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#### Form **990-PF**

#### **Return of Private Foundation**

OMB No 1545-0052

Department of the Treasury Internal Revenue Service

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.

		Revenue Service	<b>▶</b> In	formation ab	out For	n 990-F	PF and		ate instructions			v/form	990pf.	Or	en to Publi		
F	or ca	lendar year 2014	or ta	x year begi	nning			0	7/01, <b>2014</b>	, and end	ling				06/	30 <b>, 20</b> 1	. 5
_	Name	of foundation										A Emp	oloyer id	lentıfi	cation numb	er	
	THE	CORWIN FAM	LLY	FOUNDATI	ON, I	NC.					ŀ	26	-294	303	3		
	Numb	er and street (or P O	box nu	mber if mail is n	ot delivere	d to stree	et addres	ss)		Room/su	te i	B Tele	phone r	numb	er (see instru	ctions)	_
											-			(	)	-	
	P.0	. BOX 40									1						
_		r town, state or provir	ce, cou	intry, and ZIP or	foreign po	stal code	e			1							—
	•	•	·								],	C If exe	emption a	applica	tion is		
	MOR	RIS PLAINS,	NJ.T	07950							1	pend	ling, chec	k here			
		eck all that apply	<del></del>	Initial retu	řn.		Int	ıal return	of a former p	ublic cha	rity					٦,	$\neg$
G	CHE	ck all that apply	-	Final retur		-		ended re		Jubiic Cita	iity   i			-	ions, check her		
			$\vdash$	→ ' ' ' '		-									tions meeting there and attach	ie . [	$\neg$
_				Address c		2-1/21		me chang	<u> </u>			co	mputatio	n •		▶L	
H		eck type of organi					•	-			-	E lf pri	vate four	ndation	ı status was ter	minated [-	_
1		Section 4947(a)(1) i			· · · · · · · · · · · · · · · · · · ·				rivate founda			unde	er section	507(b	)(1)(A), check h	ere . 🕨	
١		market value o						od X C		crual	1				ın a 60-month t		
		of year (from Pa			1			)				unde	er section	507(b)	(1)(B), check h	ere . ► 🛴	
_		<u> </u>		135.		column	(d) mus	st be on ca	sh basis )						1000		
j	art	Analysis of Rev	enue/	and Expens	ses (The	(a)	Reven	ue and	(b) Not inv	actment	10	A Adus	tod no			ursements naritable	;
		total of amounts in may not necessar				e e	expense		(b) Net inve		(0)	inco.	sted ne me		l	poses	
_		column (a) (see ın					book								(cash b	asıs only)	
	1	Contributions, gifts, gran						50,000	<u> </u>								
	2			fation is <b>not re</b> q		L	<del></del>								<u></u>		
	3	Interest on savings a	nd temp	porary cash inve	stments.	ļ											
	4	Dividends and inte	rest fr	om securities				8,788	4	8,788.	_				ATCH	1	
	5a	Gross rents															
	b	Net rental income or	(loss)							_							
<u>a</u>	l	Net gain or (loss) fro	–		line 10		-	17,428	-								
Revenue		Gross sales price for assets on line 6a			,135.												
Š	7	Capital gain net in	come (	(from Part IV.	line 2) .												
ř	8	Net short-term car		-													
	9	Income modification	_							<del></del>							
	-	Gross sales less return	ıs İ										<del></del>				
	h	and allowances Less Cost of goods so															_
		Gross profit or (los		ach schedule)													
	11	Other income (atta						788.		788.						-	
	12	Total. Add lines 1					4	2,148.		9,576.	-						
_		Compensation of offi							<u> </u>	<u> </u>			1	F- '		<u> </u>	$\overline{}$
Se	14												_ <del>-</del>	•		<del></del>	$\overrightarrow{}$
JS.	14	Other employee sa		=					<del>                                     </del>				10				才
be	14 15 16a b c 17 18 19 20 21	Pension plans, em											++	<del>- ] /</del>	N 05	<del>2016  </del>	<del>}</del>
Ж	16a	Legal fees (attach						1,843.		1,843.			+++		<del></del> _		1.1
9	b	Accounting fees (a						_,	<del></del>	_,				<u></u>	73.1	llï	+
ativ	C 4-	Other professional					•	<del></del>	<del> </del>		-		<del></del>	<del></del>		<u> </u>	<u></u>
štr	17	Interest			_			162.		162.					-		—
ij	18	Taxes (attach sche							<u>'</u>	102.					· · · · · · · · · · · · · · · · · · ·		
Ē	19	Depreciation (attac							-								
Ad	20	Occupancy						<del></del>	<del> </del>								—
Þ	21	Travel, conference		-													
a	22	Printing and public								FF1							
ng	23 24 25	Other expenses (a						551.	<u> </u>	551.							
ati	24	Total operating ar	ıd adn	ninistrative ex	penses.			0 556	1	0 == -							
96		Add lines 13 throu	gh 23.			<u> </u>	<u>-</u>	2,556.		2,556.							<del>-</del>
O	25	Contributions, gifts	, gran	ts paid				32,935.	·							32,9	
	26	Total expenses and dish	ursemei	nts. Add lines 2	4 and 25		3	35,491.		2,556.				0		32,9	35
	27	Subtract line 26 fr	om line	e 12										- 1			_
	а	Excess of revenue over	expense	s and disburseme	ents			6,657.									
	b	Net investment in	come (	(if negative, er	nter -0-)					7,020.							
	_	Adjusted net inco	ne (ıf ı	negative enter	r-O-).												

JSA For Paperwork Reduction Act Notice, see instructions.  $^{4\text{E}14^{10}\,1\,000}$   $58496Y\ U600$ 

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Form 990-PF (2014)

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THE CORWIN FAMILY FOUNDATION, INC.

