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Form 990-PF

Department of the Treasury  
Internal Revenue Service

## Return of Private Foundation

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

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2015

Open to Public  
Inspection

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

Name of foundation THE EDWIN J AND BARBARA R BERKOWITZ FAMILY FOUNDATION		A Employer identification number 23-7978506			
		B Telephone number (see instructions) (610) 664-8335			
Number and street (or P O box number if mail is not delivered to street address) 506 OAK TERRACE		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 ►			
City or town, state or province, country, and ZIP or foreign postal code MERION STATION, PA 19066					
G Check all that apply Initial return <input type="checkbox"/> Initial return of a former public charity Final return <input type="checkbox"/> Amended return Address change <input type="checkbox"/> Name change					
H Check type of organization Section 501(c)(3) exempt private foundation <input checked="" type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation <input type="checkbox"/>					
I Fair market value of all assets at end of year (from Part II, col (c), line 16) ► \$ 1,066		J Accounting method 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)	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
1	Contributions, gifts, grants, etc , received (attach schedule)		420,700		
2	Check ► <input type="checkbox"/> if the foundation is not required to attach Sch B				
3	Interest on savings and temporary cash investments				
4	Dividends and interest from securities		2	2	
5a	Gross rents				
b	Net rental income or (loss)				
6a	Net gain or (loss) from sale of assets not on line 10				
b	Gross sales price for all assets on line 6a				
7	Capital gain net income (from Part IV, line 2)		0		
8	Net short-term capital gain				
9	Income modifications				
10a	Gross sales less returns and allowances				
b	Less Cost of goods sold				
c	Gross profit or (loss) (attach schedule)				
11	Other income (attach schedule)				
12	<b>Total</b> .Add lines 1 through 11	420,702	2		
13	Compensation of officers, directors, trustees, etc	0	0	0	
14	Other employee salaries and wages				
15	Pension plans, employee benefits				
16a	Legal fees (attach schedule)				
b	Accounting fees (attach schedule)				
c	Other professional fees (attach schedule)				
17	Interest				
18	Taxes (attach schedule) (see instructions)				
19	Depreciation (attach schedule) and depletion				
20	Occupancy				
21	Travel, conferences, and meetings				
22	Printing and publications				
23	Other expenses (attach schedule)				
24	<b>Total operating and administrative expenses.</b>				
	Add lines 13 through 23	0	0	0	
25	Contributions, gifts, grants paid	436,450			436,450
26	<b>Total expenses and disbursements.</b> Add lines 24 and 25	436,450	0		436,450
27	Subtract line 26 from line 12				
a	<b>Excess of revenue over expenses and disbursements</b>	-15,748			
b	<b>Net investment income</b> (if negative, enter -0-)		2		
c	<b>Adjusted net income</b> (if negative, enter -0-)				

	<b>Part II Balance Sheets</b> 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
<b>Assets</b>	1 Cash—non-interest-bearing . . . . .			
	2 Savings and temporary cash investments . . . . .	16,814	1,066	1,066
	3 Accounts receivable ► _____			
	Less allowance for doubtful accounts ► _____			
	4 Pledges receivable ► _____			
	Less allowance for doubtful accounts ► _____			
	5 Grants receivable . . . . .			
	6 Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions) . . . . .			
	7 Other notes and loans receivable (attach schedule) ► _____			
	Less allowance for doubtful accounts ► _____			
	8 Inventories for sale or use . . . . .			
	9 Prepaid expenses and deferred charges . . . . .			
	10a Investments—U S and state government obligations (attach schedule)			
	b Investments—corporate stock (attach schedule) . . . . .			
	c Investments—corporate bonds (attach schedule) . . . . .			
	11 Investments—land, buildings, and equipment basis ► _____			
Less accumulated depreciation (attach schedule) ► _____				
12 Investments—mortgage loans . . . . .				
13 Investments—other (attach schedule) . . . . .				
14 Land, buildings, and equipment basis ► _____				
Less accumulated depreciation (attach schedule) ► _____				
15 Other assets (describe ► _____)				
16 <b>Total assets</b> (to be completed by all filers—see the instructions Also, see page 1, item I)	16,814	1,066	1,066	
<b>Liabilities</b>	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 <b>Total liabilities</b> (add lines 17 through 22) . . . . .	0	0	
<b>Net Assets or Fund Balances</b>	<b>Foundations that follow SFAS 117, check here ► <input type="checkbox"/></b> <b>and complete lines 24 through 26 and lines 30 and 31.</b>			
	24 Unrestricted . . . . .			
	25 Temporarily restricted . . . . .			
	26 Permanently restricted . . . . .			
	<b>Foundations that do not follow SFAS 117, check here ► <input checked="" type="checkbox"/></b> <b>and complete lines 27 through 31.</b>			
	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	16,814	1,066	
	30 <b>Total net assets or fund balances</b> (see instructions) . . . . .	16,814	1,066	
	31 <b>Total liabilities and net assets/fund balances</b> (see instructions) . . . . .	16,814	1,066	

