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# SCANNED SEP 2 4 2015

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

OMB No 1545-0052

2014

Department of the Treasury Internal Revenue Service

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Open to Public Inspection

For ca	lendar year 2014, or tax year beginning	<u>,</u> 2014	l, and ending		,		
Jaco	bb E. Teitelbaum Family Found	lation		Α	Employer ident		mber
	326 Kaheiau St ua Kona, HI 96740			В	Telephone num 410-562		tructions)
				С	If exemption ap	oplication is	pending, check here 🕨
<b>G</b> Ch	eck all that apply Initial return Final return	Initial return of a fore	mer public charity	D ·	1 Foreign organiz	ations, che	ck here
H Ch	Address change eck type of organization.  X Section 50	Name change 1(c)(3) exempt private	foundation	_  ;	2 Foreign organiz here and attach	ations mee ocomputati	ting the 85% test, check on
	Section 4947(a)(1) nonexempt charitable	trust Other taxable	private foundation	E			s was terminated
(fro	nm Part II, column (c), line 16)	counting method: $X$ C Other (specify)	Cash Accrual	F	under section !		), cneck nere
Part®	(Part   Analysis of Revenue and	, column (d) must be o		1	under section !	07(b)(1)(B	
	Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions))	(a) Revenue and expenses per books	(b) Net investme income	ent	(c) Adjuste incom		(d) Disbursements for charitable purposes (cash basis only)
	1 Contributions, gifts, grants, etc, received (attach schedule) 2 Ck I if the foundn is not required to attach Sch B	364,940.		7 (37 (32 ) 2 (37 ) (31			
	3 Interest on savings and temporary cash investments	*** ** 1 *** *************************	RE	ÇEI	VED	1	
	4 Dividends and interest from securities	10.	12	-T U	10	10.	
	5 a Gross rents b Net rental income		SFP SFP		2015	San	Samuel Comment
Ŗ	or (loss) 6 a Net gain or (loss) from sale of assets not on line 10			2. 36.45 C. 36.45		an in the first	
R E V	b Gross sales price for all assets on line 6a.  7 Capital gain net income (from Part IV, line 2)			LIN	y UT Value	- ' ( #\$G#4	
E N	8 Net short-term capital gain				67 <u>%</u> 2 - 21, 1829	<b>Meurica</b>	
U E	9 Income modifications 10 a Gross sales less returns and			. 7.3 (A)	30 C 10 C	1 A- 7 8 0 10 00	
	allowances h Less Cost of			merit in			
	goods sold  • Gross profit or (loss) (attach schedule)		200 A 1 2 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3	\$ 1 1 1 X 14 1		gi, iet jos	
	11 Other income (attach schedule).	·	183 77	34 - 75			
	12 Total. Add lines 1 through 11 13 Compensation of officers, directors, trustees, etc.	364,950.		10.		10.	State
	13 Compensation of officers, directors, trustees, etc. 14 Other employee salaries and wages	0.		+			
	15 Pension plans, employee benefits		-				
A D M	16a Legal fees (attach schedule) b Accounting fees (attach sch) See St 1	725.					
0 N	c Other prof fees (attach sch)						
PS	17 Interest . 18 Taxes (attach scheduleXsee instrs)	, <u>, , , , , , , , , , , , , , , , , , </u>		$\dashv$			
RRA	19 Depreciation (attach sch) and depletion				·	<del></del>	0 ,
i i	20 Occupancy		<del> </del>				
GE	21 Travel, conferences, and meetings . 22 Printing and publications						
A E X P E	23 Other expenses (attach schedule)						
N S E	See Statement 2  24 Total operating and administrative	269,122.					
S	expenses. Add lines 13 through 23 25 Contributions, gifts, grants paid Part XV	269,847.					
	26 Total expenses and disbursements.	63,689.		<del></del>			63,689.
	Add lines 24 and 25	333,536.		0.		0.	63,689.
	a Excess of revenue over expenses and disbursements	31,414.					
	b Net investment income (if negative, enter -0-)	J1,414.		10.			
	C Adjusted net income (if negative, enter -0-)					10.	

