Form **990-PF**

Return of Private Foundation

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

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

2015
Open to Public Inspection

Ford	alen	dar year 2015 or tax year beginning SEP	1, 2015	, and ending	AUG 31, 2016				
Nan	Name of foundation A Employer identification number								
R	OB?	ERT S. & MARY JANE HEKE	MIAN						
		ILY FOUNDATION, INC.			22-3087695				
		nd street (or P O box number if mail is not delivered to street	•	Room/suite	B Telephone number				
		 BOX 667, 505 MAIN STR 			<u> 201-487-15</u>				
		own, state or province, country, and ZIP or foreign p	ostal code		C If exemption application is p	ending, check here			
		KENSACK, NJ 07602-0667			-	. —			
G C	heck	all that apply: Initial return		ormer public charity	D 1. Foreign organizations	, check here			
		Final return	Amended return		2 Foreign organizations me check here and attach co	eting the 85% test,			
		Address change	Name change		7				
H (_	type of organization: X Section 501(c)(3) exction 4947(a)(1) nonexempt charitable trust	empt private foundation Other taxable private founda		E If private foundation sta				
		rket value of all assets at end of year J Accounting		Accrual	under section 507(b)(1)	• •			
		-	her (specify)	Acciuai	F If the foundation is in a (
(<i>ii</i>		4,426,268. (Part I, colu	mn (d) must be on cash b	basis)	under section 507(b)(1)	(b), check here			
		Analysis of Revenue and Expenses	(a) Revenue and	(b) Net investment	(c) Adjusted net	(d) Disbursements			
		(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a))	expenses per books	income	income	for charitable purposes (cash basis only)			
	1	Contributions, gifts, grants, etc., received	226,000.		N/A				
	2	Check froundation is not required to attach Sch. B							
-	3	Interest on savings and temporary cash investments	34,604.	34,604.		STATEMENT 1			
2017	4	Dividends and interest from securities	160,652.	160,652.		STATEMENT 2			
2	5a	Gross rents							
<u>L</u> ~	b	Net rental income or (loss)							
- 2	6a	Net gain or (loss) from sale of assets not on line 10	<36,165.	>		ECEIVED			
	b	Gross sales price for all assets on line 6a 39,789.				ျာ			
ě	7	Capital gain net income (from Part IV, line 2)		0.	8077	AN 1 7 2017 G			
	8	Net short-term capital gain			m m	RS			
	9	Income modifications Gross sales less returns			\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	GDEN, UT			
SCANNER JAN 2	10a	and allowances				GDLIN, OI			
S.		Less Cost of goods sold							
E.	11	Gross profit or (loss) Other income	11,212.	_11,212.	<u> </u>	STATEMENT 3			
	12	Total Add lines 1 through 11	396,303.	206,468.		DIATEMENT 5			
	13	Compensation of officers, directors, trustees, etc	0.	0.		0.			
	14	Other employee salaries and wages							
	15	Pension plans, employee benefits							
ses	16a	Legal fees							
eii		Accounting fees STMT 4	3,090.	0.		0.			
Expense	C	Other professional fees							
ķ	17	Interest	798.	798.		0.			
and Administrative	18	Taxes							
nis	19	Depreciation and depletion							
ם	20	Occupancy							
Ϋ́	21	Travel, conferences, and meetings							
ē	22	Printing and publications	- 00						
Operating	23	Other expenses STMT 5	80.	0.		0.			
erai	24	Total operating and administrative expenses. Add lines 13 through 23	3,968.	798.		0.			
o	25	Contributions, gifts, grants paid	133,653.	130.	1	133,653.			
		Total expenses and disbursements	133,033.			133,033.			
	-0	Add lines 24 and 25	137,621.	798.		133,653.			
	27	Subtract line 26 from line 12:		, , , 0 •	†				
	1	Excess of revenue over expenses and disbursements	258,682.	_					
		Net investment income (if negative, enter -0-)		205,670.					
	C	Adjusted net income (if negative, enter -0-)			N/A				

ROBERT S. & MARY JANE HEKEMIAN FAMILY FOUNDATION, INC.

