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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

▶ **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*.**

OMB No 1545-0052

2014

Open to Public Inspection

For calendar year 2014, or tax year beginning 07-01-2014 , and ending 06-30-2015

Name of foundation
THE ANSELL GRIMM & AARON FOUNDATION INC
C/O MICHAEL BENEDETTO ESQ

A Employer identification number
26-0757646

Number and street (or P O box number if mail is not delivered to street address)
1500 LAWRENCE AVE

Room/suite

B Telephone number (see instructions)
(732) 922-1000

City or town, state or province, country, and ZIP or foreign postal code
OCEAN TNSHP, NJ 07712

C If exemption application is pending, check here ▶ ☐

G Check all that apply ☐ Initial return ☐ Initial return of a former public charity ☐ Final return ☐ Amended return ☐ Address change ☐ Name change

D 1. Foreign organizations, check here ▶ ☐

2. Foreign organizations meeting the 85% test, check here and attach computation ▶ ☐

H Check type of organization ☑ Section 501(c)(3) exempt private foundation ☐ Section 4947(a)(1) nonexempt charitable trust ☐ Other taxable private foundation

E If private foundation status was terminated under section 507(b)(1)(A), check here ▶ ☐

I Fair market value of all assets at end of year *(from Part II, col. (c), line 16)* ▶$ 110

J Accounting method ☑ Cash ☐ Accrual ☐ Other (specify) _____
(Part I, column (d) must be on cash basis.)

F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here ▶ ☐

Part I **Analysis of Revenue and Expenses** *(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions))*

		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
Revenue	1 Contributions, gifts, grants, etc , received (attach schedule)	145,000			
	2 Check ▶ ☐ if the foundation is **not** required to attach Sch B				
	3 Interest on savings and temporary cash investments				
	4 Dividends and interest from securities				
	5a Gross rents				
	b Net rental income or (loss) _____				
	6a Net gain or (loss) from sale of assets not on line 10				
	b Gross sales price for all assets on line 6a _____				
	7 Capital gain net income (from Part IV, line 2)		0		
	8 Net short-term capital gain				
	9 Income modifications				
	10a Gross sales less returns and allowances				
	b Less Cost of goods sold				
	c Gross profit or (loss) (attach schedule)				
	11 Other income (attach schedule)				
	12 **Total.** Add lines 1 through 11	145,000	0	0	
Operating and Administrative Expenses	13 Compensation of officers, directors, trustees, etc	0	0	0	0
	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)				
	19 Depreciation (attach schedule) and depletion				
	20 Occupancy				
	21 Travel, conferences, and meetings				
	22 Printing and publications				
	23 Other expenses (attach schedule)	120	0	0	0
	24 **Total operating and administrative expenses.** Add lines 13 through 23	120	0	0	0
	25 Contributions, gifts, grants paid	144,872			144,872
	26 **Total expenses and disbursements.** Add lines 24 and 25	144,992	0	0	144,872
	27 Subtract line 26 from line 12				
	a **Excess of revenue over expenses and disbursements**	8			
	b **Net investment income** (if negative, enter -0-)		0		
	c **Adjusted net income** (if negative, enter -0-)			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	102	110	
	2	Savings and temporary cash investments			
	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)			
	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)	102	110	110
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	0	
Net Assets or Fund Balances		**Foundations that follow SFAS 117, check here** ▶ ☐ **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 ▶ ☑ **and complete lines 27 through 31.**			
	27	Capital stock, trust principal, or current funds	0	0	
	28	Paid-in or capital surplus, or land, bldg , and equipment fund	0	0	
	29	Retained earnings, accumulated income, endowment, or other funds	102	110	
	30	**Total net assets or fund balances** (see instructions)	102	110	
	31	**Total liabilities and net assets/fund balances** (see instructions)	102	110	

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)	1	102
2	Enter amount from Part I, line 27a	2	8
3	Other increases not included in line 2 (itemize) ▶	3	0
4	Add lines 1, 2, and 3	4	110
5	Decreases not included in line 2 (itemize) ▶	5	0
6	Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30	6	110

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)
1a				

	(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				
b				
c				
d				
e				

	Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) 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				
b				
c				
d				
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	
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	137,309	19,707	6 967524
2012	136,795	30,346	4 507843
2011	136,649	11,112	12 297426
2010	124,329	9,376	13 260346
2009	121,488	12,242	9 923869

2	**Total** of line 1, column (d)	2	46 957008
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	9 391402
4	Enter the net value of noncharitable-use assets for 2014 from Part X, line 5	4	104
5	Multiply line 4 by line 3	5	977
6	Enter 1% of net investment income (1% of Part I, line 27b)	6	0
7	Add lines 5 and 6	7	977
8	Enter qualifying distributions from Part XII, line 4	8	144,872

