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DLN: 93491320037836

OMB No 1545-0052

Department of the Treasury Internal Revenue Service

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

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		ndar year 2015, or tax year beginning 01-0	1-2015	, and ending 1		
So		ganızatıon Charitable Trust			entification numbe	er .
		solomon trustee DLOMON TRUSTEE		46-6905111		`
	ber and s	street (or P O box number if mail is not delivered to street address) id	Room/suite		nber (see instruction	s)
		-		(516) 747-0300		
	or town, nit, NJ (state or province, country, and ZIP or foreign postal code 07901	1	C If exemption	application is pendin	g, check here
G C l	neck all	that apply Initial return Initial return of a f	ormer public charity	D 1. Foreign or	ganizations, check he	ere >
		Final return A mended return			,	
		Address change Name change			ganizations meeting k here and attach co	
1 C h	eck tyr	pe of organization	e foundation	E If private for	ındatıon status was t	erminated
		4947(a)(1) nonexempt charitable trust Other taxab			n 507(b)(1)(A), chec	k nere
			✓ Cash		ition is in a 60-montl	
		om Part II, col (c),	be on cash basıs)	under section	n 507(b)(1)(B), chec	k here
Pa	rt I	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions)	Revenue and expenses per	Net investment (b) income	Adjusted net (c) income	Disbursements for chantable purposes (d) (cash basis only)
	1	Contributions, gifts, grants, etc , received (attach				
		schedule)	100,000			
	2	Check ► ☐ If the foundation is not required to attach				
	_	Sch B				
Reversie	3	Interest on savings and temporary cash investments Dividends and interest from securities				
	4 5a	Gross rents				
	b	Net rental income or (loss)				
	6a	Net gain or (loss) from sale of assets not on line 10				
	ь	Gross sales price for all assets on line 6a				
ã	7	Capital gain net income (from Part IV, line 2)		0		
	8	Net short-term capital gain				
	9	Income modifications				
	10a	Gross sales less returns and allowances				
	ь	Less Cost of goods sold				
	c	Gross profit or (loss) (attach schedule)				
	11	Other income (attach schedule)				
	12	Total.Add lines 1 through 11	100,000	0		
	13	Compensation of officers, directors, trustees, etc	0			
	14	Other employee salaries and wages				
S	15	Pension plans, employee benefits				
ns(16a	Legal fees (attach schedule)				
<u>g</u>	ь	Accounting fees (attach schedule)	1,975	0	0	0
perating and Administrative Expenses	С	Other professional fees (attach schedule)				
₹	17	Interest				
tra	18	Taxes (attach schedule) (see instructions)	85			
Ē	19	Depreciation (attach schedule) and depletion				
E	20	Occupancy				
₹ E	21	Travel, conferences, and meetings				
anc	22	Printing and publications				
ξ.	23	Other expenses (attach schedule)	16,825			
at i	24	Total operating and administrative expenses.				
		Add lines 13 through 23	18,885	0	0	0
Ō	25	Contributions, gifts, grants paid	64,560			64,560
	26	Total expenses and disbursements. Add lines 24 and 25	83,445	0	0	64,560
	27	Subtract line 26 from line 12				
	a	Excess of revenue over expenses and disbursements	16,555			
	ь	Net investment income (If negative, enter -0-)		0		
	С	Adjusted net income(If negative, enter -0-)				

Pa	rt II	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)	Beginning of year		or year
			(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash—non-interest-bearing	3,482	20,03	20,037
	2	Savings and temporary cash investments			
	3	Accounts receivable			
		Less allowance for doubtful accounts ▶			
	4	Pledges receivable ►			
		Less allowance for doubtful accounts ▶			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons (attach schedule) (see instructions)			
	7	Other notes and loans receivable (attach schedule) ▶			
		Less allowance for doubtful accounts ▶			
2	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			
As	10a	Investments—U S and state government obligations (attach schedule)			
	ь	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	Other assets (describe ▶)			
	16	Total assets (to be completed by all filers—see the			
		ınstructions Also, see page 1, item I)	3,482	20,03	20,037
	17	Accounts payable and accrued expenses			
	18	Grants payable			
Liabilities	19	Deferred revenue			
틒	20	Loans from officers, directors, trustees, and other disqualified persons			
<u> </u>	21	Mortgages and other notes payable (attach schedule)			
_	22	O ther liabilities (describe ▶)			
	23	Total liabilities(add lines 17 through 22)			0
		Foundations that follow SFAS 117, check here			
ce s		and complete lines 24 through 26 and lines 30 and 31.			
ä	24	Unrestricted			
Balance	25	Temporarily restricted			7
ב ב	26	Permanently restricted			
Fund		Foundations that do not follow SFAS 117, check here			
5		and complete lines 27 through 31.			
	27	Capital stock, trust principal, or current funds			
se	28	Paid-in or capital surplus, or land, bldg , and equipment fund			
Ä	29	Retained earnings, accumulated income, endowment, or other funds	3,482	20,03	37
Net Assets	30	Total net assets or fund balances(see instructions)	3,482	20,03	37
_	31	Total liabilities and net assets/fund balances(see instructions)	3,482	20,03	37
Pa	rt III	Analysis of Changes in Net Assets or Fund Balances			
1		Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must adi	ree	
		with end-of-year figure reported on prior year's return)			3,482
2		Enter amount from Part I, line 27a			16,555
3		Other increases not included in line 2 (itemize) ▶		3	
4		Add lines 1, 2, and 3			20,037
5		Decreases not included in line 2 (itemize) ▶		5	==,,,,
6		Total net assets or fund balances at end of year (line 4 minus line 5)—Pa			20,037
-			, (-)/ 1111		

