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Form 990-PF

Return of Private Foundation

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

▶ Do not enter social security numbers on this form as it may be made public.

OMB No 1545-0052

Department of the Treasury Internal Revenue Service

▶ Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf. Open to Public Inspection

Fo	or ca	lendar year 2015 or tax year beginning			, 2015	, and ending	3		, 20
_	lame	of foundation				_	A	Employer identifi	ication number
	THE	JANE ELIZABETH COHEN FOUNDA	TION					26-668817	8
1	lumbe	er and street (or P O box number if mail is not delivered	to street a	address)		Room/suite	B	Telephone numb	er (see instructions)
								() –
		. BOX 34835					\perp		
(City or	town, state or province, country, and ZIP or foreign pos	tal code				1.		
							0	If exemption application pending, check here	ation is
		HESDA, MD 20827	-	····			_		
G	Che	ck all that apply: Initial return		Initial return	-	oublic charity	/ c	1 Foreign organiza	tions, check here
		Final return	<u> </u>	Amended re				2 Foreign organiza 85% test, check it	
_		Address change		Name chang			4		▶ □
H	$\overline{}$	ck type of organization: X Section 501(E	If private foundation	n status was terminated
1		ection 4947(a)(1) nonexempt charitable trust		ther taxable pr			4	under section 507(b	o)(1)(A), check here .
ı			-	nethod: X C	ash [] Acc	crual	F		in a 60-month termination
		· · · · · · · · · · · · · · · · · · ·	ther (sp				-	under section 507(b)(1)(B), check here .
			column (d	f) must be on cas	sn basis)		Щ.		(d) Disbursements
Li	ant	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 another total).		Revenue and penses per books	(b) Net inv incor		(c)	Adjusted net income	for charitable purposes (cash basis only)
-	1	column (a) (see instructions).)		18,500.					(odon oddio only)
	2	Check Contributions, gifts, grants, etc , received (attach schedule) . Check Check Contribution is not required to							
	3	attach Sch B							
	4	Dividends and interest from securities							
	5 a	Gross rents			<u>.</u>				
		Net rental income or (loss)							
Revenue	[Net gain or (loss) from sale of assets not on line 10 Gross sales price for all							
Š	7	assets on line 6a (from Part IV, line 2) .				-			
æ	8	Net short-term capital gain		,, , , , , , , , , , , , , , , , , , ,					
	9	Income modifications				-			
	10a	Gross sales less returns and allowances							
	ь	Less Cost of goods sold .							
		Gross profit or (loss) (attach schedule)							
	11	Other income (attach schedule)							
_	12	Total. Add lines 1 through 11		18,500.					
s	13	Compensation of officers, directors, trustees, etc		0.					
ses	14	Other employee salaries and wages		· · · · · · · · · · · · · · · · · · ·					
ē	15	Pension plans, employee benefits							
п×	16a	Legal fees (attach schedule)		1,475.					1,475
ē	b	Accounting fees (attach schedule)ATCH 1		1,4/5.					1,4/5
ĭŧ.	C	Other professional fees (attach schedule)							
itra	17	Interest			ļ <u>.</u>				
Ę	18	Taxes (attach schedule) (see instructions)	ļ						<u> </u>
Ξ	19	Depreciation (attach schedule) and depletion.	ļ			+			
ĕ	20	Occupancy	<u> </u>	189.					189
P	14 15 16a c 17 18 19 20 21	Travel, conferences, and meetings							
a	22	Printing and publications Other expenses (attach schedule) ATCH . 2 .		82.					82
Ë	23 24 25	Total operating and administrative expenses.					-		
era		Add lines 13 through 23		1,746.					1,746
ă	25	Contributions, gifts, grants paid		9,280.					9,280
_	26	Total expenses and disbursements. Add lines 24 and 25		11,026.		0.	-	0	
-	27	Subtract line 26 from line 12:			 	1			
	а	Excess of revenue over expenses and disbursements		7,474.					
	1			····		0.			
		Adjusted net income (if negative enter -0-)		·	 				T

