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Department of the Treasury

Internal Revenue Service

DLN: 93491240002015

OMB No 1545-0052

2014

Open to Public Inspection

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

Do not enter social security numbers on this form as it may be made public.
 Information about Form 990-PF and its instructions is at www.irs.gov/form990pf.

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For	cale	endar year 2014, or tax ye	nd ending 04-30-2015						
		undation MILY FOUNDATION INC	A Employer id	Employer identification number					
						22-3188305			
	ANN O	STER d street (or P O box number if mail is not	t delivered to street address) Room/suite		B Telephone ու	ımber (see ınstructioi	าร)	
	9 SYLVA Ite	AN AVENÙE				(201) 567-0070)		
		n, state or province, country, and ZIP or f D, NJ 07632	oreign postal code			C If exemption application is pending, check here ▶			
-	nack a	ıll that apply	Tinitial return of a	former public charity	,	D 1 Foreign o	rganizations, check h		
u c.	icck a	Final return	A mended return	Torriter public ename	,		rganizations, check in	•	
		Address change	e Name change			test, chec	k here and attach co	mputation	
_		ype of organization 🔽 Section 5					undation status was t n 507(b)(1)(A), chec		
		n 4947(a)(1) nonexempt charitabl				4			
		ket value of all assets at end from Part II, col. (c),	Accounting method Other (specify)	Cash Acci	rual		ation is in a 60-mont n 507(b)(1)(B), cheo		
		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	(Part I, column (d) must	be on cash basis.)					
Pa	rt I	Analysis of Revenue an total of amounts in columns (b), (c), necessarily equal the amounts in columnstructions))	and (d) may not	(a) Revenue and expenses per books	(b)	Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)	
	1	Contributions, gifts, grants, etc.,	, received (attach						
		schedule)		40,000					
	2	Check ► ☐ If the foundation is r	not required to attach						
	3	Interest on savings and tempora	ary cash investments	119,679		119,679			
	4	Dividends and interest from seco	urities	82		82			
	5a	Gross rents							
	ь	Net rental income or (loss)							
Reveilue	6a	Net gain or (loss) from sale of as	ssets not on line 10	-101,143					
	ь	Gross sales price for all assets of 3,888,640	on line 6a						
	7	Capital gain net income (from Pa	art IV, line 2)			0			
	8	Net short-term capital gain .							
	9	Income modifications							
	10a	Gross sales less returns and							
	Ь	allowances Less Cost of goods sold							
	_ c	Gross profit or (loss) (attach sch							
	11	Other income (attach schedule)							
	12	Total. Add lines 1 through 11		58,618		119,761			
	13	Compensation of officers, directo	ors, trustees, etc	0					
	14	Other employee salaries and wa	ges						
Ses.	15	Pension plans, employee benefit	:s						
Expense	16a	Legal fees (attach schedule).							
Ä	b	Accounting fees (attach schedul	-						
<u>.</u>	_ c	Other professional fees (attach s		20					
ati	17	Interest	-	6,070					
돌	18 19	Taxes (attach schedule) (see ins Depreciation (attach schedule) a		0,070					
뒫	20	Occupancy	•						
Administrative	21	Travel, conferences, and meeting							
and	22	Printing and publications							
	23	Other expenses (attach schedul	e)	% 15,215		14,667			
Operating	24	Total operating and administrati	ive expenses.						
φ Ta		Add lines 13 through 23		21,305		14,667		0	
ರೆ	25	Contributions, gifts, grants paid	[494,660				494,660	
	26	Total expenses and disbursemen	its. Add lines 24 and	F1F 06F		14.667		404.653	
	27	Subtract line 26 from line 12		515,965		14,667		494,660	
	a	Excess of revenue over expenses	s and disbursements	-457,347					
	Ь	Net investment income (if negat	 	,		105,094			
	c	Adjusted net income (if negative	e, enter -0 -)						

Pa	rt II	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash—non-interest-bearing	53,619	142,321	· · ·
	2	Savings and temporary cash investments	95,650		
	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			
_		Inventories for sale or use			
sets S	8	—			
w.	9	Prepaid expenses and deferred charges	3,659,676	65-1 2.003.E12	3,914,365
⋖	10a	Investments—U S and state government obligations (attach schedule)	3,039,070	3,902,513	3,914,303
	b	Investments—corporate stock (attach schedule)	2 504 700	65 1 777 206	1 754 207
	C	Investments—corporate bonds (attach schedule)	2,504,799	1,777,386	1,754,397
	11	Investments—land, buildings, and equipment basis			
		Less accumulated depreciation (attach schedule)			
	12	Investments—mortgage loans			
	13	Investments—other (attach schedule)	211,622	% 3	0
	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)	6,525,366	6,068,019	6,056,882
	17	Accounts payable and accrued expenses			
	18	Grants payable			
abilities	19	Deferred revenue			
<u>=</u>	20	Loans from officers, directors, trustees, and other disqualified persons			
<u>ක</u> 	21	Mortgages and other notes payable (attach schedule)			
	22	Other liabilities (describe)			
	23	Total liabilities (add lines 17 through 22)		0	
J.		Foundations that follow SFAS 117, check here 🕨 🦵			
Ф		and complete lines 24 through 26 and lines 30 and 31.			
Balance	24	Unrestricted			
ä	25	Temporarily restricted			
돧	26	Permanently restricted			
Fund		Foundations that do not follow SFAS 117, check here 🕨 🔽			
ŏ		and complete lines 27 through 31.			
	27	Capital stock, trust principal, or current funds			
Assets	28	Paid-in or capital surplus, or land, bldg , and equipment fund			
	29	Retained earnings, accumulated income, endowment, or other funds	6,525,366	6,068,019	
₹	30	Total net assets or fund balances (see instructions)	6,525,366	6,068,019	
_	31	Total liabilities and net assets/fund balances (see instructions)	6,525,366	6,068,019	
Pa	rt II	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 a	gree	
		with end-of-year figure reported on prior year's return)		1	6,525,366
2		Enter amount from Part I, line 27a		2	-457,347
3		Other increases not included in line 2 (itemize)		3	
4		Add lines 1, 2, and 3		4	6,068,019
5		Decreases not included in line 2 (itemize)		5	· · · · · ·
6		Total net assets or fund balances at end of year (line 4 minus line 5)—Pa		ne 30 . 6	6,068,019
_					

