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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

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	For	calen	dar year 2015 or tax year beginning			, and	ending		
	Nar	ne of fou	indation				A Employer	identification number	
			RS FAMILY FOUNDATION, INC						
	Nur	nber and	street (or PO box number if mail is not delivered to street address)		Room/	suite		33-1063519	
			ERNUT LANE		L		B Telephone	number (see instructio	ns)
	-	or town		ZIP co					
	<u>BA</u>	SKING	RIDGE NJ	0792	20			609-203-458	3
	For	eign cou	ntry name Foreign province/state/county	Foreig	n postal	code	C If exempti	on application is pendir	ıg, check here 🕨 🔲
	G	Check	all that apply: 🔲 Initial return 🔲 Initial return o	of a former pu	ıblic ch	narity	D 1. Foreign	n organizations, check h	nere ► [_]
			☐ Final return ☐ Amended ret	นเท			2. Foreign	n organizations meeting	the 85% test,
			Address change Name chang				check f	here and attach comput	ation . ▶ 🛄
	Н	Check	type of organization: Section 501(c)(3) exempt pri	vate foundation	on			oundation status was to	minated under
-		Section	n 4947(a)(1) nonexempt charitable trust X Other taxa	able private fo	undati	on	section 50	7(b)(1)(A), check here	
	1	Fair m	arket value of all assets at J Accounting method.	☐ Cash	X Ad	crual	F 15 4h a 6	dataa a CO	A
		end of	year (from Part II, col (c), Other (specify)					dation is in a 60-month tion 507(b)(1)(B), check	
			5) ▶ \$ 711,000 (Part I, column (d) must be	e on cash bası	s.)				
	P	art I	Analysis of Revenue and Expenses (The total of		$\overline{}$				(d) Disbursements
			amounts in columns (b), (c), and (d) may not necessarily	(a) Revenue expenses po			t investment	(c) Adjusted net	for chantable
			equal the amounts in column (a) (see instructions))	books	1	ır	ncome	income	purposes (cash basis only)
		1	Contributions, gifts, grants, etc , received (attach schedule)	90	0,000				
2016		2	Check ► If the foundation is not required to attach Sch. B	-				<u> </u>	
		3	Interest on savings and temporary cash investments						
罢		4	Dividends and interest from securities	21	,942		21,942		
\approx		5a	Gross rents		,				
င္သ		b	Net rental income or (loss)			·			
0	•	6a	Net gain or (loss) from sale of assets not on line 10						
\geq	חת	b	Gross sales price for all assets on line 6a						
NOV	Revenue	7	Capital gain net income (from Part IV, line 2)						
	Ş	8	Net short-term capital gain		$\neg \neg$				
出	-	9	Income modifications						<u> </u>
Z		10a	Gross sales less returns and allowances						
SCANNED		b	Less. Cost of goods sold						
ठ		С	Gross profit or (loss) (attach schedule)						
(y)		11	Other income (attach schedule)						
		12	Total. Add lines 1 through 11	111	,942		21,942	0	
	s co	13	Compensation of officers, directors, trustees, etc.	l					
	enses	14	Other employee salaries and wages						<u> </u>
	en	15	Pension plans, employee benefits	PECEL	VE.)			<u> </u>
	Ĝ	16a	Legal fees (attach schedule)			- 			<u></u>
		b	Accounting fees (attach schedule)	 			<u></u>		
		C	Other professional fees (attach schedule)	UCT 20	2010	38.0			
		17	Interest	\			<u> </u>		
		18	Taxes (attach schedule) (see instructions)	OGDEN	<u> </u>		\		
		19	Depreciation (attach schedule) and depletion		<u>, </u>	<u></u>	J		
		20	Occupancy	ļ					
		21	Travel, conferences, and meetings	 					
		22	Printing and publications						ļ
		23	Other expenses (attach schedule)	 					
		24	Total operating and administrative expenses.				أم	_	1 ~
		-	Add lines 13 through 23	<u> </u>	0		0	0	
		25	Contributions, gifts, grants paid		1,040				41,040
	-	26	Total expenses and disbursements. Add lines 24 and 25	41	1,040		0	0	41,040
		27	Subtract line 26 from line 12:		_				
		а	Excess of revenue over expenses and disbursements	70	0,902				
		b	Net investment income (if negative, enter -0-)	ļ			21,942		ļ
		С	Adjusted net income (if negative, enter -0-)	J				0	

For Paperwork Reduction Act Notice, see instructions.

