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### Form **990-PF**

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

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

OMB No 1545-0052

Department of the Treasur, Internal Revenue Service

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

| For calendar year 2014 or tax year beginning SEI  | 2014                               | , and ending              | AUG 31, 2015   |                           |
|---|------------------------------------|---------------------------|--|---------------------------|
| Name of foundation  |                                    |                           | A Employer identification                              | number                    |
| ROHOVSKY FAMILY FOUNDATION  |                                    |                           |  |                           |
| C/O PORZIO, BROMBERG & NEW  |                                    |                           | 30-0122160   |                           |
| Number and street (or P O box number if mail is not delivered to street   | · ·                                | Room/suite                | B Telephone number                                     |                           |
| 100 SOUTHGATE PARKWAY, PO   |                                    |                           | 973-538-40   |                           |
| City or town, state or province, country, and ZIP or foreign  |                                    |                           | C If exemption application is p                        | enaing, cneck nere        |
| MORRISTOWN, NJ 07962-1997   |                                    |                           |  |                           |
| G Check all that apply: Initial return  | Initial return of a for            | rmer public charity       | D 1 Foreign organizations                              | s, check here             |
| Final return  | Amended return                     |                           | 2 Foreign organizations me<br>check here and attach co | eeting the 85% test.      |
| Address change  | Name change                        |                           | check here and attach co                               | pmputation                |
| H Check type of organization: X Section 501(c)(3) e   |                                    |                           | E If private foundation sta                            |                           |
| Section 4947(a)(1) nonexempt charitable trust   | Other taxable private foundate     |                           | under section 507(b)(1)                                |                           |
| I Fair market value of all assets at end of year J Accoun   | _                                  | Accrual                   | F If the foundation is in a                            |                           |
| , , , , ,   | other (specify)                    | 2010 )                    | under section 507(b)(1)                                | (B), check here           |
| Part   Analysis of Revenue and Expenses   | i i                                |                           | (-) Administration                                     | (d) Disbursements         |
| (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a)  | (a) Revenue and expenses per books | (b) Net investment income | (c) Adjusted net                                       | for charitable purposes   |
|   | 15,350.                            |                           | N/A  | (cash basis only)         |
| 1 Contributions, gifts, grants, etc , received 2 Check I if the foundation is not required to attach Sch B  | 13,330.                            |                           | IN/A   |                           |
| Interest on savings and temporary   | 3.                                 | 3.                        |  | STATEMENT 1               |
| cash investments     Dividends and interest from securities   | 25,245.                            | 25,245.                   |  | STATEMENT 2               |
| 5a Gross rents  | 23,213.                            | 23,2131                   |  | DITTI BILLIA              |
| b Net rental income or (loss)   |                                    |                           |  |                           |
| 62 Net gain or (least) from agin of agents not on line 10   |                                    |                           |  | =13.750                   |
| Gross sales price for all assets on line 6a   |                                    |                           | REU  | CIVEU                     |
| Gross sales price for all assets on line 6a  7 Capital gain net income (from Part IV, line 2)   |                                    | 0.                        | 4  | SS                        |
| 8 Net short-term capital gain   |                                    |                           | N DEC  | 2 3 2015                  |
| 9 Income modifications  |                                    |                           | - 050  | 38                        |
| 10a Gross sales less returns and allowances   |                                    |                           | 1 200  | F- K                      |
| 10a and allowances  b Less Cost of goods sold   |                                    |                           | UGU  | E'V U                     |
| c Gross profit or (loss)  |                                    |                           |  |                           |
| 11 Other income 12 Total Add lines 1 through 11   |                                    |                           |  |                           |
| 2 12 Total Add lines 1 through 11   | 40,598.                            | 25,248.                   |  | ļ                         |
| Compensation of officers, directors, trustees, etc  | 0.                                 | 0.                        |  | 0.                        |
| 14 Other employee salaries and wages  |                                    |                           |  |                           |
| 15 Pension plans, employee benefits   |                                    | <del></del>               |  |                           |
| 16a Legal fees  |                                    |                           |  |                           |
| b Accounting fees   |                                    | <del></del>               |  |                           |
| c Other professional fees   |                                    |                           |  |                           |
| 17 Interest   | 401                                |                           |  |                           |
| 16a Legal fees b Accounting fees c Other professional fees 17 Interest 18 Taxes STMT 3 19 Depreciation and depletion 20 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications | 491.                               | 0.                        |  | 0.                        |
| 19 Depreciation and depletion   |                                    |                           | <u> </u>   |                           |
| 20 Occupancy  |                                    |                           |  |                           |
| 21 Travel, conferences, and meetings  |                                    |                           |  |                           |
| 22 Printing and publications  | 147.                               | 147.                      |  |                           |
| 23 Other expenses STMT 4  | 14/•                               | 14/•                      | <del></del>  | 0.                        |
| 23 Other expenses STMT 4  24 Total operating and administrative expenses Add lines 13 through 23  | 638.                               | 147.                      |  | 0.                        |
| expenses Add lines 13 through 23 Contributions, gifts, grants paid  | 40,331.                            |                           |  | 40,331.                   |
| 26 Total expenses and disbursements   | ±0,331.                            | <del></del>               |  | ±0,331.                   |
| Add lines 24 and 25   | 40,969.                            | 147.                      |  | 40,331.                   |
| 27 Subtract line 26 from line 12  | =0,000.                            |                           |  |                           |
| a Excess of revenue over expenses and dispursements   | <371.                              | >                         |  |                           |
| b Net investment income (if negative, enter -0-)  | 37,1                               | 25,101.                   |  |                           |
| c Adjusted net income (if negative, enter -0-)  |                                    |                           | N/A  |                           |
| 423501<br>11-24-14 LHA For Paperwork Reduction Act Notice, se   | e instructions                     |                           |  | Form <b>990-PF</b> (2014) |

