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Form

990-PF

Department of the Treasury  
Internal Revenue Service

Return of Private Foundation

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

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▶ Information about Form 990-PF and its instructions is at [www.irs.gov/form990pf](http://www.irs.gov/form990pf).




OMB No 1545-0052

2014

Open to Public Inspection

For calendar year 2014, or tax year beginning 01-01-2014, and ending 12-31-2014

Name of foundation THE D'ONOFRIO FOUNDATION		A Employer identification number  91-2151046	
Number and street (or P O box number if mail is not delivered to street address) 124 NO MAIN STREET		B Telephone number (see instructions)  (609) 971-1390	
City or town, state or province, country, and ZIP or foreign postal code FORKED RIVER, NJ 087313634		C If exemption application is pending, check here <input type="checkbox"/>	
G Check all that apply <div><input type="checkbox"/> Initial return <input type="checkbox"/> Final return <input type="checkbox"/> Address change</div> <div><input type="checkbox"/> Initial return of a former public charity <input type="checkbox"/> Amended return <input type="checkbox"/> Name change</div>		D 1. Foreign organizations, check here <input type="checkbox"/> 2. Foreign organizations meeting the 85% test, check here and attach computation <input type="checkbox"/>	
H Check type of organization <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		E If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/>	
I Fair market value of all assets at end of year (from Part II, col. (c), line 16) ▶ \$ 1,750,638		F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/>	
J Accounting method <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____ (Part I, column (d) must be on cash basis.)			

Part I Analysis of Revenue and Expenses <small>(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions) )</small>		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
Revenue	1 Contributions, gifts, grants, etc , received (attach schedule) . . . . .	49,992			
	2 Check <input type="checkbox"/> if the foundation is <b>not</b> required to attach Sch B . . . . .				
	3 Interest on savings and temporary cash investments	2,086	2,086		
	4 Dividends and interest from securities. . . . .	26,482	26,482		
	5a Gross rents . . . . .				
	b Net rental income or (loss) _____				
	6a Net gain or (loss) from sale of assets not on line 10 	15,226			
	b Gross sales price for all assets on line 6a <u>15,245</u>				
	7 Capital gain net income (from Part IV, line 2) . . .		15,226		
	8 Net short-term capital gain . . . . .				
	9 Income modifications . . . . .				
	10a Gross sales less returns and allowances				
Operating and Administrative Expenses	b Less Cost of goods sold . . . . .				
	c Gross profit or (loss) (attach schedule) . . . . .				
	11 Other income (attach schedule) . . . . .	 813	644		
	12 <b>Total.</b> Add lines 1 through 11 . . . . .	94,599	44,438		
	13 Compensation of officers, directors, trustees, etc				
	14 Other employee salaries and wages . . . . .				
	15 Pension plans, employee benefits . . . . .				
	16a Legal fees (attach schedule) . . . . .				
	b Accounting fees (attach schedule) . . . . .				
	c Other professional fees (attach schedule) . . . . .				
	17 Interest . . . . .				
	18 Taxes (attach schedule) (see instructions) . . .	 3,553			
	19 Depreciation (attach schedule) and depletion . . .				
	20 Occupancy . . . . .				
	21 Travel, conferences, and meetings . . . . .				
	22 Printing and publications . . . . .				
	23 Other expenses (attach schedule) . . . . .	 30			
	24 <b>Total operating and administrative expenses.</b>				
	Add lines 13 through 23 . . . . .	3,583	0		0
	25 Contributions, gifts, grants paid . . . . .	101,920			101,920
	26 <b>Total expenses and disbursements.</b> Add lines 24 and 25	105,503	0		101,920
	27 Subtract line 26 from line 12				
	a <b>Excess of revenue over expenses and disbursements</b>	-10,904			
	b <b>Net investment income</b> (if negative, enter -0-)		44,438		
	c <b>Adjusted net income</b> (if negative, enter -0-)				

Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions )	Beginning of year	End of year	
			(a) Book Value	(b) Book Value	(c) Fair Market Value
Assets	1	Cash—non-interest-bearing . . . . .	645	1,525	1,525
	2	Savings and temporary cash investments . . . . .	821,087	808,670	808,670
	3	Accounts receivable ▶ _____ Less allowance for doubtful accounts ▶ _____			
	4	Pledges receivable ▶ _____ Less allowance for doubtful accounts ▶ _____			
	5	Grants receivable . . . . .			
	6	Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions) . . . . .			
	7	Other notes and loans receivable (attach schedule) ▶ _____ Less allowance for doubtful accounts ▶ _____			
	8	Inventories for sale or use . . . . .			
	9	Prepaid expenses and deferred charges . . . . .			
	10a	Investments—U S and state government obligations (attach schedule)			
	b	Investments—corporate stock (attach schedule) . . . . .	586,806	586,774	940,443
	c	Investments—corporate bonds (attach schedule). . . . .			
	11	Investments—land, buildings, and equipment basis ▶ _____ Less accumulated depreciation (attach schedule) ▶ _____			
	12	Investments—mortgage loans . . . . .			
	13	Investments—other (attach schedule) . . . . .			
	14	Land, buildings, and equipment basis ▶ _____ Less accumulated depreciation (attach schedule) ▶ _____			
15	Other assets (describe ▶ _____)				
16	Total assets (to be completed by all filers—see the instructions Also, see page 1, item I)	1,408,538	1,396,969	1,750,638	
Liabilities	17	Accounts payable and accrued expenses . . . . .			
	18	Grants payable . . . . .			
	19	Deferred revenue . . . . .			
	20	Loans from officers, directors, trustees, and other disqualified persons			
	21	Mortgages and other notes payable (attach schedule) . . . . .			
	22	Other liabilities (describe ▶ _____)			
	23	Total liabilities (add lines 17 through 22) . . . . .		0	
Net Assets or Fund Balances	Foundations that follow SFAS 117, check here ▶ <input type="checkbox"/> and complete lines 24 through 26 and lines 30 and 31.				
	24	Unrestricted . . . . .			
	25	Temporarily restricted . . . . .			
	26	Permanently restricted . . . . .			
	Foundations that do not follow SFAS 117, check here ▶ <input checked="" type="checkbox"/> and complete lines 27 through 31.				
	27	Capital stock, trust principal, or current funds . . . . .			
	28	Paid-in or capital surplus, or land, bldg , and equipment fund			
	29	Retained earnings, accumulated income, endowment, or other funds	1,408,538	1,396,969	
	30	Total net assets or fund balances (see instructions) . . . . .	1,408,538	1,396,969	
	31	Total liabilities and net assets/fund balances (see instructions) . . . . .	1,408,538	1,396,969	