Par	E II	Balance Sheets  Addated scriedules and amounts in the description column should be for end-of-year amounts only	Beginning of year		or year
		(See instructions )	(a) Book Value	(b) Book Value	(c) Fair Market Value
	I	Cash – non-interest-bearing	451.	31,865.	
	1	Savings and temporary cash investments			
	3	Accounts receivable			
	١.	Less: allowance for doubtful accounts ▶			
	4	Pledges receivable		· · · · · · · · · · · · · · · · · · ·	
	_	Less allowance for doubtful accounts			
	5	Grants receivable		100	
	6	Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions).			
	7	Other notes and loans receivable (attach sch)			
A		Less allowance for doubtful accounts ▶		· · · · · · · · · · · · · · · · · · ·	·
S	8	Inventories for sale or use			
A S S E T	9	Prepaid expenses and deferred charges			<del> </del>
S	10 a	Investments – U.S. and state government obligations (attach schedule)			
	ł	Investments — corporate stock (attach schedule)			
		: Investments — corporate bonds (attach schedule)			
	11	Investments – land, buildings, and equipment. basis		7.80	
		Less. accumulated depreciation (attach schedule)			
	l	Investments – mortgage loans			
	13	Investments - other (attach schedule)			
	14	Land, buildings, and equipment basis	···*	ž •	. 3
		Less accumulated depreciation (attach schedule).			
	l	Other assets (describe			
	10	Total assets (to be completed by all filers — see the instructions Also, see page 1, item I)	451.	31,865.	0.
Ļ	17	Accounts payable and accrued expenses			,
A	18	Grants payable		<del></del>	
B	19	Deferred revenue .			1 *
Ľ	20	Loans from officers, directors, trustees, & other disqualified persons.			]
l T	21	Mortgages and other notes payable (attach schedule)			
- 1	22	Other liabilities (describe			] - ', ' '
E S	23	Total liabilities (add lines 17 through 22)	0.	0.	
<u> </u>		Foundations that follow SFAS 117, check here	0.	<u> </u>	1
		and complete lines 24 through 26 and lines 30 and 31.			
N F E U T N	24 25	Unrestricted Temporarily restricted			
T N D	26	Permanently restricted			-
A B S L L	20	Foundations that do not follow SFAS 117, check here and complete lines 27 through 31.			
ELTA	27	Capital stock, trust principal, or current funds	451.	31,865.	
SNC	28	Paid-in or capital surplus, or land, bldg, and equipment fund			
O E	29	Retained earnings, accumulated income, endowment, or other funds		·	
RS	30 31	Total net assets or fund balances (see instructions)	451.	31,865.	
	31	Total liabilities and net assets/fund balances (see instructions)	451.	31,865.	
Parl		Analysis of Changes in Net Assets or Fund Balanc		31,003.	1
	Total	net assets or fund balances at beginning of year - Part II, colu		gree with	
_		of-year figure reported on prior year's return)	•	1	451.
		r amount from Part I, line 27a		2	31,414.
		Increases not included in line 2 (itemize) .		3	
		lines 1, 2, and 3		4	31,865.
		ases not included in line 2 (itemize) .  I net assets or fund balances at end of year (line 4 minus line 5)	Dort II column (h)	5	21 255
0	ividi	i not assets of fund balances at end of year (line 4 minus line 5)	, – ran II, column (b), l	ine 30 6	31,865.

	Losses for Tax on Investmen		Lats		
(a) List and descri	be the kind(s) of property sold (e.g , r buse, or common stock, 200 shares Mi	eal estate, LC Company)	(b) How acquired P — Purchase D — Donation	(C) Date acquired (month, day, year)	(d) Date sold (month, day, year)
1a N/A					
b					
С					
d					
е					
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other ba plus expense of sa		(h) Gain or (e) plus (f) n	
а					
b					
С					
d					
е					
	owing gain in column (h) and owned b			(I) Gains (Col	
(i) Fair Market Value as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of column over column (j), if a		ain minus column (l an -0-) or Losses (f	
a					
b			İ		
С					
d					
е					
2 Capital gain net income or (	net capital loss).  If gain, also If (loss), en	enter in Part I, line 7 ter -0- in Part I, line 7	2		
3 Net short-term capital gain of	or (loss) as defined in sections 1222(5	_			
If gain, also enter in Part I, I in Part I, line &	line 8, column (c) (see instructions). I	f (loss), enter -0-	- з		
Part V Qualification Und	ler Section 4940(e) for Reduce	d Tax on Net Investn	nent Income	•	
(For optional use by domestic private	e foundations subject to the section 4940	(a) tax on net investment in	come )	N/A	
16 1 4040(4)(6) 1 1	. He can delete d				
If section 4940(d)(2) applies, leave	e this part blank				
	section 4942 tax on the distributable a	• •	pase period?	Yes	No
<u>'</u>	in each column for each year, see the in	' '	entries.		
(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use as		(d) Distribution umn (b) divided	
2013					
2012					
2011					<del> </del>
2010			-		
2009					
2 Total of line 1, column (d)			2		
3 Average distribution ratio for number of years the foundate	r the 5-year base period — divide the tion has been in existence if less than	total on line 2 by 5, or by t 5 years	the . 3		
4 Enter the net value of nonch	naritable-use assets for 2014 from Par	t X, line 5	4		
5 Multiply line 4 by line 3			. 5		
6 Enter 1% of net investment	income (1% of Part I, line 27b)		. 6		
7 Add lines 5 and 6			7	1	
	·		<b>⊢</b>	<del> </del>	
8 Enter qualifying distributions	s from Part XII, line 4		. 8		