<u>For</u>	m 99	0-PE (2015) FAMILY FOUNDATION, INC.		22-3	3087695 Page 2
_ [p	art	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year	End of	
	ai L	column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
•	1	Cash - non-interest-bearing	17,555.	64,498.	64,498.
	2	Savings and temporary cash investments			
	3	Accounts receivable ►			
		Less: allowance for doubtful accounts ▶			
	4	Pledges receivable >			
		Less; allowance for doubtful accounts ▶		<u>-</u>	· · · · · · · · · · · · · · · · · · ·
	-	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other	007.000	0.61 570	061 570
	l _	disqualified persons STMT 7	927,000.	961,572.	961,572.
	7	Other notes and loans receivable			
		Less; allowance for doubtful accounts			
Assets		Inventories for sale or use	4 000	2,785.	2,785.
Ass	1	Prepaid expenses and deferred charges	4,000.	4,100.	2,103.
•		Investments - U.S and state government obligations Investments - corporate stock STMT 8	1,918,595.	1,842,643.	2,794,751.
			1,910,595.	1,044,043.	2,734,731.
	l .	Investments - corporate bonds Investments - land, buildings, and equipment basis			
	''	Less accumulated depreciation			
	12	Investments - mortgage loans			
	13	Investments - other STMT 9	599,731.	602,662.	602,662.
	1	Land, buildings, and equipment: basis	333,7321		0007000
	' 7	Less accumulated depreciation			
	15	Other assets (describe ▶			
	1	Total assets (to be completed by all filers - see the			
		instructions. Also, see page 1, item I)	3,466,881.	3,474,160.	4,426,268.
	17	Accounts payable and accrued expenses			
	18	Grants payable			
Ś	19	Deferred revenue			
薑	20	Loans from officers, directors, trustees, and other disqualified persons	1,069,000.	819,000.	STATEMENT 10
Liabilities		Mortgages and other notes payable			
Ξ	22	Other liabilities (describe STATEMENT 11)	49,457.	49,269.	
_	23	Total liabilities (add lines 17 through 22)	1,118,457.	868,269.	
		Foundations that follow SFAS 117, check here			
G		and complete lines 24 through 26 and lines 30 and 31.			
Ş	24	Unrestricted			
alar	25	Temporarily restricted			
or Fund Balances	26	Permanently restricted			
Ě		Foundations that do not follow SFAS 117, check here			
o.		and complete lines 27 through 31.	0	0.	
ets	27	Capital stock, trust principal, or current funds	0.	0.	
Net Assets	28	Paid-in or capital surplus, or land, bldg., and equipment fund Retained earnings, accumulated income, endowment, or other funds	2,348,424.	2,605,891.	
et A	29	Total net assets or fund balances	2,348,424.	2,605,891.	
Ž	30	Total net assets of fund balances	2,340,424.	2,003,031.	
	31	Total liabilities and net assets/fund balances	3,466,881.	3,474,160.	
Ξ				3,474,1000	
	art			-	
1		I net assets or fund balances at beginning of year - Part II, column (a), line	30		0 040 404
		st agree with end-of-year figure reported on prior year's return)		1	2,348,424.
_		er amount from Part I, line 27a		2	258,682.
3		er increases not included in line 2 (itemize)		3	2 607 106
4		lines 1, 2, and 3	SEE STA	TEMENT 6	2,607,106. 1,215.
5		reases not included in line 2 (itemize) In net assets or fund balances at end of year (line 4 minus line 5) - Part II, co		TEMENT 6 5	2,605,891.
6	100	il net assets of junio balances at end of year time 4 minus line 3) - Part II, co	narini (n) iiiis 20		50rm QQO-DE (2015)

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Part IV Capital Gains a	and I nese	s for Tax on It	vestment	Income				<u> 4-300</u>	1093	raye 3
(a) List and descr	ibe the kind(s)	of property sold (e.g	., real estate,	111001116	(b) H	low acquired Purchase	(c) Date a		(d) Date	
2-Stury brick waterlouse, or common stock, 200 Sils. MLC Go.)						Donation	(mo., da		(mo., da	
12 4000 SH CBRE CLARION b 18 SH CBRE CLARION						P	$\frac{02/2}{04/3}$		$\frac{11/2!}{11/2!}$	
6 632 SH HEWLETT						P +	03/0		11/2	
d 200 SH CHEMOURS						P	04/1		11/2	
e .22 SH LAKELANI		RP				P	05/1	4/07	01/12	
(e) Gross sales price		ciation allowed allowable)	(g) Cos plus e	t or other basis xpense of sale			(h) Ga (e) plus	ain or (loss (f) minus) (g)	
a 30,201.				59,85					<29	<u>,652.</u>
b 136.			-	17						<41.
<u>8,283.</u>	-		ļ	14,32						,046.
d 1,169.			 	1,59	2.					< <u>424.</u> <2.
Complete only for assets showin	a dain in colur	nn (h) and owned by	the foundation		4.		Gains (C	ol. (h) gaın	minus	
(i) F.M.V. as of 12/31/69	(j) Ad	justed basis f 12/31/69	(k) Ex	cess of col. (i) col. (j), if any		col	(k), but r	ot less that (from col. (n -0-) or	
a									<29	,652.
b										<41.
C										,046.
<u>d</u>										< 424.
e					-					<2.
Papital gain net income or (net ca	pital loss)	If gain, also ente	r in Part I, line î I- in Part I, line	7 7	}	2			_<36	,165.
Net short-term capital gain or (los	s) as defined i	`								
If gain, also enter in Part I, line 8,		11 000110110 1222(0) 41	(0).		1					
If (loss), enter -0- in Part I, line 8 Part V Qualification U		4040(-) (.			3		N/A		
f section 4940(d)(2) applies, leave the Was the foundation liable for the sect f "Yes," the foundation does not qual Enter the appropriate amount in e	tion 4942 tax o	on 4940(e). Do not co	omplete this pa	rt					Yes	X No
(a) Base period years		(b)			(c)			Distril	(d) oution ratio	
Calendar year (or tax year beginnii	ng in) A	djusted qualifying dis		Net value of no		ıtable-use assets	_ ——	(col. (b) di	rided by col.	
2014			5,662.			,833,820				<u>61469</u>
2013			9,682.		_3	,671,096	-	<u> </u>		18981
2012 2011			06,997. 3,446.			,596,713 ,640,028				<u>85355</u> 31166
2010			0,950.			,540,028				57321
2010			0,0000			, 505, 125				<u> </u>
? Total of line 1, column (d)							2		. 2	54292
Average distribution ratio for the			on line 2 by 5,	or by the number	of yea	ars				•
the foundation has been in exister	nce if less than	5 years					3_		.0.	<u>50858</u>
Enter the net value of noncharitab	le-use assets	for 2015 from Part X,	line 5				4		3,937	<u>,715.</u>
Multiply line 4 by line 3							5		200	,264.
Enter 1% of net investment incom	ne (1% of Part	l, line 27b)					6		2	,057.
Add lines 5 and 6							7		202	,3 <u>21</u> .
8 Enter qualifying distributions from If line 8 is equal to or greater than			a 1h and come	ulete that nart usin	n 2 10	% tay rate	8_		133	<u>,653.</u>
See the Part VI instructions.	i iiie 7, check		e io, and comp	nete that part usin	iya 17	o lax iale.				
500504 44 04 45									Form 990-	PF (2015

