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EXTENDED TO NOVEMBER 15, 2017 Return of Private Foundation

Form **990-PF**Department of the Treasury

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.

OMB No 1545-0052

2016

Open to Public Inspection

For calendar year 2016 or tax year beginning and ending A Employer identification number Name of foundation 20-1601999 PETRUCCI FAMILY FOUNDATION, INC Number and street (or P O box number if mail is not delivered to street address) Room/suite B Telephone number 171 ROUTE 173 201 908-730-6909 City or town, state or province, country, and ZIP or foreign postal code C If exemption application is pending, check here 08802 ASBURY, NJ Initial return D 1. Foreign organizations, check here G Check all that apply: Initial return of a former public charity Final return Amended return 2. Foreign organizations meeting the 85% test, check here and attach computation Address change Name change H Check type of organization: Section 501(c)(3) exempt private foundation E If private foundation status was terminated Section 4947(a)(1) nonexempt charitable trust _____ Other taxable private foundation under section 507(b)(1)(A), check here I Fair market value of all assets at end of year | J | Accounting method: X Accrual If the foundation is in a 60-month termination (from Part II, col. (c), line 16) Other (specify) under section 507(b)(1)(B), check here 13,004,014. (Part I, column (d) must be on cash basis.) ▶\$ Part I | Analysis of Revenue and Expenses (d) Disbursements (c) Adjusted net (a) Revenue and (b) Net investment (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a)) charitable purposes (cash basis only) expenses per books income income N/A 3,890,472 Contributions, gifts, grants, etc., received 2 Check if the foundation is not required to attach Sch. B. Interest on savings and temporary cash investments 5,656 5,656 STATEMENT 69,129. 69,129 STATEMENT 4 Dividends and interest from securities 5a Gross rents b Net rental income or (loss) 297,859 6a Net gain or (loss) from sale of assets not on line 10 b Gross sales price for all assets on line 6a 2,543,636. CEIVED 297,859 7 Capital gain net income (from Part IV, line 2) 8 Net short-term capital gain Income modifications 10a Gross sales less returns and allowances OCIDEM. UT b Less Cost of goods sold c Gross profit or (loss) -5,885 -44.513STATEMENT 3 11 Other income 328,131 4,257,231 12 Total, Add lines 1 through 11 0. 13 Compensation of officers, directors, trustees, etc. 14 Other employee salaries and wages ₩ 15 Pension plans, employee benefits SEP Spenses 16a Legal fees **b** Accounting fees STMT 4 55. 0. 0. c Other professional fees \bigcirc ů 17 Interest 5,402 0. STMT 5 0. 18 Taxes 1,378 0. Depreciation and depletion 19 20 Оссиралсу 0. 0. 668 21 Travel, conferences, and meetings 22 Printing and publications 49,720 0 0. STMT 6 23 Other expenses 24 Total operating and administrative 57,223 0 0. expenses. Add lines 13 through 23 343,073. 343,073 25 Contributions, gifts, grants paid 26 Total expenses and disbursements. 400,296 0 343,073. Add lines 24 and 25 27 Subtract line 26 from line 12: 3,856,935 a Excess of revenue over expenses and disbursements 328,131 b Net investment income (if negative, enter -0-) N/A c Adjusted net income (if negative, enter -0-)

Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30

13,003,477. Form **990-PF** (2016)

3 Average distribution ratio for the 5-year base period - divide the total on line 2 by 5, or by the number of years 4 Enter the net value of noncharitable-use assets for 2016 from Part X, line 5 5 Multiply line 4 by line 3 Enter 1% of net investment income (1% of Part I, line 27b)

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.

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3,281.

350,219.

343,073.