00-PF (2014)	-d	- for Toy on Toy	street Trees	•		Page
V Capital Gains a						
• •			•	P—Purchase D—Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
See Additional Data Ta	ıble					
) Gross sales price	(1 10			or (loss)) minus (g)
See Additional Data Ta	ble	•	·	•		
mnlete only for accets ch	Owing dain	in column (h) and owns	ad by the foundation	n on 12/31/69	(I) Counc (Col	(h) gain minus
	- Jane					
FM V as of 12/31/69		as of 12/31/69	, , ,	` '		om col (h))
See Additional Data Ta	ble					
		ſ	If dain also enter	ın Part I line 7 Ì		
Capital gain net income	e or (net ca	pital loss)			2	-101,143
Net short-term capital	gaın or (los	s) as defined in sectio	ns 1222(5) and (6)		
If gain, also enter in Pa in Part I, line 8 .	rt I , line 8 ,	column (c) (see instru	ıctıons) If(loss), e	nter-0-	3	
V Qualification Ur	der Sect	ion 4940(e) for R	Reduced Tax or	n Net Investme		
		itions subject to the se	ection 4940(a) tax	on net investment	ıncome)	
on 4940(d)(2) applies, lea	ave this pai	•	ection 4940(a) tax	on net investment	income)	
on 4940(d)(2) applies, lead foundation liable for the " the foundation does not	section 494	t blank 12 tax on the distribut	able amount of any	year in the base p	·	┌ Yes ┌ No
	section 494 qualify und	t blank 12 tax on the distribut er section 4940(e) D	able amount of any o not complete this	year in the base pos part	eriod?	「Yes ▽ No
foundation liable for the " the foundation does not er the appropriate amour	section 494 qualify und	t blank 12 tax on the distribut er section 4940(e) Dolumn for each year, s	able amount of any o not complete this ee instructions befi I	year in the base postering part or any ent	eriod? ries	Γ Yes Γ No
foundation liable for the " the foundation does not ter the appropriate amour (a) penod years Calendar	section 494 qualify und it in each c	t blank 12 tax on the distribut er section 4940(e) D	able amount of any o not complete this	year in the base post part ore making any ent	eriod? ries (d) Distributioi	n ratio
foundation liable for the " the foundation does not er the appropriate amour (a) period years Calendar or tax year beginning in)	section 494 qualify und it in each c	t blank 12 tax on the distribut er section 4940(e) D blumn for each year, s (b) ualifying distributions	able amount of any o not complete this ee instructions bef	year in the base post part ore making any ent intable-use assets	eriod? ries (d)	n ratio by col (c))
foundation liable for the "the foundation does not er the appropriate amour (a) period years Calendar or tax year beginning in) 2013	section 494 qualify und it in each c	t blank 12 tax on the distribut er section 4940(e) Dolumn for each year, s (b) the section distributions the section 441,740	able amount of any o not complete this ee instructions bef	year in the base posts part ore making any ent initiable-use assets 6,510,535	eriod? ries (d) Distributioi	n ratio by col (c)) 0 06785
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foundation liable for the "the foundation does not ter the appropriate amour (a) period years Calendar or tax year beginning in) 2013 2012 2011 2010	section 494 qualify und it in each co Adjusted q	t blank 12 tax on the distributer section 4940(e) Dolumn for each year, s (b) ualifying distributions 441,740 482,321 324,316 503,079 466,869	able amount of any o not complete this ee instructions before the Net value of noncha	year in the base posts part ore making any ent oritable-use assets 6,510,535 6,889,641 7,203,863 7,375,149 7,468,998	eriod? ries (d) Distributior (col (b) divided	n ratio by col (c)) 0 06785 0 070007 0 04502 0 068213 0 062508
retal of line 1, column	Adjusted q	t blank 12 tax on the distributer section 4940(e) Dolumn for each year, s (b) ualifying distributions 441,740 482,321 324,316 503,079 466,869	able amount of any o not complete this ee instructions before the Net value of nonchales the control of the con	year in the base posts part ore making any ent oritable-use assets 6,510,535 6,889,641 7,203,863 7,375,149 7,468,998	eriod? ries (d) Distributior (col (b) divided	n ratio by col (c)) 0 06785 0 070007 0 04502 0 068213 0 062508 0 313598
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	2-story brick warehous See Additional Data Ta 2) Gross sales price See Additional Data Ta mplete only for assets sh FM V as of 12/31/69 See Additional Data Ta Capital gain net income Net short-term capital If gain, also enter in Pa in Part I, line 8	2-story brick warehouse, or com See Additional Data Table 3 Gross sales price See Additional Data Table mplete only for assets showing gain FM V as of 12/31/69 See Additional Data Table Capital gain net income or (net call Net short-term capital gain or (los If gain, also enter in Part I, line 8, in Part I, line 8 Qualification Under Sect	2-story brick warehouse, or common stock, 200 shs M See Additional Data Table (f) Depreciation allower (or allowable) See Additional Data Table mplete only for assets showing gain in column (h) and owner (j) Adjusted basis as of 12/31/69 See Additional Data Table Capital gain net income or (net capital loss) Net short-term capital gain or (loss) as defined in section of the part I, line 8, column (c) (see instruin Part I, line 8, column	(f) Depreciation allowed (g) Cosplus estate (or allowable) See Additional Data Table mplete only for assets showing gain in column (h) and owned by the foundation (k) Exasset (k) Exass	2-story brick warehouse, or common stock, 200 shs MLC Co) See Additional Data Table (f) Depreciation allowed (or allowable) See Additional Data Table See Additional Data Table (or allowable) Miles and describe the kind(s) or property sold (e.g., real estate, D—Donation (g) Cost or other basis plus expense of sale See Additional Data Table (or allowable) Miles and describe the kind(s) or property sold (e.g., real estate, D—Donation (g) Cost or other basis plus expense of sale (g) Cost or other basis plus expense of sale (k) Excess of col (i) over col (j), if any See Additional Data Table 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 If (loss), enter -0 - in Part I, line 7 If gain, also enter in Part I, line 7 If (loss), enter -0 - In Part I, line 7 If gain, also enter in Part I, line 7 If gain, also enter in Part I, line 7 If gain, also enter in Part I, line 7 If gain, also enter in Part I, line 7 If gain, also enter in Part I, line 7 If gain, also enter in Part I, line 7 If gain, also enter in Part I, line 7 If gain, also enter in Part I, line 7 If gain, also enter in Part I, line 8, column (c) (see instructions) If (loss), enter -0 - If gain, also enter in Part I, line 8, column (c) (see instructions) If (loss), enter -0 - If gain, also enter in Part I, line 8, column (c) (see instructions) If (loss), enter -0 - If gain, also enter in Part I, line 8, column (c) (see instructions) If (loss), enter -0 - If gain, also enter in Part I, line 8, column (c) (see instructions) If (loss), enter -0 - If gain, also enter in Part I, line 8, column (c) (see instructions) If (loss), enter -0 - If gain, also enter in Part I, line 8, column (c) (see instructions) If (loss), enter -0 - If gain, also enter in Part I, line 8, column (c) (see instructions) If (loss), enter -0 - If gain, also enter in Part I, line 8, column (c) (see instructions) If (loss), enter -0 - If gain, also enter in Part I, line 8, column (c) (see instructions)	2-story brick warehouse, or common stock, 200 shs MLC Co) See Additional Data Table (f) Depreciation allowed (g) Cost or other basis plus expense of sale (e) plus (f) See Additional Data Table See Additional Data Table (i) Adjusted basis as of 12/31/69 (j) Adjusted basis as of 12/31/69 (vercol (j), if any) See Additional Data Table Capital gain net income or (net capital loss) 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 in Part I, line 8, column (c) (see instructions) If (loss), enter -0- in Part I, line 8 in Part I I, line 8 in Part I I I

