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Return of Private Foundation

2014

Department of the Treasury
Internal Revenue Service

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Open to Public Inspection

For calendar year 2014 or tax year beginning **DEC 1, 2014**, and ending **NOV 30, 2015**

Name of foundation
THE J W FOUNDATION

Number and street (or P O box number if mail is not delivered to street address)
960 BROWERS POINT BRANCH

City or town, state or province, country, and ZIP or foreign postal code
WOODMERE, NY 11598

A Employer identification number
11-3412512

B Telephone number
(212) 644-9000

C If exemption application is pending, check here

D 1. Foreign organizations, check here
2. Foreign organizations meeting the 85% test, check here and attach computation

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

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

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

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

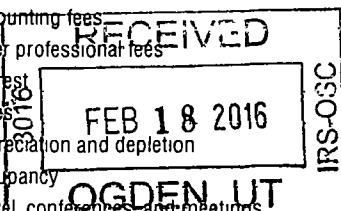
I Fair market value of all assets at end of year (from Part II, col. (c), line 16)
\$ 65,603.

J Accounting method:
 Cash
 Accrual
 Other (specify) _____

(Part I, column (d) must be on cash basis.)

Part I Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a))		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
Revenue	1 Contributions, gifts, grants, etc., received	317,663.		N/A	
	2 Check <input type="checkbox"/> if the foundation is not required to attach Sch B				
	3 Interest on savings and temporary cash investments	85.	85.		STATEMENT 1
	4 Dividends and interest from securities				
	5a Gross rents				
	b Net rental income or (loss)				
	6a Net gain or (loss) from sale of assets not on line 10				
	b Gross sales price for all assets on line 6a				
	7 Capital gain net income (from Part IV, line 2)		0.		
	8 Net short-term capital gain				
	9 Income modifications				
	10a Gross sales less returns and allowances				
b Less Cost of goods sold					
c Gross profit or (loss)					
11 Other income					
12 Total. Add lines 1 through 11	317,748.	85.			
Operating and Administrative Expenses	13 Compensation of officers, directors, trustees, etc	0.	0.		0.
	14 Other employee salaries and wages				
	15 Pension plans, employee benefits				
	16a Legal fees				
	b Accounting fees				
	c Other professional fees				
	17 Interest				
	18 Taxes				
	19 Depreciation and depletion				
	20 Occupancy				
	21 Travel, conferences, and meetings				
	22 Printing and publications				
	23 Other expenses STMT 2	380.	330.		0.
	24 Total operating and administrative expenses. Add lines 13 through 23	380.	330.		0.
	25 Contributions, gifts, grants paid	403,231.			403,231.
26 Total expenses and disbursements. Add lines 24 and 25	403,611.	330.		403,231.	
27 Subtract line 26 from line 12:					
a Excess of revenue over expenses and disbursements	-85,863.				
b Net investment income (if negative, enter -0-)		0.			
c Adjusted net income (if negative, enter -0-)			N/A		

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Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of-year amounts only		
		Beginning of year (a) Book Value	End of year (b) Book Value (c) Fair Market Value	
Assets	1 Cash - non-interest-bearing			
	2 Savings and temporary cash investments	101,466.	15,603.	15,603.
	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 ▶ 50,000.			
	Less: allowance for doubtful accounts ▶ 0.	50,000.	50,000.	50,000.
	8 Inventories for sale or use			
	9 Prepaid expenses and deferred charges			
	10a Investments - U.S. and state government obligations			
	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 instructions. Also, see page 1, item I)	151,466.	65,603.	65,603.	
Liabilities	17 Accounts payable and accrued expenses			
	18 Grants payable			
	19 Deferred revenue			
	20 Loans from officers, directors, trustees, and other disqualified persons			
	21 Mortgages and other notes payable			
	22 Other liabilities (describe ▶)			
	23 Total liabilities (add lines 17 through 22)	0.	0.	
Net Assets or Fund Balances	Foundations that follow SFAS 117, check here ▶ <input type="checkbox"/>			
	24 Unrestricted			
	25 Temporarily restricted			
	26 Permanently restricted			
	Foundations that do not follow SFAS 117, check here ▶ <input checked="" type="checkbox"/>			
	27 Capital stock, trust principal, or current funds	0.	0.	
	28 Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.	
	29 Retained earnings, accumulated income, endowment, or other funds	151,466.	65,603.	
30 Total net assets or fund balances	151,466.	65,603.		
31 Total liabilities and net assets/fund balances	151,466.	65,603.		

Part III Analysis of Changes in Net Assets or Fund Balances

1 Total net assets or fund balances at beginning of year - Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)	1	151,466.
2 Enter amount from Part I, line 27a	2	-85,863.
3 Other increases not included in line 2 (itemize) ▶	3	0.
4 Add lines 1, 2, and 3	4	65,603.
5 Decreases not included in line 2 (itemize) ▶	5	0.
6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30	6	65,603.

Part IV Capital Gains and Losses for Tax on Investment Income

(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.)		(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a	NONE			
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 (loss) (e) plus (f) minus (g)	
a				
b				
c				
d				
e				
Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(i) Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col. (h))	
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any		
a				
b				
c				
d				
e				
2	Capital gain net income or (net capital loss)	{ If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7	2	
3	Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 8, column (c). If (loss), enter -0- in Part I, line 8		}	3

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

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

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

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

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

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

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col. (b) divided by col. (c))
2013	758,788.	406,883.	1.864880
2012	395,763.	243,958.	1.622259
2011	265,726.	63,326.	4.196160
2010	271,430.	72,469.	3.745464
2009	43,850.	26,319.	1.666097
2	Total of line 1, column (d)		13.094860
3	Average distribution ratio for the 5-year base period - divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years		2.618972
4	Enter the net value of noncharitable-use assets for 2014 from Part X, line 5		132,386.
5	Multiply line 4 by line 3		346,715.
6	Enter 1% of net investment income (1% of Part I, line 27b)		0.
7	Add lines 5 and 6		346,715.
8	Enter qualifying distributions from Part XII, line 4 If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the Part VI instructions.		403,231.

