



See a Social Security Number? Say Something!
Report Privacy Problems to <https://public.resource.org/privacy>
Or call the IRS Identity Theft Hotline at 1-800-908-4490



Return of Private Foundation

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

2015

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 **DEC 1, 2015**, and ending **NOV 30, 2016**

Name of foundation
THE J W FOUNDATION

Number and street (or P O box number if mail is not delivered to street address) Room/suite
960 BROWERS POINT BRANCH

City or town, state or province, country, and ZIP or foreign postal code
WOODMERE, NY 11598

A Employer identification number
11-3412512

B Telephone number
(212) 644-9000

C If exemption application is pending, check here

D 1. Foreign organizations, check here
2. Foreign organizations meeting the 85% test, check here and attach computation

E If private foundation status was terminated under section 507(b)(1)(A), check here

F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here

G Check all that apply: Initial return Initial return of a former public charity
 Final return Amended return
 Address change Name change

H Check type of organization: Section 501(c)(3) exempt private foundation
 Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation

I Fair market value of all assets at end of year (from Part II, col. (c), line 16) **\$ 1,303.** J Accounting method: Cash Accrual
 Other (specify) _____

(Part I, column (d) must be on cash basis.)

Part I Analysis of Revenue and Expenses		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
1 Contributions, gifts, grants, etc., received		235,723.		N/A	
2 Check <input type="checkbox"/> if the foundation is not required to attach Sch B					
3 Interest on savings and temporary cash investments		5.	5.		STATEMENT 1
4 Dividends and interest from securities					
5a Gross rents					
b Net rental income or (loss)					
6a Net gain or (loss) from sale of assets not on line 10					
b Gross sales price for all assets on line 6a					
7 Capital gain net income (from Part IV, line 2)			0.		
8 Net short-term capital gain					
9 Income modifications					
10a Gross sales less returns and allowances					
b Less Cost of goods sold					
c Gross profit or (loss)					
11 Other income					
12 Total. Add lines 1 through 11		235,728.	5.		
13 Compensation of officers, directors, trustees, etc.		0.	0.		0.
14 Other employee salaries and wages					
15 Pension plans, employee benefits					
16a Legal fees					
b Accounting fees					
c Other professional fees					
17 Interest					
18 Taxes					
19 Depreciation and depletion					
20 Occupancy					
21 Travel, conferences, and meetings					
22 Printing and publications					
23 Other expenses		350.	300.		0.
24 Total operating and administrative expenses. Add lines 13 through 23		350.	300.		0.
25 Contributions, gifts, grants paid		299,678.			299,678.
26 Total expenses and disbursements. Add lines 24 and 25		300,028.	300.		299,678.
27 Subtract line 26 from line 12:					
a Excess of revenue over expenses and disbursements		-64,300.			
b Net investment income (if negative, enter -0-)			0.		
c Adjusted net income (if negative, enter -0-)				N/A	

RECEIVED
FEB 13 2017
OGDEN, UT
IRS-OSC

SCANNED MAP 2 2017

Part II Balance Sheets

Attached schedules and amounts in the description column should be for end-of-year amounts only

	Beginning of year	End of year	
	(a) Book Value	(b) Book Value	(c) Fair Market Value
Assets			
1 Cash - non-interest-bearing			
2 Savings and temporary cash investments	15,603.	1,303.	1,303.
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			
7 Other notes and loans receivable ▶			
Less: allowance for doubtful accounts ▶	50,000.	0.	0.
8 Inventories for sale or use			
9 Prepaid expenses and deferred charges			
10a Investments - U.S. and state government obligations			
b Investments - corporate stock			
c Investments - corporate bonds			
11 Investments - land, buildings, and equipment basis ▶			
Less accumulated depreciation			
12 Investments - mortgage loans			
13 Investments - other			
14 Land, buildings, and equipment: basis ▶			
Less accumulated depreciation			
15 Other assets (describe ▶)			
16 Total assets (to be completed by all filers - see the instructions. Also, see page 1, item I)	65,603.	1,303.	1,303.
Liabilities			
17 Accounts payable and accrued expenses			
18 Grants payable			
19 Deferred revenue			
20 Loans from officers, directors, trustees, and other disqualified persons			
21 Mortgages and other notes payable			
22 Other liabilities (describe ▶)			
23 Total liabilities (add lines 17 through 22)	0.	0.	
Net Assets or Fund Balances			
Foundations that follow SFAS 117, check here <input type="checkbox"/>			
and complete lines 24 through 26 and lines 30 and 31.			
24 Unrestricted			
25 Temporarily restricted			
26 Permanently restricted			
Foundations that do not follow SFAS 117, check here <input checked="" type="checkbox"/>			
and complete lines 27 through 31.			
27 Capital stock, trust principal, or current funds	0.	0.	
28 Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.	
29 Retained earnings, accumulated income, endowment, or other funds	65,603.	1,303.	
30 Total net assets or fund balances	65,603.	1,303.	
31 Total liabilities and net assets/fund balances	65,603.	1,303.	

Part III Analysis of Changes in Net Assets or Fund Balances

1 Total net assets or fund balances at beginning of year - Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)	1	65,603.
2 Enter amount from Part I, line 27a	2	-64,300.
3 Other increases not included in line 2 (itemize) ▶	3	0.
4 Add lines 1, 2, and 3	4	1,303.
5 Decreases not included in line 2 (itemize) ▶	5	0.
6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30	6	1,303.