Form 990-PF (2015)

9/2-19

p.	art II	Balance Sheets	Attached schedules and amounts in the description column	Beginning of year		of year
			should be for end-of-year amounts only. (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1 ,		-bearing			
	2	- ·	rary cash investments			<u> </u>
	3	Accounts receivable]		1
		Less allowance for	doubtful accounts			
	4	Pledges receivable	>]		
		Less allowance for	doubtful accounts			
	5	Grants receivable				<u> </u>
	6		om officers, directors, trustees, and other]		
			s (attach schedule) (see instructions)			
	7		receivable (attach schedule))		
		Less allowance for dou	ibtful accounts			<u> </u>
ets.	8	Inventories for sale				<u> </u>
ssets	9	Prepaid expenses a	and deferred charges			<u> </u>
Ä	10a	Investments—U S. and	state government obligations (attach schedule)			<u> </u>
	b	Investments—corpo	prate stock (attach schedule)		 	<u> </u>
	С		orate bonds (attach schedule)			<u> </u>
	11	Investments-land, buil	dings, and equipment. basis	j		
		Less: accumulated dep	reciation (attach schedule)			
	12		gage loans			
	13	Investments—other	(attach schedule)	640,098	711,000	711,000
	14	Land, buildings, and eq	uipment, basis			,
		Less accumulated dep	reciation (attach schedule)			
	15	Other assets (descr				
	16	Total assets (to be	completed by all filers—see the			
		instructions Also, s	ee page 1, item I)	640,098	711,000	711,000
	17		ind accrued expenses			
S	18	Grants payable				
Liabilities	19	Deferred revenue				
Ę	20	Loans from officers, d	lirectors, trustees, and other disqualified persons	}]
jat	21	Mortgages and other	er notes payable (attach schedule)]
_	22	Other liabilities (des	scribe >)]
	23	Total liabilities (ad	d lines 17 through 22)	0	(<u> </u>
<i>'</i> 0			follow SFAS 117, check here			
ě		and complete lines	s 24 through 26 and lines 30 and 31.			
alances	24	Unrestricted		640,098	711,000	<u>o</u> [
	25	Temporanly restrict	ed			_]
<u>Б</u>	26	Permanently restric	ted			_}
Net Assets or Fund B		Foundations that of	io not follow SFAS 117, check here 🕒 🔲	}		}
II.	}	and complete lines	s 27 through 31.			1
ō	27	Capital stock, trust	principal, or current funds			_
ets	28	Paid-in or capital su	irplus, or land, bldg., and equipment fund			_
SS	29	Retained earnings, ad	ccumulated income, endowment, or other funds		··,	
Ā	30	Total net assets or	fund balances (see instructions)	640,098	711,000	<u> </u>
ě	31	Total liabilities and	i net assets/fund balances (see	1		
_		instructions)	<u> </u>	640,098	711,000	<u> </u>
	irt III		anges in Net Assets or Fund Balances			
1			alances at beginning of year—Part II, column (a)	, line 30 (must agree	with	1
			d on prior year's return)		1	640,098
2		amount from Part I,			2	70,902
3			led in line 2 (itemize) Unrealized Fidelity	investment market de	preciation 3	<u> </u>
4		ines 1, 2, and 3 .			<u> 4</u>	711,000
5			line 2 (itemize) ► Unrealized Fidelity Invest			
_6	Total	net assets or fund ba	alances at end of year (line 4 minus line 5)—Par	t II, column (b), line 30) 6	711,000

Part	IV Capital Gains an	d Losses for Tax on Investm	ent Income				
		the kind(s) of property sold (e.g., real estate, ouse, or common stock, 200 shs MLC Co.)		(b) How acquired P—Purchase D—Donation		e acquired day, yr)	(d) Date sold (mo , day, yr)
1a							
b							
<u>C</u>							
d							
<u>е</u>		 		L			
	(e) Gross sales price	(f) Depreciation allowed (or allowable)		other basis nse of sale			n or (loss) f) minus (g)
a							
b		 					
<u>c</u>							
<u>d</u>		 					
<u>e</u>	Complete only for results of	howing gain in column (h) and owned	by the foundation	on 12/31/60			
	Complete only for assets si						l (h) gain minus t less than -0-) or
	(i) FM ∨ as of 12/31/69	(j) Adjusted basis as of 12/31/69		s of col (i) (j), if any			rom col (h))
<u>a</u> _		<u> </u>					
<u>b</u>		 					
<u>c</u>		 					
<u>u</u>							
		(If gain :	also enter in Par	t Line 7			
2	Capital gain net income or	r (net capital loss) { If (loss),	enter -0- ın Par		2		0
3	, -	n or (loss) as defined in sections 12			ļ		
	- :	, line 8, column (c) (see instruction		er-0- in }			_
Part		der Section 4940(e) for Redu		J	3		0
If sec	tion 4940(d)(2) applies, leavithe foundation liable for the	vate foundations subject to the sec ve this part blank. section 4942 tax on the distributab qualify under section 4940(e) Do r	ole amount of an	y year in the base			Yes X No
1	Enter the appropriate amo	ount in each column for each year;	see the instruct	ions before makin	g any ei	ntries	
	(a) Base penod years	(b) Adjusted qualifying distributions		(c) f noncharitable-use as		Dis	(d) tribution ratio
Cai	endar year (or tax year beginning in 2014		2,714	630),497	(601 (0)	divided by col (c)) 0 099468
	2013		,839		,335		0.107009
	2012		2,473		,894		0 122498
	2011	85	5,051	592	,970		0.143432
	2010	97	,016	592	,970		0.163610
2	Total of line 1, column (d)					2	0 636017
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 found	dation has been in existence if less	than 5 years			3	0 127203
4	Enter the net value of non	charitable-use assets for 2015 fror	m Part X, line 5			4	700,335
5	Multiply line 4 by line 3 .					5	89,085
6	Enter 1% of net investmen	nt income (1% of Part I, line 27b)				6	219
7	Add lines 5 and 6 .				.	7	89,304
8		ons from Part XII, line 4				в 📗	41,040
	If line 8 is equal to or great	ter than line 7, check the box in Pa	art VI, line 1b, ar	nd complete that p	art usin	g a 1% tax	rate. See the