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 <input type="checkbox"/> 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 <input checked="" type="checkbox"/> and enter 1% of Part I, line 27b		1	0.
c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b).			
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)		2	0.
3 Add lines 1 and 2		3	0.
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)		4	0.
5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-		5	0.
6 Credits/Payments:			
a 2014 estimated tax payments and 2013 overpayment credited to 2014	6a		
b Exempt foreign organizations - tax withheld at source	6b		
c Tax paid with application for extension of time to file (Form 8868)	6c		
d Backup withholding erroneously withheld	6d		
7 Total credits and payments. Add lines 6a through 6d	7		0.
8 Enter any penalty for underpayment of estimated tax. Check here <input type="checkbox"/> if Form 2220 is attached	8		
9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9		0.
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10		
11 Enter the amount of line 10 to be: Credited to 2015 estimated tax <input type="checkbox"/> Refunded <input type="checkbox"/>	11		

Part VII-A Statements Regarding Activities

	Yes	No
1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?		X
1b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definition)? 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		X
1c Did the foundation file Form 1120-POL for this year?		X
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: (1) On the foundation. \$ 0. (2) On foundation managers. \$ 0.		
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. \$ 0.		
2 Has the foundation engaged in any activities that have not previously been reported to the IRS? If "Yes," attach a detailed description of the activities.		X
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		X
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?		X
b If "Yes," has it filed a tax return on Form 990-T for this year?		
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? If "Yes," attach the statement required by General Instruction T.		X
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?	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	X	
8a Enter the states to which the foundation reports or with which it is registered (see instructions) <u>NY</u>		
b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? If "No," attach explanation	X	
9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2014 or the taxable year beginning in 2014 (see instructions for Part XIV)? If "Yes," complete Part XIV		X
10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses		X

Part VII-A Statements Regarding Activities (continued)

11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		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		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ► <u>N/A</u>	13	X	
14	The books are in care of ► <u>JEFFREY & SHARONA WEINBERG</u> Telephone no. ► <u>212-972-3600</u> Located at ► <u>960 BROWERS POINT BRANCH, WOODMERE, NY</u> ZIP+4 ► <u>11598</u>			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here and enter the amount of tax-exempt interest received or accrued during the year ► 15 <u>N/A</u>			
16	At any time during calendar year 2014, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? See the instructions for exceptions and filing requirements for FinCEN Form 114, (formerly TD F 90-22.1). If "Yes," enter the name of the foreign country ►	16	Yes	No X

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

File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.

		Yes	No
1a	During the year did the foundation (either directly or indirectly):		
(1)	Engage in the sale or exchange, or leasing of property with a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(2)	Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(3)	Furnish goods, services, or facilities to (or accept them from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(4)	Pay compensation to, or pay or reimburse the expenses of, a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(6)	Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)? Organizations relying on a current notice regarding disaster assistance check here N/A <input type="checkbox"/>	1b	
c	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2014?	1c	X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)):		
a	At the end of tax year 2014, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2014? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "Yes," list the years ► _____, _____, _____		
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement - see instructions.) 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. ► _____, _____, _____		
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
b	If "Yes," did it have excess business holdings in 2014 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2014.) N/A	3b	
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	X
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2014?	4b	X

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

5a During the year did the foundation pay or incur any amount to:

(1) Carry on propoganda, or otherwise attempt to influence legislation (section 4945(e))? Yes No

(2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, any voter registration drive? Yes No

(3) Provide a grant to an individual for travel, study, or other similar purposes? Yes No

(4) Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? (see instructions) Yes No

(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals? Yes No

b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)? **N/A**

Organizations relying on a current notice regarding disaster assistance check here

c If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? **N/A** Yes No

If "Yes," attach the statement required by Regulations section 53.4945-5(d).

6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? Yes No

b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? **6b** Yes No **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 No

b If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction? **7b** Yes No **N/A**

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

1 List all officers, directors, trustees, foundation managers and their compensation.

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
JEFFREY WEINBERG 960 BROWERS POINT BRANCH WOODMERE, NY 11598	TRUSTEE 2.00	0.	0.	0.
SHARONA WEINBERG 960 BROWERS POINT BRANCH WOODMERE, NY 11598	TRUSTEE 1.00	0.	0.	0.

2 Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE."

(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE				

Total number of other employees paid over \$50,000 **0**

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

3 Five highest-paid independent contractors for professional services. If none, enter "NONE."

(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		

Total number of others receiving over \$50,000 for professional services ▶ 0

Part IX-A Summary of Direct Charitable Activities

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1 N/A	
2	
3	
4	

Part IX-B Summary of Program-Related Investments

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.	Amount
1 N/A	
2	
All other program-related investments. See instructions.	
3	
Total. Add lines 1 through 3 ▶	0.

Part X

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

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
a	Average monthly fair market value of securities	1a	0.
b	Average of monthly cash balances	1b	84,402.
c	Fair market value of all other assets	1c	50,000.
d	Total (add lines 1a, b, and c)	1d	134,402.
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation)	1e	0.
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	134,402.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	2,016.
5	Net value of noncharitable-use assets Subtract line 4 from line 3. Enter here and on Part V, line 4	5	132,386.
6	Minimum investment return. Enter 5% of line 5	6	6,619.

Part XI

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

1	Minimum investment return from Part X, line 6	1	6,619.
2a	Tax on investment income for 2014 from Part VI, line 5	2a	
b	Income tax for 2014. (This does not include the tax from Part VI.)	2b	
c	Add lines 2a and 2b	2c	0.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	6,619.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	6,619.
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	6,619.

Part XII

Qualifying Distributions (see instructions)

1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
a	Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26	1a	403,231.
b	Program-related investments - total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
a	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	403,231.
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	5	0.
6	Adjusted qualifying distributions Subtract line 5 from line 4	6	403,231.

Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years.