Part III Analysis of Changes in Net Assets or Fund Balances		
1	Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year’s return) . . . . .	11,408,538
2	Enter amount from Part I, line 27a . . . . .	2-10,904
3	Other increases not included in line 2 (itemize) ▶ _____	315,216
4	Add lines 1, 2, and 3 . . . . .	41,412,850
5	Decreases not included in line 2 (itemize) ▶ _____	515,881
6	Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30 . . . . .	61,396,969

Part IV

Capital Gains and Losses for Tax on Investment Income

(a) List and describe the kind(s) of property sold (e g , real estate, 2-story brick warehouse, or common stock, 200 shs MLC Co )		(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr )	(d) Date sold (mo , day, yr )
1 a	COMMON STOCK, TIME INC (CASH IN LIEU)	D	2005-12-30	2014-06-12
b	COMMON STOCK, RAYONIER ADVANCED MATERIALS INC (CASH IN LIEU)	D	2005-12-30	2014-07-03
c	TIM HORTONS CASH TO BOOT MERGER	D	2005-12-30	2014-12-18
d	COMMON STOCK, RESTAURANT BRANDS INT'L INC (CASH IN LIEU)	D	2005-12-30	2014-12-18
e				

(e) Gross sales price		(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
a	14	0	11	3
b	14	0	3	11
c	15,169	0	0	15,169
d	48	0	5	43
e				

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(I) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	
a	0	0	3
b	0	0	11
c	0	0	15,169
d	0	0	43
e			

2	Capital gain net income or (net capital loss)	{ If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 }	2	15,226
3	Net short-term capital gain or (loss) as defined in sections 1222(5) and (6)  If gain, also enter in Part I, line 8, column (c) (see instructions) If (loss), enter -0- in Part I, line 8 . . . . . }		3	

Part V

Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income )

If section 4940(d)(2) applies, leave this part blank

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? ☐ Yes ☒ No

If "Yes," the foundation does not qualify under section 4940(e) Do not complete this part

1 Enter the appropriate amount in each column for each year, see instructions before making any entries

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col (b) divided by col (c))
2013	207,324	1,618,894	0 128065
2012	169,426	1,527,633	0 110908
2011	74,423	1,513,419	0 049175
2010	68,740	1,407,926	0 048824
2009	44,250	1,218,178	0 036325

2	Total of line 1, column (d). . . . .	2	0 373297
3	Average distribution ratio for the 5-year base period—divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years . . . . .	3	0 074659
4	Enter the net value of noncharitable-use assets for 2014 from Part X, line 5. . . . .	4	1,723,419
5	Multiply line 4 by line 3. . . . .	5	128,669
6	Enter 1% of net investment income (1% of Part I, line 27b). . . . .	6	444
7	Add lines 5 and 6. . . . .	7	129,113
8	Enter qualifying distributions from Part XII, line 4. . . . .	8	101,920

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate See  
the Part VI instructions

Part VI

Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see page 18 of the instructions)

1a		Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter "N/A" on line 1			
b		Domestic foundations that meet the section 4940(e) requirements in Part V, check here <input type="checkbox"/> and enter 1% of Part I, line 27b . . . . .		1	889
c		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	0
3		Add lines 1 and 2. . . . .		3	889
4		Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)		4	
5		Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0- . . . . .		5	889
6		Credits/Payments			
a		2014 estimated tax payments and 2013 overpayment credited to 2014	6a	520	
b		Exempt foreign organizations—tax withheld at source . . . . .	6b		
c		Tax paid with application for extension of time to file (Form 8868) . . . . .	6c		
d		Backup withholding erroneously withheld . . . . .	6d		
7		Total credits and payments. Add lines 6a through 6d. . . . .		7	520
8		Enter any penalty for underpayment of estimated tax. Check here <input type="checkbox"/> 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	369
10		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 <input type="checkbox"/> 0 Refunded <input type="checkbox"/>		11	