		the kınd(s) of property sold (e g , re ehouse, or common stock, 200 shs	•	How acquired P—Purchase (b) D—Donation	Date acq	uired Date sold (d) (mo , day, yr)
1a						
b						
С						
d						
e						
(e)	Gross sales price	Depreciation allower (f) (or allowable)		or other basis expense of sale	(h) (e	Gain or (loss)) plus (f) minus (g)
а						
b						
С						
d						
e						
Com	plete only for assets s	showing gain in column (h) and owne	d by the foundation	on 12/31/69	Gains	(Col (h) gain minus
(i) F	M V as of 12/31/69	Adjusted basis (j) as of 12/31/69		ess of col (ı) col (j), ıf any		but not less than -0-) or sses (from col (h))
а						
b						
С						
d						
е						
3	Net short-term capit	me or (net capital loss) al gain or (loss) as defined in sectio Part I, line 8, column (c) (see instru		in Part I, line 7	2	
Part V	Qualification l	Under Section 4940(e) for R				
f section Vas the fo	4940(d)(2) applies, oundation liable for th	orivate foundations subject to the se leave this part blank le section 4942 tax on the distribute ot qualify under section 4940(e) Do	able amount of any	year in the base p	·	┌ Yes 🗸 No
1 Ente	r the appropriate amo	unt in each column for each year, se	ee instructions befo	re makıng any ent	ries	
	(a) eriod years Calendar tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of nonchar	ıtable-use assets		(d) tribution ratio divided by col (c))
	2014	89,802		3,332		26 951381
	2013	26,216		1,617		16 21274
	2012					
	2011					
	2010				1	
_	•	n (d)		<u> </u>	2	43 164121
		ratio for the 5-year base period—div the foundation has been in existence			3	21 582061
	•	f noncharitable-use assets for 2015	•		4	19,736
		e 3	•	<u> </u>	5	425,944
		stment income (1% of Part I, line 2		<u> </u>	6	423,544
		•	•	<u> </u>		
		thuttons from Dart VII. line 4			7	425,944
	, , ,	ibutions from Part XII, line 4			8	64,560
	If line 8 is equal to oi the Part VI instruction	r greater than line 7, check the box lons	in Part VI, line 1b, a	and complete that	part using a 1	% tax rate See

Pal	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 49	940(e),	or 4948—s ee pa	age 1	L8 of 1	the inst	ructio	ns)	
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			$\left \cdot \right $					
	(attach copy of letter if necessary-see instructions)								
b	b Domestic foundations that meet the section 4940(e) requirements in Part V, check								0
	here ▶ ☐and enter 1% of Part I, line 27b · · · · · · · · · · · · · · · · · · ·								
С	All other domestic foundations enter 2% of line 27b Exempt foreign organization Part I, line 12, col (b)	ations er	nter 4% of						
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable four	ndations	only Others		2				
3	enter -0 -) Add lines 1 and 2			H	3				0
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable four enter -0-)	ndations	only Others		4				
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, e	enter -0-			5				0
6	Credits/Payments								
а	2015 estimated tax payments and 2014 overpayment credited to 2015	6a							
b	Exempt foreign organizations—tax withheld at source	6b							
c	Tax paid with application for extension of time to file (Form 8868)	6 c							
d	Backup withholding erroneously withheld	6d							
7	Total credits and payments Add lines 6a through 6d				7				0
8	Enter any penalty for underpayment of estimated tax. Check here if Form	2220 is	attached		8				
9	$\textbf{Tax}\ \textbf{due.} If the total of lines 5 and 8 is more than line 7, enter \textbf{amount}\ \textbf{owed}\ .$		🕨		9				0
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amoun	nt overpa	aid ►		10				
11	Enter the amount of line 10 to be Credited to 2015 estimated tax		Ref unded P	•	11				
Par	t VII-A Statements Regarding Activities								
1a	During the tax year, did the foundation attempt to influence any national, state	e, or loca	al legislation or	dıd				Yes	No
	ıt participate or intervene in any political campaign?						1 a		No
b	Did it spend more than \$100 during the year (either directly or indirectly) for p					ns			
	for definition)?						1b		No
	If the answer is "Yes" to 1a or 1b , attach a detailed description of the activities	and cop	ies of any mate	rıals					
	published or distributed by the foundation in connection with the activities						_		
	Did the foundation file Form 1120-POL for this year?			•		•	1c		No
d	Enter the amount (if any) of tax on political expenditures (section 4955) impos								
	(1) On the foundation \blacktriangleright \$ (2) On foundation managers								
е	Enter the reimbursement (if any) paid by the foundation during the year for poli	iticai ex	penditure tax ii	mpos	sea				
_	on foundation managers \$	norted to	a tha IDC2						Na
2	Has the foundation engaged in any activities that have not previously been rep	ported to	otheres.	•	•		2		No
•	If "Yes," attach a detailed description of the activities	ta aauar	ning instrumen	+	+10100				
3	Has the foundation made any changes, not previously reported to the IRS, in it of incorporation, or bylaws, or other similar instruments? If "Yes," attach a confi	_	-	•	ticies		3		No
4a	Did the foundation have unrelated business gross income of \$1,000 or more d			<i>J</i> C3	•		4a		No
b	If "Yes," has it filed a tax return on Form 990-T for this year?	_	e year	•			4b		NO
5	Was there a liquidation, termination, dissolution, or substantial contraction du		vear?	•			5		No
•	If "Yes," attach the statement required by General Instruction T	ining the	year	•	•		<u> </u>		110
6	Are the requirements of section 508(e) (relating to sections 4941 through 49	145) sati	isfied either						
•	By language in the governing instrument, or	13,340	ioned entire				\	<u>'</u>	
	By state legislation that effectively amends the governing instrument so th	nat no ma	andatory direct	ions					
	that conflict with the state law remain in the governing instrument?						6	[No
7	Did the foundation have at least \$5,000 in assets at any time during the years	?If "Yes,	" complete Part	II, c	ol (c),	,			
	and Part XV						7	Yes	
8a	Enter the states to which the foundation reports or with which it is registered ($\blacktriangleright NJ$	(see inst	ructions)						
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 99	90-PF to	the Attorney						
	General (or designate) of each state as required by General Instruction G? If		•				8b	Yes	
9	Is the foundation claiming status as a private operating foundation within the r	meaning	of section 494	12(j)	(3)				
	or $4942(j)(5)$ for calendar year 2015 or the taxable year beginning in 2015 (s	ee instr	uctions for Par	t XI\	/)?				
	If "Yes," complete Part XIV						9		No
10	Did any persons become substantial contributors during the tax year? If "Yes,	." attach	a schedule listii	ng th	eir na	mes			
	and addresses						10		No