ROHOVSKY FAMILY FOUNDATION, INC. C/O PORZIO, BROMBERG & NEWMAN, P.C. 30-0122160 Page 2 Beginning of year End of year Part II Balance Sheets Attached schedules and amounts in the describuon column should be for end-of-year amounts only (a) Book Value (b) Book Value (c) Fair Market Value <47.b <309.5 <309.> 1 Cash - non-interest-bearing 199. 90. 90. 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 7 Other notes and loans receivable Less; allowance for doubtful accounts 8 Inventories for sale or use 423. 9 Prepaid expenses and deferred charges 10a Investments - U.S. and state government obligations 501,764. STMT 5 501,764. 832,475. **b** Investments - corporate stock c Investments - corporate bonds 11 Investments - land, buildings, and equipment basis Less accumulated depreciation 12 Investments - mortgage loans 13 Investments - other 14 Land, buildings, and equipment: basis Less accumulated depreciation 15 Other assets (describe ▶ 16 Total assets (to be completed by all filers - see the 502,339. 501,545. 832,256. instructions Also, see page 1, item I) 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 22 Other liabilities (describe 23 Total liabilities (add lines 17 through 22) 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  $\triangleright X$ Foundations that do not follow SFAS 117, check here and complete lines 27 through 31 502,426. 502,339. 27 Capital stock, trust principal, or current funds Net Assets 0. 28 Paid-in or capital surplus, or land, bldg, and equipment fund <87.b <371 29 Retained earnings, accumulated income, endowment, or other funds 30 Total net assets or fund balances 502,339. 501,968 502,339. 501,968 31 Total liabilities and net assets/fund balances

#### Part III Analysis of Changes in Net Assets or Fund Balances

| 1 T | otal 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 | 502,339. |
|     | inter amount from Part I, line 27a   | 2 | <371.>   |
| 3 0 | Other increases not included in line 2 (itemize)   | 3 | 0.       |
| 4 A | add lines 1, 2, and 3  | 4 | 501,968. |
| 5 D | Decreases not included in line 2 (itemize) MISC. BOOK ADJUSTMENT                                     | 5 | 423.     |
| 6 T | otal net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30 | 6 | 501,545. |

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| (a) List and describ  | nd Losses for Tax or<br>be the kind(s) of property sold<br>shouse, or common stock, 200 | (e g , real estate,    | Income                               | P        | low acq  | ase   '        | c) Date acquired (mo., day, yr)      | (d) Date sold<br>(mo., day, yr.)                 |
|---|---|------------------------|--------------------------------------|----------|----------|----------------|--------------------------------------|--|
| <del></del>   |   |                        | <del></del>                          | <u> </u> | - Donati | 1011           |                                      | ,          |
| b NON   | IE  |                        | ·                                    |          | -        |                |                                      | <del>                                     </del> |
| C   |   | <del></del>            |                                      | †        |          |                |                                      |  |
| d   |   |                        |                                      |          |          |                |                                      |  |
| e   |   |                        |                                      |          |          |                |                                      |  |
| (e) Gross sales price   | (f) Depreciation allowed (or allowable)   |                        | st or other basis<br>expense of sale |          |          |                | (h) Gain or (lo<br>(e) plus (f) minu |  |
| a   |   |                        |                                      |          |          |                |                                      |  |
| b   |   |                        |                                      |          |          |                |                                      |  |
| C   |   |                        |                                      |          |          |                | ·                                    |  |
| d<br>e  |   |                        |                                      |          |          |                |                                      |  |
| Complete only for assets showing  | gain in column (h) and owned  | by the foundation      | on 12/31/69                          |          |          | <u>(1) (</u>   | Gains (Col (h) ga                    | un minus   |
|   | (j) Adjusted basis  |                        | cess of col. (I)                     |          |          | còl (          | (k), but not less t                  | han -0-) <b>or</b>                               |
| (i) F M.V as of 12/31/69  | as of 12/31/69  |                        | col. (j), if any                     |          |          |                | Losses (from co                      | l. (h))  |
| a   |   |                        |                                      |          |          |                |                                      |  |
| b   |   |                        |                                      |          |          |                |                                      |  |
| С   |   |                        |                                      |          |          |                |                                      |  |
| d   |   |                        |                                      |          |          |                |                                      |  |
| e   |   |                        |                                      |          |          |                |                                      | -·· - <del>··</del>                              |
| O Constal and and an area of fact and   | If gain, also   | enter in Part I, line  | 7                                    | }        |          |                |                                      |  |
| 2 Capital gain net income or (net cap   |   | er -0- in Part I, line | /                                    | J        | 2        |                |                                      |  |
| 3 Net short-term capital gain or (loss<br>If gain, also enter in Part I, line 8, c  |   | 5) and (6)             |                                      | 7        |          |                |                                      |  |
| If (loss), enter -0- in Part I, line 8  | otanin (c).   |                        |                                      | •        | 3        |                |                                      |  |
|   | nder Section 4940(e)  | for Reduced            | Tax on Ne                            | t Inv    | estm     | ent Inco       | ome                                  |  |
| If section 4940(d)(2) applies, leave thi  Was the foundation liable for the secti  If "Yes," the foundation does not qualif  Enter the appropriate amount in ea | on 4942 tax on the distributably  | ot complete this pa    | art .                                |          | S        |                | -                                    | Yes X No   |
| (a)<br>Base period years  | (b)   |                        |                                      | (c       |          |                | Dis                                  | (d)<br>tribution ratio                           |
| Calendar year (or tax year beginnin   | g in) Adjusted qualifyin  | •                      | Net value of n                       | oncha    |          |                | (col. (b)                            | divided by col (c))                              |
| 2013  |   | 34,512.                |                                      |          |          | 1,439          |                                      | .04053   |
| 2012  |   | 28,848.                |                                      |          |          | 3,281          |                                      | .04131   |
| 2011<br>2010  |   | 27,474.<br>27,143.     |                                      |          |          | 2,328<br>2,622 |                                      | .04718   |
| 2009  |   | 25,474.                |                                      |          |          | 2,346          |                                      | .04697   |
| 2000  |   | 23,1711                | !                                    |          | <u> </u> | <u> </u>       | <u> </u>                             | •0±057   |
| 2 Total of line 1, column (d)   |   |                        |                                      |          |          |                | 2                                    | .22424   |
| 3 Average distribution ratio for the 5  | -year base period - divide the t  | total on line 2 by 5,  | , or by the numbe                    | r of y   | ears     |                |                                      |  |
| the foundation has been in existen  | ce if less than 5 years   |                        | -                                    |          |          |                | 3                                    | .04484   |
|   |   |                        |                                      |          |          |                |                                      |  |
| 4 Enter the net value of noncharitable  | e-use assets for 2014 from Pa   | rt X, line 5           |                                      |          |          |                | 4                                    | 903,993  |
|   |   |                        |                                      |          |          |                |                                      |  |
| 5 Multiply line 4 by line 3   |   |                        |                                      |          |          |                | 5                                    | 40,542   |
| C. Enter 19/ of not investment incom  | o /19/ of Dort L line 97h)  |                        |                                      |          |          |                |                                      | 251  |
| 6 Enter 1% of net investment incom  | e (1% 01 Part 1, tille 270)   |                        |                                      |          |          |                | 6                                    | 251  |
| 7 Add lines 5 and 6   |   |                        |                                      |          |          |                | 7                                    | 40,793   |
| , , , , a mos o and o   |   |                        |                                      |          |          |                | -'                                   | 10,175   |
| 8 Enter qualifying distributions from   | Part XII, line 4  |                        |                                      |          |          |                | 8                                    | 40,331   |
| If line 8 is equal to or greater than   |   | I, line 1b, and com    | plete that part usi                  | ing a    | 1% tax r | ate            |                                      |  |
| See the Part VI instructions.   |   |                        |                                      |          |          |                |                                      |  |