Part VII-A

Statements Regarding Activities

1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? . . . . .	1a	Yes	No
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for definition)? . . . . . <i>If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities.</i>	1b		No
c	Did the foundation file Form 1120-POL for this year? . . . . .	1c		No
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year (1) On the foundation <input type="checkbox"/> \$ (2) On foundation managers <input type="checkbox"/> \$			
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers <input type="checkbox"/> \$			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS? . . . . . <i>If "Yes," attach a detailed description of the activities.</i>	2		No
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? <i>If "Yes," attach a conformed copy of the changes.</i> . . . .	3		No
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year? . . . . .	4a		No
b	If "Yes," has it filed a tax return on Form 990-T for this year? . . . . .	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year? . . . . . <i>If "Yes," attach the statement required by General Instruction T.</i>	5		No
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument? . . . . .	6	Yes	
7	Did the foundation have at least \$5,000 in assets at any time during the year? <i>If "Yes," complete Part II, col. (c), and Part XV.</i> . . . . .	7	Yes	
8a	Enter the states to which the foundation reports or with which it is registered (see instructions) <input type="checkbox"/> NJ			
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 General Instruction G? <i>If "No," attach explanation.</i> . . . .	8b	Yes	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2014 or the taxable year beginning in 2014 (see instructions for Part XIV)? <i>If "Yes," complete Part XIV.</i> . . . . .	9		No
10	Did any persons become substantial contributors during the tax year? <i>If "Yes," attach a schedule listing their names and addresses.</i> . . . . .	10	Yes	

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		No
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		No
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Yes	
Website address N/A				
14	The books are in care of PAUL J DALTON CPA Telephone no (609) 971-1390 Located at 124 NO MAIN STREET FORKED RIVER NJ ZIP +4 087313634			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 —Check here and enter the amount of tax-exempt interest received or accrued during the year.	15		
16	At any time during calendar year 2014, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? See instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) If "Yes", enter the name of the foreign country	16	Yes	No

Part VII-B

Statements Regarding Activities for Which Form 4720 May Be Required

File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.			Yes	No
1a	During the year did the foundation (either directly or indirectly) (1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes No (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? Yes No (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)? Yes No (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 ). Yes No			
b	If any answer is "Yes" to 1a(1)–(6), did any 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)? Organizations relying on a current notice regarding disaster assistance check here.	1b		
c	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		No
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))			
a	At the end of tax year 2014, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2014? If "Yes," list the years 20 , 20 , 20 , 20 Yes No			
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement—see instructions ).	2b		
c	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here 20 , 20 , 20 , 20			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? Yes No			
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	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		No
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		No

Part VII-B

Statements Regarding Activities for Which Form 4720 May Be Required (continued)

5a	During the year did the foundation pay or incur any amount to			
	(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	(2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	(3) Provide a grant to an individual for travel, study, or other similar purposes?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	(4) Provide a grant to an organization other than a charitable, etc , organization described in section 4945(d)(4)(A)? (see instructions).	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
b	If any answer is "Yes" to 5a(1)–(5), did <b>any</b> of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)?	5b		
	Organizations relying on a current notice regarding disaster assistance check here.	<input type="checkbox"/>		
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?	<input type="checkbox"/> Yes <input type="checkbox"/> No		
	If "Yes," attach the statement required by Regulations section 53.4945–5(d).			
6a	Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
b	Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	6b		No
	If "Yes" to 6b, file Form 8870.			
7a	At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
b	If yes, did the foundation receive any proceeds or have any net income attributable to the transaction?	7b		

Part VIII

Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors

1 List all officers, directors, trustees, foundation managers and their compensation (see instructions).				
(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 account, other allowances
DONATO D'ONOFRIO	TRUSTEE	0	0	0
952 LAKEWOOD ROAD TOMS RIVER,NJ 08753	1 00			
PAUL J DALTON	TRUSTEE	0	0	0
124 N MAIN ST FORKED RIVER,NJ 08731	3 00			
LINDA D'ONOFRIO	TRUSTEE	0	0	0
952 LAKEWOOD ROAD TOMS RIVER,NJ 08753	0 25			
2 Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, enter "NONE."				
(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 account, other allowances
NONE				
Total number of other employees paid over \$50,000.				0

Part VIII

Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)

3 Five highest-paid independent contractors for professional services (see instructions). If none, enter "NONE".		
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services. . . . .		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 information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc	Expenses
1	
2	
3	
4	

Part IX-B

Summary of Program-Related Investments (see instructions)

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1	
2	
All other program-related investments. See instructions.	
3	
Total. Add lines 1 through 3. . . . .	



Part X

Minimum Investment Return

(All domestic foundations must complete this part. Foreign foundations, see instructions.)

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc , purposes		
a	Average monthly fair market value of securities. . . . .	1a	942,162
b	Average of monthly cash balances. . . . .	1b	807,502
c	Fair market value of all other assets (see instructions). . . . .	1c	0
d	Total (add lines 1a, b, and c). . . . .	1d	1,749,664
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation). . . . .	1e	
2	Acquisition indebtedness applicable to line 1 assets. . . . .	2	
3	Subtract line 2 from line 1d. . . . .	3	1,749,664
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see instructions). . . . .	4	26,245
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	1,723,419
6	Minimum investment return. Enter 5% of line 5. . . . .	6	86,171

Part XI

Distributable Amount

(see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here ☐ and do not complete this part.)

