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

OMB No 1545-0052

Department of the Treasury Internal Revenue Service

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

Open to Public inspection

		dar year 2015 or tax year beginning U8/U1/15 ,	and ending 07/	31/16			·
	me of for				A Empl	oyer identification number	
		SHEILA AND ABRAHAM SCHLUSSEL					
		LY FOUNDATION				-1672944	
		d street (or P O box number if mail is not delivered to street address)		Room/suite		hone number (see instruction:	5)
		FORT LEE ROAD n, state or province, country, and ZIP or foreign postal code				1-836-6100	<u></u> _
	EAN				C If exer	mption application is pending,	check here
G	Check	all that apply Initial return Initial retu	rn of a former public	charity	D 1. Fo	reign organizations, check he	re 🕨 🗌
		Final return Amended	return	-	2. Fo	reign organizations meeting t	he
		Address change Name cha	inge			% test, check here and attach	
H (Check	type of organization X Section 501(c)(3) exempt private	foundation		E If priva	ate foundation status was tern	
_			le private foundation			n 507(b)(1)(A), check here	► □
		rket value of all assets at J Accounting method:		ccrual		. ,	
		ear (from Part II, col. (c), Other (specify)	Lasis A	CCIUai		oundation is in a 60-month te section 507(b)(1)(B), check h	. 1 1
	ne 16)		he on each bacie \			(N.N.)	
	art I	Analysis of Revenue and Expenses (The total of					(d) Disbursements
X Y	aitt	amounts in columns (b), (c), and (d) may not necessarily equal	(a) Revenue and expenses per		investment	(c) Adjusted net	for chantable
		the amounts in column (a) (see instructions))	books	110	come	income	purposes (cash basis only)
	1	Contributions, gifts, grants, etc , received (attach schedule)					
	2	Check ► X If the foundation is not required to attach Sch. B					
	3	Interest on savings and temporary cash investments					
	4	Dividends and interest from securities	22	6	226	226	
	5a	Gross rents					
<u>o</u>	b	Net rental income or (loss)					
Revenue	6a	Net gain or (loss) from sale of assets not on line 10					
ě	b	Gross sales price for all assets on line 6a					
æ	7	Capital gain net income (from Part IV, line 2)			0		
	8	Net short-term capital gain				0	
	9	Income modifications					
	10a	Gross sales less returns and allowances					
	ь	Less: Cost of goods sold					
	С	Gross profit or (loss) (attach schedule)					
2016	11	Other income (attach schedule)					
12	12	Total. Add lines 1 through 11	22	6	226	226	,
w ear	13	Compensation of officers, directors, trustees, etc		0			
DEC 1 xpense	14	Other employee salaries and wages					
E Peu	15	Pension plans, employee benefits	·				
	16a	Legal fees (attach schedule)		<u> </u>			
e D	b	Accounting fees (attach schedule)	<u> </u>				
¥ 學	С	Other professional fees (attach schedule)	- 			DE	OCH ICO
E E	17	Interest	<u> </u>			1 000	LIVLU
¥ is	18	Taxes (attach schedule) (see instructions)					1 20 Ban 2 .
SCANNED ministrative	19	Depreciation (attach schedule) and depletion				I'X MOA	* 4
֓֞֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓	20	Occupancy		_			icoj
SCANNED Operating and Administrative	21	Travel, conferences, and meetings				00:	7
an	22	Printing and publications					
Б	23	Other expenses (att. sch.) STMT 1	3	9			
atii	24	Total operating and administrative expenses.		_1			
ē	ļ	Add lines 13 through 23	3		0	0	0
Q	25	Contributions, gifts, grants paid	30				300
	26	Total expenses and disbursements. Add lines 24 and 25	33	9	0	0	300
	27	Subtract line 26 from line 12	(N				\$ 1.5 miles
	a	Excess of revenue over expenses and disbursements	-11	3		,	
	ь	Net investment income (if negative, enter -0-)			226		<u></u>
	С	Adjusted net income (if negative, enter -0-)	·			226	

