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Form 990-PF

Return of Private Foundation

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

OMB No 1545-0052

Open to Public Inspection

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

For calendar year 2015 or tax year beginning 08/01/15, and ending 07/31/16 A Employer Identification number Name of foundation SPECTRUM FOUNDATION 27-2576527 Number and street (or P O box number if mail is not delivered to street address) Telephone number (see instructions) Room/suite 69 HILLSIDE AVE. 248-641-5020 City or town, state or province, country, and ZIP or foreign postal code If exemption application is pending, check here **CHATHAM** 07928 NJ Initial return of a former public charity G Check all that apply Initial return 1 Foreign organizations, check here Final return Amended return 2 Foreign organizations meeting the 85% test, check here and attach computation Address change Name change Check type of organization: X Section 501(c)(3) exempt private foundation If private foundation status was terminated under section 507(b)(1)(A), check here Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation Fair market value of all assets at J Accounting method X Cash Accrual If the foundation is in a 60-month termination under section 507(b)(1)(B), check here end of year (from Part II, col (c), Other (specify) 209,150 line 16) ▶ \$ (Part I, column (d) must be on cash basis) (d) Disbursements Analysis of Revenue and Expenses (The total of Part I (a) Revenue and (c) Adjusted net (b) Net investment for chartable amounts in columns (b), (c), and (d) may not necessarily equal expenses per income purposes the amounts in column (a) (see instructions)) books (cash basis only) Contributions, gifts, grants, etc., received (attach schedule) Check ▶ X if the foundation is **not** required to attach Sch. B 2 3 Interest on savings and temporary cash investments 450 450 4 Dividends and interest from securities 5a Gross rents SCANNED APR 0 \$ 2017 Net rental income or (loss) h Net gain or (loss) from sale of assets not on line 10 b Gross sales price for all assets on line 6a Capital gain net income (from Part IV, line 2) Net short-term capital gain Income modifications 10a Gross sales less returns and allowances Less Cost of goods sold Gross profit or (loss) (attach schedule) STMT 1 63 11 Other income (attach schedule) 513 450 0 12 Total. Add lines 1 through 11 13 Compensation of officers, directors, trustees, etc. Operating and Administrative Expenses 14 Other employee salaries and wages 15 Pension plans, employee penelits Legal fees (attach schedule) SI Accounting fees (attach schedule) STMT 38 16a STMT 2,250 b Other professional feesyattach schedule) C 17 Interest 10,000 Taxes (attach schedule) (see) instructions); Depreciation (attach schedule) and depletio 19 20 Occupancy 21, Travel, conferences, and meetings 22 Printing and publications 23 Other expenses (att sch) 24 Total operating and administrative expenses. 12,288 0 Add lines 13 through 23 5,500 25 Contributions, gifts, grants paid 5,500 0 26 Total expenses and disbursements. Add lines 24 and 25 17,788 27 Subtract line 26 from line 12 Excess of revenue over expenses and disbursements -17,275450 Net investment income (if negative, enter -0-) 0 Adjusted net income (if negative, enter -0-)

For Paperwork Reduction Act Notice, see instructions.

Form 990-PF (2015)