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			
	meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		No
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had			
	advisory privileges? If "Yes," attach statement (see instructions)	. 12		No
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Yes	
	Website address ▶			
14	The books are in care of ►MARC SOLOMON TRUSTEE Telephone no ►(90	8)988-	1000	
	Located at ▶92 RIVER ROAD summit NJ ZIP+4 ▶07901			
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 over		Yes	No
	a bank, securities, or other financial account in a foreign country?	16		No
	See instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial			
	Accounts (FBAR) If "Yes", enter the name of the foreign country ▶			
Pai	t 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
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 Vo			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
	a disqualified person?	i		ļ
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes Vo			ļ
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes Vo			ļ
	(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"	i	İ	İ
	ıf 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 🔽 No			
b	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)?	1b		
	Organizations relying on a current notice regarding disaster assistance check here			
_	Did blood our debug and a second of the control of	1	ı	ı
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		No
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private			110
	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 ▼ No			
	If "Yes," list the years ▶ 20, 20, 20			
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)	l		
	to allyears listed, answer "No" and attach statement—see instructions)	2b		No
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here 20, 20, 20, 20			
За	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at			
	any time during the year?			
b	If "Yes," did it have excess business holdings in 2015 as a result of (1) any purchase by the foundation	İ	İ	İ
	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			
	ıf the foundation had excess business holdings in 2015)	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	-	No
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its	4.		
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2015?	4b		No

	990-PF (2										Page
Pai						ich Form 4720	May	Be Required (Cont	tinue	d)	
5a	=	e year did the foundati		·							
	(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))? Yes Vol										ļ
	(2) Influence the outcome of any specific public election (see section 4955), or to carry										
	on, directly or indirectly, any voter registration drive?								✓ No		ļ
	(3) Provide a grant to an individual for travel, study, or other similar purposes?								✓ No		
		de a grant to an organi tion 4945(d)(4)(A)? (oed ···· Yes [√ No		
	(5) Provid	de for any purpose othe tional purposes, or for	er thar	n religious, charitab	le, sc	ientific, literary, or		•	_	İİ	j
b	1 100 14 11						•	i i	j		
Regulations section 53 4945 or in a current notice regarding disaster assistance (see instructions)?							5b				
	O rganızat	cions relying on a curre	nt not	ice regarding disas	ter as	ssistance check her	e	◄ ُ	_		
С	If the ans	wer is "Yes" to question	on 5a(4), does the founda	tion c	laım exemption fron	n the				
	tax becau	se it maintained expei	nditure	e responsibility for t	he gr	ant?		· · · · \ Yes	_ No		
		ttach the statement req								i i	ĺ
6a	Did the fo	undation, during the ye	ear, re	ceive any funds, dir	ectly	or indirectly, to pay	prer	miums on			
	a persona	I benefit contract?	٠.					· · · F Yes 5	∠ No		
ь	Did the fo	undation, during the ve	ear, pa	ov premiums, directl	v or i	ndirectly, on a perso	onal	benefit contract?	•	6ь і	No
_		6b, file Form 8870	.a., pe	., premiano, anece	,	manicotry, on a perso	,		•		- 1.00
7a		ne during the tax year,	was t	he foundation a part	v to a	a prohibited tax shel	tert	ransaction? Yes	- No		
	•			·	-	•		the transaction?	•	 76	i I
				•				n Managers, Highly			0406
Pai		and Contractors	ac 01	neers, Director	3, 11	astees, i oanat	100	n Hanagers, mgmy	. uiu		oyces,
1	List all off	icers, directors, truste	es, fo	undation managers	and t	heir compensation (see i	instructions).			
	(a) Nar	me and address	(b)	Title, and average hours per week devoted to position	` `	Compensation(If not paid, enter -0-)		(d) Contributions to mployee benefit plans	1		e account, Ilowances
Marc	S Solomon		True	stee		0	anu	deferred compensation			
	ver road		- 1 0	stee		U					
	mit, NJ 07	901									
Mark	S Rosen		Trus	stee		0					
	iver road mit, NJ 07	901	1 0								
_2	Compensat	ion of five highest-pa	id em	oloyees (other than	thos	e included on line 1-	-see	instructions). If none, e	nter "I	NONE."	
N a r		(a) ress of each employee re than \$50,000	paid	Title, and ave hours per we	ek	(c) Compensatio	n	Contributions to employee benefit plans and deferred (d) compensation			e account, Ilowances
				-							
				-							
	I a complete			+ F 0 0 0 0							
ıota	∎ number of	other employees paid	over	⊅ ⊃υ,υυ υ .					1		