Form	990-PF (2014)		Р	age 4
Par	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see page 18 of the ins	tructio	ns)	
1a	Exempt operating foundations described in section 4940(d)(2), check here Frand enter "N/A"			
	on line 1			
	Date of ruling or determination letter(attach copy of letter if necessary-see instructions)			
ь	Domestic foundations that meet the section 4940(e) requirements in Part V, check		:	1,051
	here Fand 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, col (b)			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)			
3	Add lines 1 and 2			1,051
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others		·	
•	enter -0-)			
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0		:	1,051
6	Credits/Payments			
а	2014 estimated tax payments and 2013 overpayment credited to 2014 6a			
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			0
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached.			23
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed			1,074
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid b 10			
11	Enter the amount of line 10 to be Credited to 2015 estimated tax Refunded 11			
Par	t VII-A Statements Regarding Activities			
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did		Yes	No
	ıt partıcıpate or intervene in any political campaign? 🕏	. 1a		No
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions			
	for definition)?	1b		No
	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.			
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 \$ (2) On foundation managers \$			
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed			
	on foundation managers 🕨 \$			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	. 2		No
	If "Yes," attach a detailed description of the activities.			
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 changes 🗗	. з		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?	. 5		No
	If "Yes," attach the statement required by General Instruction T.			
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either			
	By language in the governing instrument, or			
	• By state legislation that effectively amends the governing instrument so that no mandatory directions			
	that conflict with the state law remain in the governing instrument?	. 6		No
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c),			
	and Part XV.	. 7	Yes	
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)			
	► 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? If "No," attach explanation .	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)?			
	If "Yes," complete Part XIV	. 9		No
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names			
	and addresses.	. 10		No

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 ► <u>N/A</u>			
14	The books are in care of ►ANN OSTER Telephone no ►(201)	567-	0070	
	Located at ►429 SYLVAN AVENUE ENGLEWOOD CLIFFS NJ ZIP+4 ►07632			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 —Check here		1	▶ ┌
	and enter the amount of tax-exempt interest received or accrued during the year	-		,
16	- · · · · · · · · · · · · · · · · · · ·		v	
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?	16	Yes	No No
	See instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial	10		140
	Accounts (FBAR) If "Yes", enter the name of the foreign country			
Do	rt VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
Pal	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1-2	During the year did the foundation (either directly or indirectly)		163	110
14	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
	a disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes V No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available			
	for the benefit or use of a disqualified person)?			
	(6) A gree 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)?	1b		
	Organizations relying on a current notice regarding disaster assistance check here			
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?	1 c		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))			
а	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			
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			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at			
	any time during the year?			
b	If "Yes," did it have excess business holdings in 2014 as a result of (1) any purchase by the foundation			
	or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved			
	by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3)			
	the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine			
_	If the foundation had excess business holdings in 2014.).	3b		
4a	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			ļ <u>.</u> .
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2014?	4b	ı l	No

Da	rt VII-R	Statements Rega	rdir	a Activities for	· \A/k	ich Form 4720	May R	a Dequired (cont	inuo	d)	r age c	
5a		year did the foundation				IICII FOI III 4720	мау Б	e kequireu (cont	mue	<i>u)</i> ∐	1	
Ja	_	on propaganda, or othe		•		islation (soction 49	4 F (a)\\2	Г Yes Г	- No			
		nce the outcome of any		•	_	•) 1es •	140			
			-	•	-	* *	-	□ v □	7 No			
		ectly or indirectly, any					• •	Yes √				
		le a grant to an individu							NO			
		le a grant to an organiza							-			
		tion 4945(d)(4)(A)? (s						Yes	NO			
		le for any purpose other							.			
		tional purposes, or for t										
b		wer is "Yes" to 5a(1)-										
		ns section 53 4945 or						_	_	5b		
	=	ions relying on a currer										
С		wer is "Yes" to question							_			
		se it maintained expend						Yes	No			
		ttach the statement requ										
6a	Did the fo	undation, during the yea	ar, re	ceive any funds, dire	ectly	or indirectly, to pay	premiui					
	•	l benefit contract?						·				
b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contr								efit contract?		6b	No	
	If "Yes" to	6b, file Form 8870.										
7a	At any tım	ne during the tax year, v	vas tl	ne foundation a part	y to a	a prohibited tax shel	lter trans	saction? TYes F	No			
b	If yes, dıd	the foundation receive	any	proceeds or have an	ıy ne	t income attributable	e to the	transaction?		7b		
	\ \ /TTT	Information Abou	t Of	ficers, Directors	s, T	rustees, Founda	ation M	lanagers, Highly	Paid	Emp	loyees,	
		and Contractors										
_1	List all off	icers, directors, trustee	_				1					
	(a) Nar	ne and address	(b)	Title, and average hours per week		c) Compensation If not paid, enter		Contributions to oyee benefit plans	(e) E	Expens	e account,	
	(a) Nai	ne and address	de	evoted to position	l `	-0-)		ferred compensation	ot	wances		
ANN	OSTER		PRE	SIDENT		0		. 0			0	
429	SYLVAN A	VENUE	5 0									
ENG	SLEWOOD, I	NJ 07632										
AVI C	STER		VIC	E PRESIDENT		0 0			0			
	SYLVAN A		0									
	SLEWOOD, I	NJ 07632										
	OSTER		VIC	E PRESIDENT		0		0			0	
	SYLVANA		ا									
	SLEWOOD, I					- (NONE "		
	Compensat	ion of five highest-paid	ı emp	loyees (other than	tnos	e inciuaea on iine 1-		d) Contributions to	nter i	NONE."		
(a) Name and	address of each emplo	yee	(b) Title, and aver				employee benefit	(e) E	Expens	e account,	
•		nore than \$50,000	,	hours per week devoted to positi		(c) Compensation	on	plans and deferred			wances	
				uevoteu to positi	<u> </u>			compensation				
				1								
							- 					
				1								
							- 					
				1								
	l number cf	other employees hald		<u> </u>		<u> </u>		<u> </u>				
I OT 2	II NIIMNAR At	THE REMOVED DAILY	IVET	ちつし しししこ								