Part \	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see instruction	ons)			
1a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1.				
	Date of ruling or determination letter: (attach copy of letter if necessary—see instructions)				
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check			439	
	here ► and enter 1% of Part I, line 27b	ł			
C	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of				
	Part I, line 12, col. (b)	ĺ		_	
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	 -		439	
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) 4	ــــ			
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0	├		439	
6	Credits/Payments	1			
a	2015 estimated tax payments and 2014 overpayment credited to 2015	1			
b	Exempt foreign organizations—tax withheld at source	}			
C	Tax paid with application for extension of time to file (Form 8868)	1			
d	· · · · · · · · · · · · · · · · · · ·	1		300	
7	Total divide payments and payments and an additional and additional additional and additional additio	 		300	
8 9	Enter any penalty for underpayment of estimated tax. Check here	+		139	
9 10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	 		133	
11	Enter the amount of line 10 to be. Credited to 2016 estimated tax	 		0	
	/II-A Statements Regarding Activities				
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it		1	Yes	No
	participate or intervene in any political campaign?	. [1a		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see	T			
	Instructions for the definition)?	. (1b		Х
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials	Ī			
	published or distributed by the foundation in connection with the activities.	1	1		
С	Did the foundation file Form 1120-POL for this year?	- 1	1c		Х
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year	Γ			
	(1) On the foundation. > \$ (2) On foundation managers. > \$				i
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed				
	on foundation managers > \$	1			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	. [2		Χ_
	If "Yes," attach a detailed description of the activities.				
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles	į.			İ
	of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	. [3		_X_
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	. [4a		_X_
b	If "Yes," has it filed a tax return on Form 990-T for this year?	·	4b	N/A	
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?		5		X
	If "Yes," attach the statement required by General Instruction T.	ł	ŀ		
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either.	ł	i		
	By language in the governing instrument, or	1			
	By state legislation that effectively amends the governing instrument so that no mandatory directions that	ĺ	_ 1		
	conflict with the state law remain in the governing instrument?		6	_X_	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV	· -	7	_X_	
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)	1			
	NJ				
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General	1		J	
	(or designate) of each state as required by General Instruction G? If "No," attach explanation	. }	8b	_X_	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3)				
	or 4942(j)(5) for calendar year 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)? If				J
40	"Yes," complete Part XIV	}	9_		×
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses		10		х
	named and additioned				

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		Х
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified			
	person had advisory privileges? If "Yes," attach statement (see instructions)	12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? .	13	X	<u> </u>
	Website address summersfamilyfoundation			
14	The books are in care of ► FRANK J SUMMERS, CPA Telephone no. ► 609-203-	4583	-	
	Located at ► 81 BUTTERNUT LANE BASKING RIDGE NJ ZIP+4 ► 07920		·	
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 —Check here and enter the amount of tax-exempt interest received or accrued during the year		. !	▶ ∟
16	At any time during calendar year 2015, did the foundation have an interest in or a signature or other authority		Yes	No
	over a bank, securities, or other financial account in a foreign country?	16	.03	X
	See the instructions for exceptions and filing requirements for FinCEN Form 114 If			
	"Yes," enter the name of the foreign country		i	
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?			
	(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?			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?			
	(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)?			
	(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.)			ŀ
				}
b	If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in	46	N/A	
	Regulations section 53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)? Organizations relying on a current notice regarding disaster assistance check here	1b	IVA	
^	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that			
С	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)).			l
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?		!	ĺ
	If "Yes," list the years 20, 20, 20, 20			ĺ
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	N/A	ļ
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.]
2-	► 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?			
L	If "Yes," did it have excess business holdings in 2015 as a result of (1) any purchase by the foundation or			1
b	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			1
	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	N/A	ŀ
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		Х
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		Х