-	art II	Attached schedules and amounts in the description column should be for end-of-year	Beginning of year	End of	year		
Ĺ	art II	amounts only (See instructions )	(a) Book Value	(b) Book Value	(c) Fair Market Value		
	1	Cash - non-interest-bearing	2,396.	2,209.	2,209.		
	2	Savings and temporary cash investments	9,942.	6,347.	6,347.		
	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 ▶					
s	8	Inventories for sale or use					
Assets	9	Prepaid expenses and deferred charges					
As		Investments - U.S. and state government obligations (attach schedule)					
		Investments - corporate stock (attach schedule)	50,313.	76,731.	73,139.		
	l	Investments - corporate bonds (attach schedule)	196,408.	99,739.	99,655.		
	11	Investments - land, buildings, and equipment basis Less accumulated depreciation (attach schedule)					
	12	Investments - mortgage loans			<del></del>		
	13	Investments - other (attach schedule)		75,301.	80,785.		
	14	Land, buildings, and					
		equipment basis Less accumulated depreciation (attach schedule)		Ì			
	15	Other assets (describe					
	16	Total assets (to be completed by all filers - see the					
		instructions Also, see page 1, item i)	259,059.	260,327.	262,135.		
	17	Accounts payable and accrued expenses					
	18	Grants payable					
ဖွာ		Deferred revenue					
ij	20	Loans from officers, directors, trustees, and other disqualified persons					
Liabilities	21	Mortgages and other notes payable (attach schedule)					
Ë	22	Other liabilities (describe					
j	23	Total liabilities (add lines 17 through 22)	o	o			
		Foundations that follow SFAS 117, check here . ▶					
ces		and complete lines 24 through 26 and lines 30 and 31.					
an	24	Unrestricted	——————————————————————————————————————				
Bal	25	Temporarily restricted	<del></del>				
힏	26	Permanently restricted					
교		Foundations that do not follow SFAS 117, • X					
5		check here and complete lines 27 through 31.					
ş	24 25 26 27 28 29 30 31	Capital stock, trust principal, or current funds					
SS	28	Paid-in or capital surplus, or land, bldg , and equipment fund	259,059.	260,327.			
t A	29	Retained earnings, accumulated income, endowment, or other funds	259,059.	260,327.			
S	30	Total net assets or fund balances (see instructions)	239,039.	200,327.			
	31	Total liabilities and net assets/fund balances (see	259,059.	260,327.			
	out II	Analysis of Changes in Net Assets or Fund Balar	<del></del>	200,327.			
				ust passo with			
1		al net assets or fund balances at beginning of year - Part II			259,059.		
_		-of-year figure reported on prior year's return)			6,657.		
		er amount from Part I, line 27a		2	0,03/.		
3 Other increases not included in line 2 (itemize) ▶							
		lines 1, 2, and 3	• • • • • • • • • • • • • • • • • • • •	1 1	265,716. 5,389.		
		reases not included in line 2 (itemize)	Ino EV. Dod II actions (IV	5	260,327.		
0	10(8	al net assets or fund balances at end of year (line 4 minus	iine 5) - Part II, column (b)	, line 30 6	200,321.		

Page 3

Pa	art IV Capital Gains	and Losses for Tax on Inv	vestment Income			
		l (e g , real estate,	(b) How acquired	(c) Date acquired	(d) Date sold	
	2-story b	0 shs MLC Co)	P - Purchase D - Donation	(mo , day, yr )	(mo , day, yr )	
 1a	SEE PART IV SCHE	DULE				
b						
C						
d						
e						
	(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		(h) Gain or (lo (e) plus (f) mini	
a						
b				ļ	·	<del> ,</del>
_c						
d						
е				<u> </u>		
	Complete only for assets	showing gain in column (h) and own	ned by the foundation on 12/31/69	(1)	Gains (Col (h) g	ain 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 (j), ıf any		(k), but not less t Losses (from co	han -0-) <b>or</b>
a						
b						
_c					<u> </u>	
d						
е						
_		( )	If gain, also enter in Part I, line 7			
2	Capital gain net income		lf (loss), enter -0- in Part I, line 7	2		-17,428.
3	Net short-term capital ga	ain or (loss) as defined in sections	· · ·			
		• •	structions) If (loss), enter -0- in )			
		· · · · · · · · · · · · · · · · · · ·		3		-12,130.
Pa			educed Tax on Net Investment I	<del></del>	······································	
Wa		the section 4942 tax on the distri	ibutable amount of any year in the b	ase perioc	l?	Yes No
If "\	<del></del>	not qualify under section 4940(e)				
1		ount in each column for each ye	ar, see the instructions before making	ng any entr	ies	
Ca	(a) Base period years lendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of nonchantable-use assets		(d) Distribution ra (col (b) divided by	
	2013					
	2012					
	2011					
	2010					
	2009					
		-				
2	Total of line 1, column (d	)		2		
3			de the total on line 2 by 5, or by the			
			ess than 5 years	3		
	•		,			
4	Enter the net value of no	ncharitable-use assets for 2014 f	from Part X, line 5	4		
5	Multiply line 4 by line 3.			5		
6	Enter 1% of net investme	ent income (1% of Part I, line 27b)		6	·	
7	Add lines 5 and 6			7		
8	Enter qualifying distribution	ons from Part XII, line 4		8		
-	If line 8 is equal to or gi Part VI instructions	reater than line 7, check the box	c in Part VI, line 1b, and complete		using a 1% tax	rate See the

Page 4	
ns)	