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 ▶ ☐ and enter "N/A" on line 1. Date of ruling or determination letter _____ **(attach copy of letter if necessary–see instructions)**		
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here ▶ ☑ and enter 1% of Part I, line 27b	1	0
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	0
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)	4	0
5	**Tax based on investment income.** Subtract line 4 from line 3 If zero or less, enter -0-	5	0
6	Credits/Payments		
a	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	7	0
8	Enter any **penalty** for underpayment of estimated tax Check here ☐ if Form 2220 is attached	8	
9	**Tax due.** If the total of lines 5 and 8 is more than line 7, enter **amount owed** ▶	9	0
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** ▶ **Refunded** ▶	11	

Part VII-A Statements Regarding Activities

			Yes	No
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		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 ▶ $ 0 **(2)** On foundation managers ▶ $ 0			
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers ▶ $ 0			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS? *If "Yes," attach a detailed description of the activities.*	2		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? *If "Yes," attach a conformed copy of the changes*	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? *If "Yes," attach the statement required by General Instruction T.*	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		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		No
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		
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

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 ▶ ANSELL GRIMM & AARON PC Telephone no ▶ (732) 922-1000

Located at ▶ 1500 LAWRENCE AVENUE OCEAN NJ ZIP+4 ▶ 07712

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?		Yes	No
		16		No
	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 ▶			

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required

			Yes	No
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.			
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)?	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?	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? ☐ Yes ☑ No			
	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____ , 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))? ☐ Yes ☑ No			
	(2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive? ☐ Yes ☑ No			
	(3) Provide a grant to an individual for travel, study, or other similar purposes? ☐ Yes ☑ No			
	(4) Provide a grant to an organization other than a charitable, etc , organization described in section 4945(d)(4)(A)? (see instructions) ☐ Yes ☑ 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? ☐ Yes ☑ No			
b	If any answer is "Yes" to 5a(1)–(5), did **any** 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 ▶ ☐			
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? ☐ Yes ☐ 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? ☐ Yes ☑ 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? ☐ Yes ☑ 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
See Additional Data Table				

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 ▶	0

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	0
b	Average of monthly cash balances		1b	106
c	Fair market value of all other assets (see instructions)		1c	0
d	**Total** (add lines 1a, b, and c)		1d	106
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation)	1e 0		
2	Acquisition indebtedness applicable to line 1 assets		2	0
3	Subtract line 2 from line 1d		3	106
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see instructions)		4	2
5	**Net value of noncharitable-use assets.** Subtract line 4 from line 3 Enter here and on Part V, line 4		5	104
6	**Minimum investment return.** Enter 5% of line 5		6	5

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	5
2a	Tax on investment income for 2014 from Part VI, line 5	2a		
b	Income tax for 2014 (This does not include the tax from Part VI)	2b		
c	Add lines 2a and 2b		2c	0
3	Distributable amount before adjustments Subtract line 2c from line 1		3	5
4	Recoveries of amounts treated as qualifying distributions		4	0
5	Add lines 3 and 4		5	5
6	Deduction from distributable amount (see instructions)		6	0
7	**Distributable amount** as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1		7	5

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	144,872
b	Program-related investments—total from Part IX-B	1b	0
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	144,872
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	0
6	**Adjusted qualifying distributions.** Subtract line 5 from line 4	6	144,872

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				5
2 Undistributed income, if any, as of the end of 2014				
a Enter amount for 2013 only			0	
b Total for prior years 20___, 20___, 20___		0		
3 Excess distributions carryover, if any, to 2014				
a From 2009 120,876				
b From 2010 123,860				
c From 2011 136,093				
d From 2012 135,278				
e From 2013 136,324				
f **Total** of lines 3a through e	652,431			
4 Qualifying distributions for 2014 from Part XII, line 4 ▶ $ 144,872				
a Applied to 2013, but not more than line 2a			0	
b Applied to undistributed income of prior years (Election required—see instructions)		0		
c Treated as distributions out of corpus (Election required—see instructions)	0			
d Applied to 2014 distributable amount				5
e Remaining amount distributed out of corpus	144,867			
5 Excess distributions carryover applied to 2014	0			0
(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	797,298			
b Prior years' undistributed income Subtract line 4b from line 2b		0		
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		0		
d Subtract line 6c from line 6b Taxable amount —see instructions		0		
e Undistributed income for 2013 Subtract line 4a from line 2a Taxable amount—see instructions			0	
f Undistributed income for 2014 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2015				0
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)	0			
8 Excess distributions carryover from 2009 not applied on line 5 or line 7 (see instructions)	120,876			
9 **Excess distributions carryover to 2015.** Subtract lines 7 and 8 from line 6a	676,422			
10 Analysis of line 9				
a Excess from 2010 123,860				
b Excess from 2011 136,093				
c Excess from 2012 135,278				
d Excess from 2013 136,324				
e Excess from 2014 144,867				

