

For calendar year 2015, or tax year beginning 01-01-2015 , and ending 12-31-2015

Name of foundation DAVID ROSENBAUM FAMILY FOUNDATION		<b>A Employer identification number</b>  22-3770897	
Number and street (or P O box number if mail is not delivered to street address) 525 ROUTE 70W		Room/suite	<b>B</b> Telephone number (see instructions)  (732) 901-6600
City or town, state or province, country, and ZIP or foreign postal code LAKEWOOD, NJ 08701		<b>C</b> If exemption application is pending, check here <input type="checkbox"/>	
<b>G</b> Check all that apply <input type="checkbox"/> Initial return <input type="checkbox"/> Initial return of a former public charity <input type="checkbox"/> Final return <input type="checkbox"/> Amended return <input type="checkbox"/> Address change <input type="checkbox"/> Name change		<b>D 1.</b> Foreign organizations, check here <input type="checkbox"/>  <b>2.</b> Foreign organizations meeting the 85% test, check here and attach computation <input type="checkbox"/>	
<b>H</b> Check type of organization <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		<b>E</b> If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/>	
<b>I</b> Fair market value of all assets at end of year (from Part II, col (c), line 16) <b>\$</b> 1,764,785		<b>F</b> If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/>	
<b>J</b> Accounting method <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> 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) (see instructions) )	Revenue and expenses per books (a)	Net investment income (b)	Adjusted net income (c)	Disbursements for charitable purposes (d) (cash basis only)
Revenue	<b>1</b> Contributions, gifts, grants, etc , received (attach schedule) . . . . .	160,002			
	<b>2</b> Check <input type="checkbox"/> if the foundation is <b>not</b> required to attach Sch B . . . . .				
	<b>3</b> Interest on savings and temporary cash investments	801	801		
	<b>4</b> Dividends and interest from securities . . . . .				
	<b>5a</b> Gross rents . . . . .				
	<b>b</b> Net rental income or (loss) _____				
	<b>6a</b> Net gain or (loss) from sale of assets not on line 10 _____				
	<b>b</b> Gross sales price for all assets on line 6a _____				
	<b>7</b> Capital gain net income (from Part IV, line 2) . . . .				
	<b>8</b> Net short-term capital gain . . . . .				
	<b>9</b> Income modifications . . . . .				
	<b>10a</b> Gross sales less returns and allowances _____				
Operating and Administrative Expenses	<b>b</b> Less Cost of goods sold . . . . .				
	<b>c</b> Gross profit or (loss) (attach schedule) . . . . .				
	<b>11</b> Other income (attach schedule) . . . . .				
	<b>12 Total.</b> Add lines 1 through 11 . . . . .	160,803	801		
	<b>13</b> Compensation of officers, directors, trustees, etc				
	<b>14</b> Other employee salaries and wages . . . . .				
	<b>15</b> Pension plans, employee benefits . . . . .				
	<b>16a</b> Legal fees (attach schedule). . . . .				
	<b>b</b> Accounting fees (attach schedule).  . . . . .	2,000	2,000		
	<b>c</b> Other professional fees (attach schedule) . . . . .				
	<b>17</b> Interest . . . . .				
	<b>18</b> Taxes (attach schedule) (see instructions) . . . .				
	<b>19</b> Depreciation (attach schedule) and depletion . . . .				
	<b>20</b> Occupancy . . . . .				
	<b>21</b> Travel, conferences, and meetings. . . . .				
	<b>22</b> Printing and publications . . . . .				
	<b>23</b> Other expenses (attach schedule).  . . . . .	27,044	27,044		
	<b>24 Total operating and administrative expenses.</b> Add lines 13 through 23 . . . . .	29,044	29,044		0
	<b>25</b> Contributions, gifts, grants paid . . . . .	199,871			199,871
	<b>26 Total expenses and disbursements.</b> Add lines 24 and 25	228,915	29,044		199,871
	<b>27</b> Subtract line 26 from line 12				
	<b>a Excess of revenue over expenses and disbursements</b>	-68,112			
	<b>b Net investment income</b> (if negative, enter -0-)		0		
	<b>c Adjusted net income</b> (if negative, enter -0-)				

Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)	Beginning of year	End of year	
			(a) Book Value	(b) Book Value	(c) Fair Market Value
Assets	1	Cash—non-interest-bearing . . . . .	654,078	543,689	543,689
	2	Savings and temporary cash investments . . . . .			
	3	Accounts receivable ▶ _____ Less allowance for doubtful accounts ▶ _____			
	4	Pledges receivable ▶ _____ Less allowance for doubtful accounts ▶ _____			
	5	Grants receivable . . . . .			
	6	Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions). . . . .			
	7	Other notes and loans receivable (attach schedule) ▶ 1,221,096 Less allowance for doubtful accounts ▶ _____	1,151,545	1,221,096	1,221,096
	8	Inventories for sale or use . . . . .			
	9	Prepaid expenses and deferred charges . . . . .			
	10a	Investments—U S and state government obligations (attach schedule)			
	b	Investments—corporate stock (attach schedule) . . . . .			
	c	Investments—corporate bonds (attach schedule) . . . . .			
	11	Investments—land, buildings, and equipment basis ▶ _____ Less accumulated depreciation (attach schedule) ▶ _____			
	12	Investments—mortgage loans . . . . .			
	13	Investments—other (attach schedule) . . . . .	27,274		
	Liabilities	14	Land, buildings, and equipment basis ▶ _____ Less accumulated depreciation (attach schedule) ▶ _____		
15		Other assets (describe ▶ _____)			
16		Total assets(to be completed by all filers—see the instructions Also, see page 1, item I)	1,832,897	1,764,785	1,764,785
17		Accounts payable and accrued expenses . . . . .			
18		Grants payable . . . . .			
19		Deferred revenue . . . . .			
20		Loans from officers, directors, trustees, and other disqualified persons			
21		Mortgages and other notes payable (attach schedule). . . . .			
22		Other liabilities (describe ▶ _____)			
23		Total liabilities(add lines 17 through 22) . . . . .		0	
Net Assets or Fund Balances	Foundations that follow SFAS 117, check here ▶ <input checked="" type="checkbox"/> and complete lines 24 through 26 and lines 30 and 31.				
	24	Unrestricted . . . . .	1,832,897	1,764,785	
	25	Temporarily restricted . . . . .			
	26	Permanently restricted . . . . .			
	Foundations that do not follow SFAS 117, check here ▶ <input type="checkbox"/> and complete lines 27 through 31.				
	27	Capital stock, trust principal, or current funds . . . . .			
	28	Paid-in or capital surplus, or land, bldg, and equipment fund			
	29	Retained earnings, accumulated income, endowment, or other funds			
	30	Total net assets or fund balances(see instructions) . . . . .	1,832,897	1,764,785	
	31	Total liabilities and net assets/fund balances(see instructions) . . . . .	1,832,897	1,764,785	

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	1,832,897	
2	Enter amount from Part I, line 27a . . . . .	2	-68,112	
3	Other increases not included in line 2 (itemize) ▶ _____	3		
4	Add lines 1, 2, and 3 . . . . .	4	1,764,785	
5	Decreases not included in line 2 (itemize) ▶ _____	5		
6	Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30 . . . . .	6	1,764,785	

Part IV

Capital Gains and Losses for Tax on Investment Income

List and describe the kind(s) of property sold (e g , real estate, (a) 2-story brick warehouse, or common stock, 200 shs MLC Co )		How acquired P—Purchase (b) D—Donation	Date acquired (c) (mo , day, yr )	Date sold (d) (mo , day, yr )
1a				
b				
c				
d				
e				

(e) Gross sales price	Depreciation allowed (f) (or allowable)	Cost or other basis (g) plus expense of sale	Gain or (loss) (h) (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) F M V as of 12/31/69	Adjusted basis (j) as of 12/31/69	Excess of col (i) (k) over col (j), if any	Gains (Col (h) gain minus col (k), but not less than -0- ) or Losses (from col (h)) (l)
a			
b			
c			
d			
e			

2	Capital gain net income or (net capital loss)	If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7	2	
3	Net short-term capital gain or (loss) as defined in sections 1222(5) and (6)  If gain, also enter in Part I, line 8, column (c) (see instructions) If (loss), enter -0- in Part I, line 8		3	

Part V

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

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income )  
If section 4940(d)(2) applies, leave this part blank

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? ☐ Yes ☒ No  
If "Yes," the foundation does not qualify under section 4940(e) Do not complete this part

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

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col (b) divided by col (c))
2014	199,809	647,956	0 308368
2013	151,918	732,886	0 207287
2012	139,024	1,040,268	0 133642
2011	98,253	789,961	0 124377
2010	109,655	656,042	0 167146

2	Total of line 1, column (d).	2	0 940820
3	Average distribution ratio for the 5-year base period—divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years	3	0 188164
4	Enter the net value of noncharitable-use assets for 2015 from Part X, line 5.	4	609,632
5	Multiply line 4 by line 3.	5	114,711
6	Enter 1% of net investment income (1% of Part I, line 27b).	6	
7	Add lines 5 and 6.	7	114,711
8	Enter qualifying distributions from Part XII, line 4.	8	199,871

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate See  
the Part VI instructions

Part VII

Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see page 18 of the instructions)

1a		Exempt operating foundations described in section 4940(d)(2), check here <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	
3		Add lines 1 and 2. . . . .		3	
4		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			
a		2015 estimated tax payments and 2014 overpayment credited to 2015		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	
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	
10		Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid. . . . .		10	
11		Enter the amount of line 10 to be Credited to 2015 estimated tax Refunded		11	

Part VII-A

Statements Regarding Activities

1a		During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? . . . . .		1a	Yes	No
b		Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for 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		1b		No
c		Did the foundation file Form 1120-POL for this year? . . . . .		1c		No
d		Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year (1) On the foundation \$ (2) On foundation managers \$				
e		Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers \$				
2		Has the foundation engaged in any activities that have not previously been reported to the IRS? . . . . . If "Yes," attach a detailed description of the activities		2		No
3		Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes . . . . .		3		No
4a		Did the foundation have unrelated business gross income of \$1,000 or more during the year? . . . . .		4a		No
b		If "Yes," has it filed a tax return on Form 990-T for this year? . . . . .		4b		
5		Was there a liquidation, termination, dissolution, or substantial contraction during the year? . . . . . If "Yes," attach the statement required by General Instruction T		5		No
6		Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument? . . . . .		6		
7		Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV . . . . .		7	Yes	
8a		Enter the states to which the foundation reports or with which it is registered (see instructions) ▶ _____				
b		If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? If "No," attach explanation .		8b		
9		Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)? If "Yes," complete Part XIV . . . . .		9		No
10		Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses . . . . .		10		No