Par	t VI: Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see i	nstru	ctions	s)
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)			
þ	Domestic foundations that meet the section 4940(e) requirements in Part V, check		1	40.
	here  and enter 1% of Part I, line 27b			
C	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of J			
	Part I, line 12, col (b)			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) 2			
3	Add lines 1 and 2		1	40.
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		1	40.
6	Credits/Payments			
а	2014 estimated tax payments and 2013 overpayment credited to 2014 6a			
b	Exempt foreign organizations - tax withheld at source 6b			
С	Tax paid with application for extension of time to file (Form 8868) 6c			
d	Backup withholding erroneously withheld			_
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 8			
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed ▶ 9		1	40.
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			
11	Enter the amount of line 10 to be Credited to 2015 estimated tax ▶ Refunded ▶ 11			
Par	t VII-A Statements Regarding Activities	. — т		
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it		Yes	No
	participate or intervene in any political campaign?	1a		_ <u>X</u>
þ	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see			v
	Instructions for the definition)?	1b		<u> </u>
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials	1		
	published or distributed by the foundation in connection with the activities	}	}	v
	Did the foundation file Form 1120-POL for this year?	1c		_X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year		}	
	(1) On the foundation ►\$ (2) On foundation managers ►\$			
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on	.		
	foundation managers > \$	i _		х
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		
	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			Х
	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		$\frac{x}{x}$
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		
b	If "Yes," has it filed a tax return on Form 990-T for this year?	4b		X
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		
_	If "Yes," attach the statement required by General Instruction T	i 1	Ì	
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  Control to the legislation that effectively amends the governing instrument so that no mandatory directions that	ا ۽ ا	X	
_	conflict with the state law remain in the governing instrument?	7	X	
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			
	Enter the states to which the foundation reports or with which it is registered (see instructions) ► NJ,	, }	}	
	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General			
O	•	8b	х	
Δ.	(or designate) of each state as required by General Instruction G? If "No," attach explanation	<u> </u>		
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,"	9	х	
	complete Part XIV	-	<del></del> -	
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their	10	х	
	names and addresses ATCH 6		0-PF (	2014)
	ГС		I [	20141

Form	990-PF (2014) THE CORWIN FAMILY FOUNDATION, INC. 26-29	43033		Page <b>5</b>
Pa	rt 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	e	1	
•	meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)	. 11		X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualifie	1	ļ	,,
	person had advisory privileges? If "Yes," attach statement (see instructions)	1	77	X
	Did the foundation comply with the public inspection requirements for its annual returns and exemption application		X	L
	Website address ► N/A	74 416	~~-	
14	Website address ► N/A  The books are in care of ► CHRISTOFER A.CORWIN  Located at ►PO BOX 40 MORRIS PLAINS, NJ  ZIP+4 ► 07950			
	Located at PO BOX 40 MORRIS FIRINS, No			7-7
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here	1	🏲	ـــا
4.0	and enter the amount of tax-exempt interest received or accrued during the year		Yes	No
16	At any time during calendar year 2014, did the foundation have an interest in or a signature or other author		163	X
	over a bank, securities, or other financial account in a foreign country?		l	
	"Yes," enter the name of the foreign country ▶	11		
Pai	t VII-B Statements Regarding Activities for Which Form 4720 May Be Required			Ь
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1 a	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 X No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a		İ	
	disqualified person? Yes X No			
	(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 X No		-	
	(5) Transfer any income or assets to a disqualified person (or make any of either available for			
	the benefit or use of a disqualified person)?			
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the	ł		ļ
	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)			
t	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulation			}
	section 53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	. 1b	<u> </u>	<del> </del>
	Organizations relying on a current notice regarding disaster assistance check here	.		
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that			x
_	were not corrected before the first day of the tax year beginning in 2014?			
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))	, [		
_	At the end of tax year 2014, did the foundation have any undistributed income (lines 6d and			
а	6e, Part XIII) for tax year(s) beginning before 2014?		1	ļ
	If "Yes," list the years ▶	<b> </b>		}
ь	Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2	,	1	
	(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			
	<b>&gt;</b>	ļ		
3 a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise			
	at any time during the year? Yes X No			
b	If "Yes," did it have excess business holdings in 2014 as a result of (1) any purchase by the foundation of	1 1		
	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	1 1		
	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)		<b> </b>	<del></del>
	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes'			X
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its			v
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2014'	) 4b		<u> X</u>

Pai	t VII-B Statements Regarding Activities	for Which Form	4720 May Be Red	uired (continued)			
5a	During the year did the foundation pay or incur any am	ount to					
•	(1) Carry on propaganda, or otherwise attempt to influ		n 4945(e))?	. Yes X No	,		
	(2) Influence the outcome of any specific public e				1	}	
	directly or indirectly, any voter registration drive?	•	•		,		
	(3) Provide a grant to an individual for travel, study, or				,		
	(4) Provide a grant to an organization other than			• — —			
	section 4945(d)(4)(A)? (see instructions)				,		
	(5) Provide for any purpose other than religious, of			• — —			
			•				
	purposes, or for the prevention of cruelty to children						
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 rega	=	•		5b		_
	Organizations relying on a current notice regarding dis-						
C	If the answer is "Yes" to question 5a(4), does the		•		} i		
	because it maintained expenditure responsibility for the	grant?	· · · · · · · · · · · ·	. Yes No	<b>)</b>		
	If "Yes," attach the statement required by Regulations se	ection 53 4945-5(d)					
6a	Did the foundation, during the year, receive any fu	nds, directly or indire	ectly, to pay premiui	ms			
	on a personal benefit contract?		. <i></i> .	Yes X No	<b>)</b>		
b	Did the foundation, during the year, pay premiums, dir	ectly or indirectly, on a	personal benefit contra	act? ,	6b	X	_
	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 X No	,		
	If "Yes," did the foundation receive any proceeds or ha				. 7b	}	
	Information About Officers, Director	rs, Trustees, Fou	ndation Manager	s, Highly Paid Em	oloyees,	<del></del>	-
	and Contractors List all officers, directors, trustees, foundation	managara and their		ingtoughtons			_
		(b) Title, and average	(c) Compensation (See	(d) Contributions to	(a) F		_
	(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	employee benefit plans and deferred compensation	(e) Expens other all	e account, owances	
							-
ATC	H 7	. [	C	d d			0
							-
		·		}			
							-
		· [					
		<del> </del>		<del> </del>			-
	0	<del></del>		ll			_
					16		Г
	Compensation of five highest-paid employees "NONE."	(other than thos	e included on lin	e 1 - see instructi	ons). If no	me, eme	
	"NONE."	т	e included on lin	(d) Contributions to			_
		(b) Title, and average hours per week	e included on line (c) Compensation	(d) Contributions to employee benefit	(e) Expens	e account,	_
	"NONE."	(b) Title, and average	<del></del>	(d) Contributions to		e account,	_
(a)	"NONE."  Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week	<del></del>	(d) Contributions to employee benefit plans and deferred	(e) Expens	e account,	_
(a)	"NONE."	(b) Title, and average hours per week	<del></del>	(d) Contributions to employee benefit plans and deferred	(e) Expens	e account,	_
(a)	"NONE."  Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week	<del></del>	(d) Contributions to employee benefit plans and deferred	(e) Expens	e account,	_
(a)	"NONE."  Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week	<del></del>	(d) Contributions to employee benefit plans and deferred	(e) Expens	e account,	_
(a)	"NONE."  Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week	<del></del>	(d) Contributions to employee benefit plans and deferred	(e) Expens	e account,	
(a)	"NONE."  Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week	<del></del>	(d) Contributions to employee benefit plans and deferred	(e) Expens	e account,	_
(a)	"NONE."  Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week	<del></del>	(d) Contributions to employee benefit plans and deferred	(e) Expens	e account,	
(a)	"NONE."  Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week	<del></del>	(d) Contributions to employee benefit plans and deferred	(e) Expens	e account,	
(a)	"NONE."  Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week	<del></del>	(d) Contributions to employee benefit plans and deferred	(e) Expens	e account,	
(a)	"NONE."  Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week	<del></del>	(d) Contributions to employee benefit plans and deferred	(e) Expens	e account,	