Don't II	Balamas Chasto	Attached schedules and amounts in the description column should be for end-of-year	Beginning of year	End o	f year
Part II	Dalance Sneets	amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
1	Cash - non-interest-hear	ing	3,944.	11,418.	11,418.
2	Savinge and temporary	cash investments			
3	Accounts receivable	ı			
"		btful accounts ▶			
_					
4	Pledges receivable ►	N/ 1		B 2000	
		btful accounts ▶			
5					
6		officers, directors, trustees, and other			
		tach schedule) (see instructions)			
7	Other notes and loans	receivable (attach schedule) 🕨			·
.	Less. allowance for dou	ıbtful accounts ▶			
8 9		se			<u> </u>
9	Prepaid expenses and o	deferred charges			
₹ 10a		te government obligations (attach schedule)			
b		e stock (attach schedule)			
	Investments - corporate	bonds (attach schedule)			
11	Investments - land, building and equipment basis	IS, ▶			- turn - Auro-Are
	Less accumulated depreci	ation -			A
10	(attach schedule)	Joans			
12 13	Investments - mongage	loans			
14	Land, buildings, and	•			
	equipment basis Less accumulated deprecia	ation			mercen and a second merchanic are J
1.5	(attach schedule)				
15		>)			
16		completed by all filers - see the		11 110	11,418
 		page 1, item I)	3,344.	11,410.	11,410
17	• •	accrued expenses			
18					
19 20 21 22	Deferred revenue				
20	·	ors, trustees, and other disqualified persons			
21		otes payable (attach schedule)			
J 22	Other liabilities (describ	pe ▶)			
23	Total liabilities (add lin	es 17 through 22)	0.	0.	
		llow SFAS 117, check here . ▶ X			
Sec 24		24 through 26 and lines 30 and 31.			
24	Unrestricted		3,944.	11,418.	
Net Assets or Fund Balai 8 2 2 2 2 2 3 3 1 2 6 6 8 2 2 9 5 7 7 8 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9]
n 26		· · · · · · · · · · · · · · · · · · ·]
	•	not follow SFAS 117,			1
리		nplete lines 27 through 31.			
٥ ,,					
φ 2/		ncipal, or current funds			1
9 28 28	• • • • • • • • • • • • • • • • • • • •	or land, bidg, and equipment fund			1
w 29	• • • • • • • • • • • • • • • • • • • •	nulated income, endowment, or other funds	3,944.	11,418.	,
티 30		d balances (see instructions)	3, 344.	11,410	1
Z 31		net assets/fund balances (see	2 011	11 /10	
			3,944.	11,418.	·L
		anges in Net Assets or Fund Bala		 	
		balances at beginning of year - Part			2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2
		ed on prior year's return)		i i	3,944
		I, line 27a		2	7,474
3 Oth	ner increases not inclu	ıded in line 2 (ıtemıze) ▶		3	
					11,418
	creases not included			5	
		balances at end of year (line 4 minus	s line 5) - Part II, column	(b), line 30 6	11,418
			· · · · · · · · · · · · · · · · · · ·	 	

