purpose	25,000 00
Freedom Alliance 22570 Markey Court, Suite 240 Dullus, VA 20166	none		assistance for charitable purpose	1,000 00
Reason Foundation 5737 Mesmer Avenue Los Angeles, CA 90230	none		assistance for charitable purpose	10,000 00
STG Fund at the Community Foundation of \$ 125 N Route 73 West Berlin, NJ 08091	South Jersy none		assistance for charitable purpose	1,000 00
Eisenhower Foundation PO Box 35 Abilene, KS 67410	none		assistance for charitable purpose	1,000 00
Foundation for Individual Rights in Education 170 S. Independence Mall W., Suite 510 Philadelphia PA. 19106	ı none		assistance for charitable purpose	3,160 00

NAME/ADDRESS	Relationship	receipient	contribution	Amount
Friends of the IDF 500 Office Center Drive, Suite 400 Fort Washington, PA 19034	none		assistance for charitable purpose	1,800 00
Lourdes Health Foundation 1600 Haddon Avenue Camden, NJ 08103	none		assistance for charitable purpose	2,000 00
Avalon Historical Society 215 39th Street Avalon, NJ 08202	none		assistance for charitable purpose	500 00
Goldwater Institute 500 East Coronado Road Phoenix, AZ 85004	none		assistance for charitable purpose	5,000 00
The Federalist Society 1015 18th Street, NW, Suite 425 Washington DC 20036	none		assistance for charitable purpose	25,000 00
Manhattan Institute for Policy Research 52 Vanderbilt Avenue New York, NY 10017	none		assistance for charitable purpose	10,000 00
State Policy Network 1655 North Fort Myer Drive Arlington, VA 22209	none		assistance for charitable purpose	5,000 00
Institute for Justice 901 N Glebe Road, Suite 900 Arlington, VA 22203	none		assistance for charitable purpose	5,000 00
TOTAL TO LINE 3A				131,460 00