Part XIV Private 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)

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

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

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 e-mail address of the person to whom applications should be addressed

MICHAEL V BENEDETTO ESQ CO ANSELL G
1500 LAWRENCE AVENUE
OCEAN,NJ 07712
(732) 922-1000

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

NO APPLICATION, REQUIRES DETAIL OF PURPOSE OF GRANT AND VERIFICATION OF EXEMPT STATUS OF DONEE

c Any submission deadlines

NONE

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

NO RESTRICTIONS OR LIMITATIONS ON AWARDS

Part XV Supplementary Information (continued)

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

Recipient Name and address (home or business)	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
a *Paid during the year* See Additional Data Table				
Total . . . . . ▶ **3a**				144,872
b *Approved for future payment*				
Total . . . . . ▶ **3b**				0

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated	Unrelated business income		Excluded by section 512, 513, or 514		(e)
	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income (See instructions)
1 Program service revenue					
a					
b					
c					
d					
e					
f					
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash investments					
4 Dividends and interest from securities					
5 Net rental income or (loss) from real estate					
a Debt-financed property					
b Not debt-financed property					
6 Net rental income or (loss) from personal property					
7 Other investment income					
8 Gain or (loss) from sales of assets other than inventory					
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue a					
b					
c					
d					
e					
12 Subtotal Add columns (b), (d), and (e)		0		0	0
13 **Total.** Add line 12, columns (b), (d), and (e)					13 0

(See worksheet in line 13 instructions to verify calculations)

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

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

Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

		Yes	No
1 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?			
a Transfers from the reporting foundation to a noncharitable exempt organization of			
(1) Cash	1a(1)		No
(2) Other assets	1a(2)		No
b Other transactions			
(1) Sales of assets to a noncharitable exempt organization	1b(1)		No
(2) Purchases of assets from a noncharitable exempt organization	1b(2)		No
(3) Rental of facilities, equipment, or other assets	1b(3)		No
(4) Reimbursement arrangements	1b(4)		No
(5) Loans or loan guarantees	1b(5)		No
(6) Performance of services or membership or fundraising solicitations	1b(6)		No
c Sharing of facilities, equipment, mailing lists, other assets, or paid employees	1c		No

d If the answer to any of the above is "Yes," complete the following schedule Column **(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 **(d)** the value of the goods, other assets, or services received

(a) Line No	**(b)** Amount involved	**(c)** Name of noncharitable exempt organization	**(d)** Description of transfers, transactions, and sharing arrangements

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

b If "Yes," complete the following schedule

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

Sign Here

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge

******	2015-10-13	******	May the IRS discuss this return with the preparer shown below (see instr)? ☑ Yes ☐ No
Signature of officer or trustee	Date	Title	

Paid Preparer Use Only

Print/Type preparer's name	Preparer's Signature	Date	Check if self-employed ▶ ☐	PTIN
ROSE ANN SLAWSON				P00408845

Firm's name ▶ COHNREZNICK LLP — Firm's EIN ▶ 22-1478099

Firm's address ▶ 23 CHRISTOPHER WAY EATONTOWN, NJ 07724 — Phone no (732) 578-0700

Form 990PF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation

(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
MICHAEL V BENEDETTO 1500 LAWRENCE AVENUE OCEAN,NJ 07712	TRUSTEE 10 00	0	0	0
JAMES AARON 1500 LAWRENCE AVENUE OCEAN,NJ 07712	TRUSTEE 10 00	0	0	0
RICHARD B ANSELL 1500 LAWRENCE AVENUE OCEAN,NJ 07712	TRUSTEE 10 00	0	0	0
MITCHELL J ANSELL 1500 LAWRENCE AVENUE OCEAN,NJ 07712	TRUSTEE 10 00	0	0	0
PETER B GRIMM 1500 LAWRENCE AVENUE OCEAN,NJ 07712	TRUSTEE 10 00	0	0	0
BRIAN ANSELL 1500 LAWRENCE AVENUE OCEAN,NJ 07712	TRUSTEE 10 00	0	0	0