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2013	(c) 2013	(d) 2014
1 Distributable amount for 2014 from Part XI, line 7				6,619.
2 Undistributed income, if any, as of the end of 2014				
a Enter amount for 2013 only			0.	
b Total for prior years:		0.		
3 Excess distributions carryover, if any, to 2014:				
a From 2009	42,534.			
b From 2010	270,307.			
c From 2011	262,560.			
d From 2012	383,565.			
e From 2013	738,444.			
f Total of lines 3a through e	1,697,410.			
4 Qualifying distributions for 2014 from Part XII, line 4: ▶ \$	403,231.			
a Applied to 2013, but not more than line 2a			0.	
b Applied to undistributed income of prior years (Election required - see instructions)		0.		
c Treated as distributions out of corpus (Election required - see instructions)	0.			
d Applied to 2014 distributable amount				6,619.
e Remaining amount distributed out of corpus	396,612.			
5 Excess distributions carryover applied to 2014 (If an amount appears in column (d), the same amount must be shown in column (a))	0.			0.
6 Enter the net total of each column as indicated below:	2,094,022.			
a Corpus Add lines 3f, 4c, and 4e Subtract line 5				
b Prior years' undistributed income. Subtract line 4b from line 2b		0.		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b. Taxable amount - see instructions		0.		
e Undistributed income for 2013. Subtract line 4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2014. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2015				0.
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions)	0.			
8 Excess distributions carryover from 2009 not applied on line 5 or line 7	42,534.			
9 Excess distributions carryover to 2015. Subtract lines 7 and 8 from line 6a	2,051,488.			
10 Analysis of line 9:				
a Excess from 2010	270,307.			
b Excess from 2011	262,560.			
c Excess from 2012	383,565.			
d Excess from 2013	738,444.			
e Excess from 2014	396,612.			

Part XIV Private Operating Foundations (see instructions and Part VII-A, question 9) N/A

1 a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2014, enter the date of the ruling ▶ _____
b Check box to indicate whether the foundation is a private operating foundation described in section 4942(j)(3) or 4942(j)(5)

	Tax year		Prior 3 years		(e) Total
	(a) 2014	(b) 2013	(c) 2012	(d) 2011	
2 a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed					
b 85% of line 2a					
c Qualifying distributions from Part XII, line 4 for each year listed					
d Amounts included in line 2c not used directly for active conduct of exempt activities					
e Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the alternative test relied upon:					
a "Assets" alternative test - enter:					
(1) Value of all assets					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test - enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed					
c "Support" alternative test - enter:					
(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from an exempt organization					
(4) Gross investment income					

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

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

JEFFREY WEINBERG

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

NONE

2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:
 Check here if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d.

- a** The name, address, and telephone number or e-mail address of the person to whom applications should be addressed:

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

- c** Any submission deadlines:

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

Part XV Supplementary Information (continued)

3 Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year				
CONTRIBUTIONS PAID TO VARIOUS CHARITIES (SEE ATTACHED SCHEDULES) SEE ATTACHED SCHEDULES		PUBLIC CHARITY	CHARITABLE CAUSES	403,231.
Total				403,231.
b Approved for future payment				
NONE				
Total				0.

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

2014

Name of the organization

THE J W FOUNDATION

Employer identification number

11-3412512

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

 501(c)() (enter number) organization 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation 527 political organization

Form 990-PF

 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundationCheck 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), 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).

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)

Name of organization THE J W FOUNDATION	Employer identification number 11-3412512
---	---

Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	JEFFREY WEINBERG 960 BROWERS POINT BRANCH WOODMERE, NY 11598	\$ 317,663.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
	_____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
	_____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
	_____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
	_____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
	_____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
	_____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization THE J W FOUNDATION	Employer identification number 11-3412512
---	---

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
	<div style="border-bottom: 1px solid black; margin-bottom: 2px;"> </div> <div style="border-bottom: 1px solid black; margin-bottom: 2px;"> </div> <div style="border-bottom: 1px solid black; margin-bottom: 2px;"> </div>	\$ _____	_____
	<div style="border-bottom: 1px solid black; margin-bottom: 2px;"> </div> <div style="border-bottom: 1px solid black; margin-bottom: 2px;"> </div> <div style="border-bottom: 1px solid black; margin-bottom: 2px;"> </div>	\$ _____	_____
	<div style="border-bottom: 1px solid black; margin-bottom: 2px;"> </div> <div style="border-bottom: 1px solid black; margin-bottom: 2px;"> </div> <div style="border-bottom: 1px solid black; margin-bottom: 2px;"> </div>	\$ _____	_____
	<div style="border-bottom: 1px solid black; margin-bottom: 2px;"> </div> <div style="border-bottom: 1px solid black; margin-bottom: 2px;"> </div> <div style="border-bottom: 1px solid black; margin-bottom: 2px;"> </div>	\$ _____	_____
	<div style="border-bottom: 1px solid black; margin-bottom: 2px;"> </div> <div style="border-bottom: 1px solid black; margin-bottom: 2px;"> </div> <div style="border-bottom: 1px solid black; margin-bottom: 2px;"> </div>	\$ _____	_____
	<div style="border-bottom: 1px solid black; margin-bottom: 2px;"> </div> <div style="border-bottom: 1px solid black; margin-bottom: 2px;"> </div> <div style="border-bottom: 1px solid black; margin-bottom: 2px;"> </div>	\$ _____	_____

Name of organization THE J W FOUNDATION	Employer identification number 11-3412512
---	---

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

FORM 990-PF INTEREST ON SAVINGS AND TEMPORARY CASH INVESTMENTS STATEMENT 1

SOURCE	(A) REVENUE PER BOOKS	(B) NET INVESTMENT INCOME	(C) ADJUSTED NET INCOME
MERRILL LYNCH	85.	85.	
TOTAL TO PART I, LINE 3	85.	85.	

FORM 990-PF OTHER EXPENSES STATEMENT 2

DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
BROKERGE FEES	330.	330.		0.
NEW YORK STATE FILING FEES	50.	0.		0.
TO FORM 990-PF, PG 1, LN 23	380.	330.		0.