Information About Officers, Directors, Truste	es, Foundation Managers, Hi	ghly Paid Employees,
and Contractors (continued) 3 Five highest-paid independent contractors for professional services (see instructions). If none, enter "NON	 VE".
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
Total number of others receiving over \$50,000 for professional services.		•
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include rele		r of Expenses
organizations and other beneficiaries served, conferences convened, research papers produ	ced, etc	
2		
3		
4		
Part IX-B Summary of Program-Related Investments (
Describe the two largest program-related investments made by the foundation during t	ne tax year on lines 1 and 2	A mount
<u>-</u>		
2		
All other program-related investments See instructions 3		
<u> </u>		
Total. Add lines 1 through 3		▶

Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations. see instructions.) Fair market value of assets not used (or held for use) directly in carrying out charitable, etc. 1 purposes 1a 6.028.544 1h 184.549 1c 1d 6.213.093 Reduction claimed for blockage or other factors reported on lines 1a and 1e 2 2 3 3 Subtract line 2 from line 1d. 6.213.093 Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see 4 93.196 Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V. line 4. 5 6.119.897 5 305.995 **Distributable Amount** (see instructions) (Section 4942(1)(3) and (1)(5) private operating foundations and Part XT certain foreign organizations check here $\blacktriangleright \Gamma$ and do not complete this part.) 305.995 1 Tax on investment income for 2014 from Part VI, line 5. 1.051 2a Income tax for 2014 (This does not include the tax from Part VI). . . Add lines 2a and 2b. 1.051 2c 3 304.944 3 4 4 5 5 304.944 Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1. . . 7 304.944 7 Part XIII Oualifying Distributions (see instructions) Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes 1 Expenses, contributions, gifts, etc —total from Part I, column (d), line 26. 1a 494,660 1b 0 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc. 2 2 Ω 3 Amounts set aside for specific charitable projects that satisfy the O За O 3b 4 Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4 494,660 4 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment 1,051 493,609 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

For	m 990-PF (2014)				Page 9
P	art XIII Undistributed Income (see instr	uctions)			
		(a) Corpus	(b) Years prior to 2013	(c) 2013	(d) 2014
1	Distributable amount for 2014 from Part XI, line 7	00.1500			304,944
	Undistributed income, if any, as of the end of 2014				
a	Enter amount for 2013 only				
b					
3	Excess distributions carryover, if any, to 2014				
a	From 2009 95,248				
b	From 2010				
c	From 2011	1			
d	From 2012 141,148	1			
e	From 2013				
f	Total of lines 3a through e	493,318			
4	Qualifying distributions for 2014 from Part				
	XII, line 4 🕨 \$ 494,660				
а	Applied to 2013, but not more than line 2a				
	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				304,944
е	Remaining amount distributed out of corpus	189,716			
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:				
а	Corpus Add lines 3f, 4c, and 4e Subtract line 5	683,034			
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				
е	Undistributed income for 2013 Subtract line				
	4a from line 2a Taxable amount—see				
_	instructions				
f	Undistributed income for 2014 Subtract lines 4d and 5 from line 1 This amount must				
	be distributed in 2015				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	95,248			
_	applied on line 5 or line 7 (see instructions)	33,210			
9	Excess distributions carryover to 2015. Subtract lines 7 and 8 from line 6a	587,786			
10	Analysis of line 9	111,100			
	Excess from 2010				
a b		1			
_	Excess from 2012	1			
d					
	Excess from 2014				

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

3 Grants and Contributions Paid		proved for F	uture Payment	
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	A mount
Name and address (home or business)	or substantial contributor	recipient	Contribution	
a Paid during the year See Additional Data Table	or substantial contributor	recipient		
Total		<u> </u>		494,660

Form 990-P		na Activitio				Page 12
	Analysis of Income-Produci		usiness income	Excluded by section	n 512, 513, or 514	(e)
	service revenue	(a) Business code	(b) A mount	(c) Exclusion code	(d) A mount	Related or exempt function income (See instructions)
с						
е						
g Fees a 2 Member 3 Interes	and contracts from government agencies rship dues and assessmentston savings and temporary cash nents				140.670	
4 Dividen	ds and interest from securities			14	119,679 82	
a Debt-1	tal income or (loss) from real estate financed property					
6 Netren	ebt-financed property					
8 Gain or	ovestment income			18	-101,143	
9 Netinco	ome or (loss) from special events			10	101,143	
11 Other re	erofit or (loss) from sales of inventory evenue a					
с						
e						
13 Total. A	I Add columns (b), (d), and (e)				18,618 L 3	18,618
	orksheet in line 13 instructions to verify ca -B Relationship of Activities to		plishment of E	xempt Purpos	es	
Line No. ▼	Explain below how each activity for whic the accomplishment of the foundation's instructions)					