Page 7

' information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employ and Contractors (continued)	ees,
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	<del></del>
	<del></del>
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 relevant statistical information such as the number of organizations and other beneficianes served, conferences convened, research papers produced, etc.	Expenses
1_N/A	
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 NONE	
	<del></del>
2	
All other program-related investments. See instructions	<del></del>
3 NONE	
Total. Add lines 1 through 3	

. 26-2943033

Par	Minimum Investment Return (All domestic foundations must complete this part. Fore see instructions)	ign foundation	s,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc,		
	purposes		
	Average monthly fair market value of securities		157,250.
b	Average of monthly cash balances	1b	16,963.
c	Fair market value of all other assets (see instructions).	1c	111,051.
ď		1d	285,264.
е			
	1c (attach detailed explanation)	_	
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d  Cash deemed held for charitable activities Enter 1 1/2 % of line 3 (for greater amount, see	3	285,264.
4			4 050
	instructions)		4,279.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	280,985.
6	Minimum investment return. Enter 5% of line 5		14,049.
Par	<b>TXI</b> Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating four and certain foreign organizations check here ► X and do not complete this part)	ndations	
1	Minimum investment return from Part X, line 6	1	
2a	Tax on investment income for 2014 from Part VI, line 5 2a		
b		7	
С		2c	
3	Distributable amount before adjustments Subtract line 2c from line 1		
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4		
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII,		
	line 1	7	
Par	t XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes	T	
а	Expenses, contributions, gifts, etc - total from Part I, column (d), line 26	1a	32,935.
b		1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.		
	purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the		
а	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	32,935.
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	32,935.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when qualifies for the section 4940(e) reduction of tax in those years	calculating whet	ther the foundation

THE CORWIN FAMILY FOUNDATION, INC. 26-2943033 Form 990-PF (2014) Page 9 Part XIII Undistributed Income (see instructions) (a) (b) (c) Corpus Years prior to 2013 2013 Distributable amount for 2014 from Part XI, 2014 0 Undistributed income, if any, as of the end of 2014 Enter amount for 2013 only . . Total for pnor years 20 12 ,20 11 ,20 10 Excess distributions carryover, if any, to 2014 1,221 a From 2009 . . . . . . From 2010 . . . . . . c From 2011 . . . . . . **d** From 2012 . . . . . . 13,357 From 2013 . . . . . . 10,193. 24,771. Qualifying distributions for 2014 from Part XII. line 4 ▶ \$ a 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 d Applied to 2014 distributable amount .... e Remaining amount distributed out of corpus . . . 32,935. Excess distributions carryover applied to 2014 (If an amount appears in column (d), the same amount must be shown in column (a) ) Enter the net total of each column as indicated below: a Corpus Add lines 3f, 4c, and 4e Subtract line 5 57,706. **b** Pnor years' undistributed income Subtract line 4b from line 2b c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed . . . . . . . . d Subtract line 6c from line 6b Taxable amount - see instructions

e Undistributed income for 2013 Subtract line

Tarable amount - see 4a from line 2a Taxable amount - see instructions .....

Form 990-PF (2014)

10 Analysis of line 9

a Excess from 2010 . . .b Excess from 2011 . . .

c Excess from 2012 . . .

d Excess from 2013 . . .

e Excess from 2014 . . .

Excess distributions carryover to 2015.

Subtract lines 7 and 8 from line 6a . . . . . . .

13,357.

10,193.

32,935.

1,221.

56,485.