COPY



pg 1 of 16

JW FOUNDATION

Account Number 5AV-02266

YOUR WCMA TRANSACTIONS

November 29, 2014 - December 31, 2014

DIVIDENDS/INTEREST INCOME TRANSACTIONS				Income	Income	Year To Date
Date	Transaction Type	Quantity	Description	Income	Income	Year To Date
12/31	Bank Interest		BANK DEPOSIT INTEREST	10		
12/31	Bank Interest		BANK DEPOSIT INTEREST	74		
	Income Total		PREFERRED DEPOSIT (BUS)	10.00		
	Subtotal (Taxable Interest)			10.84		358.12
	NET TOTAL			10.84		358.12

CASH/OTHER TRANSACTIONS

Date	Transaction Type	Quantity	Description	Debit	Credit
12/05	Wire Transfer		WIRE TRF OUTP44339022939 Contrib	5,000.00	250,000.00
12/31	Wire Transfer		WIRE TRF IN D44365013416		
			ORG=/002000031404987 MER		
	Subtotal (Electronic Transfers)			5,000.00	250,000.00
12/05	Account Fee		ACCOUNT FEE	300.00	
12/05	Journal Entry		TRANSFR FEE P44339022939	30.00	
	Subtotal (Other Debits/Credits)			330.00	
	NET TOTAL				244,670.00

CHECKS WRITTEN/BILL PAYMENT

Date Written	Date Cleared	Check Number	Description	Debit	Credit
12/04	12/22	2116	CHICAGO MESIVTA	500.00	
12/11	12/15	2117	DORESH	1,000.00	
12/02	12/08	2118	PEF ISRAEL ENDOWMENT FUNDS INC	2,500.00	
12/02	12/12	2119	YEHSHIVA ZICHRON CHREGA	3,600.00	
12/11	12/16	2120	CHABAL	500.00	
12/15	12/18	2121	YACHAD	2,000.00	
09/16	12/18	2176*	KEREN HASHVIIS	1,000.00	
12/04	12/09	2190*	CHABAD OF THE FIVE TOWNS	600.00	
12/15	12/29	2276*	BIKUR CHOLIN	360.00	

pg 2 of 16

JW FOUNDATION
 Account Number 5AV-02266
 24-Hour Assistance: (866) 4MLBUSINESS
 Access Code: 51-528-02266

November 29, 2014 - December 31, 2014

YOUR WCMA TRANSACTIONS

CHECKS WRITTEN/BILL PAYMENT (continued)			
Date Written	Date Cleared	Check Number	Description
12/15	12/22	2277	YESHIVA OF GREATER WASHINGTON
			Debit 500.00
NET TOTAL			12,560.00

* Indicates gap in check sequence
 To report Lost or Stolen Visa Cards or Checks, please call (800) CMA-LOST.

YOUR WCMA MONEY ACCOUNT TRANSACTIONS

Date	Description	Withdrawals	Deposits	Date	Description	Withdrawals	Deposits
12/01	ML BANK DEPOSIT PROGRAM		1.00	12/15	ML BANK DEPOSIT PROGRAM	1,000.00	
12/05	ML BANK DEPOSIT PROGRAM	883.00		12/16	ML BANK DEPOSIT PROGRAM	500.00	
12/05	PREFERRED DEPOSIT (BUS)	5,000.00		12/18	ML BANK DEPOSIT PROGRAM	3,000.00	
12/08	PREFERRED DEPOSIT (BUS)	25,000.00		12/22	ML BANK DEPOSIT PROGRAM	1,000.00	
12/09	ML BANK DEPOSIT PROGRAM		22,453.00	12/29	ML BANK DEPOSIT PROGRAM	360.00	
12/12	ML BANK DEPOSIT PROGRAM	3,600.00					
NET TOTAL						17,889.00	

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Pg 3 of 16

Account Number: 5AV-02266

JW FOUNDATION

YOUR WCMA TRANSACTIONS

January 01, 2015 - January 30, 2015

Date	Transaction Type	Quantity	Description	Income	Year To Date
01/30	Bank Interest		BANK DEPOSIT INTEREST	.44	
01/30	Bank Interest		BANK DEPOSIT INTEREST	.78	
	Income Total		PREFERRED DEPOSIT (BUS)	26.00	
	Subtotal (Taxable Interest)			27.22	27.22
	NET TOTAL			27.22	27.22

CHECKS WRITTEN/BILL PAYMENT

Date Written	Date Cleared	Check Number	Description	Debit	Credit
11/07	01/02	2115	YACHAD	200.00	
12/29	01/02	2123*	PROJECT EXTREME	1,000.00	
12/21	01/14	2124	SOUTH SHORE	500.00	
12/29	01/02	2125	SHLOMZION	360.00	
11/09	01/08	2189*	FRIENDSHIP CIRCLE	100.00	
01/12	01/16	2248*	SHULAMITH OF LONG ISLAND	100.00	
12/25	01/08	2278*	CHAIM BECLIN	360.00	
01/05	01/07	2280*	AMERICAN FRIENDS OF NEVE ZION	12,500.00	
01/07	01/20	2281	CONG TIFERES TZVI	1,800.00	
01/18	01/22	2282	YESHIVA 5 TOWN	10,000.00	
12/29	01/13	2284*	SIACH YAZCHUK	200.00	
01/02	01/13	2285	AISH KODEL	25,000.00	
12/15	01/26	2289*	BNOS CHARA	5,000.00	
01/02	01/07	2291*	KHAL NESIV HATORAH	1,800.00	
01/12	01/28	2302*	FEED ISRAEL	36.00	
01/12	01/30	2303	CHMOL	36.00	
01/12	01/26	2304	STAND WITH US	180.00	
01/04	01/15	2558*	AISH KODESH	5,000.00	
01/04	01/15	2559	AISH KODESH	1,000.00	
01/12	01/13	2565*	LEV LACTIM	5,000.00	
12/31	01/05	2570*	CHABAD CHARITY FUND	5,000.00	

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Pg 4 of 16

JW FOUNDATION

Account Number: 5AV-02266

24-Hour Assistance: (866) 4MLBUSINESS
Access Code: 51-528-02266

YOUR WCMA TRANSACTIONS

January 01, 2015 - January 30, 2015

CHECKS WRITTEN/BILL PAYMENT (continued)			
Date Written	Date Cleared	Check Number	Description
01/04	01/09	2573*	NAWC
			Debit
			2,500.00
NET TOTAL			77,672.00