_Part	VIES Statements Regarding Activities	for Which	<u>h Form 4</u>	1720 N	ilay Be Re	quire	d (contin	ued)			
5a	During the year did the foundation pay or incur any (1) Carry'on propaganda, or otherwise attempt to in			section	4945(e))?	•	Yes	X No			
	(2) Influence the outcome of any specific public ele- directly or indirectly, any voter registration drive?		section 49	•			☐ Yes	X No			•
	(3) Provide a grant to an individual for travel, study,	or other si	ımılar purp	oses?			Yes	X No	1 1	. {	
	(4) Provide a grant to an organization other than a disection 4945(d)(4)(A)? (see instructions)	charitable,	_			ın	☐ Yes	—			
	(5) Provide for any purpose other than religious, che purposes, or for the prevention of cruelty to child			erary, c	or education	al	Yes	X No			•
b	If any answer is "Yes" to 5a(1)-(5), did any of the tr			alıfv un	der the exc	eptions	described	d in	1 1	}	
	Regulations section 53 4945 or in a current notice re								5b	N/A	
	Organizations relying on a current notice regarding	disaster as	ssistance	check l	nere			▶ 🗓			
C	If the answer is "Yes" to question 5a(4), does the fo]	
	because it maintained expenditure responsibility for	-		•			Yes	X No		j	
_	If "Yes," attach the statement required by Regulation									.	
6a	Did the foundation, during the year, receive any fun on a personal benefit contract?	ids, directly				ns	☐ Yes	X No		ĺ	
L	·					ofit oon			6b	Í	χ.
D	Did the foundation, during the year, pay premiums, <i>If "Yes" to 6b, file Form 8870.</i>	directly or	indirectly,	on a p	ersonar beri	ent con	ili act r	•	90		
7.		44 	. L. 4	L - 14 4 -			□ vaa			·	
	At any time during the tax year, was the foundation a par If "Yes," did the foundation receive any proceeds or					a transs	Yes	∐ No	7b	1	X
	VIII Information About Officers, Directo							aid Em		⊥ es.	_^_
	and Contractors	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	,			, , .			p j -	,	
1	List all officers, directors, trustees, foundation n	nanagers a	and their	compe	ensation (se	e instr	ructions).		-		
		(b) Title, and	d average	(c) Co	mpensation	(d)	Contribution	s to	(e) Expe	nse acc	ount,
	(a) Name and address	hours per devoted to			not paid, iter -0-)		yee benefit erred compe		other a	llowand	ces
		PRES						1			
	LE LANE GREENBROOK, NJ 08812		5.00		0						
		TRUSTEE									
81 BU	TTERNUT LANE BASKING RIDGE, NJ 07920		7 00		0						
								ĺ			
	Compensation of five highest-paid employees (c	other than	those inc	luded	on line 1—	see ins	structions	s). If no	ne. ent	 er	
	"NONE."										
	(a) Name and address of each employee paid more than \$50,000	1 '') Title, and av hours per we levoted to po	eek	(c) Compen		(d) Contribution employee plans and compens	benefit deferred	(e) Expe	nse acc	
NONE											
							l				
										,	
					 _						
								1			
							<u></u>				
					1			ł			
Total	number of other employees paid over \$50,000 .						L	•			
- Otal	idiliber of other employees paid over 400,000 .		- · · · ·	· · · ·	· · · ·	<u>:</u>	· · · · ·		99r)_PF	2015)

	and Contractors (continued)	
3 Five h	ighest-paid independent contractors for professional services (see instructions). If none, enter "NON	
	(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
NONE		
	- 	
		<u> </u>
F- 4 - 1 1	of others receiving over \$50,000 for professional services	
otal number	of others receiving over \$50,000 for professional services	
Part IX-A	Summary of Direct Charitable Activities	
List the found	tion's four largest direct chantable activities during the tax year. Include relevant statistical information such as the number of	
	and other beneficiaries served, conferences convened, research papers produced, etc	Expenses
1 N/A		
		1
2		II
		1
3		
4		
		L
Part IX-B	Summary of Program-Related Investments (see instructions)	
	wo largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1 N/A /		
2		
		l
All other progr	am-related investments. See instructions	
3		
T-4-1 A 4-1 1 -	es 1 through 3	
	DC 1 INFOURD ←	ı