Form	990-PF (2015) THE SHEILA AND ABRAHAM SCHLUSSEL	31-16729		Page 2
Par	Balance Sheets Attached schedules and amounts in the description column	Beginning of year	End of	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			
2	Savings and temporary cash investments	6,136	6,023	6,023
3	Accounts receivable			•
ĺ	Less: allowance for doubtful accounts			
4				
ŀ	Less: allowance for doubtful accounts ▶			
5				
6				
-	disqualified persons (attach schedule) (see	}		
1	instructions)			
7			•	
	Less. allowance for doubtful accounts ▶ 0			
হ ৪	Inventories for sale or use	<u> </u>		
Assets				
∛ 10	a Investments – U.S. and state government obligations (attach schedule)			
-	b Investments – corporate stock (attach schedule)			
	c Investments – corporate bonds (attach schedule)			······································
11	Investments – land, buildings, and equipment basis			
1	Less: accumulated depreciation (attach sch.) ▶			
12		ļ		
13	Investments – other (attach schedule) SEE STATEMENT 2	6,273	6,273	11,667
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 l)	12,409	12,296	17,690
17	Accounts payable and accrued expenses			
, 18	Grants payable	<u> </u>		
Liabilities	Deferred revenue			
<u>≅</u> 20	Loans from officers, directors, trustees, and other disqualified persons			
<u>.</u> 21	Mortgages and other notes payable (attach schedule)			•
리 22	Other liabilities (describe ►			,
23	Total liabilities (add lines 17 through 22)	0	0	
S	Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31.]		
Ž 24	Unrestricted			
Net Assets or Fund Balances	Temporarily restricted			
<u>m</u> 26	·			
티	Foundations that do not follow SFAS 117, check here			
피	and complete lines 27 through 31.	1		
Ö 27	Capital stock, trust principal, or current funds			
28				
SS 29		12,409	12,296	•
30	•	12,409	12,296	
ž ₃₁	•			
ł	instructions)	12,409	12,296	
Pa	t III Analysis of Changes in Net Assets or Fund Balances			
	otal net assets or fund balances at beginning of year - Part II, column (a), line 30 (n	nust agree with		
	nd-of-year figure reported on prior year's return)	-	1	12,40
	nter amount from Part I, line 27a	• •	2	-11:
	ther increases not included in line 2 (itemize)		3	
	dd lines 1, 2, and 3	•	4	12,29
	ecreases not included in line 2 (itemize)		5	
	otal net assets or fund balances at end of year (line 4 minus line 5) – Part II, column	(b), line 30	. 6	12,29

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the

3,681

300

6

7

7 Add lines 5 and 6

Part VI instructions.

6 Enter 1% of net investment income (1% of Part I, line 27b)

8 Enter qualifying distributions from Part XII, line 4

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Pa	rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 – see instructions)					
 1а	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	1				5
	here ▶ ☐ and enter 1% of Part I, line 27b					
С	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of					
	Part I, line 12, col. (b).					
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)	2		_		0
3	Add lines 1 and 2	_3_				5
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4				0
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5				5
6	Credits/Payments:					
а	2015 estimated tax payments and 2014 overpayment credited to 2015			•		
b	Exempt foreign organizations – tax withheld at source			,		
С	Tax paid with application for extension of time to file (Form 8868)					
d	Backup withholding erroneously withheld 6d 6d					
7	Total credits and payments. Add lines 6a through 6d	7				
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	8				
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9				5
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10				
11	Enter the amount of line 10 to be Credited to 2016 estimated tax ▶ Refunded ▶	11	-			
Pa	rt VII-A Statements Regarding Activities					
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it				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					
	Instructions for the definition)?			1b		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials	•				
	published or distributed by the foundation in connection with the activities.					
С	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 during the year.				,	
	(1) On the foundation. ▶ \$ (2) On foundation managers. ▶ \$	_				
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed					
	on foundation managers. > \$					
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?			2		X
	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 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?		N/A	4b		
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.					
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:					
	By language in the governing instrument, or					
	By state legislation that effectively amends the governing instrument so that no mandatory directions that		·			
	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)					,
	NJ					
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General					
	(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 "Yes,"					
	complete Part XIV			9		<u> </u>
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their					
	names and addresses			10		<u> </u>
				0.0	A DE	·