7 Add lines 5 and 6

	n 990-PF (2016) PETRUCCI FAMILY FOUNDATION, INC 20-1601 art VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see			Page 4 1 5)
	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1. Date of ruling or determination letter: (attach copy of letter if necessary-see instructions) Domestic foundations that meet the section 4940(e) requirements in Part V, check here and enter 1%		6,5	63.
	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).			Λ
	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) Add lines 1 and 2 3		6,5	63
			0,5	03.
	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) Tax based on investment income Subtract line 4 from line 3. If zero or less, enter -0-		6,5	63
	Credits/Payments:		0,5	05.
	2016 estimated tax payments and 2015 overpayment credited to 2016 6a 11,394.			
	Exempt foreign organizations - tax withheld at source			
	E Tax paid with application for extension of time to file (Form 8868)			
	I Backup withholding erroneously withheld 6d			
	Total credits and payments. Add lines 6a through 6d	1	1.3	94.
	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached 8			
	Tax due If the total of lines 5 and 8 is more than line 7, enter amount owed			
	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid		4.8	31.
	Enter the amount of line 10 to be: Credited to 2017 estimated tax 4,831. Refunded			0.
	art VII-A Statements Regarding Activities			
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in		Yes	No
	any political campaign?	1a		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definition)?	1b		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or			
	distributed by the foundation in connection with the activities			
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.			
е	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
4 a	a Did the foundation have unrelated business gross income of \$1,000 or more during the year?	_4a		<u>X</u>
b	olf "Yes," has it filed a tax return on Form 990-T for this year?	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		<u>X</u>
	If "Yes," attach the statement required by General Instruction T.			
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:			
	By language in the governing instrument, or			
	By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law			
_	remain in the governing instrument?	6		<u>X</u>
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	
	Enter the states to which the foundation reports or with which it is registered (see instructions) ▶		1	
b	o If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)			
	of each state as required by General Instruction G? If "No," attach explanation	8b	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			
	year 2016 or the taxable year beginning in 2016 (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	10	<u></u>	<u> </u>
	Fo	rm 99 0)-PF	(2016)

Pa	rt 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			
	section 512(b)(13)? If "Yes," attach schedule (see instructions)	11	ļ	<u>X</u>
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	X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	
	Website address WWW.PETRUCCIFAMILYFOUNDATION.COM	B 20 (
14	The books are in care of ► JEANNE PETRUCCI Telephone no. ► 908			
4-		<u>08802</u>		$\overline{}$
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	ـــا
16	and enter the amount of tax-exempt interest received or accrued during the year At any time during calendar year 2016, did the foundation have an interest in or a signature or other authority over a bank,		Yes	No
10	securities, or other financial account in a foreign country?	16	1.00	X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the	10	J	
	foreign country			
Pa	nrt VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1a	During the year did the foundation (either directly or indirectly):			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	No		
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disgualified person? Yes	.		
			ļ	
	(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? Yes X			
	(4) Fay compensation to, or pay or remiburse the expenses of, a disqualified person? (5) Transfer any income or assets to a disqualified person (or make any of either available	10		
	for the benefit or use of a disqualified person)?	No		
	(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.)	No		ļ !
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)?	A 1b	ļ	
	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 2016?	1c	 	X
Z	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)): At the end of tax year 2016, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning		1	
٠	before 2016? Yes X	No		
	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		1	
	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.)	A 2b	ļ	
C	of the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			
	<u> </u>	ļ		
38	1 Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			Ĭ
	during the year? Yes X If "Yes I did it have exceed business heldings in 2016 as a result of (1) any purchase by the foundation or disqualified persons after	NO		
	olf "Yes," did it have excess business holdings in 2016 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 2016) N/	А зь		
48	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	1	Х
	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that		T	
	had not been removed from jeopardy before the first day of the tax year beginning in 2016?	4b		X
		Earm QQ	Λ DE	(2016)

orm 990-PF (2016) PETRUCCI FAMILY FOUNDAT			<u> 20-16019</u>	99 Page 6
Part VII-B Statements Regarding Activities for Which	Form 4720 May Be F	Required (contin	ued)	
5a During the year did the foundation pay or incur any amount to:				
(1) Carry on propaganda, or otherwise attempt to influence legislation (secti	on 4945(e))?	Ye	es X No	1 1
(2) Influence the outcome of any specific public election (see section 4955);	or to carry on, directly or indire	ectly,		
any voter registration drive?	• • •		es X No	
(3) Provide a grant to an individual for travel, study, or other similar purpose	es?		es X No	[[
(4) Provide a grant to an organization other than a charitable, etc., organizati		<u> </u>		
4945(d)(4)(A)? (see instructions)	1011 00011000 111 00011011		es X No	
(5) Provide for any purpose other than religious, charitable, scientific, literary	v or aducational nurneces or f		3 (22.) 100	
•	y, or educational purposes, or r		es X No	
the prevention of cruelty to children or animals?			es LALINO	
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify u		n Regulations	27./2	
section 53.4945 or in a current notice regarding disaster assistance (see inst	•		N/A	5b
Organizations relying on a current notice regarding disaster assistance check		•		
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption		. —		
expenditure responsibility for the grant?		[/A	es No	1 1
If "Yes," attach the statement required by Regulations section 53 49	45-5(d)			ļ
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	o pay premiums on			
a personal benefit contract?		Y	es 🗶 No	
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.				
7a At any time during the tax year, was the foundation a party to a prohibited tax	shelter transaction?	☐ Y	es X No	
b If "Yes," did the foundation receive any proceeds or have any net income attri		-		7b
Part VIII Information About Officers, Directors, Trus		nagers, Highl		
Paid Employees, and Contractors	,		•	
List all officers, directors, trustees, foundation managers and their	r compensation.			
	(b) Title, and average hours per week devoted	(c) Compensation	(d) Contributions to employee benefit plans and deferred	(e) Expense account, other
(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	and deferred compensation	account, other allowances
AMES G. PETRUCCI	TRUSTEE - P/T		Compensation	anovanoco
71 ROUTE 173, SUITE 201	IROSIEE F/I			
ASBURY, NJ 08802	5.00	о.	0.	0.
EANNE PETRUCCI	TRUSTEE - P/T		0.	<u> </u>
	TRUSTEE - P/T			
.71 ROUTE 173, SUITE 201				•
ASBURY, NJ 08802	5.00	0.	0.	0.
RUNO N. DORI	_TRUSTEE - P/T			
BARTLES CORNER ROAD			_	_
LEMINGTON, NJ 08822	1.00	0.	0.	0.
			<u> </u>	
Compensation of five highest-paid employees (other than those in		enter "NONE."	1 (-0.5	
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week	(c) Compensation	(d) Contributions to employee benefit plans and deferred	(e) Expense account, other
(a) name and address of outside simple year more main position	devoted to position	(C) compensation	compensation	allowances
NONE				
		-		
and the second the sec	7			
	 			