		13934		P	age <b>4</b>
Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 -	see i	nstruct	ons)		
1 a 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 instrs)					
<b>b</b> Domestic foundations that meet the section 4940(e) requirements in Part V,	٠ ٠ [	1			0.
check here. ► and enter 1% of Part I, line 27b					
c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, column (b)	-	_			
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable					
foundations only. Others enter -0-)	. [	2			0.
3 Add lines 1 and 2	L	3			0.
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0	-)	4			0.
5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	Ļ	5			<u>0.</u>
6 Credits/Payments	- 1				
a 2014 estimated tax pmts and 2013 overpayment credited to 2014  6 a					ļ
b Exempt foreign organizations — tax withheld at source 6b			ž		
c Tax paid with application for extension of time to file (Form 8868)					
d Backup withholding erroneously withheld . 6d					
7 Total credits and payments Add lines 6a through 6d	-	7			0.
8 Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached .		8			
9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed		9			0.
Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	` ⊢	10			
11 Enter the amount of line 10 to be. Credited to 2015 estimated tax Refunded		11			
Part VII-A   Statements Regarding Activities		-			
1 a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did participate or intervene in any political campaign?	ıt		1 a	Yes	No X
<b>b</b> Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for the definition)?			1 b		Х
If the answer is 'Yes' to <b>1a</b> or <b>1b</b> , attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities			9	SARC.	\$ -
c Did the foundation file Form 1120-POL for this year?			1 c		Х
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year		_	, 7 :		1841 E
(1) On the foundation   S  O  O  O  O  O  O  O  O  O  O  O  O		(	<u>)                                    </u>		
foundation managers   \$ 0.				<u>,                                     </u>	
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	~ ' 2	X
3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If 'Yes,' attach a conformed copy of the change	s		3		X
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?			. 4a		X
<b>b</b> If 'Yes,' has it filed a tax return on <b>Form 990-T</b> for this year?			4 b	N	/A
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year?			5		X
If 'Yes,' attach the statement required by General Instruction T				.	1
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either				. [	
By language in the governing instrument, or					
<ul> <li>By state legislation that effectively amends the governing instrument so that no mandatory directions that confli- with the state law remain in the governing instrument?</li> </ul>	ct		6	Х	<u> </u> l
7 Did the foundation have at least \$5,000 in assets at any time during the year? If 'Yes,' complete Part II, column (c), and Part XV .			7	X	<del></del>
8a Enter the states to which the foundation reports or with which it is registered (see instructions)	<b>&gt;</b>	•			
MD					
<b>b</b> If the answer is 'Yes' to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by <i>General Instruction G? If 'No,' attach explanation</i> .			8 b	Х	J
9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)( for calendar year 2014 or the taxable year beginning in 2014 (see instructions for Part XIV)? If 'Yes,' con	3) or	4942(j)(	5)		
		Part XI	ý 9		<u>X</u>
10 Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing their name and addresses	es	•	10		<u>x</u>
BAA			Form <b>990</b>	- <b>PF</b> (2	014)

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3 a	a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?		
b	b If 'Yes,' did it have excess business holdings in 2014 as a result of (1) any purchase by the four or disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period aby the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or beque (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720 determine if the foundation had excess business holdings in 2014)	approvest, or	ved
4 a	a Did the foundation invest during the year any amount in a manner that would jeopardize its		

charitable purpos	es <sup>7</sup>				
<b>b</b> Did the foundatio	n make any investmer	nt in a prior year	(but after December	31, 1969	) that c