	990-PF (2015)		Page 8
Pa	rt X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instruction	s)	
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,	J.,	
	purposes		
а	A verage monthly fair market value of securities	1a	0
b	A verage of monthly cash balances	1b	20,037
c	Fair market value of all other assets (see instructions)	1c	. 0
d	Total (add lines 1a, b, and c)	1d	20,037
e	Reduction claimed for blockage or other factors reported on lines 1a and		20,037
-	1c (attach detailed explanation)		
2		2	0
	Acquisition indebtedness applicable to line 1 assets	-	20.027
3	Subtract line 2 from line 1d	3	20,037
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see		
	instructions)	4	301
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	19,736
6	Minimum investment return. Enter 5% of line 5	6	987
Pai	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and cer check here and do not complete this part.)	taın fo	oreign organizations
1	Minimum investment return from Part X, line 6	1	987
2 a	Tax on investment income for 2015 from Part VI, line 5		
b	Income tax for 2015 (This does not include the tax from Part VI) 2b	1	
с	Add lines 2a and 2b	2c	0
3	Distributable amount before adjustments Subtract line 2c from line 1	3	987
4	Recoveries of amounts treated as qualifying distributions	4	307
-	Recoveries of amounts deated as quantying distributions	- -	

С	Add lines 2a and 2b	2c	0			
3	Distributable amount before adjustments Subtract line 2c from line 1	3	987			
4	Recoveries of amounts treated as qualifying distributions	4				
5	Add lines 3 and 4	5	987			
6	Deduction from distributable amount (see instructions)	6				
7	Distributable amountas adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1	7	987			
Par	Part XII Oualifying Distributions (see instructions)					

A mounts paid (including administrative expenses) to accomplish charitable, etc., purposes

income Enter 1% of Part I, line 27b (see instructions). . .

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

Amounts set aside for specific charitable projects that satisfy the

b Program-related investments—total from Part IX-B. .

2

3

а

b

5

a Expenses, contributions, gifts, etc —total from Part I, column (d), line 26. . . .

A mounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,

Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment

Adjusted qualifying distributions. Subtract line 5 from line 4.

Suitability test (prior IRS approval required)	3a	
Cash distribution test (attach the required schedule)	3b	
Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	

64,560

0

64,560

64,560

1a

1b

2

5

Р	art XIII Undistributed Income (see inst	ructions)			
		(a)	(b)	(c)	(d)
		Corpus	Years prior to 2014	2014	2015
1	Distributable amount for 2015 from Part XI, line 7				987
2	Undistributed income, if any, as of the end of 2015 $$				
а	Enter amount for 2014 only			0	
b	Total for prior years 2013, 2012, 2011		0		
3	Excess distributions carryover, if any, to 2015				
а	From 2010	_			
b	From 2011	_			
	From 2012	1			
d	From 2013	4			
e	7	115,812			
	Total of lines 3a through e	113,012			
4	Qualifying distributions for 2015 from Part XII, line 4 ▶ \$ 64,560				
-	Applied to 2014, but not more than line 2a			0	
	Applied to undistributed income of prior years				
	(Election required—see instructions)				
c	Treated as distributions out of corpus (Election required—see instructions)				
d	Applied to 2015 distributable amount				987
е	Remaining amount distributed out of corpus	63,573			
5	Excess distributions carryover applied to 2015				
	(If an amount appears in column (d), the				
6	same amount must be shown in column (a)) Enter the net total of each column as				
	indicated below:	170.005			
	Corpus Add lines 3f, 4c, and 4e Subtract line 5	179,385			
b	Prior years' undistributed income Subtract line 4b from line 2b		0		
c	Enter the amount of prior years' undistributed				
	income for which a notice of deficiency has				
	been issued, or on which the section 4942(a) tax has been previously assessed				
d	Subtract line 6c from line 6b Taxable amount				
_	—see instructions		0		
е	Undistributed income for 2014 Subtract line				
	4a from line 2a Taxable amount—see			0	
	Instructions			-	
•	Undistributed income for 2016 Subtract lines 4d and 5 from line 1 This amount must				
	be distributed in 2015				(
7	A mounts 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)				
Q	Excess distributions carryover from 2010 not				
٠	applied on line 5 or line 7 (see instructions)				
9	Excess distributions carryover to 2016.				
	Subtract lines 7 and 8 from line 6a	179,385			
	Analysis of line 9				
	Excess from 2011	4			
	Excess from 2012	,			
	Excess from 2013 26,177 Excess from 2014 89,635	4			
d		4			
<u>e</u>	Excess from 2015 63,573	1			orm 990-PF (2015
				F	MIII 330-PF (2015