	-]	
otal number of other employees paid over \$50,000		L	<u> </u>	0
otal number of other employees paid over \$50,000				990-PF (2016)
			rorm	33U-LL (5016)

_	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:		
а	Average monthly fair market value of securities	1a	5,596,151.
b	Average of monthly cash balances	1b	627,825.
C	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	6,223,976.
е	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	6,223,976.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	93,360.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	6,130,616.
6	Minimum investment return Enter 5% of line 5	6	306,531.
Р	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations are foreign organizations check here and do not complete this part.)	id certain	
1	Minimum investment return from Part X, line 6	1	306,531.
2a	Tax on investment income for 2016 from Part VI, line 5		
Ь	Income tax for 2016. (This does not include the tax from Part VI.)		
C	Add lines 2a and 2b	2c	6,563.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	299,968.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	299,968.
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	299,968.
P	art 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	343,073.
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:		
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	343,073.
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	343,073.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation of 4940(e) reduction of tax in those years.	qualifies fo	r the section

Part XIII Undistributed Income (see instructions)

,	(a) Corpus	(b) Years prior to 2015	(c) 2015	(d) 2016
1 Distributable amount for 2016 from Part XI,				
line 7				299,968.
2 Undistributed income, if any, as of the end of 2018		ĺ		
a Enter amount for 2015 only			0.	
b Total for prior years:				
		0.		
3 Excess distributions carryover, if any, to 2016:				
a From 2011 77,927.				
b From 2012 64,366.				
c From 2013				
d From 2014				ļ
e From 2015 77,955.				
f Total of lines 3a through e	220,248.			
4 Qualifying distributions for 2016 from				
Part XII, line 4: ► \$ 343,073.				
a Applied to 2015, but not more than line 2a			0.	
b Applied to undistributed income of prior		_		
years (Election required - see instructions)		0.		ļ
c Treated as distributions out of corpus	_			
(Election required - see instructions)	0.			
d Applied to 2016 distributable amount				299,968.
e Remaining amount distributed out of corpus	43,105.			
Excess distributions carryover applied to 2016 (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	263,353.			
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		0.		
assessed d Subtract line 6c from line 6b. Taxable		<u> </u>		
amount - see instructions		0.		
e Undistributed income for 2015. Subtract line				
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2016. Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2017				0.
7 Amounts treated as distributions out of				<u> </u>
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 2011		. ,		
not applied on line 5 or line 7	77,927.			
9 Excess distributions carryover to 2017				
Subtract lines 7 and 8 from line 6a	185,426.			
10 Analysis of line 9:				
a Excess from 2012 64,366.				
b Excess from 2013	İ			
c Excess from 2014				
d Excess from 2015 77,955.				
e Excess from 2016 43, 105.			<u> </u>	

