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Form **990-PF**

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

OMB No 1545-0052

2015

Department of the Treasury Internal Revenue Service ► Do not enter social security numbers on this form as it may be made public. ► Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf.

Open to Public Inspection

endar year 2015, or tax year beginning	, 2015,	and ending			
S Foundation Inc.			A	26-4187654	
Rutherford, NJ 07073			Ľ		
			c	If exemption application is i	pending, check here
eck all that apply: Initial return	Initial return of a form	ner public charity	_В .	1 Foreign organizations check	chere ► □
Final return	Amended return				
		oundation	{ '		
Section 4947(a)(1) nonexempt charitable tr	ust Other taxable p		E		
		ash Accrual		under section 50/(b)(1)(A),	check here
		cash basis.)	F		
Analysis of Revenue and	(a) Revenue and		nt	(c) Adjusted net	(d) Disbursements
columns (b), (c), and (d) may not neces-	expenses per books	income	}	income	for charitable purposes
(see instructions).)					(cash basis only)
1 Contributions, gifts, grants, etc, received (attach schedule)					
22 11 211 1551121.001 15 1561 1561 1561					
3 Interest on savings and temporary cash investments 4 Dividends and interest from securities			_		
5 a Gross rents					
or (loss).					
b Gross sales price for all			H	CEIVE	
7 Capital gain net income (from Part IV, line 2)		[3]			
9 Income modifications			MA	1 1 0 000 101	
I returns and 1	-	1"	×en.	5 5	
b Less Cost of		L 0	Gil		
© Gross profit or (loss) (attach schedule).			-		
11 Other income (attach schedule)					
12 Total. Add lines 1 through 11	0.		0.	0.	
13 Compensation of officers, directors, trustees, etc	0.				,
15 Pension plans, employee benefits			_		
16a Legal fees (attach schedule)					
17 Interest					
18 Taxes (attach schedule)(see instrs)					
Schedule) and depletion					
20 Occupancy					
22 Printing and publications	-				
23 Other expenses (attach schedule)					
24 Total operating and administrative					
expenses. Add lines 13 through 23	7 001				7.021
26 Total expenses and disbursements.			\dashv		7,831.
Add lines 24 and 25.	7,831.		0.	0.	7,831.
a Excess of revenue over expenses					
	-7,831.		. 		
C Adjusted net income (if negative, enter 0-)			<u> </u>	0.	
	Rutherford, NJ 07073 Rick all that apply: Initial return Final return Address change Rick type of organization: X Section 501 Section 4947(a)(1) nonexempt charitable trimarket value of all assets at end of year Part II, column (c), line 16) 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).) Contributions, grits, grants, etc, received (attach schedule) Civilia Interest on savings and temporary cash investments Dividends and interest from securities A Dividends and interest from securities B Net short term capital gain Income modifications C Capital gain net income (from Part IV, line 2) Net short term capital gain Income modifications C Gross seles less returns and income and incom	S Foundation Inc. adowlands Plaza Rutherford, NJ 07073 cck all that apply: Initial return	S Foundation Inc. adowlands Plaza Rutherford, NJ 07073 cck all that apply: Initial return Address change	S Foundation Inc. adowlands Plaza Rutherford, NJ 07073 Cot All that apply:	S Foundation Inc. adowlands Plaza Rutherford, NJ 07073 Column Column



Dar	<u></u>	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year	End o	f year
Par	(41)	(See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash – non-interest-bearing	22,694.	14,863.	14,863.
`	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 sch)		·	
Ą		Less: allowance for doubtful accounts			
š	8	Inventories for sale or use			
A S S E T	9	Prepaid expenses and deferred charges			
Ś	10 a	Investments – U.S. and state government obligations (attach schedule)			
	b	Investments — corporate stock (attach schedule)			
	С	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 16	Other assets (describe Total assets (to be completed by all filers—see the instructions. Also, see page 1, item I)	22. 604	14.062	14.062
_	17	Accounts payable and accrued expenses	22,694.	14,863.	14,863.
Ī	18	Grants payable			
A B	19	Deferred revenue			
Ţ	20	Loans from officers, directors, trustees, & other disqualified persons			
ī	21	Mortgages and other notes payable (attach schedule)			
Ţ	22	Other liabilities (describe ►			
Ė	22	Tabel liebilities (add be as 17 through 00)			
	23	Total liabilities (add lines 17 through 22) Foundations that follow SFAS 117, check here	0.	0.	
		and complete lines 24 through 26 and lines 30 and 31.			
N F E U T N	24	Unrestricted			
TÑ	25 26	Temporarily restricted Permanently restricted			
	26	Foundations that do not follow SFAS 117, check here and complete lines 27 through 31.			
A B S A L T A	27	Capital stock, trust principal, or current funds	22,694.	14,863.	
S N C	28	Paid-in or capital surplus, or land, bldg., and equipment fund			
O E	29	Retained earnings, accumulated income, endowment, or other funds		 	İ
R S	30 31	Total net assets or fund balances(see instructions) Total liabilities and net assets/fund balances	22,694.	<u>14,863.</u>	
	31	(see instructions)	22,694.	14,863.	1
Par	t III	Analysis of Changes in Net Assets or Fund Balanc	es		<u> </u>
	Total	net assets or fund balances at beginning of year — Part II, colun of-year figure reported on prior year's return)		ree with	22,694.
2		amount from Part I, line 27a		2	-7,831.
3		increases not included in line 2 (itemize)		3	1,001.
4		lines 1, 2, and 3	-		14,863.
5		ises 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), lin	e 30 6	14,863.
DAA				·	