ROBERT S. & MARY JANE HEKEMIAN

	990-PF (2015) FAMILY FOUNDATION, INC. 22-3087 rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see	695 nstru	ctio	Page 4
1a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1.			_ <u></u>
•	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 here ▶ ☐ and enter 1% 1		4,1	<u>13.</u>
	of Part I, line 27b			
	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b).			
	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)			0.
3	Add lines 1 and 2		4,1	
	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)			0.
	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-		4,1	<u>13.</u>
	Credits/Payments:			
	2015 estimated tax payments and 2014 overpayment credited to 2015 6a 2,785.			
	Exempt foreign organizations - tax withheld at source 6b			
	Tax paid with application for extension of time to file (Form 8868) 6c			
	Backup withholding erroneously withheld Tatal and the and asserted Add least Catherine Cd.		2 7	0 E
	Total credits and payments. Add lines 6a through 6d		4,1	<u>85.</u>
	Enter any penalty for underpayment of estimated tax. Check here X if Form 2220 is attached Tay due If the total of lease 5 and 8 is more than leas 7 and 8 is more than leas 7.		1 2	28.
	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed		<u>1,3</u>	40.
	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid Enter the amount of line 10 to be: Credited to 2016 estimated tax			
	Enter the amount of line 10 to be: Credited to 2016 estimated tax ► Refunded ► 11 rt VII-A Statements Regarding Activities			
	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in	Γ	Yes	No
	any political campaign?	1a		X
h	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.			}
C	Did the foundation file Form 1120-POL for this year?	1c		X
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:			
	(1) On the foundation. ▶ \$ 0 . (2) On foundation managers. ▶ \$ 0 .)
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation			
	managers. > \$ 0 .			
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	<u> </u>	X_
b	If "Yes," has it filed a tax return on Form 990-T for this year? N/A	4b	ļ	<u> </u>
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5	ļ	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		}	ļ
	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	
0-	Cates the states to which the foundation reports as with which it is requisered (one instructions)		Ì	
oa	Enter the states to which the foundation reports or with which it is registered (see instructions)			
.	NJ If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)		[1
Ü	of each state as required by General Instruction G? If "No," attach explanation	86	х	
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	-00	1	
3	year 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)? If "Yes," complete Part XIV	9	(x
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses STMT 12	10	X	T
<u></u>	The strip personnel decoration of the results of the results of the strip of the st			(2015)

FAMILY FOUNDATION, INC.

	990-PF (2015) FAMILY FOUNDATION, INC. 22-308	<u> 7695</u>		Page 5
P	art VII-A Statements Regarding Activities (continued)			
			Yes	No
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of	ļ		
	section 512(b)(13)? If "Yes," attach schedule (see instructions)	11	[]	Х
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges?			
	If "Yes," attach statement (see instructions)	12	ļ	х
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Х	
	Website address WWW.HEKEMIAN.COM			
14	The books are in care of ► TAXPAYER Telephone no. ► 201-4	87-1	500	
	Located at ▶PO BOX 667, 505 MAIN STREET, HACKENSACK, NJ ZIP+4 ▶0			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here		•	Ī
	and enter the amount of tax-exempt interest received or accrued during the year	N	/A	
16	At any time during calendar year 2015, did the foundation have an interest in or a signature or other authority over a bank,		Yes	No
•	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		L	
	foreign country			
Pá	art 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.	\top	Yes	No
1.	a During the year did the foundation (either directly or indirectly):	-	103	110
10	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes X No	ſ		
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? X Yes No	- 1	ļ	
			1	!
	(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)? Yes X No			
			1	•
	(6) Agree to pay money or property to a government official? (Exception Check "No"	[
	if the foundation agreed to make a grant to or to employ the official for a period after		1	<u> </u>
	termination of government service, if terminating within 90 days.)	1		
ı	o If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations		Ì	
	section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	1b	∤ .——	X
	Organizations relying on a current notice regarding disaster assistance check here			
(Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected			l
	before the first day of the tax year beginning in 2015?	1c		<u> </u>
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation			Ì
	defined in section 4942(j)(3) or 4942(j)(5)):			
1	a 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	ł	1	l
	before 2015?		Ì	
	If "Yes," list the years			
	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect	1	Ì	
	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach			
	statement - see instructions.) N/A	2b	 	<u> </u>
(If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			
	a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			
3		-		
	during the year?			
١	b 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		1	
	of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C,			
	Form 4720, to determine if the foundation had excess business holdings in 2015.) N/A	_3b	<u> </u>	ļ
	a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	<u> </u>	X
- 1	b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that		1	
	had not been removed from jeopardy before the first day of the tax year beginning in 2015?	4b	<u> </u>	X
		orm 99	0-PF	(2015)