Part IV Capital Gains and Losses for Tax on Investment Income

(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.)		(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a	NONE			
b				
c				
d				
e				
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)	
a				
b				
c				
d				
e				
Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col. (h))	
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any		
a				
b				
c				
d				
e				
2 Capital gain net income or (net capital loss)		{ If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 } 2		
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 8, column (c). If (loss), enter -0- in Part I, line 8			} 3	

Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income.)

If section 4940(d)(2) applies, leave this part blank.

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? Yes No

If "Yes," the foundation does not qualify under section 4940(e). Do not complete this part.

1 Enter the appropriate amount in each column for each year; see the instructions before making any entries.

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col. (b) divided by col. (c))
2014	403,231.	132,386.	3.045873
2013	758,788.	406,883.	1.864880
2012	395,763.	243,958.	1.622259
2011	265,726.	63,326.	4.196160
2010	271,430.	72,469.	3.745464
2 Total of line 1, column (d)			14.474636
3 Average distribution ratio for the 5-year base period - divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years			2.894927
4 Enter the net value of noncharitable-use assets for 2015 from Part X, line 5			56,310.
5 Multiply line 4 by line 3			163,013.
6 Enter 1% of net investment income (1% of Part I, line 27b)			0.
7 Add lines 5 and 6			163,013.
8 Enter qualifying distributions from Part XII, line 4 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 Part VI instructions.			299,678.

Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see instructions)

1a Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> 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 here <input checked="" type="checkbox"/> and enter 1% of Part I, line 27b		1	0.
c 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	0.
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	0.
6 Credits/Payments:			
a 2015 estimated tax payments and 2014 overpayment credited to 2015	6a		
b Exempt foreign organizations - tax withheld at source	6b		
c Tax paid with application for extension of time to file (Form 8868)	6c		
d Backup withholding erroneously withheld	6d		
7 Total credits and payments. Add lines 6a through 6d		7	0.
8 Enter any penalty for underpayment of estimated tax. Check here <input type="checkbox"/> 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	0.
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 <input type="checkbox"/> Refunded <input checked="" type="checkbox"/>		11	

Part VII-A Statements Regarding Activities

	Yes	No
1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?		X
1b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definition)? 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.		X
1c Did the foundation file Form 1120-POL for this year?		X
2 Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: (1) On the foundation. <input type="checkbox"/> \$ 0. (2) On foundation managers. <input type="checkbox"/> \$ 0.		
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. <input type="checkbox"/> \$ 0.		
2 Has the foundation engaged in any activities that have not previously been reported to the IRS? If "Yes," attach a detailed description of the activities.		X
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		X
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?		X
b If "Yes," has it filed a tax return on Form 990-T for this year?		N/A
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? If "Yes," attach the statement required by General Instruction T.		X
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?	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	X	
8a Enter the states to which the foundation reports or with which it is registered (see instructions) <input type="checkbox"/> <u>NY</u>		
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	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		X
10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses		X

Part VII-A Statements Regarding Activities (continued)

11 At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)
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)
13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application?
Website address N/A
14 The books are in care of JEFFREY & SHARONA WEINBERG Telephone no. 212-972-3600
Located at 960 BROWERS POINT BRANCH, WOODMERE, NY ZIP+4 11598
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 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, securities, or other financial account in a foreign country? See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the foreign country

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required

File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.

1a During the year did the foundation (either directly or indirectly):
(1) Engage in the sale or exchange, or leasing of property with a disqualified person?
(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?
(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?
(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?
(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)?
(6) Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.)
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)? Organizations relying on a current notice regarding disaster assistance check here
c Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2015?
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)):
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 before 2015? If "Yes," list the years
b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement - see instructions.)
c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.
3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?
b If "Yes," did it have excess business holdings in 2015 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2015.)
4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?
b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2015?

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:

(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))? Yes No

(2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, any voter registration drive? Yes 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, or educational 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 under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)? Yes No
 Organizations relying on a current notice regarding disaster assistance check here **N/A**

c If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? Yes No **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 a personal benefit contract? Yes No

b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? Yes No
 If "Yes" to 6b, file Form 8870.

7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? Yes No

b If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction? Yes No **N/A**

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.

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
JEFFREY WEINBERG 960 BROWERS POINT BRANCH WOODMERE, NY 11598	TRUSTEE 2.00	0.	0.	0.
SHARONA WEINBERG 960 BROWERS POINT BRANCH WOODMERE, NY 11598	TRUSTEE 1.00	0.	0.	0.

2 Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE."

(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE				

Total number of other employees paid over \$50,000 0

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)

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 statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, 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	
Total. Add lines 1 through 3 ▶	0.

Part X

Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions)

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
a	Average monthly fair market value of securities	1a	0.
b	Average of monthly cash balances	1b	57,168.
c	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	57,168.
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation)	1e	0.
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	57,168.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	858.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	56,310.
6	Minimum investment return. Enter 5% of line 5	6	2,816.

Part XI

Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here and do not complete this part.)

1	Minimum investment return from Part X, line 6	1	2,816.
2a	Tax on investment income for 2015 from Part VI, line 5	2a	
b	Income tax for 2015. (This does not include the tax from Part VI.)	2b	
c	Add lines 2a and 2b	2c	0.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	2,816.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	2,816.
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	2,816.