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	CI FAMILY FO			20-16	01999 Page 10
Part XIV Private Operating I			-A, question 9)	N/A	
1 a If the foundation has received a ruling					
foundation, and the ruling is effective f	or 2016, enter the date of t	the ruling	▶ ∟_		
b Check box to indicate whether the four	ndation is a private operation	ng foundation described i	n section	4942(<u>J)(</u> 3) or 49	42(j)(5)
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years		
income from Part I or the minimum	(a) 2016	(b) 2015	(c) 2014	(d) 2013	(e) Total
investment return from Part X for]		· —
each year listed					
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		-			··· <u>··</u>
• •					
for active conduct of exempt activities.					
Subtract line 2d from line 2c 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 Inf	ormation (Comple	te this part only	if the foundation	n had \$5,000 or me	ore in assets
at any time during					
					
1 Information Regarding Foundation	-	4ban 00/ -f4ba 4-4-1		L	
a List any managers of the foundation w year (but only if they have contributed			ributions received by t	ne toundation before the clos	se of any tax
•	ποιο επαιτ φοισσοή: (σου σ	(u)(z).j			
NONE					
b List any managers of the foundation w other entity) of which the foundation h			(or an equally large poi	rtion of the ownership of a p	artnership or
NONE					
2 Information Regarding Contribution Check here ► X if the foundation				s not accept unsolicited requ	ests for funds. If
the foundation makes gifts, grants, etc	c. (see instructions) to indiv	viduals or organizations ι	ınder other conditions,	complete items 2a, b, c, and	l d.
a The name, address, and telephone nur	mber or e-mail address of	the person to whom appl	ications should be add	ressed:	
					
b The form in which applications should	be submitted and informa	tion and materials they s	hould include:		
c Any submission deadlines:					
d Any restrictions or limitations on awar	ds, such as by geographic	al areas, charitable fields,	kinds of institutions, o	or other factors:	

Supplementary Information (continued) Part XV 3 Grants and Contributions Paid During the Year or Approved for Future Payment 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 a Paid during the year NONE CONTRIBUTION BAKER INDUSTRIES ÞC 184 PENNSYLVANIA AVENUE 5,000. MALVERN PA 19355 NONE ₽C CONTRIBUTION CARE NET 44180 RIVERSIDE PARKWAY 5,000. LANDSDOWNE, PA 20176 NONE РC CONTRIBUTION CONTRIBUTIONS UNDER \$1,000 5,042. NONE РC CONTRIBUTION DELBARTON SCHOOL 2300 MENDHAM ROAD 51,000. MORRISTOWN, NJ 07960 CONTRIBUTION NONE ÞС ISLES INC. 10 WOOD STREET 5,000. TRENTON NJ 08618 SEE CONTINUATION SHEET(S) ▶ 3a Total 343 073 b Approved for future payment NONE **▶** 3b Total Form **990-PF** (2016) Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated.	Unrelated	business income	Excluded by	y section 512, 513, or 514	(e)
•	(a) Business code	(b) Amount	(C) Exclu- sion code	(d) Amount	Related or exempt function income
1 Program service revenue:	code		1 2000		
b				- 1	- Pad- a sub-
c	1 1				
d					
e					
f					
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash					
investments			14	5,656. 69,129.	
4 Dividends and interest from securities			14	69,129.	
5 Net rental income or (loss) from real estate:					
a Debt-financed property					
b Not debt-financed property					
6 Net rental income or (loss) from personal					
property			14	-44,513.	
7 Other investment income 8 Gain or (loss) from sales of assets other			14	-44,515.	
than inventory					297.859
9 Net income or (loss) from special events				-	297,859 38,628
Gross profit or (loss) from sales of inventory					30,020
1 Other revenue:					
a					
b					
C	1 1				
d	1 1	-			
e					<u></u>
2 Subtotal. Add columns (b), (d), and (e)		().	30,272.	336,487
3 Total. Add line 12, columns (b), (d), and (e)				13	366,759
See worksheet in line 13 instructions to verify calculation	s.)				
Part XVI-B Relationship of Activitie	es to the Accor	mplishment of	Exempt P	urposes	
					. Laborate d
Line No. Explain below how each activity for which the foundation's exempt purposes (otherst				importantly to the accomp	DIISTIMENT OF
3-9 FUNDS RECEIVED FROM				ש מוכבים שמ	שעי שומגואי
FOUNDATION TO CONTINU					MADUE INE
FOUNDATION TO CONTINU	JE INEIK C	THATITADE	BFFORI	D•	
	-				
			_		
					