523541 11-24-15

ROBERT S. & MARY JANE HEKEMIAN 22-3087695 FAMILY FOUNDATION, INC. Page 6 Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required (continued) 5a During the year did the foundation pay or incur any amount to: Yes X No (1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))? (2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, Yes X No Yes X No (3) Provide a grant to an individual for travel, study, or other similar purposes? (4) Provide a grant to an organization other than a charitable, etc., organization described in section Yes X No 4945(d)(4)(A)? (see instructions) (5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for Yes X No. the prevention of cruelty to children or animals? b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations N/A 5b section 53.4945 or in a current notice regarding disaster assistance (see instructions)? Organizations relying on a current notice regarding disaster assistance check here c If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained Yes No expenditure responsibility for the grant? N/A If "Yes," attach the statement required by Regulations section 53 4945-5(d). 6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on Yes X No a personal benefit contract? b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 6b X If "Yes" to 6b, file Form 8870 Yes X No 7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? b If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction? N/A7b Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors 1 List all officers, directors, trustees, foundation managers and their compensation. (d) Contributions to employee benefit plans and deferred compensation (c) Compensation (e) Expense account, other (b) Title, and average hours per week devoted (If not paid, enter -0-) (a) Name and address to position allowances ROBERT S. HEKEMIAN PRESIDENT PO BOX 667, 505 MAIN STREET 0. HACKENSACK, NJ 076020667 0. 3.00 0 MARY JANE HEKEMIAN VICE-PRESIDENT PO BOX 667, 505 MAIN STREET 5.00 0 0. 0. HACKENSACK, NJ 076020667 SECRETARY DAVID HEKEMIAN PO BOX 667, 505 MAIN STREET 2.00 0 0. 0. HACKENSACK, NJ 076020667 2 Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE." (d) Contributions to employee benefit plans and deferred (b) Title, and average (e) Expense account, other allowances (a) Name and address of each employee paid more than \$50,000 hours per week devoted to position (c) Compensation compensation NONE

Form **990-PF** (2015)

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

ROBERT S. & MARY JANE HEKEMIAN

Form 990-PF (2015) FAMILY FOUNDATION, INC.		087695 Page 7
Part VIII Information About Officers, Directors, Trustees, Founda Paid Employees, and Contractors (continued)	tion Managers, Highly	
3 Five highest-paid independent contractors for professional services. If 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 professional services		▶ 0
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statist number of organizations and other beneficiaries served, conferences convened, research papers produced to the conference of the conferen	ical information such as the luced, etc	Expenses
1 N/A		
2		
3		
4		
Part IX-B Summary of Program-Related Investments Describe the two largest program-related investments made by the foundation during the tax year on	lines 1 and 2.	Amount
1 N/A		
2		
All other program-related investments. See instructions. 3		

Form **990-PF** (2015)

Total. Add lines 1 through 3

P	Art X Minimum Investment Return (All domestic foundations must complete this part. Foreign four	ndations,	see instructions)
1"	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
	Average monthly fair market value of securities	1a	2,917,483.
	Average of monthly cash balances	1b	17,044.
	Fair market value of all other assets	1c	1,063,153.
ď	Total (add lines 1a, b, and c)	1d	3,997,680.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	3,997,680.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	59,965.
5	Net value of noncharitable-use assets Subtract line 4 from line 3. Enter here and on Part V, line 4	5	3,937,715.
6	Minimum investment return Enter 5% of line 5	6	196,886.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations an	d certain	
	foreign organizations check here 🕨 🔛 and do not complete this part.)		
1	Minimum investment return from Part X, line 6	1	196,886.
2a	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.)		
C	Add lines 2a and 2b	2c	4,113.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	192,773.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	192,773.
6	Deduction from distributable amount (see instructions)	6	0.
7_	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	192,773.
Į P	Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
a	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	133,653.
b	Program-related investments - total from Part IX-B	1b	0.
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:	1	
	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	133,653.
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	5	<u> </u>
6	Adjusted qualifying distributions Subtract line 5 from line 4	6	133,653.
	Note The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation of	qualifies fo	r the section

Form **990-PF** (2015)

4940(e) reduction of tax in those years.

Form 990-PF (2015) FAMILY FOUND	ATION, INC.		22-30	87695 Page 9
Part XIII Undistributed Income (see	nstructions)			
	(a)	(b)	(c)	(d)
	Corpus	Years prior to 2014	2014	2015
1 Distributable amount for 2015 from Part XI, line 7				192,773.
2 Undistributed income, if any, as of the end of 2015				
a Enter amount for 2014 only			109,602.	
b Total for prior years:				
		0.		
3 Excess distributions carryover, if any, to 2015:				
a From 2010				
b From 2011				
c From 2012				
d From 2013				
e From 2014				
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2015 from				
Part XII, line 4: ► \$ 133,653.			100 600	
a Applied to 2014, but not more than line 2a			109,602.	
b Applied to undistributed income of prior		,		
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus	0.			
(Election required - see instructions)				24,051.
d Applied to 2015 distributable amount	0.			24,051.
e Remaining amount distributed out of corpus 5 Excess distributions carryover applied to 2015	0.			0.
(If an amount appears in column (d), the same amount must be shown in column (a))	0.			0.
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	0.			
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		0.		
d Subtract line 6c from line 6b. Taxable				
amount - see instructions		0.		
e Undistributed income for 2014. Subtract line				
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2015. Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2016				168,722.
7 Amounts 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)	0.		- -	
8 Excess distributions carryover from 2010				
not applied on line 5 or line 7	0.			_
9 Excess distributions carryover to 2016	2			
Subtract lines 7 and 8 from line 6a	0.			
10 Analysis of line 9:)		Ĭ	
a Excess from 2011 b Excess from 2012				
c Excess from 2013				
C EXCESS HOLL 2013				

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e Excess from 2015

the foundation makes gifts, grants, etc. (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d.