<u>,</u>	(a) List and describe	the kind(s) of property sold (e.g., ree; or common stock, 200 shares ML	eal estate.	(b) How acq	se	(C) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
\	N/A			D — Donat	ion		
b					\dashv		
					\dashv		
<u>`</u>				.	\dashv	 :	
<u>-</u> e						<u>-</u>	
<u> </u>	(e) Gross sales price	(f) Deprectation allowed (or allowable)	(g) Cost or other bas plus expense of sal			(h) Gain or (e) plus (f) m	
a							
b)						
C	:						
d							
е							
	Complete only for assets show	ing gain in column (h) and owned b	y the foundation on 12/31/69	9		(I) Gains (Col	(h)
	(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col. (j), if any			ain minus col. (k), bi in -0-) or Losses (fr	ut not less
a							
				+			
d		<u></u>					
e							
2	Capital gain net income or (net		enter in Part I, line 7 ter -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 in Part I, line &	e 8, column (c) (see instructions) If	(loss), enter -0-		3		
Par	t V Qualification Under	r Section 4940(e) for Reduce	ed Tax on Net Investm	nent Inco	me		
If sec	ction 4940(d)(2) applies, leave the the foundation liable for the sec	e foundations subject to the section his part blank tion 4942 tax on the distributable ar lify under section 4940(e) Do not co	nount of any year in the bas		'	Yes	X No
1	Enter the appropriate amount is	n each column for each year, see the	ne instructions before makin	g any entr	es		
	(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use ass	ets	(col	(d) Distribution (b) divided by (
	2014	9,404.	13	3,314.			0.706324
	2013	8,417.		7,448.			1.130102
	2012	11,985.		3,525.			1.405865
	2011	11,191.		3,127.			1.377015
	2010	11,309.		9,257.			1.221670
2	Total of line 1, column (d).				2		5.840976
3	Average distribution ratio for th number of years the foundation	ne 5-year base period — divide the to n has been in existence if less than	otal on line 2 by 5, or by the 5 years	•	3		1.168195
4	Enter the net value of nonchar	table-use assets for 2015 from Part	X, line 5		4		19,959.
5	Multiply line 4 by line 3				5		23,316.
6	Enter 1% of net investment inc	ome (1% of Part I, line 27b)			6		
7	Add lines 5 and 6			-	7		23,316.
8	Enter qualifying distributions fro	,		Ĺ	8_		7,831.
	If line 8 is equal to or greater to Part VI instructions.	han line 7, check the box in Part VI	, line 1b, and complete that	part using	a 19	% tax rate. See	the

Par	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 – see	instru	ctions)		
1 a	Exempt operating foundations described in section 4940(d)(2), check here					
	Date of ruling or determination letter. (attach copy of letter if necessary – see instrs)			•		
` b	Domestic foundations that meet the section 4940(e) requirements in Part V,	1				0.
	check here. ► and enter 1% of Part I, line 27b					
c	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b)					
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)	2				0.
3	Add lines 1 and 2	3				0.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4				0.
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5				0.
6	Credits/Payments ⁻					
а	2015 estimated tax pmts and 2014 overpayment credited to 2015					
ь	Exempt foreign organizations — tax withheld at source 6b					
	Tax paid with application for extension of time to file (Form 8868) . 6c					
	Backup withholding erroneously withheld 6d					
	Total credits and payments. Add lines 6a through 6d	7				0.
8	Enter any penalty for underpayment of estimated tax. Check here	8				- • ·
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9				0.
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10				
11	Enter the amount of line 10 to be: Credited to 2016 estimated tax	11				
	Statements Regarding Activities					
					Yes	No
ı a	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?			1 a	163	Х
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for the definition)?			1 b		Х
	If the answer is 'Yes' to 1a or 1b, attach a detailed description of the activities and copies of any materials pub or distributed by the foundation in connection with the activities.	lished				
c	Did the foundation file Form 1120-POL for this year?		İ	1 c		Х
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year		l			
	(1) On the foundation $\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \$		0.			
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed of foundation managers	ר		į		
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?		-			V.
2	If 'Yes,' attach a detailed description of the activities.			2		X
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles					
	of incorporation, or bylaws, or other similar instruments? If 'Yes,' attach a conformed copy of the changes			3		Χ
4 a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?		- 1	4 a		X
b	If 'Yes,' has it filed a tax return on Form 990-T for this year?			4 b	N	/A
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?			5	i	Х
	If 'Yes,' attach the statement required by General Instruction T.		1			
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 con with the state law remain in the governing instrument? 	flict		6	Χ	
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		ı	7	Х	
8 a	Enter the states to which the foundation reports or with which it is registered (see instructions)					
	NJ		-			
b	of the answer is 'Yes' to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General		_			
9	(or designate) of each state as required by <i>General Instruction G? If 'No,' attach explanation</i> Is the foundation claiming status as a private operating foundation within the meaning of section 4942(1)(3) or 4	1942(1)	(5)	8 b	Х	
	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4 for calendar year 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)? If 'Yes,' complete		ĭί	9		Х
10	Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing their na and addresses	mes		10		Х