Page 10

Pа	Private Op	erating Foundations	(see instructions a	and Part VII-A, ques	stion 9)	
1 a	If the foundation has	received a ruling or d	etermination letter th	at it is a private ope	erating	
•	foundation, and the rulin-	g is effective for 2014, e	nter the date of the ruling	g	▶∟	
þ	Check box to indicate v		is a private operating		in section X 4942	(j)(3) or 4942(j)(5)
2 a	Enter the lesser of the ad-	Tax year	(1-) 0040	Prior 3 years	1,0044	(e) Total
	justed net income from Part I or the minimum investment return from Part X for each year listed	(a) 2014	(b) 2013	(c) 2012	(d) 2011	
h	85% of line 2a				<del></del>	<del> </del>
			· · · · · · · · · · · · · · · · · · ·			
C	Qualifying distributions from Part XII, line 4 for each year listed .	32,935.				32,935
d	Amounts included in line 2c not used directly for active conduct of exempt activities					
е	Qualifying distributions made directly for active conduct of exempt activities. Subtract line	20.025				20.025
	2d from line 2c	32,935.				32,935
3 a	Complete 3a, b, or c for the alternative test relied upon "Assets" alternative test - enter					
_	(1) Value of all assets	262,135.				262,135
	(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b	"Endowment" alternative test-			Ī		
	enter 2/3 of minimum invest-					
	ment return shown in Part X, line 6 for each year listed				İ	
С	"Support" alternative test - enter					
	(1) Total support other than gross investment income (interest, dividends, rents,					
	payments on securities loans (section 512(a)(5)), or royalties)					
	(2) Support from general public and 5 or more					
	exempt organizations as provided in section 4942 (j(3)(B)(iii)					
	(3) Largest amount of sup- port from an exempt organization					
	(4) Gross investment income					
Pa	rt XV Supplemer	ntary Information (	Complete this par	rt only if the foun	dation had \$5,000	or more in assets
	at any time	during the year - s				
	Information Regarding	-		4b 00/ -f 4b- 4-	4al	
а	List any managers of before the close of any	the foundation who rates tax year (but only if the	ey have contributed mo	re than 2% of the to more than \$5,000). (	tal contributions recei See section 507(d)(2) )	ved by the foundation
	N/A					
b	List any managers of ownership of a partner					y large portion of the
	N/A					
2	Information Regarding	g Contribution, Grant,	Gift, Loan, Scholars	hip, etc., Programs:		
	Check here ► X if the unsolicited requests for other conditions, comp	or funds If the founda	ation makes gifts, gr	to preselected cha ants, etc (see instru	ritable organizations ctions) to individuals o	and does not accep or organizations under
a	The name, address, a			the person to whom a	pplications should be ac	Idressed
	The form in which appl	ications should be sub	mitted and informati	on and materials they	/ should include	
					,	
C	Any submission deadling	nes				
d	Any restrictions or lift factors	mitations on awards,	such as by geogr	aphical areas, charit	able fields, kinds of	institutions, or other

Page **11** 

Part XV Supplementary Information (continued)								
3' Grants and Contributions Paid Durin Recipient Name and address (home or business)	ng the Year or Appr	oved for F	uture Payment					
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount				
Name and address (home or business)	or substantial contributor	recipient	contribution					
a Paid during the year								
		ļ						
ATCH 8								
	i							
		]						
		1						
		}						
	1							
				}				
Total	<u> </u>		▶ 3a	32,935.				
<b>b</b> Approved for future payment								
	ı							
			}					
	ļ							
	İ							
	Ì							
		}						
	}							
Total		• • • • •						

JSA 4E1491 1 000

Part XVI-A Analysis of Income-Prod Enter gross amounts unless otherwise indicated	i i	vities ated business income	Excluded by	y section 512, 513, or 514	(e)
•	(a) Business code	(b) Amount	(c)	(d) Amount	Related or exempt function income
Program service revenue	Dusiness code	Amount	Exclusion code	Amount	(See instructions)
a					
b			<del> </del>		<del></del>
d					
	ļ				
e				· · · · · · · · · · · · · · · · · · ·	
g Fees and contracts from government agencies	-		<del> </del>		
2 Membership dues and assessments					7.11
3 Interest on savings and temporary cash investments	•				· · · · · · · · · · · · · · · · · · ·
4 Dividends and interest from securities			14	8,788.	
5 Net rental income or (loss) from real estate					
a Debt-financed property					
b Not debt-financed property					<u>-                                      </u>
6 Net rental income or (loss) from personal property .	II.				
7 Other investment income	,				
8 Gain or (loss) from sales of assets other than inventor	y				
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory			<u> </u>		
11 Other revenue a					
b ATCH 9				-16,640.	
c	1				
d					
e					
2 Subtotal Add columns (b), (d), and (e)				-7,852.	
Total. Add line 12, columns (b), (d), and (e)		<i></i>		13	-7,852.
See worksheet in line 13 instructions to verify cale  Part XVI-B Relationship of Activitie				<del></del>	
Line No. Explain below how each active	ity for which	n income is reported in	n column (e	) of Part XVI-A contribu	
▼ accomplishment of the foundati	ion's exemp	t purposes (other than l	by providing	funds for such purposes	) (See instructions )
	•				
		-			
			-		
	- <del></del>			<del></del>	<u></u>
	•				
	<del></del>				
		4-0		·	
		41.0			

#### Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

				engage in any of the						Yes	Ņο
		, .	ode (other than	section 501(c)(3) org	anızatıons	s) or in secti	on 527, r	elating to poli	tical		
	-	zations?									
				a noncharitable exen							
	(1) Ca:	sh							<u>1a(1)</u>		X
	(2) Oth	ner assets							1a(2)		X
		transactions									
				npt organization							X
				ble exempt organization							X
				assets							X
											X
											X
				ıp or fundraısıng solici							X
				ts, other assets, or pa							X
				s," complete the follo							
				ces given by the rep							
	value ı		or sharing arrang	ement, show in colu	mn (d) th	e value of t	he goods,	, other assets,	or service	s rece	eived
(a) Lii	ne no	(b) Amount involved	(c) Name of n	oncharitable exempt organiz	zation		on of transfe	ers, transactions, a	nd sharing arra	ngeme	nts
		N/A				N/A					
			<u> </u>	··							
	-										
				<del>*</del>							
								<del></del>			
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						<del></del>					
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			<del>- </del>								
		· · · · ·		···							
			-		-						
2-	la tha	foundation disastly	or indicatly off	iliotod with or rolato	d to one	or more to					
		•	•	iliated with, or relate her than section 501(			•	_		es X	] No
		" complete the folk		nei than section 50 it	C)(3)) 01 11	ii section 52	′′			35 <u></u>	טאו נ
D		(a) Name of organization		(b) Type of orga	nization	····		c) Description of re	elationshin		
		(a) Harrie or organization	511	(b) Type of orga	inzadon -			c) Bescription of the	ciationsinp		
						<del></del>					
			1								
					<del></del> -						
			• 0				<del></del>	•			
				ed this return, including acco				the best of my kr	nowledge and b	elief, it	is true,
٥.	1	t, and complete Declaration	of preparer other than ta	expayer) is based on all informati	on of which pr	reparer has any kn	owledge				
Sign		~ lu	m/	12/26/15		Treasur	01		he IRS discus		
Here	Sign	nature of officer or trustee		Date		Title	<u> </u>		the preparer structions)? X	Yes	below No
	J.g.			<u> </u>	,			(300 1113		J . ~ ~ L	
		Print/Type preparer's n	ame	Preparer's signature		<u></u>	ate	Check	If PTIN		
Paid		KENNET	1	Kenne	16-1	$\nu$	12 66/1	self-employ	┛"┃_╻╻╻	3996	5
Prep	arer		ITHUMSMITH+1		<del>"</del>		····/		2-20270		
	Only	1 millo manno	65 SOUTH ST	STE 200				THINS LIN			
	J,		ORRISTOWN,	NJ	•	07960	-6497	Phone no 97	3-898-9	494	
								FROME NO. 57	Form 990		2014\
									I OHIL GOL	, l	20171