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

SEE STATEMENT 13

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

c Any submission deadlines:

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

Form **990-PF** (2015)

Part XV Supplementary Information	(continued)			
3 Grants and Contributions Paid During the Y		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	recipient	**	
a Paid during the year				
ARMENIAN MARTYRS CONGREGATION			CHARITABLE	
100 EDWARDS AVE				
HAYERTOWN, PA 19083			EDUCATIONAL,	
			EVANGELISTIC, RELIEF,	2,500
ADLER APHASIA CENTER			GOAL IS TO SHARE THE	
60 w HUNTER AVE			GOOD NEWS, INVITE	
MAYWOOD, NJ 07607		1	FRIENDS, FAMILY,	
			NEIGHBORS AND	
			CO-WORKERS TO ATTEND	2,700
		1		
CHURCH OF THE RISEN KING		<u> </u>	BRIDGING POTENTIAL	
55 STARDUST RD			WITH OPPORTUNITIES FOR	
HILLSIDE, NJ 07642			EDUCATIONAL,	
			PROFESSIONAL AND PERSONAL GROWTH.	20,000
			FERSONAL GROWIN.	20,000
GO 4 THE GOAL FOUNDATION			IMPROVE THE LIVES OF	
215 CUTHBERT BLVD, SUITE 150			CHILDREN BATTLING	
CHERRY HILL, NJ 08002			CANCER BY PROVIDING	
·			FINANCIAL SUPPORT,	
	<u> </u>	ļ	DEVELOPING AND	11,250
HACKENSACK CARRIAGE HOUSE PASS THRU			CHARITABLE	
CONTRIBUTION			CHARTIABLE	
505 MAIN STREET		·		
HACKENSACK NJ 07601				3
	NTINUATION SHEE	T(S)	▶ 3a	133_653
b Approved for future payment				
NONE				
NONE			1	
			}	
				· · · · · · · · · · · · · · · · · · ·
			}	
		 		
Tabl		<u> </u>		
Total	·		<u>▶ 3b</u>	000 DE

Form **990-PF** (2015)

FAMILY FOUNDATION, INC.

Analysis of Income-Producing Activities

Inter gross amounts unless otherwise indicated.		Unrelated	Unrelated business income		ded by section 512, 513, or 514	(e)		
1 Program service revenue;		(a) Business code	(b) Amount	(C) Exclu- sion code	(d) Amount	Related or exempt function income		
-								
		1 1						
		1 1						
f		_		4				
-	s and contracts from government agencies			\perp				
	rship dues and assessments							
	t on savings and temporary cash			امما	24 524			
investn		 		14	34,604. 160,652.			
	ds and interest from securities			14	160,652.			
	tal income or (loss) from real estate:	1		\longrightarrow				
	t-financed property debt-financed property	 						
	tal income or (loss) from personal			1				
properi								
	ry nvestment income			16	11,212.			
	(loss) from sales of assets other			10	11,212.			
than in	• •]		18	<36,165.	>		
	ome or (loss) from special events			-	10 17 2 3 3			
	profit or (loss) from sales of inventory							
11 Other r								
a		_						
		_						
		1						
d		_						
e		_						
	al. Add columns (b), (d), and (e)		0.		170,303.	0.		
	Add line 12, columns (b), (d), and (e)				13	170,303.		
	sheet in line 13 instructions to verify calculations.)	·						
Part X	VI-B Relationship of Activities	to the Acco	mplishment of Ex	(emp	t Purposes			
Line No	Explain below how each activity for which in the foundation's exempt purposes (other than			contrib	uted importantly to the accom	plishment of		
	SECURITIES ARE HELD FO	`		T 373	TITE ADDDECTAN			
8	SECURITIES ARE HELD FO	OR INCOME	GENERATION	<u> </u>	LUE APPRECIAT	LON.		
								
								
				-				
								
								
	 							