* Indicates gap in check sequence

To report Lost or Stolen Visa Cards or Checks, please call (800) CMA-LOST

YOUR WCMA MONEY ACCOUNT TRANSACTIONS

Date	Description	Withdrawals	Deposits	Date	Description	Withdrawals	Deposits
01/02	ML BANK DEPOSIT PROGRAM		248,441.00	01/14	ML BANK DEPOSIT PROGRAM		48,474.00
01/05	ML BANK DEPOSIT PROGRAM	215,000.00		01/15	ML BANK DEPOSIT PROGRAM	6,000.00	
01/05	PREFERRED DEPOSIT (BUS)		210,000.00	01/16	ML BANK DEPOSIT PROGRAM	100.00	
01/07	ML BANK DEPOSIT PROGRAM	14,300.00		01/20	ML BANK DEPOSIT PROGRAM	1,800.00	
01/08	ML BANK DEPOSIT PROGRAM	460.00		01/22	ML BANK DEPOSIT PROGRAM	10,000.00	
01/09	ML BANK DEPOSIT PROGRAM	2,500.00		01/26	ML BANK DEPOSIT PROGRAM	5,180.00	
01/13	ML BANK DEPOSIT PROGRAM	29,174.00		01/28	ML BANK DEPOSIT PROGRAM	36.00	
01/13	PREFERRED DEPOSIT (BUS)	50,000.00		01/30	ML BANK DEPOSIT PROGRAM	36.00	
NET TOTAL							172,329.00

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PL 5 of 16

Account Number: 5AV-02266

JW FOUNDATION

YOUR WCMA TRANSACTIONS

January 31, 2015 - February 27, 2015

Date	Transaction Type	Quantity	Description	Income	Income Year To Date
02/27	Bank Interest		BANK DEPOSIT INTEREST	23	
02/27	Bank Interest		BANK DEPOSIT INTEREST	.64	
	Income Total		PREFERRED DEPOSIT (BUS)	24.00	
	Subtotal (Taxable Interest)			24.87	52.09
NET TOTAL				24.87	52.09

CHECKS WRITTEN/BILL PAYMENT

Date Written	Date Cleared	Check Number	Description	Debit	Credit
11/02	02/03	2032	UNITED HATZOLA	2,600.00	
02/20	02/24	2136*	KAREN ELUZAR	1,800.00	
02/06	02/10	2157*	SIACH YITZCHOK	1,800.00	
02/05	02/10	2166*	CHABAL	300.00	
02/05	02/10	2167	MANHATTAN HS FOR GIRLS	720.00	
02/06	02/18	2171*	CHMOL	36.00	
12/21	02/25	2279*	AGUDAS ISRAEL MONEY	360.00	
02/01	02/02	2288*	BNOS CHARA	6,000.00	
01/12	02/02	2305*	YOUNG ISRAEL OF WOODMERE	360.00	
02/18	02/23	2429*	YESHIVA TIFERES CHAIM	1,000.00	
02/22	02/24	2440*	SIACH YITZCHOK	360.00	
02/12	02/18	2569*	YESHIVA WOLOZIN	1,000.00	
01/19	02/04	2571*	KNESSET YEHUDA	10,000.00	
02/05	02/12	2572	AISH KODESH	1,800.00	
02/05	02/10	2574*	YESHIVA OF SOUTH SHORE	10,000.00	
02/12	02/17	2575	YESHIVA NEIMUS HATORAH	1,000.00	
NET TOTAL				39,136.00	

* Indicates gap in check sequence

To report Lost or Stolen Visa Cards or Checks, please call (800) CMA-LOST.

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Pg 6 of 16



Account Number: 5AV-02266

JW FOUNDATION

YOUR WCMA TRANSACTIONS

February 28, 2015 - March 31, 2015

Date	Transaction Type	Quantity	Description	Income	Income Year To Date
03/31	Bank Interest		BANK DEPOSIT INTEREST	12	
03/31	Bank Interest		BANK DEPOSIT INTEREST	39	
	Income Total		PREFERRED DEPOSIT (BUS)	15.00	
	Subtotal (Taxable Interest)			15.51	67.60
	NET TOTAL			15.51	67.60

Date	Transaction Type	Quantity	Description	Debit	Credit
03/12	Journal Entry		EXTEND OVERDRAFT LOAN		631.54
03/13	Journal Entry		REPAY OVERDRAFT LOAN	631.54	
	Subtotal (Other Debits/Credits)			631.54	631.54
	NET TOTAL				

Date Written	Date Cleared	Check Number	Description	Debit	Credit
03/13	03/18	1667	ICCF	360.00	
03/13	03/19	1669*	CAMERA	360.00	
03/13	03/24	1670	RABBI MEIR BAAL HANIES SALON	36.00	
03/22	03/26	1671	CONG BETH ARON	7,500.00	
03/22	03/26	1674*	EMEK BRAD	360.00	
03/06	03/10	2028*	ESMF	5,100.00	
02/27	03/10	2129*	AISH KODESH	2,500.00	
03/04	03/13	2130	YESHIV OHR RECUVA	1,000.00	
03/04	03/11	2131	JEP	1,000.00	
03/04	03/09	2132	JEWISH CONNECTION	1,800.00	
03/04	03/11	2133	JEP	1,000.00	
03/05	03/10	2134	KEREN ZICHRON MOSHE	5,000.00	
03/04	03/19	2135	KOL YEHUDA	3,600.00	
03/21	03/31	2138*	PAYEE UNRECORDED	360.00	