Part XII

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	299,678.
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:		
a	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	299,678.
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	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	299,678.

Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years.

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2014	(c) 2014	(d) 2015
1 Distributable amount for 2015 from Part XI, line 7				2,816.
2 Undistributed income, if any, as of the end of 2015				
a Enter amount for 2014 only			0.	
b Total for prior years:		0.		
3 Excess distributions carryover, if any, to 2015:				
a From 2010	270,307.			
b From 2011	262,560.			
c From 2012	383,565.			
d From 2013	738,444.			
e From 2014	396,612.			
f Total of lines 3a through e	2,051,488.			
4 Qualifying distributions for 2015 from Part XII, line 4: ▶ \$	299,678.			
a Applied to 2014, but not more than line 2a			0.	
b Applied to undistributed income of prior years (Election required - see instructions)		0.		
c Treated as distributions out of corpus (Election required - see instructions)	0.			
d Applied to 2015 distributable amount				2,816.
e Remaining amount distributed out of corpus	296,862.			
5 Excess distributions carryover applied to 2015 (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	2,348,350.			
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				0.
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	270,307.			
9 Excess distributions carryover to 2016. Subtract lines 7 and 8 from line 6a	2,078,043.			
10 Analysis of line 9:				
a Excess from 2011	262,560.			
b Excess from 2012	383,565.			
c Excess from 2013	738,444.			
d Excess from 2014	396,612.			
e Excess from 2015	296,862.			

Part XIV Private Operating Foundations (see instructions and Part VII-A, question 9)

N/A

1 a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2015, enter the date of the ruling

b Check box to indicate whether the foundation is a private operating foundation described in section 4942(j)(3) or 4942(j)(5)

2 a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed

Table with columns: Tax year (a) 2015, (b) 2014, (c) 2013, (d) 2012, (e) Total. Rows include 85% of line 2a, Qualifying distributions from Part XII, Amounts included in line 2c not used directly for active conduct of exempt activities, Qualifying distributions made directly for active conduct of exempt activities, and alternative tests (Assets, Endowment, Support, Gross investment income).

b 85% of line 2a

c Qualifying distributions from Part XII, line 4 for each year listed

d Amounts included in line 2c not used directly for active conduct of exempt activities

e Qualifying distributions made directly for active conduct of exempt activities

3 Complete 3a, b, or c for the alternative test relied upon:

a "Assets" alternative test - enter: (1) Value of all assets

(2) Value of assets qualifying under section 4942(j)(3)(B)(i)

b "Endowment" alternative test - enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed

c "Support" alternative test - enter:

(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)

(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)

(3) Largest amount of support from an exempt organization

(4) Gross investment income

Part XV Supplementary Information (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year-see instructions.)

1 Information Regarding Foundation Managers:

a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000). (See section 507(d)(2).)

JEFFREY WEINBERG

b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest.

NONE

2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:

Check here [X] if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If 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:

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:

Part XV Supplementary Information (continued)

3 Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<i>a Paid during the year</i>				
CONTRIBUTIONS PAID TO VARIOUS CHARITIES (SEE ATTACHED SCHEDULES)		PUBLIC CHARITY	CHARITABLE CAUSES	299,678.
Total			▶ 3a	299,678.
<i>b Approved for future payment</i>				
NONE				
Total			▶ 3b	0.

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

2015

Name of the organization

THE J W FOUNDATION

Employer identification number

11-3412512

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

501(c)() (enter number) organization

4947(a)(1) nonexempt charitable trust not treated as a private foundation

527 political organization

Form 990-PF

501(c)(3) exempt private foundation

4947(a)(1) nonexempt charitable trust treated as a private foundation

501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.

Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

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 property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Do not complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year ▶ \$ _____

Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

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 THE J W FOUNDATION	Employer identification number 11-3412512
---	---

Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	JEFFREY WEINBERG 960 BROWERS POINT BRANCH WOODMERE, NY 11598	\$ 235,723.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
	_____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
	_____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
	_____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
	_____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
	_____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization THE J W FOUNDATION	Employer identification number 11-3412512
---	---

Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$ _____	
		\$ _____	
		\$ _____	
		\$ _____	
		\$ _____	
		\$ _____	
		\$ _____	

Name of organization THE J W FOUNDATION	Employer identification number 11-3412512
---	---

Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year (Enter this info once) ▶ \$ _____
Use duplicate copies of Part III if additional space is needed.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	

FORM 990-PF INTEREST ON SAVINGS AND TEMPORARY CASH INVESTMENTS STATEMENT 1

SOURCE	(A) REVENUE PER BOOKS	(B) NET INVESTMENT INCOME	(C) ADJUSTED NET INCOME
MERRILL LYNCH	5.	5.	
TOTAL TO PART I, LINE 3	5.	5.	

FORM 990-PF OTHER EXPENSES STATEMENT 2

DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
BROKERAGE FEES	300.	300.		0.
NEW YORK STATE FILING FEES	50.	0.		0.
TOTAL TO FORM 990-PF, PG 1, LN 23	350.	300.		0.