Part I	Balance Sheets Attached schedules and amounts in the description column	Beginning of year	End o	year
	should be for end-of-year amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
`1	Cash – non-interest-bearing	210,087	192,812	192,812
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		1	
	instructions)			
7	Other notes and loans receivable (att. schedule)			
	Less allowance for doubtful accounts ▶ 0			
<i>γ</i> 8	Inventories for sale or use			
Assets 9 10a	Prepaid expenses and deferred charges			
8 10a	Investments – U S and state government obligations (attach schedule)			
b	Investments – corporate stock (attach schedule) SEE STMT 5	9,786	9,786	16,338
С	Investments – corporate bonds (attach schedule)			
11	Investments – land, buildings, and equipment basis			
	Less accumulated depreciation (attach sch.)			
12	Investments – mortgage loans			
13	Investments – other (attach schedule)			-
14	Land, buildings, and equipment basis			
	Less accumulated depreciation (attach sch.)			
15	Other assets (describe ▶)			
16	Total assets (to be completed by all filers – see the			
	instructions Also, see page 1, item I)	219,873	202,598	209,150
17	Accounts payable and accrued expenses			
18	Grants payable			
<u>8</u> 19	Deferred revenue			
19 20 21 20 21 20 20 20 20 20 20 20 20 20 20 20 20 20	Loans from officers, directors, trustees, and other disqualified persons			
<u>e</u> 21	Mortgages and other notes payable (attach schedule)			
⊐ ₂₂	Other habilities (describe ▶)			
23	Total liabilities (add lines 17 through 22)	0	0	
	Foundations that follow SFAS 117, check here			
နွ	and complete lines 24 through 26 and lines 30 and 31.	ļ l		
	Unrestricted			
<u>R</u> 25	Temporarily restricted			
26	Permanently restricted			
Net Assets or Fund Balanc	Foundations that do not follow SFAS 117, check here			
Ĭ	and complete lines 27 through 31.			
<u>0</u> 27	Capital stock, trust principal, or current funds	19,786	19,786	
설 28	Paid-in or capital surplus, or land, bldg, and equipment fund			
S 29	Retained earnings, accumulated income, endowment, or other funds	200,087	182,812	
ਜ਼ੂ 30	Total net assets or fund balances (see instructions)	219,873	202,598	
Ž 31	Total liabilities and net assets/fund balances (see	:		
_L	instructions)	219,873	202,598	
Part I	Analysis of Changes in Net Assets or Fund Balances	<u> </u>		<u> </u>
1 Total	net assets or fund balances at beginning of year - Part II, column (a), line 30 (must a	agree with		
end-o	f-year figure reported on prior year's return)		1	219,873
2 Enter	amount from Part I, line 27a		2	-17,275
3 Other	increases not included in line 2 (itemize) ▶		3	
4 Add li	nes 1, 2, and 3		4	202,598
	eases not included in line 2 (itemize)		5	
6 Total	net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b),	line 30	6	202,598

Part IV. Capital Gains a	nd Losses for Tax on Investme	nt Income				
	cribe the kind(s) of property sold (e.g., real estate, arehouse, or common stock, 200 shs MLC Co.)		(b) How acquired P – Purchase D – Donation	(c) Date a		(d) Date sold (mo , day, yr)
1a N/A						
<u>b</u>						
<u>c</u>						
<u>d</u>						
е	(9 Doompostus allowed	(a) Cont	or other basis		(h) Gaın	an (face)
(e) Gross sales price	(f) Deprecation allowed (or allowable)	10/	pense of sale		(e) plus (f)	
_a						
<u>b</u>						
		· · · · ·	· · · · · · · · · · · · · · · · · · ·	, , , , , , , , , , , , , , , , , , , ,		
e		· · · · · · · · · · · · · · · · · · ·	 		-	
	gain in column (h) and owned by the four	ndation on 12/31/69		//\	Gams (Col	(h) gain minus
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69					less than -0-) or
a						
_ b	· · · · · · · · · · · · · · · · · · ·					
С						
_d						
2 Capital gain net income or (net ca	pital loss) If gain, also enter in l	•		2		
3 Net short-term capital gain or (los-	s) as defined in sections 1222(5) and (6)	arti, iiile /				
If gain, also enter in Part I, line 8,	column (c) (see instructions) If (loss), ent	er -0- in	i	3		
Part V Qualification Ur	nder Section 4940(e) for Reduc	ed Tax on Net	Investment Incor			
	foundations subject to the section 4940(a)					
		, 127, 51, 175, 117, 55, 17,	· · · · · · · · · · · · · · · · · · ·			
If section 4940(d)(2) applies, leave this	s part blank					
	on 4942 tax on the distributable amount o		se period?			Yes X No
	y under section 4940(e) Do not complete					
	ach column for each year, see the instruc	tions before making	any entries	 		
(a) Base penod years	(b) Adjusted qualifying distributions	Net val	(c) ue of nonchantable-use asset			(d) nbution ratio
Calendar year (or tax year beginning in) 2014		,116	188,		(col (b) d	0.005913
2013		,157	22,			0.051707
2012		,011	23,			0.043521
2011		675	20,			0.033241
2010			13,			
2 Total of line 1, column (d)				2	<u> </u>	0.134382
3 Average distribution ratio for the 5	-year base period – divide the total on line	e 2 by 5, or by the			ł	
number of years the foundation ha	is been in existence if less than 5 years			3	 	0.033596
4 Enter the net value of noncharitab	le-use assets for 2015 from Part X, line 5			4		221,914
5 Multiply line 4 by line 3				_ 5	ļ	7,455
					1	
6 Enter 1% of net investment incom	e (1% of Part I, line 27b)			6	↓	5
7 Add lines 5 and 6				7		7,460
O makes markets to the transfer	Ded VIII for a	•				E E00
8 Enter qualifying distributions from If line 8 is equal to or greater than	Part XII, line 4 line 7, check the box in Part VI, line 1b, a	nd complete that pa	art using a 1% tax rate	See the		5,500
Part VI instructions						