ROHOVSKY FAMILY FOUNDATION, INC. C/O PORZIO, BROMBERG & NEWMAN, P.C Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see 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% 502. of Part I, line 27b c All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, col. (b). 2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 3 3 Add lines 1 and 2 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 4 5 Tax based on investment income Subtract line 4 from line 3. If zero or less, enter -0-5 6 Credits/Payments: 457 a 2014 estimated tax payments and 2013 overpayment credited to 2014 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 457. 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 45. 9 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 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 X any political campaign? 1a b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definition)? 1b X 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? X 10 d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year 0 • (2) On foundation managers ► \$ (1) On the foundation ► \$ e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers > S 0. 2 Has the foundation engaged in any activities that have not previously been reported to the IRS? 2 Х If "Yes." attach a detailed description of the activities 3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes Х 3 Х 4a 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? N/A 4b Х 5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? If "Yes," attach the statement required by General Instruction T 6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either · By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument? Х 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 X

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X

X

8b

8a Enter the states to which the foundation reports or with which it is registered (see instructions)

of each state as required by General Instruction G? If "No," attach explanation

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)

10 Did any persons become substantial contributors during the tax year? If "yes " a "acn a schedule listing their names and addresses

year 2014 or the taxable year beginning in 2014 (see instructions for Part XIV)? If "Yes, " complete Part XIV

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

ROHOVSKY FAMILY FOUNDATION, INC.

|    | 990-PF (2014) C/O PORZIO, BROMBERG & NEWMAN, P.C. 30-01   | <u> 22160</u> |  | Page 5   |
|----|---|---------------|--|----------|
| Pa | art 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  | 1             |  |          |
|    | 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 disqualified person had advisory privileges?                              |               |  |          |
|    | If "Yes," attach statement (see instructions)   | 12            | 1  | X        |
| 13 | Did the foundation comply with the public inspection requirements for its annual returns and exemption application?   | 13            | X  |          |
|    | Website address ► N/A   |               |  |          |
| 14 | The books are in care of ▶ PORZIO, BROMBERG & NEWMAN, P.C. Telephone no. ▶973—  |               |  |          |
|    | ·   | <u>07962</u>  | 2-19   | 97       |
| 15 | Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here   | _             | ▶  | ·L       |
|    | and enter the amount of tax-exempt interest received or accrued during the year  15   |               | I/A  |          |
| 16 | At any time during calendar year 2014, did the foundation have an interest in or a signature or other authority over a bank,  | 1             | Yes  | No       |
|    | securities, or other financial account in a foreign country?  | 16            |  | <u>X</u> |
|    | See the instructions for exceptions and filing requirements for FinCEN Form 114, (formerly TD F 90-22.1). If "Yes," enter the name of the                               |               |  |          |
| D  | foreign country   |               |  | <u> </u> |
| Pa | art VII-B   Statements Regarding Activities for Which Form 4720 May Be Required   |               | V  | NI.      |
|    | File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.   |               | Yes  | No       |
| 18 | 1 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 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 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 )  | .             |  |          |
| 1  | 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  | ] [           |  |          |
|    | 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            |  | X        |
| 2  | Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation  | i"            |  |          |
|    | 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 X N  | <b>5</b>      |  |          |
|    | If "Yes," list the years  |               | }  | ]        |
|    | Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect                                   | İ             |  |          |
|    | 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.)  N/A   | 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.  |               |  |          |
|    | a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time   |               |  |          |
| 3  |   |               |  |          |
|    | during the year?  L Yes [X] N  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)  N/A  | 3 в           |  |          |
| 4  | a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?   | 4a            | 1  | Х        |
|    | b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that                                | 14            | <del>                                     </del> |          |
| ,  | had not been removed from jeopardy before the first day of the tax year beginning in 2014?  | 46            |  | X        |
|    |   | Form 99       | 0-PF   |          |
|    |   |               |  |          |