Attach to Form 990-PF

JW FOUNDATION

Account Number: 5AV-02266

24-Hour Assistance: (866) 4MLBUSINESS
Access Code: 51-528-02266

YOUR WCMA TRANSACTIONS

December 01, 2015 - December 31, 2015

Date	Transaction Type	Quantity	Description	Debit	Credit
12/31	Wire Transfer		WIRE TRF IN D45365011730 ORG=/42911590 42911590 -		150,000.00
12/31	Wire Transfer		WIRE TRF IN D45365011956 ORG=/42911590 42911590 -		50,000.00
12/07	Subtotal (Electronic Transfers)			300.00	200,000.00
	Account Fee		ACCOUNT FEE	300.00	
	Subtotal (Other Debits/Credits)			300.00	
	NET TOTAL				199,700.00

CHECKS WRITTEN/BILL PAYMENT

Date Written	Date Cleared	Check Number	Description	Debit	Credit
11/06	12/29	1689	YANA	1,000.00	
12/09	12/21	2173*	TASHBAR	500.00	
11/08	12/21	2298*	MIIKAN MEIR	36.00	
12/17	12/22	2351*	BILYAVI MISHKAN EVNEH INC	1,200.00	
12/10	12/16	2452*	CAMERA	36.00	
12/10	12/21	2453	GUSH ETZION FDN	180.00	
12/10	12/17	2454	FRIENDS OF HAMAR	1,000.00	
12/23	12/29	2455	YESHIVA KETANA OF LONG ISLAND	750.00	
10/12	12/30	2487*	MESIVTA OF LONG BEACH	36.00	
			NET TOTAL	4,738.00	

* Indicates gap in check sequence

To report Lost or Stolen Visa Cards or Checks, please call (800) CMA-LOST.

YOUR WCMA MONEY ACCOUNT TRANSACTIONS

Date	Description	Withdrawals	Deposits	Date	Description	Withdrawals	Deposits
12/07	ML BANK DEPOSIT PROGRAM	300.00		12/22	MIL BANK DEPOSIT PROGRAM		1,200.00

+

JWI FOUNDATION

Account Number: 5AV-02266

24-Hour Assistance: (866) 4MLBUSINESS
Access Code: 51-528-02266

YOUR WCMA TRANSACTIONS

January 01, 2016 - January 29, 2016

CHECKS WRITTEN/BILL PAYMENT				Debit	Credit
Date Written	Date Cleared	Check Number	Description		
01/01	01/05	2088	YOSS	180.00	
01/01	01/07	2089	YESHIVA HIGH SCHOOL OF GREATER	1,000.00	
01/15	01/25	2091*	NCSY	15,000.00	
12/31	01/08	2293*	HALB	7,500.00	
12/31	01/07	2295*	YESHIVA	5,000.00	
01/18	01/28	2296	BRAINER	3,200.00	
12/01	01/05	2299*	AISH KODEL	20,000.00	
01/11	01/28	2300	BRAINER	1,800.00	
01/11	01/25	2316*	GROVE STRESS MIKVAH	10,000.00	
01/11	01/13	2319*	CHABAD FIVE	15,000.00	
01/07	01/08	2322*	LEV L'ACHIN	1,800.00	
01/07	01/08	2323	CONG TIFERES TZVI	500.00	
01/07	01/11	2324	CHEVRA TZEDOKA VOCHESED	500.00	
01/07	01/07	2325	KNESSET YEHUDA	5,000.00	
01/19	01/25	2367*	MERKAZ HAKOLILIM	1,000.00	
NET TOTAL				87,480.00	

* Indicates gap in check sequence

To report Lost or Stolen Visa Cards or Checks, please call (800) CMA-LOST.

YOUR WCMA MONEY ACCOUNT TRANSACTIONS

Date	Description	Withdrawals	Deposits	Date	Description	Withdrawals	Deposits
01/04	ML BANK DEPOSIT PROGRAM		200,000.00	01/13	ML BANK DEPOSIT PROGRAM	15,000.00	
01/05	ML BANK DEPOSIT PROGRAM	20,180.00		01/25	ML BANK DEPOSIT PROGRAM	26,000.00	
01/07	ML BANK DEPOSIT PROGRAM	11,000.00		01/28	ML BANK DEPOSIT PROGRAM	5,000.00	
01/08	ML BANK DEPOSIT PROGRAM	9,800.00		01/29	ML BANK DEPOSIT PROGRAM		1.00
01/11	ML BANK DEPOSIT PROGRAM	500.00					
NET TOTAL							112,521.00

+

JW FOUNDATION

Account Number: 5AV-02266

24-Hour Assistance: (866) 4MLBUSINESS
Access Code: 51-528-02266

YOUR WCMA TRANSACTIONS

January 30, 2016 - February 29, 2016

Date Written	Date Cleared	Check Number	Description	Debit	Credit
01/23	02/04	2290	AMERICAN FRIENDS OF IDF ROBBIN		
02/11	02/16	2297*	BILVAVI MISHKA EVNEH	1,200.00	
02/03	02/11	2352*	YOUNG ISRAEL OF BAL HARBOUR	180.00	
02/01	02/08	2355*	ORLANDO TORAH ACADEMY	360.00	
02/18	02/25	2357*	YESHIVA YADIL TORAH	1,000.00	
02/16	02/22	2358	CONG BASS MED	360.00	
01/31	02/05	2359	CONG YECHESKAL SHRAGA	100.00	
02/12	02/29	2364*	YEHIVA MEOR HATORAH	250.00	
01/15	02/09	2370*	TORRES	1,800.00	
01/15	02/29	2372*	AMERICAN FRIENDS OF IDF ROBBIN	360.00	
NET TOTAL				9,937.00	

* Indicates gap in check sequence

To report Lost or Stolen Visa Cards or Checks, please call (800) CMA-LOST.