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

Recipient Name and address (home or business)	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
a *Paid during the year*				
180 TURNING LIVES AROUND ONE BETHANY RD BLDG 3 STE 42 HAZLET,NJ 07730	NONE	PC	UNRESTRICTED	7,000
AFFORDABLE HOUSING ALLIANCE 59 BROAD STREET EATONTOWN,NJ 07724	NONE	PC	UNRESTRICTED	250
AMERICAN HEART ASSOCIATION 4217 PARK PLACE COURT GLEN ALLEN,VA 230609979	NONE	PC	UNRESTRICTED	650
AMERICAN RED CROSS-JERSEY COAST CHAPTER 1540 WEST PARK AVENUE OCEAN,NJ 07712	NONE	PC	UNRESTRICTED	2,000
AMERIGO VESPUCCI SOCIETY 286 WILLOW AVENUE LONG BRANCH,NJ 07740	NONE	PC	UNRESTRICTED	200
ASBURY PARK RECREATION DEPARTMENT ONE MUNICIPAL PLAZA ASBURY PARK,NJ 07712	NONE	PC	UNRESTRICTED	2,750
ATHLETE ALLY INC 105 WEST 86TH STREET 238 NEW YORK,NY 10024	NONE	PC	UNRESTRICTED	1,000
ATLANTIC HIGHLANDS PBA LOCAL NO 242 PO BOX 9 ATLANTIC HIGHLANDS,NJ 07716	NONE	PC	UNRESTRICTED	100
BBBSMMC 305 BOND STREET ASBURY PARK,NJ 07712	NONE	PC	UNRESTRICTED	3,500
BCBF CO RUN FOR THE BAR 137 HIGH STREET 3RD FLOOR MOUNT HOLLY,NJ 08060	NONE	PC	UNRESTRICTED	250
BOYS AND GIRLS CLUB OF MONMOUTH COUNTY 1201 MONROE AVENUE ASBURY PARK,NJ 07712	NONE	PC	UNRESTRICTED	1,300
BROOKDALE COMMUNITY COLLEGE FOUNDATION 765 NEWMAN SPRINGS ROAD LINCROFT,NJ 07738	NONE	PC	UNRESTRICTED	3,125
BURLINGTON COUNTY BAR ASSOCIATION 137 HIGH STREET 3RD FLOOR MOUNT HOLLY,NJ 08060	NONE	PC	UNRESTRICTED	545
CALVARY HOSPITAL 1740 EAST CHESTER ROAD BRONX,NY 10461	NONE	PC	UNRESTRICTED	250
CAMP OAKHURST-NY SERVICE FOR THE HANDICAPPED 1140 BROADWAY STE 903 NEW YORK,NY 100017504	NONE	PC	UNRESTRICTED	750
Total . . . . . ▶ **3a**				144,872

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

Recipient Name and address (home or business)	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
a *Paid during the year*				
CANCER SUPPORT COMMUNITY 613 HOPE ROAD VICTORIA COMMONS EATONTOWN,NJ 07724	NONE	PC	UNRESTRICTED	500
CFC LOUD N CLEAR FOUNDATION 260 CASINO DRIVE FARMINGDALE,NJ 07727	NONE	PC	UNRESTRICTED	500
CHARITABLE FUND OF MICHAEL W THORNE RUN SPONSORSHIP PO BOX 442 WEST LONG BRANCH,NJ 07764	NONE	PC	UNRESTRICTED	250
CITY OF ASBURY PARK-NATIONAL NIGHT OUT AP POLICE ONE MUNICIPAL PLAZA ASBURY PARK,NJ 07712	NONE	PC	UNRESTRICTED	250
CNCC 25 MERCHANTS WAY COLTS NECK,NJ 07722	NONE	PC	UNRESTRICTED	350
CONGREGATION TORAT EL 301 MONMOUTH ROAD OAKHURST,NJ 07712	NONE	PC	UNRESTRICTED	910
COUNT BASIE THEATRE FOUNDATION 99 MONMOUTH STREET RED BANK,NJ 07701	NONE	PC	UNRESTRICTED	8,100
CPC FOUNDATION 10 INDUSTRIAL WAY WEST EATONTOWN,NJ 07724	NONE	PC	UNRESTRICTED	500
DEAL FIRE CO PO BOX 233 DEAL,NJ 07723	NONE	PC	UNRESTRICTED	250
EATONTOWN PBA #305 PO BOX 141 EATONTOWN,NJ 07724	NONE	PC	UNRESTRICTED	150
FOUNDATION FOR SHREWSBURY EDUCATION 20 OBRE PLACE SHREWSBURY,NJ 07702	NONE	PC	UNRESTRICTED	500
FRIENDLY SONS OF ST PATRICK PO BOX 254 SPRING LAKE,NJ 07762	NONE	PC	UNRESTRICTED	300
GARDEN STATE ARTS CENTER FOUNDATION PO BOX 5013 WOODBRIDGE,NJ 07095	NONE	PC	UNRESTRICTED	2,500
GIRLS SCOUTS OF THE JERSEY SHORE 1405 OLD FREEHOLD ROAD TOMS RIVER,NJ 08753	NONE	PC	UNRESTRICTED	500
GOTCC PO BOX 656 OAKHURST,NJ 07755	NONE	PC	UNRESTRICTED	5,000
Total . . . . . ▶ **3a**				144,872