	m 990-PF (2015)					Page 10	
	Part XIV Private Operating Founda			1	9)		
la	If the foundation has received a ruling or deter foundation, and the ruling is effective for 2015						
b	Check box to indicate whether the organization is a private operating foundation described in section [4942(j)(3) or [4942(j)(5)						
2a	Enter the lesser of the adjusted net	Tax year		Prior 3 years		(e) Total	
	income from Part I or the minimum investment return from Part X for each	(a) 2015	(b) 2014	(c) 2013	(d) 2012		
b	year listed						
	Qualifying distributions from Part XII, line 4 for each year listed						
d	A mounts included in line 2c not used directly for active conduct of exempt						
е	activities						
3	Subtract line 2d from line 2c Complete 3a, b, or c for the						
	alternative test relied upon						
а	"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						
Pā	rt XV Supplementary Information (e organizatio	n had \$5,000 oı	more in	
_	assets at any time during the	year—see inst	tructions.)				
a	Information Regarding Foundation Managers: List any managers of the foundation who have of before the close of any tax year (but only if the				,	ation	
	NONE						
b	List any managers of the foundation who own 1 ownership of a partnership or other entity) of w		•		large portion of the	:	
	NONE						
2	Information Regarding Contribution, Grant, Gif	ft, Loan, Scholarshi	p, etc., Programs:				
	Check here $\blacktriangleright \overline{\lor}$ if the foundation only makes unsolicited requests for funds. If the foundation other conditions, complete items 2a, b, c, and	n makes gıfts, gran				s under	
а	The name, address, and telephone number or e	email address of th	e person to whom	applications shou	ld be addressed		
b	The form in which applications should be subm	nitted and informati	on and materials t	they should includ	е		
c	Any submission deadlines						
d	Any restrictions or limitations on awards, such factors	h as by geographica	al areas, charitabl	e fields, kinds of i	nstitutions, or other		

Form 990-PF (2015)

Part XV Supplementary Information(continued)

3 Grants and Contributions Paid		roved for Fu	uture Payment	
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or	A mount
Name and address (home or business)	any foundation manager or substantial contributor	recipient	contribution	
a Paid during the year See Additional Data Table	or substantial contributor	recipient		
Total			▶ 3a	64,560
b Approved for future payment		T		1 04,300
Total		·	▶ 3b	