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pg 2 of 16

JW FOUNDATION

Account Number: 5AV-02266

24-Hour Assistance: (866) 4MLBUSINESS
Access Code: 51-528-02266

YOUR WCMA TRANSACTIONS

February 28, 2015 - March 31, 2015

Date Written	Date Cleared	Check Number	Description	Debit	Credit
03/04	03/13	2139	MESIVTA AERES YAakov	1,000.00	
03/25	03/27	2140	KESER DOVID	750.00	
03/04	03/13	2141	ISRAEL TUITION FUND	1,000.00	
03/05	03/10	2142	TAL TECHIA	1,800.00	
03/16	03/24	2143	YESHIVA ELEM SCH	500.00	
03/24	03/24	2145*	S YOSHUR	5,000.00	
03/05	03/19	2146	OORAH	3,600.00	
03/12	03/13	2147	YESHIVAS MIR	10,000.00	
03/29	03/31	2149*	LEVI YITZOHAK FAMILY	2,000.00	
03/24	03/27	2150	CONG TIFERES TZVI	1,000.00	
02/14	03/30	2151	SHALVA	360.00	
03/15	03/10	2292*	SAICH YITZHOK	500.00	
03/19	03/24	2306*	T A G	10,000.00	
03/15	03/24	2315*	AISH KODESH	5,000.00	
02/25	03/04	2401*	SIACH YITZHOK	160.00	
03/05	03/09	2403*	TOVA	1,000.00	
03/05	03/17	2404	BONIM LAMOKOM ZICHRON MOSHE	1,800.00	
03/05	03/13	2405	TIKES YESHALAYM FDN	500.00	
03/05	03/17	2406	YESHIVA OHR HAMAUR	1,000.00	
03/05	03/11	2408*	KOLLEL ZICHON MORDECHAI	2,500.00	
03/05	03/11	2409	OHR YITZHOK	1,800.00	
03/05	03/10	2410	YESHIVA GEDOLAH	5,000.00	
03/05	03/09	2411	PAYEE UNRECORDED	1,000.00	
03/05	03/16	2413*	BMOR	3,600.00	
03/05	03/17	2414	K A C	10,200.00	
03/05	03/16	2415	YESHIVA TORA CHAIM	1,000.00	
03/05	03/13	2416	ISRAEL PURIM FUND	5,000.00	
03/05	03/10	2417	AISH KODESH	25,000.00	
03/05	03/17	2418	KIDS OF COURAGE	1,800.00	
03/05	03/25	2419	KIDS OF COURAGE	3,600.00	
03/05	03/25	2420	THE CHEDEN	1,100.00	

KE(REN) ANAYIM BALS WATER

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pg 8 of 16



JW FOUNDATION Account Number: 5AV-02266

YOUR WCMA TRANSACTIONS

February 28, 2015 - March 31, 2015

Date Written	Date Cleared	Check Number	Description	Debit	Credit
03/05	03/12	2421	CCNC	2,500.00	
03/05	03/10	2422	YESHIVA BELL HARBOR	1,800.00	
03/05	03/12	2423	YESHIVA OF	3,600.00	
03/05	03/12	2424	YANA	500.00	
03/05	03/10	2425	OHR NAFTALI	1,000.00	
02/20	03/12	2426	YAD RACHAMIM	1,000.00	
02/22	03/04	2433*	OHEL RIVKAH FDN	360.00	
03/02	03/17	2435*	DAVIS MEM FUND	365.00	
02/23	03/03	2436	CONG ZICHLRA SHLOMO	500.00	
03/03	03/04	2437	CAHAL	1,000.00	
03/03	03/10	2438	MISHKA HATORL	1,000.00	
02/23	03/02	2439	TORAS	10,000.00	
03/03	03/30	2441*	CONG TORAH	1,000.00	
03/16	03/31	2442	KEREN ZICHLRON MOSHE	2,500.00	
03/02	03/10	2443	BETH OLOTH	500.00	
NET TOTAL				166,171.00	

* Indicates gap in check sequence
To report Lost or Stolen Visa Cards or Checks, please call (800) CMA-LOST.

YOUR WCMA MONEY ACCOUNT TRANSACTIONS

Date	Description	Withdrawals	Deposits	Date	Description	Withdrawals	Deposits
03/02	ML BANK DEPOSIT PROGRAM	9,999.00		03/18	ML BANK DEPOSIT PROGRAM	360.00	
03/03	ML BANK DEPOSIT PROGRAM	500.00		03/19	ML BANK DEPOSIT PROGRAM	5,643.00	
03/04	ML BANK DEPOSIT PROGRAM	1,520.00		03/19	PREFERRED DEPOSIT (BUS)	25,000.00	
03/09	ML BANK DEPOSIT PROGRAM	3,800.00		03/20	ML BANK DEPOSIT PROGRAM		23,083.00
03/10	ML BANK DEPOSIT PROGRAM	7,368.00		03/24	ML BANK DEPOSIT PROGRAM	20,536.00	
03/10	PREFERRED DEPOSIT (BUS)	50,000.00		03/25	ML BANK DEPOSIT PROGRAM	2,547.00	
03/11	ML BANK DEPOSIT PROGRAM		1,868.00	03/25	PREFERRED DEPOSIT (BUS)	25,000.00	

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PJ of 16



JW FOUNDATION Account Number: 5AV-02266

YOUR WCMA TRANSACTIONS

April 01, 2015 - April 30, 2015

Date	Transaction Type	Quantity	Description	Income	Income Year To Date
04/30	Bank Interest		BANK DEPOSIT INTEREST	.11	
04/30	Bank Interest		BANK DEPOSIT INTEREST	15	
	Income Total		PREFERRED DEPOSIT (BUS)	4.00	
	Subtotal (Taxable Interest)			4.26	71.86
NET TOTAL				4.26	71.86

CHECKS WRITTEN/BILL PAYMENT

Date Written	Date Cleared	Check Number	Description	Debit	Credit
03/13	04/02	1668	WOODMERE FIRE DEPT	52.00	
03/25	04/01	1672*	YAD ELIEZE	1,000.00	
03/21	04/06	1675*	MILLINERY CENTER SYNAGOGUE	700.00	
04/13	04/14	1692*	CONG ELITZ CHAN	100.00	
03/04	04/20	2137*	JEWISH HERITAGE CARE	500.00	
03/16	04/20	2144*	CONG TORCH UTEFILAH	1,000.00	
04/27	04/30	2313*	YESHIVA OF PASSAIC	3,600.00	
03/05	04/02	2412*	CHAI LIFELINE	500.00	
02/23	04/06	2445*	NAVAH	1,000.00	
NET TOTAL				8,452.00	

* Indicates gap in check sequence

To report Lost or Stolen Visa Cards or Checks, please call (800) CMA-LOST

YOUR WCMA MONEY ACCOUNT TRANSACTIONS

Date	Description	Withdrawals	Deposits	Date	Description	Withdrawals	Deposits
04/01	ML BANK DEPOSIT PROGRAM		9,000.00	04/14	ML BANK DEPOSIT PROGRAM	100.00	
04/02	ML BANK DEPOSIT PROGRAM	552.00		04/20	ML BANK DEPOSIT PROGRAM	1,500.00	
04/06	ML BANK DEPOSIT PROGRAM	1,700.00		04/30	ML BANK DEPOSIT PROGRAM	3,600.00	