	<u> </u>							

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Form 990			Y FOUNDAT						<u>3087695</u>		ge 13
Part >	(VII			sfers To a	and Trans	actions a	nd Relatio	nships With No	ncharitable	•	
*4 Did	the ere	Exempt Organ		of the follows	o with any oth	or organization	n decembed in o	nation FO1(a) of		Yes	No
		janization directly or indii other than section 501(c)			-			ection 50 f(c) of	ł	163	INU
		rom the reporting found				ontical organi	izations		Ì		
	Cash	rom the reporting rounds	ation to a nonchanta	inie everiiht ori	gamzation of.				1a(1)	}	х
• -	Other	assets							1a(2)		X
		sactions:							1.5.57		
(1)	Sales	of assets to a noncharita	ble exempt organiza	tion					1 <u>b(1)</u>	,)	X
								1b(2)		X	
		of facilities, equipment,	•	·					1b(3)		X
		ursement arrangements							1b(4)		X
(5)	Loans	or loan guarantees							1b(5)		X
(6)	Perfor	mance of services or me	embership or fundrai	sıng solicitatio	ons				1b(6)		X
		facilities, equipment, ma							1c	<u> </u>	X
d If th	ie answ	er to any of the above is	"Yes," complete the	following sche	dule. Column	(b) should alv	vays show the fa	ır market value of the ç	goods, other ass	ets,	
		given by the reporting f				ır market valu	e in any transact	ion or sharing arrange	ment, show in		
	 -	the value of the goods,	, — — — — — — — — — — — — — — — — — — —				T 7.0				
(a) Line n	0	(b) Amount involved	(c) Name of		e exempt organ	lization	(0) Descrip	tion of transfers, transaction	ons, and sharing ar	rangeme	nts
			<u> </u>	N/A							
			 								
							+				
	+		 				+				
	-		 				 				
	+-	·									
	+		 	 -							
											
	7-										
	_ _										
2a Ist	he four	dation directly or indirec	tly affiliated with, or	related to, one	or more tax-e	xempt organiz	zations describe	d			_
		501(c) of the Code (othe)(3)) or in sect	tion 527?				Yes	LX	∐ No
b lf "\	es," co	mplete the following sch			(5.) T			(a) December of a	alati a a a bi a		
		(a) Name of org	Janizadon		(b) Type of o	organization i		(c) Description of re	elationship		
		N/A			 						
					 		<u> </u>				
					 						
		·			 						
		penalties of perjury (deptale						the best of my knowledge	May the IRS	discuss i	thic
Sign	and be	lief, it is true, correct and do	molete Declaration of pi	reparer (other tha	in taxpayer) is ba	sed on all inform	nation of which prep	parer has any knowledge	return with the	e prepar	er
Here	l M		uv			$\{u\}\}$	TRUS	TEE	X Yes		No
	Sign	ature of officer of trustee		,	Date	7 7 -	Title		<u> </u>		
		Print/Type preparer's na	ame	Preparer's s	ignature		Date	Check if	PTIN		
				A		7 A	MA	self- employed			
Paid		WARREN L.		, M.	Northy .	<u> </u>			P00051		
Prepa		Firm's name ► J.	L. HOCHBE	ERG LLC	;			Firm's EIN ► 3	5-23202	21	
Use (Jilly	Firm's address > 90	10 W3 T27 C-	10 B B B							
		i i ii ii o auui too 🗩 🌱 []	IU MAIN ST	CR RCRCT				I			

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HACKENSACK, NJ 07601

Phone no. (201) 342-0167 Form **990-PF** (2015)

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

Department of the Treasury Internal Revenue Service

Schedule of Contributors

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

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

OMB No 1545-0047

Name of the organization

ROBERT S. & MARY JANE HEKEMIAN FAMILY FOUNDATION, INC.

Employer identification number

22-3087695

Organization type (check one)									
Filers of	:	Section:							
Form 99	0 or 990-EZ	501(c)() (enter number) organization							
		4947(a)(1) nonexempt charitable trust not treated as a private foundation							
		527 political organization							
Form 99	0-PF	X 501(c)(3) exempt private foundation							
		4947(a)(1) nonexempt charitable trust treated as a private foundation							
		501(c)(3) taxable private foundation							
	nly a section 501(c)(covered by the General Rule or a Special Rule . 7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See instructions							
	For an organization	filing Form 990, 990·EZ, or 990·PF that received, during the year, contributions totaling \$5,000 or more (in money or one contributor. Complete Parts I and II See instructions for determining a contributor's total contributions							
Special	Rules								
	sections 509(a)(1) any one contributo	described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from r, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, line 1. Complete Parts I and II							
	year, total contribu	described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the tions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for ruelty to children or animals Complete Parts I, II, and III							
	year, contributions is checked, enter h purpose Do not co	described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box ere the total contributions that were received during the year for an exclusively religious, charitable, etc., implete any of the parts unless the General Rule applies to this organization because it received nonexclusively e, etc., contributions totaling \$5,000 or more during the year							
but it mi	ust answer "No" on	nat is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)							

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2015)

Name of organization

ROBERT S. & MARY JANE HEKEMIAN

FAMILY FOUNDATION, INC.

Employer identification number

<u>22-3087695</u>

Part I	Contributors (see instructions) Use duplicate copies of Part I if	fadditional space is needed	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	HEKEMIAN & CO INC 505 MAIN ST HACKENSACK, NJ 07602	\$\$	Person X Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	ROBERT S HEKEMIAN 505 MAIN ST HACKENSACK, NJ 07602	\$\$	Person X Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3	AMAA 31 WEST CENTURY ROAD PARAMUS, NJ 07652	\$\$	Person X Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)

Name of organization

ROBERT S. & MARY JANE HEKEMIAN

FAMILY FOUNDATION, INC.