1	Minimum investment return from Part X, line 6. . . . .	1	86,171
2a	Tax on investment income for 2014 from Part VI, line 5. . . . .	2a	889
b	Income tax for 2014 (This does not include the tax from Part VI ). . . . .	2b	
c	Add lines 2a and 2b. . . . .	2c	889
3	Distributable amount before adjustments Subtract line 2c from line 1. . . . .	3	85,282
4	Recoveries of amounts treated as qualifying distributions. . . . .	4	
5	Add lines 3 and 4. . . . .	5	85,282
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	85,282

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	101,920
b	Program-related investments—total from Part IX-B. . . . .	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc , purposes. . . . .	2	
3	Amounts set aside for specific charitable projects that satisfy the		
a	Suitability test (prior IRS approval required). . . . .	3a	
b	Cash distribution test (attach the required schedule). . . . .	3b	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	101,920
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income Enter 1% of Part I, line 27b (see instructions). . . . .	5	
6	Adjusted qualifying distributions. Subtract line 5 from line 4. . . . .	6	101,920

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

Part XIII

Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2013	(c) 2013	(d) 2014
1 Distributable amount for 2014 from Part XI, line 7				85,282
2 Undistributed income, if any, as of the end of 2014				
a Enter amount for 2013 only. . . . .				
b Total for prior years 20____, 20____, 20____				
3 Excess distributions carryover, if any, to 2014				
a From 2009. . . . .				
b From 2010. . . . .				
c From 2011. . . . .				
d From 2012. . . . .				92,539
e From 2013. . . . .				127,381
f Total of lines 3a through e. . . . .	219,920			
4 Qualifying distributions for 2014 from Part XII, line 4 ▶ \$ _____ 101,920				
a Applied to 2013, but not more than line 2a				
b Applied to undistributed income of prior years (Election required—see instructions). . . . .				
c Treated as distributions out of corpus (Election required—see instructions). . . . .				
d Applied to 2014 distributable amount. . . . .				85,282
e Remaining amount distributed out of corpus	16,638			
5 Excess distributions carryover applied to 2014 (If an amount appears in column (d), the same amount must be shown in column (a).)				
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	236,558			
b Prior years' undistributed income Subtract line 4b from line 2b. . . . .				
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed. . . . .				
d Subtract line 6c from line 6b Taxable amount—see instructions . . . . .				
e Undistributed income for 2013 Subtract line 4a from line 2a Taxable amount—see instructions . . . . .				
f Undistributed income for 2014 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2015 . . . . .				0
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions) . . . . .				
8 Excess distributions carryover from 2009 not applied on line 5 or line 7 (see instructions) . . .				
9 Excess distributions carryover to 2015. Subtract lines 7 and 8 from line 6a . . . . .	236,558			
10 Analysis of line 9				
a Excess from 2010. . . .				
b Excess from 2011. . . .				
c Excess from 2012. . . .				92,539
d Excess from 2013. . . .				127,381
e Excess from 2014. . . .				16,638

Part XIVPrivate Operating Foundations (see instructions and Part VII-A, question 9)

1a

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 organization is a private operating foundation described in section 4942(j)(3) or 4942(j)(5)

☐ 4942(j)(3) or ☐ 4942(j)(5)

2a	Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed . . . . .	Tax year	Prior 3 years			(e) Total
		(a) 2014	(b) 2013	(c) 2012	(d) 2011	
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 . . . . .					
e	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					
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					

Part XVSupplementary Information (Complete this part only if the organization had \$5,000 or more in assets at any time during the year—see instructions.)

1

Information Regarding Foundation Managers:

a

List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000) (See section 507(d)(2) )

DONATO D'ONOFRIO

b

List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest

NONE

2

Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:

Check here ☒ 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

a

The name, address, and telephone number or email address of the person to whom applications should be addressed

b

The form in which applications should be submitted and information and materials they should include

c

Any submission deadlines

d

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

**Part XV**

Supplementary Information (continued)

3 Grants and Contributions Paid During the Year or Approved for Future Payment

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)				
<b>a</b> <i>Paid during the year</i> See Additional Data Table				
<b>Total</b> . . . . .			<b>3a</b>	101,920
<b>b</b> <i>Approved for future payment</i>				
<b>Total</b> . . . . .			<b>3b</b>	

Enter gross amounts unless otherwise indicated

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

Form **990-PF** (2014)

<p><b>d</b> Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?</p>		Yes	No
<b>a</b> Transfers from the reporting foundation to a noncharitable exempt organization of			
<b>(1)</b> Cash.		<b>1a(1)</b>	No
<b>(2)</b> Other assets.		<b>1a(2)</b>	No
<b>b</b> Other transactions			
<b>(1)</b> Sales of assets to a noncharitable exempt organization.		<b>1b(1)</b>	No
<b>(2)</b> Purchases of assets from a noncharitable exempt organization.		<b>1b(2)</b>	No
<b>(3)</b> Rental of facilities, equipment, or other assets.		<b>1b(3)</b>	No
<b>(4)</b> Reimbursement arrangements.		<b>1b(4)</b>	No
<b>(5)</b> Loans or loan guarantees.		<b>1b(5)</b>	No
<b>(6)</b> Performance of services or membership or fundraising solicitations.		<b>1b(6)</b>	No
<b>c</b> Sharing of facilities, equipment, mailing lists, other assets, or paid employees.		<b>1c</b>	No
<p><b>d</b> If the answer to any of the above is "Yes," complete the following schedule. Column <b>(b)</b> should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column <b>(d)</b> the value of the goods, other assets, or services received</p>			