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

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3 b

4 a

N/A

Х

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Part VII-B Statements Regarding Activit		1 4720 May Be Req	uired (continued)		
<ul><li>5 a During the year did the foundation pay or inct</li><li>(1) Carry on propaganda, or otherwise attem</li></ul>	•	n (section 4945(e))?	. Yes X	No	
(2) Influence the outcome of any specific pub on, directly or indirectly, any voter registra	ilic election (see section	n 4955), or to carry	Yes X	No	
(3) Provide a grant to an individual for travel,			Yes X	l i	
(4) Provide a grant to an organization other t in section 4945(d)(4)(A)? (see instructions	han a charitable, etc, or s)	rganization described 	Yes	No	
(5) Provide for any purpose other than religio educational purposes, or for the prevention	us, charitable, scientific on of cruelty to children	c, literary, or or animals? .	. Yes X	No	
b If any answer is 'Yes' to 5a(1)-(5), did any of described in Regulations section 53 4945 or in (see instructions)?	the transactions fail to on a current notice regard	qualify under the excep ding disaster assistance	otions e	5 b	N/A
Organizations relying on a current notice rega	irding disaster assistanc	ce check here	▶ [		
c If the answer is 'Yes' to question 5a(4), does tax because it maintained expenditure respon If 'Yes,' attach the statement required by Reg	sibility for the grant? ulations section 53 4945	5-5(d)	N/A Yes	] No	
<ul><li>6 a Did the foundation, during the year, receive a on a personal benefit contract?</li><li>b Did the foundation, during the year, pay prem</li></ul>			_ Yes X	No .	
If 'Yes' to 6b, file Form 8870	iums, directly or indirec	aly, on a personal bene	ent contract?	6 Ь	X
7 a At any time during the tax year, was the found				No	
b if 'Yes,' did the foundation receive any proceed Part VIII Information About Officers, D				N/A 7b	<u> </u>
and Contractors	irectors, trustees,	roundation Manag	gers, nignly Pald i	impioyees	,
1 List all officers, directors, trustees, foundation	on managers and their	compensation (see ins	tructions).		
(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense other all	e account lowances
Jacob E. Teitelbaum 76-6326 Kaheiau Street Kailua Kona, HI 96740	President 0	0.	0.		0
2 Compensation of five highest-paid employees (o				,	
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d)Contributions to employee benefit plans and deferred compensation	(e) Expense other all	e account lowances
None					
Total number of other employees paid over \$50,000	<u> </u>		•		
DAA				<u> </u>	

Form.990-PF (2014) Jacob E. Teitelbaum Family Foundation  Part VIII Information About Officers, Directors, Trustees, Foundation and Contractors (continued)	52-213 on Managers, Highly Paid E	
3 Five highest-paid independent contractors for professional services (see instru	ctions). 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	▶	0
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical info organizations and other beneficiaries served, conferences convened, research papers produced, etc.	rmation such as the number of	Expenses
1 N/A		
2		
3		
4		
<sup>7</sup>		
Part IX-B Summary of Program-Related Investments (see instruction	ns)	
Describe the two largest program-related investments made by the foundation during the tax	vear on lines 1 and 2.	Amount
1		
N/A		
2		
All other program-related investments See instructions		
3		
		· <u></u> ·
Total. Add lines 1 through 3		0.
BAA		Form <b>990-PF</b> (2014)

Form 990-PF (2014) Jacob E. Teitelbaum Family Foundation	52-2139345	
Part X Minimum Investment Return (All domestic foundations must complete this see instructions.)	part. Foreign found	
1 Fair market value of assets not used (or held for use) directly in carrying out charitable, etc, purpos a Average monthly fair market value of securities	ses	
<b>b</b> Average of monthly cash balances .	1 b	<del></del>
c Fair market value of all other assets (see instructions)	1c	
d Total (add lines 1a, b, and c)	1 d	0.
e Reduction claimed for blockage or other factors reported on lines 1a and 1c		<u> </u>
(attach detailed explanation)		
2 Acquisition indebtedness applicable to line 1 assets	2	
3 Subtract line 2 from line 1d	3	
4 Cash deemed held for charitable activities Enter 1-1/2% of line 3		
(for greater amount, see instructions).	4	
5 Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5 5	0.
6 Minimum investment return. Enter 5% of line 5	6	0.
Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) privar	te operating founda	
and certain foreign organizations check here ► ☐ and do not complete this		
1 Minimum investment return from Part X, line 6	1	
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	2 c	
3 Distributable amount before adjustments Subtract line 2c from line 1	3	
4 Recoveries of amounts treated as qualifying distributions .	4	
5 Add lines 3 and 4	5	
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	0.
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	1 a	63,689.
<b>b</b> Program-related investments – total from Part IX-B	1 b	00,0001
2 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc, purpos	<u> </u>	
	, ,	
3 Amounts set aside for specific charitable projects that satisfy the a Suitability test (prior IRS approval required)	3 a	
<b>b</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, li	ıne 4. <b>4</b>	63,689.