Employer identification number

22-3087695

	Noncash Property (see instructions) Use duplicate copies of P	art ii ii additional space is needed	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		Ψ	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received

-Part XV Supplementary Information 3. Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Foundation Purpose of grant or show any relationship to Amount status of contribution any foundation manager Name and address (home or business) recipient or substantial contributor DEL BARTON SCHOOL ADVANCEMENT OF 230 MENDHAM RD EDUCATION MORRISTOWN, NJ 07960 15,000. HACKENSACK ROTARY FOUNDATION CHARTTABLE 107 NANDERSON ST 2,000. HACKENSACK, NJ 07601 HOHOKUS EDUCATION FOUNDATION ADVANCEMENT OF EDUCATION 70 LLOYD RD 5,000. HOHOKUS NJ 07423 HOVANIAN SCHOOL ADVANCEMENT OF 817 RIVER RD EDUCATION OF ARMENIAN NEW MILFORD, NJ 07646 PEOPLE. 1,000. LINCOLN CENTER ADVANCEMENT OF THE 10 LINCOLN CENTER ARTS AND MUSIC. 25,000. NEW YORK, NY 10023 HUDSON FARM CLUB ADVANCEMENT OF 511 WARBURTON AVE KNOWLEDGE OF THE YONKERS, NY 10701 HUDSON RIVER VALLEY, 12,000. PHILLIP BEGONJA MEMORIAL FOUNDATION CHARITABLE 19 PARKER CT 1,500. FLORHAM PARK, NJ 07932 ST. GREGORY THE ENLIGHTENER CHARITABLE 1131 NORTH ST WHITE PLAINS, NY 10605 5,000. ST. MARY ARMENIAN CHURCH CHARITABLE 200 W MT PLEASANT AVE LIVINGSTON, NJ 07039 1,000. ST. JUDES CHARITABLE 262 DANNY THOMAS PLACE MEMPHIS TN 38105 500. Total from continuation sheets 97,200,

Supplementary Information Part XV 3. Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient Purpose of grant or contribution Foundation show any relationship to Amount status of any foundation manager Name and address (home or business) or substantial contributor recipient UMV FOUNDATION ADVANCEMENT OF 411 MAIN ST EDUCATION. BURLINGTON, VT 05401 25,000. NJSGA CADDIE SCHOLARSHIP ADVANCEMENT OF 3 GOLF DRIVE EDUCATION. 200. KENNELWORTH, NJ 07033 ST. LEON ARMENIAN CHURCH CHARITABLE 12-61 SADDLE RIVER RD FAIRLAWN, NJ 07410 1,000. THE CHARLES BILEZIKIAN MEMORIAL CHARITABLE 259 WILLOW ST YARMOUTH PORT, MA 02675 3,000. Total from continuation sheets

Part XV Supplementary Information
3a Grants and Contributions Paid During the Year Continuation of Purpose of Grant or Contribution
NAME OF RECIPIENT - ARMENIAN MARTYRS CONGREGATION
CHARITABLE
EDUCATIONAL, EVANGELISTIC, RELIEF, SOCIAL SERVIC, CHURCH AND CHILD CARE
MINISTRIES
NAME OF RECIPIENT - ADLER APHASIA CENTER
GOAL IS TO SHARE THE GOOD NEWS, INVITE FRIENDS, FAMILY, NEIGHBORS AND
CO-WORKERS TO ATTEND CHURCH SO THEY TOO HEAR AND UNDERSTAND WHAT IT
MEANS TO BE A FOLLOWER OF CHRIST, A DISCIPLE.
NAME OF RECIPIENT - GO 4 THE GOAL FOUNDATION
IMPROVE THE LIVES OF CHILDREN BATTLING CANCER BY PROVIDING FINANCIAL
SUPPORT, DEVELOPING AND IMPLEMENTING UNIQUE HOSPITAL PROGRAMS, FUNDING
INNOVATIVE RESEARCH, AND GRANTING PERSONAL WISHES

FORM 990-PF I	NTEREST	ON	SAVINGS	AND	TEMPORA	ARY	CASH	INV	ESTMENTS	ST	ATEMENT	1
SOURCE					(A) REVENUE ER BOOKS	5	NET	INV	B) ESTMENT OME		(C) ADJUSTED ET INCOME	i
GRANDVIEW ASSO	CIATES				34,60	04.			34,604.			_
TOTAL TO PART	I, LINE	3			34,60	04.			34,604.			
FORM 990-PF		DIVI	DENDS A	ND I	NTEREST	FRO	M SEC	URI	TIES	ST	'ATEMENT	
SOURCE		GRO		CAPI GAI DIVII		RE	(A) VENUE BOOK		(B) NET INVES MENT INCO		(C) ADJUSTE NET INCC	
F.R.E.I.T. OF JERSEY UBS FINANCIAL SERVICES	NEW),088.),564.		0.		50,08 10,56		50,08 110,56			_ -
TO PART I, LIN	E 4	160),652. ====================================		0.	1	60,65	2.	160,65	2.		
FORM 990-PF	 			ОТН	ER INCO	ME				ST	'ATEMENT	3
DESCRIPTION					RE	(A) VENU BOO			(B) T INVEST- NT INCOME		(C) ADJUSTED NET INCOM	
PARTNERSHIP INCOME				11,212.			11,212.					
TOTAL TO FORM	990-PF,	PAF	RT I, LI	NE 13	1	11	,212.		11,212	•	<u> </u>	_

FORM 990-PF	ACCOUNTI	S	TATEMENT 4		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME		(D) CHARITABLE PURPOSES	
ACCOUNTING	3,090.	0.		0.	
TO FORM 990-PF, PG 1, LN 16B	3,090.	0.		0.	
FORM 990-PF	OTHER E	XPENSES	S	TATEMENT 5	
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME		(D) CHARITABLE PURPOSES	
NJ ANNUAL REPORT	80.	0.		0.	
TO FORM 990-PF, PG 1, LN 23	ORM 990-PF, PG 1, LN 23 80. 0.				
FORM 990-PF OTHER DECREASE	S IN NET AS	SETS OR FUND I	BALANCES S	TATEMENT 6	
DESCRIPTION				AMOUNT	
TAX ON INVESTMENT INCOME - PR	IOR YEAR FO	RM 990-PF		1,215.	
TOTAL TO FORM 990-PF, PART II	I, LINE 5			1,215.	