1					

623621 11-23-16

Part 2	XVII Information Regarding Transfe			nd Relationsh	ine With Nonchar			ye 13
ran	Exempt Organizations	ars 10 al	iiu iransactions a	nu neiationsn	iips witti Nonchar	ILADIE	7	
1 Did	the organization directly or indirectly engage in any of th	ne following	with any other organizatio	n described in section	n 501(c) of		Yes	No
	Code (other than section 501(c)(3) organizations) or in s				• •			
a Tra	nsfers from the reporting foundation to a noncharitable e	exempt orga	anization of:					ı
(1)	Cash					1a(1)		X
(2)	Other assets					1a(2)		X
b Oth	er transactions:							
(1)	Sales of assets to a noncharitable exempt organization					1b(1)		_X_
(2)	Purchases of assets from a noncharitable exempt organ	nızatıon				1b(2)		_X_
(3)	Rental of facilities, equipment, or other assets					1b(3)		_X_
(4)	(4) Reimbursement arrangements							
(5)	(5) Loans or loan guarantees							
(6)	Performance of services or membership or fundraising	solicitation	IS			1b(6)		<u>X</u>
c Sha	aring of facilities, equipment, mailing lists, other assets, o	or paid emp	loyees			1c		X
d If t	he answer to any of the above is "Yes," complete the follow	wing sched	lule. Column (b) should alv	vays show the fair m	arket value of the goods, o	ther ass	ets,	
or:	services given by the reporting foundation. If the foundati	tion receive	d less than fair market valu	e in any transaction	or sharing arrangement, sl	now in		
col	umn (d) the value of the goods, other assets, or services							
(a) Line n	o (b) Amount involved (c) Name of non		exempt organization	(d) Description	of transfers, transactions, and s	haring am	rangeme	nts
		N/A						
		_						
				+				
		.						
· · · -				+				
								
				<u> </u>				
0 1-1	the few debter describes a realist and the efficiency of the second seco			-ations described				
	the foundation directly or indirectly affiliated with, or relati			zations described	Г	Yes	Ī] No
	section 501(c) of the Code (other than section 501(c)(3))) or in secu	UII 32 <i>1 F</i>		L	162	لم	טויו ב
D 11	Yes," complete the following schedule. (a) Name of organization		(b) Type of organization	1	c) Description of relationsh	ND		
	N/A		(b) Typo of organization		of Booking to the automotion	··· <u>·</u>		
	N/A						-	
	Under penalties of perjury, I declare that I have examined this retain					the IRS	diecilee	this
Sign	and belief, it is true, correct and complete. Declaration of prepare	rer (other than		nation of which preparer	nas any knowledge retu	rn with the	e prepar	rer
Here			X <14(17	OFFICE		Yes		No
	Signature of officer or trustee		Date	Title				
	Print/Type preparer's name Pr	reparer's si	gnature	Date /	Check If PTIN			
) /		/. // -		self- employed			
Paid	MICHAEL A PETRECCA		4-00	8/22/17	P0(0606	274	
Prep	Transcript of the state of the	Y, LL	é/	·	Firm's EIN ► 22-17	7323	49	
Use								
	Firm's address ► 5 BARTLES CORNER ROAD							

623622 11-23-16

FLEMINGTON, NJ 08822

Phone no. 908-782-7300

PETRUCCI FAMILY FOUNDATION, INC
Part IV | Capital Gains and Losses for Tax on Investment Income

	describe the kind(s) of property solo ck warehouse; or common stock, 20	(b) How acquired	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)	
	·		D - Donation	-	
1a MERRILL LYNCH (12/20/16
b MERRILL LYNCH (09/06/16
c JP MORGAN 70154	<u> </u>				12/31/16
d JP MORGAN 70154	<u> </u>				12/31/16
e JP MORGAN 70153	3		P		12/31/16
f JP MORGAN 70153			P		12/31/16
g JP MORGAN 70153			D		05/16/16
h JP MORGAN 70154					12/15/16
MERRILL LYNCH (09/06/16
MERKIDD DINCH (13323				03/00/10
					
<u>k</u>					
<u>m</u>					
<u>n</u>					
0					
(a) Grand color area	(f) Depreciation allowed	(g) Cost or other basis	(h)	Gain or (loss)	
(e) Gross sales price	(or allowable)	plus expense of sale		olus (f) minus (g)	
a 528,347.		528,747.	<u> </u>		-400.
b 115,300.		107,043.			8,257.
			···		
c 565,227.		586,141.			$\frac{-20,914}{41,936}$
d 417,474.		458,710.			-41,236.
e 11,586.		11,585.			1.
f 435,038.		298,399.			<u>136,639.</u>
g 399,674.		191,163.			208,511.
h12,090.		6,542.			5,548.
58,900.		57,447.			1,453.
1					
k					
1					
					
<u>m</u>					
n					
Complete only for anotto about	a sous in column (h) and suited but	he foundation on 10/01/60			
Complete only for assets snowing	g gain in column (h) and owned by t			sses (from col. (h))	
(i) F.M.V. as of 12/31/69	(j) Adjusted basis	(k) Excess of col. (I)		of col. (h) gaın ove ot less than "-0-")	r coi. (K),
(1)1:10:12:05	as of 12/31/69	over col. (j), if any			
a					<u>-400.</u>
b					8,257.
c					-20,914.
d					-41,236.
e					1.
f					136,639.
					208,511.
9					
<u>h</u>					5,548.
					1,453.
					