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 4940(e) reduction of tax in those years.

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)

Adjusted qualifying distributions. Subtract line 5 from line 4

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63,689.

5

### Part XIII Undistributed Income (see instructions)

	,	(a) Corpus	(b) Years prior to 2013	<b>(c)</b> 2013	<b>(d)</b> 2014
	Distributable amount for 2014 from Part XI, line 7				0
	Undistributed income, if any, as of the end of 2014:				0.
	Enter amount for 2013 only			0.	
b	Total for prior years: 20 , 20 , 20		0.		
3	Excess distributions carryover, if any, to 2014:				
а	From 2009 41,203.	i			
b	From 2010 36, 518.	]			
C	From 2011 55,809.	]			
d	From 2012 59, 520.	]			
е	From 2013 54, 260.				
	Total of lines 3a through e	247,310.			
	Qualifying distributions for 2014 from Part			,	
	XII, line 4. • \$ 63,689.				
а	Applied to 2013, but not more than line 2a	· · · · · · · · · · · · · · · · · · ·		0.	
	Applied to undistributed income of prior years (Election required — see instructions)		0.		
	Treated as distributions out of corpus				
	(Election required – see instructions)	0.		,* eye. 3	- 🗽 🐰
	Applied to 2014 distributable amount	**		-,s48	0.
	Remaining amount distributed out of corpus	63,689.			-
5	Excess distributions carryover applied to 2014 (If an amount appears in column (d), the	0.			0.
	same amount must be shown in column (a).)	ės.	ť, »	· 學力: - 生態	****
			`*	<b>1</b> *	?`%;
	Enter the net total of each column as indicated below:				
	Corpus Add lines 3f, 4c, and 4e. Subtract line 5	310,999.			
				~	
	Prior years' undistributed income Subtract line 4b from line 2b	< 4% / A3	0.	, , , , , , , , , , , , , , , , , , ,	*24**
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		0.		*
d	Subtract line 6c from line 6b. Taxable				
	amount — see instructions		0.		
е	Undistributed income for 2013 Subtract line 4a from				
	line 2a Taxable amount — see instructions			0.	
f	Undistributed income for 2014 Subtract lines				
	4d and 5 from line 1. This amount must be				
	distributed in 2015				0.
	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.			
8	Excess distributions carryover from 2009 not applied on line 5 or line 7 (see instructions).	41,203.			
9	Excess distributions carryover to 2015. Subtract lines 7 and 8 from line 6a	269,796.			
10	Analysis of line 9				
а	Excess from 2010 36,518.				
b	Excess from 2011 55,809.				
c	Excess from 2012 59, 520.				
d	Excess from 2013 54, 260.				
e i	Excess from 2014 63, 689.				

Form 990-PF (2014) Jacob E. Teitelbaum Family Foundation 52-2139345							
Part XIV Private Operating Foundat					N/A		
1 a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2014, enter the date of the ruling							
b Check box to indicate whether the foundation is a private operating foundation described in section 4942(j)(3) or							
2a Enter the lesser of the adjusted net income from Part I or the minimum	Tax year		Prior 3 years				
investment return from Part X for each year listed	(a) 2014	<b>(b)</b> 2013	(c) 2012	(d) 2011	(e) Total		
<b>b</b> 85% of line 2a							
c 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							
<ul> <li>Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c</li> </ul>							
3 Complete 3a, b, or c for the alternative test relied upon							
a '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							
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 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							
Supplementary Information assets at any time during th	(Complete this e year — see in	part only if the structions.)	foundation had	\$5,000 or more	in		
Information Regarding Foundation Manage     a List any managers of the foundation who have close of any tax year (but only if they have None	e contributed more th	an 2% of the total co than \$5,000) (See	entributions received section 507(d)(2))	by the foundation befo	re the		
b List any managers of the foundation who own a partnership or other entity) of which the None	10% or more of the foundation has a 1	stock of a corporation 0% or greater intere	n (or an equally large est	e portion of the owners	hip of		
2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc, Programs:  Check here ► X if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d.							
<b>a</b> The name, address, and telephone number or	re-mail address of th	ne person to whom ap	oplications should be	addressed:			
<b>b</b> The form in which applications should be submitted and information and materials they should include:							
c Any submission deadlines		<del> </del>					
d Any restrictions or limitations on awards, s	such as by geograp	hical areas, charitat	ole fields, kinds of i	nstitutions, or other f	factors.		