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pg 10 of 16



JW FOUNDATION Account Number: 5AV-02266

YOUR WCMA TRANSACTIONS

May 01, 2015 - May 29, 2015

Date	Transaction Type	Quantity	Description	Income	Income Year To Date
05/21	Bank Interest		BANK DEPOSIT INT 05/21	06	
05/27	Bank Interest		BANK DEPOSIT INT 05/27	1.73	
	Subtotal (Taxable Interest)			1.79	73.65
	NET TOTAL			1.79	73.65

CHECKS WRITTEN/BILL PAYMENT

Date Written	Date Cleared	Check Number	Description	Debit	Credit
05/21	05/27	1691	MEOR YITZCHOK	6,000.00	
05/06	05/20	2314*	STUDENT AID	360.00	
02/25	05/11	2402*	DARCHEI BINAH	180.00	
05/12	05/22	2430*	YESHIVA CHAYZI OLAM	500.00	
05/01	05/07	2432*	BM OF YRSRH	1,000.00	
05/01	05/05	2446*	KHAL ZICHRON ARYEH LEIB	5,000.00	
05/01	05/05	2447	AMERICAN FRIENDS OF KESSER BNA	5,000.00	
05/01	05/13	2448	LECHEM LASOVA	250.00	
05/18	05/21	2449	NCSY SUMMER SCHOLARSHIP FUND	15,000.00	
04/15	05/05	2476*	YESHIVA UNIV YU CONNECTS	500.00	
05/08	05/15	2478*	LIFE LONG ISLAND FOUNDATION	720.00	
02/12	05/22	2563*	YV CONNOR YESHIVA UNIVERSITY	2,500.00	
			NET TOTAL	37,010.00	

* Indicates gap in check sequence

To report Lost or Stolen Visa Cards or Checks, please call (800) CMA-LOST.

YOUR WCMA MONEY ACCOUNT TRANSACTIONS

Date	Description	Withdrawals	Deposits	Date	Description	Withdrawals	Deposits
05/01	ML BANK DEPOSIT PROGRAM		1.00	05/20	ML BANK DEPOSIT PROGRAM	360.00	
05/05	ML BANK DEPOSIT PROGRAM	8,566.00		05/21	ML BANK DEPOSIT PROGRAM		10,556.00

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pg 11 of 16



JW FOUNDATION Account Number 5AV-02266

YOUR WCMA TRANSACTIONS

May 30, 2015 - June 30, 2015

Date	Transaction Type	Quantity	Description	Debit	Credit
06/04	Journal Entry		TR FROM 5AV22970		6,640.02
	Subtotal (Other Debits/Credits)				6,640.02
	NET TOTAL				6,640.02

CHECKS WRITTEN/BILL PAYMENT

Date Written	Date Cleared	Check Number	Description	Debit	Credit
05/12	06/19	2450	NEVEL ZION	1,000.00	
05/01	06/01	2477*	MAOR HATORAH	1,500.00	
05/19	06/10	2479*	SHEEFA	250.00	
05/26	06/03	2482*	DOROT	180.00	
05/26	06/05	2483	YESHIVA OF GREATER WASHINGTON	5,000.00	
05/28	06/02	2484	MIKVAH MOSHE	180.00	
			NET TOTAL	8,110.00	

* Indicates gap in check sequence
 To report Lost or Stolen Visa Cards or Checks, please call (800) CMA-LOST

YOUR WCMA MONEY ACCOUNT TRANSACTIONS

Date	Description	Withdrawals	Deposits	Date	Description	Withdrawals	Deposits
06/01	ML BANK DEPOSIT PROGRAM	1,500.00		06/05	ML BANK DEPOSIT PROGRAM		1,641.00
06/02	ML BANK DEPOSIT PROGRAM	180.00		06/10	ML BANK DEPOSIT PROGRAM	250.00	
06/03	ML BANK DEPOSIT PROGRAM	180.00		06/19	ML BANK DEPOSIT PROGRAM	1,000.00	
	NET TOTAL					1,469.00	

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PJ 12 of 16



JW FOUNDATION Account Number: 5AV-02266

YOUR WCMA TRANSACTIONS

July 01, 2015 - July 31, 2015

CASH/OTHER TRANSACTIONS				Quantity	Description	Debit	Credit
Date	Transaction Type						
07/20	Journal Entry				TR FROM 5AV22970		5,000.00
	Subtotal (Other Debits/Credits)						5,000.00
NET TOTAL							5,000.00

CHECKS WRITTEN/BILL PAYMENT

Date Written	Date Cleared	Check Number	Description	Debit	Credit
05/19	07/16	2480	CHAI LIFELINE	650.00	
05/26	07/02	2481	KIMPATORIN AID	180.00	
06/04	07/30	2491*	HEBRON FUND	1,000.00	
NET TOTAL				1,830.00	

* Indicates gap in check sequence

To report Lost or Stolen Visa Cards or Checks, please call (800) CMA-LOST

YOUR WCMA MONEY ACCOUNT TRANSACTIONS

Date	Description	Withdrawals	Deposits	Date	Description	Withdrawals	Deposits
07/02	ML BANK DEPOSIT PROGRAM	180.00		07/21	ML BANK DEPOSIT PROGRAM		5,000.00
07/16	ML BANK DEPOSIT PROGRAM	650.00		07/30	ML BANK DEPOSIT PROGRAM	1,000.00	
NET TOTAL							3,170.00

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pg 13 of 16



JW FOUNDATION Account Number: 5AV-02266

YOUR WCMA TRANSACTIONS

August 01, 2015 - August 31, 2015

Date	Transaction Type	Quantity	Description	Debit	Credit
08/10	Wire Transfer		WIRE TRF IN D45222030738 ORG=/3584091489 JEFFREY		6,000.00
08/12	Journal Entry		TR TO 5AV22970 N/O JEFFREY WEINBERG AND	700.00	6,000.00
	Subtotal (Other Debits/Credits)			700.00	
	NET TOTAL			5,300.00	