**Part VII-A Statements Regarding Activities (continued)**

<b>11</b>	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). . . . .	<b>11</b>		<b>No</b>
<b>12</b>	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) . . . . .	<b>12</b>		<b>No</b>
<b>13</b>	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ► <u>N/A</u>	<b>13</b>	<b>Yes</b>	
<b>14</b>	The books are in care of ► <u>ORGANIZATION</u> Telephone no ► <u>(732) 901-6600</u> Located at ► <u>525 ROUTE 70W LAKEWOOD NJ</u> ZIP+4 ► <u>08701</u>			
<b>15</b>	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of <b>Form 1041</b> —Check here . . . . . ► <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the year . . . . . ► <b>15</b>			
<b>16</b>	At any time during calendar year 2015, 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 instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) If "Yes", enter the name of the foreign country ►	<b>16</b>	<b>Yes</b>	<b>No</b>

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

<b>File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.</b>			<b>Yes</b>	<b>No</b>
<b>1a</b>	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? ( <b>Exception.</b> 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>b</b>	If any answer is "Yes" to 1a(1)–(6), did <b>any</b> 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)? . . . . . <b>1b</b>			
	Organizations relying on a current notice regarding disaster assistance check here. . . . . ► <input type="checkbox"/>			
<b>c</b>	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 2015? . . . . . <b>1c</b>			
<b>2</b>	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))			
<b>a</b>	At the end of tax year 2015, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2015? . . . . . <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "Yes," list the years ► 20____, 20____, 20____, 20____			
<b>b</b>	Are there any years listed in 2a for which the foundation is <b>not</b> 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 <b>all</b> years listed, answer "No" and attach statement—see instructions ). . . . . <b>2b</b>			
<b>c</b>	If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here ► 20____, 20____, 20____, 20____			
<b>3a</b>	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>b</b>	If "Yes," did it have excess business holdings in 2015 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? ( <i>Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2015</i> ). . . . . <b>3b</b>			
<b>4a</b>	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	<b>4a</b>		<b>No</b>
<b>b</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 2015?	<b>4b</b>		<b>No</b>

Part VII-B

Statements Regarding Activities for Which Form 4720 May Be Required (Continued)

5a

During the year did the foundation pay or incur any amount to

(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?

☐ Yes

☒ No

(2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive?

☐ Yes

☒ No

(3) Provide a grant to an individual for travel, study, or other similar purposes?

☐ Yes

☒ No

(4) Provide a grant to an organization other than a charitable, etc , organization described in section 4945(d)(4)(A)? (see instructions).

☐ Yes

☒ No

(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?

☐ Yes

☒ No

b

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

5b

Organizations relying on a current notice regarding disaster assistance check here. 

▶

c

If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?

☐ Yes

☐ No

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

6a

Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?

☐ Yes

☒ No

b

Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?

6b

No

If "Yes" to 6b, file Form 8870

7a

At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?

☐ Yes

☒ No

b

If yes, did the foundation receive any proceeds or have any net income attributable to the transaction?

7b

Part VIII

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

1

List all officers, directors, trustees, foundation managers and their compensation (see instructions).

(a) Name and address	Title, and average hours per week (b) devoted to position	(c) Compensation(If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	Expense account, (e) other allowances
DAVID ROSENBAUM	TRUSTEE	0	0	0
619 SIXTH STREET LAKEWOOD, NJ 08701	3 00			
ESTHER ROSENBAUM	TRUSTEE	0	0	0
619 SIXTH STREET LAKEWOOD, NJ 08701	1 00			

2

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

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

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

▶

**Part VIII**

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

<b>3</b> Five highest-paid independent contractors for professional services (see instructions). If none, enter "NONE".		
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		

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

**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
<b>1</b>	
<b>2</b>	
<b>3</b>	
<b>4</b>	

**Part IX-B**

Summary of Program-Related Investments (see instructions)

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
<b>1</b> N/A	
<b>2</b>	
All other program-related investments. See instructions.	
<b>3</b>	

Total. Add lines 1 through 3 . . . . . ▶

**Part X Minimum Investment Return**

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

<b>1</b>	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc , purposes		
<b>a</b>	Average monthly fair market value of securities. . . . .	<b>1a</b>	0
<b>b</b>	Average of monthly cash balances. . . . .	<b>1b</b>	618,916
<b>c</b>	Fair market value of all other assets (see instructions). . . . .	<b>1c</b>	0
<b>d</b>	<b>Total</b> (add lines 1a, b, and c). . . . .	<b>1d</b>	618,916
<b>e</b>	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation). . . . .	<b>1e</b>	
<b>2</b>	Acquisition indebtedness applicable to line 1 assets. . . . .	<b>2</b>	
<b>3</b>	Subtract line 2 from line 1d. . . . .	<b>3</b>	618,916
<b>4</b>	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see instructions). . . . .	<b>4</b>	9,284
<b>5</b>	<b>Net value of noncharitable-use assets.</b> Subtract line 4 from line 3 Enter here and on Part V, line 4	<b>5</b>	609,632
<b>6</b>	<b>Minimum investment return.</b> Enter 5% of line 5. . . . .	<b>6</b>	30,482