YOUR WCMA MONEY ACCOUNT TRANSACTIONS

Date	Description	Withdrawals	Deposits	Date	Description	Withdrawals	Deposits
02/04	ML BANK DEPOSIT PROGRAM	4,327.00		02/16	ML BANK DEPOSIT PROGRAM	1,200.00	
02/05	ML BANK DEPOSIT PROGRAM	100.00		02/22	ML BANK DEPOSIT PROGRAM	360.00	
02/08	ML BANK DEPOSIT PROGRAM	360.00		02/25	ML BANK DEPOSIT PROGRAM	1,000.00	
02/09	ML BANK DEPOSIT PROGRAM	1,800.00		02/29	ML BANK DEPOSIT PROGRAM	610.00	
02/11	ML BANK DEPOSIT PROGRAM	180.00					
NET TOTAL				NET TOTAL		9,937.00	

+

JW FOUNDATION

Account Number: 5AV-02266

24-Hour Assistance: (866) 4MILBUSINESS
Access Code: 51-528-02266

YOUR WCMA TRANSACTIONS

March 01, 2016 - March 31, 2016

CHECKS WRITTEN/BILL PAYMENT

Date Written	Date Cleared	Check Number	Description	Debit	Credit
02/20	03/07	2092	CONREGATION SHARAY TEFILAH	500.00	
02/22	03/07	2093	OROT CHESED MEIRAV	2,000.00	
02/22	03/02	2094	YAD RACHAMIM	1,000.00	
02/24	03/09	2095	MANHATTAN JEWISH EXPERIENCE	760.00	
03/01	03/09	2096	BNOS BAIS YAAKOV	1,800.00	
03/01	03/08	2097	TAG	1,800.00	
03/16	03/18	2099*	YESHIVA SOUTH SHORE	10,000.00	
03/16	03/21	2100	LEVI YITZCHOK LIBRARY	180.00	
03/21	03/30	2181*	YTC	1,000.00	
03/24	03/28	2182	PAYEE UNRECORDED	1,000.00	
08/24	03/29	2197*	OHR NAFTAI	1,000.00	
03/24	03/30	2198	HANC	1,800.00	
02/13	03/01	2310*	YAD CHAYA	500.00	
03/14	03/23	2356*	BILVAVI MISHKAN EVNEH INC	1,200.00	
03/17	03/17	2361*	TORAH UNIVERSAL	1,000.00	
03/16	03/22	2363*	NEVEL ZION	5,000.00	
02/22	03/02	2365*	YESHIVA ELEM SCH	250.00	
03/18	03/23	2368*	AMERICAN FRIENDS OF INC	1,000.00	
03/21	03/31	2373*	BADEKD	500.00	
03/23	03/30	2374	SHOR	1,000.00	
03/21	03/29	2375	SHOR YUSHUV INST	250.00	
03/19	03/22	2376	AISH KODEL	1,800.00	
03/29	03/31	2379*	BASKINS BAIS M	1,000.00	
03/04	03/31	2381*	K A C	5,000.00	
03/24	03/28	2382	EMERGENCY AID FUND	500.00	
03/24	03/28	2383	HERITAGE RETREATS	360.00	
03/24	03/29	2386*	YYH	500.00	
03/24	03/30	2387	YANA	500.00	
03/24	03/28	2388	YESHIVA ATEREI	1,000.00	
03/24	03/29	2391*	KOLLEL ZICHON MORDECHAI	2,500.00	
02/24	03/28	2392	YESHIVA GEDOLAH OF FIVE TOWNS	2,500.00	

+



JWI FOUNDATION Account Number: 5AV-02266

YOUR WCMA TRANSACTIONS

March 01, 2016 - March 31, 2016

CHECKS WRITTEN/BILL PAYMENT (continued)				Debit	Credit
Date Written	Date Cleared	Check Number	Description		
03/24	03/30	2394*	YANA	180.00	
03/24	03/28	2396*	ESMF	2,500.00	
03/24	03/28	2397	CHAIM TOVIN INC	1,000.00	
03/04	03/31	2398	SIACH YITZCHUH	1,800.00	
03/20	03/22	2460*	BNOS BAIS YAAKOV	1,800.00	
03/24	03/30	2471*	TOVA	500.00	
03/23	03/31	2472	ITF	1,000.00	
NET TOTAL				57,980.00	

* Indicates gap in check sequence

To report Lost or Stolen Visa Cards or Checks, please call (800) CMA-LOST.