Part 2		n foundati	ons,
1	see instructions.) Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
•	purposes.		
а	Average monthly fair market value of securities	1a	711,000
	Average of monthly cash balances	1b	
C	Fair market value of all other assets (see instructions)	1c	
	Total (add lines 1a, b, and c)	1d	711,000
	Reduction claimed for blockage or other factors reported on lines 1a and		,
_	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	
	Subtract line 2 from line 1d	3	711,000
	Cash deemed held for charitable activities Enter 1 ½ % of line 3 (for greater amount, see		
	instructions)	4	10,665
	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	700,335
_	Minimum investment return. Enter 5% of line 5	6	35,017
Part >			
1	Minimum investment return from Part X, line 6	1	35,017
	Tax on investment income for 2015 from Part VI, line 5		
	Income tax for 2015. (This does not include the tax from Part VI) 2b	1 1	
	Add lines 2a and 2b	2c	439
	Distributable amount before adjustments. Subtract line 2c from line 1	3	34,578
	Recoveries of amounts treated as qualifying distributions	4	
	Add lines 3 and 4	5	34,578
	Deduction from distributable amount (see instructions)	6	
	Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII,		
	line 1	7	34,578
		<u> </u>	
Part	Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
а	Expenses, contributions, gifts, etc —total from Part I, column (d), line 26	1a	41,040
b	Program-related investments—total from Part IX-B	1b	
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.		
	Suitability test (prior IRS approval required)	3a	
	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	41,040
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	
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	41,040
=	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whet	her the fou	
	qualifies for the section 4940(e) reduction of tax in those years		

	All Olidistributed ilicollie (see ilistructions			T	
1	Distributable amount for 2015 from Part XI,	(a) Corpus	(b) Years pnor to 2014	(c) 2014	(d) 2015 34,578
_	· · · · · · · · · · · · · · · · · · ·				34,370
2	Undistributed income, if any, as of the end of 2015				
a	Enter amount for 2014 only			0	
b	Total for prior years: 20, 20, 20				
3	Excess distributions carryover, if any, to 2015:				
а	From 2010				
b	From 2011	ł			
С	From 2012 55,172				
d	From 2013				
e	From 2014	!		ļ	
f		248,741			
	-	240,741			
4	Qualifying distributions for 2015 from Part XII,				
	line 4 ▶ \$ 41,040	1			
а	Applied to 2014, but not more than line 2a .				
b	Applied to undistributed income of prior years	Ì			
	(Election required—see instructions)				
C	Treated as distributions out of corpus (Election				
	required—see instructions)				
d	Applied to 2015 distributable amount				34,578
е	Remaining amount distributed out of corpus	6,462			
5	Excess distributions carryover applied to 2015.				
·	(If an amount appears in column (d), the same				
	amount must be shown in column (a))	l			
^					
6	Enter the net total of each column as				
	indicated below:				
а	Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	255,203			
b	Prior years' undistributed income Subtract			İ	
	line 4b from line 2b		0		· · · · · · · · · · · · · · · · · · ·
С	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			1	
а	Subtract line 6c from line 6b. Taxable				
•	amount—see instructions				
_	Undistributed income for 2014 Subtract line				
е					
	4a from line 2a Taxable amount—see			ا	
_	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			j	
	170(b)(1)(F) or 4942(g)(3) (Election may be				
	required—see instructions)			<u> </u>	
8	Excess distributions carryover from 2010 not				
-	applied on line 5 or line 7 (see instructions)	67,775			
9	Excess distributions carryover to 2016.				
3	Subtract lines 7 and 8 from line 6a	187,428			
40		101,426			
10	Analysis of line 9				
а	Excess from 2011	1			
b	Excess from 2012				
С	Excess from 2013				
ď	Excess from 2014				
е	Excess from 2015 6,462				