**2a** Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? . . . . . ☐ Yes ☒ No

(a) Name of organization	(b) Type of organization	(c) Description of relationship


May the IRS discuss this return with the preparer shown below  
(see instr )? ☒ Yes ☐ No

Print/Type preparer's name PAUL J DALTON CPA	Preparer's Signature	Date	Check if self-employed <input checked="checked" type="checkbox"/>	PTIN
Firm's name ▶ PAUL J DALTON CPA			Firm's EIN ▶	
Firm's address ▶ 124 NO MAIN ST FORKED RIVER, NJ 08731			Phone no (609) 693-1040	

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment


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)				
<b>a</b> <i>Paid during the year</i>				
ALZHEIMER'S ASSOCIATION 400 MORRIS AVENUE SUITE 251 DENVER, NJ 07834		PUBLICLYSUPPORTED	RESEARCH, AND SUPPORT PROGRAMSPROVIDE AWARENESS EFFORTS, FOR PEOPLE WITH ALZHEIMERS	1,000
				0
BIG BROTHERS BIG SISTERS OF OCEAN COUNTY 20 HADLEY AVENUE TOMS RIVER, NJ 08753		PUBLICLYSUPPORTED	BASED MENTORING PROGRAM FOR SUPPORT THE COMMUNITY CHILDREN FACING ADVERSITY	6,000
				0
BRICK UNICO FOUNDATION INC PO BOX 773 BRICK, NJ 08723		PUBLICLYSUPPORTED	LEONE'S L'AQUILA SUPPORT FOR THE JOE EARTHQUAKE RELIEF FUND	200
				0
CAMP FATIMA OF NEW JERSEY INC PO BOX 654 HARRISON, NJ 07029		PUBLICLYSUPPORTED	OF RECREATIONAL PROGRAMS TO SUPPORTING THE DELIVERY DEVELOPMENTALLY DISABLED INDIVIDUALS	250
				0
CAREGIVER VOLUNTEERS OF CENTRAL JERSEY 253 CHESTNUT STREET TOMS RIVER, NJ 08753		PUBLICLYSUPPORTED	CARE, MEDICAL TRANSPORT AND GROCERY PROVIDE RESPIRE SHOPPING TO THE ELDERLY	1,000
				0
CENTRAL REGIONAL SCHOOL DISTRICT PO BOX C FOREST HILLS PKWY BAYVILLE, NJ 08721		SCHOOL	SCHOLARSHIP 2013/2014 ACADEMIC	1,000
				0
FISHER CENTER FOR ALZHEIMER'S RESEARCH FOUNDATION 199 WATER ST 23RD FLOOR NEW YORK, NY 10036		PVT OP FDN	ALZHEIMER'S SUPPORT FOR RESEARCH	2,500
				0
OCEAN COUNTY COLLEGE FOUNDATION COLLEGE DRIVE PO BOX 2001 TOMS RIVER, NJ 08754		PVT OP FDN	FOR COMMUNITY COLLEGE EDUCATIONAL FUNDING	12,000
<b>Total</b> . . . . .			 <b>3a</b>	101,920

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment


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)				
<b>a</b> Paid during the year				
				0
GIRL SCOUTS OF THE JERSEY SHORE 1405 OLD FREEHOLD ROAD TOMS RIVER,NJ 08753		PUBLICLYSUPPORTED	TRAINING THAT WILL MAKE POSITIVEPROVIDING PROGRAMS, SERVICES ANDIMPACT ON GIRLS AGES 5 TO 17	300
				0
HOPE SHEDS LIGHT INC 247 MAIN STREET TOMS RIVER,NJ 08753		PUBLICLYSUPPORTED	TEACHERS, PARENTS ANDEDUCATE CHILDREN, STUDENTSCOMMUNITY ABOUT SUBSTANCE ABUSE	1,000
				0
INTERFAITH HOSPITALITY NETWORK OF OCEAN COUNTY 253 CHESTNUT STREET TOMS RIVER,NJ 08753		PUBLICLYSUPPORTED	HOMELESS INCLUDING FOOD,ASSISTANCE FOR THESHELTER AND SUPPORT SERVICES	2,500
				0
MONSIGNOR DONOVAN HIGH SCHOOL 711 HOOPER AVENUE TOMS RIVER,NJ 08753		SCHOOL	SCHOLARSHIP AWARDSHIGH SCHOOL 2013/2014	5,000
				0
MONSIGNOR DONOVAN HIGH SCHOOL 711 HOOPER AVENUE TOMS RIVER,NJ 08753		SCHOOL	PROJECTQUAD BEAUTIFICATION	1,000
				0
OCEAN COUNTY HUNGER RELIEF INC 917-5 NORTH MAIN STREET TOMS RIVER,NJ 08753		PUBLICLYSUPPORTED	ASSISTANCE FOR THE NEEDYPROVIDES EMERGENCY FOODPEOPLE OF OCEAN COUNTY	5,000
				0
OCEAN COUNTY LIBRARY FOUNDATION 101 WASHINGTON STREET TOMS RIVER,NJ 08753		PVT OP FDN	PROGRAMS AND RESOURCES OFSUPPORTING MATERIALS,ALL BRANCHES IN THE COUNTY	250
				0
<b>Total . . . . .</b>  <b>3a</b>				101,920



Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

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)				
<b>a</b> Paid during the year				
OPEN ARMS INC 1484 SILVETON ROAD TOMS RIVER,NJ 08755		PUBLICLYSUPPORTED	AND CONTACT OF OCEANSUPPORT FOR HARBOR HOUSEAND MONMOUTH COUNTIES	750
				0
PEOPLE'S PANTRY 1001 FISCHER BOULEVARD TOMS RIVER,NJ 08753		PUBLICLYSUPPORTED	WITH THE FOOD BANK OFHELP DEFRAY COSTS ASSOCIATEDMONMOUTH AND OCEAN COUNTIES	5,000
				0
PREFERRED BEHAVIORAL HEALTH FOUNDATION 1500 ROUTE 88 BRICK,NJ 08724		PULICLYSUPPORTED	AND SUBSTANCE ABUSEPROVIDE MENTAL HEALTHPROGRAMS TO INDIVIDUALS	1,000
				0
ST JOSEPH'S CENTURY CLUB 685 HOOPER AVENUE TOMS RIVER,NJ 08753		SCHOOL	SCHOLARSHIP AWARDSGRADE SCHOOL 2013/2014	500
				0
ST JOSEPH'S ENDOWMENT FUND 685 HOOPER AVENUE TOMS RIVER,NJ 08753		SCHOOL	OF CONTINUEDFINANCIAL SUPPORTEDUCATION	1,500
				0
ST JOSEPH'S GRADE SCHOOL 685 HOOPER AVENUE TOMS RIVER,NJ 08753		SCHOOL	SCHOLARSHIP AWARDSGRADE SCHOOL 2013/2014	4,000
				0
ST JOSEPH'S GRADE SCHOOL - PTA 711 HOOPER AVENUE TOMS RIVER,NJ 08753		SCHOOL	TO ENRICH STUDENTS'PROVIDE MONETARY SUPPORTACADEMIC EXPERIENCE	250
				0
ST JUDE CHILDREN'S RESEARCH HOSPITAL 501 ST JUDE PLACE MEMPHIS,TN 38105		HOSPITAL	CHILDREN WITHRESEARCH AND CARE FORCATASTROPHIC DISEASES	6,750
<b>Total . . . . .</b>  <b>3a</b>				101,920


Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

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)				
<b>a</b> Paid during the year				
				0
THE FOODBANK OF MONMOUTH & OCEAN COUNTIES 3300 ROUTE 66 NEPTUNE,NJ 07753		PUBLICLYSUPPORTED	TO THOUSANDS OFPROVIDE EMERGENCY FOODNEEDY INDIVIDUALS	1,320
				0
THE FRANCES FOUNDATION 8 BRYCE ROAD HOLMDEL,NJ 07733		PUBLICLYSUPPORTED	WITH CANCERSUPPORT FOR CHILDREN	500
				0
THE ITALIAN-AMERICAN CULTURAL SOCIETY PO BOX 1602 TOMS RIVER,NJ 08754		PUBLICLYSUPPORTED	SCHOLARSHIP AWARDS2014 STUDENT	2,000
				0
THE SMILE TRAIN PO BOX 96231 WASHINGTON,DC 20090		PUBLICLYSUPPORTED	SURGERIES TO CHILDRENPROVIDES CLEFT REPAIRALL AROUND THE WORLD	1,000
				0
THE SALVATION ARMY PO BOX 3170 UNION,NJ 07083		RELIGIOUSORG	PREVENTION SERVICESPROVIDING HOMELESSFOR NEEDY FAMILIES	500
				0
TOMS RIVER BOARD OF EDUCATION 1144 HOOPER AVENUE TOMS RIVER,NJ 08753		SCHOOL	2014 SCHOLARSHIPFUND	6,000
				0
THE OCEAN COUNTY YMCA 1088 WEST WHITTY ROAD TOMS RIVER,NJ 08755		PUBLICLYSUPPORTED	ASSISTANCE FOR "Y"FUNDING FOR FINANCIALMEMBERSHIP TO RESIDENTS	1,500
				0
<b>Total . . . . .</b>  <b>3a</b>				101,920