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Pa	Excise Tax Based on Investment Income (Section 4940(a), 4940	(b), 4940(e),	or 494	48 – se	e instructi	ons)	_				
1a	Exempt operating foundations described in section 4940(d)(2), check here ▶	and er	nter "N/	/A" on I	ne 1					*************	
•	Date of ruling or determination letter: (attach copy of le	etter if neces	sary—	-see in	structions)		1			
b	Domestic foundations that meet the section 4940(e) requirements in Part V, che	eck				•	1				9
	here ▶ ☐ and enter 1% of Part I, line 27b										
С	All other domestic foundations enter 2% of line 27b Exempt foreign organization	ns enter 4%	of			لـ		1		,	
	Part I, line 12, col (b).										
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundation	ons only Oth	ers en	ter -0-)			2				(
3	Add lines 1 and 2						3				9
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundation	ions only Oth	ners en	nter -0-)			4	<u> </u>			
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, or	enter -0-					5				ç
6	Credits/Payments							1			
а	2015 estimated tax payments and 2014 overpayment credited to 2015	<u>_</u>	6a		6,	061	1	1			
b	Exempt foreign organizations – tax withheld at source	<u>_</u>	6b				1	1			
С	Tax paid with application for extension of time to file (Form 8868)	<u>_</u>	6c				1	1 `			
d	Backup withholding erroneously withheld		6d					1			
7	Total credits and payments Add lines 6a through 6d						7	ļ		6,	061
8	Enter any penalty for underpayment of estimated tax. Check here if Form	n 2220 is atta	ached				8	ļ			
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed						9	 			
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount	•					10	 		6,	052
11	Enter the amount of line 10 to be Credited to 2016 estimated tax	6,	052		Refunded	<u> </u>	11	<u></u>			
Pa	rt VII-A Statements Regarding Activities								· · · · · ·		
1a	During the tax year, did the foundation attempt to influence any national, state, or	or local legisla	ation oi	r dıd ıt					<u></u>	Yes	No
	participate or intervene in any political campaign?								1a	ļ	X
b	Did it spend more than \$100 during the year (either directly or indirectly) for polit	tical purpose	s (see								
	Instructions for the definition)?								1b		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities a	and copies of	any m	aterials							I
	published or distributed by the foundation in connection with the activities										
C	Did the foundation file Form 1120-POL for this year?								1c		X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed										Ī
_	(1) On the foundation \$ (2) On foundation		_						}		l
е	Enter the reimbursement (if any) paid by the foundation during the year for political formulation managers.	icai expenditt	ire tax	impose	90						Ī
2	on foundation managers \$ Has the foundation engaged in any activities that have not previously been repo	artad to the IE	200						2	1	х
2	If "Yes," attach a detailed description of the activities	orted to the in	(3)								-
3	Has the foundation made any changes, not previously reported to the IRS, in its	: aovernina in	etrume	ant arti	cles of						
5	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conform	_			cies oi				3		x
4a	Did the foundation have unrelated business gross income of \$1,000 or more dui			inges					4a		X
b	If "Yes," has it filed a tax return on Form 990-T for this year?	ining the year						N/A	4b		<u> </u>
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										<u> </u>
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945)	satisfied eith	ner								
	By language in the governing instrument, or									,	
	By state legislation that effectively amends the governing instrument so that n	no mandatory	direction	ons tha	t						
	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	f "Yes," comp	lete Pa	art II, co	i (c), and F	art X	V		7	X	
8a	Enter the states to which the foundation reports or with which it is registered (se	-		*	. ,						
	WI										
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990	0-PF to the At	ttomey	Gener	al						
	(or designate) of each state as required by General Instruction G? If "No," attack		_						8b	X	<u> </u>
9	Is the foundation claiming status as a private operating foundation within the me	eaning of sec	tion 49	42(j)(3)	or						
	4942(j)(5) for calendar year 2015 or the taxable year beginning in 2015 (see instance)	tructions for	Part XI	۷)۶ If "	Yes,"						
	complete Part XIV								9		X
10	Did any persons become substantial contributors during the tax year? If "Yes," a	attach a sche	dule lis	sting the	ыг						
	names and addresses								10		X

Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of

Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? 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?

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)

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X

X

3b

4a

N/A

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Pa	art VII-B		garding Activities for Which For	rm 4720 May Be Re	equired (contin	iued)		·····
5a	During the ye	ar did the foundation	pay or incur any amount to					
•			wise attempt to influence legislation (section		<u> </u>	es 🗓 No		
	(2) Influence	the outcome of any s	specific public election (see section 4955), o	or to carry on,				
	directly o	r indirectly, any voter	registration drive?		<u> </u>	es X No		
	(3) Provide a	grant to an individua	l for travel, study, or other similar purposes	?	Y	es 🗓 No		
	(4) Provide a	grant to an organiza	tion other than a charitable, etc., organization	on described in				1
	section 4	945(d)(4)(A)? (see in	structions)		∐ Y	es 🏻 No		
	(5) Provide fo	or any purpose other	than religious, charitable, scientific, literary,	, or educational		-		
	purposes	, or for the prevention	of cruelty to children or animals?		∐ Y	es X No		
b	If any answer	is "Yes" to 5a(1)-(5)	, did any of the transactions fail to qualify ur	nder the exceptions desc	enbed in	4		
	Regulations s	section 53 4945 or in	a current notice regarding disaster assistan	ce (see instructions)?		N/A	5b	
	Organizations	s relying on a current	notice regarding disaster assistance check	here		▶ 📙		
C	If the answer	is "Yes" to question 5	6a(4), does the foundation claim exemption	from the tax	. =			
	because it ma	aintained expenditure	responsibility for the grant?		N/A 📗 Y	es No		
	If "Yes," attac	h the statement requ	ired by Regulations section 53 4945–5(d)					
6a	Did the found	ation, during the year	, receive any funds, directly or indirectly, to	pay premiums		(1
	on a persona	l benefit contract?			Y	es 🗓 No		•
b	Did the found	ation, during the year	, pay premiums, directly or indirectly, on a p	personal benefit contract	?		6b	X
	If "Yes" to 6b,	file Form 8870						
7a	At any time di	uring the tax year, wa	s the foundation a party to a prohibited tax	shelter transaction?	Y	es X No		
<u>b</u>			any proceeds or have any net income attril			N/A	7b	
P	art VIII I	nformation Abo	ut Officers, Directors, Trustees,	Foundation Mana	gers, Highly P	Paid Employed	es,	
		and Contractors						
1 1	List all officers	s, directors, trustee	s, foundation managers and their comp	ensation (see instruction	ons).			
				(b) Title, and average	(c) Compensation	(d) Contributions to employee benefit	(e) Evo	ense account,
		(a) Na	me and address	hours per week devoted to position	(If not paid, enter -0-)	plans and deferred		allowances
				advoted to position	, , , , , , , , , , , , , , , , , , ,	compensation		
SI	ARAH E. LAVO	DIE	CHATHAM	TRUSTEE				
69	HILLSIDE A	AVE.	NJ 07928	0.00	0	0		0
SZ	ARAH J. GEPI	HART	BAL HARBOUR	TRUST PROTEC				
96	01 COLLINS	AVE UNIT #1510	FL 33154	0.00	0	0		0
					L	L <u></u>	<u> </u>	
2	•	on of five highest-p	aid employees (other than those include	ed on line 1 – see instr	uctions). It none,	enter		
	"NONE."					/ #: Co-dubdu 4-		
				(b) Title, and average		(d) Contributions to employee benefit	(e) Exp	ense account,
	(a) Na	ame and address of each en	nployee paid more than \$50,000 _	hours per week devoted to position	(c) Compensation	plans and deferred		allowances
						compensation	-	
N	ONE				1			
			<u></u>	 		·····		
							 	