Part 2	KVII	Information Re Noncharitable					actio	ns and I	Relationships	With			<u> </u>
		ganization directly or ii	ndırectly	engage	ın any of	the following witl						Yes	No
orga	nızatı	ons?											
a Tran	sfers	from the reporting four	ndation to	a nonc	harıtable	exempt organıza	tıon of						
										l l	1a(1)		No
(2)	Othe	assets									1a(2)		No
b Othe	r trar	sactions											
		of assets to a noncha		•	-					H	1b(1)		No
		ases of assets from a								ŀ			No
		ıl of facılıtıes, equipme								l l	1b(3)		No
		oursement arrangemen								l l	1b(4)		No
		s or loan guarantees.								- F	1b(5)		No
(6) Performance of services or membership or fundraising solicitations											1b(6)		No
	-	facılıtıes, equipment, i	-	•						L	1c		No
of the	e goo y trai	wer to any of the above ds, other assets, or se nsaction or sharing arr	rvices giv angement	en by t , show	he reporti in column	ng foundation If (d) the value of	the foo the go	undation r ods, other	eceived less that assets, or servi	n fair marke ces receive	t value d		
(a) Line I	10	(b) Amount involved	(c) Name	of nonch	naritable exe	empt organization	(d)	Description	of transfers, transac	tions, and shar	ng arra	ngemer	nts
	+												
-													
	_												
	-												
	+												
desc	rıbed	ndation directly or indii in section 501(c) of the complete the following of (a) Name of organization	ne Code (d schedule		an sectio		n secti			•••• ption of relatio	. □Ye	s F	No
								- 					
Sign	the l		and belief,	ıt ıs tru	ie, correc	ave examined this return, including accompanying schedules and state, correct, and complete Declaration of preparer (other than taxpayer) adge						sed on	all
Here	,	*****				2015-08-31	_ k	*****		May the interpretation in the second			
	7	Signature of officer or t	rustee			Date		Title		below (see insti	•' •		
		Print/Type preparer's STUART KOTLER	name	Prepa	rer's Sıgn	ature	Date		Check if self- employed ►	PTIN PO	05085	33	
Paid Prepa	rer	Firm's name ► Berdon LLP		I			ı		Firm's EIN ►				
Use	ŀ	Fırm's address ▶											
Only		360 Madison Ave Ne	ew York, N	IY 100	17				Phone no (212	2)832-040	0		
	- 1												

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d

(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)
200,000 BP CAP MKTS PLC GTD SR 3 625% DUE 5/8/14		2011-08-23	2014-05-08
250,000 PNC FDG CORP 3% DUE 5/19/2014		2011-02-25	2014-05-19
3,129 62 UBS BARCLY COML MTG TR SER 2012 0 672% DUE 12/1/2045		2012-12-06	2014-05-12
200,000 ACE INA HLDG INC GTD SR NT 5 875% DUE 6/15/2014		2011-02-28	2014-06-15
2,864 81 UBS BARCLY COML MTG TR SER 2012 0 672% DUE 12/1/2045		2012-12-06	2014-06-12
3,153 17 UBS BARCLY COML MTG TR SER 2012 0 672% DUE 12/1/2045		2012-12-06	2014-07-11
250,000 BLACKROCK INC NT 3 5% DUE 12/10/2014		2011-08-24	2014-08-07
2,889 24 UBS BARCLY COML MTG TR SER 2012 0 672% DUE 12/1/2045		2012-12-06	2014-08-12
2,900 97 UBS BARCLY COML MTG TR SER 2012 0 672% DUE 12/1/2045		2012-12-06	2014-09-12
3,188 31 UBS BARCLY COML MTG TR SER 2012 0 672% DUE 12/1/2045		2012-12-06	2014-10-10

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h

(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)
200,000		211,622	-11,622
250,000		257,298	-7,298
3,130		3,130	
200,000		223,528	-23,528
2,865		2,865	
3,153		3,153	
252,623		266,908	-14,285
2,889		2,889	
2,901		2,901	
3,188		3,188	

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - I

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			
(j) Adjusted basis as of 12/31/69	(k) Excess of col (ı) over col (j), ıf any	col (k), but not less than -0-) or Losses (from col (h))	
		-11,622	
		-7,298	
		-23,528	
		-14,285	
	(j) Adjusted basis	(j) Adjusted basis (k) Excess of col (i)	

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d

(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)
500,000 US TREASURY NOTE 0 25% DUE 12/15/2015		2013-02-05	2014-10-15
550,000 US TREASURY NOTE 0 25% DUE 9/30/2015			2014-10-16
3,276 59 UBS BARCLY COML MTG TR SER 2012 0 672% DUE 12/1/2045		2012-12-06	2014-11-13
3,865 87 UBS BARCLY COML MTG TR SER 2012 0 672% DUE 12/1/2045		2012-12-06	2014-12-12
100,000 US TREASURY NOTE 0 25% DUE 9/30/2015		2014-01-16	2014-12-23
3,538 55 UBS BARCLY COML MTG TR SER 2012 0 672% DUE 12/1/2045		2012-12-06	2015-01-12
550,000 US TREASURY NOTE 0 25% DUE 12/15/2015		2013-02-05	2015-01-22
3,552 95 UBS BARCLY COML MTG TR SER 2012 0 672% DUE 12/1/2045		2012-12-06	2015-02-12
4,592 23 UBS BARCLY COML MTG TR SER 2012 0 672% DUE 12/1/2045		2012-12-06	2015-03-12
1,000,000 US TREASURY NOTE 3 125% DUE 1/31/2017		2014-10-15	2015-03-18

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h

(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)
499,543		498,105	1,438
550,747		549,781	966
3,277		3,277	
3,866		3,866	
99,941		99,914	27
3,539		3,539	
548,958		547,916	1,042
3,553		3,553	
4,592		4,592	
1,046,289		1,080,030	-33,741

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - I

Complete only for assets showing	(I) Gains (Col (h) gain minus			
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (ı) over col (ʒ), ıf any	col (k), but not less than -0-) c Losses (from col (h))	
			1,438	
			966	
			27	
			1,042	
			-33,741	

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d

<u>-</u>			
(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)
3,586 12 UBS BARCLY COML MTG TR SER 2012 0 672% DUE 12/1/2045		2012-12-06	2015-04-10
200,000 WELLS FARGO CO MTN NT 3 625% DUE 4/15/2015		2012-08-06	2015-04-15

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h

(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)
3,586		3,586	
200,000		214,142	-14,142

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - I

Complete only for assets show	(I) Gains (Col (h) gain minus		
(i) F M V as of 12/31/69	(j) Adjusted basıs as of 12/31/69	(k) Excess of col (ı) over col (j), ıf any	col (k), but not less than -0-) or Losses (from col (h))
			-14,142