**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	16,814
2	Enter amount from Part I, line 27a . . . . .	2	-15,748
3	Other increases not included in line 2 (itemize) ► _____	3	0
4	Add lines 1, 2, and 3 . . . . .	4	1,066
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	1,066

**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 (b) P—Purchase 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			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	Adjusted basis (j) as of 12/31/69	Excess of col (i) over col (j), if any (k)	(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?  
If "Yes," the foundation does not qualify under section 4940(e). Do not complete this part

Yes  No

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	368,114	39,792	9 250955
2013	340,900	32,785	10 398048
2012	193,880	13,673	14 179770
2011	194,300	16,009	12 136923
2010	169,600	10,901	15 558206
2 Total of line 1, column (d).			2 61 523902
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 12 304780
4 Enter the net value of noncharitable-use assets for 2015 from Part X, line 5.			4 32,090
5 Multiply line 4 by line 3.			5 394,860
6 Enter 1% of net investment income (1% of Part I, line 27b).			6 0
7 Add lines 5 and 6.			7 394,860
8 Enter qualifying distributions from Part XII, line 4.			8 436,450

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

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

1a	Exempt operating foundations described in section 4940(d)(2), check here ► <input type="checkbox"/> and enter "N/A" on line 1	1	0
	Date of ruling or determination letter _____ <b>(attach copy of letter if necessary—see instructions)</b>		
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 . . . . .		
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	<b>Tax based on investment income.</b> Subtract line 4 from line 3 If zero or less, enter -0- . . . . .	5	0
6	<b>Credits/Payments</b>		
a	2015 estimated tax payments and 2014 overpayment credited to 2015	6a	93
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	93
8	Enter any <b>penalty</b> for underpayment of estimated tax Check here <input type="checkbox"/> If Form 2220 is attached	8	
9	<b>Tax due.</b> If the total of lines 5 and 8 is more than line 7, enter <b>amount owed</b> . . . . . ►	9	
10	<b>Overpayment.</b> If line 7 is more than the total of lines 5 and 8, enter the <b>amount overpaid</b> . . . . . ►	10	93
11	Enter the amount of line 10 to be <b>Credited to 2015 estimated tax</b> ►	93	Refunded ►
		11	0

**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? . . . . .	<input type="checkbox"/>	<b>Yes</b>	<b>No</b>
1b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for definition)? . . . . .	<input type="checkbox"/>	<b>Yes</b>	<b>No</b>
	<i>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</i>			
1c	Did the foundation file <b>Form 1120-POL</b> for this year? . . . . .	<input type="checkbox"/>	<b>Yes</b>	<b>No</b>
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? . . . . .	<input type="checkbox"/>	<b>Yes</b>	<b>No</b>
	<i>If "Yes," attach a detailed description of the activities</i>			
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? <i>If "Yes," attach a conformed copy of the changes</i>			
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year? . . . . .	<input type="checkbox"/>	<b>Yes</b>	<b>No</b>
b	If "Yes," has it filed a tax return on <b>Form 990-T</b> for this year? . . . . .	<input type="checkbox"/>	<b>Yes</b>	<b>No</b>
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year? . . . . .	<input type="checkbox"/>	<b>Yes</b>	<b>No</b>
	<i>If "Yes," attach the statement required by General Instruction T</i>			
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? . . . . .	<input type="checkbox"/>	<b>Yes</b>	<b>No</b>
7	Did the foundation have at least \$5,000 in assets at any time during the year? <i>If "Yes," complete Part II, col (c), and Part XV</i>	<input type="checkbox"/>	<b>Yes</b>	<b>No</b>
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? <i>If "No," attach explanation</i> ►	<input type="checkbox"/>	<b>Yes</b>	<b>No</b>
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)? <i>If "Yes," complete Part XIV</i>			
10	Did any persons become substantial contributors during the tax year? <i>If "Yes," attach a schedule listing their names and addresses</i> ►			