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

Recipient Name and address (home or business)	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
a *Paid during the year*				
GREATER LONG BRANCH CHAMBER OF COMMERCE PO BOX 628 LONG BRANCH,NJ 07740	NONE	PC	UNRESTRICTED	2,000
HEADLINER VOLLEYBALL 62 KOSTER DRIVE FREEHOLD,NJ 07727	NONE	PC	UNRESTRICTED	480
HENRY SPUD DOBENSKI SCHOLARSHIP FUND 13 HILLSIDE AVENUE JAMESBURG,NJ 08831	NONE	PC	UNRESTRICTED	320
HILLEL YESHIVA JOURNAL 1025 DEAL ROAD OCEAN,NJ 07712	NONE	PC	UNRESTRICTED	1,000
HOLIDAY EXPRESS 968 SHREWSBURY AVE TINTON FALLS,NJ 07724	NONE	PC	UNRESTRICTED	1,100
HOLMDEL PBA #239 PO BOX 214 HOLMDEL,NJ 07733	NONE	PC	UNRESTRICTED	250
HOMELESS SOLUTIONS 6 DUMONT PLACE MORRISTOWN,NJ 07960	NONE	PC	UNRESTRICTED	250
HORIZONS PO BOX 52 RUMSON,NJ 07760	NONE	PC	UNRESTRICTED	1,750
IAATO PO BOX 424 OAKHURST,NJ 07755	NONE	PC	UNRESTRICTED	200
JACKSON LIBERTY HIGH SCHOOLDRAMA CLUB 125 N HOPE CHAPEL ROAD JACKSON,NJ 08527	NONE	PC	UNRESTRICTED	80
JERSEY SHORE DREAM CENTER PO BOX 94 BELMAR,NJ 07719	NONE	PC	UNRESTRICTED	150
JEWISH FAMILY AND CHILDREN'S SERVICE 705 SUMMERFIELD AVENUE ASBURY PARK,NJ 07712	NONE	PC	UNRESTRICTED	1,000
JEWISH FEDERATION IN THE HEART OF NJ 960 HOLMDEL ROAD BLDG LL 2ND FLOOR HOLMDEL,NJ 07733	NONE	PC	UNRESTRICTED	550
JOHN M HOFFMAN FOUNDATION 13 SEWARD AVENUE TOMS RIVER,NJ 08753	NONE	PC	UNRESTRICTED	680
JSUMC FOUNDATION 1345 CAMPUS PARKWAY STE A2 NEPTUNE,NJ 07753	NONE	PC	UNRESTRICTED	3,750
Total . . . . . ▶ **3a**				144,872

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

Recipient Name and address (home or business)	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
a *Paid during the year*				
JUVENILE DIABETES RESEARCH FOUNDATION 740 BROAD STREET STE 4 SHREWSBURY,NJ 07702	NONE	PC	UNRESTRICTED	4,350
KALEIDOSCOPE OF HOPE FOUNDATION PO BOX 1124 MADISON,NJ 07940	NONE	PC	UNRESTRICTED	150
LSAHFA-LITTLE SILVER ANIMAL HOSPITAL FOUNDATION 675 BRANCH AVENUE LITTLE SILVER,NJ 07739	NONE	PC	UNRESTRICTED	1,220
LADACIN NETWORK 1703 KNEELEY BLVD WANAMASSA,NJ 07712	NONE	PC	UNRESTRICTED	500
LEGAL AID SOCIETY OF MONMOUTH COUNTY INC PO BOX 2006 OCEAN,NJ 07712	NONE	PC	UNRESTRICTED	1,000
LEGAL AID SOCIETY PO BOX 489 RED BANK,NJ 07701	NONE	PC	UNRESTRICTED	1,000
LITTLE SILVER LACROSSE CLUB PO BOX 375 LITTLE SILVER,NJ 07739	NONE	PC	UNRESTRICTED	1,000
LIVING WORK CHRISTIAN FELLOWSHIP 81 HIGHWAY 35 NEPTUNE,NJ 07753	NONE	PC	UNRESTRICTED	200
LUNCH BREAK PO BOX 2215 RED BANK,NJ 07701	NONE	PC	UNRESTRICTED	375
MAKE SOME NOISE CURE KIDS CANCER FOUNDATION INC 10 HOLLY DRIVE LITTLE SILVER,NJ 07739	NONE	PC	UNRESTRICTED	400
MARLBORO PBA 196 PO BOX 278 MORGANVILLE,NJ 07751	NONE	PC	UNRESTRICTED	500
MASTRO MONTESSORI ACADEMY 35 WHITE ROAD SHREWSBURY,NJ 07702	NONE	PC	UNRESTRICTED	250
MAYORS BALL COMMITTEE-NEPTUNE TOWNSHIP 107 HIGHLAND AVENUE NEPTUNE,NJ 07753	NONE	PC	UNRESTRICTED	1,500
MERIDIAN HEALTH FOUNDATION 1345 CAMPUS PARKWAY STE A2 NEPTUNE,NJ 07753	NONE	PC	UNRESTRICTED	1,000
MONMOUTH ARTS COUNCIL 107 MONMOUTH STREET RED BANK,NJ 07701	NONE	PC	UNRESTRICTED	1,600
Total . . . . . ▶ **3a**				144,872