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	Foundation status of recipient	Purpose of grant or contribution	A mount
Name and address (home or business)	or substantial contributor	recipient		
a Paid during the year				
A HOLE IN THE WALL GANG CAMP 555 LONG WHARF DRIVE NEW HAVEN,CT 06511	NONE		GENERAL	50,000
AMERICAN CANCER SOCIETY 132 W 32ND STREET NEW YORK,NY 10001	NONE		GENERAL	500
AMERICAN COMMITTEE FOR SHAARE ZEDEK 55 W 39TH STREET 4	NONE		GENERAL	10,000
NEW YORK, NY 10018				
AMERICAN FRIENDS OF JORDAN RIVER VALLEY CAMP 244 MADISON AVENUE SUITE 482 NEW YORK,NY 10016	NONE		GENERAL	10,000
THE ARNOLD P GOLD FOUNDATION 619 EAST PALISADE AVENUE 5 ENGLEWOOD CLIFFS,NJ 07632	NONE		GENERAL	20,000
CCFA (CROHN'S & COLITIS FOUNDATION) 733 3RD AVENUE 510 NEW YORK, NY 10017	NONE		GENERAL	1,000
CONGREGATION GESHER SHALOM 1449 ANDERSON AVE FORT LEE,NJ 07024	NONE		GENERAL	3,190
FIDF (FRIENDS OF THE ISRAEL DEFENSE FORCES) 1430 BROADWAY NEW YORK,NY 10118	NONE		GENERAL	40,850
GEDENK MOVEMENT INC 429 SYLVAN AVENUE ENGLEWOOD AVENUE,NJ 07632	NONE		GENERAL	95,000
JCC IN THE PALISADES 411 EAST CLINTON AVENUE TENAFLY,NJ 07670	NONE		GENERAL	18,070
JEWISH HOME FOUNDATION 10 LINK DRIVE ROCKLEIGH,NJ 07647	NONE		GENERAL	1,800
MUSEUM OF JEWISH HERITAGE 36 BATTERY PLACE NEW YORK, NY 10280	NONE		GENERAL	171,250
NATIONAL YIDDISH THEATRE 90 JOHN STREET 410 NEW YORK, NY 10038	NONE		GENERAL	10,000
SELFHELP COMMUNITY SERVICES INC 520 EIGHTH AVENUE NEW YORK, NY 10018	NONE		GENERAL	1,000
THE COLUMBIANS-ITALIAN- AMERICAN PHILANTHROPIC ORG 248 MADISON AVENUE WYCKOFF,NJ 07481	NONE		GENERAL	2,000
Total				494,660

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	Foundation status of	Purpose of grant or contribution	A mount
Name and address (home or business)	any foundation manager or substantial contributor	foundation manager recipient		
a Paid during the year				
THE JEWISH FEDERATION OF NORTHERN NJ 50 EISENHOWER DRIVE PARAMUS,NJ 07652	NONE		GENERAL	40,000
THINK LOUD MEDIA INC 51 W 81ST STREET APT 4J NEW YORK,NY 10024	NONE		GENERAL	10,000
UJA FEDERATION OF NY 130 EAST 59TH STREET NEW YORK, NY 10022	NONE		GENERAL	5,000
ZAMIR CHORAL FOUNDATION 475 RIVERSIDE DRIVE 1948 NEW YORK, NY 10115	NONE		GENERAL	5,000
Total				494.660

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93491240002015

OMB No 1545-0047

Schedule B

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

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

2014

Employer identification number

OSTER	FAMILY FOUND	ATION INC	22-3188305
Organi	ization type (che	ck one)	
Filers	of:	Section:	
Form 990 or 990-EZ		501(c)() (enter number) organization	
		4947(a)(1) nonexempt charitable trust not treated as a	a private foundation
		527 political organization	
Form 9	90-PF	501(c)(3) exempt private foundation	
		4947(a)(1) nonexempt charitable trust treated as a priv	vate foundation
		501(c)(3) taxable private foundation	
	For an organization other property) fr	on filing Form 990, 990-EZ, or 990-PF that received, during the ye om any one contributor Complete Parts I and II See instructions t	
Specia	ll Rules		
Γ	under sections 50 received from any	on described in section $501(c)(3)$ filing Form 990 or 990 -EZ that $n(9(a)(1))$ and $170(b)(1)(A)(vi)$, that checked Schedule A (Form 990) one contributor, during the year, total contributions of the greater (ii) Form 990 -EZ, line 1 Complete Parts I and II	90 or 990-EZ), Part II, line 13, 16a, or 16b, and that
Γ	during the year, to	on described in section 501(c)(7), (8), or (10) filing Form 990 or 9 otal contributions of more than \$1,000 exclusively for religious, conficuelty 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 or during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled this box is checked, enter here the total contributions that were received during the year for an exclusively religious purpose. Do not complete any of the parts unless the General Rule applies to this organization because it received religious, charitable, etc., contributions totaling \$5,000 or more during the year.		but no such contributions totaled more than \$1,000 lf ne year for an <i>exclusively</i> religious, charitable, etc, s organization because it received <i>nonexclusively</i>	

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)

Name of organization
OSTER FAMILY FOUNDATION INC

Employer identification number 22-3188305

Part I	Contributors (see instructions) Use duplicate copies of Part I if additional space is needed		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	Ann Oster 429 Sylvan Avenue Englewood Cliffs, NJ07632	\$40,000	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person

Name of organization
OSTER FAMILY FOUNDATION INC
Employer identification number
22-3188305

Part II	needed (see instructions) Use duplicate copies of Part II if additional space is		
(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
		\$_	

Schedule B (Form 990, 990-EZ, or 990-PF) (2014) Page 4 Name of organization **Employer identification number** OSTER FAMILY FOUNDATION INC 22-3188305 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 (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP 4 Relationship of transferor to transferee (a) No from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP 4 Relationship of transferor to transferee (a) No. (c) Use of gift from (b) Purpose of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I

(e) Transfer of gift

Transferee's name, address, and ZIP 4

Relationship of transferor to transferee

OMB No 1545-0123

Sequence No 12A

(h)

Department of the Treasury Internal Revenue Service

▶ Information about Form 8949 and its separate instructions is at www.irs.gov/form8949. ▶ File with your Schedule D to list your transactions for lines 1b, 2, 3, 8b, 9, and 10 of Schedule D.

Sales and Other Dispositions of Capital Assets

Name(s) shown on return

Social security number or taxpayer identification number

22-3188305

Adjustment, if any, to gain or loss

Before you check Box A, B, or C below, check whether you received any Form(s) 1099-B or substitute statement(s) from your broker. A substitute statement will have the same information as Form 1099-B. Either may show your basis (usually your cost) even if your broker did not report it to the IRS. Brokers must report basis to the IRS for most stock you bought in 2011 or later (and for certain debt instruments you bought in 2014 or later).

Part I Short-Term. Transactions involving capital assets you held 1 year or less are short term. For long-term transactions, see page 2.

Note. You may aggregate all short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which NO adjustments or codes are required. Enter the total directly on Schedule D, line 1a; you are not required to report these transactions on Form 8949 (see instructions).