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

11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions). . . . .	11	No
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement (see instructions) . . . . .	12	No
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ►N/A	13	Yes
14	The books are in care of ►EDWIN J BERKOWITZ TRUSTEE Located at ►506 OAK TERRACE MERION STATION PA	Telephone no ►(610) 664-8335 ZIP +4 ►19066	
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of <b>Form 1041</b> —Check here and enter the amount of tax-exempt interest received or accrued during the year. . . . . ► 15		
16	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 ►	16	Yes No

**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 <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)? . . . . . ► 1b		
c	Organizations relying on a current notice regarding disaster assistance check here. . . . .		
2	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? . . . . .	1c	No
a	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 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	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) . . . . .	2b	
c	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____		
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 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? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2015) . . . . .	3b	
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? . . . . .	4a	No
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2015? . . . . .	4b	No



**Part VIII** **Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)**
**3 Five highest-paid independent contractors for professional services (see instructions). If none, enter "NONE".**

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

**Total** number of others receiving over \$50,000 for professional services. . . . . ► 0

**Part IX-A Summary of Direct Charitable Activities**

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1 NOT APPLICABLE	0
2	
3	
4	

**Part IX-B Summary of Program-Related Investments (see instructions)**

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1 NOT APPLICABLE	0
2	
All other program-related investments. See instructions	
3	
<b>Total.</b> 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	32,579
c	Fair market value of all other assets (see instructions). . . . .	1c	0
d	<b>Total</b> (add lines 1a, b, and c). . . . .	1d	32,579
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	32,579
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see instructions). . . . .	4	489
5	<b>Net value of noncharitable-use assets.</b> Subtract line 4 from line 3 Enter here and on Part V, line 4	5	32,090
6	<b>Minimum investment return.</b> Enter 5% of line 5. . . . .	6	1,605

**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	1,605
2a	Tax on investment income for 2015 from Part VI, line 5. . . . .	2a	
b	Income tax for 2015 (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	1,605
4	Recoveries of amounts treated as qualifying distributions. . . . .	4	0
5	Add lines 3 and 4. . . . .	5	1,605
6	Deduction from distributable amount (see instructions). . . . .	6	0
7	<b>Distributable amount</b> as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1. . . . .	7	1,605

**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	436,450
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	<b>Qualifying distributions.</b> Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	436,450
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income Enter 1% of Part I, line 27b (see instructions). . . . .	5	0
6	<b>Adjusted qualifying distributions.</b> Subtract line 5 from line 4. . . . .	6	436,450
<b>Note:</b> 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
<b>1</b> Distributable amount for 2015 from Part XI, line 7				1,605
<b>2</b> Undistributed income, if any, as of the end of 2015			0	
<b>a</b> Enter amount for 2014 only. . . . .		0		
<b>b</b> Total for prior years 20____, 20____, 20____		0		
<b>3</b> Excess distributions carryover, if any, to 2015				
<b>a</b> From 2010. . . . .	169,055			
<b>b</b> From 2011. . . . .	193,500			
<b>c</b> From 2012. . . . .	193,196			
<b>d</b> From 2013. . . . .	339,261			
<b>e</b> From 2014. . . . .	366,124			
<b>f</b> <b>Total</b> of lines 3a through e. . . . .	1,261,136			
<b>4</b> Qualifying distributions for 2015 from Part XII, line 4 ► \$ 436,450				
<b>a</b> Applied to 2014, but not more than line 2a			0	
<b>b</b> Applied to undistributed income of prior years (Election required—see instructions). . . . .		0		
<b>c</b> Treated as distributions out of corpus (Election required—see instructions). . . . .	0			
<b>d</b> Applied to 2015 distributable amount. . . . .				1,605
<b>e</b> Remaining amount distributed out of corpus	434,845			
<b>5</b> Excess distributions carryover applied to 2015 (If an amount appears in column (d), the same amount must be shown in column (a))	0			0
<b>6</b> <b>Enter the net total of each column as indicated below:</b>				
<b>a</b> Corpus Add lines 3f, 4c, and 4e Subtract line 5	1,695,981			
<b>b</b> Prior years' undistributed income Subtract line 4b from line 2b. . . . .		0		
<b>c</b> 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		
<b>d</b> Subtract line 6c from line 6b Taxable amount—see instructions. . . . .		0		
<b>e</b> Undistributed income for 2014 Subtract line 4a from line 2a Taxable amount—see instructions. . . . .			0	
<b>f</b> Undistributed income for 2016 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2015. . . . .				0
<b>7</b> 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			
<b>8</b> Excess distributions carryover from 2010 not applied on line 5 or line 7 (see instructions). . . . .	169,055			
<b>9</b> <b>Excess distributions carryover to 2016.</b> Subtract lines 7 and 8 from line 6a. . . . .	1,526,926			
<b>10</b> Analysis of line 9				
<b>a</b> Excess from 2011. . . . .	193,500			
<b>b</b> Excess from 2012. . . . .	193,196			
<b>c</b> Excess from 2013. . . . .	339,261			
<b>d</b> Excess from 2014. . . . .	366,124			
<b>e</b> Excess from 2015. . . . .	434,845			