#### Schedule B

(Form 990, 990-EZ, or 990-PF) Department of the Treasury

#### **Schedule of Contributors**

1 Contributors

2014

OMB No 1545-0047

Internal Revenue Service

Name of the organization

► Attach to Form 990, Form 990-EZ, or Form 990-PF.

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

Employer identification number

THE CORWIN FAMILY FOUNDATION, INC. 26-2943033 Organization type (check one) Filers of: Section: 501(c)( Form 990 or 990-EZ ) (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 X For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions Special Rules For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 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 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 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

For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF.

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

Form 990-PF, Part I, line 2, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

Employer identification number 26-2943033

Part I	Contributors (see instructions). Use duplicate copies	Part I if additional space is needed			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
1_	ARTHUR B. CORWIN  PO BOX 40  MORRIS PLAINS, NJ 07950	\$20,936.	Person X Payroll Noncash (Complete Part II for noncash contributions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
2_	ARTHUR B. CORWIN  PO BOX 40  MORRIS PLAINS, NJ 07950	\$29,064.	Person X Payroll X Noncash (Complete Part II for noncash contributions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
		<b>(</b>	Person Payroll Noncash (Complete Part II for noncash contributions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
		•	Person Payroll Noncash (Complete Part II for noncash contributions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)		

Employer identification number 26-2943033

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
2	300 VANGUARD SECTOR INDEX FD INFO TECH		
		\$29,064.	_07/08/2014
(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
		\$	

Employer identification number

26-2943033

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 y								
	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) ▶ \$								
				ee instructions ) ►\$					
(a) No	Use duplicate copies of Part III if addit	ional space is neede	ed.						
(a) No. from	(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held					
Part I									
		(e) Transf	or of nift						
		(e) ITalisi	er or gint						
	Transferee's name, address, ar	nd ZIP + 4	Relatio	nship of transferor to transferee					
(a) No. from	(h) Durmon of gift	(a) Haa	of -iff	(d) Description of how wife in held					
Part I	(b) Purpose of gift	(c) Use	or girt	(d) Description of how gift is held					
	(e) Transfer of gift								
		1 mm - 4	Polationahin of transferor to transferor						
	Transferee's name, address, ar	10 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, an	nd ZIP + 4	Relation	ship of transferor to transferee					
(a) No.									
(a) No. from	(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held					
Part I		<del></del>							
		(e) Transfe	er of gift						
		.,	J						
	Transferee's name, address, an	d ZIP + 4	Relation	ship of transferor to transferee					

FORM 990-PF - PART IV
CAPITAL GAINS AND LOSSES FOR TAX ON INVESTMENT INCOME

•		INS AND LC				P	Date	Date sold
Kind of F				ription	r <del>-</del>	D	acquired	
Gross sale price less expenses of sale	Depreciation allowed/ allowable	Cost or other basis	FMV as of 12/31/69	Adj basis as of 12/31/69	Excess of FMV over adj basis		Gain or (loss)	
		GENERAL ELE		פשדי		Р	08/18/2014	05/14/2015
13,355.		13,255.	II. DECORT	.115			100.	
		LINN ENERGY PROPERTY TY		ries		Р	07/16/2013	05/14/2015
5,058.		10,215.					<b>-5,157</b> .	
		SEADRILL LT		'IES		Р	06/02/2014	11/28/2014
7,240.		19,470.	- nown				-12,230.	05/00/004
30,482.		ISHARES TIPS PROPERTY TY 30,623.		TIES		P	10/13/2010 -141.	07/08/2014
30,462.		SLM CORP NT	S SER MTNA			D	08/02/2004	07/25/2014
30,000.		PROPERTY TY		'IES			00, 02, 2001	0172072019
33,333								
OTAL GAIN(I	oss)			• • • • • • • • • • • • • • • • • • • •			-17,428.	
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}								
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		L.,				Ц		

# FORM 990PF, PART I - DIVIDENDS AND INTEREST FROM SECURITIES

NET INVESTMENT INCOME	4,511. 4,277.	8,788.
REVENUE AND EXPENSES PER BOOKS	4,511.	8,788.
		TOTAL
DESCRIPTION	DIVIDEND INCOME INTEREST INCOME	

- OTHER INCOME PART I FORM 990PF, REVENUE AND

NET INVESTMENT INCOME

788.

788.

788.

EXPENSES PER BOOKS

TOTALS

DESCRIPTION MISCELLANEOUS INCOME

797700

ATTACHMENT 2

V 14-7.8F

58496Y U600

FEES
ACCOUNTING
1
Н
PART
990PF,
FORM

CHARITABLE PURPOSES		
ADJUSTED NET INCOME		
NET INVESTMENT INCOME	1,843.	1,843.
REVENUE AND EXPENSES PER BOOKS	1,843.	1,843.
		TOTALS
DESCRIPTION	ACCOUNTING FEES	

### - TAXES PART I FORM 990PF,

REVENUE AND EXPENSES PER BOOKS

NET INVESTMENT INCOME

FEDERAL EXCISE TAX

DESCRIPTION

162.