**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.)

<b>1</b>	Minimum investment return from Part X, line 6. . . . .	<b>1</b>	30,482
<b>2a</b>	Tax on investment income for 2015 from Part VI, line 5. . . . .	<b>2a</b>	
<b>b</b>	Income tax for 2015 (This does not include the tax from Part VI ). . . . .	<b>2b</b>	
<b>c</b>	Add lines 2a and 2b. . . . .	<b>2c</b>	
<b>3</b>	Distributable amount before adjustments Subtract line 2c from line 1. . . . .	<b>3</b>	30,482
<b>4</b>	Recoveries of amounts treated as qualifying distributions. . . . .	<b>4</b>	
<b>5</b>	Add lines 3 and 4. . . . .	<b>5</b>	30,482
<b>6</b>	Deduction from distributable amount (see instructions). . . . .	<b>6</b>	
<b>7</b>	<b>Distributable amount</b> as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1. . . . .	<b>7</b>	30,482

**Part XII Qualifying Distributions** (see instructions)

<b>1</b>	Amounts paid (including administrative expenses) to accomplish charitable, etc , purposes		
<b>a</b>	Expenses, contributions, gifts, etc —total from Part I, column (d), line 26. . . . .	<b>1a</b>	199,871
<b>b</b>	Program-related investments—total from Part IX-B. . . . .	<b>1b</b>	
<b>2</b>	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc , purposes. . . . .	<b>2</b>	
<b>3</b>	Amounts set aside for specific charitable projects that satisfy the		
<b>a</b>	Suitability test (prior IRS approval required). . . . .	<b>3a</b>	
<b>b</b>	Cash distribution test (attach the required schedule). . . . .	<b>3b</b>	
<b>4</b>	<b>Qualifying distributions.</b> Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	<b>4</b>	199,871
<b>5</b>	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income Enter 1% of Part I, line 27b (see instructions). . . . .	<b>5</b>	
<b>6</b>	<b>Adjusted qualifying distributions.</b> Subtract line 5 from line 4. . . . .	<b>6</b>	199,871

**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 2014	(c) 2014	(d) 2015
1 Distributable amount for 2015 from Part XI, line 7				30,482
2 Undistributed income, if any, as of the end of 2015				
a Enter amount for 2014 only. . . . .				
b Total for prior years 20____, 20____, 20____				
3 Excess distributions carryover, if any, to 2015				
a From 2010. . . . .	77,130			
b From 2011. . . . .	58,883			
c From 2012. . . . .	87,121			
d From 2013. . . . .	115,302			
e From 2014. . . . .	167,411			
f Total of lines 3a through e. . . . .	505,847			
4 Qualifying distributions for 2015 from Part XII, line 4 ▶ \$ 199,871				
a Applied to 2014, but not more than line 2a				
b Applied to undistributed income of prior years (Election required—see instructions). . . . .				
c Treated as distributions out of corpus (Election required—see instructions). . . . .				
d Applied to 2015 distributable amount. . . . .				30,482
e Remaining amount distributed out of corpus	169,389			
5 Excess distributions carryover applied to 2015 (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	675,236			
b Prior years' undistributed income Subtract line 4b from line 2b. . . . .				
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed. . . . .				
d Subtract line 6c from line 6b Taxable amount—see instructions . . . . .				
e Undistributed income for 2014 Subtract line 4a from line 2a Taxable amount—see instructions . . . . .				
f Undistributed income for 2016 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2015. . . . .				0
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions). . . . .				
8 Excess distributions carryover from 2010 not applied on line 5 or line 7 (see instructions). . .	77,130			
9 Excess distributions carryover to 2016. Subtract lines 7 and 8 from line 6a. . . . .	598,106			
10 Analysis of line 9				
a Excess from 2011. . . .	58,883			
b Excess from 2012. . . .	87,121			
c Excess from 2013. . . .	115,302			
d Excess from 2014. . . .	167,411			
e Excess from 2015. . . .	169,389			

## Part XIV

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**b** Check box to indicate whether the organization

Tax year	Prior 3 years			(e) Total
(a) 2015	(b) 2014	(c) 2013	(d) 2012	

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## Part XV

## 1 Information Regarding Foundation Managers:

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) )

DAVID ROSENBAUM

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

**2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:**

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

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

DAVID ROSENBAUM  
619 SIXTH STREET  
LAKEWOOD, NJ 08701  
(732) 901-6600

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

APPLICATIONS IN ALL FORMS ARE CONSIDERED. INFORMATION SHOULD INCLUDE A DESCRIPTION OF THE CHARITY AND USE TO WHICH GRANTS APPLIED FOR WILL BE PUT.

Any submission deadlines

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

NONE

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 See Additional Data Table				
Total . . . . .			▶ 3a	199,871
b Approved for future payment				
Total . . . . .			▶ 3b	

Enter gross amounts unless otherwise indicated

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

Form **990-PF** (2015)

**1** Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?

(1) Cash. . . . .

(2) Other assets. . . . .

- (1) Sales of assets to a noncharitable exempt organization. . . . .
- (2) Purchases of assets from a noncharitable exempt organization. . . . .
- (3) Rental of facilities, equipment, or other assets. . . . .
- (4) Reimbursement arrangements. . . . .
- (5) Loans or loan guarantees. . . . .
- (6) Performance of services or membership or fundraising solicitations. . . . .