<u>k</u>		7.5			
1					
m					
n					
0					
2 Capital gain net income or (net cap	oital loss) { If gain, also enter If (loss), enter If (loss), enter If (loss)	in Part I, line 7	2		297,859.
		`			<u> </u>
3 Net short-term capital gain or (loss		d (6):			
If gain, also enter in Part I, line 8, of If (loss), enter "-0-" in Part I, line 8		r I	,	N/A	
(1000), cittor of itt art i, line o			0	14 / tz	

Part XV **Supplementary Information** Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient 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 NORWESCAP CENTER NONE CONTRIBUTION ÞС 350 MARSHALL STREET 7.500. PHILLIPSBURG NJ 08865 PEAK SCHOOL NONE ₽C CONTRIBUTION 40w MAIN ST FRISCO, CO 80443 12,500. PRINCETON UNIVERSITY NONE ÞС CONTRIBUTION PRINCETON 40,000. PRINCETON NJ 08544 SECOND HARVEST FOOD BANK NONE PC CONTRIBUTION 6969 SILVER CREST RD NAZARETH PA 18064 10,000. SOMERSET PATRIOTS CHILDRENS ED FUND NONE ÞС CONTRIBUTION 860 EAST MAIN STREET BRIDGEWATER, NJ 08807 3,000. ST MARY'S ABBEY NONE CONTRIBUTION ÞС 230 MENDHAM ROAD MORRISTOWN, NJ 07960 10,000. VILLA WALSH ACADEMY NONE PC CONTRIBUTION 455 WESTERN AVE. 2,500. MORRISTOWN, NJ 07960 BONNIE BRAE NONE PC CONTRIBUTION 3415 VALLEY ROAD BASKING RIDGE NJ 07920 2,500. MUSIC MAKER RELIEF FOUNDATION NONE ₽C CONTRIBUTION 224 WEST CORBIN ST HILLSBOROUGH, NC 27278 2,500. ACTORS FUND OF AMERICA NONE CONTRIBUTION PC 175 W HUDSON AVE ENGLEWOOD NJ 07631 1,000. Total from continuation sheets 272 031.

Supplementary Information 3 Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient 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 ALZHEIMERS ASSOCIATION NONE PC CONTRIBUTION PO BOX 96011 WASHINGTON, DC 20090 2,500. NEW BETHANY MINISTRIES NONE PC CONTRIBUTION 339 W 4TH STREET BETHLEHEM PA 18015 1,000. SWARTHMORE COLLEGE NONE ЪC CONTRIBUTION 500 COLLEGE AVE SWARTHMORE, PA 19081 35,000. MORAVIAN COLLEGE NONE ÞС CONTRIBUTION 1200 MAIN STREET BETHLEHEM, PA 18018 27,500. CANCER SUPPORT COMMUNITY OF SOMERSET NONE PC CONTRIBUTION 3 CROSSROADS DRIVE BEDMINSTER, NJ 07921 50,000. ST PAULS INSIDE THE WALLS NONE ÞС CONTRIBUTION 205 MADISON AVE MADISON, NJ 07940 2,500. PLAINFIELD NOW NONE ÞС CONTRIBUTION 1212 GRANT AVENUE PLAINFIELD, NJ 07060 5,000. HAMPTON UNIVERSITY MUSEUM NONE ÞC CONTRIBUTION 100 E. QUEEN STREET HAMPTON, VA 23669 24 650. GETTYSBURG COLLEGE NONE PC CONTRIBUTION 300 N WASHINGTON ST 1,881. GETTYSBURG, PA 17325 JUVENILE DIABETES RESEARCH FOUNDATION NONE ÞС CONTRIBUTION 26 BROADWAY NEW YORK, NY 10004 5,000. Total from continuation sheets