Date Written	Date Cleared	Check Number	Description	Debit	Credit
08/15	08/21	230	NCSY	500.00	
07/20	08/07	1673*	OHSL	3,600.00	
08/09	08/14	2078*	AMERICAN FRIENDS OF YAD ELIEZE	500.00	
08/04	08/07	2320*	AISH KODEL	1,000.00	
05/12	08/11	2431*	FREEHOLD KELLES	500.00	
08/10	08/13	2489*	BRAUN	180.00	
07/30	08/13	2490	TORO SYNAGOGUE	180.00	
			NET TOTAL	-8,252.00-	

* Indicates gap in check sequence
To report Lost or Stolen Visa Cards or Checks, please call (800) CMAALOST

YOUR WCMA MONEY ACCOUNT TRANSACTIONS

Date	Description	Withdrawals	Deposits	Date	Description	Withdrawals	Deposits
08/06	ML BANK DEPOSIT PROGRAM	1,792.00		08/13	ML BANK DEPOSIT PROGRAM	360.00	
08/07	ML BANK DEPOSIT PROGRAM	4,600.00		08/14	ML BANK DEPOSIT PROGRAM	500.00	

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PJ 14 of 16



JW FOUNDATION Account Number 5AV-02266

YOUR WCMA TRANSACTIONS

September 01, 2015 - September 30, 2015

CASH/OTHER TRANSACTIONS				Quantity	Description	Debit	Credit
Date	Transaction Type	Check Number	Description				
09/01	Wire Transfer		WIRE TRF IN D45244024085			30,000.00	
			ORG=/3584091489-JEFFREY			30,000.00	
Subtotal (Electronic Transfers)						30,000.00	
NET TOTAL						30,000.00	

CHECKS WRITTEN/BILL PAYMENT				Description	Debit	Credit
Date Written	Date Cleared	Check Number	Description			
09/11	09/29	2079	GUSH ETZION FDN	360.00		
09/12	09/18	2080	BETH HADASSAH SYNAGOGUE	2,000.00		
09/02	09/09	2083*	BAIS AARON VISRAEL	1,000.00		
09/22	09/24	2085*	RIVKA MOSKOWITZ GEMILUS CHESSE	10,000.00		
09/10	09/25	2086	RABBI MEIR BAAL HANIES SALON	180.00		
09/15	09/18	2311*	AISH KODESH	800.00		
09/01	09/09	2317*	FRIENDS OF UNITED HEALTH	7,000.00		
09/03	09/17	2321*	TOMCHEI SHABBOS	500.00		
NET TOTAL				21,840.00		

* Indicates gap in check sequence
 To report Lost or Stolen Visa Cards or Checks, please call (800) CMA-LOST

YOUR WCMA MONEY ACCOUNT TRANSACTIONS

Date	Description	Withdrawals	Deposits	Date	Description	Withdrawals	Deposits
09/02	ML BANK DEPOSIT PROGRAM		30,000.00	09/24	ML BANK DEPOSIT PROGRAM	10,000.00	
09/09	ML BANK DEPOSIT PROGRAM	8,000.00		09/25	ML BANK DEPOSIT PROGRAM	180.00	
09/17	ML BANK DEPOSIT PROGRAM	500.00		09/29	ML BANK DEPOSIT PROGRAM	360.00	
09/18	ML BANK DEPOSIT PROGRAM	2,800.00					
NET TOTAL						8,160.00	

pg 15 of 16



JW FOUNDATION Account Number: 5AV-02266

YOUR WCMA TRANSACTIONS

October 01, 2015 - October 30, 2015

CASH/OTHER TRANSACTIONS			
Date	Transaction Type	Quantity	Description
10/20	Wire Transfer		WIRE TRF IN D45293019277 ORG=/80001564823 JEFFREY
			25,000.00
			25,000.00
			25,000.00

CHECKS WRITTEN/BILL PAYMENT			
Date Written	Date Cleared	Check Number	Description
10/18	10/26	2082	BILVAVI MISHKAN EVNEH INC
09/10	10/30	2084*	CHASDEY MOSHE
09/10	10/20	2087*	YAD RACHAMIM
10/12	10/20	2485*	CAMERA
10/11	10/21	2486	THE HEBRON FUND
10/12	10/16	2488*	AMERICAN FRIENDS OF ATERET COH
10/12	10/19	2492*	STAND WITH US
10/20	10/28	2494*	YESHIVA UNIVERSITY HS FOR GIRL
10/27	10/29	2495	COUTURE FOR A CAUSE
10/27	10/29	2496	COUTURE FOR A CAUSE
			14,090.00

* Indicates gap in check sequence

To report Lost or Stolen Visa Cards or Checks, please call (800) CMA-LOST.

YOUR WCMA MONEY ACCOUNT TRANSACTIONS

Date	Description	Withdrawals	Deposits	Date	Description	Withdrawals	Deposits
10/16	ML BANK DEPOSIT PROGRAM	180.00		10/28	ML BANK DEPOSIT PROGRAM	10,000.00	
10/19	ML BANK DEPOSIT PROGRAM	100.00		10/29	ML BANK DEPOSIT PROGRAM	320.00	
10/21	ML BANK DEPOSIT PROGRAM		23,460.00	10/30	ML BANK DEPOSIT PROGRAM	750.00	

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PJ 16 of 16



Account Number: 5AV-02266

YOUR WCMA TRANSACTIONS

October 31, 2015 - November 30, 2015

JW FOUNDATION

CHECKS WRITTEN/BILL PAYMENT				Debit	Credit
Date Written	Date Cleared	Check Number	Description		
11/04	11/06	1690	AMERICAN FRIENDS OF KESSER BNA	3,600.00	
11/15	11/18	2081*	BILVAVI MISHKAM EVNEH	1,200.00	
10/12	11/25	2493*	YESHIVAT SHAALUJIM	100.00	
NET TOTAL				7,435.00	4,900

* Indicates gap in check sequence
 To report Lost or Stolen Visa Cards or Checks, please call (800) CMA-LOST.

YOUR WCMA MONEY ACCOUNT TRANSACTIONS

Date	Description	Withdrawals	Deposits	Date	Description	Withdrawals	Deposits
11/02	ML BANK DEPOSIT PROGRAM	2,535.00		11/18	ML BANK DEPOSIT PROGRAM	1,200.00	
11/06	ML BANK DEPOSIT PROGRAM	3,600.00		11/25	ML BANK DEPOSIT PROGRAM	100.00	
NET TOTAL						7,435.00	