**d** If the answer to any of the above is "Yes," complete the following schedule. Column **(b)** should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column **(d)** the value of the goods, other assets, or services received.

[illegible]

**b** If "Yes," complete the following schedule

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


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

\* \* \* \* \*

Title

(see instr )? ☐ Yes ☐ No

Phone no (732) 886-6311

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
CHAYEI OLAM CHAYEI OLAM 1000 BENNETT BLVD 1000 BENNETT BLVD LAKEWOOD,NJ 08701			EDUCATIONAL	250
AMERICAN FRIENDS OF AMOLAH SHEL TOR AMERICAN FRIENDS OF AMOLAH SHEL TORAH 1072 MADISON AVE 1072 MADISON AVE LAKEWOOD,NJ 08701			EDUCATIONAL	5,360
KEREN HATORAH KEREN HATORAH 1083 BROOK RD 1083 BROOK RD LAKEWOOD,NJ 08701			EDUCATIONAL	10,100
V'YELIPOL YESHIVA V'YELIPOL YESHIVA 1088 E 21ST STREET 1088 E 21ST STREET BROOKLYN,NY 11210			EDUCATIONAL	360
TIFERES TZVI TIFERES TZVI 11 12TH STREET 11 12TH STREET LAKEWOOD,NJ 08701			EDUCATIONAL	236
YESHIVA YESODEI HACHAIM YESHIVA YESODEI HACHAIM 11 DAHILL COURT 11 DAHILL COURT BROOKLYN,NY 11204			EDUCATIONAL	360
ALIYOS ELIYAHU ALIYOS ELIYAHU 1160 E 19TH ST 1160 E 19TH ST BROOKLYN,NY 11230			EDUCATIONAL	360
YESHIVA KETANA YESHIVA KETANA 120 2ND ST 120 2ND ST LAKEWOOD,NJ 08701			EDUCATIONAL	6,650
BNOS MELECH BNOS MELECH 120 ROSEBANK ST 120 ROSEBANK ST LAKEWOOD,NJ 08701			EDUCATIONAL	7,600
CONG ANSHEI SFARD CONG ANSHEI SFARD 1250 MADISON AVE 1250 MADISON AVE LAKEWOOD,NJ 08701			CHARITABLE	450
CONG TYY-SKVER CONG TYY-SKVER 13 CATHEDRAL DRIVE 13 CATHEDRAL DRIVE LAKEWOOD,NJ 08701			CHARITABLE	216
YESHIVA BAIS BINYAMINBAIS PINCHOS YESHIVA BAIS BINYAMIN/BAIS PINCHOS SHOLOM 132 PROSPECT ST 132 PROSPECT ST LAKEWOOD,NJ 08701			EDUCATIONAL	360
CHESED L'AVROHOM CHESED L'AVROHOM 1320 53RD STREET 1320 53RD ST BROOKLYN,NY 11219			CHARITABLE	1,000
ZICHRON GEDALYAHU ZICHRON GEDALYAHU 1354 SHAFTO 1354 SHAFTO LAKEWOOD,NJ 08701			CHARITABLE	360
NY BOTA SEFER NY BOTA SEFER 14 ENGLEBERG TERRACE 14 ENGLEBERG TERRACE LAKEWOOD,NJ 08701			CHARITABLE	1,100
<b>Total</b> . . . . .  <b>3a</b>				199,871

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> Paid during the year				
ZICHRON CHAIM ZICHRON CHAIM 14 ENGLEBERG TERRACE 14 ENGLEBERG TERRACE LAKEWOOD,NJ 08701			CHARITABLE	1,300
YESHIVA KOL TORAH YESHIVA KOL TORAH 1406 14TH STREET 1406 14TH STREET LAKEWOOD,NJ 08701			EDUCATIONAL	500
YESHIVA SHAAREI ORAH YESHIVA SHAAREI ORAH 1408 LEXINGTON AVE 1408 LEXINGTON AVE LAKEWOOD,NJ 08701			EDUCATIONAL	360
OHR CHAIM OHR CHAIM 1424 49TH STREET 1424 49TH ST BROOKLYN,NY 11219			CHARITABLE	360
MEKOR HACHINUCH MEKOR HACHINUCH 1430 ARDENWOOD AVE 1430 ARDENWOOD AVE LAKEWOOD,NJ 08701			EDUCATIONAL	500
ZICHRON MOSHE ZICHRON MOSHE 1441 MONMOUTH AVENUE 1441 MONMOUTH AVENUE LAKEWOOD,NJ 08701			CHARITABLE	9,880
BAIS MORDECHAI BAIS MORDECHAI 1455 HEATHWOOD 1455 HEATHWOOD LAKEWOOD,NJ 08701			CHARITABLE	600
RELIEF RELIEF 150 JAMES ST 150 JAMES ST LAKEWOOD,NJ 08701			CHARITABLE	2,000
MOSDOS OHR HATORAH MOSDOS OHR HATORAH 1508 WARRENSVILLE CENTER 1508 WARRENSVILLE CENTER CLEVELAND,OH 44121			EDUCATIONAL	9,100
MEKOR CHAIM MEKOR CHAIM 1571 55TH ST 1571 55TH ST BROOKLYN,NY 11219			EDUCATIONAL	1,800
CONGREGATION MESIVTA TAT CONGREGATION MESIVTA TAT 16 AUGUSTA LANE 16 AUGUSTA LANE MONSEY,NY 10952			CHARITABLE	180
BAIS AHARON B'YISROEL BAIS AHARON B'YISROEL 1673 55TH ST 1673 55TH ST BROOKLYN,NY 11204			EDUCATIONAL	10,600
YESHIVAS NOVOMINSK YESHIVAS NOVOMINSK 1690 60TH ST 1690 60TH ST BROOKLYN,NY 11204			EDUCATIONAL	4,740
PONOVEZ YESHIVA PONOVEZ YESHIVA 178 TUDOR COURT 178 TUDOR COURT LAKEWOOD,NJ 08701			EDUCATIONAL	250
CHASDEI CHASHI L'KALLAH CHASDEI CHASHI L'KALLAH 1863 E 13TH STREET 1863 E 13TH ST BROOKLYN,NY 11229			CHARITABLE	180
Total . . . . . ▶ 3a				199,871