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Form	990-PF (2015) THE SHEILA AND ABRAHAM SCHLUSSEL 31-1672944		P	age :
	ert VII-A Statements Regarding Activities (continued)			ugu
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the		Yes	No
	meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		x
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified			1
	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? Website address N/A	13	Х	
14	The books are in care of ▶ ABRAHAM SCHLUSSEL Telephone no ▶ 201-	836-	610	0
	153 FORT LEE ROAD	•		
	Located at ▶ TEANECK NJ ZIP+4 ▶ 0766	6		
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]	x
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of			
	the foreign country			
Pa	rt 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			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?			
	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) Yes			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for			١.
	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.)		1	
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]	ĺ
	Organizations relying on a current notice regarding disaster assistance check here		7	
С	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? N/A	. 1c		
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private			
	operating foundation defined in section 4942(j)(3) or 4942(j)(5)):			
а	At the end of tax year 2015, did the foundation have any undistributed income (lines 6d and			
	6e, Part XIII) for tax year(s) beginning before 2015?			
	If "Yes," list the years ▶ 20 , 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) to		1.	
	all years listed, answer "No" and attach statement – see instructions.) N/A	2b	{	1
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.		T	
	▶ 20 , 20 , 20 , 20]	
32	Did the foundation held more than a 20% direct or indirect interest in any business enterprise		1	1 /

If "Yes," did it have excess business holdings in 2015 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of

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

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4a

Yes

X No

N/A

at any time during the year?

foundation had excess business holdings in 2015.)

Form	990-PF (2015) THE SHEILA AND ABRAHAM SCHLUSSI	<u> 31-1</u>	672944			Pa	ige 6
Pa	rt VII-B Statements Regarding Activities for Which Form	4720 May Be R	Required (conf	inued)			
5a	During the year did the foundation pay or incur any amount to:						
	(1) Carry on propaganda, or otherwise attempt to influence legislation (section	4945(e))?	\Box ,	Yes 🗓 No			
	(2) Influence the outcome of any specific public election (see section 4955), or	to carry on,	_			1	
	directly or indirectly, any voter registration drive?		<u> </u>	Yes X No		- [-	
	(3) Provide a grant to an individual for travel, study, or other similar purposes?			Yes 🗓 No			
	(4) Provide a grant to an organization other than a charitable, etc., organization	described in	_				
	section 4945(d)(4)(A)? (see instructions)			Yes 🗓 No			
	(5) Provide for any purpose other than religious, charitable, scientific, literary, of	or educational			, i		
	purposes, or for the prevention of cruelty to children or animals?			Yes 🛛 No			
b	If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und	er the exceptions d	escribed in				
	Regulations section 53.4945 or in a current notice regarding disaster assistance	e (see instructions)?	•	N/A	5b		
	Organizations relying on a current notice regarding disaster assistance check h	ere	•	▶ [] [\neg	
С	If the answer is "Yes" to question 5a(4), does the foundation claim exemption fr						
	because it maintained expenditure responsibility for the grant?		N/A 🗍	Yes No			
	If "Yes," attach the statement required by Regulations section 53.4945-5(d).		٠. ك			1	
6a	Did the foundation, during the year, receive any funds, directly or indirectly, to p	av oremiums					
Vu	on a personal benefit contract?	-, p	\Box	Yes X No			
b	Did the foundation, during the year, pay premiums, directly or indirectly, on a pe	ersonal benefit contr	. —	700 🛅	6b	ľ	X
D	If "Yes" to 6b, file Form 8870.	nsonai beneni conti		•	- 55		
7-	At any time during the tax year, was the foundation a party to a prohibited tax si	holtor transaction?	\Box	Yes X No			
	If "Yes," did the foundation receive any proceeds or have any net income attributions.			N/A	7b	İ	
	Information About Officers, Directors, Trustees, Fo						
Pe	and Contractors	Juliuation Wall	agers, riiginy	r ald Employ	ccs,		
1 1	ist all officers, directors, trustees, foundation managers and their compens	sation (see instruc	tions)				
<u> </u>	ist an officers, unectors, trastices, roundation managers and tien compens	1		(d) Contributions to	1		
	(a) Name and address	(b) Title, and average hours per week	(c) Compensation (if not paid,	employee benefit		oense acc	
	(a) Hallio Brid Ballioto	devoted to position	enter -0-)	plans and deferred compensation	othe	r allowan	ces
	E STATEMENT 3	 		<u> </u>			
52	binimali J		ļ		ł		
_							
	•						
					 		