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

<b>1a</b> If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2015, enter the date of the ruling. . . . . ►				
<b>b</b> Check box to indicate whether the organization is a private operating foundation described in section <input type="checkbox"/> 4942(j)(3) or <input type="checkbox"/> 4942(j)(5)				
<b>2a</b> Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed. . . . .	Tax year	Prior 3 years		
	(a) 2015	(b) 2014	(c) 2013	(d) 2012
<b>b</b> 85% of line 2a . . . . .				
<b>c</b> Qualifying distributions from Part XII, line 4 for each year listed . . . . .				
<b>d</b> Amounts included in line 2c not used directly for active conduct of exempt activities . . . . .				
<b>e</b> Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c . . . . .				
<b>3</b> Complete 3a, b, or c for the alternative test relied upon				
<b>a</b> "Assets" alternative test—enter				
(1) Value of all assets . . . . .				
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)				
<b>b</b> "Endowment" alternative test—enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed. . . . .				
<b>c</b> "Support" alternative test—enter				
(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties). . . . .				
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(III). . . . .				
(3) Largest amount of support from an exempt organization				
(4) Gross investment income				

**Part XV Supplementary Information (Complete this part only if the organization had \$5,000 or more in assets at any time during the year—see instructions.)****1 Information Regarding Foundation Managers:**

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

EDWIN J BERKOWITZ

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

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

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

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

EDWIN J BERKOWITZ MANAGING TRUSTEE  
506 OAK TERRACE  
MERION STATION, PA 19066  
(610) 664-8335

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

A WRITTEN REQUEST SHOULD BE SENT TO THE MANAGING TRUSTEE THE REQUEST SHOULD INDICATE THE CHARITY, THE PURPOSE FOR WHICH THE CONTRIBUTION WILL BE UTILIZED AND THE FOUNDATION'S STATUS (I E IRC SECTION)

**c** Any submission deadlines

ONGOING, NO DEADLINES

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

MUST BE IRC SECTION 501(C)(3) ORGANIZATIONS

**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)				
<b>a Paid during the year</b> See Additional Data Table				
<b>Total . . . . .</b>			► 3a	436,450
<b>b Approved for future payment</b>				
<b>Total . . . . .</b>			► 3b	0

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated

	Unrelated business income		Excluded by section 512, 513, or 514		(e) Related or exempt function income (See instructions )
	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	
1 Program service revenue					
a					
b					
c					
d					
e					
f					
g Fees and contracts from government agencies					
2 Membership dues and assessments. . . . .					
3 Interest on savings and temporary cash investments . . . . .					
4 Dividends and interest from securities. . . . .			14	2	
5 Net rental income or (loss) from real estate					
a Debt-financed property. . . . .					
b Not debt-financed property. . . . .					
6 Net rental income or (loss) from personal property . . . . .					
7 Other investment income. . . . .					
8 Gain or (loss) from sales of assets other than inventory . . . . .					
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue a					
b					
c					
d					
e					
12 Subtotal Add columns (b), (d), and (e). . . . .		0		2	0
13 Total Add line 12, columns (b), (d), and (e). . . . .				13	2