TOTALS

162.

162.

162.

26-2943033

ATTACHMENT 5

797700

## PART I - OTHER EXPENSES FORM 990PF,

		Н	INCOME		105.	
REVENUE	AND	EXPENSES	PER BOOKS	296.	105.	150.
			DESCRIPTION	OFFICE EXPENSE AND POSTAGE	NJ ANNUAL REPORT	BANK CHARGES/FEES

551.

TOTALS

551.

THE CORWIN FAMILY FOUNDATION, INC.

FORM 990PF, PART VII-A, LINE 10 - NEW SUBSTANTIAL CONTRIBUTORS

ATTACHMENT 6

NAME AND ADDRESS

07950 ARTHUR B. CORWIN PO BOX 40 MORRIS PLAINS, NJ

ARTHUR B. CORWIN PO BOX 40 MORRIS PLAINS, NJ

07950

FORM 990PF, PART VIII - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES

NAME AND ADDRESS	TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION	COMPENSATION	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	EXPENSE ACCT AND OTHER ALLOWANCES
ARTHUR CORWIN P.O. BOX 40 MORRIS PLAINS, NJ 07950	PRESIDENT	0	0	0
ANN CORWIN P.O. BOX 40 MORRIS PLAINS, NJ 07950	VICE PRESIDEMNT	0	0	0
CHRISTOPHER CORWIN P.O. BOX 40 MORRIS PLAINS, NJ 07950	TREASURER	0	0	0
MARK CORWIN P.O. BOX 40 MORRIS PLAINS, NJ 07950	SECRETARY	0	0	0

GRAND TOTALS

V 14-7.8F

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INC.
FOUNDATION,
FAMILY
CORWIN
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26-2943033

FORM 990PF, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR

PURPOSE OF GRANT OR CONTRIBUTION	CHARITABLE 15,463.	CHARITABLE 1,677.	CHARITABLE 1,000.	CHARITABLE 335.	10,000.	CHARITABLE 100.
AND FOUNDATION STATUS OF RECIPIENT	N/A	N/A	N/A	N/A	N/A	N/A
RECIPIENT NAME AND ADDRESS	HOMELESS SOLUTIONS STREET MORRISTOWN, NJ 07960	INTERFAITH FOOD PANTRY STREET MORRISTOWN, NJ 07960	NEW JERSEY HEROES STREET MORRISTOWN, NJ 07960	ASSUMPTION CHURCH STREET MORRISTOWN, NJ 07960	SUNY FARMINGDALE ALUMNI ASSOCIATION STREET LONG ISLAND, NY 07960	PAUL PICOLI MEMORIAL FUND STREET MORRISTOWN, NJ 07960

INC
FOUNDATION,
FAMILY
CORWIN
THE

26-2943033

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THE	
PAID DURING	
PAID	
GRANTS AND CONTRIBUTIONS	
CONTR	
AND	
GRANTS	
-1	
PART XV	
990PF,	
FORM	

ATTACHMENT 8 (CONT'D)		AMOUNT		312.	1,150.	2,000.	.898
		PURPOSE OF GRANT OR CONTRIBUTION	CHARITABLE	CHARITABLE	CHARITABLE	CHARITABLE	CHARITABLE
	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND	FOUNDATION STATUS OF RECIPIENT	N/A	N/A	N/A	N/A	N/A
		RECIPIENT NAME AND ADDRESS	ASSUMPTION CHURCH SIREET MORRISTOWN, NJ 07960	JOYS FOR TOTS STREET MORRISTOWN, NJ 07960	INTERFAITH FOOD PANTRY STREET MORRISTOWN, NJ 07960	CORNELIA CONNELY CENTER STREET MORRISTOWN, NJ 07960	HOMELESS SOLUTIONS STREET MORRISTOWN, NJ 07960

TOTAL CONTRIBUTIONS PAID

32,935.

ATTACHMENT 8

58496Y U600

V 14-7.8F

797700

RELATED OR EXEMPT

ATTACHMENT 9

FORM 990-PF, PART XVI-A - ANALYSIS OF OTHER REVENUE

THE CORWIN FAMILY FOUNDATION, INC.

FUNCTION INCOME

797700

ATTACHMENT	AMOUNT	-17,428. 788.	-16,640.				
	EXCLUSION	188					
	AMOUNT						
	BUSINESS						
TOWN NOT THE WAY TO THE TOTAL OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY O	DESCRIPTION	LOSS ON SALE OF SECURITIES MISCELLANEOUS INCOME	TOTALS				

#### SCHEDULE D (Form 1041)

the lines below

to whole dollars

**Capital Gains and Losses** 

► Attach to Form 1041, Form 5227, or Form 990-T.

▶ Use Form 8949 to list your transactions for lines 1b, 2, 3, 8b, 9 and 10.

(d) Proceeds

(sales pnce)

(e) Cost

(or other basis)

OMB No 1545-0092

Department of the Treasury Internal Revenue Service Name of estate or trust

THE CORWIN FAMILY FOUNDATION, INC. Note: Form 5227 filers need to complete only Parts I and II

See instructions for how to figure the amounts to enter on

This form may be easier to complete if you round off cents

1a Totals for all short-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions) However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 1b.

Short-Term Capital Gains and Losses - Assets Held One Year or Less

▶ Information about Schedule D and its separate instructions is at www.irs.gov/form1041.