	•				1		
_		- -				-	-
	•						
_	Compensation of five highest-paid employees (other than those included	on line 1 – see ins	tructions) If nor	e enter			
2	"NONE."	on the 1 - see ms	auctions). Il fior	ie, enter			
	NOTE:	T =	<u> </u>	(d) Contributions to	Γ'		
	(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week	(c) Compensation	employee benefit		oense acc	
	(a) Name and address of each employee paid more than \$50,000	devoted to position	(c) compensation	plans and deferred compensation	othe	r allowan	ces
		 		Compensation	├─		
NO	NE .				l		
		 -		 	├		
		 		 	 		
,	•	1		1	1		
		 	 	 	├—		
				}			
		 	 	 	 		
			l	ļ	l		
Te45	number of other employees paid over \$50,000		l	I	<u> </u>	\top	0
ıota	number of other employees paid over 400,000					1	U

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Part VIII Information About Officers, D. and Contractors (continued)	Directors, Trustees, Foundation Ma	nagers, Highly Paid En	nployees,
3 Five highest-paid independent contractors for p	professional services (see instructions). If r	none, enter "NONE."	
(a) Name and address of each person	paid more than \$50,000	(b) Type of service	(c) Compensation
NONE			
•			
Total number of others receiving over \$50,000 for profes	sional services		>
Part IX-A Summary of Direct Charitab	ole Activities	-	
List the foundation's four largest direct charitable activities during the tax organizations and other beneficianes served, conferences convened, res		ber of	Expenses
1 N/A			
2			
3			
4			
	•		
Part IX-B Summary of Program-Relate	ed Investments (see instructions)		
Describe the two largest program-related investments made by the found	ation during the tax year on lines 1 and 2		Amount
1 N/A			
· ·			
2			
All other program-related investments See instructions 3			
		1	

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Total. Add lines 1 through 3

Part XII Qualifying Distributions (see instructions)

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

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	300
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		
а	Suitability test (prior IRS approval required)	3a	
b	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	300
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	0
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	300
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundations are considered to the column (b).	 ation	

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16,876

1,872

	4d and 5 from line 1 This amount must be
	distributed in 2016
7	Amounts treated as distributions out of corpu
	to satisfy requirements imposed by section

- required-see instructions)
- Excess distributions carryover from 2010 not applied on line 5 or line 7 (see instructions)
- Excess distributions carryover to 2016. Subtract lines 7 and 8 from line 6a
- Analysis of line 9.