TEEA0310L 06/17/14

Form **990-PF** (2014)

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3 Grants and Contributions Paid During the Y	ear or Approved for Fut	ure Paymen	<u>t                                      </u>	,
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)	substantial contributor	recipient	oorna ballan	
Name and address (home or business)  a Paid during the year  See Statement 3	substantial contributor	recipient		
Total	<del></del>	· · · · · · · · · · · · · · · · · · ·	. ► 3a	63,689.
<b>b</b> Approved for future payment				
Total			▶ 3ь	

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

Ente	r gross amounts unless otherwise indicated	Unrelate	ed business income	Excluded	d by section 512, 513, or 514	(e)
1	. Program service revenue	(a) Business code	<b>(b)</b> Amount	(c) Exclu- sion code	(d) Amount	Related or exempt function income (See instructions.)
a	l					
t	)					
•	:					
•	i					
•	·					
f		1	<u></u>			
ç	Fees and contracts from government agencies			ļ		
2	Membership dues and assessments.					
3	Interest on savings and temporary cash investments		10.			
4	Dividends and interest from securities					
5	Net rental income or (loss) from real estate:		·	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	And the same of th	, , , , , , , , , , , , , , , , , , , ,
	Debt-financed property .					
t	Not debt-financed property			L		
6	Net rental income or (loss) from personal property					
7	Other investment income					
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.	*.		# 14 1/2	Martin Will	
a	· · · · · · · · · · · · · · · · · · ·			ļ <u>.</u>		
t	)		·-			
(						
C	I					
10		ļ		187 24 alaska		-
12	Subtotal. Add columns (b), (d), and (e)	€	10.	10.150		
13	Total. Add line 12, columns (b), (d), and (e)		• •		13	10.
(266	worksheet in line 13 instructions to verify calculate	ions)				

### Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes

Line No. ▼	Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes) (See instructions.)
N/A	
<del></del>	
<del></del>	

# Form 990-PF (2014) Jacob E. Teitelbaum Family Foundation 52-2139345 Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

	•							1	Yes	No
de	d the organization directescribed in section 501(clating to political organization)	c) of the Code (o	ngage in any of the than section	the following wi 501(c)(3) orgai	th any ot nizations)	her organizatio ) or in section 5	n 527,			
	ansfers from the reporti		a noncharitable	exempt organiz	ation of					
	) Cash	ing roundation to	a monoriamasio	oxompt organiz	allon 01			1 a (1)		X
•	Other assets	·	·	•				1 a (2)		$\frac{x}{x}$
•	ther transactions.							1 4 (2)	- /	
	) Sales of assets to a n	oncharitable exe	emot organization	1				1 b (1)		
	Purchases of assets f		-			•		1 b (2)		X
	Rental of facilities, eq			· · · · · · · · · · · · · · · · · · ·		•		1 b (3)		X
• •	Reimbursement arran	•	. 455015		•	•		1 b (4)		X
•	Loans or loan guarant	•		• •	•	•	•	1 b (5)		$\frac{x}{x}$
• •	Performance of service		un or fundraising	solicitations				1 b (6)		$\frac{x}{x}$
• •	naring of facilities, equip							1 c		$\frac{\lambda}{X}$
• 01	taring or racinities, equip	ment, maning is	313, 011101 233013,	or paid employ	CCS					
<b>d</b> If the ar	the answer to any of the e goods, other assets, or s ny transaction or sharing	e above is 'Yes,' services given by a arrangement, s	complete the foli the reporting found how in column (d	lowing schedule dation. If the foui	. Column ndation re he goods	n <b>(b)</b> should alw ceived less than other assets.	vays show the fail fair market value or services receiv	r market val in ved	ue of	
(a) Line	<del></del>	<del></del>	of noncharitable exem	<del> </del>		<u> </u>	sfers, transactions, ar		ngement	<u>s</u>
N/A		· · · · · · · · · · · · · · · · · · ·		· ·	, , ,	· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·			
							<del></del>			
		·								
							-			
					<del> </del>					
					<del>                                     </del>					
			<u> </u>		<del>                                     </del>					
<b>2 a</b> ls	the foundation directly or escribed in section 501(c	indirectly affiliated	d with, or related to	o, one or more to	ax-exempt a section	t organizations 527?		∏Yes	- X	No
	'Yes,' complete the folio	•						Ш		
	(a) Name of organiz	ation	(b) Type	of organization		(c	) Description of re	elationship		
N/A		••	(4) 31			, · · ·	,			
					-					
						<del></del>		-		
	<del></del>	A								
Ī	Under penalties of perjury 1 dec	clare that I have exam	ined this return, includ	ing accompanying so	hedules and	statements, and to	the best of my knowle	dge and belief, i	t is true,	<del></del>
Sign	Under penalties of perjury 1 decorrect, and complete, beclarat	of preparer (other	than taxpayer) is base	d on all information of	of which pre	parer has any know	ledge			
Here	/ //				-			May the I	n with th	e
nere				4-9-15	P	resident		preparer (see ipst	shown b	elow
	Signature of officer or trustee		<b>/</b>	Date , /	Tit	le			Yes	No
	Print/Type preparer's	name	Preparer's s	proature	./	Date	Check If	PTIN		
Paid	Charles H.	Kupstas	1 MARC	/ A Hepl		9/01/15	self-employed	P01311	1443	
Prepai	rer Firm's name	Kupstas &	Kupstas, L	LC /			Firm's EIN 522	284992		
Use O			rest Drive	<del></del>						
		Annapolis,				-	Phone no. (41	0) 268-	5808	
BAA	<del></del>					,,,	/41	Form <b>99</b>		2014