اجترا	Statements Regarding Activities (continued)					
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If 'Yes', attach schedule (see instructions)	-	-	11		X
`12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified advisory privileges? If 'Yes,' attach statement (see instructions)	ed persor	n had	12		Х
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption	application	on?	13	Х	
	Website address N/A					
14	The books are in care of Pegina Salogiannis Telephone	no. 🟲	201-5	08-26	668	
	Located at ► 1 Meadowlands Plaza, 4th Flr East Rutherford ZIP + 4 ►	070	73			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 — Check here			N/Ā		Π.
	and enter the amount of tax-exempt interest received or accrued during the year	▶	15			N/A
16	At any time during calendar year 2015, did the foundation have an interest in or a signature or other autbank, securities, or other financial account in a foreign country?	hority ov	er a	16	Yes	No X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If 'Yes,' enter the name of the foreign country. ▶					
Pa	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
1 a	During the year did the foundation (either directly or indirectly):					
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	Yes	XNo			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a		_			
	disqualified person?	Yes	X No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	Yes	X No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	Yes	X No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)?	Yes	XNo			in jag
	(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.)	Yes	_ X No			-7
t	If any answer is 'Yes' to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	_		1 b	N	/ A
	Organizations relying on a current notice regarding disaster assistance check here	•	\Box			
ď	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?			1 c		X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)):					
a	At the end of tax year 2015, did the foundation have any undistributed income (lines 6d					
	and 6e, Part XIII) for tax year(s) beginning before 2015?	Yes	X No			
	If 'Yes,' list the years ► 20 , 20 , 20					
t	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a) all years listed, answer 'No' and attach statement — see instructions)	(2) (2) to		2 b	N	/A
c	of the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years he	re.				الت
	► 20 , 20 , 20 , 20					
	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?	Yes	X No			
t	of f '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.)			3 b	N	/A
4 a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?			4 a		X
t	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?			4 b		X
RΔΔ					<u> </u>	2015

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Partivile B Statements Regarding Activit		<u>1 4720 May Be Req</u>	uired (continued)	
5a Ouring the year did the foundation pay or incur	_		O.	
(1) Carry on propaganda, or otherwise attempt	_		∐ Yes X	No
(2) Influence the outcome of any specific publi on, directly or indirectly, any voter registral				No
(3) Provide a grant to an individual for travel,	,	•	Yes X	No la la la la la la la la la la la la la
(4) Provide a grant to an organization other th in section 4945(d)(4)(A)? (see instructions)	an a charitable, etc, orç ı	ganization described	Yes X	No No
(5) Provide for any purpose other than religiou educational purposes, or for the prevention	s, charitable, scientific, i of cruelty to children o	literary, or or animals?	Yes X	No No
b If any answer is 'Yes' to 5a(1)-(5), did any of the described in Regulations section 53 4945 or in (see instructions)?	ne transactions fail to quality a current notice regard	ualify under the exception ing disaster assistance	ons	5b N/A
Organizations relying on a current notice regar	ding disaster assistance	e check here	▶ [
c If the answer is 'Yes' to question 5a(4), does the tax because it maintained expenditure respons	ne foundation claim exelibility for the grant?	mption from the	N/A Tyes T	No
If 'Yes,' attach the statement required by Regu	lations section 53 4945	·5(d).		
6 a Did the foundation, during the year, receive an on a personal benefit contract?	y funds, directly or indii	ectly, to pay premiums	∏Yes X	No
b Did the foundation, during the year, pay premit	ums, directly or indirect	y, on a personal benefit		6 b X
If 'Yes' to 6b, file Form 8870.				
7a At any time during the tax year, was the found				No Section 1
b If 'Yes,' did the foundation receive any proceed				V/A 7b
Information About Officers, Directors	ectors, Trustees, Fo	oundation Managers	s, Highly Paid Empl	oyees,
			-41	
1 List all officers, directors, trustees, foundation	(b) Title, and average	(c) Compensation	(d) Contributions to	(e) Expense account,
(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	employee benefit plans and deferred compensation	other allowances
See Statement 1				
		0.	0.	0.
2 Compensation of five highest-paid employee	s (other than those incl	uded on line 1- see ins	tructions). If none, ent	er 'NONE.'
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d)Contributions to employee benefit plans and deferred	(e) Expense account, other allowances
None	<u> </u>		compensation	
			·	
	_			<u> </u>
		 		
		 		
				<u></u>
Total number of other employees paid over \$50,000			•	0
BAA	TEEA0306L 1	0/13/15	·	Form 990-PF (2015)

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Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Enand Contractors (continued)	mployees,
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	
T. 1	•
Total number of others receiving over \$50,000 for professional services	0
Part IX-A Summary of Direct Charitable Activities	
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1 N/A	
2	
3	
4	
Part IX-B Summary of Program-Related Investments (see instructions)	
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.	Amount
1	
<u>N/A</u>	
2	
All other program-related investments. See instructions.	
3	
Total. Add lines 1 through 3	• 0.
BAA	Form 990-PF (2015)

Pa	Minimum Investment Return (All domestic foundations must complete this part. For see instructions.)	oreign	foundations,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes	المشتقا	
_	Average monthly fair market value of securities	1 a	
	Average of monthly cash balances	1 b	20,263.
	Fair market value of all other assets (see instructions)	1 c	
	Total (add lines 1a, b, and c)	1 d	20,263.
•	Reduction claimed for blockage or other factors reported on lines 1a and 1c		
_	(attach detailed explanation) 1e 0.		
	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	20,263.
4	Cash deemed held for charitable activities Enter 1-1/2% of line 3 (for greater amount, see instructions)	4	304.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	19,959.
6	Minimum investment return. Enter 5% of line 5	6	998.
Pai	t XI → Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating and certain foreign organizations check here ☐ and do not complete this part.)	atıng	foundations
1	Minimum investment return from Part X, line 6	1	998.
2 a	Tax on investment income for 2015 from Part VI, line 5	_	
ŀ	Income tax for 2015. (This does not include the tax from Part VI.)	ایا	
(Add lines 2a and 2b	2 c	
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	998.
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	998.
6	Deduction from distributable amount (see instructions)	6	
_ 7	Distributable amount as adjusted. Subtract line 6 from line 5 Enter here and on Part XIII, line 1	7	998.
Pai	TXII Qualifying Distributions (see Instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc, purposes:		
	Expenses, contributions, gifts, etc — total from Part I, column (d), line 26	1 a	7,831.
	Program-related investments — total from Part IX-B	1 b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc, purposes	2	
3 a	Amounts set aside for specific charitable projects that satisfy the Suitability test (prior IRS approval required)	3 a	
t	Cash distribution test (attach the required schedule)	3 b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	7,831.
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	<u> </u>
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	7,831.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether t qualifies for the section 4940(e) reduction of tax in those years.	he fou	
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Form **990-PF** (2015)