Part XV Supplementary Information)			
3 Grants and Contributions Paid During the Y	ear (Continuation)			
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient	Contribution	
BRIGHT HOPE 1034 HAMILTON STREET	NONE	PC	CONTRIBUTION	
ALLENTOWN, PA 18101				2,500,
K9S FOR WARRIORS 114 CAMP K9 ROAD PONTE VEDRA BEACH, FL 32081	NONE	PC	CONTRIBUTION	15,000,
NATIONAL KIDNEY FOUNDATION 30 EAST 33RD STREET NEW YORK, NY 10016	NONE	PC	CONTRIBUTION	1,000,
ANGEL 34 FOUNDATION 750 BUSHKILL CENTER ROAD NAZARETH, PA 18064	NONE	PC	CONTRIBUTION	1,000.
YOUNG MEN STRIVING FOR GREATNESS 1082 SPRINGFIELD AVE SUITE 204 IRVINGTON, NJ 07111-2438	NONE	РC	CONTRIBUTION	5,000.
URBAN ASSEMBLY 90 BROAD STREET #2101 NEW YORK, NY 10004	NONE	PC	CONTRIBUTION	1,000.
Total from continuation sheets				

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

Department of the Treasury Internal Revenue Service

Name of the organization

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

PETRUCCI FAMILY FOUNDATION. TNC Employer identification number

	PETRUCCI FAMILY FOUNDATION, INC	20-1601999
Organization type (che	ck 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	on
	527 political organization	
Form 990-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	
	non is covered by the General Rule or a Special Rule. 01(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule.	pecial Rule See instructions
General Rule		
	ration filing Form 990, 990·EZ, or 990·PF that received, during the year, contribution any one contributor. Complete Parts I and II. See instructions for determining a co	-
Special Rules		
sections 509(a any one contri	nation described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line ibutor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the D-EZ, line 1 Complete Parts I and II	e 13, 16a, or 16b, and that received from
year, total con	ration described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that receivitributions of more than \$1,000 exclusively for religious, charitable, scientific, literary of cruelty to children or animals. Complete Parts I, II, and III	
year, contribut is checked, en purpose Don'	ration described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that receive tions exclusively for religious, charitable, etc., purposes, but no such contributions that here the total contributions that were received during the year for an exclusively of the complete any of the parts unless the General Rule applies to this organization be stable, etc., contributions totaling \$5,000 or more during the year	totaled more than \$1,000 If this box y religious, charitable, etc ,
but it must answer "No	on that isn't covered by the General Rule and/or the Special Rules doesn't file Sche " on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ o leet 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) (2016)

623451 10-18-16

Name of organization

Employer identification number

<u>PETRU</u>	CCI FAMILY FOUNDATION, INC		<u>0-1601999 </u>
Part I	Contributors (See instructions) Use duplicate copies of Part I	I if additional space is needed	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	JAMES G. PETRUCCI 171 ROUTE 173, SUITE 201 ASBURY, NJ 08802	\$ 3,890,472.	Person Payroll Noncash X (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)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payrolt 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

Employer identification number

PETRUCCI FAMILY FOUNDATION, INC

20-1601999

	CCI FAMILY FOUNDATION, INC		-1601999
Part II	Noncash Property (See instructions) Use duplicate copies of Pa	rt 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
_1	50,0000 SHS PROVIDENT FINANCIAL SERVICES STOCK		
		\$ 1,346,500.	12/02/16
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
1	90,372 SHS PROVIDENT FINANCIAL SERVICES STOCK		
ĺ		\$ 2,543,972.	12/16/16
(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

Name of or	ganization		Employer identification number
PETRU	CCI FAMILY FOUNDATION,	INC	20-1601999
Part III	Exclusively religious, charitable, etc., con the year from any one contributor. Complete completing Part III, enter the total of exclusively religion	ntributions to organizations describe columns (a) through (e) and the fo	ed in section 501(c)(7), (8), or (10) that total more than \$1,000 for llowing line entry. For organizations
	Use duplicate copies of Part III if addition	nal space is needed	or less for the year (tiller lins linu onite)
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
1	CHARITABLE	CHARITABLE	
		(e) Transfer of	nitt
	Transferee's name, address,		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
	1		