YOUR WCMA MONEY ACCOUNT TRANSACTIONS

Date	Description	Withdrawals	Deposits	Date	Description	Withdrawals	Deposits
03/01	ML BANK DEPOSIT PROGRAM	499.00		03/21	ML BANK DEPOSIT PROGRAM	180.00	
03/02	ML BANK DEPOSIT PROGRAM	1,250.00		03/22	ML BANK DEPOSIT PROGRAM	8,600.00	
03/07	ML BANK DEPOSIT PROGRAM	2,500.00		03/23	ML BANK DEPOSIT PROGRAM	2,199.00	
03/08	ML BANK DEPOSIT PROGRAM	1,800.00		03/28	ML BANK DEPOSIT PROGRAM	8,860.00	
03/09	ML BANK DEPOSIT PROGRAM	2,560.00		03/29	ML BANK DEPOSIT PROGRAM	4,250.00	
03/17	ML BANK DEPOSIT PROGRAM	1,000.00		03/30	ML BANK DEPOSIT PROGRAM	4,980.00	
03/18	ML BANK DEPOSIT PROGRAM	10,000.00		03/31	ML BANK DEPOSIT PROGRAM	9,300.00	
NET TOTAL						57,978.00	

+

JW FOUNDATION

Account Number: 5AV-02266

24-Hour Assistance: (866) 4MLBUSINESS
Access Code: 51-528-02266

YOUR WCMA TRANSACTIONS

April 01, 2016 - April 29, 2016

CASH/OTHER TRANSACTIONS

Date	Transaction Type	Quantity	Description	Debit	Credit
04/12	Wire Transfer		WIRE TRF IN D46103018014		65,000.00
			ORG=/80001564823 JEFFREY		65,000.00
Subtotal (Electronic Transfers)					65,000.00
NET TOTAL					65,000.00

CHECKS WRITTEN/BILL PAYMENT

Date Written	Date Cleared	Check Number	Description	Debit	Credit
04/10	04/12	1900	BETH AARON V'ISRAEL	2,500.00	
03/24	04/05	2179*	RAMETE TORAL SCHOOLS	500.00	
03/24	04/07	2188*	YRSRH	500.00	
04/03	04/05	2326*	YESHIVA OF TOWNS	500.00	
04/13	04/15	2332*	AMERICAN FRIENDS OF YESHIVA TI	500.00	
04/04	04/05	2334*	MERCED CONGREGATION	180.00	
04/04	04/05	2335	AISH KODEL	1,800.00	
04/01	04/14	2342*	BILVAN EVNEH	1,200.00	
04/13	04/18	2343	PAYEE UNRECORDED	500.00	
04/15	04/19	2345*	RABBI DISCRETIONARY FUND	1,500.00	
03/24	04/05	2353*	BEN OF ROCKLAND	2,000.00	
03/27	04/19	2360*	YV CONNOR	1,000.00	
N/A	04/01	2362*#	BETH MEDRASH OHR	360.00	
03/14	04/21	2366*	SUITS OF KINDNESS	500.00	
03/17	04/15	2369*	AGUDATH ISRAEL CHARITY	500.00	
03/22	04/07	2371*	BM OF YRSRH	500.00	
03/20	04/07	2377*	SHEETA SEMINARY	5,000.00	
03/22	04/06	2378	BAIS AHARON	360.00	
03/24	04/14	2384*	TSEDEK	1,000.00	
03/24	04/01	2385	TAL TACHIGA	1,000.00	
03/24	04/05	2389*	ISRAEL FUND	2,500.00	
03/24	04/12	2393*	YESHIV OHR MEIR	1,000.00	
03/24	04/06	2395*	ZICHRON MENACCHI	500.00	

+



JW FOUNDATION

Account Number: 5AV-02266

YOUR WCMA TRANSACTIONS

April 01, 2016 - April 29, 2016

CHECKS WRITTEN/BILL PAYMENT (continued)

Date Written	Date Cleared	Check Number	Description	Debit	Credit
03/23	04/14	2456*	LIFE	2,000.00	
03/24	04/01	2461*	JEP	1,000.00	
04/15	04/19	2462	SIACH YITZCHOK	720.00	
03/24	04/11	2464*	YESHIVA BONIM CAMAKOM	1,000.00	
03/24	04/01	2470*	MEDRAJOS	750.00	
03/24	04/01	2473*	CONG CHEVRA SHAS INC	1,000.00	
04/14	04/15	2474	AISH KODESH	1,280.00	
NET TOTAL				33,650.00	

* Indicates gap in check sequence

Check converted to ACH debit by payee

To report Lost or Stolen Visa Cards or Checks, please call (800) CMA-LOST.

YOUR WCMA MONEY ACCOUNT TRANSACTIONS

Date	Description	Withdrawals	Deposits	Date	Description	Withdrawals	Deposits
04/01	ML BANK DEPOSIT PROGRAM	4,110.00		04/14	ML BANK DEPOSIT PROGRAM	4,200.00	
04/05	ML BANK DEPOSIT PROGRAM	7,480.00		04/15	ML BANK DEPOSIT PROGRAM	2,280.00	
04/06	ML BANK DEPOSIT PROGRAM	860.00		04/18	ML BANK DEPOSIT PROGRAM	500.00	
04/07	ML BANK DEPOSIT PROGRAM	6,000.00		04/19	ML BANK DEPOSIT PROGRAM	3,220.00	
04/11	ML BANK DEPOSIT PROGRAM	1,000.00		04/21	ML BANK DEPOSIT PROGRAM	500.00	
04/13	ML BANK DEPOSIT PROGRAM		61,500.00				
NET TOTAL							31,350.00