				
FORM 990-PF RECEIVABLES DUE FROM OF	FICERS, DI	RECTORS, ETC.	STATEMENT	7
BORROWER'S NAME AND TITLE				
GRANDVIEW ASSOCIATES				
DATE OF MATURITY NOTE DATE TERMS OF REPAYMENT		INTEREST RATE	ORIGINAL LOAN AMOUN	r
		4.50%	979,00	00.
SECURITY PROVIDED BY BORROWER	PURPOSE O	F LOAN		
UNSECURED LOAN - OPEN END/MATURITY DATE & PAYMENT TERMS	EARNING O	F INTEREST INCO	ME	
	MV OF SIDERATION	BALANCE DUE	FMV OF LOAI	N
CASH	0.	961,572.	961,5	72.
TOTAL TO FORM 990-PF, PART II, LINE 6		961,572.	961,5	72.
FORM 990-PF CORPORA	TE STOCK		STATEMENT	8
DESCRIPTION		BOOK VALUE	FAIR MARKE	r
1,000 SHS E I DUPONT DE NEMOURS CO 54,215 SHS F.R.E.I.T. OF NEW JERSEY 2,000 SHS JOHNSON & JOHNSON 1,536 SHS EXXON MOBIL CORP 316 SHS HEWLETT PACKARD CO 18,408 SHS LAKELAND BANK 8,668 SHS BANK OF AMERICA 4,000 SHS CLARION GLOBAL R/E 44,679 SHS ORITANI FINANCIAL CORP 18 SHS ING CLARION GLOBAL R/E 5,000 SHS F.R.E.I.T. OF NEW JERSEY 200 SHS CHEMOURS CO		29,733. 711,754. 93,600. 42,144. 0. 148,195. 286,335. 0. 440,882. 0. 90,000.	69,69 1,138,44 238,69 133,8 251,2 139,9 717,9 104,9	67. 80. 47. 0. 69. 02. 0. 91.
TOTAL TO FORM 990-PF, PART II, LINE 10E	3	1,842,643.	2,794,7	51.

FORM 990-PF OTHER	INVESTMENTS		STATEMENT 9
DESCRIPTION	VALUATION METHOD	BOOK VALUE	FAIR MARKET VALUE
H-PKE LLC PARTNERSHIP INTEREST	COST	602,662.	602,662.
TOTAL TO FORM 990-PF, PART II, LINE 1	3	602,662.	602,662.

FORM 990-PF	LOANS	PAYABLE	TO OFF	ICERS,	DIRECTO	ORS, E	ETC.	STATEMENT	10
LENDER'S NA	ME AND TIT	LE							
PINNACLE FU	NDING, LLC	;							
DATE OF M	IATURITY 1 DATE	NTEREST RATE	TERMS	OF RE	PAYMENT				
		4.50%							
SECURITY PR	OVIDED BY	BORROWER		PURPO	SE OF L	OAN			
UNSECURED I		I END/MATU	RITY						
DESCRIPTION	OF CONSI	ERATION	COI	FMV O			GINAL AMOUNT	BALANCE I	UE
CASH				819	,000.		0.	819,	000.
TOTAL TO FO	DRM 990-PF,	PART II,	LINE :	20, CO	LUMN B			819,	000.
FORM 990-PE	7		OTHER	LIABI	LITIES			STATEMENT	11
DESCRIPTION	ī					воч	AMOUNT	EOY AMOUN	IT
CAPITAL DEF	FICIENCY IN	I A PARTNE	RSHIP		-		49,457.	49,	269.
TOTAL TO FO)RM 990-PF	PART II,	LINE :	22	-		49,457.	49,	269.

FORM 990-PF

LIST OF SUBSTANTIAL CONTRIBUTORS PART VII-A, LINE 10

STATEMENT 12

NAME OF CONTRIBUTOR

ADDRESS

ROBERT S. HEKEMIAN

17 OLD WOODS ROAD SADDLE RIVER, NJ 07548

FORM 990-PF GRANT APPLICATION SUBMISSION INFORMATION PART XV, LINES 2A THROUGH 2D

STATEMENT

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NAME AND ADDRESS OF PERSON TO WHOM APPLICATIONS SHOULD BE SUBMITTED

ROBERT S. HEKEMIAN, ROBERT S. & MARY JANE HEKEMIAN FAMILY FOUNDATION P.O. BOX 667, 505 MAIN STREET HACKENSACK, NJ 076020667

TELEPHONE NUMBER

201-487-1500

FORM AND CONTENT OF APPLICATIONS

WRITTEN NOTICE ACCOMPANIED BY IRS APPROVAL OF TAX-EXEMPT STATUS.

ANY SUBMISSION DEADLINES

NONE

RESTRICTIONS AND LIMITATIONS ON AWARDS

NONE