Part	XIV Private Operating Foundat	ions (see instru	ctions and Part	VII-A, question 9)	 	N/A
	If the foundation has received a ruling of					
	foundation, and the ruling is effective fo		-	· -		
b	Check box to indicate whether the foundation				4942(j)(3) or 4942(J)(5)
2a	Enter the lesser of the adjusted net	Tax year		Prior 3 years		
	income from Part I or the minimum	(a) 2015	(b) 2014	(c) 2013	(d) 2012	(e) Total
	investment return from Part X for each year listed					0
b	85% of line 2a					0
С	Qualifying distributions from Part XII,					
•	line 4 for each year listed		1			l o
d	Amounts included in line 2c not used directly					
_	for active conduct of exempt activities		ļ			l o
е	Qualifying distributions made directly	<u> </u>			 	<u> </u>
•	for active conduct of exempt activities.		ł			
	Subtract line 2d from line 2c					0
3	Complete 3a, b, or c for the			- 		
·	alternative test relied upon.	Ì	1	ł		
а	"Assets" alternative test—enter.					
_	(1) Value of all assets		ĺ	1		О
	(2) Value of assets qualifying under			 		
	section 4942(j)(3)(B)(i)					0
b	"Endowment" alternative test—enter 2/3					
	of minimum investment return shown in]]			0
_	Part X, line 6 for each year listed			 		
С	"Support" alternative test—enter. (1) Total support other than gross	1				
	investment income (interest,					
	dividends, rents, payments on	[f	[[
	securities loans (section		1			o
	512(a)(5)), or royalties) (2) Support from general public			 		
	and 5 or more exempt		1			}
	organizations as provided in					۱ ,
	section 4942(j)(3)(B)(III)		 	 		0
	(3) Largest amount of support from					
	an exempt organization		<u> </u>	 		0
Doub	(4) Gross investment income XV Supplementary Informatio	n (Oomenlede 4h)		a foundation ha	d \$5 000 ar ma	J
Part				ie ioungation na	u \$5,000 or 1110	re iii asseis ai
	any time during the year—		<u>s.) </u>			
1	Information Regarding Foundation M		l mara than 20/ of	the total contribution	ns resolved by the	foundation
а	List any managers of the foundation who before the close of any tax year (but on	ly if they have conf	ributed more than	the total continuito	ins received by the	louridation
	before the close of any tax year (but on	ly if they have com	induted more man	1 \$5,000). (See Secti	on 307 (d)(2))	
						-611
b	List any managers of the foundation wh					on of the
	ownership of a partnership or other enti-	ity) of which the fol	Indation has a 10	% or greater interes	•	
	 	0 1000	0.4.1			
2	Information Regarding Contribution,					
	Check here ► X if the foundation or					
	unsolicited requests for funds. If the founder other conditions, complete items		s, grants, etc. (see	e msuucuons) to mo	iividuais di diganiz	alions
						
а	The name, address, and telephone num	nber or e-mail addr	ress of the person	to whom application	ns should be addre	essed.
						
b	The form in which applications should be	e submitted and in	nformation and ma	iterials they should i	nclude	
С	Any submission deadlines					
	Any restrictions or limitations on awards	s such as hy geog	ranhical areas ch	aritable fields, kinds	of institutions or	other
•	factors	-, sac, as by goog	. aprilioni di ono, oli		a modulono, or c	
	- -					

Part XV Supplementary Information (continued)

3 Grants and Contributions Paid During the Year or Approved for Future Payment

3 Grants and Contributions Paid During		1	re Payment	
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or	Amount
200 Club of Morris County P O Box 1743 Morristown, NJ 07926		501 c 3	Education	100
America Cancer Soc 7 Ridgedale Ave		501c 3	Medical Research	1,250
Morristown NJ 07920 Fordham University		501c 3	Education help	22,500
Rose Hill Campus Bronx, NY 06371			for the poor.	
Memorial Sloan Kettering 1275 York Avenue New York, NY 10012		501c 3	Medical Research	1,000
NJ State Police FAST 85 US 206 Netcong, NJ 87857		501c 3	Education	900
NY Botanical Gardens 2900 Southern Blvd, New York, NY 10458		501c 3	Education	100
Ronald Mcdonald House One Kroc Drive Oak Brook, IL 60523		501c 3	Medical Research	2,500
NJ Golf Foundation Inc 255 Old New Brunswick Road South Piscataway, NJ 08854		501c3	Education	390
Seton Hall University 400 South Orange Avenue South Orange, NJ		501c3	Youth Education	10,000
Watchung PBA 840 Somerset Street Watchung, New Jersey 07069		501c 3	Educational Services	2,300
Total			.	3a 41,040
b Approved for future payment				
Total		<u> </u>		3b