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2014	(c) 2014	(d) 2015
Distributable amount for 2015 from Part XI, line 7			-	
2 Undistributed income, if any, as of the end of 2015;				998.
a Enter amount for 2014 only			0.	
b Total for prior years: 20 , 20 , 20		0.	0.	
3 Excess distributions carryover, if any, to 2015:		0.		
a From 2010 10,846.				
b From 2011 10, 785.				
c From 2012 11,559.				
d From 2013 8, 045.			İ	
e From 2014 8,738.				
f Total of lines 3a through e	49,973.			
4 Qualifying distributions for 2015 from Part	13/3/01			
XII, line 4: ► \$7,831.				
a Applied to 2014, but not more than line 2a			0.	
b Applied to undistributed income of prior years (Election required – see instructions)		0.		
, , , , , , , , , , , , , , , , , , , ,		<u> </u>		
c Treated as distributions out of corpus (Election required — see instructions)	0.			-
d Applied to 2015 distributable amount	Ŭ.			998.
e Remaining amount distributed out of corpus.	6,833.			
5 Excess distributions carryover applied to 2015	0.			0.
(If an amount appears in column (d), the	· · ·			
same amount must be shown in column (a))				
6 Enter the net total of each column as				
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e. Subtract line 5	56,806.			
b Prior years' undistributed income. Subtract line 4b from line 2b.	, , , , ,	0.		
c Enter the amount of prior years' undistributed		0.		
income for which a notice of deficiency has				
been issued, or on which the section 4942(a) tax has been previously assessed		0.		
•		0.		
d Subtract line 6c from line 6b. Taxable amount — see instructions		0.:		
a Hadishibidad isaassa far 2014 - Cubbrack line da firasa		· · · · · · · · · · · · · · · · · · ·		
e Undistributed income for 2014 Subtract line 4a from line 2a Taxable amount — see instructions			0.	
f Undistributed income for 2015. Subtract lines 4d and 5 from line 1. This amount must be				
distributed in 2016				0.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election				
may be required — see instructions).	0.			
8 Excess distributions carryover from 2010 not			-	
applied on line 5 or line 7 (see instructions)	10,846.			
9 Excess distributions carryover to 2016.				
Subtract lines 7 and 8 from line 6a	45,960.			
10 Analysis of line 9	, -			
a Excess from 2011 10,785.				
b Excess from 2012 11,559.				
c Excess from 2013 8,045.				
d Excess from 2014 8,738.				
e Excess from 2015 6, 833.				
BAA				Form 990-PF (2015)

Form 990-PF (2015) AEGIS Foundatio				<u>26</u> -4187654	Page 10
Part XIV Private Operating Found					N/A
1 a If the foundation has received a ruling or is effective for 2015, enter the date of the	ruling	·		_ `*	
b Check box to indicate whether the founda		erating foundation de		4942(J)(3) or	4942(j)(5)
2a Enter the lesser of the adjusted net income from Part I or the minimum	Tax year	41.0014	Prior 3 years	4.00010	(a) Takal
investment return from Part X for each year listed	(a) 2015	(b) 2014	(c) 2013	(d) 2012	(e) Total
b 85% of line 2a		ļ <u> </u>	 		
c Qualifying distributions from Part XII, line 4 for each year listed					
d Amounts included in line 2c not used directly for active conduct of exempt activities					·
e Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the alternative test relied upon:					
a 'Assets' alternative test — enter.					
(1) Value of all assets					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b 'Endowment' alternative test — enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed					
c 'Support' alternative test — enter:					
(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from an exempt organization					
(4) Gross investment income					
Part XV Supplementary Information assets at any time during	n (Complete thi the year — see i	s part only if the nstructions.)	e foundation had	d \$5,000 or more	e in
Information Regarding Foundation Man. List any managers of the foundation who close of any tax year (but only if they have None	have contributed me	ore than 2% of the than \$5,000). (See	otal contributions rec section 507(d)(2).)	ceived by the founda	tion before the
b List any managers of the foundation who a partnership or other entity) of which the None	own 10% or more of the foundation has a 1	of the stock of a corp 0% or greater intere	poration (or an equal sst.	ly large portion of th	e ownership of
2 Information Regarding Contribution, Gr Check here ☐ if the foundation only requests for funds. If the foundation mak complete items 2a, b, c, and d.	makes contributions es gifts, grants, etc	s to preselected char (see instructions) to	ritable organizations individuals or organ	izations under other	
a The name, address, and telephone numb	er or e-mail address	s of the person to wi	hom applications sho	ould be addressed:	
See Statement 2					
b The form in which applications should be	submitted and infor	mation and material	Is they should includ	e·	
See Statement for Line 2a	L				
c Any submission deadlines	_	···			
See Statement for Line 2a					
d Any restrictions or limitations on awards,	such as by geograp	phical areas, charitat	ole fields, kinds of in	stitutions, or other fa	actors.
See Statement for Line 2a	<u> </u>				

	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)	substantial contributor	recipient	contribution	
	Paid during the year				
See	Statement 3				
	Total Approved for future payment	T		► 3a	7,831.
	Statement 4				
500	beaccast 1				
	Total			► 3b	4,595.