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Part IV		and Losses for Tax on Inve		/5 \ (10	() 5	r
		d describe the kind(s) of property sold ((b) How acquired P - Purchase	(c) Date	(d) Date sold (mo., day, yr.)
	2-story b	rick warehouse; or common stock, 200	SIS. MLC CO)	D - Donation	(mo., day, yr.)	(mo., day, yr.)
<u>1a</u>						
<u>_b</u>						
_c						
<u>d</u>	· · · - · · · · · · · · · · · · · · · ·					
<u>e</u>						<u> </u>
(e) G	ross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		(h) Gain or (lo (e) plus (f) mini	
_a	<u> </u>					
_b						
_ <u>C</u>						
d						
е						
Con	nplete only for assets	showing gain in column (h) and owne	d by the foundation on 12/31/69	l o	Gains (Col (h) g	ain minus
(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		(k), but not less Losses (from co	than -0-) or
а						
b						
C	- 1					
d						
e						
	tal gain net income o	or (not capital loce)	gain, also enter in Part I, line 7 (loss), enter -0- in Part I, line 7	2		
3 Nets	bort torm capital as	un or (loss) as defined in sections		┝╧┼╌		
				1 1		
_		art I, line 8, column (c) (see ins				
				3		
Part V			duced Tax on Net Investment In e section 4940(a) tax on net investi			
Was the f	oundation liable for		outable amount of any year in the b	ase perio	d?	Yes X No
		not qualify under section 4940(e).				
1 Enter		nount in each column for each yea	r; see the instructions before makir	ig any eni I		
	(a) ase period years ear (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets		(d) Distribution r (col (b) divided by	/ col (c))
	2014	27,736.	9,703.	<u> </u>		2.858497
	2013	14,474.	5,579.	ļ		2.594372
	2012	13,789.	7,541.			1.828537
	2011	4,439.	5,835.		_	0.760754
	2010	5,462.	5,899.			0.925920
2 Total	l of line 1. column (c	1)		2		0 00000
			de the total on line 2 by 5, or by the			8.968080
	-	ioi tile o-veal base bellou - divid	ie the total on line 2 by 3, or by the	i i		8.968080
	Jei oi years the loui		e than 5 years	131		
numt			ss than 5 years	3		1.793616
	r the net value of no	ndation has been in existence if les	om Part X, line 5	4		
4 Enter		ndation has been in existence if les	•			1.793616
4 Enter	ply line 4 by line 3	ndation has been in existence if les	rom Part X, line 5	5		1.793616
4 Enter5 Multi6 Enter	ply line 4 by line 3	ndation has been in existence if less incharitable-use assets for 2015 fr	rom Part X, line 5	5		1.793616 4,218. 7,565.
4 Enter5 Multi6 Enter	ply line 4 by line 3	ndation has been in existence if less incharitable-use assets for 2015 fr	rom Part X, line 5	5		1.793616

THE JANE ELIZABETH COHEN FOUNDATION

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Par	t 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		Yes	No
	meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		X
12				
		12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Х	
••	Website address ► N/A		•	
14	The books are in care of ► JANE ELIZABETH COHEN Telephone no ► (301) 36.	5-15	30	
14	Located at ▶ P.O. BOX 34835 BETHESDA, MD ZIP+4 ▶ 20827			
4 =			_	ТТ
15	and enter the amount of tax-exempt interest received or accrued during the year		–	ш
4.0			Yes	No
16	At any time during calendar year 2015, did the foundation have an interest in or a signature or other authority	16		X
	over a bank, securities, or other financial account in a foreign country?	10		
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of		1	i
Dai	the foreign country			
Pal	t VII-B Statements Regarding Activities for Which Form 4720 May Be Required		Yes	No
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		163	140
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?			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a			
	disqualified person?			[
	(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? X Yes 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)?		ž	
	(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			1
	termination of government service, if terminating within 90 days.)		,	1
b	of any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations	-		}
	section 53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	1b		<u> </u>
	Organizations relying on a current notice regarding disaster assistance check here			to colo de
C	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that			
	were not corrected before the first day of the tax year beginning in 2015?	1c		X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private			!
	operating foundation defined in section 4942(j)(3) or 4942(j)(5)).	-		
а	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 ,,,,,,,			
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)			
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to		~ -	
	all years listed, answer "No" and attach statement - see instructions)	2b		
c	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			,
	>			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise			İ
	at any time during the year?			
b	olf "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	1		'
	foundation had excess business holdings in 2015)	3b		
4 a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		X
	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its		<u> </u>	
_	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2015?	4b		x

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

Р	aq	е	7

Part VIII	Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employ and Contractors (continued)	ees,
3 Five	e highest-paid independent contractors for professional services (see instructions). If none, enter "NONI	. "
	(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
NON:	E	
Fadal acces	the work of the way were in the second CO COO for what the second residence	
	ber of others receiving over \$50,000 for professional services	
Part IX-	A Summary of Direct Charitable Activities	
	oundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of ions and other beneficianes served, conferences convened, research papers produced, etc.	Expenses
1 N/A		
· 		
2		
3		
4		
Part IX-E	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 NON	E	
		·····
2		
All other	program related investments. See instructions	
	program-related investments. See instructions	
3 NON	<u> </u>	
Total Add	d lines 1 through 3	