JW FOUNDATION

Account Number: 5AV-02266

24-Hour Assistance: (866) 4MLBUSINESS
Access Code: 51-528-02266

YOUR WCMA TRANSACTIONS

April 30, 2016 - May 31, 2016

CHECKS WRITTEN/BILL PAYMENT

Date Written	Date Cleared	Check Number	Description	Debit	Credit
03/24	05/16	2180	OORAH	500.00	
05/12	05/17	2336*	AMERICA FRIENDS OF KETER TORAH	5,400.00	
04/11	05/05	2337	CONG BAIS AHRON	1,000.00	
05/19	05/26	2339*	NCSY	1,800.00	
04/07	05/11	2340	ZICHRON ZVI ELIMELECH	1,000.00	
05/15	05/26	2341	NCSY SUMMER	25,000.00	
05/11	05/24	2346*	PAUL & ROSE WIENER RABBINACAL	1,800.00	
04/02	05/26	2347	CHICAGO COMMUNITY KOLLEL	500.00	
05/15	05/17	2348	AVON VRIEHEL ZICHRON KEDOSHIM	1,000.00	
05/09	05/11	2349	YESHIVA OF PASSAIC	1,800.00	
03/30	05/19	2354*	AGUDATH ISRAEL CHARITY	4,000.00	
05/03	05/27	2399*	KIDS OF COURAGE	1,000.00	
04/15	05/11	2427*	GEMILAS CHESSSED	1,000.00	
05/12	05/20	2475*	L M F	6,000.00	
NET TOTAL				51,800.00	

* Indicates gap in check sequence

To report Lost or Stolen Visa Cards or Checks, please call (800) CMA-LOST.

YOUR WCMA MONEY ACCOUNT TRANSACTIONS

Date	Description	Withdrawals	Deposits	Date	Description	Withdrawals	Deposits
05/02	ML BANK DEPOSIT PROGRAM		1.00	05/19	ML BANK DEPOSIT PROGRAM	4,000.00	
05/05	ML BANK DEPOSIT PROGRAM	1,000.00		05/20	ML BANK DEPOSIT PROGRAM	6,000.00	
05/11	ML BANK DEPOSIT PROGRAM	3,800.00		05/24	ML BANK DEPOSIT PROGRAM	1,800.00	
05/16	ML BANK DEPOSIT PROGRAM	500.00		05/26	ML BANK DEPOSIT PROGRAM	27,300.00	
05/17	ML BANK DEPOSIT PROGRAM	6,400.00		05/27	ML BANK DEPOSIT PROGRAM	1,000.00	
NET TOTAL						51,799.00	

+

JW FOUNDATION

Account Number: 5AV-02266

24-Hour Assistance: (866) 4MLBUSINESS
Access Code: 51-528-02266

YOUR WCMA TRANSACTIONS

June 01, 2016 - June 30, 2016

Date Written	Date Cleared	Check Number	Description	Debit	Credit
06/07	06/15	1898	KNESSET	100.00	
05/26	06/06	2053*	TIFERET CTR	10,000.00	
05/23	06/02	2318*	FRIENDS OF TSEDER	200.00	
05/27	06/03	2333*	PROJECT EXTREME	1,800.00	
05/26	06/09	2350*	PEF ISRAEL ENDOWMENT FUND	5,000.00	
03/24	06/09	2390*	CHAI LIFELINE	500.00	
06/01	06/07	2577*	YESHIVA OF GREATER WASHINGTON	2,000.00	
NET TOTAL				19,600.00	

* Indicates gap in check sequence

To report Lost or Stolen Visa Cards or Checks, please call (800) CMA-LOST.

YOUR WCMA MONEY ACCOUNT TRANSACTIONS

Date	Description	Withdrawals	Deposits	Date	Description	Withdrawals	Deposits
06/02	ML BANK DEPOSIT PROGRAM	200.00		06/07	ML BANK DEPOSIT PROGRAM	2,000.00	
06/03	ML BANK DEPOSIT PROGRAM	1,800.00		06/09	ML BANK DEPOSIT PROGRAM	5,500.00	
06/06	ML BANK DEPOSIT PROGRAM	10,000.00		06/15	ML BANK DEPOSIT PROGRAM	100.00	
NET TOTAL						19,600.00	

+

JW FOUNDATION

Account Number: 5AV-02266

24-Hour Assistance: (866) 4MLBUSINESS
Access Code: 51-528-02266

YOUR WCMA TRANSACTIONS

July 01, 2016 - July 29, 2016

CHECKS WRITTEN/BILL PAYMENT

Date Written	Date Cleared	Check Number	Description	Debit	Credit
07/01	07/13	2380	BILVAVI MISHKAN EVNEH INC	600.00	
06/08	07/05	2576*	TIFERET CTR	10,000.00	
07/02	07/22	2588*	YESHIVA DORESH	1,000.00	
07/02	07/12	2589	AISH KODAH	1,000.00	
NET TOTAL				12,600.00	

* Indicates gap in check sequence

To report Lost or Stolen Visa Cards or Checks, please call (800) CMA-LOST.