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

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)				
<b>a</b> <i>Paid during the year</i>				
TWENTY-ONE PLUS FOUNDATION INC 252 WASHINGTON STREET TOMS RIVER,NH 08753		PUBLICLYSUPPORTED	QUALITY OF LIFE FORSUPPORT AND ENHANCE THEADULTS WITH DISABILITIES	500
				0
UNITED WAY OF OCEAN COUNTY 1144 HOOPER AVE SUITE 302 TOMS RIVER,NJ 08753		PUBLICLYSUPPORTED	HUMAN CARE PROGRAMS THAT AREFUNDING TO OVER 60 HEALTH ANDPROVIDED BY PARTNER AGENCIES	10,000
				0
COMMUNITY MEDICAL CENTER FOUNDATION 99 HIGHWAY 37 WEST TOMS RIVER,NJ 08755		HOSPITAL	NEUROSCIENCE INSTITUTESUPPORT FOR THE CENTER'SAND CANCER CENTER	2,275
				0
JERSEY SHORE COUNCIL BOY SCOUTS OF AMERICA 1518 RIDGEWAY ROAD TOMS RIVER,NJ 08755		PUBLICLYSUPPORTED	THE BOY SCOUT PROGRAMPROVIDE SUPPORT FORIN OCEAN COUNTY	1,875
				0
YOUR GRANDMOTHER'S CUPBOARD 173A HWY 37 WEST TOMS RIVER,NJ 08755		PUBLICLYSUPPORTED	HYGIENE PRODUCTS TO THEPROVIDE MEALS, CLOTHING ANDNEEDY IN THE SURROUNDING	2,500
			COMMUNITY	0
NEW JERSEY HEROES PO BOX 95 MENDHAM,NJ 07945		PUBLICLYSUPPORTED	TO NON-PROFIT ORGANIZATIONSFUNDING TO BE AWARDEDOF NEW JERSEY	2,500
				0
OCEAN COUNTY FOUNDATION FOR VO-TECH EDUCATION 137 BEA LEA ROAD TOMS RIVER,NJ 08753		PUBLICLYSUPPORTED	SCHOOL STUDENTS WITHSUPPORT VOCATION AND TECHSCHOLARSHIPS AND GRANTS	450
				0
SIMONS'S KITCHEN PO BOX 551 SEASIDE PARK,NJ 08752		PUBLICLYSUPPORTED	TO THOSE IN NEED IN THEPROVIDES HOT MEALSSURROUNDING COMMUNITY	2,500
<b>Total . . . . .</b>			<b>3a</b>	101,920

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

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)				
<b>a</b> Paid during the year				
				0
SOROPTIMIST INTERNATIONAL OF TOMS RIVER PO BOX 4824 TOMS RIVER,NJ 08754		PUBLICCLYSUPPORTED	AND HUMANITARIANFUNDING FOR SCHOLARSHIPSPROJECTS	150
				0
VAN DYKE HOSPICE AT COMMUNITY MEDICAL CENTER 99 ROUTE 37 WEST TOMS RIVER,NJ 08755		HOSPITAL	ACHIEVE THE BEST POSSIBLE QUALITYHELPING PATIENTS AND LOVED ONESOF LIFE WHEN CURE IS NO LONGER EXPECTED	7,000
				0
WOUNDED WARRIOR PROJECT INC 4899 BELFORT ROAD SUITE 300 JACKSONVILLE,FL 32256		PUBLICCLYSUPPORTED	NEEDS OF INJUREDSUPPORTING THESERVICE MEMBERS	500
				0
ASSOCIATED HUMANE SOCIETIES AND POPCORN PARK ZOO PO BOX 1002 FORKED RIVER,NJ 08731		PUBLICCLYSUPPORTED	HOMES FOR UNWANTEDTO CARE FOR AND FINDAND ABUSED ANIMALS	100
<b>Total . . . . .</b>  <b>3a</b>				101,920

<div>Schedule B</div> <div>(Form 990, 990-EZ, or 990-PF)</div> <div>Department of the Treasury Internal Revenue Service</div>	<div>Schedule of Contributors</div> <div>▶ Attach to Form 990, 990-EZ, or 990-PF.</div> <div>▶ Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at <a href="http://www.irs.gov/form990">www.irs.gov/form990</a>.</div>	<div>OMB No 1545-0047</div> <div>2014</div>
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<div>Name of the organization</div> <div>THE D'ONOFRIO FOUNDATION</div>	<div>Employer identification number</div> <div>91-2151046</div>
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Organization type (check one)

<div>Filers of:</div> <div>Form 990 or 990-EZ</div>	<div>Section:</div> <div><div><input type="checkbox"/> 501(c)( ) (enter number) organization</div><div><input type="checkbox"/> 4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private foundation</div><div><input type="checkbox"/> 527 political organization</div></div>
<div>Form 990-PF</div>	<div><div><input checked="" type="checkbox"/> 501(c)(3) exempt private foundation</div><div><input type="checkbox"/> 4947(a)(1) nonexempt charitable trust treated as a private foundation</div><div><input type="checkbox"/> 501(c)(3) taxable private foundation</div></div>

Check if your organization is covered by the **General Rule** or a **Special Rule**.  
**Note.** Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

☒ For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or other property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

- ☐ For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33<sup>1</sup>/<sub>3</sub>% 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 990PF, Part I, line 2, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

**Employer identification number**  
91-2151046

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	DONATO D'ONOFRIO 952 LAKEWOOD ROAD TOMS RIVER, NJ 08753	\$ 49,992	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions )
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions )
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions )
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions )
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions )
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions )
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions )

<b>Name of organization</b> THE D'ONOFRIO FOUNDATION	<b>Employer identification number</b> 91-2151046
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**Part II** **Noncash Property** (see instructions) Use duplicate copies of Part II if additional space is needed

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
_____	_____ _____ _____ _____	_____ \$	_____
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
_____	_____ _____ _____ _____	_____ \$	_____
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
_____	_____ _____ _____ _____	_____ \$	_____
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
_____	_____ _____ _____ _____	_____ \$	_____
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
_____	_____ _____ _____ _____	_____ \$	_____
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
_____	_____ _____ _____ _____	_____ \$	_____

Name of organization THE D'ONOFRIO FOUNDATION	Employer identification number 91-2151046
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Part III