					-			
						İ		
						 		
		·			<u> </u>	L	<u></u>	1 0

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Part VIII	Information About Officers, Directors, Trustees, Fou	ndation Managers, Highly Paid En	nployees,
3: Five high	and Contractors (continued) est-paid independent contractors for professional services (see ins	tructions) If none enter "NONE"	
5 Pive mgn	(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE			
	A CONTRACTOR OF THE CONTRACTOR		
···			
···········			
Total number of	others receiving over \$50,000 for professional services		>
Part IX-A	Summary of Direct Charitable Activities		
	s four largest direct chantable activities during the tax year. Include relevant statistical information other beneficianes served, conferences convened, research papers produced, etc.	such as the number of	Expenses
1 N/A			
2			
			
3			
	·		
4			
Part IX-B	Summary of Program-Related Investments (see ins	tructions)	
	rgest program-related investments made by the foundation during the tax year on lines 1 and 2		Amount
1 N/A			
2			
All other program-re	elated investments. See instructions		
3			
Total Add lance	1 through 2		

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

Par	rt XIII Undistributed Income	e (see instructions)				
			(a)	(b)	(c)	(d)
1 '	Distributable amount for 2015 from Part 2	KI,	Corpus	Years prior to 2014	2014	2015
	line 7	-				11,087
	Undistributed income, if any, as of the en	d of 2015			5 405	
	Enter amount for 2014 only	-			5,405	
	Total for prior years 20, 20	,				
	Excess distributions carryover, if any, to	2015			#	
а	From 2010					
-	From 2011	_			I	
_	From 2012					
-	From 2013					
_	From 2014	L			I	
	Total of lines 3a through e	·				
	Qualifying distributions for 2015 from Par	t XII,				•
	line 4 ▶ \$ 5,500				5 405	
	Applied to 2014, but not more than line 2	į t			5,405	· · · · · · · · · · · · · · · · · · ·
	Applied to undistributed income of prior y	ears				
	(Election required – see instructions)	<u>.</u>				······································
	Treated as distributions out of corpus (El	ection			· ·	
	required – see instructions)	}-				
	Applied to 2015 distributable amount	-				95
	Remaining amount distributed out of corp					·
	Excess distributions carryover applied to	€				
	(If an amount appears in column (d), the	same				
	amount must be shown in column (a))				1	
6	Enter the net total of each column as		:		•	
	indicated below:				1	
	Corpus Add lines 3f, 4c, and 4e Subtrac	ľ				·
þ	Prior years' undistributed income Subtra	ct			1	
	line 4b from line 2b	}				······································
	Enter the amount of prior years' undistrib	t				
	income for which a notice of deficiency h	1			1	
	been issued, or on which the section 494	2(a)			1	
	tax has been previously assessed	}	······			
d	Subtract line 6c from line 6b Taxable					
	amount – see instructions					
е	Undistributed income for 2014 Subtract	line				
	4a from line 2a Taxable amount – see					
_	Instructions	, .				
f	Undistributed income for 2015 Subtract	i i				
	4d and 5 from line 1 This amount must be	DE		1		10,992
_	distributed in 2016					10,332
	Amounts treated as distributions out of c	· i				
	to satisfy requirements imposed by section 730(b)(1)(E) or 4042(c)(2) (Flortion may)				Ī	
	170(b)(1)(F) or 4942(g)(3) (Election may	De				
	required—see instructions)	\ not				
8	Excess distributions carryover from 2010	i		<u> </u>		
	applied on line 5 or line 7 (see instruction					
9	Excess distributions carryover to 201	U .				
40	Subtract lines 7 and 8 from line 6a	ŀ				······································
10	Analysis of line 9			1		
a	Excess from 2011			!	!	
b	Excess from 2012			1	!	
C	Excess from 2013			1		
d	Excess from 2014			1	1	
е	Excess from 2015			<u> </u>		