**Part VIII B – Relationship of Activities to the Accomplishment of Exempt Purposes**



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

<b>(a)</b> Name and address	<b>(b)</b> Title, and average hours per week devoted to position	<b>(c)</b> Compensation (If not paid, enter -0-)	<b>(d)</b> Contributions to employee benefit plans and deferred compensation	<b>(e)</b> Expense account, other allowances
EDWIN J BERKOWITZ	MANAGING TRUSTEE 1 00	0	0	0
506 OAK TERRACE MERION STATION, PA 19066	MANAGING TRUSTEE 1 00	0	0	0
BARBARA R BERKOWITZ	TRUSTEE 0 00	0	0	0
506 OAK TERRACE MERION STATION, PA 19066	TRUSTEE 0 00	0	0	0
ARTHUR M BERKOWITZ	TRUSTEE 0 00	0	0	0
506 OAK TERRACE MERION STATION, PA 19066	TRUSTEE 0 00	0	0	0
DANIEL M BERKOWITZ	TRUSTEE 0 00	0	0	0
506 OAK TERRACE MERION STATION, PA 19066	TRUSTEE 0 00	0	0	0
PNINA B SIEGLER	TRUSTEE 0 00	0	0	0
506 OAK TERRACE MERION STATION, PA 19066				

## 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 Paid during the year</b>				
AMERICAN FRIENDS AISH HATORAH 408 SOUTH LAKE DRIVE LAKEWOOD, NJ 08701		PUBLIC CHARITY	GENERAL PURPOSE	5,000
AMERICAN FRIENDS DIASPORA YESHIVA REUVEN SHARI 17 PO BOX 62117 RAMAT 06 JERUSALEM 97246 IS		PUBLIC CHARITY	GENERAL PURPOSE	10,000
AMERICAN FRIENDS OF CUB EFRAT 333 W 86TH ST SUITE 1003 NEW YORK, NY 10024		PUBLIC CHARITY	GENERAL PURPOSE	10,000
AMERICAN FRIENDS OF MAGEN DAVID AA 352 SEVENTH AVENUE SUITE 400 NEW YORK, NY 10001		PUBLIC CHARITY	GENERAL PURPOSE	1,800
AMERICAN FRIENDS OF YAD ELIEZER 1102 E 26TH STREET BROOKLYN, NY 11210		PUBLIC CHARITY	GENERAL PURPOSE	18,500
AMERICAN JEWISH WORLD SERVICE 45 WEST 36STH STREET 11TH FLOOR NEW YORK, NY 10018		PUBLIC CHARITY	GENERAL PURPOSE	10,000
ANIMAL RESCUE LEAGUE 6620 HAMILTON AVENUE PITTSBURGH, PA 15206		PUBLIC CHARITY	GENERAL PURPOSE	25,000
ASAP AFTER SCHOOL ACTIVITIES 1520 LOCUST PHILADELPHIA, PA 19102		PUBLIC CHARITY	GENERAL PURPOSE	20,000
CAMP GAN ISRAEL 1925 KRESSON RD CHERRY HILL, NJ 08003		PUBLIC CHARITY	GENERAL PURPOSE	5,000
CARLISE CARES 50 W PENN STREET CARLISLE, PA 17013		PUBLIC CHARITY	GENERAL PURPOSE	1,000
CHABAD LUBAVITCH OF THE MAIN PO BOX 244 MERION, PA 19066		PUBLIC CHARITY	GENERAL PURPOSE	2,000
CHECK UNKNOWN STREET PHILADELPHIA, PA 19103		PUBLIC CHARITY	GENERAL PURPOSE	50,000
CLARKE SCHOOLS FOR HEARING AND 2 PENN BOULEVARD PHILADELPHIA, PA 19144		PUBLIC CHARITY	GENERAL PURPOSE	1,600
EMILYS ENTOURAGE PO BOX 71 MERION STATION, PA 19066		PUBLIC CHARITY	GENERAL PURPOSE	1,000
FRIENDS OF THE CYNWYD HERITAGE PO BOX 695 BALA CYNWYD, PA 19004		PUBLIC CHARITY	GENERAL PURPOSE	1,000
<b>Total . . . . .</b>				436,450
			► 3a	