**Exclusively** religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of *exclusively* religious, charitable, etc., contributions of **\$1,000 or less** for the year. (Enter this information once. See instructions.) ▶ \$ \_\_\_\_\_

Use duplicate copies of Part III if additional space is needed.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
—	_____	_____	_____
	_____	_____	_____
	_____	_____	_____
(e) Transfer of gift			
Transferee's name, address, and ZIP 4		Relationship 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) Transfer of gift			
Transferee's name, address, and ZIP 4		Relationship 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) Transfer of gift			
Transferee's name, address, and ZIP 4		Relationship 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) Transfer of gift			
Transferee's name, address, and ZIP 4		Relationship of transferor to transferee	
_____		_____	
_____		_____	
_____		_____	



**TY 2014 All Other Program  
Related Investments Schedule**

**Name:** THE D'ONOFRIO FOUNDATION  
**EIN:** 91-2151046

Category	Amount
N/A	

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

TY 2014 Gain/Loss from Sale of Other Assets Schedule

Name: THE D'ONOFRIO FOUNDATION

EIN: 91-2151046

Name	Date Acquired	How Acquired	Date Sold	Purchaser Name	Gross Sales Price	Basis	Basis Method	Sales Expenses	Total (net)	Accumulated Depreciation
COMMON STOCK, TIME INC (CASH IN LIEU)	2005-12	Donated	2014-06		14	11			3	
COMMON STOCK, RAYONIER ADVANCED MATERIALS INC (CASH IN LIEU)	2005-12	Donated	2014-07		14	3			11	
TIM HORTONS CASH TO BOOT MERGER	2005-12		2014-12		15,169				15,169	
COMMON STOCK, RESTAURANT BRANDS INT'L INC (CASH IN LIEU)	2005-12		2014-12		48	5			43	

**TY 2014 Investments Corporate  
Stock Schedule**

**Name:** THE D'ONOFRIO FOUNDATION  
**EIN:** 91-2151046

Name of Stock	End of Year Book Value	End of Year Fair Market Value
SEE ATTACHED SCHEDULE	586,774	940,443

**TY 2014 Other Decreases Schedule****Name:** THE D'ONOFRIO FOUNDATION**EIN:** 91-2151046

Description	Amount
NONDEDUCTIBLE PORTION OF CONTRIBUTIONS	655
GAIN ON DISPOSAL OF ASSETS - TAX	15,226

TY 2014 Other Expenses Schedule

**Name:** THE D'ONOFRIO FOUNDATION

**EIN:** 91-2151046

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
ANNUAL REGISTRATION FEE	30			

**TY 2014 Other Income Schedule**

**Name:** THE D'ONOFRIO FOUNDATION

**EIN:** 91-2151046

Description	Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income
CAPITAL GAINS DISTRIBUTIONS	644	644	
NONDIVIDEND DISTRIBUTIONS	169		

## TY 2014 Other Increases Schedule

**Name:** THE D'ONOFRIO FOUNDATION

**EIN:** 91-2151046

Description	Amount
GAIN ON DISPOSAL OF ASSETS - BOOK	15,216

**TY 2014 Taxes Schedule****Name:** THE D'ONOFRIO FOUNDATION**EIN:** 91-2151046

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
FOREIGN TAX	3,038			
FEDERAL EXCISE TAX	515			



**The D'Onofrio Foundation**  
**Attachment to Form 990-PF, Page 2, Part II, Line 10b**  
**December 31, 2014**  
**EIN: 91-2151046**

**Investments - Corporate Stock:**

<b><u>SECURITIES</u></b>	<b><u>Shares</u></b>	<b><u>Book Value</u></b>	<b><u>Fair Market Value</u></b>
AMERICAN EXPRESS CO	200	10,292	18,608
ASCENA RETAIL GROUP INC	188	5,642	2,361
BANK OF AMERICA CORP	332	15,322	5,939
BHP BILLITON LTD ADR	100	3,342	4,732
COCA COLA INC	1,200	24,186	50,664
COMCAST CORP NEW CL A	48	829	2,784
CONMED CORP	200	4,732	8,992
ELI LILLY & CO	100	5,659	6,899
EXXON MOBIL CORP	600	33,702	55,470
HEWLETT-PACKARD CO DEL	600	17,178	24,078
INTUIT INC	200	5,330	18,438
L-3 COMMUNICATIONS HLDGS INC	100	7,265	12,621
LOWES COMPANIES	400	13,332	27,520
MICROSOFT CORP	200	5,230	9,290
RAYONIER ADVANCED MATERIALS INC	133	2,828	2,966
RAYONIER INC	400	7,804	11,176
RAYTHEON CO COM NEW	100	4,015	10,817
RESTAURANT BRANDS INTL	216	5,739	8,433
RITE AID CORP	3,000	10,440	22,560
SERVICE CORP INTL	600	4,908	13,620
SUN BANCORP INC	1,200	22,785	23,280
TIME INC	16	191	394
TIME WARNER CABLE INC	33	1,729	5,018
TIME WARNER INC SHS	133	4,704	11,361
TORONTO DOMINION BK ONT	12,000	362,847	573,360
WENDY'S ARBYS GROUP INC	850	5,276	7,676
XEROX CORP	100	1,465	1,386
		<u>586,774</u>	<u>940,443</u>