| ROMOVER FAMILIE FOUNDATI  | .ON, INC.                          |  |  |                              |
|---|------------------------------------|--|--|------------------------------|
| orm 990-PF (2014) C/O PORZIO, BROMBERG & N  |                                    |  | <u>30-01221</u>  | 50 Page 6                    |
| Part VII-B   Statements Regarding Activities for Which  | Form 4720 May Be F                 | requirea (continu                                | ued)   |                              |
| 5a During the year did the foundation pay or incur any amount to  | - 4045(-)\0                        |  | [ <del>V</del> ],,   |                              |
| (1) Carry on propaganda, or otherwise attempt to influence legislation (section)                            |                                    |  | s X No   |                              |
| (2) Influence the outcome of any specific public election (see section 4955), any voter registration drive? | or to carry on, directly or more   |  | s X No   |                              |
| (3) Provide a grant to an individual for travel, study, or other similar purposes                           | 2                                  |  | s X No   |                              |
| (4) Provide a grant to an organization other than a charitable, etc., organization                          |                                    | 16   | 3 LZ NO  |                              |
| 4945(d)(4)(A)? (see instructions)   | on acsorbed in section             | [ v₀   | s X No   |                              |
| (5) Provide for any purpose other than religious, charitable, scientific, literary                          | or educational nurnoses, or f      |  | .3 (22) 110  |                              |
| the prevention of cruelty to children or animals?   | , or occountional purposco, or r   |  | s X No   |                              |
| b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify un                       | der the exceptions described i     |  | 110  |                              |
| section 53.4945 or in a current notice regarding disaster assistance (see instri                            |                                    | ga   | N/A  | ib l                         |
| Organizations relying on a current notice regarding disaster assistance check                               |                                    |  |  |                              |
| c If the answer is "Yes" to question 5a(4), does the foundation claim exemption                             |                                    | ıned   |  |                              |
| expenditure responsibility for the grant?   |                                    | I/A 🗀 Ye   | s No   |                              |
| If "Yes," attach the statement required by Regulations section 53 494                                       | !5-5(d)                            |  |  |                              |
| 6a Did the foundation, during the year, receive any funds, directly or indirectly, to                       | pay premiums on                    |  |  |                              |
| a personal benefit contract?  |                                    | Ye   | s X No   |                              |
| <b>b</b> Did the foundation, during the year, pay premiums, directly or indirectly, on a                    | personal benefit contract?         |  | _ 6  | b 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                          |                                    | Ye   | s X No   |                              |
| b If "Yes," did the foundation receive any proceeds or have any net income attrib                           |                                    |  |  | 'b                           |
| Part VIII Information About Officers, Directors, Trust Paid Employees, and Contractors                      | tees, Foundation Ma                | inagers, Highly                                  | /  |                              |
| List all officers, directors, trustees, foundation managers and their                                       | compensation.                      |  |  |                              |
|   | (b) Title, and average             | (c) Compensation                                 | (d) Contributions to employee benefit plans                    | (e) Expense                  |
| (a) Name and address  | hours per week devoted to position | (If not paid,<br>enter -0-)                      | and deferred<br>compensation                                   | account, other<br>allowances |
| MICHAEL W. ROHOVSKY   | PRESIDENT & T                      | <del></del>                                      |  |                              |
| 4931 BONITA BAY BLVD. APT 1902  |                                    |  |  |                              |
| BONITA SPRINGS, FL 34134  | 0.00                               | 0.   | 0.   | 0.                           |
| KAREN J. ROHOVSKY   | SECRETARY & T                      | RUSTEE   |  |                              |
| 4931 BONITA BAY BLVD. APT 1902  |                                    |  |  |                              |
| BONITA SPRINGS, FL 34134  | 0.00                               | 0.   | 0.   | 0.                           |
| STEPHANIE ROHOVSKY AKBARI   | TREASURER & T                      | RUSTEE   |  |                              |
| 1457 HAMPTON RIDGE DRIVE  | _                                  |  |  |                              |
| MCLEAN, VA 22101  | 0.00                               | 0.   | 0.   | <u> </u>                     |
| PAUL E. ROHOVSKY  | TRUSTEE                            |  |  |                              |
| 4006 BROADMORE CIRCLE   |                                    |  |  | •                            |
| NAPERVILLE, IL 60564 2 Compensation of five highest-paid employees (other than those in                     | 0.00                               | O.   | 0.   | 0.                           |
| 2 Compensation of five highest-paid employees (other than those in  | (b) Title and average              | enter NONE.                                      | (d) Contributions to   | (e) Expense                  |
| (a) Name and address of each employee paid more than \$50,000   | hours per week devoted to position | (c) Compensation                                 | (d) Contributions to<br>employee benefit plans<br>and deferred | account, other allowances    |
| NONE  | devoted to position                | <del> </del>                                     | compensation   | allowalices                  |
| INOME   | -                                  |  |  |                              |
|   |                                    | <del>                                     </del> |  |                              |
|   | 1                                  |  |  |                              |
|   |                                    |  |  |                              |
|   |                                    |  |  |                              |
|   |                                    |  |  |                              |
|   |                                    |  |  | ·                            |
|   | _                                  |  |  |                              |
|   | <u> </u>                           | <u> </u>   | <u> </u>   |                              |
| Total number of other employees paid over \$50,000  |                                    |  | ▶ 1  | 0                            |

3 N/A

Total. Add lines 1 through 3

All other program-related investments. See instructions

| For | m 990-PF (2014) C/O PORZIO, BROMBERG & NEWMAN, P.C.  | 30-0122160                | Page 8 |
|-----|--|---------------------------|--------|
| Pa  | Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations   | dations, see instructions | )      |
| 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  | 1a 901                    | ,619.  |
|     | Average of monthly cash balances   | 1b 16                     | ,140.  |
|     | Fair market value of all other assets  | 1c                        |        |
| -   | Total (add lines 1a, b, and c)   | 1d 917                    | 759.   |
|     | Reduction claimed for blockage or other factors reported on lines 1a and   |                           |        |
| ·   | 1c (attach detailed explanation)   |                           |        |
| 2   | Acquisition indebtedness applicable to line 1 assets   | 2                         | 0.     |
| 3   | Subtract line 2 from line 1d   | 3 917                     | ,759.  |
| 4   | Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)  |                           | ,766.  |
| 5   | Net value of noncharitable-use assets Subtract line 4 from line 3. Enter here and on Part V, line 4  |                           | ,993.  |
| 6   | Minimum investment return Enter 5% of line 5   |                           | ,200.  |
| P   | art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and  | d certain                 |        |
| _   | foreign organizations check here   and do not complete this part )   |                           |        |
| 1   | Minimum investment return from Part X, line 6  | 1 45                      | ,200.  |
| 2a  | Tax on investment income for 2014 from Part VI, line 5   |                           |        |
| b   | 0 0044 (Till 1 004 |                           |        |
| C   | Add lines 2a and 2b  | 2c                        | 502.   |
| 3   | Distributable amount before adjustments. Subtract line 2c from line 1  | 3 44                      | ,698.  |
| 4   | Recoveries of amounts treated as qualifying distributions  | 4                         | 0.     |
| 5   | Add lines 3 and 4  | 5 44                      | ,698.  |
| 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 44                      | ,698.  |
| P   | Part XII Qualifying Distributions (see instructions)   |                           |        |
|     | 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 4.0                    | ),331. |
|     | 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:   |                           |        |
| а   | Suitability test (prior IRS approval required)   | 3a                        |        |
| b   |  | 3b                        |        |
| 4   | Qualifying distributions Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4   | 4 40                      | 331.   |
| 5   | Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment   |                           |        |