Pai	t XVI-A Analysis of Income-Producing Act	tivities				
Ente	r gross amounts unless otherwise indicated	Unrelated bu	isiness income	Excluded by secti	on 512, 513, or 514	(a)
		(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	(e) Related or exempt function income (See instructions)
1	Program service revenue					
	a					
	b				_ 	
	c					
	d					
	e					<u> </u>
	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	523000	21,942			
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	522299				
9	Net income or (loss) from special events	022200				
10	Gross profit or (loss) from sales of inventory					
11	Other revenue a Fidelity Investsment-Unrealized	523000		 		
"		523000				
	b			 		
	<u> </u>				_	
	d					
40	e Subtotal. Add columns (b), (d), and (e)		04.040			ļ <u></u>
	Subtotal. Add columns (b), (d), and (e)		21,942	<u> </u>	0	0
		_			40	04 040
13	Total. Add line 12, columns (b), (d), and (e)				13	21,942
13 (See	Total. Add line 12, columns (b), (d), and (e) eworksheet in line 13 instructions to verify calculations)			13	21,942
13 (See Par	Total. Add line 12, columns (b), (d), and (e)) ccomplishm	ent of Exempt	Purposes		
13 (See Par Lin	Total. Add line 12, columns (b), (d), and (e) eworksheet in line 13 instructions to verify calculations) ccomplishm	ent of Exempt	: Purposes	importantly to the	
13 (See Par Lin	Total. Add line 12, columns (b), (d), and (e)) ccomplishm	ent of Exempt	: Purposes	importantly to the	
13 (See Par Lin	Total. Add line 12, columns (b), (d), and (e)) ccomplishm	ent of Exempt	: Purposes	importantly to the	
13 (See Par Lin	Total. Add line 12, columns (b), (d), and (e)) ccomplishm	ent of Exempt	: Purposes	importantly to the	
13 (See Par Lin	Total. Add line 12, columns (b), (d), and (e)) ccomplishm	ent of Exempt	: Purposes	importantly to the	
13 (See Par Lin	Total. Add line 12, columns (b), (d), and (e)) ccomplishm	ent of Exempt	: Purposes	importantly to the	
13 (See Par Lin	Total. Add line 12, columns (b), (d), and (e)) ccomplishm	ent of Exempt	: Purposes	importantly to the	
13 (See Par Lin	Total. Add line 12, columns (b), (d), and (e)) ccomplishm	ent of Exempt	: Purposes	importantly to the	
13 (See Par Lin	Total. Add line 12, columns (b), (d), and (e)) ccomplishm	ent of Exempt	: Purposes	importantly to the	
13 (See Par Lin	Total. Add line 12, columns (b), (d), and (e)) ccomplishm	ent of Exempt	: Purposes	importantly to the	
13 (See Par Lin	Total. Add line 12, columns (b), (d), and (e)) ccomplishm	ent of Exempt	: Purposes	importantly to the	
13 (See Par Lin	Total. Add line 12, columns (b), (d), and (e)) ccomplishm	ent of Exempt	: Purposes	importantly to the	
13 (See Par Lin	Total. Add line 12, columns (b), (d), and (e)) ccomplishm	ent of Exempt	: Purposes	importantly to the	
13 (See Par Lin	Total. Add line 12, columns (b), (d), and (e)) ccomplishm	ent of Exempt	: Purposes	importantly to the	
13 (See Par Lin	Total. Add line 12, columns (b), (d), and (e)) ccomplishm	ent of Exempt	: Purposes	importantly to the	
13 (See Par Lin	Total. Add line 12, columns (b), (d), and (e)) ccomplishm	ent of Exempt	: Purposes	importantly to the	
13 (See Par Lin	Total. Add line 12, columns (b), (d), and (e)) ccomplishm	ent of Exempt	: Purposes	importantly to the	
13 (See Par Lin	Total. Add line 12, columns (b), (d), and (e)) ccomplishm	ent of Exempt	: Purposes	importantly to the	
13 (See Par Lin	Total. Add line 12, columns (b), (d), and (e)) ccomplishm	ent of Exempt	: Purposes	importantly to the	
13 (See Par Lin	Total. Add line 12, columns (b), (d), and (e)) ccomplishm	ent of Exempt	: Purposes	importantly to the	
13 (See Par Lin	Total. Add line 12, columns (b), (d), and (e)) ccomplishm	ent of Exempt	: Purposes	importantly to the	
13 (See Par Lin	Total. Add line 12, columns (b), (d), and (e)) ccomplishm	ent of Exempt	: Purposes	importantly to the	
13 (See Par Lin	Total. Add line 12, columns (b), (d), and (e)) ccomplishm	ent of Exempt	: Purposes	importantly to the	
13 (See Par Lin	Total. Add line 12, columns (b), (d), and (e)) ccomplishm	ent of Exempt	: Purposes	importantly to the	
13 (See Par Lin	Total. Add line 12, columns (b), (d), and (e)) ccomplishm	ent of Exempt	: Purposes	importantly to the	