You must check Box A, B, or C below. Check only one box. If more than one box applies for your short-term transactions, complete a separate Form 8949, page 1, for each applicable box If you have more short-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need

- (A) Short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see **Note** above)
- (B) Short-term transactions reported on Form(s) 1099-B showing basis was **not** reported to the IRS
- (C) Short-term transactions not reported to you on Form 1099-B

1 (a) Description of property	(b) Date acquired	(c) Date sold or	(d) Proceeds	(e) Cost or other basis See the Note below and see <i>Column</i> (e)	enter a	an amount in column (g), code in column (f) eparate instructions	Gain or (loss). Subtract column (e)
(Example 100 sh XYZ Co)	(Mo , day, yr)	disposed (Mo , day, yr)	(sales price) (see instructions)	in the separate instructions	(f) Code(s) from instructions	(g) Amount of adjustment	from column (d) and combine the result with column (g)
550,000 US T		10-16-2014	550,747	(549,781)			966
100,000 US T	01-16-2014	12-23-2014	99,941	(99,914)			27
2 Totals Add the amounts in colum (subtract negative amounts) Enter include on your Schedule D, line 1b checked), line 2 (if Box B above is C above is checked)	each total her (If Box A abov	e and e ıs ne 3 (ıf Box	650,688	(649,695)			993
Note. If you checked Box A above h				. , ,	(e) the bas	ı sıs as reported t	<u> </u>

Part I Short-Term. Transactions involving capital assets you held 1 year or less are short term. For long-term transactions, see page 2.

Note. You may aggregate all short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which NO adjustments or codes are required. Enter the total directly on Schedule D, line 1a; you are not required to report these transactions on Form 8949 (see instructions).

You must check Box A, B, or C below. Check only one box. If more than one box applies for your short-term transactions, complete a separate Form 8949, page 1, for each applicable box. If you have more short-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need.

- (A) Short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see **Note** above)
- (B) Short-term transactions reported on Form(s) 1099-B showing basis was not reported to the IRS
- (C) Short-term transactions not reported to you on Form 1099-B

Cot or other basis Subtract column Subtrac	1 (C) Short-term transactions no	or reported to y	ou on Form 10	ס-ככ				
1,000,000 US 10-15-2014 03-18-2015 1,046,289 (1,080,030) -33,7 1,000,000 US 10-15-2014 03-18-2015 1,046,289 (1,080,030) -33,7 1,000,000 US 10-15-2014 03-18-2015 1,046,289 (1,080,030) -33,7 2 Totals Add the amounts in columns (d), (e), (g), and (h) (subtract negative amounts) Enter each total here and include on your Schedule D, line 10 (ff Box B above is checked), or line 3 (ff Box Cabove is checked) in line 3 (ff Box Cabove is checked), or line 3 (ff Box Cabove is checked).	(a) Description of property	Date acquired	Date sold or disposed	Proceeds (sales price)	Cost or other basis See the Note below and see <i>Column (e)</i> in the separate	If you enter a enter a See the se (f) Code(s) from	an amount in column (g), code in column (f) parate instructions (g) Amount of	Gain or (loss). Subtract column (e) from column (d)
2 Totals Add the amounts in columns (d), (e), (g), and (h) (subtract negative amounts) Enter each total here and include on your Schedule 0, fine 1b (if 80x 4 above is checked), rilne 2 (if 80x 8 above is checked), rilne 2 (if 80x 8 above is checked), rilne 3 (if 80x 6	1 000 000 US	10-15-2014	03-18-2015	1 046 289	(1.080.030)	modadiono	,	-33 7/1
(subtract negative amounts) Enter each total here and include on your Schedule D, line 1b (if Box A above is checked), line 2 (if Box B above is checked), or line 3 (if Box C above is checked)	1,000,000 03	10-13-2014	03-16-2013	1,040,209	(1,000,030)			-33,741
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Note If you checked Boy A above but the bacic reported to the IDS was incorrect, enter in column (e) the bacic as reported to the IDS, and	·			<u> </u>				<u> </u>

Note. If you checked Box A above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column (g) to correct the basis. See *Column* (g) in the separate instructions for how to figure the amount of the adjustment

Name(s) shown on return Name and SSN or taxpayer identification no not required if shown on other side OSTER FAMILY FOUNDATION INC

Social security number or taxpayer identification number 22-3188305

Before you check Box D, E, or F below, check whether you received any Form(s) 1099-B or substitute statement(s) from your broker. A substitute statement will have the same information as Form 1099-B. Either may show your basis (usually your cost) even if your broker did not report it to the IRS. Brokers must report basis to the IRS for most stock you bought in 2011 or later (and for certain debt instruments you bought in 2014 or later).

Part II Long-Term. Transactions involving capital assets you held more than 1 year are long term. For short-term transactions, see page 1.

Note. You may aggregate all long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which NO adjustments or codes are required. Enter the total directly on Schedule D, line 8a; you are not required to report these transactions on Form 8949 (see instructions).

You must check Box D, E, or F below. Check only one box. If more than one box applies for your long-term transactions, complete a separate Form 8949, page 2, for each applicable box If you have more long-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need

- (D) Long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see **Note** above)
- (E) Long-term transactions reported on Form(s) 1099-B showing basis was not reported to the IRS
- (F) Long-term transactions not reported to you on Form 1099-B

(a) Description of property (Example 100 sh XYZ Co)	(b) Date acquired (Mo , day, yr)	(c) Date sold or disposed (Mo , day, yr)	(d) Proceeds (sales price) (see instructions)	(e) Cost or other basis See the Note below and see <i>Column</i> (e) in the separate instructions	If you enter a	if any, to gain or loss an amount in column (g), code in column (f) eparate instructions (g) Amount of adjustment	(h) Gain or (loss). Subtract column (e) from column (d) and combine the result with column (g)
550,000 US T	02-05-2013	01-22-2015	548,958	(547,916)			1,042
200,000 WELL	08-06-2012	04-15-2015	200,000				-14,142
200,000 WELL	08-08-2012	04-13-2013	200,000	(214,142)			-14,142
2 Totals Add the amounts in colum (subtract negative amounts) Enter include on your Schedule D, line 8b checked), line 9 (if Box E above is 6 Box F above is checked)	each total her (If Box D abov checked), or lin	e and e ıs e 10 (ıf ►	748,958				-13,100

Part II Long-Term. Transactions involving capital assets you held more than 1 year are long term. For short-term transactions, see page 1.
Note. You may aggregate all long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which NO adjustments or codes are required. Enter the total directly on Schedule D, line 8a; you are not required to report these transactions on Form 8949 (see instructions).
You must check Box D, E, or F below. Check only one box. If more than one box applies for your long-term transactions, complete a separate Form 8949, page 2, for each applicable box If you have more long-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need
Γ (D) Long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see Note above)