## 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)				
<i>a Paid during the year</i>				
FRIENDSHIP CIRCLE OF PITTSBURG 1922 MURRAY AVENUE PITTSBURGH, PA 15217		PUBLIC CHARITY	GENERAL PURPOSE	10,000
FRIENDSHIP CIRCLE 754 DOUTH 9TH STREET PHILADELPHIA, PA 19147		PUBLIC CHARITY	GENERAL PURPOSE	9,500
GAN ISRAEL GUIDELINE SVC INC 226 SUSSEX AVENUE MORRISTOWN, NJ 07960		PUBLIC CHARITY	GENERAL PURPOSE	5,000
HAR ZION TEMPLE 1500 HAGYS FORD ROAD PENN VALLEY, PA 19072		PUBLIC CHARITY	GENERAL PURPOSE	6,000
HASHEVAYNU 144-02 JEWEL AVENUE FLUSHING, NY 11367		PUBLIC CHARITY	GENERAL PURPOSE	2,500
HAVERFORD COLLEGE 370 LANCASTER AVENUE HAVERFORD, PA 19041		PUBLIC CHARITY	GENERAL PURPOSE	2,000
HEARING LOSS ASSN OF AMERICA 7910 WOODMONT AVENUE SUITE 1200 BETHESDA, MD 20814		PUBLIC CHARITY	GENERAL PURPOSE	950
HEARTBEAT NEWSOUND FOUNDATION 1719 WILMART STREET ROCKVILLE, MD 20852		PUBLIC CHARITY	GENERAL PURPOSE	10,000
HILLEL AT PENN 215 SOUTH 39TH STREET PHILADELPHIA, PA 111910404		PUBLIC CHARITY	GENERAL PURPOSE	10,000
HILLELAT DREXEL UNIV 30 S 33RD STREET PHILADELPHIA, PA 19104		PUBLIC CHARITY	GENERAL PURPOSE	5,000
HILLETOP GREATER PHILA 215 S 39TH ST PHILADELPHIA, PA 19104		PUBLIC CHARITY	GENERAL PURPOSE	15,000
JACK M BARRACK HEBREW ACADEMY 272 S BRYN MAWR AVENUE BRYN MAWR, PA 19010		PUBLIC CHARITY	GENERAL PURPOSE	1,000
JEWISH FEDERATION OF GREAT P 2100 ARCH STREET PHILADELPHIA, PA 19103		PUBLIC CHARITY	GENERAL PURPOSE	20,000
JEWISH RELEIF AGENCY 116 BALA AVENUE BALA CYNWYD, PA 19004		PUBLIC CHARITY	GENERAL PURPOSE	15,000
JEWISH STUDENTS ACTIVITY FUND PO BOX 7204 WINSTONSALEM, NC 271097209		PUBLIC CHARITY	GENERAL PURPOSE	5,000
<b>Total . . . . .</b>				► 3a 436,450

## 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 Paid during the year</b>				
KENYON COLLEGE HILLEL 103 WEST BROOKLYN ST GAMBIER, OH 430229623		PUBLIC CHARITY	GENERAL PURPOSE	5,000
MORRIS ARBORETUM OF THE UNIV O 100 E NORTHWESTERN AVENUE PHILADELPHIA, PA 19118		PUBLIC CHARITY	GENERAL PURPOSE	3,000
MT AIRY USA 6703 GERMANTOWN AVENUE PHILADELPHIA, PA 19119		PUBLIC CHARITY	GENERAL PURPOSE	2,000
NEW HORIZONS SENIOR CENTER 206 PRICE AVENUE NARBERTH, PA 19072		PUBLIC CHARITY	GENERAL PURPOSE	1,000
OOKS THROUGH BARS 4722 BALTIMORE AVE PHILADELPHIA, PA 19143		PUBLIC CHARITY	GENERAL PURPOSE	1,600
PHILA MURAL ARTS PROGRAM 1727 MT VERNON STREET PHILADELPHIA, PA 19130		PUBLIC CHARITY	GENERAL PURPOSE	40,000
PHILABUNDANCE 3616 S GALLOWAY PO BOX 37555 PHILADELPHIA, PA 19148		PUBLIC CHARITY	GENERAL PURPOSE	20,000
POLITZ HEBREW ACAD 9225 OLD BUSTLETON AVENUE PHILADELPHIA, PA 19115		PUBLIC CHARITY	GENERAL PURPOSE	2,500
RABBINICAL COLLEGE OF QUEENS 7211 VLEIGH PLACE KEW GARDEN HILLS, NY 11367		PUBLIC CHARITY	GENERAL PURPOSE	7,500
SCHOOL DISTRICT OF PHILADELPHIA 440 NORTH BROAD STREET PHILADELPHIA, PA 19130		PUBLIC CHARITY	GENERAL PURPOSE	1,000
SETTLEMENT MUSIC SCHOOL 4910 WYNNEFIELD AVENUE PHILADELPHIA, PA 19131		PUBLIC CHARITY	GENERAL PURPOSE	1,000
SYRACUSE HILLEL 102 WALNUT PLACE SYRACUSE, NY 13210		PUBLIC CHARITY	GENERAL PURPOSE	1,000
TALUMIDICAL YESHIVA OF PHILA 6063 DREXEL ROAD PHILADELPHIA, PA 19131		PUBLIC CHARITY	GENERAL PURPOSE	2,500
THE COOPER FDN 2 AQUARIUM DRIVE SUITE 305 CAMDEN, NJ 08103		PUBLIC CHARITY	GENERAL PURPOSE	50,000
THE FRIENDSHIP CIRCLE OF PHILADELPHIA 754 SOUTH 9TH STREET PHILADELPHIA, PA 19147		PUBLIC CHARITY	GENERAL PURPOSE	500
<b>Total . . . . .</b>				436,450
			► 3a	