		Exempt Org	anizations_	_								
1	Did th	ne organization di	rectly or indirectly e	ngage in any of the fo	llowing w	ith any other	er organiza	tion describ	ped		Yes	No
				ection 501(c)(3) organ								
		cal organizations?	•		,		•	J	}			
а	-	-		a noncharitable exem	nt organi	zation of						
		ash .	orting loandation to			Lation of			١.	la(1)		х
				• • • •	• • •				—			x
		ther assets					• •		· · ·	la(2)		
b	_	r transactions							i.			
			a noncharitable exer	•					-	b(1)		X
				ble exempt organızatı					-	b(2)		X
	(3) R	ental of facilities,	equipment, or other	assets			•		[1	b(3)		X
	(4) R	eimbursement ar	rangements .						[1	b(4)		X
	(5) L	oans or loan guar	rantees						[1	b(5)		X
	(6) P	erformance of se	rvices or membershi	p or fundraising solici	tations .				[1	b(6)		X
С	Shari	ng of facilities, ed	quipment, mailing list	ts, other assets, or pa	id employ	ees .				1c		_X_
d	If the	answer to any of the	he above is "Yes," con	nplete the following sch	edule. Co	lumn (b) she	ould always	show the fa	ir market			
	value	of the goods, othe	r assets, or services o	given by the reporting fo	undation.	If the found	ation receive	ed less than	fair market			
	value	in any transaction	or sharing arrangeme	ent, show in column (d)	the value	of the good	s, other asse	ets, or service	ces received	l.		
(a) Line	no	(b) Amount involved	(c) Name of none	charitable exempt organizati	on I	(d) Descr	ption of transf	ers. transactio	ns, and shann	а апаг	aemer	
(4, 2		(2)	(6) 113.113	The state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the s				****		<u> </u>		
												
	- +											
					 -							
	-+											
	-+											
												
	_			 _								
												
2a	Is the	foundation direc	tly or indirectly affilia	ited with, or related to	one or n	nore tax-ex	empt organ	nizations				
	desc	ribed in section 50	01(c) of the Code (or	ther than section 501	c)(3)) or i	n section 5	27?		🗆 `	res	\square N	lo
h			following schedule		. , , , ,							
	"	(a) Name of organi		(b) Type of on	ranization			(c) Description	on of relations	hin		
		(a) Hame of organi		(5) () (5)	<u></u>			(0) = 00				
						 -					-	
		·										
	1 7 2		Ab - A D			otomonts and the	the heat of much	noudodae and t-	line it in toric			
	Under penalties of penjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge											
Sign	Ma						May the IRS					
Here	1 Tuy Mun			10/12/2016 TRUSTEE					reparer shown below actions)? X Yes No			
	Signature of officer or trustee			Date Title					<u> </u>			لتك
Daid		Print/Type preparer's	s name	Preparer's signature			Date	Chec	ж П г Р	IN		
Paid						self-employe						
Prepa		Firm's name ► Firm's EIN ►										
Use O	Only Firm's address Phone no											
								n 990)-PF	(2015)		

Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable

Schedule B

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

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

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

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

OMB No 1545-0047

2015

Employer identification number

SUMMERS FAMILY FOUNDATION, INC 33-1063519							
Organization type (check one).							
Filers of:	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						
	on						
	X 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							
	ng Form 990, 990-EZ, or 990-PF that received, dunng the year, contribution roperty) from any one contributor. Complete Parts I and II. See instructions ibutions						
Special Rules							
For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 331/3 % 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.							
contributor, during the	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 contributior, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year							
Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)							

Name of organization
SUMMERS FAMILY FOUNDATION, INC.
Employer identification number
33-1063519

SUMMER	S FAMILY FOUNDATION, INC.		33-1063519
Part I	Contributors (see instructions). Use duplicate cop	oies of Part I if additional space is r	needed.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
. <u>1</u>	GREGORY F SUMMERS 6 NOBLE LANE GREEN BROOK NJ 08812 Foreign State or Province Foreign Country	\$90,000	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	Foreign State or Province Foreign Country.	\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	Foreign State or Province Foreign Country		Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	Foreign State or Province Foreign Country	\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	Foreign State or Province. Foreign Country.	\$	Person Payroll Occupate Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	Foreign State or Province Foreign Country	\$	Person Payroll Noncash (Complete Part II for noncash contributions)

Part II, Line 13 (990-PF) - Investments - Other

			640,098	711,000	711,000
ĺ		Basis of	Book Value	Book Value	FMV
	Asset Description	Valuation	Beg. of Year	End of Year	End of Year
1	FIDELITY INVESTMENTS	FMV	640,098	711,000	711,000

Part I, Line 18 (990-PF) - Taxes

	7 2010 10 (000 11)				
		0	0	0	0
ſ		Revenue			Disbursements
	•	and Expenses	Net Investment	Adjusted	for Charitable
	. Description	per Books	Income	Net Income	Purposes
ſ	1 Tax on investment income	0			

Trustees and Foundation Managers	
Directors,	
ensation of Officers,	
-PF) - Comp	
III, Line 1 (990	
Part VI	

_			
0	Expense Account		
0	Benefits	•	
0	Avg Hrs Per Week Compensation	0	0
	Avg Hrs Per Week	200	7 00
	Title	PRES	TRUSTEE
	Foreign Country		
	Zip Code	08812	07920
	State	2	3
	Cıty	GREENBROOK	BASKING RIDGE
	Street	NOBLE L	81 BUTTERNUT LANE
	Check "X" if Business		
	Name	န္	FRANK J SUMMERS, CPA
1		,	7