	s amounts unless otherwise indicated	Unrelated bu	siness income	Excluded by section	512, 513, or 514	(e) Related or exempt
1 Progra	m service revenue	(a) Business code	(b) A mount	(c) Exclusion code	(d) A mount	function income (See instructions)
a						
g Fees	and contracts from government agencies					
3 Intere	ership dues and assessments					
4 Divide	nds and interest from securities					
5 Net re	ntal income or (loss) from real estate					
	-financed property					
	debt-financed property					
prope	ntal income or (loss) from personal rty					
8 Gain d	or (loss) from sales of assets other than tory					
	come or (loss) from special events					
LO Gross	profit or (loss) from sales of inventory					
L 1 Other	revenue a					
d						
2 Subtot	tal Add columns (b), (d), and (e)					
	Add line 12 columns (b) (d) and (e).			1	13	
.3 Total.	Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify (1	.3	
3 Total. / (See)	worksheet in line 13 instructions to verify of I-B Relationship of Activities to	calculations) the Accomp	olishment of E	xempt Purpos	es	
3 Total./ (See	worksheet in line 13 instructions to verify o	calculations) The Accomplich income is rep	olishment of E	Exempt Purpos (e) of Part XVI-A co	es ontributed importa	
3 Total./ (See v Part XV Line No.	worksheet in line 13 instructions to verify of Relationship of Activities to Explain below how each activity for whithe accomplishment of the foundation's	calculations) The Accomplich income is rep	olishment of E	Exempt Purpos (e) of Part XVI-A co	es ontributed importa	
3 Total./ (See v Part XV Line No.	worksheet in line 13 instructions to verify of Relationship of Activities to Explain below how each activity for whithe accomplishment of the foundation's	calculations) The Accomplich income is rep	olishment of E	Exempt Purpos (e) of Part XVI-A co	es ontributed importa	
3 Total./ (See v Part XV Line No.	worksheet in line 13 instructions to verify of Relationship of Activities to Explain below how each activity for whithe accomplishment of the foundation's	calculations) The Accomplich income is rep	olishment of E	Exempt Purpos (e) of Part XVI-A co	es ontributed importa	
3 Total./ (See v Part XV Line No.	worksheet in line 13 instructions to verify of Relationship of Activities to Explain below how each activity for whithe accomplishment of the foundation's	calculations) The Accomplich income is rep	olishment of E	Exempt Purpos (e) of Part XVI-A co	es ontributed importa	
3 Total./ (See v Part XV Line No.	worksheet in line 13 instructions to verify of Relationship of Activities to Explain below how each activity for whithe accomplishment of the foundation's	calculations) The Accomplich income is rep	olishment of E	Exempt Purpos (e) of Part XVI-A co	es ontributed importa	
3 Total./ (See v Part XV Line No.	worksheet in line 13 instructions to verify of Relationship of Activities to Explain below how each activity for whithe accomplishment of the foundation's	calculations) The Accomplich income is rep	olishment of E	Exempt Purpos (e) of Part XVI-A co	es ontributed importa	
3 Total./ (See v Part XV Line No.	worksheet in line 13 instructions to verify of Relationship of Activities to Explain below how each activity for whithe accomplishment of the foundation's	calculations) The Accomplich income is rep	olishment of E	Exempt Purpos (e) of Part XVI-A co	es ontributed importa	
3 Total./ (See v Part XV Line No.	worksheet in line 13 instructions to verify of Relationship of Activities to Explain below how each activity for whithe accomplishment of the foundation's	calculations) The Accomplich income is rep	olishment of E	Exempt Purpos (e) of Part XVI-A co	es ontributed importa	
3 Total./ (See v Part XV Line No.	worksheet in line 13 instructions to verify of Relationship of Activities to Explain below how each activity for whithe accomplishment of the foundation's	calculations) The Accomplich income is rep	olishment of E	Exempt Purpos (e) of Part XVI-A co	es ontributed importa	
3 Total./ (See v Part XV Line No.	worksheet in line 13 instructions to verify of Relationship of Activities to Explain below how each activity for whithe accomplishment of the foundation's	calculations) The Accomplich income is rep	olishment of E	Exempt Purpos (e) of Part XVI-A co	es ontributed importa	
3 Total./ (See v Part XV Line No.	worksheet in line 13 instructions to verify of Relationship of Activities to Explain below how each activity for whithe accomplishment of the foundation's	calculations) The Accomplich income is rep	olishment of E	Exempt Purpos (e) of Part XVI-A co	es ontributed importa	
3 Total./ (See v Part XV Line No.	worksheet in line 13 instructions to verify of Relationship of Activities to Explain below how each activity for whithe accomplishment of the foundation's	calculations) The Accomplich income is rep	olishment of E	Exempt Purpos (e) of Part XVI-A co	es ontributed importa	
3 Total./ (See v Part XV Line No.	worksheet in line 13 instructions to verify of Relationship of Activities to Explain below how each activity for whithe accomplishment of the foundation's	calculations) The Accomplich income is rep	olishment of E	Exempt Purpos (e) of Part XVI-A co	es ontributed importa	
3 Total./ (See v Part XV Line No.	worksheet in line 13 instructions to verify of Relationship of Activities to Explain below how each activity for whithe accomplishment of the foundation's	calculations) The Accomplich income is rep	olishment of E	Exempt Purpos (e) of Part XVI-A co	es ontributed importa	
3 Total./ (See v Part XV Line No.	worksheet in line 13 instructions to verify of Relationship of Activities to Explain below how each activity for whithe accomplishment of the foundation's	calculations) The Accomplich income is rep	olishment of E	Exempt Purpos (e) of Part XVI-A co	es ontributed importa	
3 Total./ (See v Part XV Line No.	worksheet in line 13 instructions to verify of Relationship of Activities to Explain below how each activity for whithe accomplishment of the foundation's	calculations) The Accomplich income is rep	olishment of E	Exempt Purpos (e) of Part XVI-A co	es ontributed importa	
3 Total./ (See v Part XV Line No.	worksheet in line 13 instructions to verify of Relationship of Activities to Explain below how each activity for whithe accomplishment of the foundation's	calculations) The Accomplich income is rep	olishment of E	Exempt Purpos (e) of Part XVI-A co	es ontributed importa	
3 Total./ (See v Part XV Line No.	worksheet in line 13 instructions to verify of Relationship of Activities to Explain below how each activity for whithe accomplishment of the foundation's	calculations) The Accomplich income is rep	olishment of E	Exempt Purpos (e) of Part XVI-A co	es ontributed importa	
3 Total./ (See v Part XV Line No.	worksheet in line 13 instructions to verify of Relationship of Activities to Explain below how each activity for whithe accomplishment of the foundation's	calculations) The Accomplich income is rep	olishment of E	Exempt Purpos (e) of Part XVI-A co	es ontributed importa	
.3 Total./ (See v Part XV Line No.	worksheet in line 13 instructions to verify of Relationship of Activities to Explain below how each activity for whithe accomplishment of the foundation's	calculations) The Accomplich income is rep	olishment of E	Exempt Purpos (e) of Part XVI-A co	es ontributed importa	