Part XVI-A Analysis of Income-Producing Activities

inter gross	amounts unless otherwise indicated.		ed business income	-	by section 512, 513, or 514	(e)
1 Progr	am service revenue:	(a) Business code	(b) Amount	Exclu- sion	(d) Amount	Related or exempt function income (See instructions)
a a	an service revenue.			code		
	<u>. </u>			†		
c		 		1		
d				1		
е	-				 	
f				—		
g Fees	and contracts from government agencies	<u> </u>				
2 Memb	pership dues and assessments		-	T		
3 Interes	t on savings and temporary cash investments.			1		
4 Divide	ends and interest from securities					
5 Net re	ental income or (loss) from real estate:					
	financed property .					
	ebt-financed property					
	ntal income or (loss) from personal property			<u> </u>		
-	investment income			ļ		
	(loss) from sales of assets other than inventory			<u> </u>	<u>.</u>	
	ncome or (loss) from special events			<u> </u>		
	s profit or (loss) from sales of inventory			 		
	revenue.			 		
.a	 	ļ		 		
b	· · · · · · · · · · · · · · · · · · ·			┼		
			,	 		· · · · · · · · · · · · · · · · · · ·
d		ļ		 -		
	otal. Add columns (b), (d), and (e)			 		
13 Total	Add line 12 columns (b) (d) and (e)				12	^
	. Add line 12, columns (b), (d), and (e) theet in line 13 instructions to verify calculations.	ons.)			13	0.
See works	heet in line 13 instructions to verify calculation		lishment of Exem	pt Puri	·	0.
See works	-B Relationship of Activities to the	e Accomp			ooses	
See works Part XVI	heet in line 13 instructions to verify calculation	e Accomp			ooses	
See works Part XVI Line No.	-B Relationship of Activities to the	e Accomp			ooses	
Part XVI	-B Relationship of Activities to the	e Accomp			ooses	
Part XVI	-B Relationship of Activities to the	e Accomp			ooses	
Part XVI	-B Relationship of Activities to the	e Accomp			ooses	
Part XVI	-B Relationship of Activities to the	e Accomp			ooses	
Part XVI	-B Relationship of Activities to the	e Accomp			ooses	
Part XVI	-B Relationship of Activities to the	e Accomp			ooses	
Part XVI	-B Relationship of Activities to the	e Accomp			ooses	
Part XVI	-B Relationship of Activities to the	e Accomp			ooses	
Part XVI	-B Relationship of Activities to the	e Accomp			ooses	
Part XVI	-B Relationship of Activities to the	e Accomp			ooses	
Part XVI	-B Relationship of Activities to the	e Accomp			ooses	
Part XVI	-B Relationship of Activities to the	e Accomp			ooses	
Part XVI	-B Relationship of Activities to the	e Accomp			ooses	
Part XVI	-B Relationship of Activities to the	e Accomp			ooses	
Part XVI	-B Relationship of Activities to the	e Accomp			ooses	
Part XVI	-B Relationship of Activities to the	e Accomp			ooses	
Part XVI	-B Relationship of Activities to the	e Accomp			ooses	tly to the instructions.)
Part XVI	-B Relationship of Activities to the	e Accomp			ooses	
Part XVI	-B Relationship of Activities to the	e Accomp			ooses	
Part XVI	-B Relationship of Activities to the	e Accomp			ooses	

Form 990-PF (2015) AEGIS Foundation Inc. 26-418765Part XVII 3 Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

BAA						Phone no	Form 990-PF (2015)
Paid Prepa Use O		Firm's name		Self-Prepared		Check self employed	
Sign Here	correct,	enalties of perjury, I declare and complete Declaration A	of preparer (other than ta	eturn, including accompanying schedi xpayer) is based on all information 5/5// Date Preparer's signature	vice Vice Title Date	President	May the IRS discuss this return with the preparer shown below (see instructions)? Yes No
N/A							
		Name of organizati		(b) Type of organizatio	n	(c) Description of re	lationship
d€	escribe	undation directly or i d in section 501(c) o complete the followi	of the Code (other th	vith, or related to, one or r nan section 501(c)(3)) or ii	nore tax-exempt on section 527?	organizations	Yes X No
	\pm						
	4						
	\bot						
	\pm						
	\mp						
	+		-				
	\mp						
	_					·	
N/A		(2) innount intentent	(5) 1121110 01 110110		(a) possitifit	on or transfers, transactions, alse	one my ununyothorita
th ar (a) Line	ny trans	s, other assets, or s saction or sharing ar (b) Amount involved	rrangement, show in	e reporting foundation. If the column (d) the value of the character of the column is the column of the column is the column of the column is the column of the column is the column of the column is the column of the column o	he goods, other a	eived less than fair market issets, or services received on of transfers, transactions, and	<u>1</u>
d If	the an	swer to any of the a	bove is 'Yes,' comp	lete the following schedule e reporting foundation. If the	. Column (b) sho	uld always show the fair m	
\ -	,		•	her assets, or paid employ	ees		1 b (6) X 1 c X
\ -	•	s or loan guarantee		fundraising solicitations			1 b (5) X
•	•	bursement arranger					1 b (4) X
•	.		n a noncharitable ex oment, or other asse	, •			1 b (2) X 1 b (3) X
•	•		charitable exempt o	~			1 b (1) X
b O	ther tra	insactions.					The contract of
•		r assets					1 a (1) X 1 a (2) X
	ansfers Cash	, -	foundation to a nor	ncharitable exempt organiz	ation of:		1 a (1) X
described in section 501(c) of the Code (other than section 501(c)(3) of relating to political organizations?					•	ection 527,	通过
				e in any of the following wi			Yes No

2	0	1	5

Federal Statements

Page 1

Client 1

AEGIS Foundation Inc.