orm	990-PF (2015) SPECTRUM FOU	NDATION		27-2576	527	Page 10
Pa	rt XIV Private Operating Fou	ndations (see in:	structions and Pa	rt VII-A, question 9)	
1a	If the foundation has received a ruling or d	etermination letter tha	t it is a private operati	ng		
	foundation, and the ruling is effective for 2	015, enter the date of	the ruling			
p,	Check box to indicate whether the foundat	ion is a private operati	ing foundation describ	ed in section	1942(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	(a) 2015	(b) 2014	(c) 2013	(d) 2012	(e) Total
	investment return from Part X for					
	each year listed				<u> </u>	
b	85% of line 2a					
C	Qualifying distributions from Part XII,					
	line 4 for each year listed				<u> </u>	
d	Amounts included in line 2c not used directly					
	for active conduct of exempt activities					
е	Qualifying distributions made directly					
	for active conduct of exempt activities.					
	Subtract line 2d from line 2c					
3	Complete 3a, b, or c for the					
	alternative test relied upon					
а	"Assets" alternative test – enter					
	(1) Value of all assets					
	(2) Value of assets qualifying under					
	section 4942(j)(3)(B)(i)			1		
b	"Endowment" alternative test – enter 2/3					
	of minimum investment return shown in					
	Part X, line 6 for each year listed					
С	"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					
Pa	art XV Supplementary Inform	•	•	the foundation h	ad \$5,000 or m	ore in assets at
	any time during the ye		tions.)			
1	Information Regarding Foundation Mar	-				
а	List any managers of the foundation who h				the foundation	
	before the close of any tax year (but only if SARAH J. GEPHART	they have contributed	I more than \$5,000) (See section 507(d)(2).)		
b	List any managers of the foundation who o				ortion of the	
	ownership of a partnership or other entity)	of which the foundatio	n has a 10% or great	er interest		
	N/A			 ,		
2	Information Regarding Contribution, G					
	Check here ► X if the foundation only			=		
	unsolicited requests for funds If the founda		nts, etc (see instruction	ons) to individuals or org	janizations under	
—	other conditions, complete items 2a, b, c, a					· · · · · · · · · · · · · · · · · · ·
а	The name, address, and telephone numbe N/A	r or e-mail address of	the person to whom	applications should be a	ddressed	
		· · · · · · · · · · · · · · · · · · ·				
b	The form in which applications should be s $\mathbf{N/A}$	ubmitted and informat	tion and materials the	y should include		
С	Any submission deadlines		-			
	N/A					
d	Any restrictions or limitations on awards, se	uch as by geographica	al areas, charitable fie	ids, kinds of institutions	, or other	
	factors N/A					
	IX / A					

Part XV Supplementary Information (co	ontinued)			
3 Grants and Contributions Paid During the	Year or Approved for F	uture Payment		
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	reapient		
a Paid during the year COMMUNITY FOODBANK OF NEW 3 31 EVANS TERMINAL HILLSIDE NJ 07205	ERSEY	501 (C) (3) QUALIFIED	CHARITY	5,50
			l .	
		,		
			·	
			}	
		1		
Total		<u> </u>	▶ 3a	5,50
b Approved for future payment				-
N/A			j	
			:	
Total		<u> </u>	▶ 3b	

Part XVI-P	Analysis of Income-Producing A	ctivities				···
Enter gross am	ounts unless otherwise indicated	Unrelate (a) Business code	d business income (b) Amount	(c) Exclusion code	(d) Amount	(e) Related or exempt function income
1 Program se	rvice revenue					(See instructions)
a						
		_				
С		_				
	nd contracts from government agencies	_				
_	dues and assessments					
•	savings and temporary cash investments					
	nd interest from securities		· · · · · · · · · · · · · · · · · · ·	14	450	
	ncome or (loss) from real estate					
	nanced property		······································			
				1		
	ot-financed property			 		
	ncome or (loss) from personal property			 		
7 Other inves	•	<u> </u>				
-	s) from sales of assets other than inventory	- 			 }-	
	or (loss) from special events				· 	
	or (loss) from sales of inventory	<u> </u>		 -		
	ue a	_				
b		_	· · · · · · · · · · · · · · · · · · ·			63
c		_				
d						
e						
12 Subtotal Ad	id columns (b), (d), and (e)			0	450	63
13 Total. Add	ine 12, columns (b), (d), and (e)				13	513
(See worksheet	in line 13 instructions to verify calculations)					
Part XVI-B	Relationship of Activities to the	Accomplishme	ent of Exempt P	urposes		
Line No. ▼	Explain below how each activity for which incom	•			•	
N/A	accomplishment of the foundation's exempt purp	oses (other than b	y providing funds for	such purpose	s) (See instructions)	
N/A				 		
-						
	 					