**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 Paid during the year</b>				
THE JEWISH FEDERATION OF GREATER 2100 ARCH STREET PHILADELPHIA, PA 19103		PUBLIC CHARITY	GENERAL PURPOSE	15,000
THORNCROFT THERAPEUTIC RIDING 190 LINE ROAD MALVERN, PA 19355		PUBLIC CHARITY	GENERAL PURPOSE	1,000
TORAH ACAD GREATER PHILA 742 ARGYLE ROAD WYNNEWOOD, PA 19096		PUBLIC CHARITY	GENERAL PURPOSE	1,000
URBAN TREE CONNECTION 5125 WOODBINE AVENUE PHILADELPHIA, PA 19131		PUBLIC CHARITY	GENERAL PURPOSE	2,000
<b>Total . . . . .</b>			► 3a	436,450

## TY 2015 Explanation of Non-Filing with Attorney General Statement

**Name:** THE EDWIN J AND BARBARA R BERKOWITZ  
FAMILY FOUNDATION

**EIN:** 23-7978506

**Statement:** NOT REQUIRED TO FILE

## TY 2015 Substantial Contributors Schedule

**Name:** THE EDWIN J AND BARBARA R BERKOWITZ  
FAMILY FOUNDATION

**EIN:** 23-7978506

Name	Address
EDWIN J BERKOWITZ	506 OAK TERRACE MERION STATION, PA 19066

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

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

**2015****Name of the organization**THE EDWIN J AND BARBARA R BERKOWITZ  
FAMILY FOUNDATION**Employer identification number**

23-7978506

**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 other property) from any one contributor Complete Parts I and II See instructions for determining a contributor's total contributions

**Special Rules**

For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1 Complete Parts I and II

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals Complete Parts I, II, and III

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc , purposes, but no such contributions totaled more than \$1,000 If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc , purpose Do not complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc , contributions totaling \$5,000 or more during the year . . . . . ► \$ \_\_\_\_\_

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

**Name of organization**THE EDWIN J AND BARBARA R BERKOWITZ  
FAMILY FOUNDATION**Employer identification number**

23-7978506

**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	EDWIN J BERKOWITZ 506 OAK TERRACE  MERION STATION, PA 19066	\$ 420,700	<input checked="" type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <small>(Complete Part II for noncash contributions )</small>
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	<input type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <small>(Complete Part II for noncash contributions )</small>
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	<input type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <small>(Complete Part II for noncash contributions )</small>
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	<input type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <small>(Complete Part II for noncash contributions )</small>
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	<input type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <small>(Complete Part II for noncash contributions )</small>
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	<input type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <small>(Complete Part II for noncash contributions )</small>

**Name of organization**THE EDWIN J AND BARBARA R BERKOWITZ  
FAMILY FOUNDATION**Employer identification number**

23-7978506

**Noncash Property**

(see instructions) Use duplicate copies of Part II if additional space is needed

(a) No.from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(a) No.from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(a) No.from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(a) No.from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(a) No.from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(a) No.from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received