Form 99	0-PF	(2015)									Pa	ge 13
Part	XVII	Information Ro Noncharitable					sactions and	Relationships	With			
		rganization directly or i 01(c) of the Code (othe	ndirectly e	engage	ın any of t	the following wi					Yes	No
orga	ınızat	ions?										
		from the reporting four										
		1							•	1a(1)		No
		erassets								1a(2)		No
		nsactions				_				41.743		NI -
		s of assets to a noncha			-					1b(1)		No_
		hases of assets from a							•	1b(2)		No_
		al of facilities, equipme								1b(3)		No
		nbursement arrangemer 								1b(4)		No_
		is or loan guarantees.							• •	1b(5)		No
		mance of services or m			_					1b(6)		No
	_	of facilities, equipment, swer to any of the above	-	•						1 c		No
	ny tra	ods, other assets, or se insaction or sharing arr (b) Amount involved	angement,	, showı	n column	_	f the goods, oth		es receive	ed		nts
	+											
des d √ N	cribed Io	undation directly or indidin section 501(c) of the complete the following (a) Name of organization	ne Code (d schedule		an sectioi	· ·	in section 527	· · · · · ·	• • • •	. TYe	es	
Sign	the	ler penalties of perjury, best of my knowledge a rmation of which prepar	ınd belief,	ıt ıs tru	ie, correct				n taxpayeı		sed on	all
Here		*****				2016-11-15		*	return	he prepa		
		Signature of officer or t	rustee			Date	Title			nstr)?	Yes [No
		Print/Type preparer's PAUL DOUGHERTY		Prepa	rer's Sıgn	ature	Date 2016-11-15	Check if self- employed ▶	PTIN P(002003	301	
Paid Prepa Use	rer	Firm's name ▶ EISNERAMPER LLP					•	Firm's EIN ▶	•			
Only		Firm's address ► 111 WOOD AVE SO : 088302700	STE 600 I	SELIN	, NJ			Phone no (732) 243-700	00		

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment					
Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	A mount	
a Paid during the year					
Kidney & Urology 63 west main street suite G Freehold, NJ 07728		PC	To further the entity's charitable purpose	250	
NJAA Charitable Fund Inc 104 interchange plaza suite 201 Monroe Twp, NJ 08831		PC	To further the entity's charitable purpose	300	
Lincoln Center 70 Lincoln center plaza 9th floor new york,NY 10023		PC	To further the entity's charitable purpose	10,000	
Summit Policemen's benevolent association po box 552 summit, NJ 07902		PC	To further the entity's charitable purpose	250	
The Metropolitan Museum of Art 1000 5th ave new york,NY 10028		PC	To further the entity's charitable purpose	1,200	
summit firefighters mutual benevolent association 396 Broad Street Summit,NJ 07901		PC	To further the entity's charitable purpose	100	
JVS 111 prospectst East orange, NJ 07017		PF	To further the entity's charitable purpose	2,000	
breakthrough new york 123 William Street 4th floor new york,NY 10038		PC	To further the entity's charitable purpose	5,000	
american cancer society 250 Williams Street NW Atlanta,GA 30303		PC	To further the entity's charitable purpose	1,000	
collier services foundation 160 conover road wickatunk,NJ 07765		SO I	To further the entity's charitable purpose	800	
chilton medical center foundation 242 west parkway pompton plains,NJ 07444		PC	To further the entity's charitable purpose	2,500	
children's specialized hospital foundation 150 new providence road mountainside, NJ 07092		PC	To further the entity's charitable purpose	250	
JDRF 26 Broadway 14th floor New York, NY 10004		PC	To further the entity's charitable purpose	1,000	
american jewish committee 225 Millburn Ave Milburn, NJ 07041		PC	To further the entity's charitable purpose	1,250	
progeria research foundation PO Box 3453 peabody,MA 01960		PC	To further the entity's charitable purpose	3,000	
Total			▶ 3a	64,560	

Recipient	If recipient is an individual,		Purpose of grant or	A mount
Name and address (home or business)	show any relationship to any foundation manager or substantial contributor	status of recipient	contribution	
a Paıd durıng the year				
holmdel theater company 36 crawsfords corner Road holmdel,NJ 07733		PC	To further the entity's charitable purpose	250
summit volunteer first aid squad inc 1000 summit ave Summit,NJ 07901		PC	To further the entity's charitable purpose	100
UJA - federation of new york 130 E 59th St New York, NY 10022		PC	To further the entity's charitable purpose	5,000
vantage health system PO Box 120 Dumont,NJ 07628		PC	To further the entity's charitable purpose	300
Mount Sinai Medical Center 1468 Madison Ave New York, NY 10029		PC	To further the entity's charitable purpose	5,000
saint barnabas medical center 94 old short hills road livingston, NJ 07039		PC	To further the entity's charitable purpose	6,000
center for food action 192 W Demarest Ave Englewood, NJ 07631		PC	To further the entity's charitable purpose	300
NY service for the handicapped 1140 boradway suite 903 New York, NY 10001		PC	To further the entity's charitable purpose	1,000
Susan G Komen PO Box 650309 Dallas,TX 75265		PC	To further the entity's charitable purpose	300
metropolitan opera guild inc 70 lincoln center plaza new york,NY 10023		PC	To further the entity's charitable purpose	9,030
other fellow first foundation 47 summit avenue summit,NJ 07901		PC	To further the entity's charitable purpose	100
lakeland charities scholarship 485 US 1 350 iselin, NJ 08830		PC	To further the entity's charitable purpose	200
palm beach opera 1800 S Australian Ave 301 West Palm Beach, FL 33409		PC	To further the entity's charitable purpose	5,000
bonei olam 1755 46th St Brooklyn, NY 11204		PC	To further the entity's charitable purpose	180
national multiple sclerosis society 101A First Ave Waltham, MA 02451		PC	To further the entity's charitable purpose	2,500
			▶ 3a	64,560

If recipient is an individual, Foundation Purpose of grant or A mount Recipient show any relationship to contribution status of Name and address (home or any foundation manager

recipient

400

64,560

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

a Paid during the year			
business)	or substantial contributor		

heartbeet lifesharing	PC	To further the entity's
218 town farm road		charitable purpose
hardwick,VT 05843		