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

Department of the Treasury Internal Revenue Service

### **Schedule of Contributors**

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

OMB No 1545-0047

2014

Name of the organization		Employer identification number
Jacob E. Teitelbaum Family	Foundation	52-2139345
Organization type (check one)		-
Filers of:	Section:	
Form 990 or 990-EZ	501(c)( ) (enter number) organization	
	4947(a)(1) nonexempt charitable trust not tre	ated as a private foundation
	527 political organization	
Form 990-PF	X 501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated	i as a private foundation
	501(c)(3) taxable private foundation	·
Check if your organization is covered by the	ne General Rule or a Special Rule	
Note. Only a section 501(c)(7), (8), or (10)	organization can check boxes for both the General Ru	le and a Special Rule. See instructions
General Rule		
X For an organization filing Form 990, 99 property) from any one contributor Co	90-EZ, or 990-PF that received, during the year, contrib implete Parts I and II. See instructions for determining	utions totaling \$5,000 or more (in money or a contributor's total contributions
Special Rules		
For an organization described in section under sections 509(a)(1) and 170(b)(1)(A) received from any one contributor, dur Form 990, Part VIII, line 1h, or (ii) Form	on 501(c)(3) filing Form 990 or 990-EZ that met the 33- )(vi), that checked Schedule A (Form 990 or 990-EZ), Part I ing the year, total contributions of the greater of (1) \$5 m 990-EZ, line 1 Complete Parts I and II	1/3% support test of the regulations II, line 13, 16a, or 16b, and that ,000 or (2) 2% of the amount on (i)
during the year, total contributions of r	on 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that more than \$1,000 <i>exclusively</i> for religious, charitable, so lity to children or animals. Complete Parts I, II, and III.	received from any one contributor, cientific, literary, or educational
during the year, contributions exclusive \$1,000 If this box is checked, enter he charitable, etc., purpose Do not comp	on 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that ely for religious, charitable, etc., purposes, but no such ere the total contributions that were received during the lete any of the parts unless the <b>General Rule</b> applies to aritable, etc., contributions totaling \$5,000 or more duri	contributions totaled more than year for an <i>exclusively</i> religious, o this organization because
Caution: An organization that is not covered 990-PF), but it must answer 'No' on Part I	ed by the General Rule and/or the Special Rules does r V, line 2, of its Form 990, or check the box on line H of et the filing requirements of Schedule B (Form 990, 991	not file Schedule B (Form 990, 990-EZ, or f its Form 990-EZ or on its Form 990-PF.
BAA For Paperwork Reduction Act Notice or 990-PF.	e, see the Instructions for Form 990, 990EZ, Sch	nedule <b>B</b> (Form 990, 990-EZ, or 990-PF) (2014)

Schedule <b>B</b> (Form 990, 990-EZ, or 990-PF) (2014)	Page	1 of	1 of Part
Name of organization	Employer	ridentification	number
Jacob E. Teitelbaum Family Foundation	52-21	L39345	

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

(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	Enzymatic Therapy  825 Challenger Drive  Green Bay, WI 54311	\$150,468.	Person X  Payroll  Noncash  (Complete Part II for noncash contributions)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	Europharma	\$ <u>163,847.</u>	Person X  Payroll   Noncash   (Complete Part II for noncash contributions )
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3	Linda and Glenn Greenberg	\$50,000.	Person X  Payroll   Noncash   (Complete Part II for noncash contributions )
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Complete Part II for noncash contributions.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$ 	Person Payroll Complete Part II for noncash contributions )
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Complete Part II for noncash contributions.)