THE JANE ELIZABETH COHEN FOUNDATION 26-6688178 Form 990-PF (2015) Page 8 Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations. Part X see instructions.) Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes: 1a 4,282. 1b 1c 4,282 1d Reduction claimed for blockage or other factors reported on lines 1a and Acquisition indebtedness applicable to line 1 assets 2 2 Subtract line 2 from line 1d 4,282. 3 3 Cash deemed held for charitable activities. Enter 1 1/2 % of line 3 (for greater amount, see 4 64. instructions) Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4 4,218. 5 211. 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.) 211. Tax on investment income for 2015 from Part VI, line 5 2a Income tax for 2015. (This does not include the tax from Part VI.). . 2b 20 211. 3 3 4 211. 5 5 6 Distributable amount as adjusted. Subtract line 6 from line 5 Enter here and on Part XIII, 211. Part XII Qualifying Distributions (see instructions) Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26 11,026. 1a Program-related investments - total from Part IX-B 1b Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., 2

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11,026.

11,026.

3a

3b

4

5

6

3

Amounts set aside for specific charitable projects that satisfy the:

Suitability test (prior IRS approval required)

qualifies for the section 4940(e) reduction of tax in those years.

Cash distribution test (attach the required schedule)

Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4 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)

Adjusted qualifying distributions. Subtract line 5 from line 4

Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation

Part XIII Undistributed In	come (see instru	ctions)			
-		(a)	(b)	(c)	(d)
1 Distributable amount for 201	5 from Part XI,	Corpus	Years prior to 2014	2014	2015
line 7					211.
2 Undistributed income, if any, as o	f the end of 2015				
a Enter amount for 2014 only					
b Total for pnor years 20_13_,20	12 ,20 11				
3 Excess distributions carryover,					
a From 2010	5,167.				
b From 2011	4,147.				
c From 2012	13,412.				
d From 2013	14,195.				
e From 2014	27,251.	64 172			
f Total of lines 3a through e	_	64,172.		<u> </u>	
4 Qualifying distributions for 20 line 4: ► \$	15 from Part XII,				
a Applied to 2014, but not more t					
b Applied to undistributed incor					
(Election required - see instruction	· .				
c Treated as distributions out of required - see instructions)					
d Applied to 2015 distributable a					211.
e Remaining amount distributed		10,815.			
5 Excess distributions carryover a	·	,			
(If an amount appears in colu	mn (d), the same				
amount must be shown in colum 6 Enter the net total of ea					
indicated below:	cii columii as				
a Corpus Add lines 3f, 4c, and 4	le. Subtract line 5	74,987.			
b Prior years' undistributed in	ncome. Subtract				
line 4b from line 2b	l.				
c Enter the amount of prior ye income for which a notice of					
been issued, or on which the	•				
tax has been previously assesse	ed				
d Subtract line 6c from lin					
e Undistributed income for 20	_			·	
4a from line 2a. Taxable					
instructions					
f Undistributed income for 201					
4d and 5 from line 1 This distributed in 2016	1				
7 Amounts treated as distribution					
to satisfy requirements impo	'				
170(b)(1)(F) or 4942(g)(3) (· I				
required - see instructions)	•				
8 Excess distributions carryover					
applied on line 5 or line 7 (see i		5,167.			
9 Excess distributions carry		60.000			
Subtract lines 7 and 8 from line		69,820.			
10 Analysis of line 9:	4 147				
a Excess from 2011	4,147.				
b Excess from 2012	13,412. 14,195.				
c Excess from 2013	27,251.				
d Excess from 2014	10,815.				
e Excess from 2015	10,013.				Form 990-PF (2015)

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

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

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

c Any submission deadlines:

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

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3 Grants and Contributions Paid Duri	ing the Year or Appr	oved for F	Future Payment	
3 Grants and Contributions Paid Dur Recipient Name and address (home or business)	If recipient is an individual,	Foundation	Purpose of grant or	
Name and address (home or business)	any foundation manager	status of recipient	Purpose of grant or contribution	Amount
a Paid during the year	or constante contributor	·		
		,		
ATCH 4				
	•			
		į		
		:		
			•	
Total				9,280
b Approved for future payment				
		i		
		<u> </u>		
Total	<u> </u>		▶ зь	1

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Part XVI	 Analysis of Income-Production 	ucing Acti	ivities			
	amounts unless otherwise indicated.		ated business income (b)	Excluded by	y section 512, 513, or 514 (d)	(e) Related or exempt function income
1 Program	n service revenue: VF.	Business code	Amount	Exclusion code	Amount	(See instructions.)
	<u> </u>					
			· · · · · · · · · · · · · · · · · · ·			
· ·						
	and contracts from government agencies					
•	rship dues and assessments			1		<u> </u>
	on savings and temporary cash investments					
	ds and interest from securities					
	tal income or (loss) from real estate:					<u>-</u>
	t-financed property					
	debt-financed property	·				
	al income or (loss) from personal property.					
	nvestment income					
	(loss) from sales of assets other than inventory					
	ome or (loss) from special events					
	profit or (loss) from sales of inventory					
	evenue: a NÓNE					
b						
с						
d						
е				<u>.</u>		
12 Subtota	l Add columns (b), (d), and (e)					
13 Total. A	add line 12, columns (b), (d), and (e)				13	
	heet in line 13 instructions to verify calc					
Part XVI	-B Relationship of Activitie	s to the A	ccomplishment of E	xempt Pur	poses	
Line No. ▼	Explain below how each activit accomplishment of the foundation					
			· · · · · · · · · · · · · · · · · · ·			
						<u></u>
			····			
	-					
						· · · · · · · · · · · · · · · · · · ·
	-				-	
						
				–		
	· · · · · ·			 		
	<u> </u>					
						
					-	
	<u> </u>				- .	
	 					
						
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Part	XVII	Information R Exempt Organ		ansfers To and Trai	nsactions	and Relationships	With None	chari	table	
ır	n secti rganiz	on 501(c) of the Co	de (other than	engage in any of the fo section 501(c)(3) organ	nizations) or i	n section 527, relating			Yes	No
		•	•	a noncharitable exemp	-			1a(1)		x
								1a(2)		Х
		ransactions:								
				mpt organization						X
				able exempt organization						X
				assets						$\frac{\lambda}{X}$
										X
				nip or fundraising solicita						X
				its, other assets, or paid						Х
				es," complete the follow					fair n	narket
				ices given by the repor						
				gement, show in colum						
(a) Line	no	(b) Amount involved	(c) Name of I	noncharitable exempt organizat		Description of transfers, tran	sactions, and shai	ing arra	ingeme	ents
		N/A	<u> </u>		N/	A				
	\dashv				. , .					
										·····
	\dashv									
	+			·						
				 						
								_		
d	lescrit	ped in section 501(c)	of the Code (o	filiated with, or related other than section 501(c)			inizations [Y	es 🛚	No
D 11	165	" complete the follo (a) Name of organization		(b) Type of organi	zation	(c) Des	cription of relations	ship		
	Llede	consisting of nonuncial deal	are that I have ever	ined this return, including accom	nanvina schadulas	and statements, and to the h	est of my knowledge	a and I	nelief i	ie true
	correc	t, and complete Declaration of	preparer (other than	taxpayer) is based on all information	of which prepare	has any knowledge	est of my knowledg	je alu i	Jener, 11	13 1146,
Sign		1 Jan 5	M_	04/30/2016	TR	USTEE	May the IRS			
Here	Sigi	nature of officer or trustee		Date	Title		with the pr (see instruction	· 1	. T	below
		` 丿								
Paid		Print/Type preparer's na	ıme	Preparer e signature	4//	Date	Check if	PTIN		
	050 -		IPSON	WY	<u>u</u>	4/21/11	self-employed			
Prep					PLLC	/ Fırm's	EIN ►			
Use (Only	Firm's address > 29	9 HERNDON	PARKWAY / SUITE	206					