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year				
MESIVTA OF LONG BEACH MESIVTA OF LONG BEACH 205 W BEECH STREET 205 W BEECH STREET LONG BEACH,NY 11561			EDUCATIONAL	3,860
BIRCHAS SHMUEL BIRCHAS SHMUEL 21 NOAM LANE 21 NOAM LANE LAKEWOOD,NJ 08701			EDUCATIONAL	360
TOMCHE SHABBOS TOMCHE SHABBOS 212 2ND ST SUITE 403 212 2ND ST SUITE 403 LAKEWOOD,NJ 08701			CHARITABLE	1,000
BY HIGH SCHOOL BY HIGH SCHOOL 277 JAMES 277 JAMES LAKEWOOD,NJ 08701			EDUCATIONAL	8,000
TELSHE YESHIVA-CLEVELAND TELSHE YESHIVA-CLEVELAND 28400 EUCLID AVE 28400 EUCLID AVE WICKLIFFE,OH 44092			EDUCATIONAL	1,000
YESHIVA TORAS ARON YESHIVA TORAS ARON 285 RIVER AVE 285 RIVER AVE LAKEWOOD,NJ 08701			EDUCATIONAL	18,400
BAIS RIVKA ROCHEL BAIS RIVKA ROCHEL 285 RIVER AVENUE 285 RIVER AVENUE LAKEWOOD,NJ 08701			EDUCATIONAL	16,300
CHESED 247 CHESED 24/7 286 N MAIN ST SUITE 21 286 N MAIN ST SUITE 21 SPRING VALLEY,NY 10977			CHARITABLE	500
BAIS REUVEN KAMENETZ BAIS REUVEN KAMENETZ 299 MONMOUTH 299 MONMOUTH LAKEWOOD,NJ 08701			EDUCATIONAL	800
ADAS YEREIM ADAS YEREIM 31 SOUT RIGAUD RD 31 SOUT RIGAUD RD SPRING VALLEY,NY 10977			EDUCATIONAL	1,000
EITZ CHAIM EITZ CHAIM 310 FOREST AVE 310 FOREST AVE LAKEWOOD,NJ 08701			EDUCATIONAL	540
BROOKHILL SHUL BROOKHILL SHUL 33 AROSA HILL 33 AROSA HILL LAKEWOOD,NJ 08701			CHARITABLE	4,000
HAICHAL HATORAH HAICHAL HATORAH 3323 RICHMOND AVE 3323 RICHMOND AVE STATEN ISLAND,NY 10312			EDUCATIONAL	500
SCHI SCHI 345 OAK STREET 345 OAK STREET LAKEWOOD,NJ 08701			EDUCATIONAL	1,040
YESHIVA GEDOLAH OF PASSAIC YESHIVA GEDOLAH OF PASSAIC 35 ASCENSION ST 35 ASCENSION ST PASSAIC PARK,NJ 07055			EDUCATIONAL	760
Total . . . . . ▶ 3a				199,871