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

Recipient Name and address (home or business)	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
a *Paid during the year*				
MONMOUTH BAR ASSOCIATION COURT HOUSE 71 MONUMENT PARK FREEHOLD,NJ 07728	NONE	PC	UNRESTRICTED	5,300
MONMOUTH COUNTY HISTORICAL ASSOC 70 COURT STREET FREEHOLD,NJ 07728	NONE	PC	UNRESTRICTED	3,000
MONMOUTH COUNTY POLICE CHIEFS ASSOC ED KIRSCHENBAUM NCPD 106 W SYLVANIA AVENUE NEPTUNE CITY,NJ 07753	NONE	PC	UNRESTRICTED	1,850
MONMOUTH COUNTY SPCA PO BOX 93 EATONTOWN,NJ 07724	NONE	PC	UNRESTRICTED	250
MONMOUTH MEDICAL CENTER FOUNDATION 300 SECOND AVENUE LONG BRANCH,NJ 07740	NONE	PC	UNRESTRICTED	1,375
MONMOUTH OCEAN FOUNDATION FOR CHILDREN PO BOX 806 OAKHURST,NJ 07755	NONE	PC	UNRESTRICTED	1,000
MONMOUTH PARK CHARITY FUND 175 OCEANPORT AVENUE OCEANPORT,NJ 07757	NONE	PC	UNRESTRICTED	2,300
MONMOUTH UNIVERSITY KISLAK REAL ESTATE INSTITUTE 400 CEDAR AVE WEST LONG BRANCH,NJ 07764	NONE	PC	UNRESTRICTED	3,250
MONMOUTH UNIVERSITY 400 CEDAR AVE WEST LONG BRANCH,NJ 07764	NONE	PC	UNRESTRICTED	1,000
NATIONAL MS SOCIETY NJM CHAPTER 1480 US HWY 9 NORTH STE 301 WOODBRIDGE,NJ 07095	NONE	PC	UNRESTRICTED	1,500
NEW JERSEY STATE BAR ASSOC ONE CONSTITUTION SQUARE NEW BRUNSWICK,NJ 089011520	NONE	PC	UNRESTRICTED	800
NJALA 163 EAST MAIN STREET DENVILLE,NJ 07834	NONE	PC	UNRESTRICTED	250
NJCSA 1090 BROADWAY STE 200 WEST LONG BRANCH,NJ 07764	NONE	PC	UNRESTRICTED	200
NJFC 30 WEST LAFAYETTE STREET TRENTON,NJ 08608	NONE	PC	UNRESTRICTED	450
OCEAN OF LOVE 1709 HIGHWAY 37 EAST TOMS RIVER,NJ 08753	NONE	PC	UNRESTRICTED	150
Total . . . . . ▶ **3a**				144,872