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

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income. Enter 1% of Part I, line 27b

Adjusted qualifying distributions Subtract line 5 from line 4

4940(e) reduction of tax in those years.

C/O PORZIO, BROMBERG & NEWMAN, P.C.

Part XIII Undistributed Income (see instructions)

|  | (a)    | (b)                 | (c)                                   | (d)                       |
|--|--------|---------------------|---------------------------------------|---------------------------|
| Distributable amount for 2014 from Part XI.  | Corpus | Years prior to 2013 | 2013                                  | 2014                      |
| line 7   |        |                     |                                       | 44,698.                   |
| 2 Undistributed income, if any, as of the end of 2014                                  |        |                     |                                       | 11/000.                   |
| a Enter amount for 2013 only   |        |                     | 40,331.                               |                           |
| b Total for prior years  | -      |                     |                                       |                           |
|  |        | 0.                  |                                       |                           |
| 3 Excess distributions carryover, if any, to 2014.                                     |        |                     |                                       |                           |
| <b>a</b> From 2009   |        |                     |                                       |                           |
| <b>b</b> From 2010   |        |                     |                                       |                           |
| c From 2011  |        |                     |                                       |                           |
| d From 2012  |        |                     |                                       |                           |
| e From 2013  |        |                     |                                       |                           |
| f Total of lines 3a through e  | 0.     |                     |                                       |                           |
| 4 Qualifying distributions for 2014 from   |        |                     |                                       |                           |
| Part XII, line 4: ►\$ 40,331.  |        |                     | 40 221                                |                           |
| a Applied to 2013, but not more than line 2a   |        |                     | 40,331.                               | <del></del>               |
| b Applied to undistributed income of prior   |        | 0                   |                                       |                           |
| years (Election required - see instructions)   |        | 0.                  |                                       | <del></del>               |
| c Treated as distributions out of corpus   | 0.     |                     |                                       |                           |
| (Election required - see instructions) d Applied to 2014 distributable amount          | 0.     | <del></del>         |                                       | 0.                        |
| e Remaining amount distributed out of corpus   | 0.     |                     | · · · · · · · · · · · · · · · · · · · | <u> </u>                  |
| 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                                      | 0.     |                     |                                       |                           |
| 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.                  |                                       | <del></del>               |
| e Undistributed income for 2013. Subtract line   |        |                     | 0                                     |                           |
| 4a from line 2a Taxable amount - see instr.  f Undistributed income for 2014. Subtract |        |                     | 0.                                    |                           |
| lines 4d and 5 from line 1. This amount must   |        |                     |                                       |                           |
| be distributed in 2015   |        |                     |                                       | 44,698.                   |
| 7 Amounts treated as distributions out of  |        |                     |                                       | <u> </u>                  |
| 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  | 0.     |                     |                                       |                           |
| 9 Excess distributions carryover to 2015   |        |                     |                                       |                           |
| Subtract lines 7 and 8 from line 6a  | 0.     |                     |                                       |                           |
| 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<br>423581   |        |                     |                                       | 200 ==                    |
| 11-24-14   |        |                     |                                       | Form <b>990-PF</b> (2014) |

b The form in which applications should be submitted and information and materials they should include: c Any submission deadlines: d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors

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C/O PORZIO, BROMBERG & NEWMAN, P.O.

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Part XV Supplementary Information (continued) Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Purpose of grant or contribution Foundation show any relationship to Amount status of recipient any foundation manager Name and address (home or business) or substantial contributor a Paid during the year SEE ATTACHED STATEMENT ₽C GENERAL SUPPORT 40,331. **▶** 3a Total 40 331. b Approved for future payment NONE **≥** 3b Total

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Form 990-PF (2014)