Employer identification number 26-2943033 (h) Gain or (loss) (g) Adjustments Subtract column (e) to gain or loss from Form(s) 8949, Part I, from column (d) and combine the result with column (g) line 2, column (g)

	Totals for all transactions reported on Form(s) 8949 with Box A checked	20,595.	32,725.			-12,130.
2	Totals for all transactions reported on Form(s) 8949 with Box B checked					
3	Totals for all transactions reported on Form(s) 8949 with Box C checked					
4	Short-term capital gain or (loss) from Forms 4684, 62	252, 6781, and 8824			4	
5 6	Net short-term gain or (loss) from partnerships, S cor Short-term capital loss carryover Enter the amour Carryover Worksheet	5	( )			
7	Net short-term capital gain or (loss). Combine line line 17, column (3) on the back	es 1a through 6 in	column (h) Enter	here and on	7	-12,130.
Pa	rt    Long-Term Capital Gains and Losses - Ass	ets Held More Tha	n One Year			
the This	Instructions for how to figure the amounts to enter on lines below  form may be easier to complete if you round off cents thole dollars	s from Part II,	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)			
8a	Totals for all long-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions) However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 8b.					
86	Totals for all transactions reported on Form(s) 8949 with Box D checked	65,540.	70,838.			-5,298.
9	Totals for all transactions reported on Form(s) 8949 with Box E checked		-			
10	Totals for all transactions reported on Form(s) 8949 with Box F checked					
11	Long-term capital gain or (loss) from Forms 2439, 46	11				
12	Net long-term gain or (loss) from partnerships, S corp	12				
13	13 Capital gain distributions					
14						
15	Long-term capital loss carryover Enter the amount, if any, from line 14 of the 2013 Capital Loss Carryover Worksheet					()
16	Net long-term capital gain or (loss). Combine lines line 18a, column (3) on the back	16	-5,298.			
For Paperwork Reduction Act Notice, see the Instructions for Form 1041.						e D (Form 1041) 2014

Sche	dule D (Form 1041) 2014	,		Page
Pa	t III Summary of Parts I and II	(1) Beneficiaries'	(2) Estate's	(3) Total
	<ul> <li>Caution: Read the instructions before completing this part.</li> </ul>	(see instr)	or trust's	
17	Net short-term gain or (loss)			-12,130.
18	Net long-term gain or (loss):			
	Total for year			-5,298.
b	Unrecaptured section 1250 gain (see line 18 of the wrksht) 18b			
С	28% rate gain		<u> </u>	17.400
19	Total net gain or (loss). Combine lines 17 and 18a ▶ 19			-17,428.
gains nece.	e: If line 19, column (3), is a net gain, enter the gain on Form 1041, line 4 (or Fo , go to Part V, and <b>do not</b> complete Part IV If line 19, column (3), is a net los ssary	orm 990-T, Part I, line 4 s, complete Part IV an	fa) If lines 18a and 1 d the <b>Capital Loss C</b> a	9, column (2), are ne i <b>rryover Worksheet,</b> a
Pai	t IV Capital Loss Limitation			
20	Enter here and enter as a (loss) on Form 1041, line 4 (or Form 990-T, Part I,			2.000
a	The loss on line 19, column (3) or b \$3,000	4 / 00 / 5 00	<u>  20  (</u>	3,000.
Loss	: If the loss on line 19, column (3), is more than \$3,000, or if Form 1041, page Carryover Worksheet in the instructions to figure your capital loss carryover	1, line 22 (or Form 99	0-1, IINE 34), IS a IOSS	, сотрієте тле <b>Сарт</b> а
Pai		· <del></del>	· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·
	1 1041 filers. Complete this part only if both lines 18a and 19 in column	(2) are gains, or an a	mount is entered in	Part I or Part II an
	e is an entry on Form 1041, line 2b(2), and Form 1041, line 22, is more tha			
	ion: Skip this part and complete the Schedule D Tax Worksheet in the instru	ctions if		
	ther line 18b, col (2) or line 18c, col (2) is more than zero, or			
	oth Form 1041, line 2b(1), and Form 4952, line 4g are more than zero			
	n 990-T trusts. Complete this part only if both lines 18a and 19 are ga			
	orm 990-T, <b>and</b> Form 990-T, line 34, is more than zero. Skip this part and oner line 18b, col. (2) or line 18c, col. (2) is more than zero.	complete the <b>Scheat</b>	ile D Tax Worksnee	et in the instruction
		·		
21	Enter taxable income from Form 1041, line 22 (or Form 990-T, line 34).	. 21		
22	Enter the smaller of line 18a or 19 in column (2)			
•-	but not less than zero	_		
23	Enter the estate's or trust's qualified dividends			
	from Form 1041, line 2b(2) (or enter the qualified			
	dividends included in income in Part I of Form 990-T) 23			
24	Add lines 22 and 23			
25	If the estate or trust is filing Form 4952, enter the			
	amount from line 4g, otherwise, enter -0 ▶ 25			
26	Subtract line 25 from line 24 If zero or less, enter -0			
27	Subtract line 26 from line 21 If zero or less, enter -0	. 27		
28	Enter the smaller of the amount on line 21 or \$2,500			
29	Enter the <b>smaller</b> of the amount on line 27 or line 28			
30	Subtract line 29 from line 28 If zero or less, enter -0- This amount is taxed		▶ 30	
31	Enter the smaller of line 21 or line 26			
32	Subtract line 30 from line 26			
33	Enter the <b>smaller</b> of line 21 or \$12,150			
34	Add lines 27 and 30			
35	Subtract line 34 from line 33 If zero or less, enter -0			
36	Enter the <b>smaller</b> of line 32 or line 35			
37	Multiply line 36 by 15%		▶ 37	
38	Enter the amount from line 31			
39	Add lines 30 and 36			
40	Subtract line 39 from line 38 If zero or less, enter -0-			
41	Multiply line 40 by 20%		▶ 41	
42	Figure the tax on the amount on line 27. Use the 2014 Tax Rate Schedule for Estate			
	and Trusts (see the Schedule G instructions in the instructions for Form 1041)			
43	Add lines 37, 41, and 42			
44	Figure the tax on the amount on line 21 Use the 2014 Tax Rate Schedule for Estates			
	and Trusts (see the Schedule G instructions in the instructions for Form 1041)			
45	Tax on all taxable income. Enter the smaller of line 43 or line 44 here a	and on Form 1041,	Schedule	

Schedule D (Form 1041) 2014