(F) Long-term transactions not reported to you on Form 1099-B Adjustment, if any, to gain or loss (h) 1 (e) If you enter an amount in column (g), Gain or (loss). Cost or other basis (c) (d) Subtract column (a) enter a code in column (f) (b) Date sold or Proceeds See the Note below Description of property Date acquired See the separate instructions from column (d) disposed (sales price) and see Column (e) (Example 100 sh XYZ Co) (Mo, day, yr) (Mo, day, yr) (see instructions) in the separate and (g) instructions combine the result Code(s) from Amount of with column (g) adjustment instructions 200,000 BP C 05-08-2014 200,000 -11,622 08-23-2011 (211,622)250,000 PNC 02-25-2011 05-19-2014 250,000 (257, 298)-7,298 200,000 ACE 02-28-2011 06-15-2014 200,000 (223,528)-23,528 250,000 BLAC 08-24-2011 08-07-2014 252,623 (266,908)-14,285 500,000 US T 02-05-2013 10-15-2014 499,543 (498, 105)1,438 2 Totals Add the amounts in columns (d), (e), (g), and (h) (subtract negative amounts) Enter each total here and include on your Schedule D, line 8b (if Box D above is checked), line 9 (If Box E above Is checked), or line 10 (If 1,442,705 (1,498,000)-55,295

Note. If you checked Box D above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column (g) to correct the basis. See *Column* (g) in the separate instructions for how to figure the amount of the adjustment

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DLN: 93491240002015

TY 2014 Depreciation Schedule

Name: OSTER FAMILY FOUNDATION INC

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

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TY 2014 Investments Corporate Bonds Schedule

Name: OSTER FAMILY FOUNDATION INC

Name of Bond	End of Year Book Value	End of Year Fair Market Value
CORPORATE BONDS-SEE ATTACHMENT	1,777,386	1,754,397

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TY 2014 Investments Government Obligations Schedule

Name: OSTER FAMILY FOUNDATION INC

EIN: 22-3188305

US Government Securities - End of

Year Book Value: 3,902,513

US Government Securities - End of

Year Fair Market Value: 3,914,365

State & Local Government Securities - End of Year Book

Value:

State & Local Government Securities - End of Year Fair Market Value:

TY 2014 Investments - Other Schedule

Name: OSTER FAMILY FOUNDATION INC

Category/ Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value
INVESTMENTS - OTHER BONDS	FMV	0	0

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TY 2014 Other Expenses Schedule

Name: OSTER FAMILY FOUNDATION INC

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
TRUSTEE FEES	14,667	14,667		
PENALTIES	548			

TY 2014 Taxes Schedule

Name: OSTER FAMILY FOUNDATION INC

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
FEDERAL EXCISE TAX	6,070			

STATEMENT OF ASSETS PERIOD ENDED 04/30/15

CAPITAL ONE, N.A., AGENT OSTER FAMILY FOUNDATION INVESTMENT MANAGEMENT ACCOUNT

ACCOUNT NO. 60-N034-01-6

PAGE

UNITS		TAX COST	MARKET 04/30/15	% YIELD MARKET	ESTIMATED INCOME
BONDS					
GOVERNMENT	BONDS				
100,000	US TREASURY NOTE 0.25% DTD 09/30/2013 DUE 09/30/2015	99,914.06	100,071.00	0.25	250
355,000	US TREASURY NOTE 3.125% DTD 01/31/2010 DUE 01/31/2017	376,716.02	371,170.25	2.99	11,093
1,700,000	US TREASURY NOTE 0.625% DTD 11/30/2012 DUE 11/30/2017	1,678,679.69	1,692,027.00	0.63	10,625
200,000	FEDERAL NATL MTG ASSN 0.875% DTD 10/30/2012 DUE 12/20/2017 NON-CALLABLE	200,805.00	199,888.00	0.88	1,750
1,550,000	US TREASURY NOTE 0.875% DTD 01/15/2015 DUE 01/15/2018	1,546,398.43	1,551,209.00	0.87	13,562
TOTAL (GOVERNMENT BONDS	3,902,513.20	3,914,365.25	0.95	37,280
CORPORATE BONDS					
200,000	AMERICAN EXPRESS CR CORP MINBE FR 1.75% DTD 06/12/2012 DUE 06/12/2015 NON-CALLABLE	204,216.00	200,290.00	1.75	3,500



STATEMENT OF ASSETS PERIOD ENDED 04/30/15

ACCOUNT NO. 60-N034-01-6

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CAPITAL ONE, N.A., AGENT OSTER FAMILY FOUNDATION INVESTMENT MANAGEMENT ACCOUNT

UNITS		TAX COST	MARKET 04/30/15	% YIELD MARKET	ESTIMATED INCOME
200,000	GENERAL ELEC CAP CORP MTN FR 1.625% DTD 07/02/2012 DUE 07/02/2015 NON-CALLABLE	200,746.00	200,432.00	1.62	3,250
200,000	DELL INC NT 2.30% DTD 09/10/2010 DUE 09/10/2015 CALLABLE	207,630.00	200,264.00	2.30	4,600
300,000	VERIZON COMMUNICATIONS INC SR NT 0.70% DTD 11/07/2012 DUE 11/02/2015 NON-CALLABLE	300,456.00	299,982.00	0.70	2,100
200,000	OCCIDENTAL PETE CORP DEL SR NT 2.50% DTD 12/16/2010 DUE 02/01/2016 CALLABLE	208,860.00	202,714.00	2.47	5,000
250,000	MORGAN STANLEY 5.75% DTD 10/18/2006 DUE 10/18/2016 CALLABLE	264,485.00	266,415.00	5.40	14,375
250,000	PETROLOGISTICS FIN CORP SR NT 6.25% DTD 10/01/2013 DUE 04/01/2020 CALLABLE	275,000.00	268,772.50	5.81	15,625
115,992.580	UBS BARCLY COML MTG TR SER 2012 C4 CL A 1 0.672% DTD 12/01/2012 DUE 12/12/2045 IPD10	115,992.20	115,527.45	0.67	779
TOTAL	CORPORATE BONDS	1,777,385.20	1,754,396.95	2.81	49,229
TOTAL	BONDS	5,679,898.40	5,668,762.20	1.53	86,509
TOTAL	ASSETS (EXCLUDING CASH)	5,925,697.55	5,914,561.35	1.47	86,749