						
						
			·			
						
				· 		
						
						
	 		·			
						
 _	· · · · · · · · · · · · · · · · · · ·					
		<u> </u>				
						
						
						
	i					

DAA

Par	t XVII	Information Regardate Exempt Organiza		insfers To and	Transaction	s and Relationships	With Noncharitable		
1	Did the oraș			un any of the follow	and with any other	er organization described		Yes	TNO
	_			•	•	on 527, relating to political		162	No
	organization	• •	tilati section	1 30 1(C)(S) Organiza	ations) or in section	or ozr, relating to political			1
	-	om the reporting founds	ation to a non	ichantable evernt	organization of				
	(1) Cash	on the reporting loaner		icilantable exempt	organization of		4.	(1)	x
	(1) Casii (2) Other a:	reate					r -	(2)	$\frac{\hat{\mathbf{x}}}{\mathbf{x}}$
	Other transa						<u> </u>	(2)	 ^
		assets to a nonchanta	blo ovemnt o	raanization			1,	(1)	x
	• •		•	_					X
	• •	ses of assets from a not		. •				(2)	X
	• •	of facilities, equipment, o	or other asse	ets				(3)	X
	• •	rsement arrangements					r	(4)	X
		r loan guarantees ance of services or me	mharchin ar f	fundrajojna coljoitot	1000			(5)	X
		ance of services of me actities, equipment, ma						(6) c	X
	-		=	=		(b) should always show the		<u> </u>	<u> </u>
			="	-		foundation received less th			
		=	-			goods, other assets, or ser			
) Line no	(b) Amount involved		e of nonchantable exemp			sfers, transactions, and sharing arrang		
N/A		(2)	(0) (10		- organization	(4)		- Inchio	
-1/	<u> </u>						· · · · · · · · · · · · · · · · · · ·		
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	·					- 			
									
		 							
		 ,					· · · · · · · · · · · · · · · · · · ·		
	described in If "Yes," com	ation directly or indirectly section 501(c) of the Conplete the following school	ode (other th	nan section 501(c)(3)) or in section 5	27?		Yes X	No No
		a) Name of organization		(b) Type of o	rganization	(c)	Description of relationship		
N	/A			 -				··	
				 					
	 		_						
				 				_	
	Under per	alties of penury. I declare tha	t I have examine	l ed this return, including a	accompanying schedi	les and statements, and to the bes	t of my knowledge and belief, it is tru		
Sign Here		12	reparer (other the	an taxpayer) is based on	1 3		May the IRS discuss t with the preparer show (see instructions)?		No
	Signa	ture of officer or trustee			Date	Title			
aid	BRIAN	pe preparer's name	:PA		Preparer's signatur	Ofun	CPA 1/29/1	7 Check self-en	ıt nptoyed
^o repa	rer Firm's n		MAN GR	OUP, PLC			PTIN POO4	05247	7
Jse O	nlv ———			FIELD, SU	ITE 210			6966	
		TROY,		8084				541-5	
								990-PI	
									,

		•		
27-	25	76	52	7

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Form 990-PF, Part XV	. Line 1a - Managers	Who Contributed	Over 2% or \$5.000
<u> </u>			<u> </u>

Name of Manager Amount
SARAH J. GEPHART \$
TOTAL \$

-					
27	7-2	57	65	52	7

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Taxable Dividends from Securities

Description	 Amount	Unrelated Business Code	Exclusion F	Postal Code	US Obs (\$ or %)
INTEREST DIVIDENDS	\$ 21 429		14 14		
TOTAL	\$ 450				