Total.

lefile GRAPHIC print - DO NOT PROCESS | As Filed Data -DLN: 93491320037836 Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing. TY 2015 Depreciation Schedule Name: Solomon Organization Charitable Trust

c/o marc s solomon trustee

EIN: 46-6905111

ETNI: 46 6005111

TY 2015 Other Expenses Schedule

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

Name: Solomon Organization Charitable Trust

DLN: 93491320037836

c/o marc s solomon trustee

EIN: 40-0905111					
Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes	
BANK CHARGES	25				
FOUNDATION ADMIN EXPENSES	16,800				

efile GRAPHIC print -	DO NOT PROCESS	As Filed Data -			DLN: 93491320037836		
Schedule B		Schedu	lle of Contributors		OMB No 1545-0047		
(Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service	► Information abo	► Attach to I out Schedule B (Fo	Form 990, 990-EZ, or 990-PF orm 990, 990-EZ, or 990-PF) and its ow irs gov/form990	instructions is at	2015		
Name of the organization (Employer ide	entification number		
c/o marc s solomon tru				46-690511	1		
Organization type (ch	eck one)						
Filers of:	Section:						
Form 990 or 990-EZ		(enter number) or	ganızatıon				
	T 4947(a)(1)	nonexempt charita	able trust not treated as a private f	oundation			
	☐ 527 politica	l organization					
Form 990-PF	<u></u> 501(c)(3) €	exempt private four	ndation				
	☐ 4947(a)(1) nonexempt charitable trust treated as a private foundation						
	┌─ 501(c)(3) t	501(c)(3) taxable private foundation					
1 *	=		hat received, during the year, contr is I and II See instructions for deter	_			
under sections to received from an Part VIII, line 1h,	509(a)(1) and 170(b)(1 ny one contributor, dur or (ii) Form 990-EZ, lind)(A)(vi), that chec ing the year, total o e 1 Complete Parts		EZ), Part II, line 13, 16a 5,000 or (2) 2% of the	, or 16b, and that amount on (ı) Form 990,		
during the year,		ore than \$1,000 e	r (10) filing Form 990 or 990-EZ tha x <i>clusively</i> for religious, charitable, s ete Parts I, II, and III				
during the year, this box is checl purpose Do not	contributions exclusive ked, enter here the total complete any of the pa	ely for religious, ch il contributions that arts unless the Ge	r (10) filing Form 990 or 990-EZ that naritable, etc., purposes, but no suc twere received during the year for neral Rule applies to this organiza more during the year	ch contributions totaled an exclusively religiou tion because it receive	more than \$1,000 lf us, charitable, etc , ed nonexclusively		
990-EZ, or 990-PF), but	ıt m ust answ er "No" d	on Part IV, line 2, of	e and/or the Special Rules does not fits Form 990, or check the box on oes not meet the filing requirements	line H of its			

Name of organization

Solomon Organization Charitable Trust

c/o marc s solomon trustee

Employer identification number 46-6905111

Part I	Contributors (see instructions) Use duplicate copies of Part I if add	litional space is needed	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1			Person 🗸
	Solomon Mgmt LLC 92 river road		Payroll
		\$ 100,000	│ │ Noncash ┌─
	summit, NJ 07901		(Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person
		s	Payroll
			Noncash —
			(Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person
		s	Payroll
			Noncash <u></u>
			(Complete Part II for noncash contributions)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
	-		Person
		s	Payroll
			Noncash
			(Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	-		Person
		s	Payroll
			Noncash
			(Complete Part II for noncash contributions)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
	_		Person
		\$	Payroll
			Noncash
			(Complete Part II for noncash contributions)

lame of organizati		Employer identification number		
o marc s solomoi	tion Charitable Trust n trustee	46-6905111		
Part II	Noncash Property (see instructions) Use duplicate copies of Part II if additional space is needed			
(a) No.from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received	
(a)	(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	
		s		
(a) No.from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received	
		<u> </u>		
(a) No.from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received	
		s		

Schedule B (Form 990, 9	990-EZ, or 990-PF) (2015)		Page 4
Name of organization		Emplo	oyer identification number
Solomon Organization (c/o marc s solomon tru		46-6	905111
Part III Exclusively total more line entry. of \$1,000 or	religious, charitable, etc., contribut than \$1,000 for the year from any or	e contributor. Complete columns I, enter the total of <i>exclusively</i> rel nation once. See instructions.) ►	s (a) through (e) and the following igious, charitable, etc., contributions
(a) No.from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	Transferee's name, address, and	(e) Transfer of gift ZIP 4 Rela	tionship of transferor to transferee
(a) No.from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
. =			
-	Transferee's name, address, and	(e) Transfer of gift ZIP 4 Rela	tionship of transferor to transferee
(a)	(h) Dumaga of wife	/allog of mit	(d) Decoription of how wift to hold
No.from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
· _		() T = 6 = 6	
_	Transferee's name, address, and	(e) Transfer of gift ZIP 4 Rela	tionship of transferor to transferee
- -			
(a) No.from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
_	Transferee's name, address, and	(e) Transfer of gift ZIP 4 Rela	tionship of transferor to transferee
			Schedule B (Form 990, 990-EZ, or 990-PF) (20