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

Recipient Name and address (home or business)	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
a *Paid during the year*				
OCEAN RED CLAWS CO JAMES FISHER 212 MONMOUTH ROAD OAKHURST,NJ 07755	NONE	PC	UNRESTRICTED	200
OCEAN TOWNSHIP ELEMENTARY SCHOOL-PTA 555 DOW AVENUE OAKHURST,NJ 07755	NONE	PC	UNRESTRICTED	200
OCEAN TOWNSHIP HIGH SCHOOL-POST PROM 2015 550 WEST PARK AVENUE OAKHURST,NJ 07755	NONE	PC	UNRESTRICTED	250
OCEAN TOWNSHIP POLICE DEPARTMENT 399 MONMOUTH ROAD OCEAN,NJ 07755	NONE	PC	UNRESTRICTED	500
OCEAN TWP U10 BASKETBALL CO ELLIOTT CLARK 1200 NEGRON DRIVE HAMILTON,NJ 08691	NONE	PC	UNRESTRICTED	500
OGMCA PO BOX 248 OCEAN GROVE,NJ 07756	NONE	PC	UNRESTRICTED	250
OTHS BPA 1429 RUSTIC COURT APT 3 OCEAN,NJ 07712	NONE	PC	UNRESTRICTED	150
PBA LOCAL #10-LONG BRANCH POLICE DEPT 344 BROADWAY LONG BRANCH,NJ 07740	NONE	PC	UNRESTRICTED	150
PERNA DANCE CENTER 651 LAUREL AVENUE HAZLET,NJ 07730	NONE	PC	UNRESTRICTED	250
POLICE UNITY TOUR CHAPTER X-FAIR HAVEN POLICE DEPT 35 FISK STREET FAIR HAVEN,NJ 07704	NONE	PC	UNRESTRICTED	100
PREFERRED BEHAVIORAL HEALTH FOUNDATION 1405 HIGHWAY 35 NORTH OCEAN,NJ 07712	NONE	PC	UNRESTRICTED	1,050
PREFERRED BEHAVIORAL HEALTH GROUP 1500 ROUTE 88 BRICK,NJ 08724	NONE	PC	UNRESTRICTED	2,500
PREVENTION FIRST ATTN MICHELLE CICALESE 1405 HIGHWAY 35 OCEAN,NJ 07712	NONE	PC	UNRESTRICTED	3,900
RED BANK CATHOLIC HIGH SCHOOL RBC BOOSTER CLUB 112 BROAD STREET RED BANK,NJ 07701	NONE	PC	UNRESTRICTED	250
RED BANK CATHOLIC-5K 112 BROAD STREET RED BANK,NJ 07701	NONE	PC	UNRESTRICTED	500
Total . . . . . ▶ **3a**				144,872

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

Recipient Name and address (home or business)	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
a *Paid during the year*				
ROTARY FOUNDATION OF ASBURY PARK PO BOX 512 ASBURY PARK,NJ 07712	NONE	PC	UNRESTRICTED	200
RYAN WOLFE KOSSAR FOUNDATION 777 TERRACE AVENUE SUITE 206 HASBROUCK HEIGHTS,NJ 07604	NONE	PC	UNRESTRICTED	2,500
SHORE DREAM CENTER PO BOX 94 BELMAR,NJ 07719	NONE	PC	UNRESTRICTED	150
SHREWSBURY HISTORICAL SOCIETY 419 SYCAMORE AVENUE PO BOX 333 SHREWSBURY,NJ 07702	NONE	PC	UNRESTRICTED	1,000
SPARTAN FOOTBALL CLUB PO BOX 1094 OAKHURST,NJ 07755	NONE	PC	UNRESTRICTED	1,650
ST GEORGE GREEK ORTHODOX CHURCH 1033 WEST PARK AVENUE OCEAN,NJ 07712	NONE	PC	UNRESTRICTED	500
SYAA-SHREWSBURY YOUTH ATHLETIC ASSOC PO BOX 7326 SHREWSBURY,NJ 07702	NONE	PC	UNRESTRICTED	250
TEAM LEGRAND 16 HARRISON STREET CLINTON,NJ 08809	NONE	PC	UNRESTRICTED	200
THE ARC OF MONMOUTH 1158 WAYSIDE ROAD TINTON FALLS,NJ 07712	NONE	PC	UNRESTRICTED	2,000
THE ASBURY PARK CHAMBER OF COMMERCE 1201 SPRINGWOOD AVENUE UNIT 104 ASBURY PARK,NJ 07712	NONE	PC	UNRESTRICTED	400
THE AZTEC CORPORATION WOODBRIDGE PLACE 517 ROUTE ONE SOUTH ISELIN,NJ 08830	NONE	PC	UNRESTRICTED	2,150
THE COMMUNITY YMCA 166 MAPLE AVENUE RED BANK,NJ 07701	NONE	PC	UNRESTRICTED	422
THE DZ FOUNDATION 161 STEPHENS LANE MAHWAH,NJ 07430	NONE	PC	UNRESTRICTED	1,615
THE FOOD BANK OF MONMOUTH AND OCEAN COUNTIES 3300 ROUTE 66 NEPTUNE,NJ 07753	NONE	PC	UNRESTRICTED	500
THE KORTNEY ROSE FOUNDATION 41 SUMMERFIELD AVENUE OCEANPORT,NJ 07757	NONE	PC	UNRESTRICTED	300
Total . . . . . ▶ **3a**				144,872