Part XVI-A Analysis of Income-Producing Activities

|   | - Uncoloted                            |                      | <del></del>           |                            |                                       |
|---|--|----------------------|-----------------------|----------------------------|---------------------------------------|
| Enter gross amounts unless otherwise indicated  | (a)<br>Business                        | (b)                  | (C)<br>Exclu-<br>sion | (d)                        | (e) Related or exempt                 |
| 1 Program service revenue.  | code                                   | Amount               | coge                  | Amount                     | function income                       |
| a   | _                                      |                      |                       |                            |                                       |
| b   |  | <del></del>          |                       |                            |                                       |
| <u>c</u>  | 1                                      |                      |                       |                            |                                       |
| d   | j                                      |                      |                       |                            |                                       |
| e   |  |                      |                       |                            |                                       |
| g Fees and contracts from government agencies   |  | <del> </del>         |                       |                            | · · · · · · · · · · · · · · · · · · · |
| <ul><li>g Fees and contracts from government agencies</li><li>2 Membership dues and assessments</li></ul> |  |                      |                       |                            |                                       |
| 3 Interest on savings and temporary cash  |  |                      |                       |                            |                                       |
| investments   |  |                      | 14                    | 3.                         |                                       |
| 4 Dividends and interest from securities  |  |                      | 14                    | 25,245.                    |                                       |
| 5 Net rental income or (loss) from real estate:   |  |                      |                       | 23/2130                    |                                       |
| a Debt-financed property  |  |                      |                       |                            |                                       |
| b Not debt-financed property  |  |                      |                       |                            |                                       |
| 6 Net rental income or (loss) from personal   |  |                      |                       |                            | <del></del>                           |
| property  |  |                      |                       | İ                          |                                       |
| 7 Other investment income   |  | <del></del>          |                       |                            | ·- ·······                            |
| 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.                    | 25,248.                    | 0.                                    |
| 13 Total Add line 12, columns (b), (d), and (e)   |  |                      |                       | 13                         | 25,248.                               |
| (See worksheet in line 13 instructions to verify calculations   | *                                      |                      |                       |                            | <u> </u>                              |
| Part XVI-B Relationship of Activities   | s to the Accor                         | nplishment of        | Exempt P              | urposes                    |                                       |
| Line No Explain below how each activity for which in  | icome is reported in                   | column (e) of Part X | VI-A contributed      | f importantly to the accom | plishment of                          |
| the foundation's exempt purposes (other th  |  |                      |                       | ,                          | <b>,</b>                              |
|   |  |                      |                       |                            |                                       |
|   |  |                      |                       |                            |                                       |
|   |  |                      |                       |                            |                                       |
|   |  |                      |                       |                            |                                       |
|   |  |                      |                       |                            |                                       |
|   |  |                      |                       |                            |                                       |
|   |  |                      | ····                  |                            |                                       |
|   | ······································ |                      |                       |                            |                                       |
|   |  |                      |                       |                            |                                       |
|   |  |                      |                       |                            |                                       |
|   |  |                      |                       |                            |                                       |
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|   |  |                      |                       | - <del></del>              |                                       |
|   |  |                      |                       |                            |                                       |
|   |  |                      |                       |                            |                                       |
|   |  |                      |                       |                            |                                       |
|   |  |                      |                       |                            |                                       |
|   |  |                      |                       |                            |                                       |
| 423621  |  |                      |                       |                            | Form <b>990-PF</b> (2014              |

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

|      |              | Exempt Organ   | izations             |                        |   |                              |                              |                         |  |               |
|------|--------------|--|----------------------|------------------------|---|------------------------------|------------------------------|-------------------------|--|---------------|
| 1    | Did the org  | ganization directly or indir   | ectly engage in an   | y of the followin      | g with any other organizatio  | n described in section       | 501(c) of                    |                         | Yes  | No            |
|      |              |  |                      |                        | 7, relating to political organi                                     |                              |                              |                         |  |               |
| а    |              | from the reporting founda  |                      |                        |   |                              |                              |                         |  |               |
|      | (1) Cash     |  |                      |                        | -   |                              |                              | 1a(1)                   |  | X             |
|      | (2) Other    | assets   |                      |                        |   |                              |                              | 1a(2)                   |  | X             |
| Ь    | Other trans  |  |                      |                        |   |                              |                              |                         |  |               |
| -    |              | of assets to a noncharitat   | ble exempt organi    | zation                 |   |                              |                              | 1b(1)                   |  | X             |
|      | • •          | ases of assets from a nor  |                      |                        |   |                              |                              | 1b(2)                   | i  | X             |
|      | ` '          | l of facilities, equipment, of   | •                    | <b>3</b>               |   |                              |                              | 1b(3)                   | i  | X             |
|      | ٠,,          | oursement arrangements   | a. Ja. 2002.2        |                        |   |                              |                              | 1b(4)                   | 1  | X             |
|      |              | s or loan guarantees   |                      |                        |   |                              |                              | 1b(5)                   | i  | X             |
|      | ` '          | rmance of services or me   | mhership or fundi    | aisina solicitatio     | ins   |                              |                              | 1b(6)                   | 1  | X             |
| c    | • •          | facilities, equipment, mai   | •                    | -                      |   |                              |                              | 1c                      | <del>                                     </del> | X             |
|      | _            |  |                      |                        | dule. Column (b) should alw   | vavs show the fair man       | ket value of the goods of    |                         | sets   |               |
| ٠    |              |  |                      |                        | ed less than fair market valu                                       |                              |                              |                         | 50.0,  |               |
|      |              | ) the value of the goods, (  |                      |                        | ou root man han market raid   | o m any mandadion of         | onaring arrangement, o       |                         |  |               |
| (a)ı |              | (b) Amount involved  | <del>,</del>         |                        | e exempt organization   | (d) Description of           | transfers, transactions, and | sharing at              | rangeme  | ents          |
| (-,- |              | (-)  | (-,                  | N/A                    |   | (-,                          |                              |                         |  |               |
|      |              |  |                      | IV/ A                  |   |                              |                              |                         |  |               |
|      |              |  |                      |                        | <del></del>   | -                            |                              |                         |  |               |
|      |              |  |                      |                        | <del></del>   | <del>-  </del>               | <del></del>                  |                         | · —  |               |
|      |              |  |                      |                        | <del></del>   |                              | <del></del>                  |                         |  |               |
|      | -            |  |                      | <del> </del>           |   |                              |                              |                         |  |               |
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|      |              |  | <u> </u>             |                        |   |                              |                              |                         |  |               |
|      |              |  |                      |                        |   | <u> </u>                     | <del></del>                  |                         |  |               |
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| _    |              |  |                      |                        |   |                              |                              |                         |  |               |
| _    |              |  |                      |                        |   |                              |                              |                         |  |               |
|      |              | <del>.</del>   |                      |                        |   |                              |                              |                         |  |               |
| _    |              |  |                      |                        |   |                              |                              |                         |  |               |
|      |              |  | <u> </u>             |                        |   |                              |                              |                         |  |               |
| 2a   |              | •  | •                    | •                      | or more tax-exempt organiz  | zations described            | _                            | _                       |  | ¬             |
|      | ın section   | 501(c) of the Code (other  | r than section 501   | (c)(3)) or in sect     | tion 527?   |                              | L                            | Yes                     | LX   | No            |
| _b   | If "Yes," co | omplete the following scho   |                      |                        | <del>,</del>  |                              | <u></u>                      |                         |  |               |
|      |              | (a) Name of org  | anization            |                        | (b) Type of organization  | (c)                          | Description of relations     | 11p                     |  |               |
|      |              | N/A  |                      |                        |   |                              | <u>.</u>                     |                         |  |               |
|      |              | ·  |                      |                        |   |                              | <u>-</u>                     |                         |  |               |
|      |              | ·  |                      |                        |   |                              |                              |                         |  |               |
|      |              |  |                      |                        |   |                              |                              |                         |  |               |
|      |              |  |                      |                        |   |                              |                              |                         |  |               |
|      |              | penalties of perjury, I declare  | that I have examined | this return, including | ng accompanying schedules and<br>n taxpayer) is based on all inform | statements, and to the be    | a any kaominadan             | y tne IRS               | discuss  | this          |
|      | gn   👢 🗸     | Control of the contro |                      | Diebarer (Office tha   | in taxpayer) is based on an imorni                                  | ia lott of which preparer ha |                              | irn with tr<br>wn belov | ne prepai<br>v (see ins                          | rer<br>3°r )? |
| He   | ere          | / yehall   | 4 / Cono             | viky                   | 12/16/15  | PRESIDE                      | NT                           | X Yes                   | s [  | □No           |
|      | Sigr         | nature of officer or trustee   | !                    |                        | Date  | Title                        |                              |                         |  |               |
|      |              | Print/Type preparer's na   | ame                  | Preparer's             | ghatyn: //  | Date C                       | heck if PTIN                 |                         |  |               |
|      |              |  |                      | 1/1/                   | all Lies  | 12/1./. si                   | elf- employed                |                         |  |               |
|      | aid          | PHILIP J.  | SIANA                | (PHILI/                | Y. VSIANA   | 1914/5                       | P0:                          | 1380                    | 624  | <u>:</u>      |
|      | eparer       | Firm's name ► POR  |                      | MBERG &                | NEWMAN, P.C   |                              | rm's EIN ► 22-2              |                         |  |               |
| U    | se Only      |  | •                    |                        | •   |                              | _                            |                         |  |               |
|      |              | Firm's address ▶ 10  | 0 SOUTHG             | ATE PAR                | KWAY, PO BOX  | 1997                         |                              |                         |  |               |
|      |              |  |                      |                        | 962-1997  |                              | Phone no 973-5               | 38-4                    | 1006   |               |
|      |              |  |                      |                        |   |                              |                              |                         |  | (2014)        |