Excess from 2015

1	Excess from 2011		90
)	Excess from 2012		13
;	Excess from 2013	•	

2x0000 110111 2011	
Excess from 2012	13:
Excess from 2013	
Excess from 2014	838

N/A

DAA

11672				·		
	990-PF (2015) THE SHEILA A			31-1672		Page 1 (
	art XIV Private Operating For				9)	
1a	If the foundation has received a ruling or		•	rating		
	foundation, and the ruling is effective for				1040(5)(2)	
b	Check box to indicate whether the foundation		rating foundation desc		1942(j)(3) or 494	2(j)(5)
2a	-	Tax year (a) 2015	(b) 2014	Prior 3 years (c) 2013	(d) 2012	(e) Total
	income from Part I or the minimum	(a) 2013	(0) 2014	(6) 2013	(u) 2012	
	investment return from Part X for					
	each year listed		· }		 	
b	85% of line 2a		 		 	
С	Qualifying distributions from Part XII,					
	line 4 for each year listed		 	 		
d	Amounts included in line 2c not used directly					İ
_	for active conduct of exempt activities		·		 	
е	Qualifying distributions made directly				1	
	for active conduct of exempt activities.			}	\	
	Subtract line 2d from line 2c				·	ļ <u> </u>
3	Complete 3a, b, or c for the					
	alternative test relied upon					
а	"Assets" alternative test – enter:					
	(1) Value of all assets					ļ
	(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			_	<u> </u>	
C	"Support" alternative test – enter.				f	1
	(1) Total support other than gross					
	investment income (interest,					
	dividends, rents, payments on securities loans (section			1		1
	512(a)(5)), or royalties)					
	(2) Support from general public					
	and 5 or more exempt				[į
	organizations as provided in		ļ			
	section 4942(j)(3)(B)(iii) (3) Largest amount of support from				 	
	an exempt organization					
	(4) Gross investment income					
Pa	rt XV Supplementary Inform	nation (Complet	e this part only i	f the foundation h	ad \$5,000 or mor	e in assets at
	any time during the ye	•	•		40,000 01 11101	· 455515 41
1	Information Regarding Foundation Ma		<u> </u>			
а	List any managers of the foundation who	=	ore than 2% of the tota	I contributions received	by the foundation	
	before the close of any tax year (but only	if they have contribu	ited more than \$5,000). (See section 507(d)(2	2).)	
	N/A			· · · · ·		
b	List any managers of the foundation who	own 10% or more of	the stock of a corpora	ation (or an equally larg	e portion of the	
	ownership of a partnership or other entity) of which the founda	ation has a 10% or gre	ater interest		
	N/A					
2	Information Regarding Contribution, G		• • • •			
			•	able organizations and	•	
	unsolicited requests for funds If the found		rants, etc. (see instru	ctions) to individuals or	organizations under	
	other conditions, complete items 2a, b, c,			 		
а	The name, address, and telephone numb	er or e-mail address	of the person to whor	n applications should b	e addressed:	
	N/A					
	The form in which applications should be	submitted and inform	nation and materials t	hev should include:	 	
~	N/A		and materials t	y chicale meleco.		
С	Any submission deadlines:					
	N/A		-			
d	Any restrictions or limitations on awards,	such as by geograph	nical areas, charitable	fields, kinds of institution	ons, or other	
	factors:					

Part XV : Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient show any relationship to Purpose of grant or status of Amount any foundation manager or substantial contributor contribution recipient Name and address (home or business) a Paid during the year JEWISH CENTER OF TEANECK **GENERAL** 250 WOUNDED WARRIOR PROJECT **GENERAL** 25 CSPI **GENERAL** 25 Total ▶ 3a 300 **b** Approved for future payment N/A ▶ 3b Total

Part XVI-A	Analysis of Income-Producing Acti	vities				
	bunts unless otherwise indicated.		ed business income	Exclude	d by section 512, 513, or 514	
·		(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	(e) Related or exempt function income
 Program se 	rvice revenue.	ļ <u> </u>		<u> </u>		(See instructions)
a		h 		}		
						