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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> Paid during the year				
BAIS FAIGA BAIS FAIGA 350 COURTNEY 350 COURTNEY LAKEWOOD,NJ 08701			EDUCATIONAL	4,700
TOMCHEI TZEDOKAH OF LAKEWOOD TOMCHEI TZEDOKAH OF LAKEWOOD 40 CLIFTON AVE 3204 40 CLIFTON AVE 3204 LAKEWOOD,NJ 08701			CHARITABLE	15,301
BAIS MEDRASH LAKEWOOD COMMONS BAIS MEDRASH LAKEWOOD COMMONS 40 COLE WAY 40 COLES WAY LAKEWOOD,NJ 08701			CHARITABLE	500
STAM GEMACH STAM GEMACH 425 8TH ST 425 8TH ST LAKEWOOD,NJ 08701			CHARITABLE	1,000
EZRA L'KALLAH EZRA L'KALLAH 425 8TH STREET 425 8TH STREET LAKEWOOD,NJ 08701			CHARITABLE	1,000
YESHIVA TORAH V'DAAS YESHIVA TORAH V'DAAS 425 E 9TH ST 425 E 9TH ST BROOKLYN,NY 11218			EDUCATIONAL	360
VECHAI OCHICHA VECHAI OCHICHA 489 E 2ND ST 489 E 2ND ST BROOKLYN,NY 11218			CHARITABLE	1,000
ICHUD ICHUD 489 E 2ND STREET 489 E 2ND STREET BROOKLYN,NY 11218			EDUCATIONAL	1,000
HATZOLAH HATZOLAH 501 W COUNTY LINE RD 501 W COUNTY LINE RD LAKEWOOD,NJ 08701			CHARITABLE	56
LEV L'ACHIM LEV L'ACHIM 502 6TH ST 502 6TH ST LAKEWOOD,NJ 08701			CHARITABLE	360
BONEI OLAM BONEI OLAM 54 BUTTELL AVE 54 BUTTELL AVE LAKEWOOD,NJ 08701			EDUCATIONAL	1,000
YESHIVA GEDOLA OF PATTERSON YESHIVA GEDOLA OF PATTERSON 555 15TH AVENUE 555 15TH AVENUE PATERSON,NJ 07504			EDUCATIONAL	360
BIKUR CHOLIM OF MONTREAL BIKUR CHOLIM OF MONTREAL 561 COTE ST CATHERINE MONTREAL QC LAKEWOOD,NJ 08701			CHARITABLE	360
KESER BY KESER BY 60 KEW GARDENS 60 KEW GARDENS LAKEWOOD,NJ 08701			EDUCATIONAL	236
TALMUDICAL YESHIVA PHIL TALMUDICAL YESHIVA PHIL 6063 DREXEL RD 6063 DREXEL RD PHILADELPHIA,PA 19131			EDUCATIONAL	360
<b>Total</b> . . . . . ▶ <b>3a</b>				199,871

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
BETH MEDRASH GOVOHA BETH MEDRASH GOVOHA 617 6TH ST 617 6TH ST LAKEWOOD,NJ 08701			EDUCATIONAL	18,200
CONG AHAVAS ACHIM CONG AHAVAS ACHIM 629 LEXINGTON 629 LEXINGTON LAKEWOOD,NJ 08701			CHARITABLE	1,000
VAYOEL MOSHE VAYOEL MOSHE 636 7TH ST 636 7TH ST LAKEWOOD,NJ 08701			CHARITABLE	360
VAAD HARABBANIM VAAD HARABBANIM 639 N LAKE DRIVE 639 N LAKE DRIVE LAKEWOOD,NJ 08701			CHARITABLE	360
AHAVAS TZEDOKAH AHAVAS TZEDOKAH 655 8TH ST 655 8TH ST LAKEWOOD,NJ 08701			CHARITABLE	250
BAIS MEDRASH ELYON BAIS MEDRASH ELYON 73 MAIN ST 73 MAIN ST MONSEY,NY 10952			EDUCATIONAL	1,000
NER YISROEL NER YISROEL 733 RIDGE AVE 733 RIDGE AVE LAKEWOOD,NJ 08701			CHARITABLE	236
RCCS RCCS 762 BEDFORD 762 BEDFORD BROOKLYN,NY 11205			CHARITABLE	180
TIFERES DEVORAH L'KALLAH TIFERES DEVORAH L'KALLAH 79 ROSELLE COURT 79 ROSELLE COURT LAKEWOOD,NJ 08701			CHARITABLE	1,000
SHEARITH ISRAEL CHARITY FUND SHEARITH ISRAEL CHARITY FUND 795 CYPRESS AVENUE 795 CYPRESS AVENUE LAKEWOOD,NJ 08701			EDUCATIONAL	500
YESHIVA BETH MOSHE YESHIVA BETH MOSHE 930 HICKORY ST 930 HICKORY ST SCRANTON,PA 18505			EDUCATIONAL	800
SHAAGAS ARYEH SHAAGAS ARYEH 975 CROSS STREET 975 CROSS STREET LAKEWOOD,NJ 08701			EDUCATIONAL	3,700
BAIS KAILA BAIS KAILA PO BOX 952 PO BOX 952 LAKEWOOD,NJ 08701			EDUCATIONAL	360
LAKEWOOD CHEDER SCHOOL LAKEWOOD CHEDER SCHOOL POB 838 POB 838 LAKEWOOD,NJ 08701			EDUCATIONAL	9,160
<b>Total . . . . . ▶ 3a</b>				199,871

**TY 2015 Accounting Fees Schedule****Name:** DAVID ROSENBAUM FAMILY FOUNDATION**EIN:** 22-3770897

<b>Category</b>	<b>Amount</b>	<b>Net Investment Income</b>	<b>Adjusted Net Income</b>	<b>Disbursements for Charitable Purposes</b>
ACCOUNTING FEE	2,000	2,000		

## TY 2015 Investments - Other Schedule

**Name:** DAVID ROSENBAUM FAMILY FOUNDATION

**EIN:** 22-3770897

Category/ Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value
NORTHWEST LEASING CO.	AT COST		

**TY 2015 Other Expenses Schedule****Name:** DAVID ROSENBAUM FAMILY FOUNDATION**EIN:** 22-3770897

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
EXPENSES				
BANK CHARGES	35	35		
EDUCATIONAL PROMOTION	26,982	26,982		
OFFICE	27	27		