26-4187654

5/05/16

09·32AM

Statement 1
Form 990-PF, Part VIII, Line 1
List of Officers, Directors, Trustees, and Key Employees
, , , , , , , , , , , , , , , , , , , ,

Name and Address	Title and Average Hours <u>Per Week Devoted</u>	Compen- sation	Contri bution EBP & I	to Account	t/
Irene Rauch 1 Meadowlands Plaza East Rutherford, NJ 07073	President O	\$	0. \$	0. \$	0.
Alison Geller 1 Meadowlands Plaza East Rutherford, NJ 07073	Vice President 0	,	0.	0.	0.
Regina Salogiannis 1 Meadowlands Plaza East Rutherford, NJ 07073	Treasurer 0	1	0.	0.	0.
Michael S. Johnson 1 Meadowlands Plaza East Rutherford, NJ 07073	Trustee 0		0.	0.	0.
Melinda dela Pena 1 Meadowlands Plaza East Rutherford, NJ 07073	Secretary 0		0.	0.	0.
	Total	\$	<u>0.</u> \$	0. \$	0.

Statement 2 Form 990-PF, Part XV, Line 2a-d **Application Submission Information**

Name of Grant Program:

Name: Care Of:

Street Address: City, State, Zip Code:

Submission Deadlines:

Restrictions on Awards:

Telephone:

E-Mail Address: Form and Content: Matching Contributions AEGIS Foundation Inc.

Regina Salogiannis 1 Meadowlands Plaza 4tl East Rutherford, NJ 07073

4th Floor

AEGIS employees may request matching contributions from the Foundation to 501 (c) charities by including with their contribution to the grantee the completed AEGIS

Matching Gift Program form.

Reasonable time frame.

Donations of \$25 or more, made by eligible AEGIS

employees, will be matched dollar-for-dollar by the AEGIS Foundation up to a combined total of \$500 per donor in any

one calendar year.

The AEGIS Foundation Matching Gift Program will not match

employee contributions for the following:

Gifts of non-employee spouses of eligible donor

Insurance premiums

2015	Federal Statements
Client 1	AEGIS Foundation Inc.

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Statement 2 (continued)
Form 990-PF, Part XV, Line 2a-d
Application Submission Information

5/05/16

Payments in lieu of tuition

Amounts payable as subscription fees to publications

Dues or gifts payable to national or local groups that are not distributed to the affiliated institutions $\frac{1}{2} \int_{-\infty}^{\infty} \frac{1}{2} \left(\frac{1}{2} \int_{-\infty}^{\infty$

Payments to satisfy any legal obligations

Gifts to organizations where admission or participation is restricted because of race or creed

Gifts intended to fulfill pledges, tithes or other religion-related financial commitments

Statement 3 Form 990-PF, Part XV, Line 3a Recipient Paid During the Year

Name and Address	Donee Relationship	Found- ation Status	Purpose of Grant	Amount
Chabad of Hoboken 556 1st Street #3 Hoboken NJ 07030		EXEMPT	EMPLOYEE MATCH	\$ 100.
Good Counsel, Inc. P.O. Box 6068 Hoboken NJ 07030		EXEMPT	EMPLOYEE MATCH	25.
Myelin Repair Foundation 18809 Cox Avenue Suite 190 Saratoga CA 95070		EXEMPT	EMPLOYEE MATCH	100.
Notre Dame High School 601 Lawrence Road Lawrenceville NJ 08648		EXEMPT	EMPLOYEE MATCH	500.
Rensselaer Polytechnic Institute PO Box 3164 Boston MA 02241		EXEMPT	EMPLOYEE MATCH	500.
Rutgers University Foundation 7 College Avenue New Brunswick NJ 08901		EXEMPT	EMPLOYEE MATCH	300.

2015	Federal Sta	tements		Page 3
Client 1	AEGIS Founda	ation Inc.		26-4187654
5/05/16 Statement 3 (continued) Form 990-PF, Part XV, Line 3a Recipient Paid During the Year				09:32AM
Name and Address	Donee Relationship	Found- ation Status	Purpose of Grant	Amount
Salvation Army 4 Gary Road Union NJ 07083		EXEMPT	EMPLOYEE MATCH	\$ 100.
Special Olympics PO Box 3589 Princeton NJ 08543		EXEMPT	EMPLOYEE MATCH	450.
St. Jude Children's Research Hospital 501 St. Jude Place Memphis TN 38105		EXEMPT	EMPLOYEE MATCH	135.
United Service Organizations 2111 Wilson Boulevard Suite 1200 Arlington VA 22201		EXEMPT	EMPLOYEE MATCH	50.
West Roane County VFD PO Box 417 Rockwood TN 37854		EXEMPT	EMPLOYEE MATCH	200.
The Leukemia and Lymphoma Society - NJ 14 Commerce Drive Suite 301 Cranford NJ 07016		EXEMPT	EMPLOYEE MATCH	250.
St. Peter's Preparatory School 144 Grand Street Jersey City NJ 07302		EXEMPT	EMPLOYEE MATCH	100.
Alley Cat Allies, Inc. 7920 Norfolk Avenue Suite 600 Bethesda MD 20814		EXEMPT	EMPLOYEE MATCH	200.
Mount Freedom Jewish Center P.O.Box 202 Mount Freedom NJ 07970		EXEMPT	EMPLOYEE MATCH	108.
Humane Society of Amherst County P.O. Box 614 Amherst Va 24521		EXEMPT	EMPLOYEE MATCH	50.
Lungevity Foundation 218 South Wabash Avenue Suite 540 Chicago IL 60604		EXEMPT	EMPLOYEE MATCH	25.