				 		
				 		
e				 		
T	d contracts from agreement agencies			 	<u> </u>	
_	d contracts from government agencies odues and assessments		 		·	
-	savings and temporary cash investments					
	nd interest from securities					226
	come or (loss) from real estate:			7		
	anced property			<u> </u>		
	t-financed property					
	come or (loss) from personal property					
7 Other invest						
	s) from sales of assets other than inventory					
-	or (loss) from special events					* * * * * * * * * * * * * * * * * * * *
	or (loss) from sales of inventory					
	ue. a					
b						
е				<u> </u>		
2 Subtotal Ac	ld actions (b) (d) and (c)	ł	l o		ol	226
Z Subibiai. At	ld columns (b), (d), and (e)		<u> </u>	<u> </u>		
3 Total. Add I	ine 12, columns (b), (d), and (e)	L	<u></u>	1	. 13 _	226
3 Total. Add l See worksheet	ine 12, columns (b), (d), and (e) in line 13 instructions to verify calculations.)			·	. 13 _	
3 Total. Add I See worksheet Part XVI-B	ine 12, columns (b), (d), and (e) in line 13 instructions to verify calculations.) Relationship of Activities to the Ac		ent of Exempt P	urpose	13 <u> </u>	226
3 Total. Add l See worksheet	ine 12, columns (b), (d), and (e) in line 13 instructions to verify calculations.) Relationship of Activities to the Ac Explain below how each activity for which income in	s reported in c	ent of Exempt P	urpose A contrib	13	226
3 Total. Add I See worksheet Part XVI-B Line No. ▼	ine 12, columns (b), (d), and (e) in line 13 instructions to verify calculations.) Relationship of Activities to the Ac	s reported in c	ent of Exempt P	urpose A contrib	13	226
3 Total. Add I See worksheet Part XVI-B Line No.	ine 12, columns (b), (d), and (e) in line 13 instructions to verify calculations.) Relationship of Activities to the Ac Explain below how each activity for which income in	s reported in c	ent of Exempt P	urpose A contrib	13	226
3 Total. Add I See worksheet Part XVI-B Line No. ▼	ine 12, columns (b), (d), and (e) in line 13 instructions to verify calculations.) Relationship of Activities to the Ac Explain below how each activity for which income in	s reported in c	ent of Exempt P	urpose A contrib	13	226
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3 Total. Add I See worksheet Part XVI-B Line No. ▼	ine 12, columns (b), (d), and (e) in line 13 instructions to verify calculations.) Relationship of Activities to the Ac Explain below how each activity for which income in	s reported in c	ent of Exempt P	urpose A contrib	13	226
3 Total. Add I See worksheet Part XVI-B Line No. ▼	ine 12, columns (b), (d), and (e) in line 13 instructions to verify calculations.) Relationship of Activities to the Ac Explain below how each activity for which income in	s reported in c	ent of Exempt P	urpose A contrib	13	226
3 Total. Add I See worksheet Part XVI-B Line No. ▼	ine 12, columns (b), (d), and (e) in line 13 instructions to verify calculations.) Relationship of Activities to the Ac Explain below how each activity for which income in	s reported in c	ent of Exempt P	urpose A contrib	13	226
3 Total. Add I See worksheet Part XVI-B Line No. ▼	ine 12, columns (b), (d), and (e) in line 13 instructions to verify calculations.) Relationship of Activities to the Ac Explain below how each activity for which income in	s reported in c	ent of Exempt P	urpose A contrib	13	226
3 Total. Add I See worksheet Part XVI-B Line No. ▼	ine 12, columns (b), (d), and (e) in line 13 instructions to verify calculations.) Relationship of Activities to the Ac Explain below how each activity for which income in	s reported in c	ent of Exempt P	urpose A contrib	13	226
3 Total. Add I See worksheet Part XVI-B Line No. ▼	ine 12, columns (b), (d), and (e) in line 13 instructions to verify calculations.) Relationship of Activities to the Ac Explain below how each activity for which income in	s reported in c	ent of Exempt P	urpose A contrib	13	226
3 Total. Add I See worksheet Part XVI-B Line No. ▼	ine 12, columns (b), (d), and (e) in line 13 instructions to verify calculations.) Relationship of Activities to the Ac Explain below how each activity for which income in	s reported in c	ent of Exempt P	urpose A contrib	13	226
3 Total. Add I See worksheet Part XVI-B Line No. ▼	ine 12, columns (b), (d), and (e) in line 13 instructions to verify calculations.) Relationship of Activities to the Ac Explain below how each activity for which income in	s reported in c	ent of Exempt P	urpose A contrib	13	226
3 Total. Add I See worksheet Part XVI-B Line No. ▼	ine 12, columns (b), (d), and (e) in line 13 instructions to verify calculations.) Relationship of Activities to the Ac Explain below how each activity for which income in	s reported in c	ent of Exempt P	urpose A contrib	13	226
3 Total. Add I See worksheet Part XVI-B Line No. ▼	ine 12, columns (b), (d), and (e) in line 13 instructions to verify calculations.) Relationship of Activities to the Ac Explain below how each activity for which income in	s reported in c	ent of Exempt P	urpose A contrib	13	226
3 Total. Add I See worksheet Part XVI-B Line No. ▼	ine 12, columns (b), (d), and (e) in line 13 instructions to verify calculations.) Relationship of Activities to the Ac Explain below how each activity for which income in	s reported in c	ent of Exempt P	urpose A contrib	13	226
3 Total. Add I See worksheet Part XVI-B Line No. ▼	ine 12, columns (b), (d), and (e) in line 13 instructions to verify calculations.) Relationship of Activities to the Ac Explain below how each activity for which income in	s reported in c	ent of Exempt P	urpose A contrib	13	226
3 Total. Add I See worksheet Part XVI-B Line No. ▼	ine 12, columns (b), (d), and (e) in line 13 instructions to verify calculations.) Relationship of Activities to the Ac Explain below how each activity for which income in	s reported in c	ent of Exempt P	urpose A contrib	13	226
3 Total. Add I See worksheet Part XVI-B Line No. ▼	ine 12, columns (b), (d), and (e) in line 13 instructions to verify calculations.) Relationship of Activities to the Ac Explain below how each activity for which income in	s reported in c	ent of Exempt P	urpose A contrib	13	226
3 Total. Add I See worksheet Part XVI-B Line No. ▼	ine 12, columns (b), (d), and (e) in line 13 instructions to verify calculations.) Relationship of Activities to the Ac Explain below how each activity for which income in	s reported in c	ent of Exempt P	urpose A contrib	13	226
3 Total. Add I See worksheet Part XVI-B Line No. ▼	ine 12, columns (b), (d), and (e) in line 13 instructions to verify calculations.) Relationship of Activities to the Ac Explain below how each activity for which income in	s reported in c	ent of Exempt P	urpose A contrib	13	226
3 Total. Add I See worksheet Part XVI-B Line No. ▼	ine 12, columns (b), (d), and (e) in line 13 instructions to verify calculations.) Relationship of Activities to the Ac Explain below how each activity for which income in	s reported in c	ent of Exempt P	urpose A contrib	13	226
3 Total. Add I See worksheet Part XVI-B Line No. ▼	ine 12, columns (b), (d), and (e) in line 13 instructions to verify calculations.) Relationship of Activities to the Ac Explain below how each activity for which income in	s reported in c	ent of Exempt P	urpose A contrib	13	226