#### Schedule B

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

Department of the Treasury Internal Revenue Service

#### **Schedule of Contributors**

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

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

OMB No 1545-0047

Name of the organization

ROHOVSKY FAMILY FOUNDATION, INC.
C/O PORZIO, BROMBERG & NEWMAN, P.C.

Employer identification number

30-0122160 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 X 501(c)(3) exempt private foundation Form 990-PF 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 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),

LHA 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)

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 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)

Name of organization ROHOVSKY FAMILY FOUNDATION, INC.

C/O PORZIO, BROMBERG & NEWMAN, P.C.

Employer identification number

30-0122160

| Part I | Contributors | (see instructions) | Use duplicate copies | of Part Lif addition | al space is needed |
|--------|--------------|--------------------|----------------------|----------------------|--------------------|

|            | ,   |                            | <del></del>   |
|------------|---|----------------------------|---|
| (a)<br>No. | (b)<br>Name, address, and ZIP + 4   | (c) Total contributions    | (d)<br>Type of contribution   |
| 1          | MICHAEL W. ROHOVSKY  4931 BONITA BAY BLVD, APT 1902  BONITA SPRINGS, FL 34134 | ss15,350.                  | Person X Payroll  |
| (a)<br>No. | (b)<br>Name, address, and ZIP + 4   | (c)<br>Total contributions | (d)<br>Type of contribution   |
|            |   | s                          | Person Payroll Oncash Complete Part II for noncash contributions )  |
| (a)<br>No. | (b)<br>Name, address, and ZIP + 4   | (c)<br>Total contributions | (d)<br>Type of contribution   |
|            |   | s                          | Person Payroll Oncash Complete Part II for noncash contributions )  |
| (a)<br>No. | (b)<br>Name, address, and ZIP + 4   | (c)<br>Total contributions | (d) Type of contribution  |
|            |   | s                          | Person Payroll Oncash Complete Part II for noncash contributions )  |
| (a)<br>No. | (b)<br>Name, address, and ZIP + 4   | (c)<br>Total contributions | (d)<br>Type of contribution   |
|            |   | s                          | Person Payroll Noncash (Complete Part II for noncash contributions) |
| (a)<br>No. | (b)<br>Name, address, and ZIP + 4   | (c)<br>Total contributions | (d) Type of contribution  |
|            |   | -<br>  \$                  | Person Payroll Noncash Complete Part II for noncash contributions ) |

Name of organization

ROHOVSKY FAMILY FOUNDATION, INC.

C/O PORZIO, BROMBERG & NEWMAN, P.C.

Employer identification number

30-0122160

| Part II No                   | ncash Property (see instructions) Use duplicate copies of P | art II if additional space is needed     |                      |
|------------------------------|---|--|----------------------|
| (a)<br>No.<br>from<br>Part I | (b)  Description of noncash property given                  | (c) FMV (or estimate) (see instructions) | (d)<br>Date received |
|                              |   | s  |                      |
|                              |   |  |                      |
| (a)<br>No.<br>from<br>Part I | (b)<br>Description of noncash property given                | (c) FMV (or estimate) (see instructions) | (d)<br>Date received |
|                              |   |  |                      |
|                              |   | s  |                      |
| (a)<br>No.<br>from<br>Part I | (b)<br>Description of noncash property given                | (c) FMV (or estimate) (see instructions) | (d)<br>Date received |
|                              |   |  |                      |
| -                            |   | s  | -                    |
| (a)<br>No.<br>from<br>Part I | (b)<br>Description of noncash property given                | (c) FMV (or estimate) (see instructions) | (d)<br>Date received |
|                              |   |  |                      |
| _                            |   | s  |                      |
| (a)<br>No.<br>from<br>Part I | (b)<br>Description of noncash property given                | (c) FMV (or estimate) (see instructions) | (d)<br>Date received |
|                              |   |  |                      |
|                              |   | s  |                      |
| (a)<br>No.<br>from           | (b)<br>Description of noncash property given                | (c) FMV (or estimate) (see instructions) | (d)<br>Date received |
| Part I                       |   | (coo mon done)                           |                      |
|                              |   | <br>                                     |                      |