**TY 2015 Other Notes/Loans Receivable Short Schedule****Name:** DAVID ROSENBAUM FAMILY FOUNDATION**EIN:** 22-3770897

Name of 501(c)(3) Organization	Balance Due
LOAN RECEIVABLE	1,221,096

<div>Schedule B</div> <div>(Form 990, 990-EZ, or 990-PF)</div> <div>Department of the Treasury Internal Revenue Service</div>	<div>Schedule of Contributors</div> <div>▶ Attach to Form 990, 990-EZ, or 990-PF</div> <div>▶ Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at <a href="http://www.irs.gov/form990">www.irs.gov/form990</a></div>	<div>OMB No 1545-0047</div> <div>2015</div>
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<div>Name of the organization</div> <div>DAVID ROSENBAUM FAMILY FOUNDATION</div>	<div>Employer identification number</div> <div>22-3770897</div>
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Organization type (check one)

Filers of:	Section:
Form 990 or 990-EZ	<div><input type="checkbox"/> 501(c)( ) (enter number) organization</div> <div><input type="checkbox"/> 4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private foundation</div> <div><input type="checkbox"/> 527 political organization</div>
Form 990-PF	<div><input checked="" type="checkbox"/> 501(c)(3) exempt private foundation</div> <div><input type="checkbox"/> 4947(a)(1) nonexempt charitable trust treated as a private foundation</div> <div><input type="checkbox"/> 501(c)(3) taxable private foundation</div>

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

General Rule

- ☒ For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or other property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

- ☐ For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33<sup>1</sup>/<sub>3</sub>% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of **(1)** \$5,000 or **(2)** 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.
- ☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.
- ☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Do not complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year. . . . . ▶ \$ \_\_\_\_\_

**Caution.** An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Form 990PF, Part I, line 2, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

<b>Name of organization</b> DAVID ROSENBAUM FAMILY FOUNDATION	<b>Employer identification number</b> 22-3770897
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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	DAVID ROSENBAUM	\$ 160,002	Person <input checked="" type="checkbox"/>
	619 SIXTH		Payroll <input type="checkbox"/>
	LAKEWOOD, NJ 08701		Noncash <input type="checkbox"/> (Complete Part II for noncash contributions )
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person <input type="checkbox"/>
			Payroll <input type="checkbox"/>
			Noncash <input type="checkbox"/> (Complete Part II for noncash contributions )
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person <input type="checkbox"/>
			Payroll <input type="checkbox"/>
			Noncash <input type="checkbox"/> (Complete Part II for noncash contributions )
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person <input type="checkbox"/>
			Payroll <input type="checkbox"/>
			Noncash <input type="checkbox"/> (Complete Part II for noncash contributions )
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person <input type="checkbox"/>
			Payroll <input type="checkbox"/>
			Noncash <input type="checkbox"/> (Complete Part II for noncash contributions )
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person <input type="checkbox"/>
			Payroll <input type="checkbox"/>
			Noncash <input type="checkbox"/> (Complete Part II for noncash contributions )
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person <input type="checkbox"/>
			Payroll <input type="checkbox"/>
			Noncash <input type="checkbox"/> (Complete Part II for noncash contributions )



<b>Name of organization</b> DAVID ROSENBAUM FAMILY FOUNDATION	<b>Employer identification number</b> 22-3770897
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<b>Part II</b> <b>Noncash Property</b> (see instructions) Use duplicate copies of Part II if additional space is needed			
<b>(a)</b> <b>No. from Part I</b>	<b>(b)</b> <b>Description of noncash property given</b>	<b>(c)</b> <b>FMV (or estimate)</b> (see instructions)	<b>(d)</b> <b>Date received</b>
		\$	
<b>(a)</b> <b>No. from Part I</b>	<b>(b)</b> <b>Description of noncash property given</b>	<b>(c)</b> <b>FMV (or estimate)</b> (see instructions)	<b>(d)</b> <b>Date received</b>
		\$	
<b>(a)</b> <b>No. from Part I</b>	<b>(b)</b> <b>Description of noncash property given</b>	<b>(c)</b> <b>FMV (or estimate)</b> (see instructions)	<b>(d)</b> <b>Date received</b>
		\$	
<b>(a)</b> <b>No. from Part I</b>	<b>(b)</b> <b>Description of noncash property given</b>	<b>(c)</b> <b>FMV (or estimate)</b> (see instructions)	<b>(d)</b> <b>Date received</b>
		\$	
<b>(a)</b> <b>No. from Part I</b>	<b>(b)</b> <b>Description of noncash property given</b>	<b>(c)</b> <b>FMV (or estimate)</b> (see instructions)	<b>(d)</b> <b>Date received</b>
		\$	
<b>(a)</b> <b>No. from Part I</b>	<b>(b)</b> <b>Description of noncash property given</b>	<b>(c)</b> <b>FMV (or estimate)</b> (see instructions)	<b>(d)</b> <b>Date received</b>
		\$	
<b>(a)</b> <b>No. from Part I</b>	<b>(b)</b> <b>Description of noncash property given</b>	<b>(c)</b> <b>FMV (or estimate)</b> (see instructions)	<b>(d)</b> <b>Date received</b>
		\$	

Name of organization DAVID ROSENBAUM FAMILY FOUNDATION	Employer identification number 22-3770897
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**Part III** Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of *exclusively* religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once. See instructions.) ► \$ \_\_\_\_\_

Use duplicate copies of Part III if additional space is needed

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