Part XVII	Information Regarding Exempt Organizations	Transfers To and Transaction	ons and Relationships Wi	th Noncharitable	
		ngage in any of the following with any	other organization described	Yes No	
	- ·	section 501(c)(3) organizations) or in se	_	100 100	
organizati		esion ou (e)(e) organizatione) er in et	one, one, rotating to permou.	1, 1	
•		a noncharitable exempt organization of	of:		
	(1) Cash				
(2) Other	assets	•	•	1a(1) X 1a(2) X	
b Other tran		•			
	(1) Sales of assets to a noncharitable exempt organization				
• •	(2) Purchases of assets from a noncharitable exempt organization				
	(3) Rental of facilities, equipment, or other assets				
	(4) Reimbursement arrangements				
• •	(5) Loans or loan guarantees				
	(6) Performance of services or membership or fundraising solicitations				
	c Sharing of facilities, equipment, mailing lists, other assets, or paid employees				
-		complete the following schedule. Colu	mn (b) should always show the fa	air market	
	-	es given by the reporting foundation. If			
value in a	ny transaction or sharing arrange	ement, show in column (d) the value of	f the goods, other assets, or servi	ces received.	
(a) Line no	(b) Amount involved (c)	Name of noncharitable exempt organization	(d) Description of transfers, tra	ansactions, and sharing arrangements	
N/A					
			L		
	<u> </u>		<u> </u>		
	<u> </u>		<u> </u>		
			 		