20-1601999

FORM 990-PF, INTERES	ST ON SAVING	GS AND	TEMPOR	ARY (CASH	IN	VESTMENTS	S ¹	PATEMENT	1
SOURCE			(A) REVENUE ER BOOK		NET	IN	(B) VESTMENT COME	ľ	(C) ADJUSTED NET INCOME	3
FROM K-1S JP MORGAN 70153 JP MORGAN 70154 MERRILL LYNCH MERRILL LYNCH 03529 PROVIDENT BANK			3 2,8	22. 40.			1,932. 22. 340. 2,856. 17. 489.			
TOTAL TO PART I, LI	NE 3		5,6	56.			5,656.			
FORM 990-PF	DIVIDENDS	AND I	NTEREST	FROI	M SEC	UR	ITIES	S'	TATEMENT	2
SOURCE	GROSS AMOUNT	GA	ITAL INS DENDS	RE	(A) VENUE BOOK		(B) NET INVES MENT INCO		(C) ADJUSTI NET INCO	
FROM K-1S JP MORGAN 70153 JP MORGAN 70154 MORGAN STANLEY	1,688. 44,997. 18,741.		0.		1,68 44,99 18,74	7.	1,68 44,99 18,74	7.		
03529	3,703.		0.		3,70	3.	3,70	3.		
TO PART I, LINE 4	69,129.		0.		69,12	29.	69,12	9.		
FORM 990-PF		ОТН	ER INCO	ME		 -		Si	PATEMENT	3
DESCRIPTION			RE	(A) VENUI BOOI	E KS		(B) ET INVEST- ENT INCOME		(C) ADJUSTEI NET INCOM	
K-1 OTHER INCOME OTHER INVESTMENT LOG GROSS INCOME FROM ST FUNDRAISING EVENTS					250. ,763.	•			- 4	

TOTAL TO FORM 990-PF, PART I, LINE 11 -5,885. -44,513.

FORM 990-PF	OTHER PROFES	SIONAL FEES	S	TATEMENT 4
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
CONSULTING	55.	0.		0.
TO FORM 990-PF, PG 1, LN 16C	55.	0.		0.
FORM 990-PF	TAX	ES	S	ratement 5
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME		(D) CHARITABLE PURPOSES
FOREIGN TAXES MISC TAXES	5,282. 120.			0.
TO FORM 990-PF, PG 1, LN 18	5,402.	0.		0.
FORM 990-PF	OTHER E	XPENSES	S'	ratement 6
DESCRIPTION ADMINISTRATIVE FEES EVENTS/ SPONSORSHIP INSURANCE LICENSE AND FEES MISCELLANEOUS EXPENSE TRAVEL OFFICE EXPENSE	(A) EXPENSES PER BOOKS 14,765. 26,231. 2,382. 3,198. 25. 2,915. 204.	0. 0. 0. 0.	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES 0. 0. 0. 0. 0. 0. 0.
TO FORM 990-PF, PG 1, LN 23	49,720.	0.		0.

FORM 990-PF	RPORATE STOCK		STATEMENT 7
DESCRIPTION		BOOK VALUE	FAIR MARKET VALUE
CORPORATE STOCK	-	10,995,118.	10,995,118.
TOTAL TO FORM 990-PF, PART II, LIN	E 10B	10,995,118.	10,995,118.
FORM 990-PF OTH	ER INVESTMENTS		STATEMENT 8
DESCRIPTION	VALUATION METHOD	BOOK VALUE	FAIR MARKET VALUE
LIMITED PARTNERSHIPS ARTWORK COLLECTION	FMV COST	12,500. 1,512,492.	12,500. 1,512,492.
TOTAL TO FORM 990-PF, PART II, LIN	E 13	1,524,992.	1,524,992
FORM 990-PF DEPRECIATION OF ASSE	TS NOT HELD FOR	INVESTMENT	STATEMENT 9
DESCRIPTION	COST OR OTHER BASIS	ACCUMULATED DEPRECIATION	BOOK VALUE
WEBSITE DEVELOPMENT	18,615.	17,925.	690.
TOTAL TO FM 990-PF, PART II, LN 14	18,615.	17,925.	690.

2016 DEPRECIATION AND AMORTIZATION REPORT

FORM	M 990	FORM 990-PF PAGE 1					ŀ	6	990-PF							
Asset	o set	Description	Date Acquired	Method	Lıfe	005>	No Cc	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
	;≰	WEBSITE DEVELOPMENT	07/31/14 200DB	200DB	3.00	HY1	17	18,615.			9,308.	9,307.	7,239.		1,378.	8,617.
<u> </u>		* TOTAL 990-PF PG 1 DEPR						18,615.			9,308.	9,307.	7,239.		1,378.	8,617.
62811	628111 04-01-18	.01-16					0	(D) - Asset disposed	peso		*	ITC, Salvage,	Bonus, Comn	nercial Revita	* ITC, Salvage, Bonus, Commercial Revitalization Deduction, GO Zone	tion, GO Zone