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

Recipient Name and address (home or business)	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
a *Paid during the year*				
THE LIGHT OF DAY FOUNDATION INC 625 DUCHESS COURT TOMS RIVER,NJ 08753	NONE	PC	UNRESTRICTED	10,000
THE LT DENNIS W ZILINSKI II MEMORIAL FUND PO BOX 35 HOLMDEL,NJ 07733	NONE	PC	UNRESTRICTED	500
THE MERCIER CLUB 76 PARK STREET MONTCLAIR,NJ 07042	NONE	PC	UNRESTRICTED	325
THE RED BANK MAYOR'S CHARITY BALL PO BOX 2157 RED BANK,NJ 07701	NONE	PC	UNRESTRICTED	575
THE VALERIE FUND C/O ROOK COFFEE 1701 VALLEY ROAD OCEAN,NJ 07712	NONE	PC	UNRESTRICTED	2,000
THURGOOD MARSHALL COLLEGE FUND INC 901 F STREET NW STE 300 WASHINGTON,DC 20004	NONE	PC	UNRESTRICTED	400
TOIS PTA 40 DUNE ROAD OCEAN,NJ 07712	NONE	PC	UNRESTRICTED	500
TOWNSHIP OF OCEAN HISTORICAL MUSEUM PO BOX 516 OAKHURST,NJ 07755	NONE	PC	UNRESTRICTED	250
TOWNSHIP OF OCEAN-EMPLOYEE HOLIDAY PARTY COMMITTEE 399 MONMOUTH ROAD OAKHURST,NJ 07755	NONE	PC	UNRESTRICTED	300
TRINITY EPISCOPAL CHURCH 503 ASBURY AVENUE ASBURY PARK,NJ 07712	NONE	PC	UNRESTRICTED	1,000
VFW POST #2226 212 NORWOOD AVENUE OAKHURST,NJ 07755	NONE	PC	UNRESTRICTED	250
VNA OF CENTRAL JERSEY 176 RIVERSIDE AVENUE RED BANK,NJ 07701	NONE	PC	UNRESTRICTED	7,700
VVA CHAPTER 12 PO BOX 276 ALLENHURST,NJ 07711	NONE	PC	UNRESTRICTED	100
WANAMASSA ELEMENTARY SCHOOL PTA 1106 INTERLAKEN AVENUE OCEAN,NJ 07712	NONE	PC	UNRESTRICTED	200
WAYSIDE ELEMENTARY SCHOOL PTA 733 BOWNE ROAD WAYSIDE,NJ 07712	NONE	PC	UNRESTRICTED	125
Total . . . . . ▶ **3a**				144,872

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

Recipient Name and address (home or business)	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
a *Paid during the year*				
WEST LONG BRANCH FOUNDATION FOR PUBLIC EDUCATION PO BOX 113 WEST LONG BRANCH,NJ 07764	NONE	PC	UNRESTRICTED	250
WEST LONG BRANCH PTA 135 LOCUST AVENUE WEST LONG BRANCH,NJ 07764	NONE	PC	UNRESTRICTED	200
WLB COMMUNITY CENTER PO BOX 157 WEST LONG BRANCH,NJ 07764	NONE	PC	UNRESTRICTED	100
Total . . . . . ▶ **3a**				144,872

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491286007025

TY 2014 Other Expenses Schedule

Name: THE ANSELL GRIMM & AARON FOUNDATION INC
C/O MICHAEL BENEDETTO ESQ

EIN: 26-0757646

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
FILING FEES	120	0	0	0

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491286007025

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

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.

OMB No 1545-0047

2014

Name of the organization	Employer identification number
THE ANSELL GRIMM & AARON FOUNDATION INC C/O MICHAEL BENEDETTO ESQ	26-0757646

Organization type (check one)

Filers of:	Section:
Form 990 or 990-EZ	☐ 501(c)( ) (enter number) organization
	☐ 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation
	☐ 527 political organization
Form 990-PF	☑ 501(c)(3) exempt private foundation
	☐ 4947(a)(1) nonexempt charitable trust treated as a private foundation
	☐ 501(c)(3) taxable private foundation

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

General Rule

☑ For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling $5,000 or more (in money or 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 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of **(1)** $5,000 or **(2)** 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1 Complete Parts I and II

☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than $1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or 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)

Name of organization
THE ANSELL GRIMM & AARON FOUNDATION INC
C/O MICHAEL BENEDETTO ESQ

Employer identification number
26-0757646

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	ANSELL GRIMM & AARON PC 1500 LAWRENCE AVENUE OCEAN TOWNSHIP, NJ07712	$ 145,000	Person ☑ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions)
		$	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions)
		$	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions)
		$	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions)
		$	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions)
		$	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions)

Name of organization
THE ANSELL GRIMM & AARON FOUNDATION INC
C/O MICHAEL BENEDETTO ESQ

Employer identification number
26-0757646

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 ANSELL GRIMM & AARON FOUNDATION INC
C/O MICHAEL BENEDETTO ESQ

Employer identification number
26-0757646

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