			<u> </u>		
			 		
			 		
	-{				
			 		
					
					
	•	ated with, or related to, one or more tax		(T., Gel.,	
		ther than section 501(c)(3)) or in section	on 527?	Yes X No	
b if Yes, c	omplete the following schedule.	(1) 7 1	(a) Passar	the of selections have	
NT / 7	(a) Name of organization	(b) Type of organization	(c) Descrip	otion of relationship	
N/A			 		
			<u> </u>		
			 		
			 		
Under n	penalties of penury. I declare that I have	examined this return, including accompanying sch	edules 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	May the IRS discuss this return	
Sign	1	4		with the preparer shown below	
Here			/ /	(see Instructions)? X Yes No	
neie	1/1/4/2). [-	- / _{1///}	16/16 \ Tou	s7ee	
Sign	gnature of officer or trustee	Date	Title'	31.4	
		1 8 1	I/A	Date Charl .	
Panv	Type preparer's name	Preparer of signature		Check if	
Paid JEE	FREY H. BAUM		h MX	[[] [G] sen-employed	
Preparer	s name AUERBACH	, SCURA, COHEM & BA	UM, LLC	PTIN P01436411	
Use Univ		TER AVENUE SVITE 10		Firm's EIN ► 22-3336000	
	FORT LEE	1 /	-	Phone no 201-461-4900	
				Form 990-PF (2015)	

311672944 THE SHEILA AND ABRAHAM SCHLUSSEL 31-1672944 FYE: 7/31/2016

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Charitable Purpose \$	Fair Market Value \$ 11,667 \$ 11,667
Adjusted Net	Basis of Valuation COST
Investment	ine 13 - Other Inves End of Year \$ 6,273 \$ 6,273
\$ Total \$ \$ \$ \$ \$ \$ \$ \$ \$	Statement 2 - Form 990-PF, Part II, Line 13 - Other Investments Beginning End of Ba of Year Year Val \$ 6,273 \$ 6,273 COS \$ 6,273
Description EXPENSES FEES TOTAL	Description MARKETABLE SECURITIES TOTAL

Statement 3 - Form 990-PF, Part VIII, Line 1 - List of Officers, Directors, Trustees, Etc. Benefits 0 Compensation 311672944 THE SHEILA AND ABRAHAM SCHLUSSEL
Federal Statements Average Hours 00.0 0.00 Title TRUSTEE TRUSTEE Name and Address ABRAHAM SCHLUSSEL 153 FORT LEE ROAD TEANECK NJ 07666 153 FORT LEE ROAD SHEILA SCHLUSSEL TEANECK NJ 07666 FYE: 7/31/2016

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Expenses

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TRUSTEE

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MERYL SCHLUSSEL MARK 153 FORT LEE ROAD

TEANECK NJ 07666

153 FORT LEE ROAD TEANECK NJ 07666

DAVID SCHLUSSEL

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