2015	Federal Stat	tements	· · · · · · · · · · · · · · · · · · ·	Page 4
Client 1	AEGIS Founda	26-4187654		
5/05/16 Statement 3 (continued) Form 990-PF, Part XV, Line 3a Recipient Paid During the Year				09·32AM∘
Name and Address	Donee Relationship	Found- ation Status	Purpose of Grant	Amount
Rockwood 2000, Inc. P.O. Box 933 Rockwood TN 37854		EXEMPT	EMPLOYEE MATCH	\$ 150.
Swim Across America One International Place Suite 4600 Boston Ma 02110		EXEMPT	EMPLOYEE MATCH	50.
Lurie Children's Hospital of Chicago 225 E. Chicago Ave. Box 4 Chicago IL 60611		EXEMPT	EMPLOYEE MATCH	250.
Pennsylvania State University One Old Main University Park PA 16802		EXEMPT	EMPLOYEE MATCH	50.
Natural Resources Defense Council 40 W. 20th Street New York NY 10011		EXEMPT	EMPLOYEE MATCH	500.
DonorsChoose.org 134 W. 37th Street 11th Floor New York NY 10018		EXEMPT	EMPLOYEE MATCH	200.
Fellowship of Catholic University Studen P.O. Box 18710 Golden CO 80402		EXEMPT	EMPLOYEE MATCH	25.
American Cancer Society - Hackensack 20 Mercer Street Hackensack NJ 07601		EXEMPT	EMPLOYEE MATCH	25.
American Cancer Society - OK P.O. Box 22718 Oklahoma City OK 73123		EXEMPT	EMPOLYEE MATCH	50.
American Heart Assoc CT 5 Brookside Drive Wallingford CT 06942		EXEMPT	EMPLOYEE MATCH	185.
Avon Products Foundation Inc. 1 Avon Plaza Rye NY 10580		EXEMPT	EMPLOYEE MATCH	100.

2015	Federal Stat	tements		Page 5
Client 1	AEGIS Founda	AEGIS Foundation Inc.		
5/05/16				09:32AM
Statement 3 (continued) Form 990-PF, Part XV, Line 3a Recipient Paid During the Year				
Name and Address	Donee Relationship	Found- ation Status	Purpose of Grant	Amount
Care Plus NJ Inc. 610 Valley Health Plaza Paramus NJ 07652		EXEMPT	EMPLOYEE MATCH	\$ 100.
Church of Our Savior 48 Henry Street New York NY		EXEMPT	EMPLOYEE MATCH	50.
DAV Charitable Service Trust 3725 Alexandria Pike Cold Spring KY 41076		EXEMPT	EMPLOYEE MATCH	100.
Far Hills/Bedminister First Aid Squad P.O. Box 834 Far Hills NJ 07931		EXEMPT	EMPLOYEE MATCH	25.
Freehold First Aid & Emergency Squad 18 Spring Street Freehold NJ 07728		EXEMPT	EMPLOYEE MATCH	100.
Hobart and William Smith Colleges 300 Pulteney Street Geneva NY 14458		EXEMPT	EMPLOYEE MATCH	100.
Monmouth University 400 Cedar Ave. West Long Branch NJ 07764		EXEMPT	EMPLOYEE MATCH	250.
Musical Club of Westfield 806 Saint Marks Ave. Westfield NJ 07090		EXEMPT	EMPLOYEE MATCH	25.
National Anti-Vivisection Society 53 W. Jackson Blvd Suite 1552 Chicago IL 60604		EXEMPT	EMPLOYEE MATCH	200.
National Multiple Sclerosis Society - NJ 1480 U.S. Highway 9 North Suite 39 Woodbridge NJ 07095		EXEMPT	EMPLOYEE MATCH	50.

2015	Federal Sta	tements		Page 6
Client 1	AEGIS Founda	AEGIS Foundation Inc.		
5/05/16 Statement 3 (continued) Form 990-PF, Part XV, Line 3a Recipient Paid During the Year				09:32AM
Name and Address	Donee Relationship	Found- ation Status	Purpose of <u>Grant</u>	Amount
National Multiple Sclerosis Society - TX 8111 N. Stadium Drive # 100 Houston TX 77054		EXEMPT	EMPLOYEE MATCH	\$ 250.
New York University 25 West 4th Street 4th Floor New York NY 10012		EXEMPT	EMPLOYEE MATCH	275.
Omicron Delta Kappa Foundation 224 McLaughlin Street Lexington VA 24430		EXEMPT	EMPLOYEE MATCH	50.
Seton Hall University - Matching Gift 457 Centre Street, Ring Bldg South Orange NJ 07079		EXEMPT	EMPLOYEE MATCH	100.
St. John's R. C. Church 619 Chestnut Street Lakehurst NJ		EXEMPT	EMPLOYEE MATCH	50.
Jewish Center Beis Menachem of Hoboken 80 Park Avenue Hoboken NJ		EXEMPT	EMPLOYEE MATCH	300.
Zero - The End of Prostate Cancer 515 King Street Suite 420 Alexandria VA 22314		EXEMPT	EMPLOYEE MATCH	250.
Foundation for Morristown Medical Center 475 South Street Morristown NJ 07960		EXEMPT	EMPLOYEE MATCH	35.
Catholic Charities - Lakewood 200 Mountain Ave. Lakewood NJ 08701		EXEMPT	EMPLOYEE MATCH	35.
ICAN 650 E. Morelos Street Chandler AZ 85225		EXEMPT	EMPLOYEE MATCH	500.