YOUR WCMA MONEY ACCOUNT TRANSACTIONS

Date	Description	Withdrawals	Deposits	Date	Description	Withdrawals	Deposits
07/05	ML BANK DEPOSIT PROGRAM	10,000.00		07/13	ML BANK DEPOSIT PROGRAM	600.00	
07/12	ML BANK DEPOSIT PROGRAM	1,000.00		07/22	ML BANK DEPOSIT PROGRAM	1,000.00	
NET TOTAL						12,600.00	

JW FOUNDATION

Account Number: 5AV-02266

24-Hour Assistance: (866) 4MLBUSINESS
Access Code: 51-528-02266

YOUR WCMA TRANSACTIONS

July 30, 2016 - August 31, 2016

CASH/OTHER TRANSACTIONS

Date	Transaction Type	Quantity	Description	Debit	Credit
08/10	Wire Transfer		WIRE TRF IN D46223018410		25,000.00
			ORG=/80001564823 JEFFREY		25,000.00
Subtotal (Electronic Transfers)					25,000.00
NET TOTAL					25,000.00

CHECKS WRITTEN/BILL PAYMENT

Date Written	Date Cleared	Check Number	Description	Debit	Credit
08/12	08/30	2585	OHFL	3,600.00	
08/15	08/26	2586	NCSY	1,000.00	
07/09	08/30	2592*	CHABAD	500.00	
07/17	08/08	2593	SHEFA CHAIM	250.00	
NET TOTAL				5,350.00	

* Indicates gap in check sequence

To report Lost or Stolen Visa Cards or Checks, please call (800) CMA-LOST.

YOUR WCMA MONEY ACCOUNT TRANSACTIONS

Date	Description	Withdrawals	Deposits	Date	Description	Withdrawals	Deposits
08/01	ML BANK DEPOSIT PROGRAM		1.00	08/26	ML BANK DEPOSIT PROGRAM	1,000.00	
08/08	ML BANK DEPOSIT PROGRAM	250.00		08/30	ML BANK DEPOSIT PROGRAM	4,100.00	
08/11	ML BANK DEPOSIT PROGRAM		25,000.00				
NET TOTAL							19,651.00

JW FOUNDATION

Account Number: 5AV-02266

24-Hour Assistance: (866) 4MLBUSINESS
Access Code: 51-528-02266

YOUR WCMA TRANSACTIONS

September 01, 2016 - September 30, 2016

CHECKS WRITTEN/BILL PAYMENT

Date Written	Date Cleared	Check Number	Description	Debit	Credit
09/21	09/26	2309	FRIENDS OF ITAMAR	1,000.00	
08/21	09/16	2458*	RIRKA MOSKOWITZ GENILUS CHESSE	10,000.00	
09/08	09/26	2459	LEVI YITZCHOK LIBRARY	180.00	
09/24	09/28	2469*	KOL YEHUDA	1,800.00	
09/26	09/29	2501*	MESIVTA SANZ	100.00	
09/18	09/21	2590*	BETH AHEROS V ISRAEL CHESED FU	1,000.00	
08/16	09/26	2591	FRIENDS OF ALYN HOSPITAL	180.00	
07/25	09/07	2594*	A SHALOM	150.00	
NET TOTAL				14,410.00	

* Indicates gap in check sequence

To report Lost or Stolen Visa Cards or Checks, please call (800) CMA-LOST.

YOUR WCMA MONEY ACCOUNT TRANSACTIONS

Date	Description	Withdrawals	Deposits	Date	Description	Withdrawals	Deposits
09/07	ML BANK DEPOSIT PROGRAM			09/26	ML BANK DEPOSIT PROGRAM	1,360.00	
09/16	ML BANK DEPOSIT PROGRAM	10,000.00		09/28	ML BANK DEPOSIT PROGRAM	1,800.00	
09/21	ML BANK DEPOSIT PROGRAM	1,000.00		09/29	ML BANK DEPOSIT PROGRAM	100.00	
NET TOTAL						14,410.00	

JW FOUNDATION

Account Number: 5AV-02266

24-Hour Assistance: (866) 4MLBUSINESS
Access Code: 51-528-02266

YOUR WCMA TRANSACTIONS

October 01, 2016 - October 31, 2016

CHECKS WRITTEN/BILL PAYMENT

Date Written	Date Cleared	Check Number	Description	Debit	Credit
09/18	10/14	2587	ASH KODESH	1,000.00	
NET TOTAL				1,000.00	

To report Lost or Stolen Visa Cards or Checks, please call (800) CMA-LOST.

YOUR WCMA MONEY ACCOUNT TRANSACTIONS

Date	Description	Withdrawals	Deposits	Date	Description	Withdrawals	Deposits
10/14	ML BANK DEPOSIT PROGRAM	1,000.00					
NET TOTAL		1,000.00					

+

JW FOUNDATION

Account Number: 5AV-02266

24-Hour Assistance: (866) 4MLBUSINESS
Access Code: 51-528-02266

YOUR WCMA TRANSACTIONS

November 01, 2016 - November 30, 2016

CHECKS WRITTEN/BILL PAYMENT				Debit	Credit
Date Written	Date Cleared	Check Number	Description		
10/26	11/01	2504	FRIENDS OF TOMER DEVORAH	5,000.00	
10/30	11/02	2506*	DORCHE MENACHIM	360.00	
11/09	11/17	2526*	YOUNG ISRAEL OF WOODMERE	100.00	
NET TOTAL				5,460.00	

* Indicates gap in check sequence

To report Lost or Stolen Visa Cards or Checks, please call (800) CMA-LOST.

YOUR WCMA MONEY ACCOUNT TRANSACTIONS

Date	Description	Withdrawals	Deposits	Date	Description	Withdrawals	Deposits
11/01	ML BANK DEPOSIT PROGRAM	5,000.00		11/17	ML BANK DEPOSIT PROGRAM	100.00	
11/02	ML BANK DEPOSIT PROGRAM	360.00					
NET TOTAL						5,460.00	

+

008

3919

6 of 8