Name of organization Employer identification number ROHOVSKY FAMILY FOUNDATION, INC. BROMBERG & NEWMAN, P.C. 30-0122160 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 info once) Use duplicate copies of Part III if additional space is needed (a) No from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. 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 (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

| FORM 990-PF INTERE                  | ST ON SAVIN     | NGS AND TEM                   | PORARY CA                   | SH IN | VESTMENTS                     | STATEMENT 1                         |  |
|-------------------------------------|-----------------|-------------------------------|-----------------------------|-------|-------------------------------|-------------------------------------|--|
| SOURCE                              |                 | REVE                          |                             |       | (B)<br>VESTMENT<br>COME       | (C)<br>ADJUSTED<br>NET INCOME       |  |
| UBS FINANCIAL SERVI                 |                 | 3.                            |                             |       |                               |                                     |  |
| TOTAL TO PART I, LINE 3             |                 |                               | 3.                          |       | 3.                            |                                     |  |
| FORM 990-PF                         | DIVIDENDS       | S AND INTER                   | EST FROM                    | SECUR | ITIES                         | STATEMENT 2                         |  |
| SOURCE                              | GROSS<br>AMOUNT | CAPITAL<br>GAINS<br>DIVIDENDS | •                           | NUE   | (B)<br>NET INVES<br>MENT INCO | (C)<br>T- ADJUSTED<br>ME NET INCOME |  |
| UBS FINANCIAL<br>SERVICES           | 25,245          | •                             | 0. 25                       | ,245. | 25,24                         | 5.                                  |  |
| TO PART I, LINE 4                   | 25,245          |                               | 0. 25                       | ,245. | 25,24                         | 5.                                  |  |
| FORM 990-PF                         |                 | TAX                           | ES                          |       |                               | STATEMENT 3                         |  |
| DESCRIPTION                         |                 | (A)<br>EXPENSES<br>PER BOOKS  |                             |       | (C)<br>ADJUSTED<br>NET INCOM  | (D)<br>CHARITABLE<br>E PURPOSES     |  |
| US TREASURY - FEDERAL<br>EXCISE TAX |                 | 491.                          |                             | 0.    |                               | 0.                                  |  |
| TO FORM 990-PF, PG                  | 1, LN 18        | 491.                          |                             | 0.    | ····                          | 0.                                  |  |
| FORM 990-PF                         |                 | OTHER E                       | OTHER EXPENSES              |       | STATEMENT 4                   |                                     |  |
| DESCRIPTION                         |                 | (A)<br>EXPENSES<br>PER BOOKS  | (B)<br>NET INVE<br>MENT INC |       | (C)<br>ADJUSTEI<br>NET INCOM  |                                     |  |
| UBS RMA FEE                         | -               | 75.                           |                             | 75.   |                               | 0.                                  |  |
| BANK OF AMERICA SER<br>CHARGES      | KATCE           | 72.                           |                             | 72.   |                               | 0.                                  |  |
| TO FORM 990-PF, PG                  | 1, LN 23        | 147.                          |                             | 147.  |                               | 0.                                  |  |
|                                     | =               |                               |                             |       |                               |                                     |  |

| FORM 990-PF '                               | CORPORATE STOCK                                    |                  | STATEMENT            | 5   |
|---|--|------------------|----------------------|-----|
| DESCRIPTION                                 |  | BOOK VALUE       | FAIR MARKE'<br>VALUE | r   |
| 8,858 SHARES JOHNSON & JOHNSON COMMON STOCK |  | 501,764.         | 832,4                | 75. |
| TOTAL TO FORM 990-PF, PART II, LINE 10B 501 |  |                  | 832,4                | 75. |
| FORM 990-PF                                 | LIST OF SUBSTANTIAL CONTRIE<br>PART VII-A, LINE 10 | BUTORS           | STATEMENT            | 6   |
| NAME OF CONTRIBUTOR                         | ADDRESS  |                  |                      |     |
| MICHAEL W. ROHOVSKY                         | 4931 BONITA E                                      | BAY BLVD. APT 19 | 902                  |     |

BONITA SPRINGS, FL 34134

# Rohovsky Family Foundation, Inc. Charitable Distributions for FYE 8/31/15

| Buckingham School                           | 500 00    |
|---|-----------|
| Case Western Reserve University             | 1,000.00  |
| George School                               | 2,000.00  |
| Habitat for Humanity of Lee County          | 662.00    |
| Lambertville-New Hope Ambulance & Rescue    | 400 00    |
| The Langley School                          | 3,500.00  |
| Midway Volunteer Fire Co                    | 600 00    |
| Mount Holyoke College                       | 500.00    |
| Ohio State University Foundation            | 11,500.00 |
| Ohio State University Foundation            | 4,000.00  |
| Ttees of Univ. of PA                        | 1,000.00  |
| Providence Little Co. of Mary Foundation    | 500 00    |
| Fisher House Foundation                     | 1,000.00  |
| Rolling Hills United Methodist Church       | 2,000 00  |
| First Presbyterian Church of Bonita Springs | 1,000.00  |
| Ragersville United Church                   | 2,000.00  |
| Lee Memorial Health System Foundation       | 500.00    |
| Shepherd of the Valley Foundation           | 500.00    |
| The Indepence Fund Inc.                     | 500.00    |
| Landon School                               | 3,566.00  |
| Community Hospice                           | 2,603.00  |
| Asahi Gakuen                                | 500.00    |
| Total Charitable Distributions              | 40,331.00 |