Jacob E. Teitelbaum Family Foundation

Employer identification number

52-2139345

### Partill 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 received
N/	/ <u>A</u>		
		· ·  \$\$	
(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.	(h)	\$\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	·	· · \$ · <b>-</b>	

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

Name of organization Jacob E. Teitelbaum Family Foundation 52-2139345

Partill Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7). (8)

Employer identification number

	or (10) that total more than \$1,000 for the following line entry. For organizations of contributions of \$1,000 or less for the year Use duplicate copies of Part III if additional	he year from any one contrib ompleting Part III, enter the tota (Enter this information once S	<b>butor.</b> Complet al of <i>exclusive</i>	e columns (a) through (e) and ely religious, charitable, etc,
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	-	(d) Description of how gift is held
Parti	N/A			
				·
	Transferee's name, addres	(e) Transfer of gift s, and ZIP + 4	Rela	tionship of transferor to transferee
(a) No. from	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held
No. from Part I	Purpose of gift	Use of gift		Description of how gift is held
	Transferee's name, addres	(e) Transfer of gift s, and ZIP + 4	Rela	tionship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held
		(e)		
	Transferee's name, addres	s, and ZIP + 4	Rela	tionship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held
			 +	
	Transferee's name, addres	(e) Transfer of gift s, and ZIP + 4	Rela	tionship of transferor to transferee

014	Fe	deral State	ments		Page
Client 2 Ja		Teitelbaum Fam	ily Foundatio	n	52-2139
01/15	··· = ··				04.13
Statement 1 Form 990-PF, Part I, Line 16b Accounting Fees					
		(a) Expenses per Books	(b) Net Investmer Income		(d) Charitable <u>Purposes</u>
Tax Return Prep	Total	\$ 725. \$ 725.	\$	0. \$ 0.	\$ 0
Statement 2 Form 990-PF, Part I, Line 23 Other Expenses					
		(a) Expenses per Books	(b) Net Investmer Income	nt Adjusted	(d) Charitable Purposes
Bank Fee Conference/Research Center 1	Develop	\$ 184. ement			
Contract Labor Families in Need Program Fibromyalgia/CFS Education Optimal Futures Development		35,366. 21,403. 24,761. 96,963. 24,150.		•	
Practitioners Communication Research Studies	Total	32,450. 33,845.		<u>0.</u> \$ <u>0.</u>	\$ 0
Statement 3 Form 990-PF, Part XV, Line 3a Recipient Paid During the Year					
Name and Address		Donee ationship	Found- ation Status	Purpose of Grant	Amount_
American Botanical Council P.O. Box 144345 Austin, TX 78714	None			edical ducation	\$ 17,18
SEVA Foundation 1786 5th Street Berkley, CA 94710	None			efugee Medical id	4,86
ABJDS 1125 Spa Road Annapolis, MD 21403	None		E	ducation	5′
International Rescue Committee P.O. Box 5058 Hagerstown, MD 21741	None		R	efugee Relief	19,3

014	Federal Stat	ements		Pa	ige 2
lient 2	Jacob E. Teitelbaum Fa	mily Founda	ition	52-21	139345
Statement 3 (continued) Form 990-PF, Part XV, Line 3a Recipient Paid During the Year	-			C	04.13PM
Name and Address	Donee Relationship	Found- ation Status	Purpose of Grant	Amoui	nt
Intl Campaign For Tibet 1825 Jefferson Pl Washington, DC 20036	None		Education	\$	360
AHMA 12101 Menaul Blvd NE Albuquerque, NM	None		Medical Research		335
Conservation Council of Hawaii PO Box 2923 Honolulu, HI 96802	None		Conservation		100
Vitamin Angels PO Box 42029 Santa Barbara, CA 93140	None		Nutrition for Children	14	,500
Taglit Birthright Israel PO Box 1784 Honolulu, HI 96802					900
Chabad Big Island Kuakini #323 Kona, HI 96740	None				500
Breslov Siddur Project 44 St. Nicholas Ave Lakewood, NJ 08701	None		Religous education	3	3,340
Inward Bound 2013 Fishers St. Oakland, CA 94607	None			1	.,000
Hi Food Bank 40 Holomua St. Hilo, HI 96720					660
			Total	\$ 63	3,689