Form **990-PF** (2015)

703-478-0320

HERNDON,

VA

20170-4467

Schedule B

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

Department of the Treasury Internal Revenue Service

Schedule of Contributors

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

2015

OMB No 1545-0047

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

Name of the organization **Employer identification number** THE JANE ELIZABETH COHEN FOUNDATION 26-6688178 Organization type (check one): Filers of: Section: 501(c)(Form 990 or 990-EZ) (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization 501(c)(3) exempt private foundation Form 990-PF 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. General Rule For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions. **Special Rules** For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3 % support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions

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

For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF.

Schedule B (Form 990, 990-EZ, or 990-PF) (2015)

Name of organization THE JANE ELIZABETH COHEN FOUNDATION

Employer identification number 26-6688178

Part I	Contributors (see instructions). Use duplicate co	pies of Part I if additional space is ne	eeded.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1_	JANE E. COHEN 10132 CRESTBERRY PLACE BETHESDA, MD 20817	\$\$	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroli Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)

Employer identification number 26-6688178

(a) No.		(c)	
from Part I	(b) Description of noncash property given	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
		\$	<u></u>

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Schedule B (Form 990, 990-EZ, or 990-PF) (2015) Name of organization THE JANE ELIZABETH COHEN FOUNDATION **Employer identification number** 26-6688178 Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and

ło. m t l	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held	
		(e) Transfer of gift		
-	Transferee's name, address, and	3 ZIP + 4	Relationship of transferor to transferee	
o.				
1	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held	
_ -				
	\	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
o. 1	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held	
_ _				
		(e) Transfer of gift		
-	Transferee's name, address, an	d ZIP + 4	Relationship of transferor to transferee	
-				
o. n	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held	
_ =				
	(e) Transfer of gift			
			Relationship of transferor to transferee	

ATTACHMENT

- ACCOUNTING FEES PART I FORM 990PE,

REVENUE	AND	EXPENSES	PER BOOKS
			DESCRIPTION

AND	EXPENSES	PER BOOKS	

NET	INCOME
回	NCOM
	ы

RUSSELL, EVANS & THOMPSON

1,475.

ATTACHMENT

- OTHER EXPENSES PART I FORM 990PF, REVENUE AND

CHARITABLE PURPOSES

82.

DESCRIPTION PO BOX RENTAL

EXPENSES PER BOOKS

TOTALS

ATTACHMENT 2 PAGE 19

ATTACHMENT 3

FORM 990PF, PART VIII - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES

AND OTHER ALLOWANCES	°O	.0	.0	°	0.
CONTRIBUTIONS EX TO EMPLOYEE P BENEFIT PLANS	0		.0	.0	0
COMPENSATION	0		.0	.0	0
TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION	TRUSTEE 4.50	ADVISOR TRUSTEE 1.45	ADVISOR TRUSTEE 1.30	ADVISOR TRUSTEE 1.20	GRAND TOTALS
NAME AND ADDRESS	JANE ELIZABETH COHEN 10132 CRESTBERRY PLACE BETHESDA, MD 20817	JANET R. MILLER 914 BARKER HILL ROAD HERNDON, VA 20170	CATHERINE MICK 1003 REMINGTON ROAD WYNNEWOOD, PA 19096	SHEILA RABB WEIDENFELD 3059 Q STREET, NW WASHINGTON, DC 20007	

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FORM 990PE, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR

FOUNDATION STATUS OF RECIPIENT

PURPOSE OF GRANT OR CONTRIBUTION

ATTACHMENT 4

AMOUNT

HISTORIC RITTENHOUSETOWN INC RECIPIENT NAME AND ADDRESS

SPRING BENEFIT GENERAL PURPOSES.

9,280.

PHILADELPHIA, PA 19144 206 LINCOLN DRIVE

NONE

TOTAL CONTRIBUTIONS PAID

9,280.

PAGE 21 ATTACHMENT 4

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