2015	Federal Sta	tements		Pa	ge 7
Client 1	AEGIS Founda	ation Inc.		26-41	87654
5/05/16 Statement 3 (continued) Form 990-PF, Part XV, Line 3a Recipient Paid During the Year				0	9·32AM
Name and Address	Donee Relationship	Found- ation Status	Purpose of Grant	Amoun	t
Food for the Poor Inc. 6401 Lyons Road Coconut Creek FL 33073		EXEMPT	EMPLOYEE MATCH	\$	133.
American Cancer Society - GA 250 Williams Street Atlanta GA 70302		EXEMPT	EMPLOYEE MATCH		25.
The Leukemia & Lymphoma Society - NY 61 Broadway Suite 400 New York NY 10006		EXEMPT	EMPLOYEE MATCH		50.
			Total	\$ 7,	831.
Statement 4 Form 990-PF, Part XV, Line 3b Recipient Approved for Future Payr	nent				
Name and Address	Donee Relationship	Found- ation Status	Purpose of Grant	Amou	nt.
American Heart Association	•	EXEMPT	EMPLOYEE MATCH	\$	25.
CT 5 Brookside Drive Wallingford Ct 06492					
God's Love We Deliver Inc 166 Avenue of the Americas New York NY 10013		EXEMPT	EMPLOYEE MATCH		50.
The Leukemia & Lymphoma Society - NY 61 Broadway Suite 400 New York NY 10006		EXEMPT	EMPLOYEE MATCH		50.
Archdiocese of Newark 171 Clifton Avenue Newark NJ 07104		EXEMPT	EMPLOYEE MATCH		350.
Banyan School 12 Hollywood Avenue Fairfield NJ 07004		EXEMPT	EMPLOYEE MATCH		500.
Beagle Freedom Project 4804 Laurel Canyon Blvd #534 Valley Village CA 91607		EXEMPT	EMPLOYEE MATCH		625.

2015	Federal Sta	tements		Page 8
Client 1	AEGIS Founda	ation Inc.		26-4187654
5/05/16 Statement 4 (continued) Form 990-PF, Part XV, Line 3b Recipient Approved for Future Pay	ment			09.32AM
Name and Address	Donee Relationship	Found- ation Status	Purpose of Grant	Amount
Community Food Bank of New Jersey 31 Evans Terminal Hillside NJ 07205		EXEMPT	EMPLOYEE MATCH	\$ 50.
Madison Eagle Christmas Fund P.O. Box 2 Madison NJ 100		EXEMPT	EMPLOYEE MATCH	100.
Make a Wish Foundation 4742 N. 24th Street Suite 400 Phoenix AZ 85016		EXEMPT	EMPLOYEE MATCH	500.
New York Public Radio 160 Varick Street New York NY 10013		EXEMPT	EMPLOYEE MATCH	120.
Providence College One Cunningham Square Providence RI 02918		EXEMPT	EMPLOYEE MATCH	150.
Queen of Peace Church 10 Franklin Place North Arlington NJ 07031		EXEMPT	EMPLOYEE MATCH	100.
St. John's Roman Catholic Church 619 Chestnut Street Lakehurst NJ 08733		EXEMPT	EMPLOYEE MATCH	100.
St. Jude Children Research Hospital 501 St. Jude Place Memphis TN 38105		EXEMPT	EMPLOYEE MATCH	325.
Trustees of Westminster School 995 Hopemeadow Street Simsbury CT 06070		EXEMPT	EMPLOYEE MATCH	300.
United Services Organizations, Inc. 2111 Wilson Blvd Suitw 1200 Arlington VA		EXEMPT	EMPLOYEE MATCH	25.
U.S. Holocast Memorial Museum 100 Roaul Wallenberg Place SW Washington DC 20024		EXEMPT	EMPLOYEE MATCH	50.

2015	Federal Statements			Page 9
Client 1	AEGIS Foundation Inc.			26-4187654
5/05/16				09:32AM
Statement 4 (continued) Form 990-PF, Part XV, Line 3b Recipient Approved for Future Payr	nent			
Name and Address	Donee <u>Relationship</u>	Found- ation Status	Purpose of Grant	Amount
Women for Women International 2000M Street NW Suite 200 Washington DC 20036	-	EXEMPT	EMPLOYEE MATCH	\$ 250.
Xavier Mission 55 West 15th Street New York NY 10011		EXEMPT	EMPLOYEE MATCH	100.
National Trust for Historic Presevation 1785 Massachusetts Ave NW Washington DC 20036		EXEMPT	EMPLOYEE MATCH	50.
Salvation Army 6 Gary Road Union NJ 07083		EXEMPT	EMPLOYEE MATCH	25.
Center for Working Families 12605 W. North Ave #130 Brookfield WI 53045		EXEMPT	EMPLOYEE MATCH	100.
Greater Newark Holiday Fund, Inc. P.O. Box 59 Newark NJ 07101		EXEMPT	EMPLOYEE MATCH	200.
McCarter Theater 91 University Place Princeton NJ 08540		EXEMPT	EMPLOYEE MATCH	250.
The Pensylvania State University One Old Main University Park PA 16802		EXEMPT	EMPLOYEE MATCH	200.
			Tota	1 <u>\$ 4,595</u> .